

Pelvic Floor and Diastasis 6 Part Course

Part 4: Pelvic Floor Exercises

How to get the pelvic floor to let go: Pelvic floor tightness is a big issue for building pelvic floor strength. Use breathing and hip movements to get the pelvic floor to let go

Seated Side Breathing



- Sink into one hip and open the ischial tuberosity a bit
- Wrap fingers around the side, thumb is in front
- Inhale into your hand, weighting that sit bone more while leaning to the opposite side through your torso
- Inhale down, relaxed exhale
- Move your hand down and see if you can inhale lower, eventually breathing into the pelvic bowl
- Switch sides and repeat
- Compare the two sides
- Try it in side-sitting

***Note:** Be aware of birthing positions and potential trauma (even if it's not recognized as trauma), as this can affect how someone can connect to their muscles in a position. If someone is struggling or not making connections, change positions.

Hands and Knees with Hip Shift



- First side: Right leg on book or block, weight mostly in right leg (80%) and let the left hip sink toward the ground
- Pull/lift the left leg up using the left adductor, squeezing the left femur back up into the socket. You may feel a natural pelvic floor lift
- While you are pulling with the adductor, you are also pushing from the right glute medius to help shift the left side up
- Be sure to shift straight up and not side to side, do not scrunch through the torso, stay long
- Switch sides

Compare sides

- Which side did you feel had more mobility?
- How did it feel using the adductor and glute medius? Could you feel it equally in both muscles on both sides?
- What is happening at the pelvic floor?

Feel: Lifting leg adductor, down leg glute med, abs

Do not feel: Pinching in front of hip, back, pinpoint glute, hip flexors, neck

Split Stance Hinge with Airplane: Release Hip and Pelvic Floor Area



- Hold on to a chair for support
- Split stance with 80% of the weight in your front leg, 20% of weight in your back leg
- Pull back with your front leg and forward with your back leg
- Hinge down, opening the glute of your front leg while maintaining the opposing pulling action in your legs
- Don't tuck your pelvis or fall into an anterior pelvic tilt
- Keep some lower ab tension
- Pull down with the front hip to turn your pelvis toward the front leg
- As you come down into internal rotation, your knee goes back a bit
- You should feel your front leg adductor and hamstring working as well as the front glute opening
- Push away through your hip as you go into external rotation, knee goes forward a bit
- You should feel the front glute working
- Front knee should not collapse in or turn out as you do the movement
- Hold each end range position and breathe as you try to work into the range a bit more
- Make sure you're actively holding and not collapsing into end range positions
- Compare sides



Split Stance Hinge with Airplane: Release Hip and Pelvic Floor Area (Continued)

Troubleshooting tips:

- If you feel a pinch in the front of your hip as you go down, make sure you didn't fall into an anterior pelvic tilt. Find more front leg hamstring and lower abs.
- If you find that you roll to the outside of your foot as you rotate out, put a small towel roll under your arch to stay connected with it as you move.
- Compare sides and then assess your pelvic floor function.

Feel: Front hamstring, front leg adductor contracting and glute lengthening as you lower, front leg glute max as you lift back up, maybe lower abs

Do not Feel: Pinching in front of hip, knee pain, quads, hip flexors, back, burning or working in center of front leg glute