



Women's Health Tasmania

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The pelvic floor

No matter what your gender is, no matter what your body looks like, every body has a pelvic floor. And your pelvic floor could be having a big impact on your life without you even knowing it.

Perhaps you know that you need to do pelvic floor exercises or you could end up running to the toilet all the time. But did you know about pelvic floors and hip pain? About pelvic floors and constipation? Painful sex?

We learned a lot writing this magazine and even more from the Women's and Pelvic Health Physiotherapist who kindly reviewed all our content for us.

The main thing we learned is that if your pelvic floor is causing problems, you can do something about it. (For example, read about the exciting new initiative from Family Planning Tasmania!)

Read this magazine and become like us – PELVIC FLOOR EVANGELISTS!

It's also got information about what's happening at Women's Health Tasmania. Read on . . .




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bring older
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**Women's
Health
Tasmania**

What are pelvic floor muscles, and why do we need them?

All humans have a pelvic floor, which is a muscular *bowl* /hammock at the base of your pelvis. The pelvic floor has three main attachments - the pubic bone at the front of the pelvis, the sit bones at the sides, and the tailbone at the back. They all attach at a bony point (the perineal body) like a trampoline. These muscles are unique in the body as normally muscles attach bone to bone, here they attach bone to this flexible plate.

The pelvic floor needs to be stable yet flexible so that you can have fun and pleasureable sex, and for vagina owners, to birth babies.

It is a strong yet flexible foundation supporting organs in your pelvis – your bladder (holding urine), rectum (holding feces), uterus and vagina or prostate. There are nerves and muscles in your pelvic floor that help control urination, bowel movements and sexual function.

Some of the muscles overlie the clitoris, and there are also hip muscles involved in the pelvic floor.

The pelvic floor needs to be able to contract to keep in urine and feces when you are not going to the toilet, and relax so you can go to the toilet when you want to. The muscles need to relax and open so the clitoris can engorge and deeper inside, the muscles relax, for pleasureable sex.



What are those workshops we keep advertising?

Have you seen us advertising Mentors in Violence Prevention workshops, and wondered what they were?

Mentors in Violence Prevention (MVP) is a program for community members. It gets us to think about the times we are bystanders, that is, times we have watched behaviour which we think is not right. Perhaps the behaviour has made us uncomfortable but we haven't necessarily known what to do. In the workshops we talk about times this has happened, we talk about scenarios and discuss how we would respond to them in a safe way.

'Bystander programs' to stop violence were developed when researchers realised that the more people witnessing an act of violence, the less likely they are to act to help the victim.

Why? Because without even realising we do it, in these situations we monitor each other and we wait to see how other people will react to guide how we should react. The researchers discovered that if one person makes a move to help, others follow. The program aims to help us all be that one person.

We are running this program with colleagues from the Hobart Women's Shelter, the Women's Legal Service and Engender Equality and we've run at least one workshop in nearly every Tasmanian local government area. We can do this because we've received a grant from the Tasmanian Community Fund. Our goal is to change the attitudes and assumptions that allow gender-based violence to happen.

Here is what we've learned from the workshops we've run so far.

Tasmanians are awesome! We had an 80-year-old nanna tell us how she asked a service provider to 'please explain' a homophobic joke, and then say 'but, that's not actually funny, is it?' We've heard stories about people finding and sharing information about family violence services when they are worried about a friend. We've heard stories of men challenging their friends about sexist attitudes and jokes.

But we've also learned that Tasmanians are worried about the level of family violence in their communities, and they want skills and information to deal with it.

There's so much more to do. Come on the journey with us. Come to one of the workshops. They are advertised in our enews, on facebook and on our website. But get in fast because they book out.



Can your pelvic floor muscles be too weak?

Hell yes! When your pelvic floor is too weak to do its job properly it is called hypotonic.

What are the signs that my pelvic floor muscles are too weak?

- Leaking urine: Do you leak some urine when you laugh, sneeze, jump or run?
- Peeing a lot: maybe you don't leak but you feel like you constantly have to pee?
- Leaking poo: not very common.
- Pelvic floor prolapse (See our article on pelvic floor prolapses)
- Painful sex: Do you have little sensation or pleasure from sex?
- 'Varting' ('yoga farting') or 'queefing'; farting from your vagina when you do yoga or stretch.
- Vaginal dryness: weak pelvic floor muscles combined with decreased levels of estrogen can cause dryness.
- Do you feel like the muscles of your pelvic floor can only do a couple of controlled pelvic floor exercises before they feel really tired?
- Do you feel like you can engage your pelvic floor, but if you had to release it slowly it would just flop?

How common is this?

Really common! Some people think that leaking urine after having children is normal, and that you just need to learn to live with it. But you don't have to. Leaking urine is often the sign of a weak pelvic floor, and with treatment you can fix it.

