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**Barriers & Supports to Occupational Therapists Working in Pelvic Health
Across Three Healthcare Delivery Systems: Outpatient,
Hospitals, and Home Health**

by

Charlie Watts

A Capstone Project Presented to the
FACULTY OF OCCUPATIONAL THERAPY
GEORGIA STATE UNIVERSITY

In Partial Fulfillment of the
Requirements for the Degree
OCCUPATIONAL THERAPY DOCTORATE

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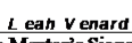
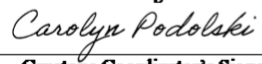


Capstone Final Paper Approval Form

The Capstone Final Paper is the final product that the OTD students need to complete to report his/her Capstone Project and his/her Capstone Experience.

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Degree Sought	Occupational Therapy Doctorate (OTD)
Department	Occupational Therapy
Program	Occupational Therapy Doctorate (OTD)

We, the undersigned, recommend that the Capstone Final Paper completed by the student listed above, in partial fulfillment of the degree requirements, be accepted by the Georgia State University.

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Abstract

This capstone project delves into the experiences of Occupational Therapists (OTs) specializing in pelvic health across three healthcare delivery systems: outpatient clinics, hospitals, and home healthcare, aiming to identify the barriers and supports they encounter. By examining these elements, the study seeks to understand their impact on clinical practice and quality of care, ultimately contributing to advancements in patient treatment, professional performance, and academic inclusion within pelvic health occupational therapy. Utilizing a qualitative methodology, the research involved semi-structured interviews and observations of 12 pelvic floor professionals in various settings, including OTs and Physical Therapists (PTs). Preliminary results reveal common barriers such as limited public awareness, insufficient cross-disciplinary cooperation, and a lack of specialized training at academic levels. Conversely, supports identified include the availability of continuing education, robust professional networks, and access to evidence-based practice resources. These findings show the need for increased awareness, enhanced cross-disciplinary collaboration, and greater access to specialized training in pelvic health at the university level. Addressing these challenges through advocacy and policy changes is vital for elevating the role of occupational therapy in pelvic health, improving patient outcomes, and fostering professional excellence.

Summary

Purpose: This capstone project explores the experiences of occupational therapists (OTs) specializing in pelvic health within three distinct medical delivery systems: outpatient clinics, hospitals, and home healthcare. The project aims to uncover the barriers and supports pelvic health OTs encounter and determine how these elements affect OTs' clinical practice and quality of care. Insights from this study will support advancements in patient treatment, professional performance, and academic inclusion within pelvic health occupational therapy.

Specific Aims:

- Identify the barriers and deterrents encountered by OTs specializing in pelvic health across outpatient clinics, hospitals, and home health settings.
- Evaluate the resources and supports available to OTs specializing in pelvic health across outpatient clinics, hospitals, and home health settings.
- Assess how the barriers and supports determined to impact the effectiveness of pelvic floor occupational therapy practice.
- Contribute further research to support the importance of
 - o Pelvic health education for OTs
 - o The pivotal role of occupational therapy in addressing pelvic floor dysfunction (PFD)
 - o The importance of interdisciplinary contributions in pelvic health

Design: Employing a qualitative methodology, this project involved semi-structured interviews guided by an in-depth interview framework. The interviews captured a wide range of perspectives from OTs and other experts in pelvic health. The first phase included observing five

pelvic floor professionals—OTs and PTs—in an outpatient setting. The second phase broadened the research to interviews with 12 pelvic health professionals across three healthcare settings.

Method: Through purposive sampling, the study involved interviewing and shadowing OTs and related professionals who have worked extensively in pelvic health. Data was collected via semi-structured interviews and outpatient observation sessions, followed by thematic analysis using NVivo software and Manual Coding with Physical Materials to identify prevalent barriers and supports.

Preliminary Results: Initial findings show several common barriers across the settings explored, such as *patients' lack of public knowledge, inadequate cross-disciplinary cooperation,* and a *shortfall in specialized training, especially at the academic master and doctoral levels.* On the support side, access to *ongoing continuing education, professional networking, and evidence-backed practice resources* were identified as significant supports for OTs in pelvic health.

Conclusion: This study highlights the intricacies of providing pelvic health services, shedding light on substantial barriers that hinder OTs' practice and highlighting essential supports that facilitate OT's work in pelvic health. Feedback from OTs and pelvic health specialists signals a need for broader awareness, better cross-disciplinary/interdisciplinary collaboration, and more comprehensive access to specialized training in pelvic health, especially at the university level. To elevate the role of occupational therapy in this critical area, addressing these challenges through advocacy and policies is crucial, aiming to improve patient outcomes and professional excellence.

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CHAPTER 1

Introduction + Literature Review

1.1 Introduction

Pelvic health is a crucial yet often neglected aspect of comprehensive health. Pelvic health can significantly influence the physical, psychological, and emotional wellness of an individual's quality of life (QoL). Occupational therapists (OTs) play a pivotal role in pelvic floor rehabilitation, practicing a holistic approach that extends beyond physical rehabilitation to encompass the psychosocial aspects of health. Occupational therapy is paramount as a profession in helping individuals return to activities of daily living (ADLs) and meaningful occupations after pelvic floor dysfunction (PFD). Despite occupational therapy's important role in pelvic health, OTs face hurdles across different medical settings – outpatient clinics, hospitals, and home health – impacting their capability to deliver effective pelvic floor therapy.

Purpose Statement

In this capstone project, the experiences of OTs specializing in pelvic health were explored in three distinct medical delivery systems: outpatient clinics, hospitals, and home health. The project aimed to uncover the barriers and supports OTs experience while working in pelvic health and determine how these barriers and supports affect OTs' clinical practice and the quality of care provided. The insights gleaned are intended to support advancements in patient care, professional training, and academic inclusion of pelvic health topics.

Why Occupational Therapy is Important in Pelvic Health

OTs bring a unique perspective to pelvic health, integrating a holistic approach that addresses the physical symptoms and the psychosocial impacts of PFD. This inclusive model of care is vital for conditions that affect physical capabilities and have significant psychological and social repercussions. The widespread occurrence of PFD, including but not limited to incontinence, prolapse, and pelvic pain, emphasizes the necessity of occupational therapy's comprehensive role in restoring individuals' ability to participate in meaningful activities of daily living (Mitchell et al., 2017).

Understanding PFD

PFD affects up to 50% of the population, with a range of issues stemming from dysfunction of pelvic muscles and tissues (American College of Obstetricians and Gynecologists, 2017). PFD can significantly affect participation in ADLs, causing not just physical discomfort but also emotional and social disruptions. PFD encompasses several conditions, including pelvic organ prolapse, incontinence, and sexual dysfunction (American College of Obstetricians and Gynecologists, 2017).

These diagnoses can all contribute to a reduced QoL. Contributing factors are varied, ranging from childbirth and aging to such differential diagnoses as endometriosis. The complexity and prevalence of these conditions make working with pelvic health professionals essential (Grimes & Stratton, 2021).

