PRESIDENT’S MESSAGE

Dear Colleagues,

I hope this newsletter finds you all safe and well. There has been much strife in the world in past months; my thoughts are with all who have been in the crossfire. Life in the United States is slowly returning to normal after the events of September 11th, but life will never be completely the same. Security issues abound and there remains a deep sense of sadness over the losses sustained and the vulnerability exposed on that terrible day.

I want to save the bulk of this report to present to you a draft of a position paper proposed by the WCPT executive committee. I have reprinted most of it below. The intent is to help clarify the role of subgroups and to standardize how we present ourselves. There is one significant change in their proposal with regards to the formation of subgroups; that is, they are requiring ten, versus six, membership countries necessary before an application can be submitted. This does not affect us, as we have more than ten and are already recognized, but the EC of IOPTWH may decide to respond to this change with a compromise. Discussions amongst us are ongoing. Also of note, is the requirement that each subgroup be reconfirmed at each general business meeting of the WCPT (i.e., every four years). We should be able to meet their criteria that are listed in this position paper draft.

So, please look over the draft and send any comments or concerns to any of the EC.

I am still searching for a chairperson for the publications committee. I will start twisting arms soon! It is not too late to suggest someone!

All the best,

Jill Boissonnault, President

(Continued on page 2)
PRESIDENT'S MESSAGE (continued)

Excerpts from a draft of WCPT Position Paper on Subgroups

1. PRINCIPLES (these are suggestions from WCPT on how subgroups should conduct themselves…JSB)

<table>
<thead>
<tr>
<th>Partnership and unity</th>
<th>Subgroups link WCPT to the frontline of the international profession. The profession gains strength and unity under the umbrella of one international body.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inclusive &amp; representative</td>
<td>Subgroups concern themselves with and represent the international profession across differences in development, culture and language.</td>
</tr>
<tr>
<td>Dynamic &amp; flexible</td>
<td>Subgroup growth should reflect the development of the profession. Structure and processes should reflect variation in need, interest and styles.</td>
</tr>
<tr>
<td>Continuity and Sustainability</td>
<td>Any structure for Subgroups must be affordable and sustainable both as the number of groups expands and through changes in WCPT and Subgroup leadership.</td>
</tr>
<tr>
<td>Transparency</td>
<td>Criteria, roles and responsibilities must be clear.</td>
</tr>
<tr>
<td>Independence</td>
<td>WCPT and Subgroups are independent organisations in their own right. The relationship defined through Subgroups is intended to be a partnership to strengthen each group and the profession.</td>
</tr>
</tbody>
</table>

(This is an area that WCPT is considering changing and that the IOPTWH EC will be commenting on)

5. CRITERIA

- Ten (10) members from at least 3 WCPT Regions

**Requirement:** List all members indicating support of the relevant WCPT Member Organisation.

**Rationale:** When Subgroups were established WCPT had far fewer than the current 93 Member Organisations. Members from a significant number (10%) of Member Organisations and across a majority of WCPT Regions must be interested to demonstrate a true international interest.

- Represent an area of physical therapy practice or occupational group. Where the area is narrow or groups are small, consideration should be given to establishing an umbrella group.

**Requirement:** Submit a statement describing the area of practice or occupational group represented and the contribution the group can/will make to WCPT. Where there is a close link to a group already in existence, describe benefits of independence.

**Rationale:** Demonstrates a clear link between the area of special interest and the international description of physical therapy. Also demonstrates commitment to WCPT. Method based groups are not considered appropriate for Subgroup recognition. With the formation of Regions in 1991, it is no longer necessary or appropriate to consider groups based on geography for Subgroups recognition.

- Accept principles on which Subgroups are based and agree to be a consultative group/resource to WCPT and others. Also agree to promote the organisation as a Subgroup of WCPT. (cont’d on Page 5)
IOPTWH EC Responses to Suggestions from ACPWH Brainstorming Session

The figure in brackets indicates the number of times this suggestion was made.