It's a common myth that everyone who has had a vaginal birth has a weak pelvic floor. This isn't true! A vaginal birth can contribute to a weak pelvic floor, but it's only one of many things that might contribute. Here are some others:

- Supporting the weight of the uterus during pregnancy
- The pressure of extra weight if you are very overweight
- Chronic constipation and straining to poo
- Constant coughing
- Some forms of surgery that require cutting the muscles
- Lower levels of oestrogen after menopause

What can I do about it?

Pelvic floor exercises! These exercises are commonly recommended to start working out the muscles.

With regular pelvic floor exercises, the muscles will become stronger and as they strengthen you will get improved control over your bladder and bowel, and there is less chance you will leak.

How do I learn pelvic floor exercises?

The Jean Hailes website has good free resources. It has a podcast of a pelvic floor physiotherapist talking you through simple exercises for your pelvic floor. It also has videos to help you understand how your pelvic muscles work. Go here to find these resources: <https://www.jeanhailes.org.au/health-a-z/bladder-bowel/pelvic-floor-strength>

It's important to do the exercises correctly so that the right muscles are activated. If you feel like you need help with this you can go and see a Pelvic Floor Physiotherapist. They can give you exercises, biofeedback (electronic monitoring) and treat the muscles manually. They can also give you great advice about health, fitness, and good bladder and bowel habits.

Read more about our Pelvic Floor Physiotherapists in our article on page 10.

Weak or tight? How fit do we want our pelvic floor muscles to be?

We're like Goldilocks with the Three Bears' porridge. We want them to be just right.

Muscles that are too loose or too tight are both weak. The words weak and strong refer to a muscle's ability to exert force. A tight muscle can be just as unable to exert force as a loose muscle. So a very tight pelvic floor is also weak.

You'll know if your muscles are too tight or too weak if you start to get any of the symptoms listed in our articles.



Can your pelvic floor muscles be TOO strong?!

Did you know if they are too strong or tight that can cause problems too?

Hypertonic (or overactive) pelvic floor is a condition that occurs in people of all genders and ages where the muscles in your lower pelvis are in a state of constant contraction and aren't able to fully relax.

When your pelvic floor muscles can't relax it means they can't coordinate the control of certain bodily functions. This can cause pain, problems with urination or bowel movements, and problems with sex.

What are the signs that my pelvic floor muscles are overactive?

A common symptom is pain. This may be general pain or pressure in your pelvic area, lower back or hips. Pain can also be specific to a location, like your bladder, or during certain activities such as bowel movements, inserting a tampon, having a pap smear or cervical exam.

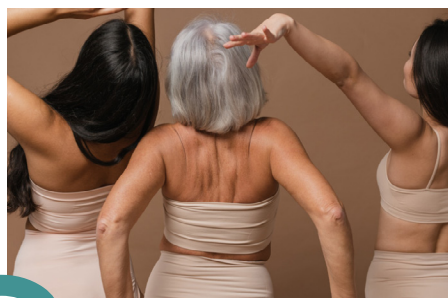
You may have pain while urinating, feel the urge to wee frequently, or feel like you're unable to fully empty your bladder. You might have pain during or after penetrative sex, or be unable to achieve orgasm. You might have constipation, or pain passing gas.

You might notice that you can't feel a pelvic floor contraction or release at all.

Symptoms of overactive or hypertonic pelvic floor usually develop slowly and get worse over time. It's important to talk to your healthcare provider even if your symptoms are mild as they usually don't get better on their own.

How common is this?

More common than we think. Research suggests it occurs as often as 1 in 4 women and 1 in 10 men – and it's probably under-reported.



Why are my pelvic floor muscles overactive? Too much coffee?!

It's not the coffee! But there can be many different contributing factors:

- **Infection or inflammation** – like chronic urinary tract infections or chronic thrush
- **Pelvic surgery** – such as post-hysterectomy pain. This can cause scar tissue or irritate pelvic structures including ligaments, nerves and muscles
- **Chronic pain from pelvic health and abdominal health conditions** – endometriosis, for example, can develop a tense pelvic floor due to the chronic pain and inflammation in the pelvis. Similarly, a history of irritable bowel syndrome with abdominal pain and cramping can result in pelvic floor muscle pain and cramping. Vaginismus, vulvodynia, and painful bladder syndrome can also contribute.
- **Hypermobility** – some people with excessive hip and pelvic mobility can compensate through pelvic floor tightness
- **Muscular dysfunction** – caused by prolonged sitting, abnormal posture, irregular gait when walking or uneven pelvic bones.
- **Bladder or bowel dysfunction** – if there is a frequent urgency to wee or chronic constipation, the pelvic floor muscles often have to work hard to hold the bladder or bowel motions in.
- **Injury or trauma** – due to surgery on your hip, knee or ankle where rehabilitation wasn't completed; due to pregnancy or childbirth trauma or scarring; caused by an accident that results in a fall or traumatic impact onto your buttocks; a tailbone injury in childhood; or sexual abuse or assault.
- **Chronic holding patterns** – some people may constantly grip through their abdominals, pelvic floor muscles and/or buttocks as learnt behaviours and postures. (Eg, children taught to hold in urine or feces, workers who have difficulty getting to toilets, people who do exercise or sports where you hold your core muscles tight for long periods.)
- **Stress, depression and anxiety** – tension can be stored in the pelvic floor in response to stress.

