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"I'm Getting Violated ... for My Health": Experiences of Pelvic Exams among Women With Low Incomes

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Abstract

The pelvic exam (PE) has long been a core component of women's preventive healthcare. Although PEs are routine, some women experience exam-related pain and psychological distress, which are associated with intermittent use of healthcare. We conducted in-depth interviews with 12 cisgender women to explore their knowledge, perceptions, and experiences of PEs. Four themes were generated: (1) experiences of objectification, (2) a cycle of uncertainty, (3) negotiation of agency, and (4) potential for positive experiences. Future research is necessary to assess the direct impact of PE

experiences on reproductive health equity and to inform communication-focused interventions and patient-centered best-practice guidelines.

Q Keywords: Pelvic exam health disparities preventive care objectification

Notes

1 The American College of Physicians (Bloomfield et al., [2014](#)), the American Academy of Family Physicians ([2017](#)), the American College of Obstetricians and Gynecologists ([2015](#)), the U.S. Professional Services Taskforce (US Preventive Services Task Force, [2017](#)), and the Society of Gynecologic Oncology ([2016](#)) all have issued recent PE guidelines. Although they disagree about whether PEs should be offered to asymptomatic women, all agree that PEs should be optional instead of automatic.

Additional information

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