The consequences of PFD are not limited to physical dysfunction. Taple et al. (2020) demonstrated a bidirectional relationship between urinary symptoms and mental health. Distress from urinary issues can heighten anxiety and depression, which in turn can worsen the physical symptoms, blurring the lines between the body's and the mind's well-being (Taple et al., 2020).

Furthermore, PFD is quite common; nearly a quarter of women experience some form of PFD, with numbers rising as women age (American College of Obstetricians and Gynecologists, 2017). This underscores the need for effective treatments and a public health approach to address PFD. Beyond the numbers, PFD's reach into sexual health and its connection to psychological distress and relational challenges cannot be overlooked. PFD impacts an estimated 10% to 20% of women in the United States alone (Mitchell et al., 2017; Pukall et al., 2016).

Another condition often seen with PFD is endometriosis, affecting around 10% of women in their reproductive years, which is marked by pain and has widespread effects on QoL and participation in meaningful occupation (World Health Organization, 2018).

All in all, the wide-reaching impact of PFD on individuals' lives highlights a significant call to action for healthcare to increase awareness, improve diagnoses, and offer comprehensive pelvic health treatments. This will manage symptoms and enhance the QoL for those affected.

Literature Insights and Implications for Practice

Occupational-based therapy significantly improved participants' QoL through "Transforming women's journey with pelvic health, providing relief and discovery through

occupational therapy, and empowering women with knowledge about their bodies, evidenced by clinically significant changes in their PFDI-20 scores, indicating reduced PFD symptoms and their impact on QoL" (Schmitz et al., 2023).

OTs play a vital role in PFD management through comprehensive assessment and evaluation of clients' pelvic floor muscles and cognitive and physical functions. Based on these assessments, OTs tailor individualized care plans to address specific patient needs. Additionally, they educate patients on pelvic floor health and teach exercises to improve pelvic floor muscle control and bowel and bladder management. OTs also provide training on assistive devices such as pessaries, dilators, pelvic wands, and biofeedback tools to manage PFD (Akselred & Vestal, 2021). Beyond physical interventions, OTs offer crucial mental health support by counseling clients on the psychological impact of PFD, ensuring holistic care, and acknowledging both the physical and emotional parts of the condition (Benedetto, 2019).

Despite the vital role occupational therapy plays in pelvic health, OTs face challenges in hospitals, outpatient, and home health due to limited patient awareness of PFD, referral system standards of writing prescriptions for pelvic floor physical therapy, lack of support from doctors and administration, and a general lack of awareness of occupational therapy's role in healthcare (Nygaard et al., 2008). In hospitals, integration and collaboration with multidisciplinary care teams presents challenges. In-home health, referral scripts from referring physicians prioritize physical therapy orders over occupational orders and many doctors do not understand that the gold standard should be scripts written for just pelvic floor therapy. Outpatient settings present a myriad of barriers ranging from referral issues to patient awareness that PFD can be treated with therapy. These issues are compounded by a lack of specialized training in pelvic health during

foundational academic occupational therapy studies (Burkhart et al., 2020; Meyer et al., 2018; Schmitz et al., 2023).

Conversely, OTs are supported by advancements in professional education, online peer support, training, and research, which reinforce the effectiveness of occupational therapy interventions in pelvic health. Recognition of the value of a holistic approach, interdisciplinary collaboration, and efforts to increase patient awareness significantly support OTs in providing adequate care (Akselrud & Vestal, 2021).

OTs play a vital role in treating PFD through a multifaceted approach. They address the underlying causes of PFD using diverse modalities such as manual therapy, tailored exercises, and lifestyle adjustments. By employing techniques like exercise and electrical stimulation, OTs aid patients in restoring pelvic floor muscle function, thereby alleviating symptoms related to bowel, bladder, and sexual dysfunction. Moreover, OTs enhance patients' body awareness and self-management skills, empowering them to manage their symptoms effectively. Through education and counseling, OTs promote patients' understanding of PFD and equip them with self-care strategies, thus contributing to improved mental health outcomes. Additionally, OTs collaborate with other healthcare professionals to ensure comprehensive care for individuals with PFD, emphasizing the holistic approach to treatment (Akselrud & Vestal, 2021; Benedetto, 2019; Promoting Pelvic Health- Strategies in Your Toolbox, 2021).

Multiple studies, case series, and interviews advocate for the holistic integration of care in occupational therapy for pelvic health (Burkhart et al., 2020; Ferreira et al. 2020). These contributions underscore the positive impact of occupational therapy on patient outcomes,

stressing the importance of addressing physical and psychosocial factors (Akselrud & Vestal, 2021).

The literature reviewed underscores occupational therapy's critical role in treating PFD, highlighting the barriers OTs face and the supports that facilitate effective practice. Overcoming these challenges and utilizing support is critical to improving the QoL and care accessibility for individuals with PFD. This contributes to the advancement of occupational therapy in the essential healthcare domains explored: hospitals, home health, and outpatient.

1.2 The Holistic Approach in Occupational Therapy for Pelvic Health

OTs have a unique role in pelvic health by encompassing the physical, psychological, and emotional aspects of treating PFD. OTs' holistic model of care offers a broad spectrum of interventions that are tailored to the individual unique needs when it comes to treating PFD.

Integrating Comprehensive Care Strategies

The practice of occupational therapy in pelvic health is rooted in a commitment to improving QoL across all ADLs. This approach advocates for treatment modalities that address the full spectrum of the patient's life, emphasizing personalized care strategies (Akselrud & Vestal, 2021; Ferreira et al., 2020; Meyer et al., 2018).

Ferreira et al. (2020) provide an illuminating scoping review that reaffirms the effectiveness of occupational therapy for individuals dealing with PFD. Their comprehensive analysis identifies a triad of foundational intervention:

1. Education

2. Behavioral strategies
3. Pelvic floor muscle training

These intervention elements are pivotal for therapeutic success, benefit symptomatic relief, and critically enhance functional performance and overall QoL for those affected by PFD.

At the core of occupational therapy's holistic model is client-centered care, acknowledging each individual's unique experiences and needs when dealing with PFD. OTs aim to restore not just physical functionality but also emotional and social well-being. This is crucial given the intimate impact of PFD on mental health and social participation (Ferreira et al., 2020).

The Necessity for High-Quality Research

While the effectiveness of the holistic approach is evident, the need for more rigorous and high-quality research is evident. Though promising, the current body of literature calls for further studies with enhanced rigor to solidify occupational therapy's contributions to pelvic health. After reviewing the literature, the need for more systematic reviews and randomized controlled trials in this area is evident.

1.3 Global Challenges in Occupational Therapy for Pelvic Health

As OTs worldwide acknowledge the significant part they play in pelvic health, they are often faced with challenging healthcare obstacles. These barriers range from a general need for more awareness and understanding of PFD among the public and healthcare professionals to a lack of specialized training and resources for OTs in this field.