Wow, that's a lot. So, my pelvic floor muscles are overactive – what can I do about it?

Overactive pelvic floor muscles are treatable. There is no overnight result, but there are a variety of approaches that will make a significant difference over time. The primary treatment is physical therapy to retrain your muscles to fully relax. Your health provider can recommend a therapist with training in pelvic floors. A physiotherapist can help you address overactive pelvic floors through:

- Belly breathing and relaxation techniques
- Education and biofeedback (to teach you how to contract and relax your muscles correctly, eg using real-time ultrasound)
- Work on calming the sympathetic nervous system, eg. mindfulness, yoga
- Vaginal or rectal dilator (a wand designed with input by pelvic floor therapists, for therapeutic internal massage and trigger point release)
- Massage, muscle stretching and joint movement
- Strengthening gluteal (bottom) muscles

Other treatments and specialists that can help:

- Acupuncture
- Medications to manage symptoms such as pain, anxiety, constipation, or frequent urination.
- Stimulation of nearby nerves to manage urinary or bowel incontinence.
- Trigger point injections with corticosteroids or Botox® to ease pain.
- Gastroenterologist to treat constipation and evaluate your pelvic floor
- Colorectal specialist for pelvic floor disorders related to bowel movements.
- Gynecologist to treat reproductive health problems in people assigned female at birth
- Urologist or urogynecologist to help with urinary problems or sexual dysfunction
- Therapist to address psychological issues
- Sex therapist to treat sexual issues.

Can I prevent, or reduce the risk of developing, overactive pelvic floor muscles?

Understanding the contraction and relaxation of your pelvic muscles is key, and you can do this by tuning into your body and mind. Being aware of your body, noticing how you are feeling emotionally and physically, and seeking support if you notice something is not right will help you look after your pelvic floor. Practice mindfulness and relaxation techniques, and seek psychological support after trauma.

Avoid prolonged periods of holding on before going to the toilet. Notice if you are straining on the toilet and experiencing constipation, or if you are having pelvic or anal pain, and see your GP if that is happening for you.

So remember!

If you are getting recurrent Urinary Tract Infections or thrush – don't just keep taking antibiotics or creams. It could be your pelvic floor.

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Continence Foundation of Australia
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Pelvic Pain Foundation
www.pelvicpain.org.au



KNIT YOUR BITS *Exhibition*



The Knit Your Bits exhibition has been touring Tasmania, to an amazing response.

We launched the exhibition at Ross on International Women's Day and had 2650 people come through in the following two weeks. From there it travelled to Sheffield, then Cygnet, then Launceston. We have just packed it in large boxes and handed it to a freight company to take to Currie, where we'll join it for another community launch.

Here's a letter we got from a Launceston resident who got in touch to ask if she could get our enews

after she saw the exhibition. It shows how powerful word of mouth is once people becomes fans of Knitted Bits!

"I was so pleased I was able to see Women Bits, in Craft. My Husband and Myself viewed them, I told them at work and because I had seen them, they wanted to see them. I took back pamphlets and posters which are up and have been read by many."

After we get back from Currie we'll take the exhibition to Hobart for a launch at the Moonah Arts Centre, where it will be open to visitors from 5 – 27 August.



Join our Facebook Live Classes

Online classes with Women's Health Tasmania

<https://www.facebook.com/groups/3045877678969259/>


**Women's
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Let's talk about Pelvic Organ Prolapse!

By Rose Tilsley from Family Planning Tasmania

Rose is a doctor with Family Planning Tasmania where a new service to assess and support people with pelvic organ prolapse is now being offered.

What is pelvic organ prolapse?

Prolapse is where the vaginal walls and/or the cervix sag or bulge down towards or through the opening of the vagina.

Who gets prolapse and why?