- Develop something to find out what other members are doing (3); inform membership what is included in undergraduate education in women’s health in various countries (1);
  We will ask Shannon Michels, newsletter editor, to begin a column that highlights women’s health PT in one member country, per issue. This might take the form of replies to a questionnaire, so each chief delegate would be supplying similar information. One of the questions could relate to curriculum covered in entry-level education programs on women’s health.
- Hold an international conference (3)
  We will have a presence at the next WCPT congress in Barcelona. This will include a pre or post-congress course on Obstetrics. The details are still being worked out. It will be a one-day seminar. Look for advertisement of this in the coming 6-8 months.
- What can be done for international issues such as female circumcision? (3)
  The IOPTWH executive is very much against the practice of female circumcision, but before the IOPTWH can take a formal stance against any issue, the general membership must discuss and vote on a motion made in response to the issue. The EC recommends that any member country wishing to have this issue discussed in Barcelona, should make a formal motion to the EC in order that the issue get on the agenda for the general business meeting of the IOPTWH
- Links and abstracts from the national conference (1)
  The EC suggests that ACPWH make a motion for the general business meeting in Barcelona that would encourage all IOPTWH member countries to provide a summary of their annual conference proceedings to the newsletter editor after these conferences have concluded. The EC agrees that sharing such information would allow members insight into what various member country’s educational priorities are.
- Website with message board, job availability and exchange of information (1)
  IOPTWH can now be found at WWW.Physiobase.com. There is an interactive bulletin board available as well as a job site. These functions are not limited to IOPTWH, but the bulletin board is listed by ‘IOPTWH’. One can find continuing education seminars in women’s health, as well.
- Advice to other countries on women’s health (1)
  The EC is working on a plan to connect with WCPT member countries that are not current members of IOPTWH. We will notify them of our existence and ask if they need assistance in the area of women’s health. This could take the form of providing consultants, or sending them information on curricula in entry-level educational programs, or allowing for exchange of therapists (mentoring). The EC is going to leave the options open and then see what we are being asked to do. We may need member countries to step up and assist countries within their geographical region. Many countries already partake in such exchanges and we will use them as models.
    Currently, we respond to inquiries as they come in and try to find appropriate resources within our current structure to address the requests.
- Contact all members of WCPT at Congress, to encourage membership (1)
  This is one of the main reasons we had the IOPTWH brochure printed. We will place one at the desk of each delegate at the WCPT general business meeting. This is the usual way of providing information at this meeting.
- Teaching resources /Database of Lecturers (2)
  This response was a bit vague, but the IOPTWH has asked individual members to notify Lena Nilsson-Wikmar (lena.nilsson-wikmar@gym.ki.se), the Chair of the Research and Education (cont’d on page 4)
Committee, of post-graduate programs in women’s health PT. We want Lena to publish this information in the newsletter periodically.

If the ACPWH group was in search of speakers who wish to provide seminars, internationally, then this might be accomplished via a survey in the future. This information could be housed on the web site. The EC will consider this at the next EC meeting in Barcelona.

- **Sharing research projects – multi centre research in different countries (1)**
  Wow! It’s hard enough to get single centre research going, or multi centre within one country so this might be more than one would want to handle, but the IOPTWH membership roster and roster of chief delegates should provide contacts for those wishing to pursue such lofty projects!

  In addition, Lena Nilsson-Wikmar has issued a call for a listing of research projects going on in our member countries in women’s health PT. We hope she will begin a column on this in the newsletter in coming issues.

- **Exchange of posts – sabbatical (1)**
  One of the objectives of IOPTWH is to promote international networking. However, it is beyond the ability of the organization to foster the actual exchanges. We encourage individual members to contact delegates from other countries and query about the availability of such exchanges directly with that country’s PT’s.

- **International recognition of qualifications (1)**
  This task is not within the organization’s focus for at least the near future. Educational standards vary so much from country to country that it is a very difficult task to consider international recognition. There may be a time in the future when the education committee wishes to take up the task of standardizing a course, or series of courses, that would qualify a therapist for some sort of certificate in women’s health PT. This is a complex task and one we, as a young organization, are not ready for. The EC recognizes that there may be considerable interest in this so we may discuss it at our next business meeting.

- **Can each member have an IOPTWH leaflet? (1)**
  IOPTWH brochures may be obtained from chief delegates. Individual members are encouraged to let their chief delegates know of any such needs. Information on the mission and objectives of the organization may be downloaded from the organization’s web site: As of early spring, 2002 this could still be found at: [www.apta.org/womenshealth](http://www.apta.org/womenshealth), then clicking on the IOPTWH sidebar. This site will be moving and our site will be changing, so watch the newsletter for information on these changes. (It is now at [www.physiobase.com](http://www.physiobase.com))

**IOPTWH Executive Committee. Spring, 2002**

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Address/Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>JILL BOISSONNAULT</td>
<td>7420 Kenyon Drive, Middleton WI, USA 53562</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:Jboissonna@aol.com">Jboissonna@aol.com</a></td>
</tr>
<tr>
<td>Vice-President</td>
<td>KARI Bo</td>
<td>PO Box 4014, Ulleval Stadion, N-0806, Oslo, Norway</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:Kari.bo@nih.no">Kari.bo@nih.no</a></td>
</tr>
<tr>
<td>Secretary</td>
<td>REBECCA G. STEPHENSON</td>
<td>335 Main Street, Medfield, MA, USA 02052-2045</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:rgspt@mediaone.net">rgspt@mediaone.net</a></td>
</tr>
<tr>
<td>Treasurer</td>
<td>GILL BROOK</td>
<td>Burras Lynd, Burras Lane, Otley, LS21 3ET, United Kingdom</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="mailto:Gill.brook@lineone.net">Gill.brook@lineone.net</a></td>
</tr>
<tr>
<td>Member At Large</td>
<td>SUE JONES</td>
<td><a href="mailto:Sue.jones@curtin.edu.au">Sue.jones@curtin.edu.au</a></td>
</tr>
</tbody>
</table>
Continuing recognition

