

# PELVIC SANCTUARY

**Pelvic Health is For Every Body**



# The Team

LOS ANGELES



Badly Licked Bear, She/Her



Kalaan Scott He/Him



Reve Douglas, He/Him



Veli & Tommi of Finland, He/Hims



Kalya Tange, She/Her



Celia Daniels She/Her



Dr. Julie Wallace She/Her



Nika Charell, They/Them



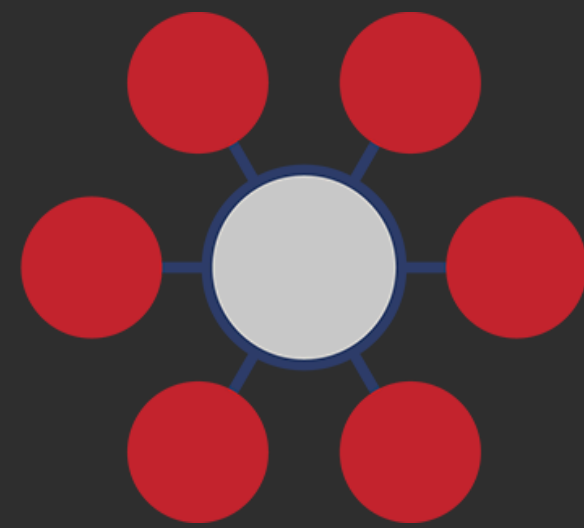
Dr. Q, He/They

**WE ARE TRANS, BIPOC, KINKY, ARTISTS,  
HEALTHCARE PROFESSIONALS, QUEER,  
SEX WORKERS.**

THANK YOU!



Spokes



Hub



**PELVIC  
SANCTUARY**

## MISSION

Pelvic Sanctuary is a nonprofit dedicated to advancing inclusive pelvic health education, advocacy, and resources for marginalized communities. We empower individuals, foster systemic change, and promote health equity through accessible programs and community-driven initiatives.

Join our **MAILING LIST**  
[www.PelvicSanctuary.org](http://www.PelvicSanctuary.org)



***Programs***

**Pop-Up Stand**

Outreach  
Zine & handouts  
Surveys/Mailing List  
Mission-aligned merch

**In-Person**

Free Community  
Workshops &  
Classes

**Virtual Programs**

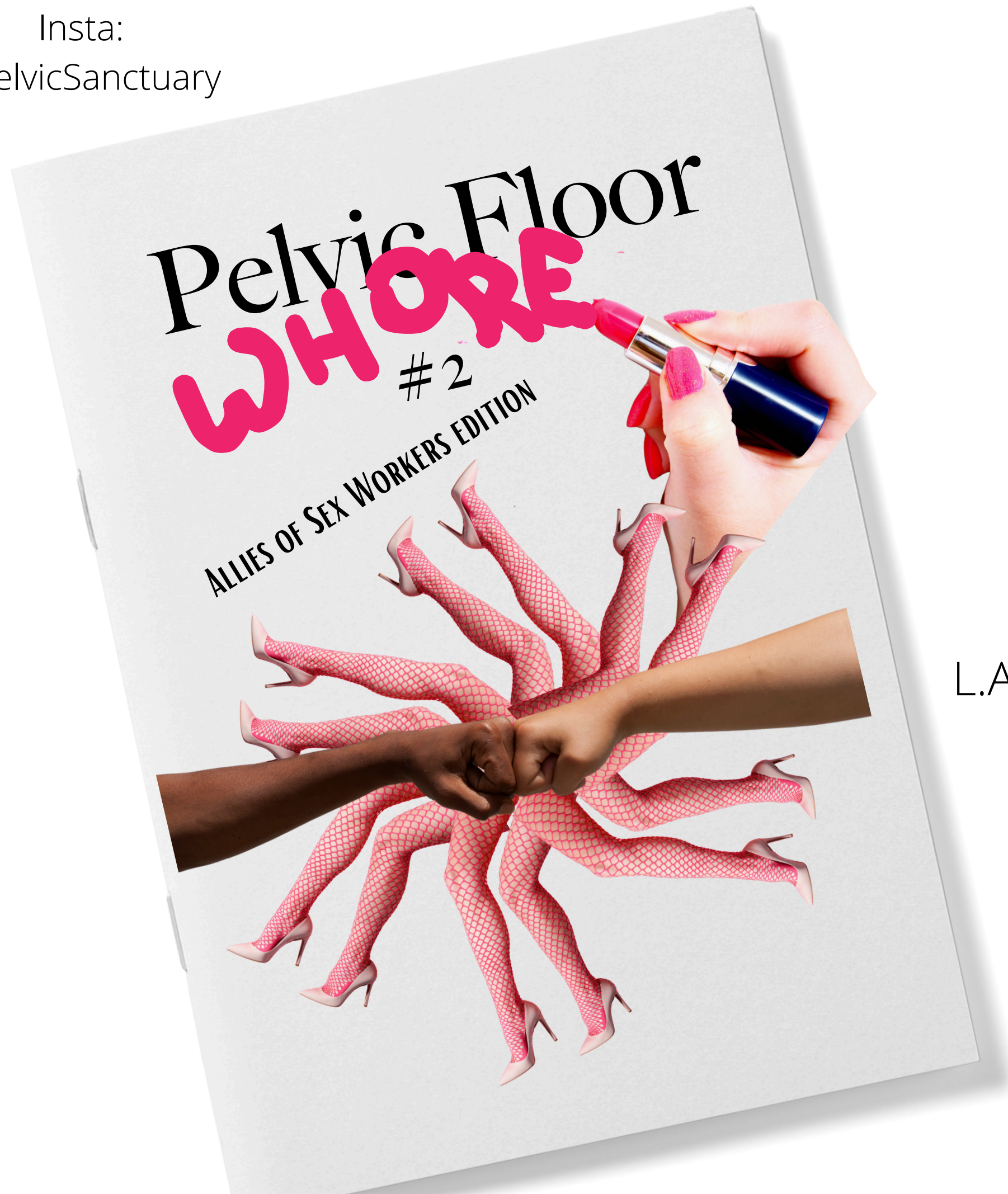
Panel Discussions  
Webinars  
Workshops  
Classes