Anyone with a vagina can experience prolapse. It's a common condition. Ever since humans have been walking around on two legs our poor old pelvic floors have been under the strain of trying to stop our internal organs from falling down through our pelvic bones as we run, jump, strain, cough, lift and give birth just to name a few activities. Ligaments and tissues also help hold things up in the fight against gravity but these invariably age and stretch over time. Genetics, age, birth trauma and chronic medical conditions such as constipation can all play a role in the development of prolapse.

What are the symptoms of prolapse?

Prolapse can be present and cause no obvious symptoms at all, however many people do experience symptoms from their prolapse and these can range from mild to severe.

Common symptoms of prolapse include:

- Feeling a lump or a heaviness in the opening of the vagina
- A dragging ache or back pain
- Difficulty with urinating or opening bowels
- Frequent urination, UTIs, urinary incontinence
- Rubbing, soreness and bleeding
- Problems with sex



Deb Gray (left) and Rose Tilsley from Family Planning Tasmania.

What can I do if I think I have a prolapse?

Please come and talk about it. Just because prolapse is common and occurs more often as we get older doesn't mean that it's something we just have to accept and ignore. It is not a problem to be ashamed of or embarrassed by. Treatments are available and are often minimally invasive and simple. Whilst surgical intervention is sometimes necessary, it is definitely not the only treatment option. Physiotherapy, lifestyle modifications, hormonal medication, optimisation of medical conditions and pessaries often all have a role to play in managing prolapse and associated symptoms.

What are pessaries?

In their simplest form pessaries are ring/doughnut shaped devices made of medical grade silicone that are placed into the vagina where they help support the walls of the vagina and the cervix. When used correctly they should be comfortable and in fact you shouldn't even be able to feel that they are there! As usual with humans one size does not fit all so different shapes and sizes are available.

A word about Pelvic Floor Exercises

Let's be honest with ourselves - we can always be better with our pelvic floor exercises. BUT don't give yourself too much of a hard time either. Our pelvic floor muscles are only one part of the entire pelvic floor. Remember that the pelvic floor is made up of ligaments, muscles and other tissues. Whilst you can and should work on having a strong set of pelvic floor muscles you can't turn back the clock on aging, you can't (and wouldn't want to) reverse the process of childbirth and most of us probably wouldn't give up the evolutionary advantage of walking around on two legs and go back to four. So don't blame yourself or just grin and bear it, go and start the conversation about your symptoms today with a health practitioner you feel comfortable with.

Family Planning Tasmania

We have clinics in Burnie, Launceston and Hobart. Our nurses and doctors are friendly, approachable and knowledgeable. Our prolapse and pessary service provides affordable and timely access to a much-needed service to support you! This service is free for concession card holders, full time students and people under 21 years of age.

What is a Pelvic Floor Physiotherapist?

What can a Women's and Pelvic Health physiotherapist help with?

Women's and Pelvic Health physiotherapists have special expertise in treatment of continence issues including leakage from the bladder or bowel, prolapse of the pelvic organs as well as treatment of pelvic pain. They can also help if you have overactive pelvic floor muscles.

What happens when you see them?

The physiotherapist will usually take a full history of your bladder and bowel function, sexual function as well as your medical, surgical and general history. They will also ask about your usual daily activities and the types of any physical exercise you do. A physical examination of your pelvic floor is also usually part of the consultation. If you have had pain or medical trauma in the past and a vaginal / intimate examination is hard for you, your physiotherapist should work with you to help you find it easier. There are multiple ways to do this. Don't let this concern stop you from seeking help.

Do I need a referral?

No, you can make an appointment to see a private Women's and Pelvic Health Physiotherapist directly. If you see a GP or another medical specialist about an issue with your pelvic floor, they may also refer you to see a Women's and Pelvic Health Physiotherapist.

How much does it cost?

Costs with private practitioners vary. If you have private health insurance, most funds have a rebate to cover part of the cost. Some people with longer-term conditions are eligible for a Medicare rebate for up to 5 sessions if they have a GP referral under a Team Care Arrangement. Publicly funded access to Women's and Pelvic Health physiotherapists is available at the Royal Hobart Hospital, the Launceston General Hospital and the North-West Regional Hospital. Sessions with Women's and Pelvic Health physiotherapists at public hospitals are free if you have a Medicare card.

What special qualifications do they have?

All physiotherapists registered in Australia have completed a four-year university qualification in physiotherapy. Women's and Pelvic Health Physiotherapist also complete additional training, usually a Master's Degree. Reception staff should be able to advise what type of additional training your physiotherapist has completed. Titled physiotherapists are called "APA Continence and Women's health Physiotherapist" this is recognition from the

professional body that they have extra training and expertise.

I've heard them called other names, what's that about?

Their official title is an APA Continence and Women's Health Physiotherapist. Sometimes people also call them Pelvic Floor Physiotherapists, Pelvic Health Physiotherapists, Women's Health Physiotherapists or Continence and Women's Health Physiotherapists.