The path to overcoming these barriers is through educational efforts, advocacy, advancing research, and nurturing collaborative practices. Providing OTs with specialized training and developing evidence-based practice guidelines are crucial steps toward standardizing care and optimizing outcomes in the global market. Moreover, fostering interdisciplinary teamwork and influencing policy changes are instrumental in supporting the delivery of comprehensive pelvic health services worldwide (Hoffman et al., 2020).

1.3 Enhancing Education for Occupational Therapy in Pelvic Health

The integration of pelvic health education within occupational therapy holds significant importance in equipping future practitioners to address the many needs associated with PFD. A comprehensive educational framework encompassing women's health, including pelvic health, empowers therapists with essential competencies while simultaneously challenging societal taboos surrounding these issues (Podvey et al., 2021).

Occupational therapy education needs to incorporate anatomical, physiological, and psychosocial dimensions of PFD into academics to enhance outcomes for patient care. To involve more OTs in pelvic health, training in assessments, tailored therapeutic interventions, and hands-on learning experience is pivotal. Opportunities to participate in clinical rotations for fieldwork would further bridge the gap between theoretical knowledge and its practical application (Hoffman et al., 2020; Podvey et al., 2021).

Moving Forward

Occupational therapy confronts many barriers in delivering pelvic health services globally, yet it also has the potential for meaningful impact through educational reform,

advocacy, and interdisciplinary collaboration. Integrating pelvic health into occupational therapy education underscores a commitment to health equity and advancing women's health.

Collaborative endeavors among academic institutions, professional bodies, and practitioners are essential in elevating the occupational therapy profession and the standard of care within pelvic health.

1.5 Barriers and Supports Identified from the Literature Review

Outpatient

Incorporating pelvic floor occupational therapy in outpatient settings brings both opportunities and hurdles. Therapists confront obstacles like limited patient awareness, inadequate referral systems, client motivation and engagement, insurance limitations, and the challenge of holistic care within time constraints (Burkhart et al., 2021). In one study of 200 individuals, 66.8% of participants lacked awareness of pelvic floor rehabilitation, emphasizing the need for education (Meyer et al., 2018).

However, therapists overcome these barriers by fostering communication with referring physicians, conducting community education, and employing evidence-based practices. The successful case studies emphasize patient-centered approaches that integrate education and exercises for improved outcomes. Factors supporting these successes include specialized therapist training and accessible resources for personalized care (Burkart et al., 2024).

Hospitals

In the hospital setting, delivering pelvic health services faces unique challenges, mainly centered on the importance of teamwork and integrating occupational therapy into broader care teams. Challenges involve:

- Ensuring pelvic health's acknowledgment in post-surgical recovery for relevant procedures (especially cesarian births).
- Lack of understanding of the role that OTs play in the hospital by clients and other healthcare professionals.
- Time restraints and high patient turnover.
- Insurance reimbursement limitations.

Effective collaboration with nursing staff, physical therapists, hospital management, and physicians is crucial to surmount these obstacles. Supports that bolster pelvic health in hospitals include structured training sessions for staff regarding pelvic health's significance. Furthermore, establishment of integrated care pathways incorporating occupational therapy evaluation and treatment (especially in the post-surgical realm), as well as utilization of interdisciplinary teams will best serve and care for clients with PFD (Hoffman et al., 2020).

Home Health

Home health care poses logistical challenges, such as referral patterns, patient engagement, adapting interventions to home environments, and distance and travel requirements. Like hospitals and outpatient clinics, patient awareness about pelvic floor services was limited, and physician referrals were frequently ordered for PT rather than OT or such inclusive generalizable language as just asking for pelvic floor therapy.

In the conclusion drawn from the literature examination, several vital obstacles are identified for OTs in addressing pelvic health issues. Firstly, there needs to be more awareness among patients and healthcare professionals regarding the role of OTs in pelvic health, necessitating efforts to raise awareness about the valuable contributions of OTs in healthcare overall. Secondly, OTs often need more access to specialized training and education in pelvic health, hindering their capacity to deliver quality care and stay abreast of advancements in the field.

Moreover, resistance from some healthcare professionals toward understanding the scope of OT practice in pelvic health can impede collaboration and hinder OTs from assuming pivotal roles in this domain. Additionally, inadequate reimbursement from insurance companies and healthcare systems poses a significant obstacle for OTs striving to sustain their practices in pelvic health (Burkhart et al., 2020). Furthermore, the absence of standardized guidelines and protocols in pelvic health care leads to inconsistent and fragmented patient care, particularly evident in women's health, such as the lack of standardized protocols for Cesarean births in the United States compared to other countries like the United Kingdom and Australia (Hoffman et al. 2020; Solace Foundation 2024). Lastly, the presence of stigma and cultural factors surrounding pelvic health conditions further complicates access to and acceptance of OT services for individuals affected by these issues (Meyer et al. 2018; Podvey et al. 2021).

1.6 Elevating the Role of Occupational Therapy in Pelvic Health

OTs are crucial in examining the barriers and supports inherent in delivering pelvic health services. The literature sheds light on the effectiveness of a holistic approach in outpatient

care, the complexities faced in hospitals, and the logistical obstacles encountered in home healthcare systems.

OTs possess a unique blend of skills and a holistic approach that equips them to address the many needs of individuals with PFD. Evidence confirms the positive impact of occupational therapy interventions on patient outcomes, emphasizing the necessity of integrating pelvic health into the profession's practice and educational framework (Meyer et al. 2018; Podvey et al. 2021). Despite facing hurdles like limited patient and physician awareness and training gaps, OTs navigate these with ingenuity, collaboration, and an unwavering focus on patient well-being.

The pressing need for enhanced education and professional development underscores the importance of integrating pelvic health into occupational therapy training and ongoing learning endeavors. These initiatives advance practitioners' expertise and elevate the standard of care for those suffering from PFD. Additionally, more robust research, such as more systematic reviews and RCTs, is needed to bolster the evidence base supporting occupational therapy interventions in pelvic health.

Occupational therapy's involvement in pelvic health is indispensable, significantly improving the lives of individuals with PFD. By addressing barriers and leveraging supports, OTs are poised to enhance their impact on pelvic health. The insights from this review validate the profession's significance in this domain and pave the way for its continued growth, fostering collaboration and innovation in pursuit of excellence in patient care.

CHAPTER 2

Methods

2.1 Inclusion and Exclusion Criteria

The study recruited a diverse group of licensed OTs and physical therapists, actively working in pelvic health, to discuss their experiences working in outpatient clinics, hospitals, and home health environments. Participants currently work in pelvic health and expressed willingness to participate in semi-structured interviews and allow student shadowing (if applicable). Exclusion criteria were designed to exclude professionals not directly working in pelvic health and individuals unable to provide informed consent.

Table 2

Inclusion Criteria:	Exclusion Criteria:
<ul style="list-style-type: none">- Licensed OTs and other healthcare professionals (e.g., physical therapists, urologists, gynecologists) actively working in pelvic health.- Professionals employed in one of the three specified healthcare settings: outpatient clinics, hospitals, or home health environments.- Willingness to participate in semi-structured interviews and allow student shadowing (where applicable).	<ul style="list-style-type: none">- Professionals not directly involved in pelvic health.- OTs and healthcare professionals working outside the specified healthcare delivery systems.- Individuals unable to give informed consent.

