



## MOMentum Lost: Unpicking Maternal Physical Activity Patterns in 2022

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## Authors

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## Acknowledgements

We extend our gratitude to UK Sport, ukactive, and the Perinatal Physical Activity Research Group (PPARG) at Canterbury Christ Church University for their support in the design and distribution of the survey. We'd also like to thank Matthew Northcote for his noteworthy contribution to the data analysis. The collaborative efforts of these individuals and organisations underscore a shared commitment to advancing knowledge and understanding of physical activity engagement during the childbearing years.

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# Foreword

It is with great pleasure and a sense of urgency that we present the findings of The Active Pregnancy Foundation Annual Survey 2022.

The evidence presented in this report underscores the critical and ongoing need for enhanced support to empower women to maintain an active lifestyle throughout their childbearing years.

Our findings report a resounding desire expressed by women to be more physically active. This is juxtaposed with the many barriers they face, particularly in the postnatal period, with results drawing attention to persistently low postnatal physical activity (PA) levels. The challenges of time constraints and childcare responsibilities loom large, impeding women's ability to engage in regular physical activity. Dismantling these barriers is paramount to creating the conditions that enable women to access the opportunities and resources underpinning an active lifestyle.

The findings also illuminate a gap in the provision of adequate help, support, and advice regarding PA during and after pregnancy. This report calls for a collaborative effort among healthcare professionals, sports and fitness experts, and support networks to bridge this gap. Specifically, the importance of knowledgeable healthcare teams and fitness professionals cannot be overstated in providing appropriate guidance and creating supportive environments.

The evolving nature of women's PA routines emphasises the need for accessible information on safe practices, yet, a persistent challenge exists in ensuring the availability of reliable, evidence-based content that women can trust. The need for visibility, trustworthiness, and appropriateness of online resources is imperative in boosting women's confidence and encouraging their participation in physical activities their childbearing years.

As we delve into the details of the survey, we hope that this report serves as a catalyst for change. The insights gleaned are not merely statistics but powerful voices echoing the need for a comprehensive and inclusive approach to support women in their pursuit of an active and healthy lifestyle. The Active Pregnancy Foundation is committed to championing this cause, and we call upon policymakers, healthcare providers, fitness professionals, and society at large to join hands in addressing these challenges and fostering an environment where every woman can thrive during and after pregnancy.

A handwritten signature in white ink, appearing to read "Sally Kettle".

**Sally Kettle**  
CEO, Active Pregnancy Foundation

# Introduction

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## About the Active Pregnancy Foundation

At the Active Pregnancy Foundation, we dream of a world where every woman feels empowered to be active throughout their childbearing years, moving in a way that makes them feel good and suits them best. For this to happen, the conditions must exist to facilitate engagement with physical activities and sports before, during, and after pregnancy. To do this, we work with women; healthcare, sport, exercise and fitness professionals; researchers; and a wide range of key stakeholders.

Our game plan includes changing the narrative around being active during the childbearing years, through research, education, and advocacy; increasing the visibility and representation of active women, thereby growing the number of role models who influence and motivate; creating a support network for women and professionals, where experiences and learning can be shared; working collaboratively across PA and health systems to ensure high-quality provision and access to knowledgeable qualified professionals; and empowering women to take ownership of their health, to make informed decisions and encourage meaningful conversations.



# Background

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National and international guidelines recommend that healthy pregnant and postnatal women without contra-indication, accumulate 150 minutes of moderate-intensity (40%–59% heart rate reserve; HRR) PA each week, and incorporate strength training on two days of the week<sup>1,2</sup>.

This level of PA confers many health benefits including a decreased risk of pre-eclampsia, gestational hypertension, gestational diabetes, excessive weight gain, delivery complications and postnatal depression, and fewer newborn complications<sup>2</sup>. Research has shown that by meeting the guidelines, depression, pre-eclampsia and gestational diabetes can be reduced by 40–67%, without increasing the risk of adverse pregnancy outcomes such as miscarriage and preterm delivery<sup>3,4</sup>. Women who engage in vigorous-intensity activities (60%–80% HRR) before pregnancy, can continue to do so but are advised to seek medical advice if they significantly exceed the guidelines<sup>2</sup>.

However, despite the known benefits, evidence suggests that up to 75% of women do not meet PA guidelines when pregnant, with PA levels reported to decline during pregnancy and often remaining low postnatally<sup>5</sup>. There are many reasons why this might be the case, including barriers such as nausea, fatigue and lack of time, concerns about risks, and social pressures from family and friends, etc.

This annual survey therefore aims to build a picture of pregnant and postnatal women's engagement in PA in the UK; their opportunities and barriers to being active; the perceived value they place on PA; and the support they receive to engage in PA during the transition to motherhood.



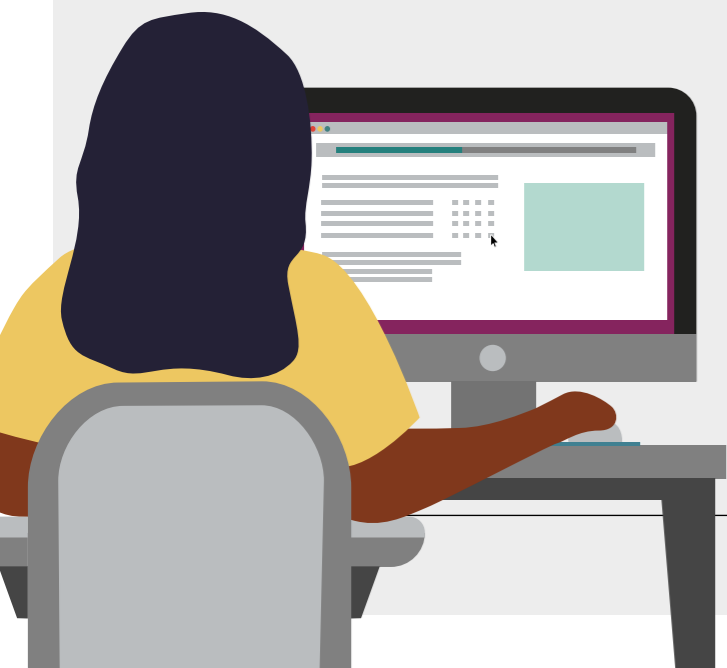
# Method

An online survey was conducted by the Active Pregnancy Foundation, in association with UK Sport, ukactive, and the Perinatal Physical Activity Research Group (PPARG) at Canterbury Christ Church University. Women who were pregnant or postnatal (i.e. had given birth within the previous 12 months); 18 years or older; and resident in the UK, were invited to take part during the period spanning 6 June to 6 July 2022.

Participation was voluntary and the survey was prefaced with a comprehensive purpose statement; women were required to provide consent for the anonymous data collection and participants were informed that they were free to stop and withdraw from the survey at any time.