I'm really busy, can't this wait?

Sometimes treatment is surprisingly quick, and easy, sometimes not. The most common thing clients say to their pelvic physios is "I wish I had done this sooner." We know it is really hard to make time to look after yourself but if you are having issues with your pelvic floor, the sooner you can get help the better for your long-term health and welling.

You are important, your health is important.



GENTLE SUNRISE FLOW



Live on Facebook
(Online classes with Women's Health Tasmania)
Monday to Thursday 6:30 - 7:00 am

Get your Downward Dog on and greet the sun with a gentle yoga flow.

What trans folk need to know about pelvic floors

Pelvic floor dysfunction and the issues of pelvic pain and/or incontinence can have a massive impact on your health and quality of life. And yet, it is often an overlooked part of our general well-being. It can also be a source of embarrassment for many and/or an area associated with trauma, making pelvic health difficult to raise with a health professional, let alone seek assistance.

For transgender folk who may have experienced discrimination in the past from health professionals, or worry they might be exposed to it, seeking help is challenging. Unfortunately, care providers who are not well informed about trans health may also fail to understand the diverse concerns, and needs, trans people may have.

The pelvic floor health of transgender people is an area which requires more research. However, some studies do exist, and these suggest an increased occurrence of pelvic floor dysfunction in the transgender community.

Some risk factors apply to us all, including heavy lifting and constipation, and childbirth for those who have borne children. There are also some things trans folk need to know about their pelvic floor.

Any changes to the sexual or reproductive organs via surgery or hormonal treatment are likely to have some influence on the pelvic floor and pelvic health.

How reproductive organs are tucked or bound can disturb the flow of blood and lymph (a fluid that helps fight off bacteria in the body). Tucking and binding can also impact on muscle activity.

We also know that tucking and binding can be an important part of managing gender dysphoria and being able to get out there in the world with confidence. So it's important to find a balance between feeling good in your body, and making sure you're binding and tucking safely.

If you are trans gender and you're considering gender affirming lower surgery, talk to your health professional about your overall health, the health of your pelvic floor and the current functioning of your bladder and bowel.

Making sure your pelvic floor is in good working order, before surgery, is a great way to set yourself up for the best possible recovery.

For advice and help around accessing gender affirming medical help – The Tasmanian Sexual Health Service is the best place to start. They have clinics in Hobart, Launceston and an outreach clinic in Devonport.

The needs for trans men and women are different. Here are some of the ideas that could be useful when thinking about pelvic health and gender affirmation.

Pelvic floor health for transgender women

- Tucking reproductive organs for too long, or too vigorously, can cause pain and may have an impact on pelvic floor health.
- Lower surgery to create a vagina (vaginoplasty) does carry some risks – including risks to the pelvic floor. A good surgeon or doctor will discuss these risks with you so that you can make an informed decision. A counsellor to help you weigh up the risks versus the benefits. Working It Out has counsellors who can help you talk these matters over.
- Physical therapy with a pelvic floor specialist, before and after gender-affirming vaginoplasty, has been shown to improve the outcomes in pelvic floor function.

Pelvic floor health for transgender men

- Depending on the dosage, testosterone can affect vaginal tissue – increasing the risk of atrophy and inflammation of the vagina and/or cervix. Lowering oestrogen can affect tissues needed for skin resilience, vaginal pH, lining bladder pipe, and vaginal lubrication. Often you can use vaginal oestrogen without increasing systemic oestrogen, which can be useful when transitioning – talk to your doctor about this.
- Get tested! While not directly related to the pelvic floor, it's all part of health down there! We know there are barriers to trans guys getting tested, but there are services out there that do better in this space. Ask around, find someone you trust, don't give up! Untreated STIs are no fun. Also everyone with a cervix needs

a cervical screen every 5 years. You can now ask to self-collect (you swab yourself, instead of having a nurse or doctor do it).

- If you've got a small frame, the increased muscle mass as result of testosterone therapy could lead to changes in posture which may impact on the pelvic floor muscles.
- Binding of the chest can cause pain and difficulty breathing. Diaphragmatic breathing affects the pelvic floor and has an influence on the contraction and relaxation of the muscles. Always bind safely bro! There are resources out there about safe binding techniques (see below).

What to look out for

Some signs your pelvic floor may need attention are problems urinating or an increase in frequency; leaking bladder when coughing or sneezing; pain or discomfort when having sex; and pelvic, back, hip or sacroiliac pain.

Don't wait if you notice any changes in the functioning of your bladder, bowels or sex organs – seek advice and assistance. There are lots of things you can do to improve your pelvic floor health; reduce caffeine, drink water, eat healthily for muscular development and growth; quality sleep. For muscular recovery; regular exercise. To keep the muscles strong; diaphragmatic breathing and kegel exercises, to relax and contract the pelvic floor muscles.