**Website Resources**

Downloadable PDF's  
& Videos  
Certificates

**Advocacy &  
Community  
Building**

Insta:  
@PelvicSanctuary



Dyke Day LA  
Midnight Hour Records  
San Fernando Pride  
Cruise LA  
Midnight Hour Records  
LA Zine Fest  
Bullet Bar  
Sex Worker Fest  
L.A. Gay and Lesbian Chamber of Commerce  
Sunday Faire  
Akbar Silverlake  
Tom of Finland Foundation  
Children's Temple of Lilith



# What is pelvic health?



***Every Body has hips!***

***Every Body has a pelvic floor!***

### **Common Myths:**

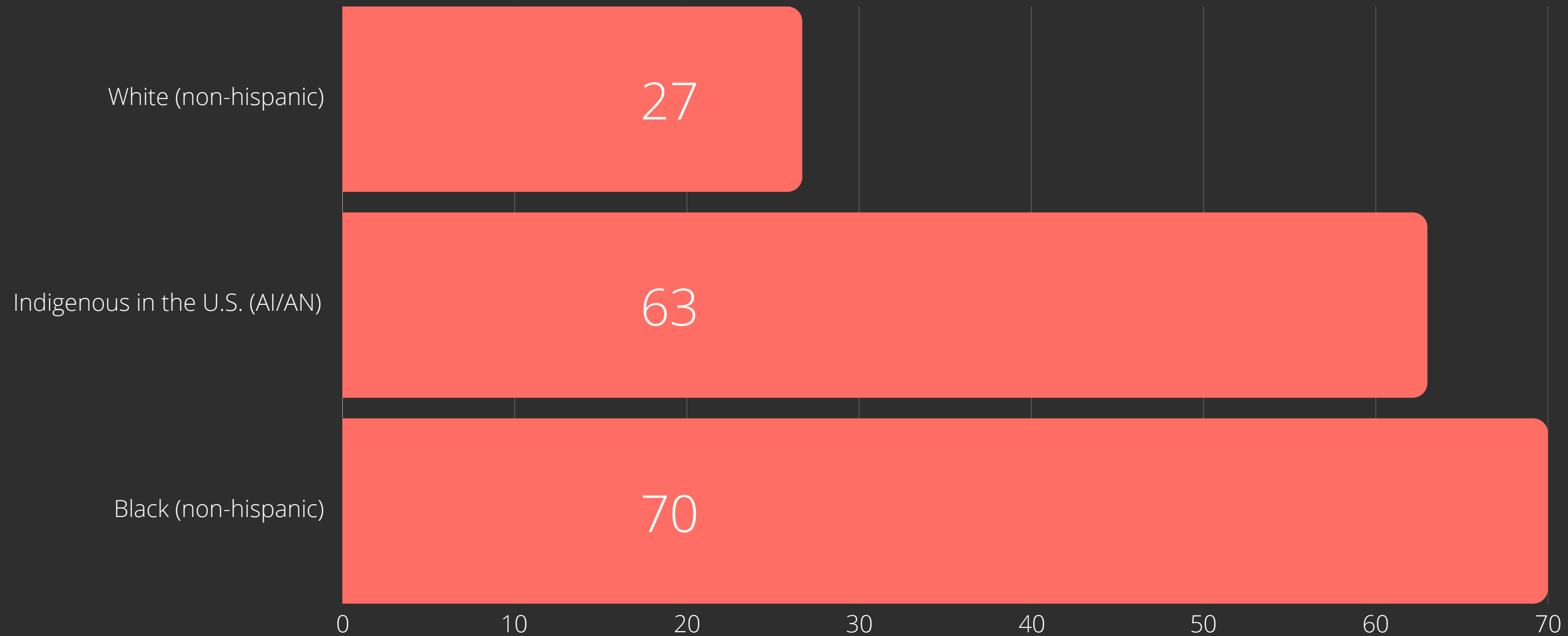
- Pelvic health is only about pregnancy and childbirth.
- Pelvic floor exercises are only for cisgender women
- Peeing your pants is normal after birth or with aging
- Trans men do not need pelvic health care.