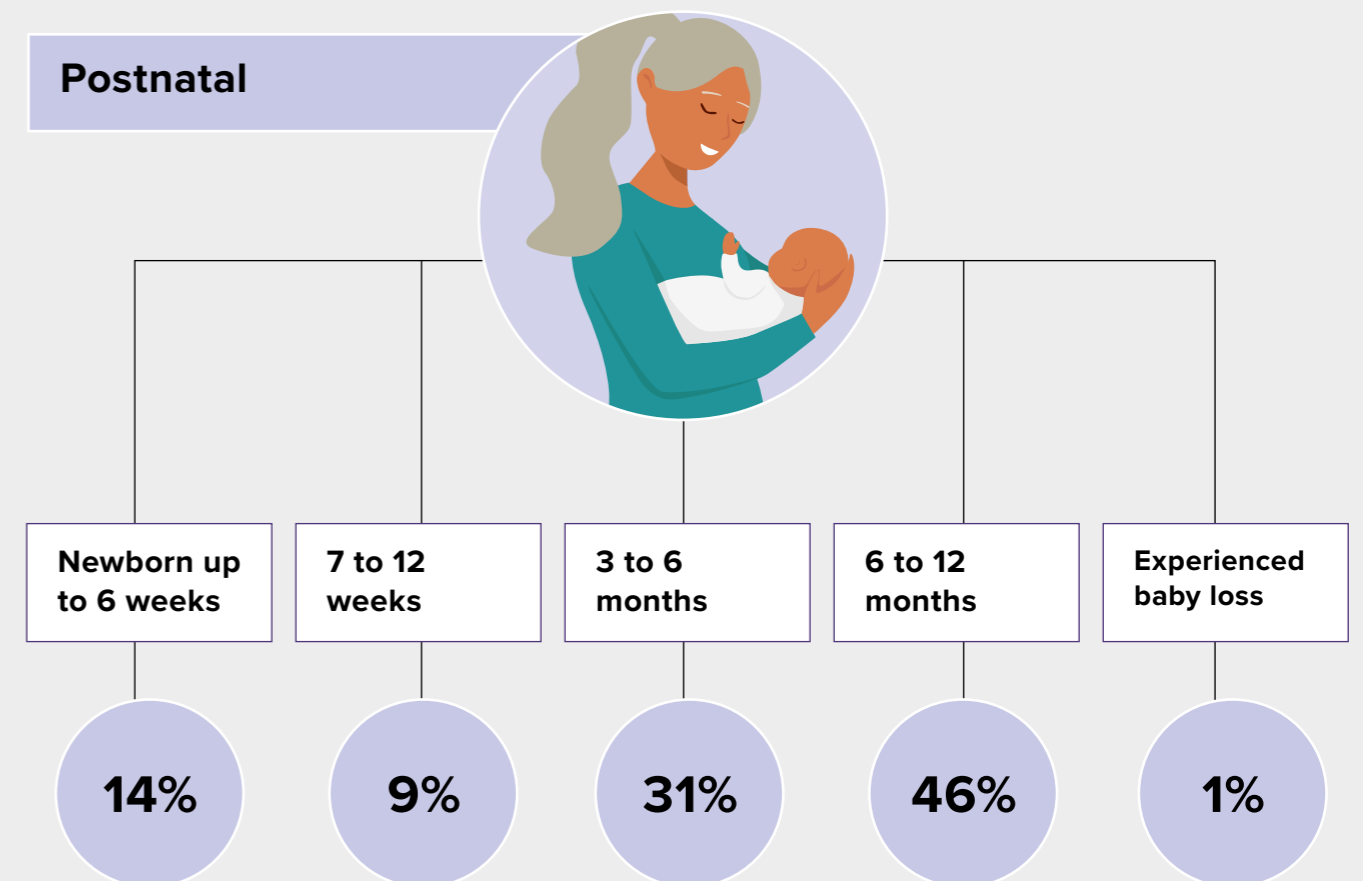
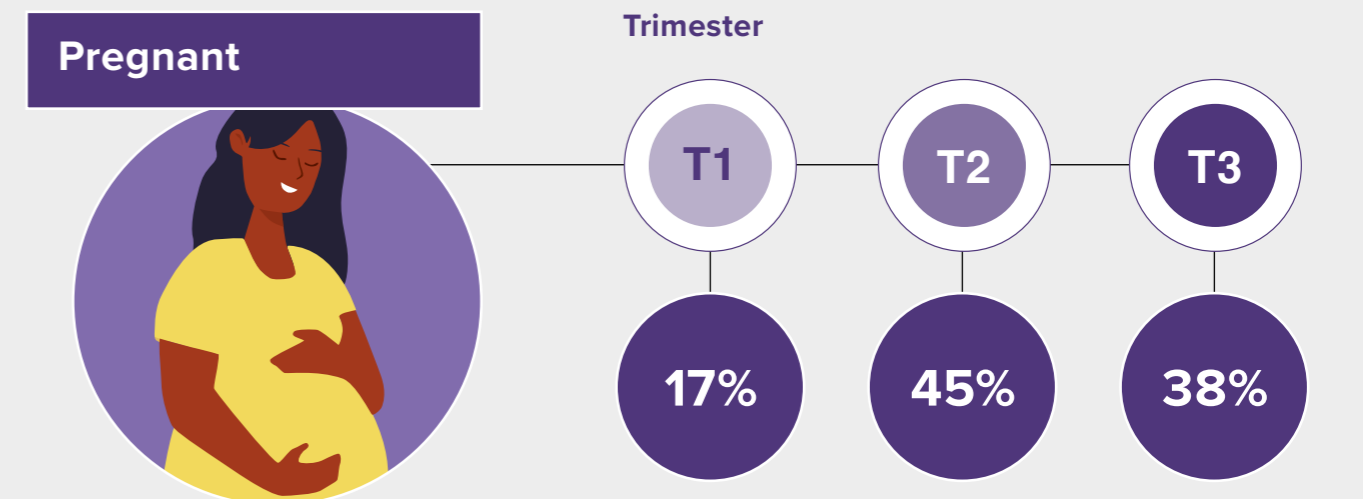
Participants provided basic demographic information; information about their pregnancy, birth, and postnatal status where relevant; activity levels before, during or after pregnancy; their perceptions about opportunities to be active; whether they had been advised about PA; and sources of PA information. Postnatal women whose baby was <12 weeks were excluded from engagement analyses, in line with national guidelines emphasising that PA be built up gradually after childbirth, depending on birth experience and recovery. Descriptive statistics and analysis of data were conducted using STATA (SE) 15, with significance set to  $p < 0.05$ .

The survey, approved by the Faculty of Science, Engineering and Social Sciences Ethics Panel at Canterbury Christ Church University (ETH2122-0246), will be repeated annually for three years. This report represents the data collect during the first year of the study in 2022.



A total of **275 women** took part in the survey. The majority lived in England (70%), and were predominantly located in the South East (19%) and South West (11%). Most women were white (87%), identified as heterosexual (88%) and were educated to degree level or above (80%). 53 women (19%) considered themselves to be athletes, with most classified into the recreational category.