2.2 Sampled Size

A purposive sample of 12 OTs and relevant healthcare professionals was recruited to ensure representation across outpatient, hospital, and home health settings. Table 3 shows which profession and what setting participants practiced in.

Table 3- Participant Demographics

Profession	Outpatient	Home Health	Hospitals
OT	4	2	2
PT	3		1

2.3 Recruitment Method

Participants were recruited through professional networks, occupational therapy associations, social media, and healthcare institutions known for their pelvic health services. Detailed information about the study was provided through email, phone calls, zoom meetings, and follow-up communications.

2.4 Consent Process

Participants received an information sheet outlining the study's purpose, participation details, confidentiality measures, and rights. Spoken informed consent was obtained from all participants before participation to ensure understanding and voluntary involvement.

2.5 Study Design

This mixed-methods qualitative study combined qualitative interviews with shadowing experiences to explore barriers and supports in pelvic health. Part 1 involves shadowing five professionals at Integrity Rehab in central Texas to gain insights into outpatient practices. Part 2 expands to semi-structured interviews with professionals across all three settings to explore broader experiences.

2.6 Measures

Shadowing Observations: Structured observation focused on workflow, patient interaction, and perceived barriers and supports within outpatient clinics.

Semi-Structured Interviews: A comprehensive interview guide was developed to discuss barriers, supports, and suggestions for service improvement across healthcare settings.

Thematic Analysis: Using NVivo software and manual coding with physical materials, qualitative data from interviews was thematically analyzed to identify overarching themes related to barriers and supports.

2.7 Shadowing Site Description - Integrity Rehab in Central Texas

Mission and Values

Integrity Rehab is a network of 10 locations across central Texas providing OT and PT services. Integrity Rehab's mission centers on delivering exceptional, comprehensive care, particularly rehabilitation and wellness. The facility is dedicated to improving patients' QoL through personalized, evidence-based treatment plans.

Client Demographics

The clientele at Integrity Rehab is diverse, encompassing individuals looking for treatment for a wide range of pelvic health issues. This includes patients of all ages, genders, and backgrounds, underscoring the universal need for specialized pelvic health care with a specialized emphasis on active military combatants.

Existing Programs and Services

Integrity Rehab boasts an array of specialized programs tailored to address pelvic floor dysfunction, among other conditions. These programs are designed to promote holistic wellness, incorporating both physical rehabilitation techniques and psychosocial support.

Staff Expertise

The staff at Integrity Rehab comprises a team of highly skilled OTs and PTs. Their expertise in pelvic health is bolstered by ongoing professional development and a commitment to employing the latest evidence-based practices.

Alignment with Capstone Goals

This capstone project aligns seamlessly with Integrity Rehab's overarching goals and mission. The project aims to illuminate pathways toward enhanced clinical practice, better patient outcomes, and greater professional satisfaction by focusing on the barriers and supports encountered by OTs in pelvic health. Furthermore, the insights gained from this study are poised to contribute to the academic discourse on pelvic health, advocating for its increased prominence within occupational therapy education and practice.

2.8 Data Handling and Analysis

Interview transcripts were anonymized and securely stored. Thematic analysis identified patterns and themes focusing on barriers and supports encountered by pelvic health professionals. NVivo software and manual coding with physical materials facilitated the organization and coding of qualitative data.

2.9 Ethics

The study adhered to ethical guidelines, making sure of confidentiality and anonymity. Ethical approval was gained from the appropriate institutional review board, and participants were informed of their rights and the voluntary nature of the study.

2.10 Expected Outcomes

The study uncovered specific challenges and supports experienced by OTs in pelvic health across different settings to inform strategies for service improvement and enhance the effectiveness of occupational therapy in pelvic health.

2.11 Dissemination

Results will be disseminated through academic publications, conference presentations, and professional forums to impact practice and policy in pelvic health care.

CHAPTER 3

Analysis Plan

3.1 Software Utilization and Manual Coding Technique

This study used NVivo software and manual coding with physical materials to systematically organize, analyze, and identify themes from the data collected through semi-structured interviews and shadowing observations. NVivo is known for its ability to handle rich text data, allowing for a thorough exploration of participants' experiences and perceptions of working in pelvic health. Further coding was done with printed-out interviews and appropriate color-coded highlighting.

3.2 Primary Analysis

All interview transcripts and observation notes were carefully imported into NVivo or printed for manual coding, ensuring accurate transcription and anonymization to protect participant confidentiality. The transcripts were reviewed in the initial coding phase, and codes were assigned to significant statements about barriers and supports within pelvic health practice across the specified healthcare settings.

Through axial coding, relationships were developed, leading to grouping into potential themes. These themes encapsulated the core barriers and supports identified by OTs in delivering pelvic health services. Themes were then reviewed and refined to show the data set accurately. This involves checking themes against coded extracts and the entire data set, making adjustments

as necessary to ensure consistency. The codes and themes developed were then peer reviewed to ensure accuracy.

The final themes were described in detail, accompanied by direct quotes from individuals interviewed to illustrate the findings. This thematic narrative formed the foundation of the study's results section, offering valuable insights into the experiences of OTs working in pelvic health.

3.3 Ethical Considerations

The analysis strictly adhered to ethical standards, ensuring data confidentiality and respectful representation of participants' contributions. Any potentially identifying information has been carefully managed or redacted when presenting findings.

CHAPTER 4

Results

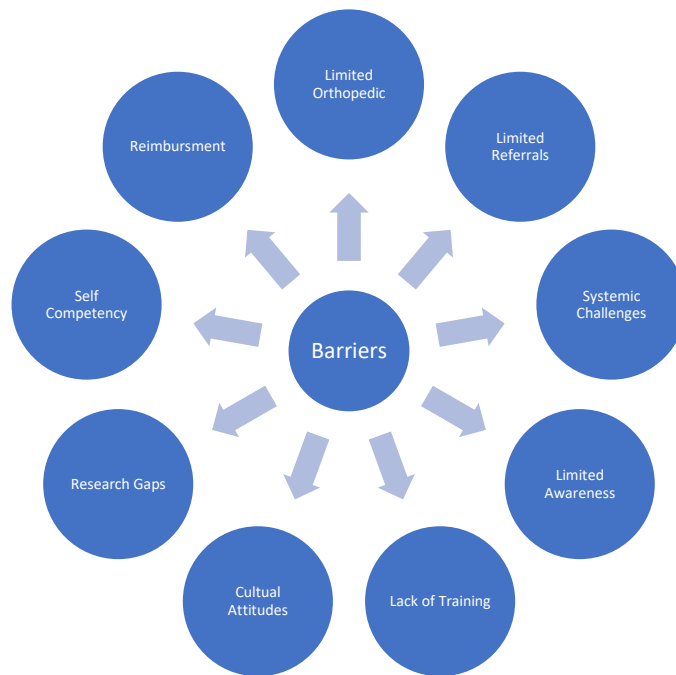
4.1 Codes Developed

Exploring barriers and supports for OTs working in pelvic health revealed a complex landscape shaped by educational gaps, systemic challenges, and the need for interdisciplinary collaboration. Identified barriers such as limited orthopedic training, inadequate referrals, and institutional obstacles underscore the necessity for enhanced education and systemic reform.