The Executive Committee recommends the reconfirmation of Subgroup status at each General Meeting. To meet the requirements Subgroup responsibilities are to:

- Comply with WCPT Articles for Subgroups.
- Submit articles, accounts, reports and other information to the EC as requested.
- Submit amendments to articles for approval of WCPT EC.

6. RESPONSIBILITIES AND RIGHTS

Decision-making

- Subgroups may send a delegate to WCPT GM. The delegate will be formally recognised and has the right to speak. Subgroups do not have the right to propose or second motions or to vote.
- WCPT will develop guidelines in collaboration with Subgroups and Member Organisations illustrating how Subgroups and their members can work with and through Member Organisations in WCPT decision-making.
- In areas germane to their area of interest, Subgroups will be invited to speak and provide input.
- The WCPT President and Secretary General may attend Subgroup General Meetings as observers.

Communication

- WCPT and Subgroups will exchange information (i.e. newsletters, meeting materials), contribute to each other’s publications as appropriate, and will include website links.
- Joint meetings of Subgroup and WCPT representatives will be organised regularly for information exchange and mutual support.

Policy and planning

- Subgroups will be invited to provide input in WCPT strategic planning.
- Partnerships among between Subgroups and with WCPT will be established to address relevant issues internally and with external bodies (i.e. WHO) and in the organisation of activities and events (i.e. WCPT congress).

Finance

Apply fee for service principle in provision of additional services. Consider financial arrangements and cost sharing for joint projects.
An Educational Program Review: Postgraduate Certificate In Continence And Pelvic Floor Rehabilitation At The University Of Melbourne, Australia.

By Kari Bø

Following my three-year period as an elected Vice Chancellor at the Norwegian University of Sport and Physical Education, I was granted six months sabbatical. In Norway there is encouragement by the universities to spend part of this or the whole time abroad. It therefore was very good timing for me to be invited by Professor Joan McMeeken and lecturer Margaret Sherburn at the University of Melbourne, Faculty of Medicine, Dentistry and Health Sciences, School of Physiotherapy to spend three months as a guest professor sponsored by the Windemere Foundation and the Jean Hailes Foundation. In addition to having an absolutely wonderful time with very skilled and nice PT colleagues in metropolitan Melbourne, Australia, I spent my time supervising master and PhD students, giving public lectures, planning new research projects, and teaching at the university course in Continence and Pelvic floor Rehabilitation. I also gave a lot of workshops to the Women’s Health physiotherapists in other cities in Australia such as Adelaide, Perth, Albury, Shepparton, Sydney and Brisbane.

The postgraduate university course in Melbourne was created because of the expressed needs of the Continence and Women’s Health group of the Australian Physiotherapy Association in Victoria. Incontinence had previously been the domain of gynaecologists and nurses (containment and surgery) with very little heed taken of pelvic floor muscle training. The nurses in Australia have a short professional course, which leads to the title of Nurse Continence Advisor. Although physiotherapists were doing continuing education courses, the professional association and physiotherapy’s regulations did not permit to give any form of title. The only way to be seen as specialists was to gain a recognized university qualification specifically in the area of pelvic floor rehabilitation and continence management. Luckily, Margaret Sherburn, an active, enthusiastic and experienced PT within the area of pelvic floor and exercise science, was in charge of Women’s Health issues within the undergraduate program at the School of Physiotherapy. She took the challenge to set up the course together with Elizabeth Tully, and in 1998 the first cohort of students graduated.

The course is a one-semester postgraduate university course but taught in block mode full time over 4 weeks in February each year, with assignments and clinical placements being completed over the rest of the semester. The course uses problem-based learning principles, and the students are required to do a lot of self-studying. Evidence based practice is a key issue throughout the course, and there is a lot of emphasis on teaching students how to find and critically appraise scientific papers in this specific area.

The block mode of teaching has made overseas and interstate students able to come to Melbourne to do the course, yet complete their learning in their home environment. The course is also accredited for overseas students to come to Australia on student visa. So far six overseas students have taken the course, two from the Netherlands, two from Singapore, one from Luxemburg, and one from Canada. There is a maximum of 20 students per year, and it is possible to split the course into two blocks of 14 days each.

The course seems to have made an enormous impact on changing continence management in Australia. Physiotherapists are now seen as key members of the continence team, rather than peripheral. No continence clinic in Victoria would think of setting up a program without having a physiotherapist on staff.