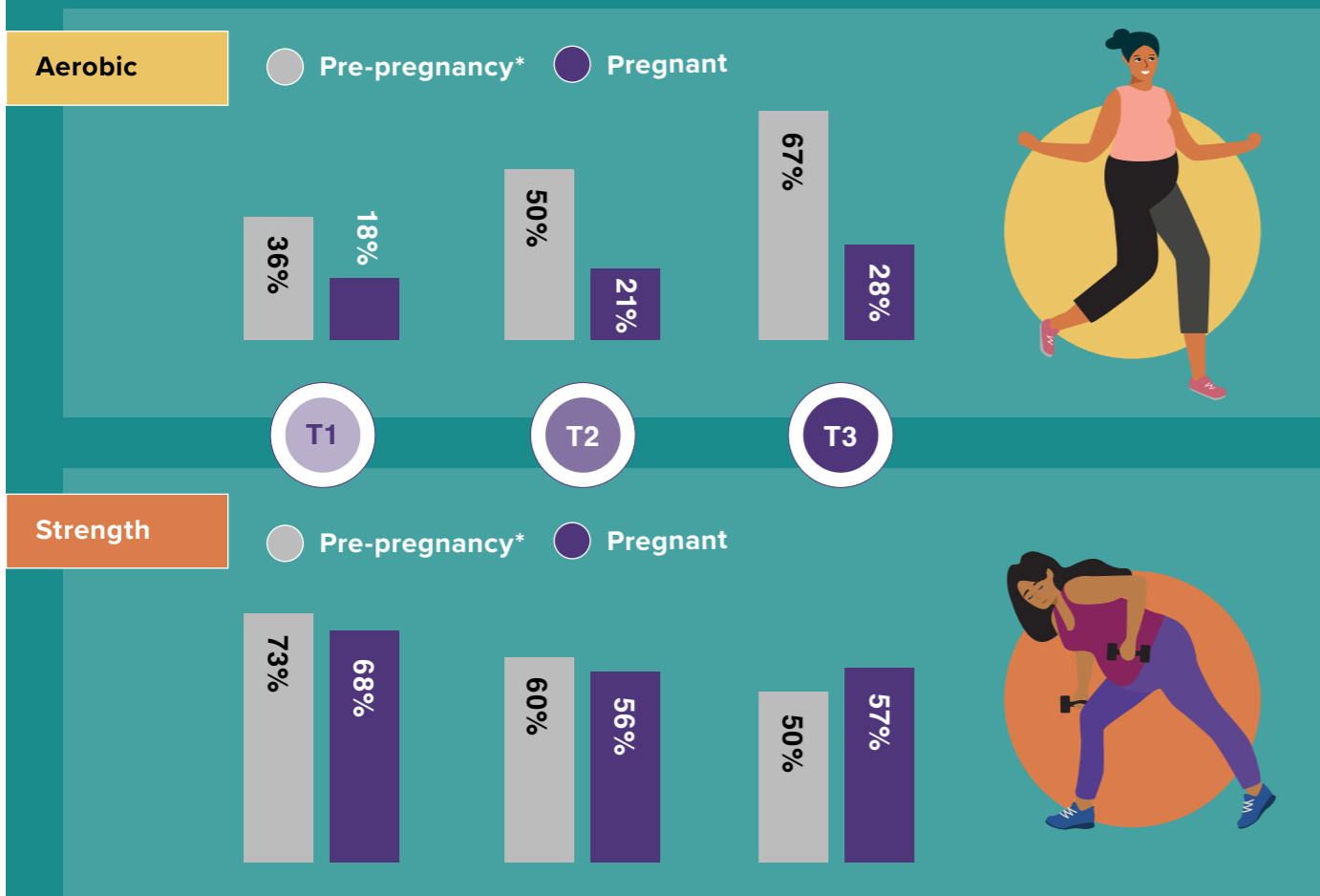
## Participants



# 1. Engagement in PA

Pregnant women reported a significant decline in aerobic activity from pre- to during pregnancy. They also reported a significant decline in the number of days on which they did strength training over the same period, but most still met the strength training guideline of two days per week.

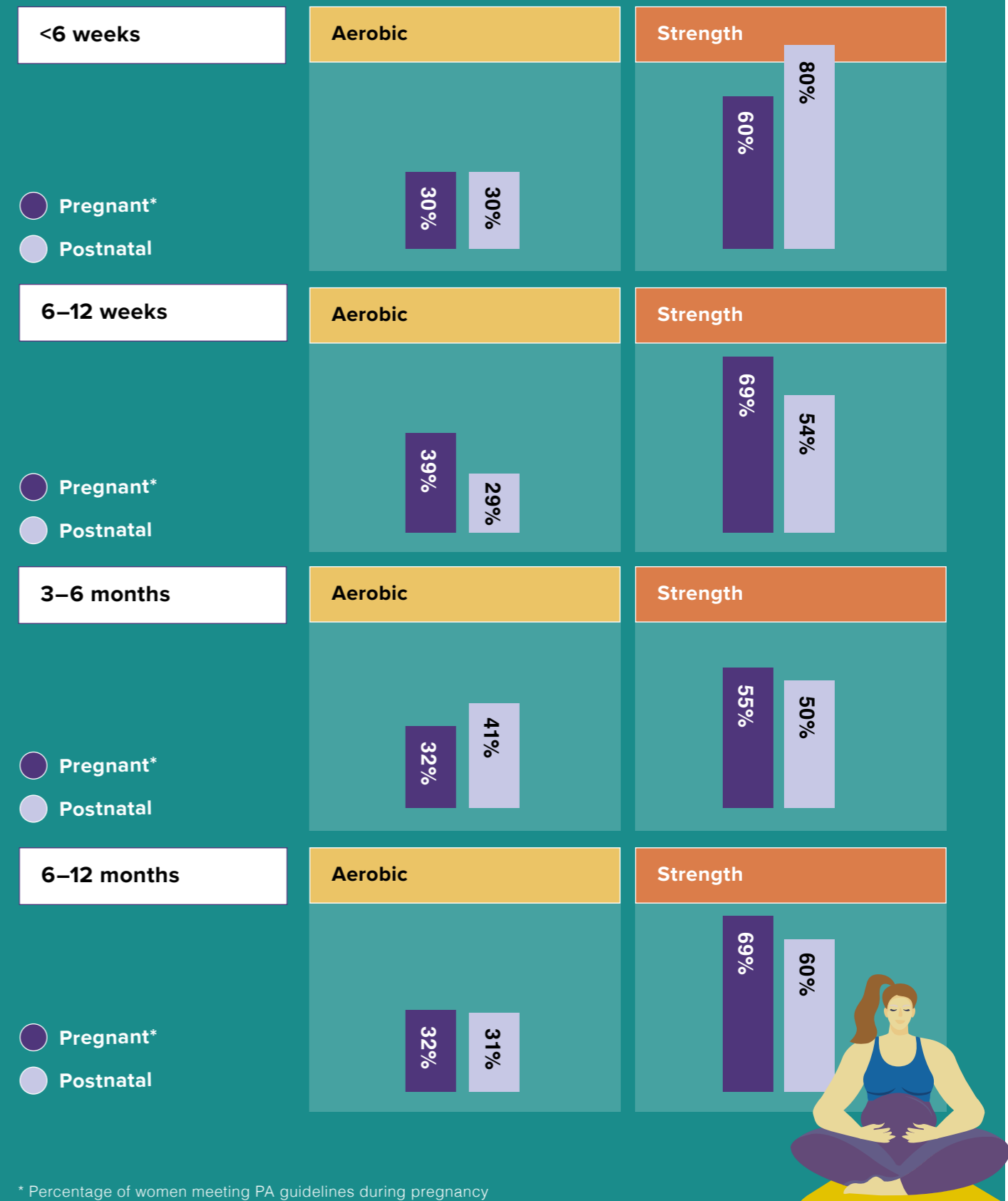
Number of women meeting PA guidelines before and during pregnancy:



\* Percentage of women meeting PA guidelines pre-pregnancy based on their trimester when interviewed during pregnancy.

For postnatal women, there were no significant differences in women's aerobic and strength training levels from pregnancy into the postnatal period.

Number of women meeting PA guidelines, by time during pregnancy and postnatally:



\* Percentage of women meeting PA guidelines during pregnancy when interviewed in their postnatal period.

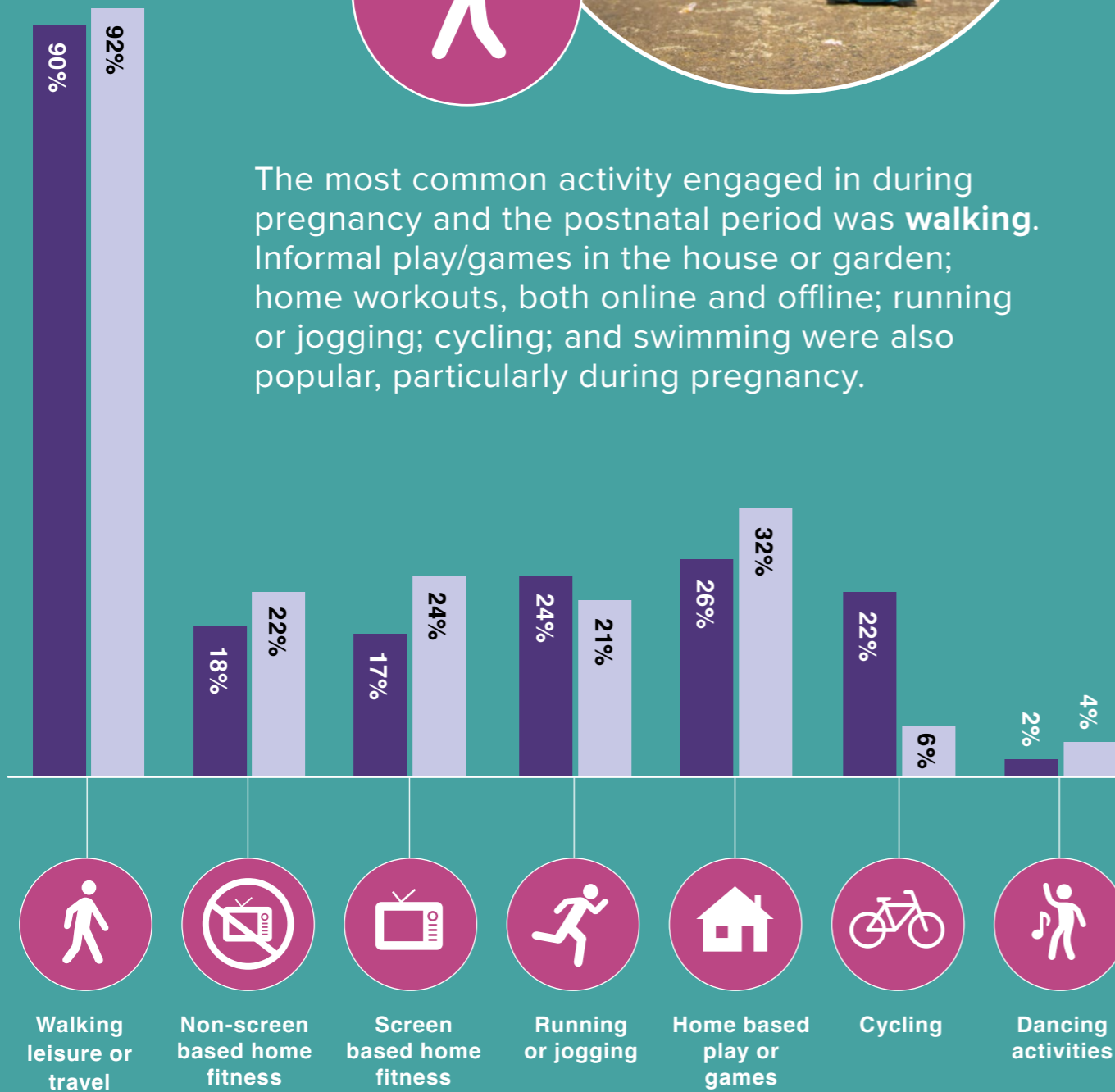
Percentage of women who state they do >150 minutes MVPA per week (aerobic)/two or more days of strength training (strength).