***our most in-demand program is our Trans Men's Pelvic Health Empowerment workshop.***





**Maternal mortality rates based on 100,000 pregnancies within the United States, CDC data from 2021.**



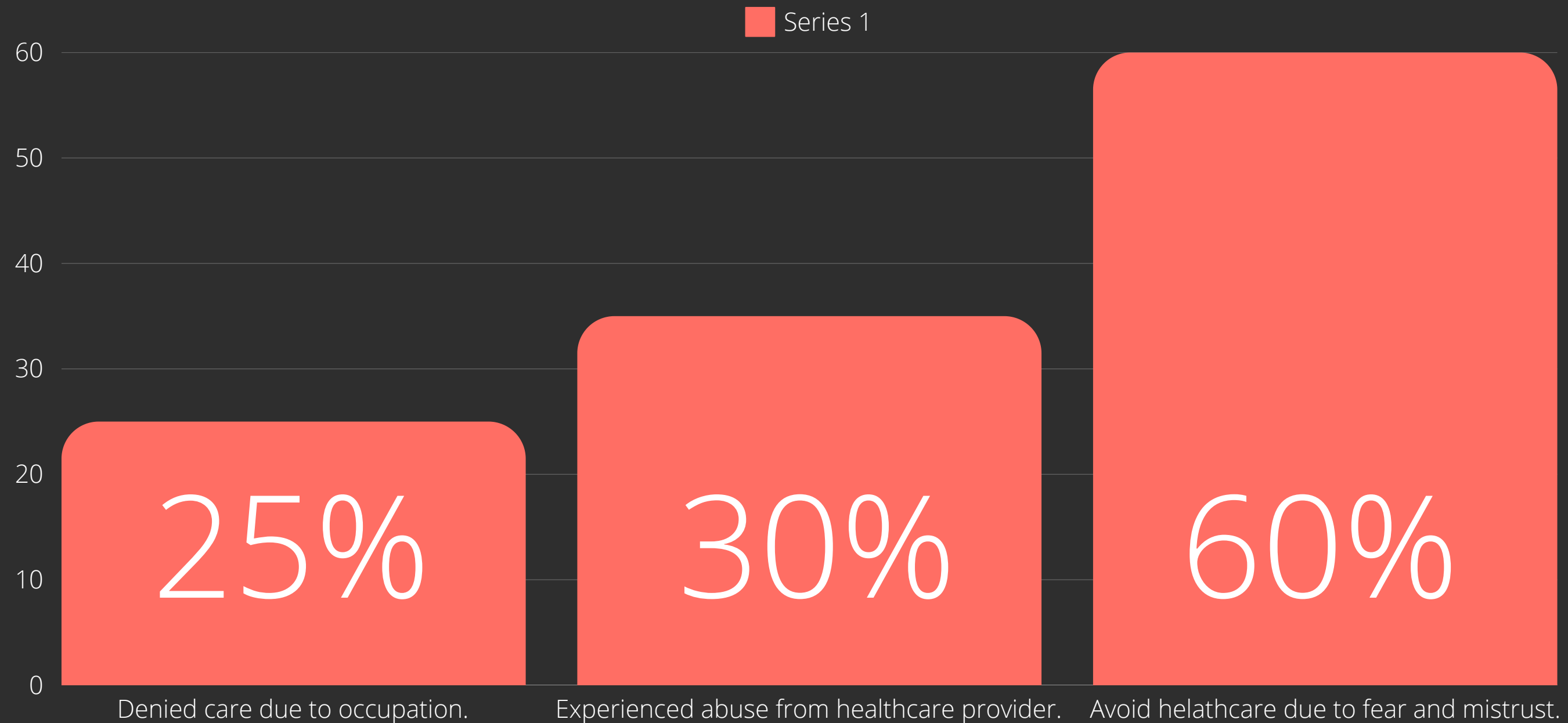
Maternal mortality rate includes deaths that occur due to pregnancy-related causes during pregnancy, childbirth, or within 42 days after the pregnancy ends.

