

Application of the Multiphase optimization strategy (MOST):

Targeting pelvic floor dysfunction in rural postpartum mothers

Postpartum women from rural communities may benefit from virtual education resources to combat barriers related to lack of knowledge and access to pelvic healthcare.

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Variables	None/Mild Symptoms		Moderate/Severe Symptoms	
	OR	95% CI	OR	95% CI
EPDS				
• Low Score	1.0	Ref	1.0	Ref
• High Score	.438	.27-.69*	2.2	1.4-4.36*
PIRQ				
• Score of <50%	4.0	.24-.65	2.5	1.5-4.0*
• Score between 51%-79.9%	1.04	.33-3.24	.95	.30-2.9
• Score >80%	1.0	Ref	1.0	Ref
Pelvic Floor Healthcare within 50 miles				
• Yes	1.0	Ref	1.0	Ref
• No	1.3	.80-2.4	1.2	.68-2.2
Accessed healthcare for pelvic floor during pregnancy				
• Yes	1.0	Ref	1.0	Ref
• No	.83	.50-1.4	1.2	.73-2.0
Accessed healthcare for pelvic floor in postpartum period				
• Yes	1.0	Ref	1.0	Ref
• No	.85	.52-1.4	1.1	.70-1.9
Number of Vaginal Births				
• 1	1.0	Ref	1.0	Ref
• 2	.75	.37-1.5	1.3	.66-2.6
• 3 or more	.44	.16-1.1	2.2	.83-5.9
Household Income				
• <\$49,000	1.6	.58-4.3	.62	.23-1.7
• \$50,000-\$74,999	45-2.1		1.0	.46-2.2
• \$75,000-\$99,999	32-1.4		1.4	.66-3.1
• >=\$100,000	1.0	Ref	1.0	Ref
Education				
• <High school degree	.44	.07-2.7	2.2	.35-14.2
• Some College/Trade School	.65	.10-4.0	1.5	.24-9.5
• Undergraduate Degree	3.1	.08-3.2	1.9	.31-12.1
• Graduate/Professional	1.0	Ref	1.0	Ref
Race				
• White	1.0	Ref	1.0	Ref
• American Indian	2.6	.57-12.0	.37	.08-1.7
• Black	1.0	.24-4.3	.97	.23-4.0
• Hispanic	2.2	.64-7.8	.44	1.2-1.5
• Asian	11.1	1.7-72.1*	.08	.01-.56
• Other	1.3	.22-7.5	.76	.13-4.4
Physical Activity				
• Sedentary	1.0	Ref	1.0	Ref
• Walking >4 hours/week	.62	.39-1.1	1.4	.87-2.5
• Sports >4 hours/week	.44	.23-.91	2.2	1.0-4.5*
• Hard Exercise/Trainer	.50	.20-1.2	1.9	.82-4.7

TPB construct	Thematic finding	Example quotes
Attitudes toward pelvic health	<ol style="list-style-type: none"> 1. Kegels are important for improving pelvic health 2. Women have a negative attitude toward their personal pelvic health 	<ol style="list-style-type: none"> 1. "I think of Kegels as an exercise that I don't do but probably should" 2. "Put simply, time is a factor, I have kids and a job and getting to PT [physical therapy] would require time and childcare"
Subjective norms surrounding pelvic health	<ol style="list-style-type: none"> 1. The Internet is a common but insufficient resource 2. Friends/family with children are a valued support resource 3. Healthcare providers are not an effective resource 	<ol style="list-style-type: none"> 1. "We don't talk about it [pelvic health] enough, I can Google Search all day long, but it's not helpful" 2. "I talk to my friends or sister that has a kid, I think it's more discussed now at least with close friends than it has been in the past" 3. "I think that [pelvic health] should be something that is discussed, um, postpartum, and it definitely was not discussed with me, whether it's in the hospital or at a postpartum visit. I mean, they didn't give me any information in regards to that or anything to help with it"
Perceived behavioral control for managing pelvic health	<ol style="list-style-type: none"> 1. Limited knowledge and time are preventing engagement in pelvic floor muscle exercises 2. Women desire new pelvic health knowledge from their primary care provider 3. Women view geography as a barrier to seeking physical therapy services 	<ol style="list-style-type: none"> 1. "I don't do it [pelvic floor exercises], I need to know like what to do, how to do it, how often to do it, what to expect from it, how to help it before I need doctor intervention" 2. "I wish they [primary care provider] would have talked to me about it more. They talk about so many things, this [pelvic health] should be one of them" 3. "I tried to do an online search for pelvic floor therapists in my area but nothing came up"