## Types of activities\*

- Pregnant
- Postnatal

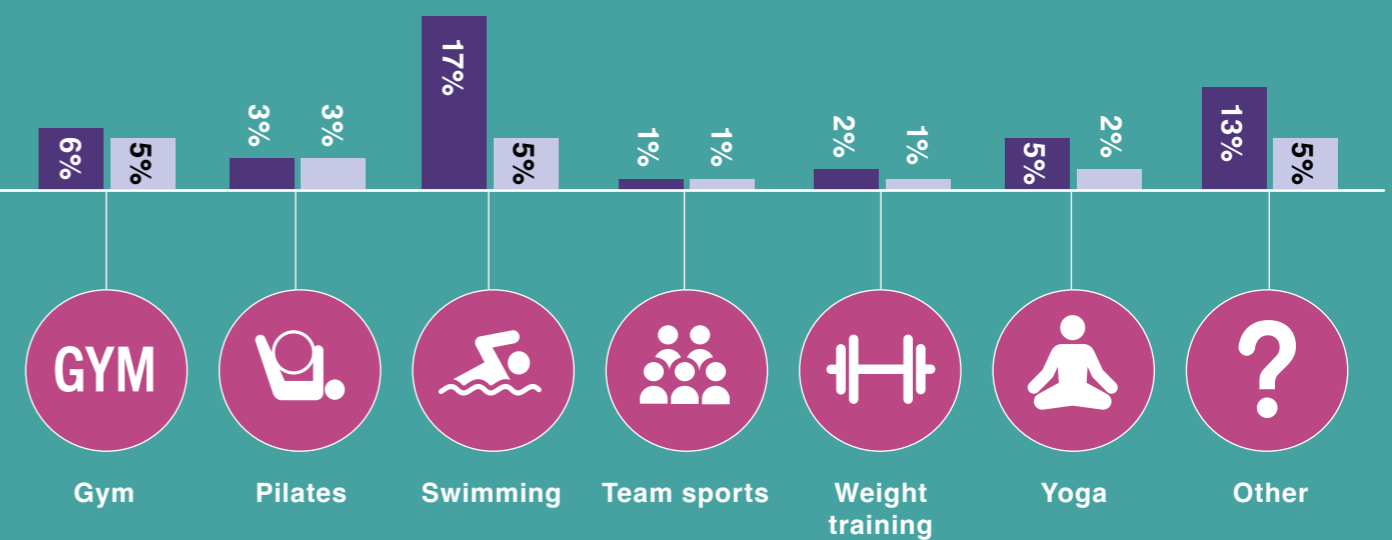
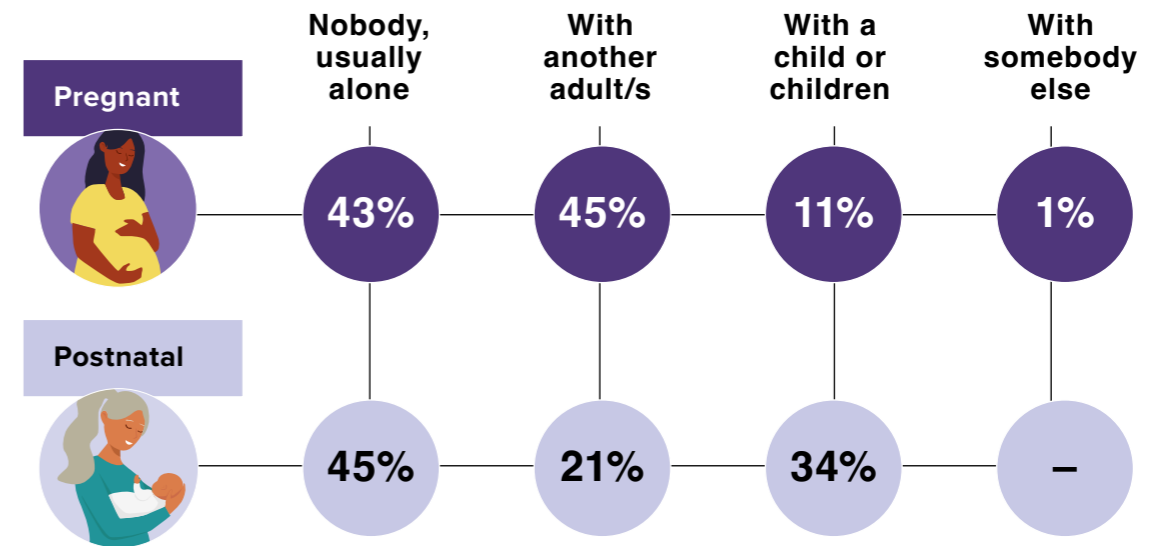


The most common activity engaged in during pregnancy and the postnatal period was **walking**. Informal play/games in the house or garden; home workouts, both online and offline; running or jogging; cycling; and swimming were also popular, particularly during pregnancy.

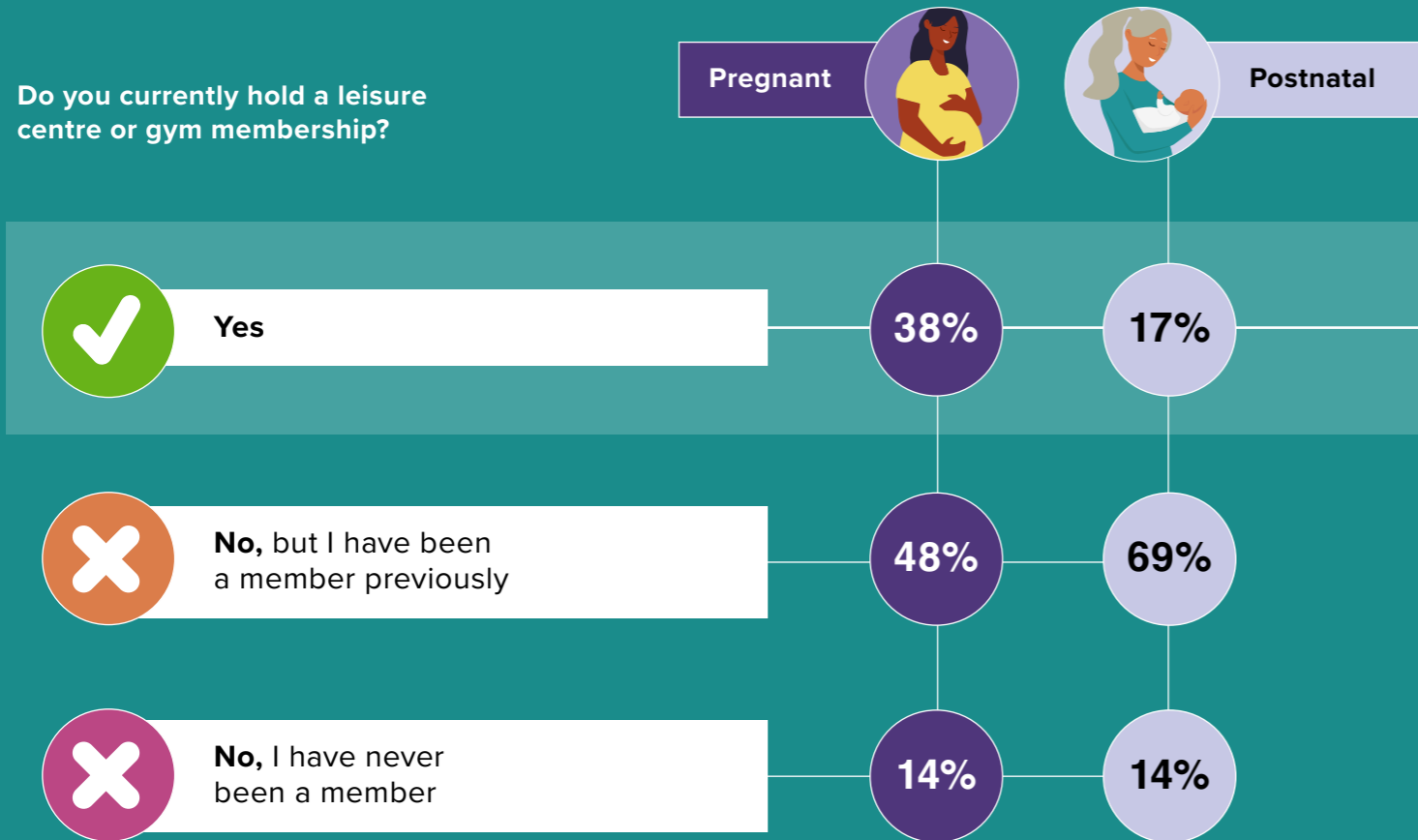


\* Women were able to choose all activities that applied; percentage represents the number of women who responded 'yes' to each activity.