Conversely, supports identified, including professional development opportunities, mentorship, and advocacy efforts, highlight the pathways OTs can navigate these challenges. These codes not only illuminate the complexities of pelvic health in occupational therapy but also underscore the impact of a holistic, patient-centered approach that leverages interdisciplinary collaboration and advocacy to improve patient outcomes and advance the field.

4.2 Barrier Codes

Figure 1 – Barrier Codes Identified



Limited Orthopedic and Lower Body Training: OTs may need help addressing musculoskeletal aspects of pelvic health due to gaps in their education and training regarding orthopedic and lower body knowledge.

Limited Referrals: OTs in pelvic health might need more referrals, with most referrals directed towards physical therapy for pelvic health concerns.

Institutional and Systemic Challenges: These include limited reimbursement for OT services, fragmented healthcare systems, and a lack of standardized protocols, especially in maternal health.

Limited Awareness and Understanding by Patients and Healthcare: Varied levels of awareness and understanding of pelvic health among healthcare professionals and the general public, impacting patient care.
Lack of Proper Training and Education: Occupational therapists receive inadequate training regarding pelvic health in work and higher learning institutions.
Cultural and Societal Attitudes: Stigmas and misconceptions surrounding pelvic health can influence patient perceptions and willingness to seek care.
Research and Evidence Gaps: The need for expanded research initiatives and the challenges posed by gaps in evidence-based practices in pelvic health.
Lack of Belief in Self Competency: Many OTs lack awareness that they can work in pelvic health.
Reimbursement: Insurance companies have decreased the amount of money allot for PF services.

Barrier Codes Explored

OTs specializing in pelvic health face several significant challenges that impact the quality and effectiveness of their care provision. One notable issue is the limited focus on orthopedic and lower body training and PFD during their education and professional development. This gap hampers their ability to adequately address musculoskeletal aspects of pelvic health. “There is a severe lack of education about the pelvic floor in OT academics. I think it should be required in

every student's education," says Participant 4. Additionally, obtaining referrals for pelvic health patients can be difficult, as most referrals traditionally go to physical therapy for similar concerns. Institutional and systemic hurdles further complicate matters, including limited reimbursement for occupational therapy services, fragmented healthcare systems, and a lack of standardized protocols, particularly in maternal health. "The utmost biggest barrier to working in pelvic has been hospital management," Participant 2 states.

Both healthcare professionals and the general public have limited awareness and understanding of pelvic health, which affects patient care and recognition of the role of occupational therapy in this domain demonstrated by this quote from Participant 6, "There is a lack of understanding from the patient's perspective on what OTs do, but also lack of understanding within the all medical field, even like doctors don't really know what OT does or has to offer." Participant 3 echoes this concern, "People don't know what we do or how we can be part of the team." This challenge is compounded by insufficient training and education in pelvic health within workplaces and higher educational institutions, leaving many OTs feeling unprepared to handle pelvic health issues. Cultural and societal attitudes toward pelvic health also pose obstacles, as stigmas and misconceptions can discourage patients from seeking necessary care.

Moreover, there is a critical need for expanded research initiatives to address gaps in evidence-based practices in pelvic health and advance the field. Many OTs lack confidence in their ability to work effectively in pelvic health, reflecting broader issues of confidence and awareness within the profession. Participant 7 reflects on this, "Self-doubt of OTs is a problem. OTs think that they have to be really well versed in pelvic health and know exactly what they're

doing already.” Reimbursement challenges exacerbate the situation, with insurance companies reducing funding for pelvic floor services, thereby limiting access to these essential healthcare services.

Figure 2 – Support Codes Identified



Professional Development and Training: Ongoing education, specialized courses, workshops, and conferences focused on pelvic health, including manual therapy techniques, continence management, and pain management strategies.

Mentorship: Guidance from experienced practitioners and engagement in professional networks and communities.

Interdisciplinary Collaboration: Working closely with other healthcare professionals, including physical therapists, to ensure holistic care for patients.

<p>Advocacy and Policy Change: Efforts to promote awareness, secure funding for research and education initiatives, and improve access to care.</p>
<p>Trauma-Informed Approach: Utilizing trauma-informed principles in care delivery to address the different needs of individuals with pelvic health concerns.</p>
<p>Professional Passion: Personal dedication and passion for advancing pelvic health practices among healthcare professionals.</p>
<p>Support Networks: The importance of advocacy, mentorship, and the role of organizations and platforms in providing support and resources for pelvic health.</p>
<p>Holistic and Patient-Centered Care Approach: Emphasizing comprehensive care that demonstrates both physical and psychosocial aspects of pelvic health, grounded in OT's trauma-informed principles.</p>
<p>Personal Motivations and Experiences: The influence of personal experiences and motivations in driving professionals toward specializing in pelvic health.</p>
<p>Patient Advocacy and Empowerment: The role of patient advocacy and empowerment in improving pelvic health outcomes and the importance of informed consent.</p>

Support Codes Explored

The significance of continuous learning and development cannot be emphasized enough for those dedicated to pelvic health. Ongoing education through specialized courses, workshops, and conferences plays a vital role in keeping healthcare practitioners updated with the latest manual therapy techniques, continence management, and pain management strategies. Mentorship is also invaluable, providing guidance from seasoned professionals and fostering connections within professional circles. Collaboration across disciplines is crucial, ensuring occupational therapists work closely with other healthcare providers like physical therapists to provide holistic patient care.

Advocacy and policy change efforts are crucial for raising awareness about pelvic health issues, securing funding for research and education, and improving access to care. A trauma-informed approach to care, which acknowledges the diverse needs of individuals with pelvic health concerns, is gaining recognition as essential to effective practice. Healthcare professionals demonstrate a deep commitment to advancing pelvic health practices, driven by personal dedication and a desire to enhance patient well-being. “We give autonomy back to the people who have lost it. Every individual’s story with PFD illuminates something bigger, something that we (OTs) can support them with,” shares participant 5.

Support networks are vital, highlighting the importance of advocacy, mentorship, and the contributions of organizations in providing resources for pelvic health. OTs “getting loud and forming these online support groups and networks of people create a couple of huge resources” for OTs working in pelvic health says Participant 1. A holistic, patient-centered approach, addressing both physical and psychosocial aspects of health, aligns with occupational therapy’s

trauma-informed principles. The personal journeys and motivations of healthcare providers profoundly shape their decision to specialize in pelvic health, underscoring the influence of individual experiences on professional paths.

Moreover, patient advocacy and empowerment are essential for improving pelvic health outcomes and emphasizing the significance of informed consent. Together, these elements contribute to a compassionate and comprehensive approach to pelvic health, advocating for a healthcare system that supports both providers and patients in navigating these complex issues.