# ***Lack of representation and cultural competency and heavy focus on athletics in the field***

- Approximately **83%** of physical therapists identify as white. -[Oxford Academic](#)
- The field is largely composed of cisgender, heterosexual women, with minimal representation from LGBTQIA+, BIPOC, or sex worker communities.
- More than **50%** of physical therapy job postings explicitly mention **sports-related rehabilitation**, while specialties like pelvic health, chronic pain, and gender-affirming care receive significantly less institutional support. (Source: APTA Workforce Data, 2023)
- **Athletic backgrounds shape PT education**—many PT students come from kinesiology and sports medicine, reinforcing a culture that prioritizes athletic recovery over diverse healthcare needs. (Source: CAPTE, 2022)
- **Insurance coverage favors sports injuries**, making it more challenging for marginalized groups to access PT for pelvic pain, post-surgical recovery (e.g., gender-affirming care), and labor-intensive jobs that don't fit traditional sports models. (Source: CMS Data, 2023)



# Sex Worker Statistics



# ***PFD: Higher prevalence and less research.***

- Specific data on PFD prevalence among sex workers is scarce, and predominantly centers around disease prevalence and transmission risks, often neglecting other critical health aspects such as PFD
- **23.7%** of [cisgender] women experience at least one pelvic floor disorder. JAMA Network
- A 2019 systematic review found that **fewer than 1%** of studies on pelvic floor dysfunction included transgender participants, highlighting a significant gap in clinical research and medical education. (Source: van der Sluis et al., 2019, Neurourology and Urodynamics)
- United States: Data indicates that approximately **13%** of transgender individuals have engaged in sex work, with transgender women being twice as likely to participate compared to transgender men.

Given the physical demands associated with sex work, sex workers likely experience comparable or higher rates of PFD. Transgender individuals face elevated risks of pelvic pain and genitourinary issues due to hormone therapy, gender-affirming surgeries, and barriers to affirming healthcare, yet research on PFD in trans populations remains extremely limited. (Source: Hsieh et al., 2021, International Urogynecology Journal)

## ***Know your rights in healthcare settings!***

- **Right to Informed Consent** – Providers must explain risks and options before performing any treatment.
- **Right to Access Your Medical Records** – You can request and review your own health records.
- **Right to a Second Opinion** – You can refuse treatment or seek another provider if you feel dismissed.
- **Right to Refuse Treatment** – No one can force procedures on you without consent.
- **Right to File a Complaint** – You can report discrimination under Section 1557 of the ACA (protects trans, BIPOC, and sex worker patients from discrimination in federally funded healthcare).
- **Right to Bring a Support Person** – You can bring an advocate, friend, or legal representative to medical visits.

**If a provider dismisses you, ask them to document it in your file (they may take your concerns more seriously).**



# ***How to Navigate Stigma and Dismissal in Healthcare***



## **Use Assertive Language**

- "I need this concern documented in my file, and I want a copy of the notes."
- "I would like to explore another treatment option. Can you refer me to a specialist?"
- "I need you to use my correct name and pronouns."

## **Bring an Advocate**

- A trusted friend, community member, or legal advocate can help ensure your needs are met.
- Some harm reduction and LGBTQIA+ groups offer patient advocates who accompany sex workers to medical appointments.

## **Know When to Walk Away**

- If you feel unsafe or dismissed, you do not have to continue with that provider.
- Request a patient transfer or use a telehealth provider who specializes in trauma-informed care.