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Are you hip to it? Hip pain and the pelvic floor



We've all heard that song – hip bone's connected to the thigh bone. But you've probably not heard the latest version: the pelvic floor's connected to the obturator internus!

The what?!

In plain English, the pelvic floor is connected to your hips, baby.

The obturator internus is a muscle deep inside your hip. It's part of the cool club of hip muscles that helps you take a step to the right or bring your knees in tight (when doing the Time Warp).

It's one of the many wonderful muscles that helps you turn your leg out from the hip joint and it also helps you keep your pelvis steady when you're walking, running, or foxtrotting.

But unlike some of the other hip muscles that help us groove to the music, the obturator internus has a special friendship with the pelvic floor muscles – it's directly attached.

So, what does it mean if you've got pain in your hips? Could it actually be connected to the pelvic floor?

First of all, there can be a HUGE range of different reasons for pain in the hips. Our hips are doing a lot for us all the time, whether it be sitting, walking or doing the Nutbush. Plus, within the

hips themselves there's nerves, bones, the ball and socket of the hip joint, as well as a host of muscles.

But the relationship of the pelvic floor and the obturator internus can also be a source of pain, and there are ways that a pelvic floor physio can help.

What sorts of pain or other things should get you to the pelvic floor physio?

There's a range of different things you might notice if your obturator internus and pelvic floor are in need of help.

Some things you might notice in the pelvic area are:

- You have pain in the pelvic area when you're sitting
- You often find that you suddenly, urgently have to pee
- You feel like you need to pee all the time
- Wee leaks out when you cough, laugh or at random times
- You have pain during penetrative or other kinds of sex, or you have a hard time orgasming

Some things you might notice in the hips and back:

- Deep hip or lower back pain
- Pain in your groin
- Pain around the 'sit bones' (the boney bits of your bum where you sit)
- Pain in or around your tail bone
- Pain in your vagina or rectum

How does the pelvic floor physio check whether your hip pain is caused by your obturator internus?

A pelvic floor physio can check how strong and happy your obturator internus is through an internal exam. Because the obturator internus is so deep within the hip, a pelvic floor physio does this by putting their finger into your vagina and gently feeling the muscle through the wall of the vagina.

Can you just go to an everyday physiotherapist for hip pain?

You certainly can! And there's a lot that a general physiotherapist can do to help you manage pain, build strength, stability, flexibility and movement in the hips (bring on the Macarena!) All this can help manage pain and get you back to doing things you love (whether

that's line dancing or sashaying about the house to Whitney Houston).

But there are issues that a general physio doesn't have the training or skills to help with. Things like that connection of the pelvic floor to the obturator internus – that's something only a pelvic floor physio is trained to check and treat.

If you have been seeing a general physio for hip pain and it's not getting better – get along to a pelvic floor physio!

"Well, I've had hip pain for a while, and I've just been getting on with it. Should I still see a pelvic floor physio?"

Yes! Hip pain can have knock on effects.

Basically, if you've been living with hip pain for a while your body might have been protecting you from pain by spreading the strain to a different part of the hip.

This could cause strain on the muscles of the pelvic floor. So, if you've been living with hip pain and now are finding that you're having problems holding in wee or having pain with penetrative or other kinds of sex – get your arse (or should I say, pelvis) to a pelvic floor physio immediately!

Shake it like a polaroid picture!

When you shake it on the dance floor, a whole interconnected system of muscles is engaging – you're not just shaking your hips: your pelvic floor is part of the party too.

The pain you might experience in your hips could be the result of something going on in the pelvic floor.

Our main message here: Help is out there! A pelvic floor physio can help you stay hip, with it and pain free!

References:

Victoria Garrett, The Missing Link: Hip Pain & Pelvic Floor.

<https://bodyharmonypt.com/the-missing-link-hip-pain-pelvic-floor/>

Physio-pedia, Obturator Internus. https://www.physio-pedia.com/Obturator_Internus



Do you work in health or community services?

You might be interested in some initiatives we've started to help bring a gender focus to service delivery.

We have begun partnering with the Mental Health Professionals Network to run two networks in Tasmania for people who work in health or community services and have a particular interest in helping support women's mental health.

One of these networks is based in Hobart. It's the **Hobart Perinatal and Infant Mental Health Network**.

This is a small network with a specific interest. The network has begun meeting quarterly and topics covered so far include local services, and what they offer, and discussions about particular issues that

impact on new mothers. For example, the most recent meeting listened to women talking about the impact of their experience of eating disorders on their experience of pregnancy.