4.3 Axial Coding

The themes developed from analyzing barriers and supports in pelvic health among OTs and related healthcare professionals provided insights into the challenges and opportunities within this field. The themes "Navigating Systemic Healthcare Barriers" and "Empowering through Support and Advocacy" highlight the dual challenges of overcoming institutional obstacles and leveraging support networks to enhance care. Further, "Advocacy and Interdisciplinary Support as Foundations for Pelvic Health" and "Holistic and Empowering Approaches to Pelvic Health" underscore the importance of collaborative efforts and comprehensive care strategies in advancing pelvic health practices.

Additionally, themes like "Enhancing Accessibility and Cultural Competency" and "Personal Drivers and Professional Development" reflect on the personal motivations driving professionals towards specialization in pelvic health and the need for ongoing education and advocacy to foster an inclusive and informed healthcare environment. Together, these themes sketch a roadmap for

improving pelvic health services through systemic reform, education, advocacy, and a commitment to holistic, patient-centered care.

Axial Themes

Navigating Systemic Healthcare Barriers - This theme encapsulates barriers such as inadequate training, systemic healthcare issues, and management resistance. It also includes efforts to overcome these barriers through advocacy, education, and developing specialized programs.
Empowering through Support and Advocacy - This section focuses on the roles of support networks, OTs, doulas, and public health initiatives in providing care, resources, and education to improve maternal health outcomes and awareness about pelvic health.
Overcoming Systemic and Educational Barriers - Sub-themes include the need for enhanced training in pelvic health, addressing institutional and systemic challenges, and combating cultural stigmas.
Advocacy and Interdisciplinary Support as Foundations for Pelvic Health - Sub-themes focus on the crucial roles of professional advocacy, support networks, and interdisciplinary collaboration in advancing pelvic health practices.
Holistic and Empowering Approaches to Pelvic Health - Sub-themes cover the comprehensive care approach that includes patient education, empowerment, and the integration of physical, emotional, and social well-being into pelvic health services.

Enhancing Accessibility and Cultural Competency - Sub-themes focus on strategies to make pelvic health services more accessible and culturally competent, addressing inclusivity challenges and understanding diverse patient needs.

Personal Drivers and Professional Development - Sub-themes include the impact of personal motivations on career paths, the significance of continual learning, and the value of mentorship and professional networks in advancing pelvic health expertise.

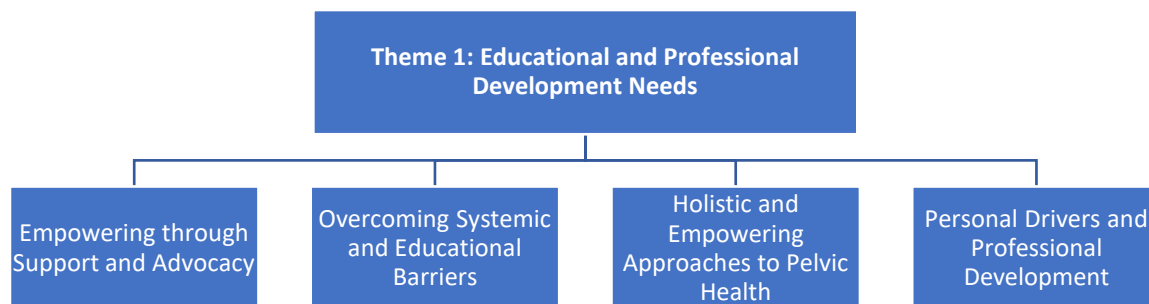
Advocacy, Research, and Policy Influence - Sub-themes emphasize the importance of advocacy for policy change, the need for more comprehensive research in pelvic health, and strategies for increasing awareness among healthcare providers and the public.

4.4 Theme Refinement

Through theme refinement, we can distill broader themes from the axial codes. Two major themes emerge:

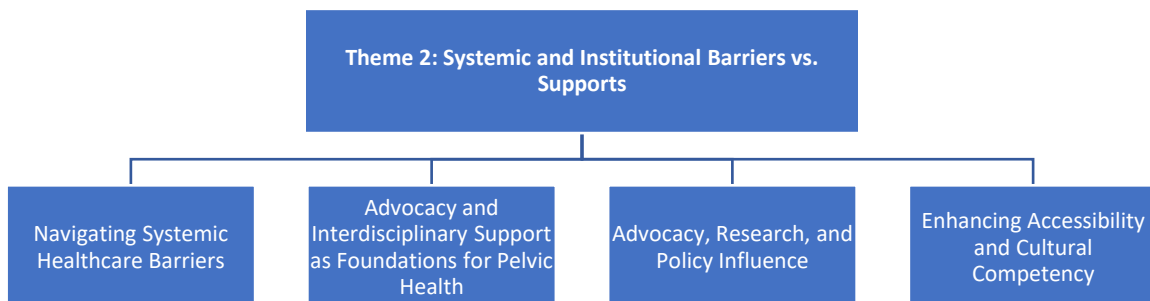
Theme 1 - Educational and Professional Development Needs: This theme encompasses the need for enhanced education and training in orthopedic and lower body aspects and specialized training in pelvic health for OTs.

Figure 3



Theme 2 - Systemic and Institutional Barriers vs. Supports: This theme contrasts OTs' challenges in navigating healthcare systems and the potential support they can receive through advocacy, policy change, and interdisciplinary collaboration.