# ***How to Navigate Stigma and Dismissal in Healthcare***



**Pelvic health can be invasive—here's how to ensure safety and respect:**

## **Before the Visit:**

- Research LGBTQIA+ & sex work-affirming providers (try QueerDoc, Open Path, RAD Remedy). Call and speak with Doctors or staff. Pelvicrehab.com (to locate pelvic PT)
- Ask the clinic if they have experience with trauma-informed pelvic exams.

## **During the Exam:**

- You can stop an exam at any time! Say, "Pause, I need a break."
- Ask for a mirror to see what the provider is doing.
- If the provider is dismissive, remind them it's your legal right to have your symptoms recorded.

## **After the Visit:**

- Request a copy of your records to ensure accuracy.
- If you experience discrimination, file a formal complaint with the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS).

## **If denied care, ask:**

"Can you document the reason you are denying treatment in my file?" (Many providers will rethink their actions.)



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## ***Treatable dysfunction names:***

1. Incontinence
2. Prolapse
3. Pelvic Pain/LB Pain
4. Dyspareunia
5. Vaginismus
6. Vulvodynia
7. Interstitial Cystitis (BPS)
8. Chronic Prostatitis
9. Levator Ani Syndrome
10. Pudendal Neuralgia
11. Lichens Sclerosus
12. Erectile Dysfunction







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***We can manage & prevent dysfunction.***

1. Pelvic Floor Exercises
2. Breathing Exercises
3. Healthy Lifestyle & Habits
4. Proper Lifting Techniques
5. Good Bowel Habits
6. Stress Management
7. Education: Know your anatomy
8. Consult with a Pelvic Physical Therapist



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## ***The Bones***

### **3 Bones about it**

1. Ilium: Broadest Part "hips"
2. Ischium: Where you s(h)it
3. Pubis (pubic)

### **Palpate Bony Prominences**

1. Ischium: Sits Bones
2. Pubis: Meets in front
3. ASIS/PSIS: "Pointy parts"

Hips= 6 fused bones. 3 bones per side:



**The lifetime risk of undergoing a total hip replacement is estimated at 25%.**

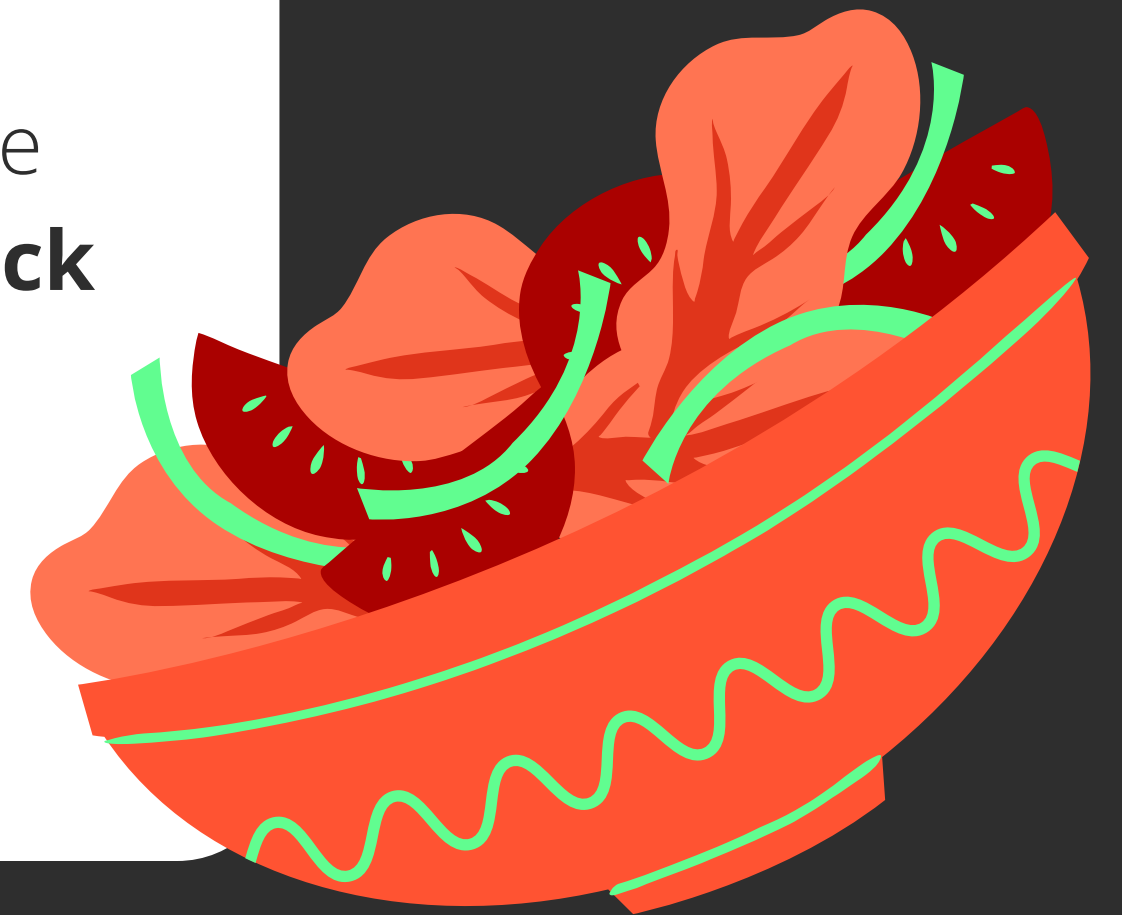
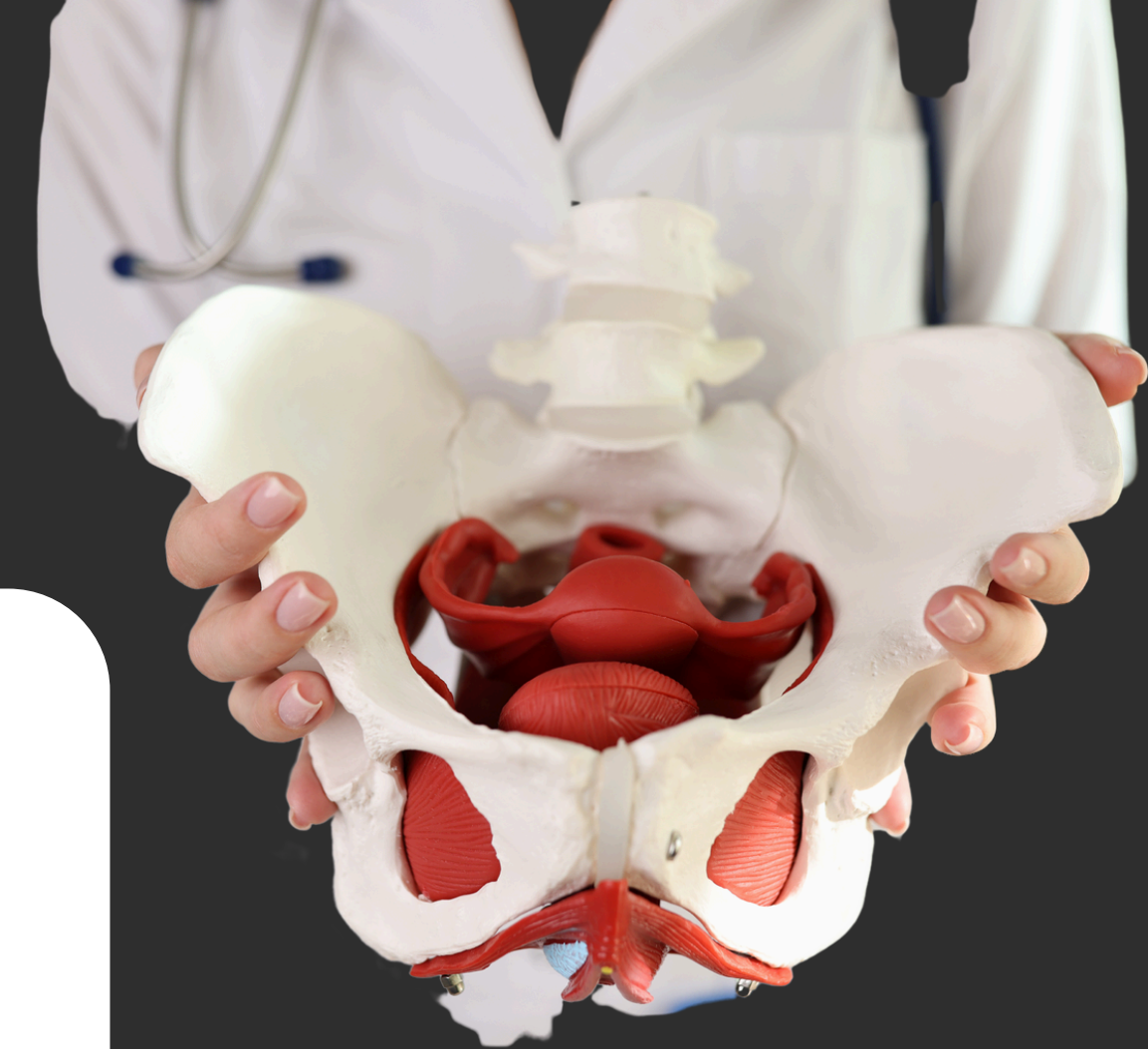