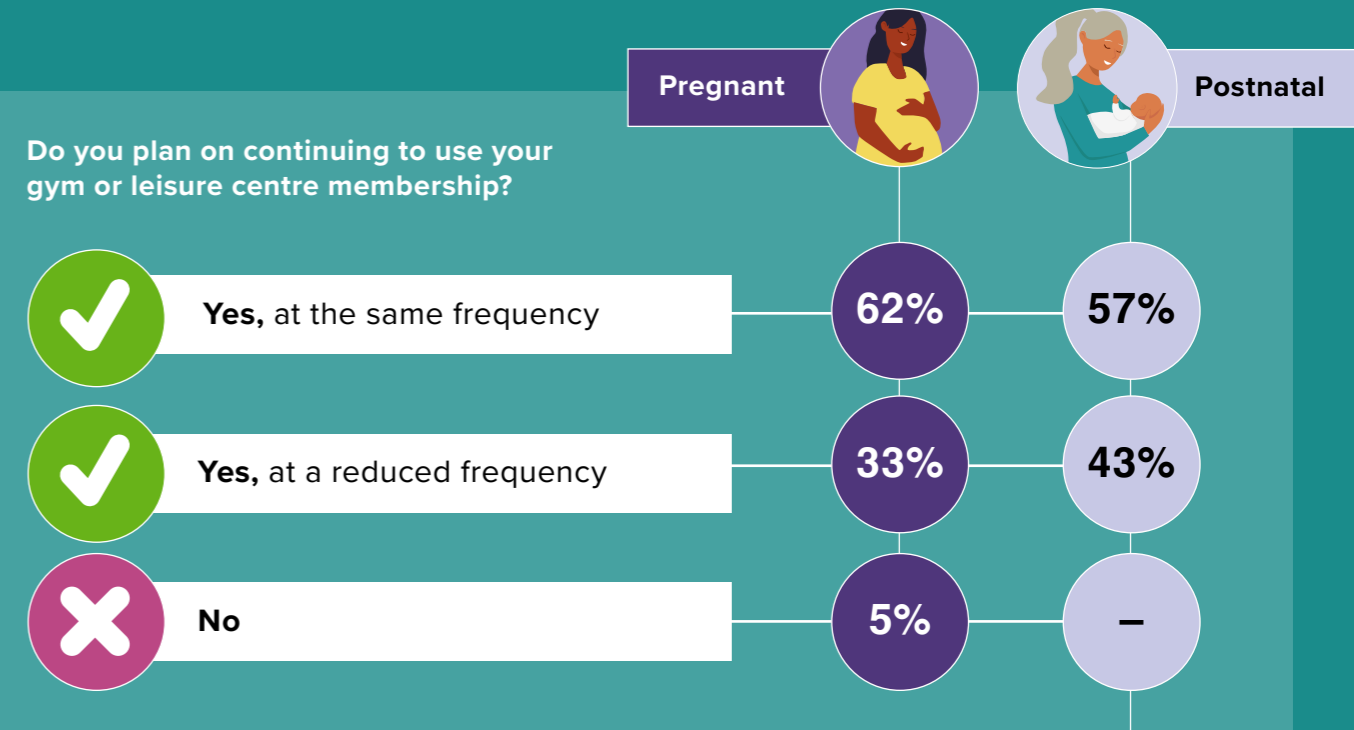
Around **40%** of women stated they were active by themselves, with activity 'with other adults' more common for pregnant women (45%) and 'with children' more common for postnatal women (34%).



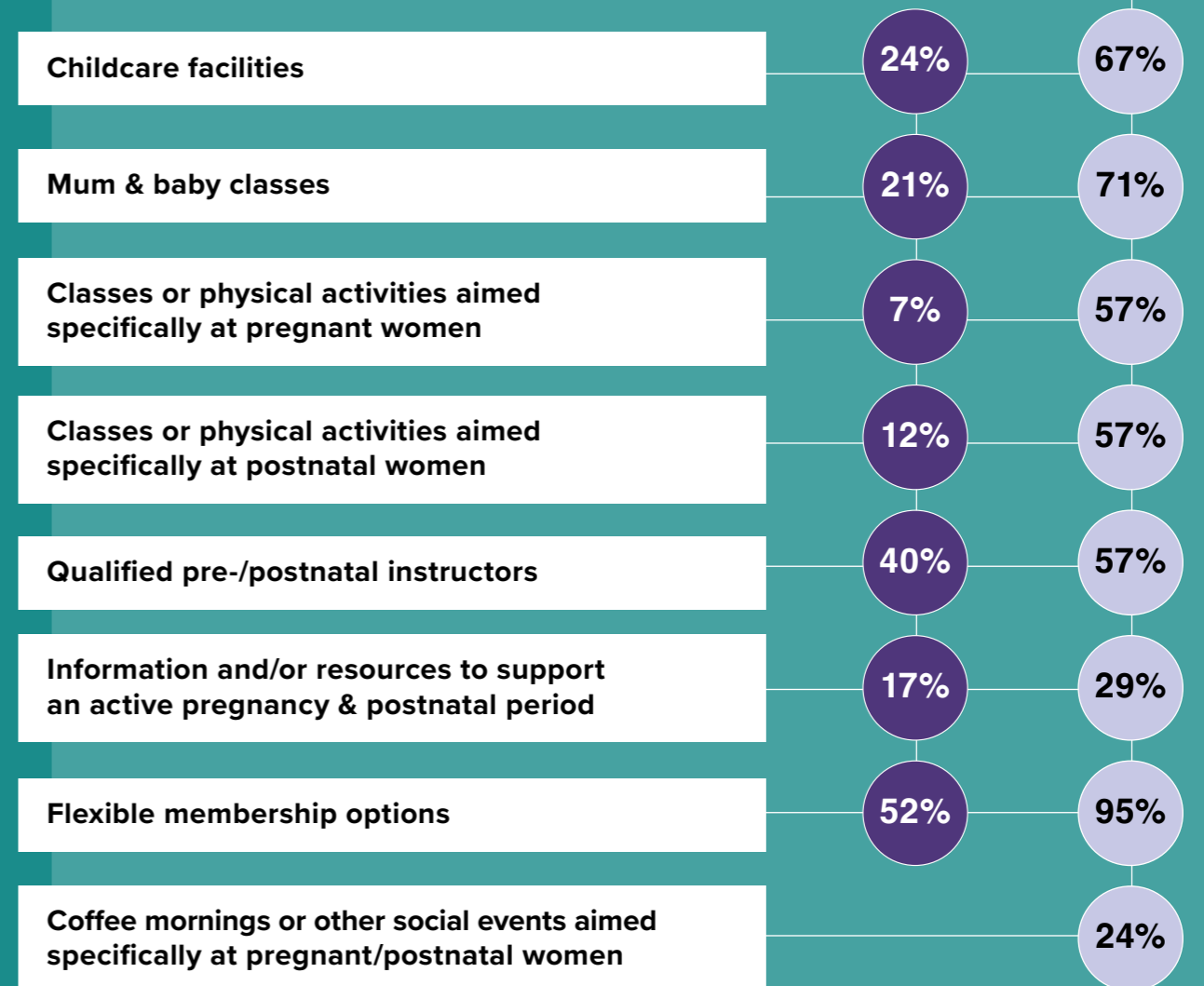
A limited number of women held a leisure centre or gym membership during pregnancy and the postnatal period, and among this group, only half expressed an intention to sustain their memberships at the same frequency. When considering women's awareness of what was available to them at leisure facilities, it becomes evident that there were few options conducive to fostering continued engagement during the childbearing years.