Figure 4



4.5 Reporting Unified Thematic Analysis

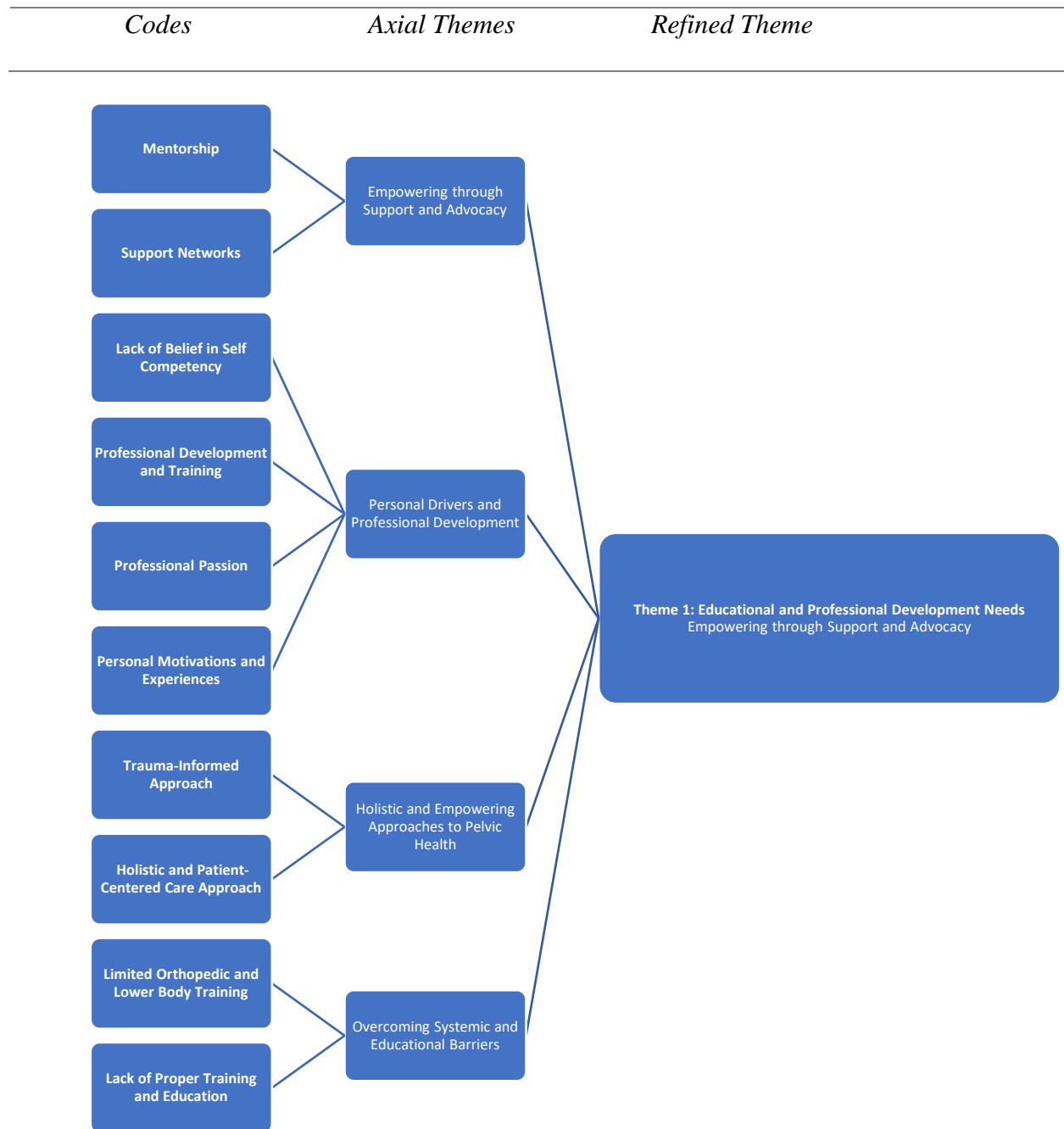
The thematic analysis synthesizes the barriers and supports identified across interviews and observation, highlighting the complex interplay between systemic challenges and the robust supports within pelvic health. Professionals emphasize the urgent need for better training, awareness, and access to care, highlighting the critical roles of advocacy, interdisciplinary collaboration, and a holistic care approach in improving pelvic health outcomes.

The additional themes underscore the importance of accessibility, inclusivity, and cultural competency in healthcare, the impact of personal experiences on professional development, and the need for a broader public health approach to address pelvic health disparities. Moreover, it highlights the necessity for ongoing research, advocacy, and policy efforts to advance pelvic health practices and improve patient outcomes.

Through this comprehensive narrative, the analysis offers a richer perspective on the role of OTs in pelvic health practice, advocating for a concerted effort among healthcare professionals, researchers, and policymakers to address the identified challenges and leverage supports for enhancing pelvic health care and advocacy for better patient outcomes.

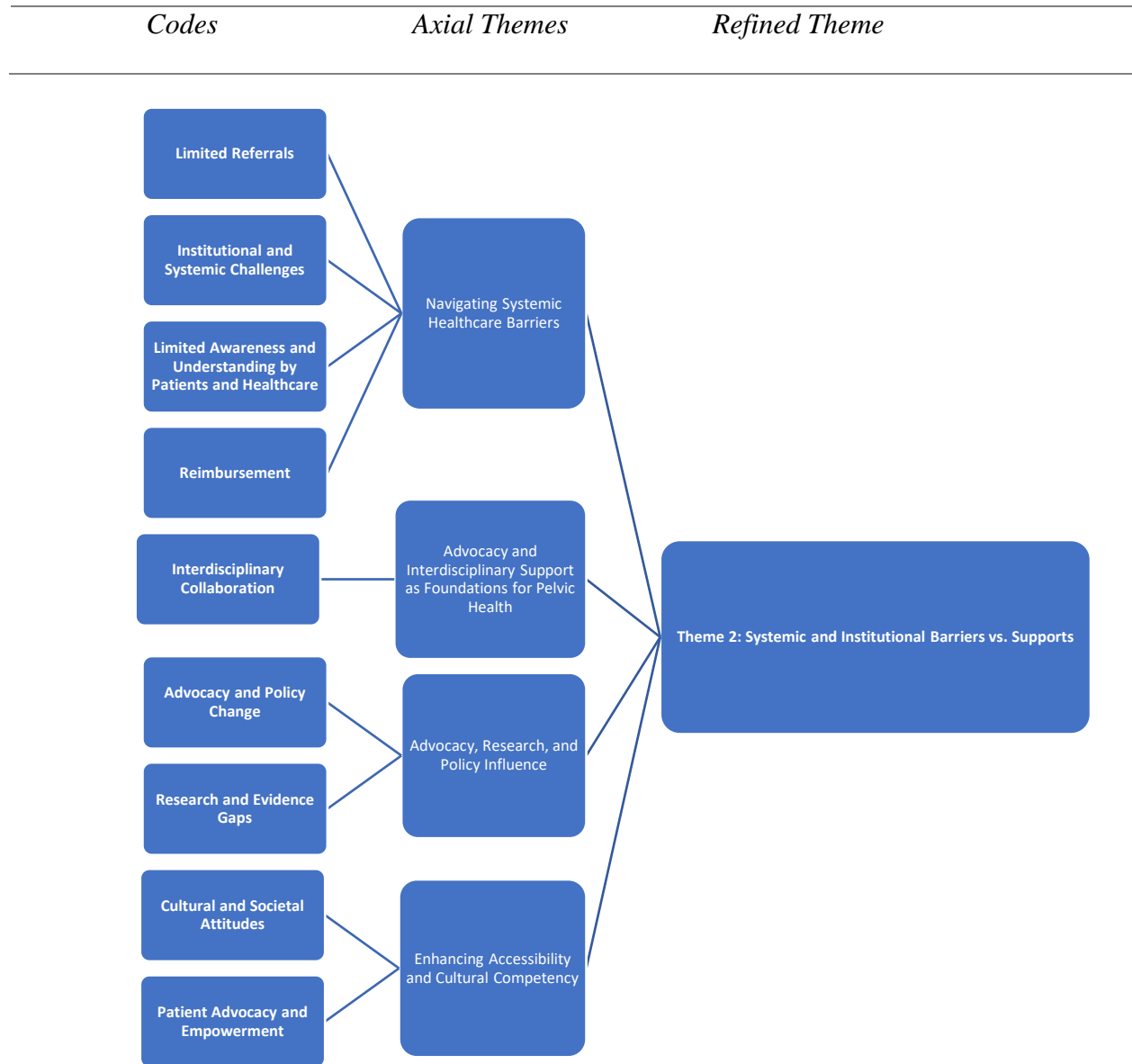
These findings demonstrate the importance of addressing systemic and educational barriers, leveraging supports, and adopting empowering, patient-centered care models. The insights provided through this thematic narrative offer an overview of the challenges and strategies for advancing pelvic health practice, suggesting pathways for future research, policy development, and practice improvement in this crucial area of healthcare.