## ***The Muscles***

There are **3 layers** of pelvic floor muscles that form a bowl where organs sit in pelvis.

In pelvic PT we can work with these **internally** through **front and back holes**.

Over **30 muscles** attach to our pelvis!





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# ***Your diaphragm and PF are Besties***

Ups and Downs Together!

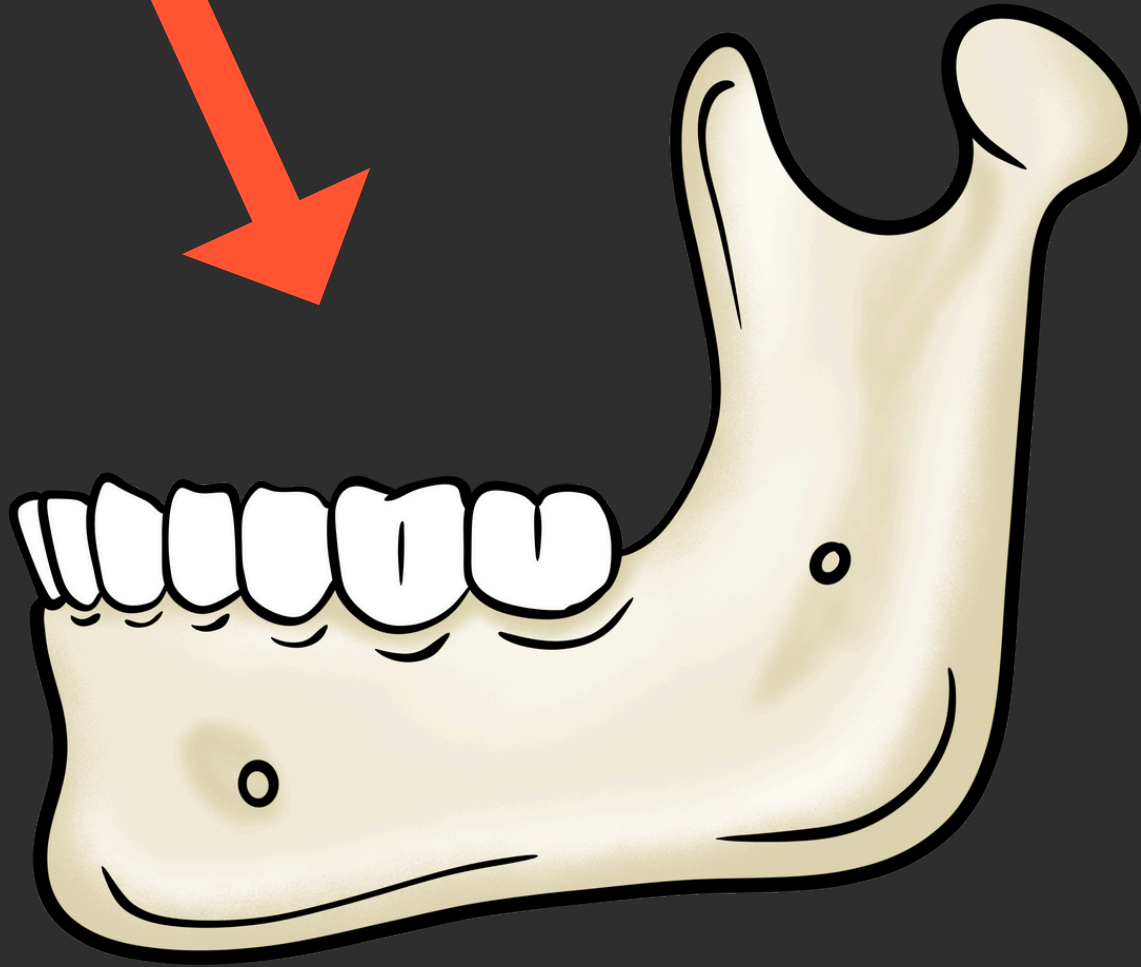




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**More pelvic  
Floor  
Connections!**

- Diaphragm
- Jaw
- Toes
- Calfs





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We know these things are essential for some folx. We focus on harm reduction and creating longevity for these practices.