\* Women were able to choose all activities that applied; percentage represents the number of women who responded 'yes' to each activity.



**Do you know if your gym or leisure centre offers any of the following\*:**







## 2. Opportunities & barriers to PA

### Opportunities

The majority of women, regardless of whether they were pregnant or postnatal, reported they enjoyed PA and perceived PA to be important. However, around 40% of pregnant women and only 27% of postnatal women felt they had the opportunity to be active, and fewer than 50% of women felt they were able to be physically active. Only ~35% had the confidence to be active and many also felt guilty when they were not physically active.

Percentage of women who strongly agree:

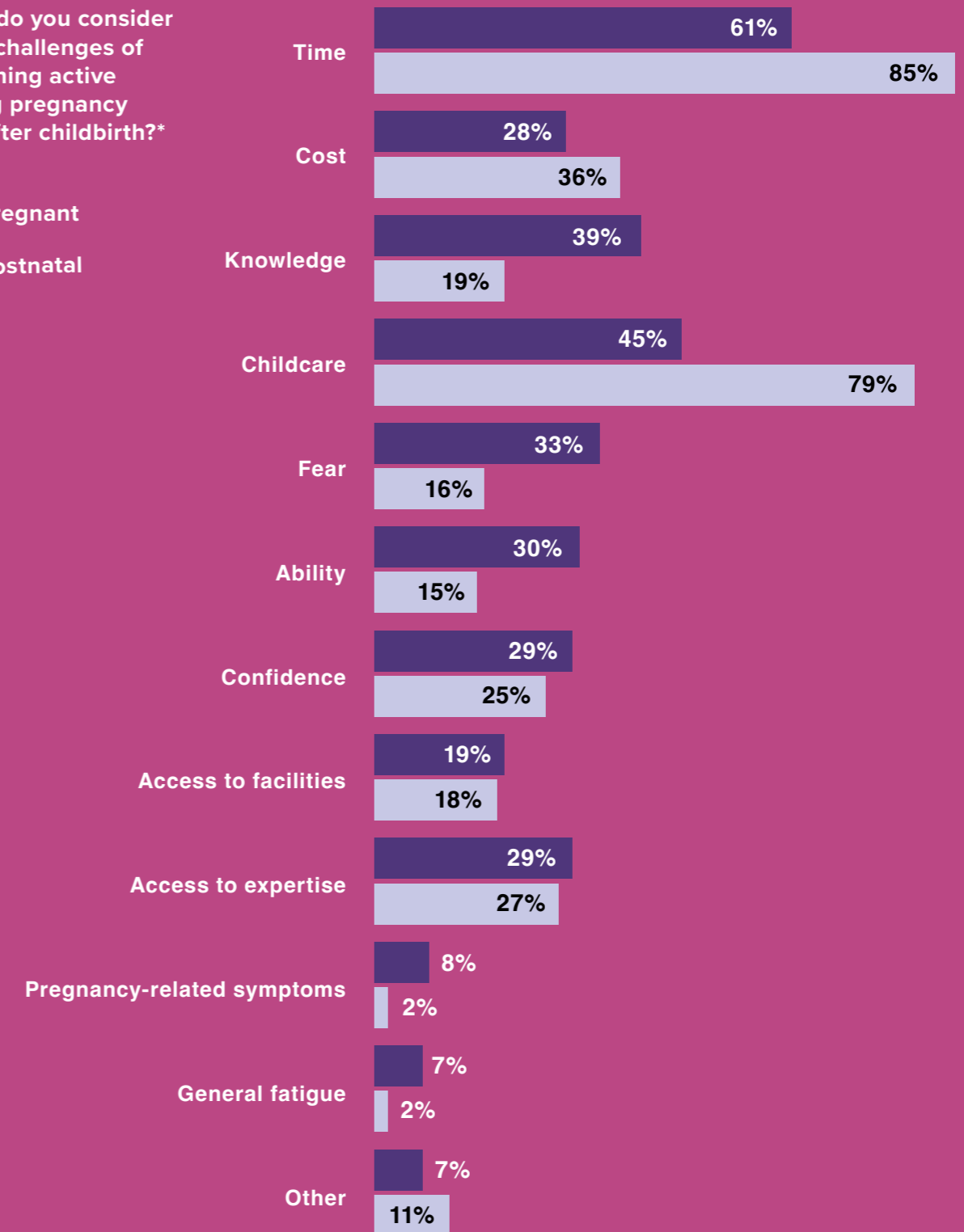


### Barriers

Unsurprisingly, time was the most common barrier to being active for pregnant and postnatal women, especially in combination with a lack of childcare for postnatal women. Cost, access to expertise and confidence were also common issues for both pregnant and postnatal women. Pregnant women more commonly referred to a lack of knowledge, fear, and perceived ability to be active as key barriers.

What do you consider to be challenges of remaining active during pregnancy and after childbirth?\*

- Pregnant
- Postnatal



\* Women were able to choose all challenges that applied; percentage represents the number of women who responded 'agree' or 'strongly agree' within each category.



