

The common women's health problem we don't talk about

March 5 2021



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As a sociologist and feminist researcher, Dr. Alice Beban is interested in the everyday inequalities in women's lives and has found that issues affecting women have often been silenced, trivialized or

ignored—something of particular relevance for International Women's Day (8 March).

One example of this is pelvic floor dysfunction. Despite one in three women who have given birth experiencing pelvic floor issues such as incontinence or prolapse, the options for treatment and support, and even information, have been limited.

Last year Dr. Beban, of the School of People, Environment and Planning, decided to find out more about women's experience with pelvic floor dysfunction and the health system.

"There is a lot of embarrassment and even shame around these very [common problems](#)," Dr. Beban says. "It's almost the last taboo in women's health. The Me Too movement has opened the conversation about sexual abuse and there is now more discussion around periods, but no-one seems to want to talk about pee and poo!"

Dr. Beban's research has found that women are not given the information they need post-partum, and if they develop any issues will often not talk to anyone about it, even to their GP. Women who do approach their GP may be told that it will pass and just wear pads, or there is the medicalised, surgical option.

However, women are often not keen on the surgical option. One woman interviewed by Dr. Beban said, "I don't want to go down the surgery track. The fact that they haven't been able to medically pinpoint anything, it makes me nervous."

While there is not a great deal of data on the prevalence of pelvic floor dysfunction, there was a question on it in a previous census. The results showed that all ages and ethnicities are affected and as well as one in three women who have given birth having leakage/pelvic floor issues,

fifty percent of women who have given birth and are over a certain age will have prolapse. The rates for Māori women are even higher.

Dr. Beban is located in Hawke's Bay and learned that the Hawke's Bay District Health Board (DHB) was providing pilot funding for a holistic clinic for women with pelvic floor issues.

"The clinic, which is completely free, is offering holistic care for women referred to it. It's a really different model, because it is a collaboration between a GP with special interest in women's health and a pelvic physiotherapist. Non-surgical options such as physical therapy combined with conservative medical treatment can help women avoid surgery completely or, if they do have surgery, make the surgical outcomes better.

"I wanted to understand what was happening from a sociological research point of view with women's experience with pelvic floor problems and the health system so I approached the holistic clinic."

Dr. Beban interviewed 20 women who were attending the clinic aged from 19 to in their eighties.

Many of the women had been desperate, they had felt 'brushed off' by the health system and lacked information, options and support.

As one woman said, "I went to two other doctors before I went to the doctor who referred me. The others just said, it will normalize soon, it is just still healing, they didn't refer me. They could have made it so much easier so much earlier."

The impact of pelvic floor dysfunction on women's lives is significant. Many will not leave their house at all, resulting in social isolation. Their relationships and mental health suffer. Many are unable to work or can

only work a few hours due to pain, so there are also significant economic consequences.

As one of the women interviewed said, "It has a real big impact on your life, your quality of life and it affects you emotionally."

Another said: "I ended up, I developed depression and anxiety, because it's like, I can't even go toilet, I can't even walk through town... I can't go outside on a beautiful day because I might have an accident. It brought me down."

After attending the clinic and following the more holistic treatment options, most of the women not only experienced a significant reduction in pelvic pain, they also reported a big improvement in social and intimate relationships.

"The clinic provided women with a sense of having power over their own healthcare. Many women talked about how they had more confidence that they could manage this, and that their self-confidence had improved. Several women said it was 'life changing', and they were now encouraging their family and friends to tell others about their symptoms so they could also be helped," Dr. Beban says.

One women said, "Going to them has given me tools so I can feel more when I need to go to the toilet, I can do the exercises properly, it has given me the confidence to do it at home and now I tell other women about it. The clinic is such a good thing. Knowing that there's people who can help with those intimate problems you don't like to tell to anybody. There's a lot of things I didn't know as a new mum. If I knew that there were a lot of things I could do in pregnancy, I could have done it."

Another stated, "My confidence has come back—I can go to the

supermarket now, I can go for walks. I hadn't taken him for walks, I had an accident just driving to my aunties. So I really limited my outings. And mentally I wasn't doing well. It was just really hard. Even wearing pads, it wasn't enough."

Dr. Beban wants a change in how we deal with women's health.

"It would be great if women had more holistic and non-surgical options. There is a lot of work to be done. The timing of this research is good as there is a petition circulating about improving post-partum care which currently has around 50,000 signatures.

"There is no funded post-partum [physical therapy](#) care and Aotearoa is falling behind other countries in this area. Women are not being given the right information and I believe it is part of a much wider issue of [women's](#) pain being minimized."

Dr Beban will be presenting the results of the research to the DHB later this month (March 2021).

Provided by Massey University

Citation: The common women's health problem we don't talk about (2021, March 5) retrieved 3 July 2024 from <https://medicalxpress.com/news/2021-03-common-women-health-problem-dont.html>

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