Figure 5



(This chart demonstrates how the codes identified were categorized into axial themes then refined for one unified major theme)

Figure 6



(This chart demonstrates how the codes identified were categorized into axial themes then refined for one unified major theme.)

CHAPTER 5

Discussion

5.1 Key Insights Explored

This thematic analysis developed several pivotal themes as barriers and supports for OTs in pelvic health. This study highlights significant barriers, such as the need for more collaboration across disciplines, insufficient specialized training, and a general lack of public awareness regarding pelvic health's scope and importance. Conversely, it highlights various supports that could revolutionize occupational therapy in this area, including ongoing professional development, building resilient professional networks, and recognizing the comprehensive role of occupational therapy in promoting patient well-being. These findings illuminate current challenges and present opportunities for growth and improvement in pelvic healthcare practices.

5.2 Practical Implications Explored

The insights derived from this study emphasize the crucial need for enhanced interdisciplinary collaboration within pelvic health care. This inclusive approach, embracing diverse healthcare professionals, is critical to optimizing patient care outcomes. Additionally,

specialized training for OTs in pelvic health emerges as essential, advocating for tailored educational programs to bridge knowledge gaps and enhance practitioner competencies. Such initiatives are envisioned to catalyze transformative shifts in practice effectiveness, ultimately raising patient outcomes to new heights. These implications advocate for a paradigm shift towards holistic, integrated care delivery models responsive to the nuanced needs of pelvic health.

5.3 Future Directions

This project lays a groundwork for future research endeavors, opening avenues for enriched understanding and intervention within pelvic health practices. An essential next step involves empirically quantifying the adverse impacts of identified barriers on patient outcomes to inform targeted interventions. Furthermore, there is an opportunity to elevate and evaluate the effectiveness of interventions for PFD to dismantle these barriers. Through rigorous development, implementation, and evaluation, the occupational therapy community can pioneer a new era of pelvic health practice. This forward-looking approach promises to refine therapeutic interventions and strengthen the evidence base, fostering a practice environment aligned with patient needs and efficacy.

5.4 Limitations

In exploring the dynamics of OTs specializing in pelvic health across diverse healthcare settings, this capstone project brings forth valuable insights accompanied by certain limitations

that merit attention. The utilization of purposive sampling, although beneficial in capturing varied perspectives, inherently restricts the generalizability of findings. This sampling method might only partially represent the breadth of experiences among pelvic health OTs, particularly across different geographic and institutional contexts. Additionally, the qualitative nature of the study introduces subjectivity into the thematic analysis process. Despite employing NVivo and manual coding for systematic data organization and analysis, the interpretation of themes remains susceptible to researchers' biases and viewpoints. Relying on self-reported data through semi-structured interviews and observations presents another limitation, contingent upon participants' ability and willingness to accurately articulate their experiences, which may only sometimes align with actual practices.

Furthermore, while the study endeavors to identify barriers and supports within pelvic health OT practice, it does not extensively assess the efficacy of specific interventions or strategies employed by OTs, leaving room for further investigation in subsequent research endeavors.

5.5 Sustainability Plan

To enhance the applicability of the project's findings across similar healthcare settings and improve their generalizability, studies in the future should recruit a more diverse participant pool. This may entail broadening the geographic scope of research and exploring settings beyond the initially targeted ones. Encouraging healthcare facilities such as Integrity Rehab to adopt or

adapt the identified supportive practices while addressing uncovered barriers will be instrumental in advancing OT practice in pelvic health.

A 'train the trainers' approach will be pivotal to the action plan. By educating a select group of OTs and healthcare professionals on the project's findings, these individuals can serve as advocates within their organizations, fostering a culture of continual learning and pelvic health advocacy. As this project and results are disseminated, continuing education, advocacy, and collaboration endeavors will be made to elevate the standard of care in pelvic health, ensuring that OTs are adequately equipped to navigate the challenges and opportunities within this vital realm of practice.

CHAPTER 6

Conclusion

The capstone project on barriers and supports for OTs working in pelvic health culminates in a comprehensive exploration of the challenges and resources within this specialty area. Through this analysis, it becomes evident that systemic healthcare barriers, educational gaps, and cultural stigmas significantly impact the efficacy and reach of pelvic health services offered by OTs. Conversely, the identified supports highlight the profound potential for professional development, advocacy, and interdisciplinary collaboration to not only navigate these challenges but also to enhance the quality and create more accessibility of care for individuals experiencing pelvic health issues.

This investigation reveals the critical need for targeted educational programs, broader awareness initiatives, and policy reforms to address the nuanced demands of pelvic health care. Furthermore, it underscores the importance of fostering strong support networks, embracing holistic and empowering care approaches, and enhancing accessibility and cultural competency within healthcare services. The project advocates for a concerted effort among healthcare professionals, educators, and policymakers to leverage these insights for the advancement of pelvic health practices.

Ultimately, the findings of this capstone project serve as a call to action for the occupational therapy community and allied health professionals to engage in ongoing research, dialogue, and advocacy. By addressing the highlighted barriers and harnessing the outlined supports, there is a tremendous opportunity to improve pelvic health outcomes, advocate for patient empowerment, and contribute to evolving healthcare practices. This endeavor not only enriches the professional development of OTs but also, more importantly, advances the well-being and QOL for individuals navigating the complexities of pelvic health.

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Appendix 1



INSTITUTIONAL REVIEW BOARD

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April 02, 2024

Principal Investigator: Jade E Holloway

Key Personnel: Holloway, Jade E; Watts, Charlotte

Study Department: Georgia State University, Department of Occupational Therapy

Study Title: Barriers & Supports to Occupational Therapists Working in Pelvic Health Across Three Healthcare Delivery Systems: Outpatient, Hospitals, and Home Health

Submission Type: Exempt Protocol Category 2

IRB Number: H24387

Reference Number: 377772

Determination Date: 03/14/2024

Status Check Due By: 03/13/2027

The above-referenced study has been determined by the Institutional Review Board (IRB) to be exempt from federal regulations as defined in 45 CFR 46 and has evaluated for the following:

1. Determination that it falls within one or more of the eight exempt categories allowed by the institution; and
2. Determination that the research meets the organization's ethical standards

If there is a change to your study, you should notify the IRB through an Amendment Application before the change is implemented. The IRB will determine whether your research continues to qualify for exemption or if a new submission of an expedited or full board application is required.

A Status Check must be submitted three years from the determination date indicated above. When the study is complete, a Study Closure Form must be submitted to the IRB.

This determination applies only to research activities engaged in by the personnel listed on this document.