**ADLs: Activities of Daily Living that affect your PF**

- High Heels
- Corsets
- Chest Binding
- Heavy Lifting





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Don't hold your  
breath!

# Positions & Gravity

Easiest to hardest for  
Kegels

1. Supine (back)
2. Seated
3. Standing





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exhale, engage PF  
inhale, relax PF

# Breath Practice

- Diaphragmatic/Belly Breath
- Lateral & Posterior Breathing
- Candle Blow







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## ***Stabilize your hips!***

- Clams
- RDL's
- Bridges
- Squats
- Bird Dogs



Stay out of surgery, strengthen your Glute Med.



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**Stretches that support pelvic health.**



- Open Books: Thoracic Spine
- Figure 4: Piriformis
- Frog Pose: PF tension
- Child's Pose
- Cat-Cow

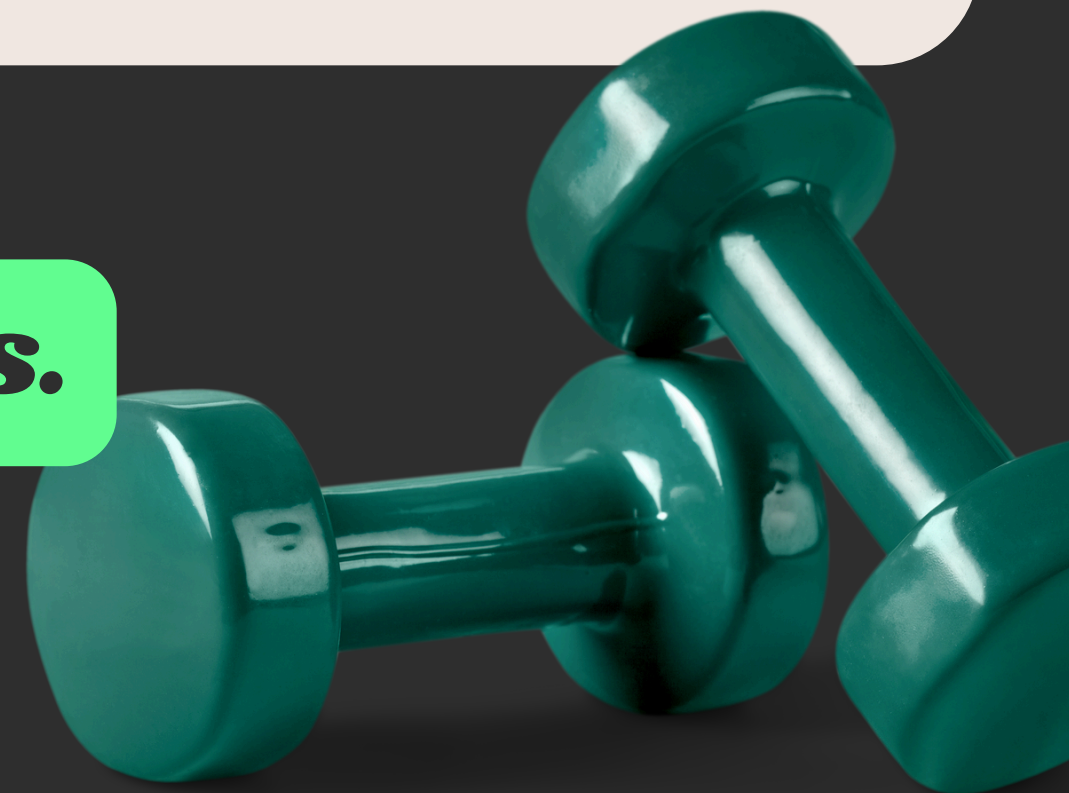


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## **Dynamic Kegels**

- Step/Return
- Walk
- Squat-Engage on Up
- Lunge: Front, Back, Side
- Jump
- Run
- Step up/down (stairs/curb)

***Add small weights.***



**Please join our mailing list at  
[www.pelvicsanctuary.org](http://www.pelvicsanctuary.org)**

- **Share testimonials about your experience in this class.**
- **Get involved (Los Angeles/Detroit/Virtual programs).**

**[info@PelvicSanctuary.org](mailto:info@PelvicSanctuary.org)**