I was very impressed about the high scientific level of the course and the skills achieved by the students. I highly recommend it for those who want to specialize in this particular part of Women’s Health. It is open for physiotherapists from all over the world, and one of the advantages for the participants is that in addition to getting high quality education they are awarded a postgraduate certificate from one of the most prestigious universities in Australia.

For further information please contact lecturer Margaret Sherburn. School of Physiotherapy, Faculty of Medicine, Dentistry and Health Sciences. The University of Melbourne, Victoria 3010 Australia. Phone: +61 3 8344 4171 Fax: +61 3 8344 4188 e-mail:m.sherburn@unimelb.EDU.AU

Kari Bø
Professor, PhD
Vice president IOPTWH
Greetings from the United Kingdom, where we are experiencing a drier-than-usual spring. Whatever happened to those April showers?

You will see from the figures below, that our expenditure over the past 6 months has been considerable, due largely to the cost of bringing our president, secretary and vice-president to England, for an executive committee meeting in October 2001. Other payments include the salary of our excellent administrative assistant, Barb Savi, and production of the T-shirts. Our income is from dues payments, T-shirt sales, and bank interest.

Please can I remind those countries who have not yet paid, that the 2002 dues are now overdue, and prompt payment would be most welcome!

Transactions October 2001 – March 2002:
Income £ 4161.87
Expenditure £ 4218.01
Current funds £6291.29

A short report from the Nordic Seminar, Fall 2001 on "Pelvic pain during pregnancy: What do we know - and how will we go on" By Lena Nilsson-Wikmar

The subgroup for women's health in Norway arranges this annual seminar with about seventy participants. Most of them came from Norway but also some from Sweden and one from Iceland.

The seminar was held in Bergen the very nice town on the Norwegian west coast. The weather was lovely and the seminar was very interesting. Professor and physiotherapist Kari Bø started with a lecture about Women's Health - A Challenge For Physiotherapists. Physiotherapist and social anthropologist Eli Heiberg talked about a project in the Barents region looking at the circumstances for pregnant women in the northern part of Norway and the northwest of Russia, two countries very close to each other but with totally different conditions for pregnant women.

The Nordic group (physiotherapists and doctoral students Hanne Albert from Denmark, Siv Mörkved and Britt Stuge from Norway and Lena Nilsson-Wikmar from Sweden) dealing with back pain and pregnancy presented different topics in the area for example; classification, definition, causality and treatment of back pain during pregnancy. The presentations were based on systematic and critical review of articles in the area.

Also two intervention studies (physiotherapist Kari Straume Haugland and Britt Stuge) and one qualitative study (physiotherapist Eva Haukeland Fredriksen) were presented.

The seminar was concluded with some workshops on the examination and treatment of pelvic pain during pregnancy and overall was very well attended.
UPCOMING EVENTS

Incontinence and Pelvic Muscle Dysfunction
Sponsored by The Biofeedback Foundation of Europe
May 3, 2002 Southfield, MI
June 7, 2002 Philadelphia, Pennsylvania, USA
Contact-Vickie Gaves, 514-489-8251 extension 135 (phone), 514-489-8255 (fax) or workshops@bfe.org

Vulvovaginal Pain Disorders
Sponsored by the Biofeedback Foundation of Europe
October 2, 2002, Toronto, Ontario Canada
November 2, Austin Texas, USA
December 14, Fort Lauderdale, Florida, USA
May 11 London, England
Contact- Mark Schwartz, 514-489-8251 extension 134 (phone), 514-489-8255 (fax), projectmgr@bfe.org

Association of Chartered Physiotherapists in Women’s Health Annual Conference 2002
Edinburgh Conference Centre, Heriot-Watt University,
Edinburgh, Scotland
4-6 October 2002
For program and application details, please contact Gill Farquharson on drgfarquharson@hotmail.com

International Society of the Pelvic Floor
3rd International Conference on the Pelvic Floor: The Pelvic Floor: Past, Present and Future
Montreal, Quebec, Canada
3 days between August 10-16, 2002
Contact Lucie Lapierre Lucie.lapierre@chus.qc.ca or pelvic@coplanor.qc.ca

International Continence Society
32nd Annual meeting
Heidelberg Germany
August 28-30, 2002
Visit www.ics2002.info for much more detailed information

14th WCPT International Congress and 15th General Meeting, Barcelona, Spain, 7-12 June 2002

The IOPTWH will be having its general business meeting, June 5th or 6th.
Visit the website, www.wcpt.org for more information and program details. Don’t forget that the Education Committee is planning to host a course on “Low Back and Pelvic Girdle Pain in Pregnancy: Current Research and Implications for Physical Therapy”, in Barcelona.