

Working Whilst Pregnant

PREGNANT?

- Have you missed a period?
- Are your breasts sore?
- Have you been nauseous and/or vomiting?
- Are you passing urine frequently?
- Are you tired?

Have a pregnancy test if your period is more than a week late. There are two types of tests – urine and blood. Doctors and sexual health services provide testing for both. The Women's Health Information Centre at the Women's Hospital (132 Grattan Street, Carlton) provides a free drop-in pregnancy testing service.

Home pregnancy tests (urine) can be obtained from a chemist or supermarket. The best time to do a home pregnancy test is first thing in the morning, after your period has been late for at least a week. If the test is positive, it is advisable that you consult with a health professional.

UNPLANNED PREGNANCY?

Take time to think about your options:

- continue with the pregnancy and become a sole or co-parent
- continue with the pregnancy and choose adoption
- have an abortion

Talk to someone you feel comfortable with and who will support you with whatever decisions you make (a partner, friend, professional counselor). Decide on what is best for you at this time.

For information and support call:

Pregnancy Advice Service (03) 9344 2259

Family Planning Victoria (03) 9257 0100 or

free call 1800 013 952

RhED (03) 9534 8166

If you would like more information about pregnancy and pregnancy care options call the **Women's Health Information Centre** on (03) 9344 2007 or visit the following websites:

www.dhs.sa.gov.au/pregnancy

<http://maternity.health.vic.gov.au>

Whatever you decide to do, it is important to take care of yourself.

If you decide to continue with the pregnancy, you might want to look at lifestyle changes around smoking, alcohol and recreational drugs. If you want more information talk with a counsellor, or the **Women's Alcohol and Drug Service** on (03) 9344 3631.

TIPS TO STAY HEALTHY

Get adequate sleep.

Eat healthily, including:

- lots of different healthy foods – not just the same foods everyday
- more bread, rice, pasta, oats and cereals (especially wholemeal and wholegrain)
- more fruits and vegetables
- less fat (chips, snack foods, fried foods and take-aways)
- less sugar (cakes, biscuits, soft drinks and lollies)
- less salt, by using less in cooking and at the table
- grab a piece of great-tasting fruit for a snack instead of a chocolate bar
- carry a small bottle of water with you so you can avoid buying soft drinks while you're out
- replace a couple of meat-based meals each week with a dish based on beans or lentils – have a look in a bookstore or library for some great vegetarian recipe ideas
- include fresh fish or canned fish (such a tuna or salmon) regularly in your diet
- cut up raw salad vegies such as carrots, celery and mushrooms – store them in a snap lock plastic bag for snacking on throughout the day
- choose low fat dairy products instead of the full cream type
- try snacking on air-popped popcorn instead of chips and other fatty snacks

Drink plenty of water ever day.

Folic Acid – take 0.5mg daily before pregnancy and for the first three months of pregnancy to prevent spina bifida.

Resourcing Health & EDucation in the Sex Industry

10 Inkerman Street, St Kilda VIC 3182

Phone (03) 9534 8166

Fax (03) 9525 4492

Visit www.sexworker.org.au



Tips for Working While You Are Pregnant*

Sexual Intercourse

- In the first few months reduce your shifts and try not to see any clients who tend to be rough.
- Sexual intercourse is relatively safe in a 'low-risk' pregnancy and can occur up until the eighth month (unless your doctor states otherwise).
- A 'low-risk' pregnancy includes: no history of stillbirth or miscarriage, no maternal diabetes or other serious illness, no possibility of multiple births, the mother is not over 35 years old.
- The missionary position - encourage clients to bear their weight on their elbows in the first few months and avoid this position in the last few months.

Oral Sex & Kissing

- Use condoms and dental dams to ensure safe sex.
- Do not allow clients to blow into or near your vagina. This can cause an air embolism which is fatal.
- Your immune system is vulnerable and therefore kissing leaves you open to flu and colds. Remember, some medications are harmful to pregnant women.

Sexually Transmitted Infections

- During pregnancy your body is more susceptible to infections, especially genital warts, so it is extremely important to practice safe sex all the time.
- Gonorrhoea and chlamydia infection during pregnancy have been linked to premature birth.
- If you have recurring sexually transmitted infections (STI's) such as herpes and warts, monitor your health closely. Most STI's don't harm the baby. However, if they are present at birth this could cause problems.
- Continue to have your sexual health checkups - being tested is perfectly safe and swabs will not harm the baby.

Hepatitis C

- There is a small chance that the Hepatitis C virus will be passed on to a baby during the pregnancy or at birth (about a 6% risk factor). The risk is increased if the mother has only just become infected (or re-infected) or if she has serious liver damage. Hepatitis C is thought to be transmitted through contact with the mother's blood at the time of birth.
- Women who are taking interferon should avoid becoming pregnant while receiving treatment as the effect of interferon on the foetus is unknown.

Your Clients

- You may lose some of your regular clientele and walk ins. Maybe not at first, but in the third trimester.
- Some clients find pregnant women a sexual turn on and you may establish a temporary client group. Ensure that your clients understand your conditions and behave accordingly, ie gently.
- You may feel more vulnerable and emotional during your pregnancy. Remember to be aware of security - don't take chances.

Also

- A client's body odour and breath may exacerbate morning sickness, as can certain lubes and condoms.
- As your pregnancy progresses you will need to buy clothes and underwear that will give you adequate support.
- Contact RhED or your doctor to talk over some of these issues.

**Adapted from Respect Issue 24.*

This information is of a general type and should not be taken as a substitute for professional medical advice.

If you have further questions regarding information provided here, contact RhED on (03) 9534 8166.

After Pregnancy*

When can I go back to work?

- Usually six weeks after giving birth, depending on whether or not you have had a Ceaserian or vaginal birth and any complications, eg an episiotomy. (An episiotomy is a surgical cut into the perinium [the skin between the vagina and the anus] to prevent traumatic tearing during delivery.)
- A Ceaserian scar will be tender and sex in the missionary position may be uncomfortable.
- We strongly recommend that you speak to a worker-friendly doctor or a clinician for advice.

Possible problems

- Feeding and late nights may make you too tired to work. Some women also suffer from postnatal depression. Seek professional help if you believe you are depressed. Make sure you go back to work when you are ready.
- Pain: an episiotomy and bruising in and around the vagina will cause pain for a number of weeks. If intercourse is painful six weeks after delivery then see your doctor. Instead of offering penetrative sex, suggest oral, spanish or massage to your clients.
- Breast-feeding: occasionally breastfeeding causes dryness of the vagina, so use lots of water-based lube. Your breasts may feel tender and heavy, and milk will be released when your breasts are stimulated. Some clients find breast milk arousing.
- Relationships: if you have a partner, make time to be alone and have privacy. You will both need time to adjust after childbirth. Supporting each other through this period is important. You may decide that working is not an option.

Contraception

- As soon as you start having sex again (business or pleasure), use a reliable method of contraception.
- The Pill will decrease your milk supply, so do not take it if breastfeeding.
- The Mini Pill (Progestogen only) can be started three to four weeks after childbirth. It doesn't interfere with milk supply.
- Depo Provera can be started five days after delivery if bottle-feeding and six weeks if breastfeeding.
- A diaphragm can be fitted six weeks after the birth, but you will need to be refitted if you used a diaphragm before pregnancy.
- Implanon can be inserted by a doctor at a check-up six weeks after delivery.
- Condoms: use them with lots of water-based lube.

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