If you are interested in joining this network go here <https://www.mhpn.org.au/members#/Network/96013>

Our other network is statewide. This is the **Tasmanian Women's Mental Health Network**. This also meets quarterly. At this network we aim to bring together practitioners with an interest in women's mental health so we can get a better understanding of how services and individual workers can work collaboratively to support women. This network has talked about issues such as developing a trauma-informed approach to practice.

Our statewide network holds meetings in Hobart and Launceston, as well as online.

If you are interested in joining this network go here <https://www.mhpn.org.au/members#/Network/96031>



WOMEN'S WALKS

Every Wednesday

10:30am - 12:30pm

Leaves Women's Health Tasmania at 10:15am
25 Lefroy Street, North Hobart

Different walk every week for details go to the
Walking Calendar on our website.

For more information contact WHT on 6231 3212.

Meditation with Valerie



<https://www.womenshealthtas.org.au/podcasts/meditation-valerie>

What is intersectionality?

A lot of feminists are talking about 'intersectionality' nowadays. It means understanding that gender is not the only thing that we need to think about when we think about women's lives, because not all women's lives are the same. Women have different experiences related to race, disability, class, migration status, un/employment, all of which impact their lives. Especially when they intersect! (That's why we call it intersectionality.) We try and use intersectional approaches at Women's Health Tasmania. This means we listen for, and acknowledge the different ways discrimination impacts on the women we work with.

BOOK REVIEW

Women Don't Owe You Pretty by Florence Given

Review by Heidi Morton

The first I heard of this book was that it was written by a 22-year-old queer, white UK social influencer; that there was some controversy about appropriating the work of a young black UK social influencer; and that it was 'feminism-lite' for people who don't want to get serious.

This piqued my interest, because dismissing and denigrating young women, and focusing on the competition between them, are all-too-common stories.

The colours and design of the book makes you feel like you're picking up something fun and special. While women don't owe anyone pretty, we absolutely deserve something pretty for ourselves.

The book's premise is that serious content can be communicated in ways that are anchored in the real world, everyday experiences of young people, and that this feminist content can encompass the entirety of what it means to be a human – anger, sadness, joy, irreverence, connection, self-doubt, individual agency as well as acknowledgement of the larger structures we operate within.

Florence Given is a writer, illustrator, and feminist campaigner whose book covers topics such as consent (chapter headings follow). ('If It's Not a "Fuck Yes", It's A "No"'), sexuality, mental health and wellbeing ('Let That Shit Go'), gender and gender roles, intersectionality ('Accountability' and 'Check Your Privilege'), self-care, curiosity and compassion for ourselves and others ('Stop Assuming'), and personal growth ('How to Break Up With Yourself').

It gives clarity on why and how we've been socialised to seek the approval of the male gaze, and on what we gain and lose from turning away from this gaze and towards ourselves instead ('Feminism Is Going To Ruin Your Life – In The Best Way Possible').

Society's structural inequality is called out, and ways in which we might choose to reject these structures or social 'rules' (and why) are named.

The book links the ways social media narrowly defines ways in which to feel validated, gratified and seen to the structures in society that encourage us to look outside ourselves for those things. It asks questions about whose opinions we choose to give weight to, and whether they offer reliability, compassion, or even know us ('Stop scrolling in the mornings').

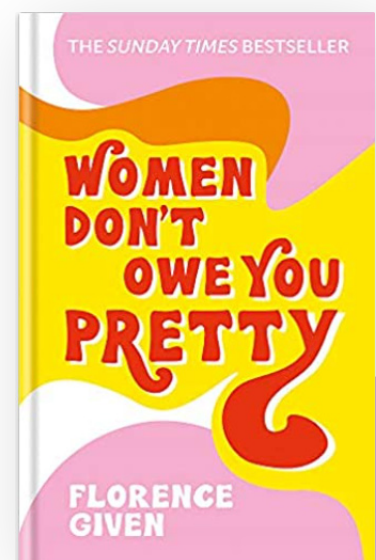
Chidera Eggerue (aka The Slumflower) is a young black social influencer, writer and feminist activist who accused Florence Given of copying her work – from her social media posts and her book *How to Get Over a Boy*. Eggerue argued that this was another instance of black women's ideas generating wealth for white people, and that the tropes of the 'angry black woman' and the 'cat fight' (two women in conflict) served to dismiss a legitimate claim.

Given acknowledges Eggerue's influence by name on the acknowledgements page at the back of her book, and highlights that paying attention to the words of black women is integral to intersectional feminism. It may be that both authors had tapped into the zeitgeist at the same time but reading Eggerue's book and making up your own mind is the only way to come to an informed conclusion on that.

