Bridging Access to Physiotherapy Care Gaps for Saskatchewan Mothers: Experiences of Postpartum Women and Health Care Providers

RESEARCH TEAM:

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PROJECT DESCRIPTION

Maternal healthcare is complex and multifaceted. Persistent and problematic postpartum low back and pelvic pain are substantial, yet under recognized problems among Canadian mothers. Further, low back and pelvic girdle pain have been significantly associated with challenges including urinary incontinence and depression, which ultimately influence the ability of Canadian mothers to care for their children. Healthcare providers, such as nurses and physicians, are focused on providing essential information for both mother and baby in the early postpartum stages. Physiotherapy care has much to offer to improve overall maternal wellness and has specifically shown to restore normal back and pelvic motor function while reducing the physiological and psychological impact of pregnancy-related low back and pelvic girdle pain. While physiotherapy care can positively impact mental and social well-being of mothers in the postpartum recovery period, access to maternal physiotherapy services in Saskatchewan is limited.

The goal of this project is to understand current gaps and opportunities for maternal health services, specifically physiotherapy care, among women with postpartum low back and pelvic girdle pain and dysfunction in Saskatchewan. Though surveys, interviews and active engagement with Saskatchewan mothers and health care providers, this project aims to understand current gaps and opportunities in maternal health services with a specific focus on identifying ways to enhance access to maternal physiotherapy care. These findings will lead to improved clinical outcomes and quality of life for postpartum women across Saskatchewan. More specifically, this research will also inform opportunities for improved maternal healthcare in Saskatchewan, specifically for the highly prevalent and burdensome health conditions of low back and pelvic girdle pain and dysfunction.