Women Don't Owe You Pretty is accessible and sits within the social environment in which young people live. That it is written by a young woman for young women is not a put down; it makes sense that this author has insights and ways of speaking that resonate for younger people. Some reviews described it as 'watered-down' feminism that fails to provide a bridge to more 'serious' feminist texts, but it seems to me that the purpose of this book is to light a fire, to connect young folk to feminism in terms that resonate with their everyday life experiences.

I would give this to a young person aged 13 years+ (there is swearing throughout the book...words they already know, let's be real!). And I would recommend this book to older folk, too. It paints a picture of what young people are navigating in a social media world, and it facilitates personal growth for those who are curious to know more about intersectionalism, gender, and identity in relationship to feminism.

Women Don't Owe You Pretty says you can be 'pretty' and a feminist. You can define 'pretty' for yourself rather than accept shallow criteria that comes with an agenda. You can be more than one thing at any given time and over time. You can find belonging in ways that 'fitting in' does not offer you. And 'feminism' is more than slogans and social media posts and 'girl power' – it is an holistic approach to living that makes your life better, supports you to grow, and allows you to be all the selves you might want to be.



What's on at Women's Health Tasmania?

Monday	Tuesday	Wednesday	Thursday	Friday
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Online classes (Live-streamed on Facebook: <https://www.facebook.com/groups/3045877678969259>):

6:30am–7:00am Gentle Sunrise Flow with Jen	6:30am–7:00am Gentle Sunrise Flow with Jen	6:30am–7:00am Gentle Sunrise Flow with Jen	6:30am–7:00am Gentle Sunrise Flow with Jen	
9:00am–10:00am Tai Chi with Wendy	10:00am–11:00am Weights with Wendy		11:00am Meditation with Valerie	

Classes at the centre:

11:00am–12:00pm Tai Chi with Wendy (Max 12 participants) To book a place call: 6231 3212	10:30am–11:30am Meditation with Jean (Max 29 participants) To book a place call: 6231 3212	9:30am–10:45am Yoga with Jen (Max 6 participants) To book a place call: 6231 3212	10:00am–11:00am Meditation with Valerie (Max 19 participants) To book a place call: 6231 3212	10:00am–2:00pm Waste to Wonderful A textile project and shared meal for women from refugee and migrant communities. Childcare provided. To learn more call: 6231 3212
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Preparation for Birth, Pregnancy and Parenting

Develop skills for calm and confidence

FREE COUNSELLING SERVICE

To book call 1800 675 028 or email info@womenshealthtas.org.au

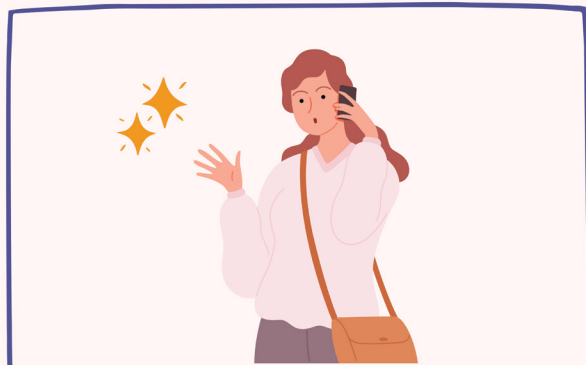


She's Out There

www.womenshealthtas.org.au/podcasts/shes-out-there

WHT's podcast series on sexual and reproductive health

Wherever you live in Tassie, these services are for you



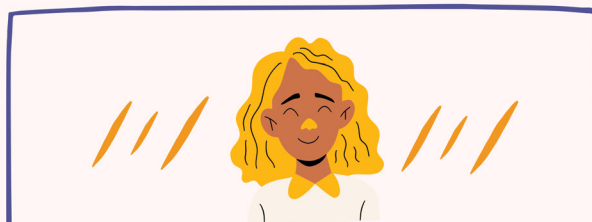
The Women's Health
Information Line
1800 353 212



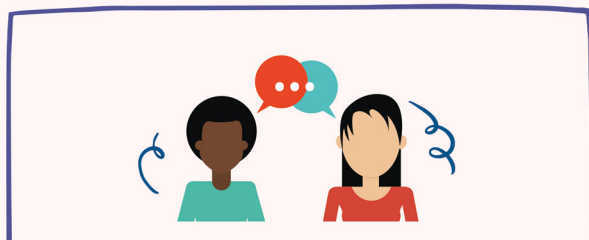
Free counselling by phone or
telehealth
(Health and wellbeing,
Pregnancy Choice, Birth and
Parenting)



Online podcasts, Yoga, Tai
Chi, Weights and Meditation



Free online forums for people
with lived experience of mental
illness, and carers



Webinars, projects and
workshops in your area

Coping Skills



The Women's Health Fund

Exercise

Sign up for our enews to find out what is
happening near you.