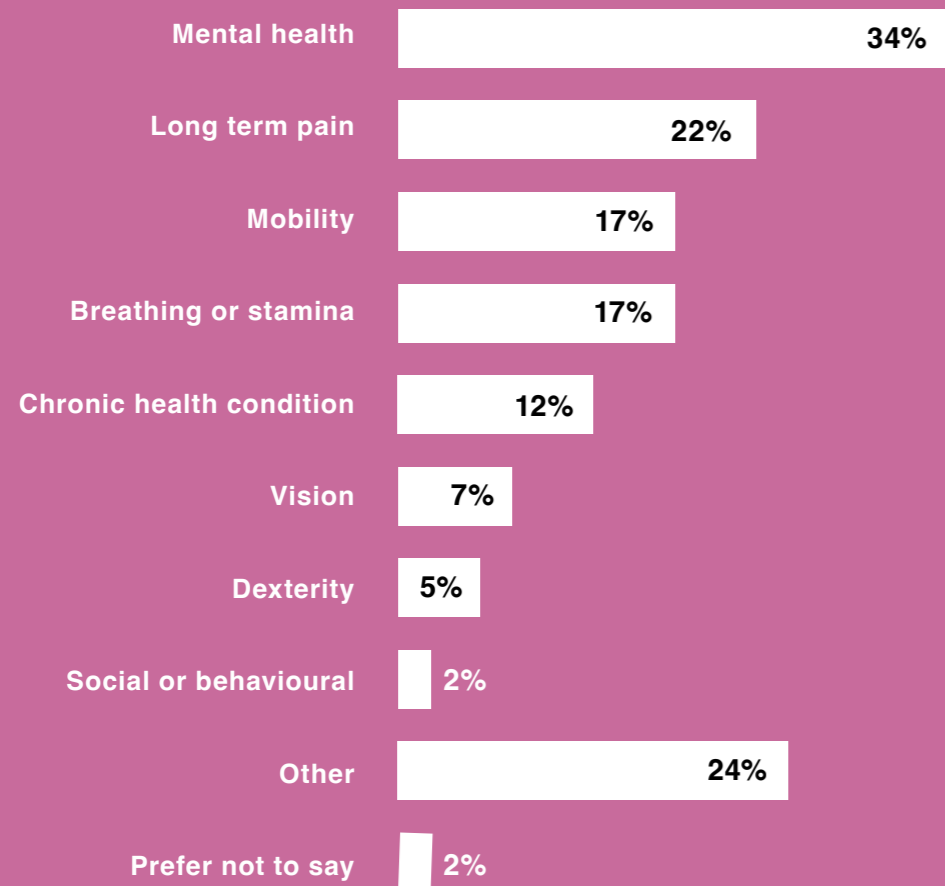
## Health

A small number of participants (16%) indicated that they had long-term health conditions, impairments or illnesses. Of these women, 39% indicated that this had a substantial effect on their ability to do normal daily activities.

**Do your health conditions, impairments or illnesses have a substantial effect on your ability to do normal daily activities?**



**Do these health conditions, impairments or illnesses affect you in any of the following areas\*?**



\* Women were able to choose all categories that applied; percentage represents the number of women who responded 'yes' to each category.

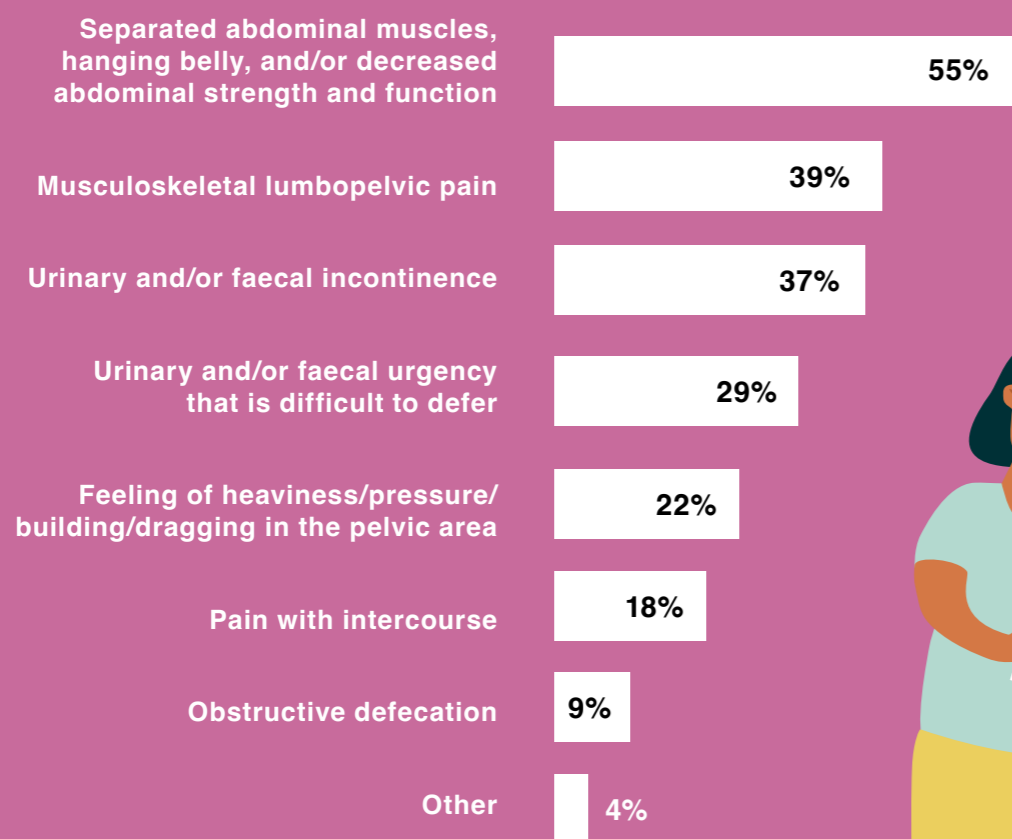


Nearly two thirds of women (59%) stated they had experienced some form of pelvic floor and/or abdominal wall issue during or after pregnancy. Separated abdominal muscles, hanging belly, and/or decreased abdominal strength and function (55%); musculoskeletal lumbopelvic pain (39%); and urinary and/or faecal incontinence (37%), were commonly reported by women. The majority of these women (58%) did not consult with a specialist pelvic health physiotherapist about their concerns. Of those women who sought further advice, most paid privately to obtain professional help (63%).

**Have you experienced any signs or symptoms of pelvic floor and/or abdominal wall dysfunction during pregnancy or after childbirth?**



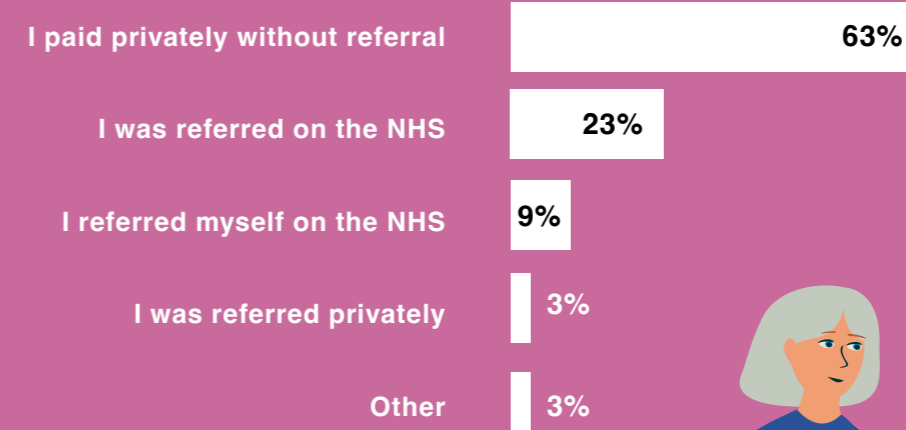
**If yes, which of the following did you experience\*?**



**Have you consulted with a specialist pelvic health physiotherapist about these concerns?**



**If so, how did you access these services?**



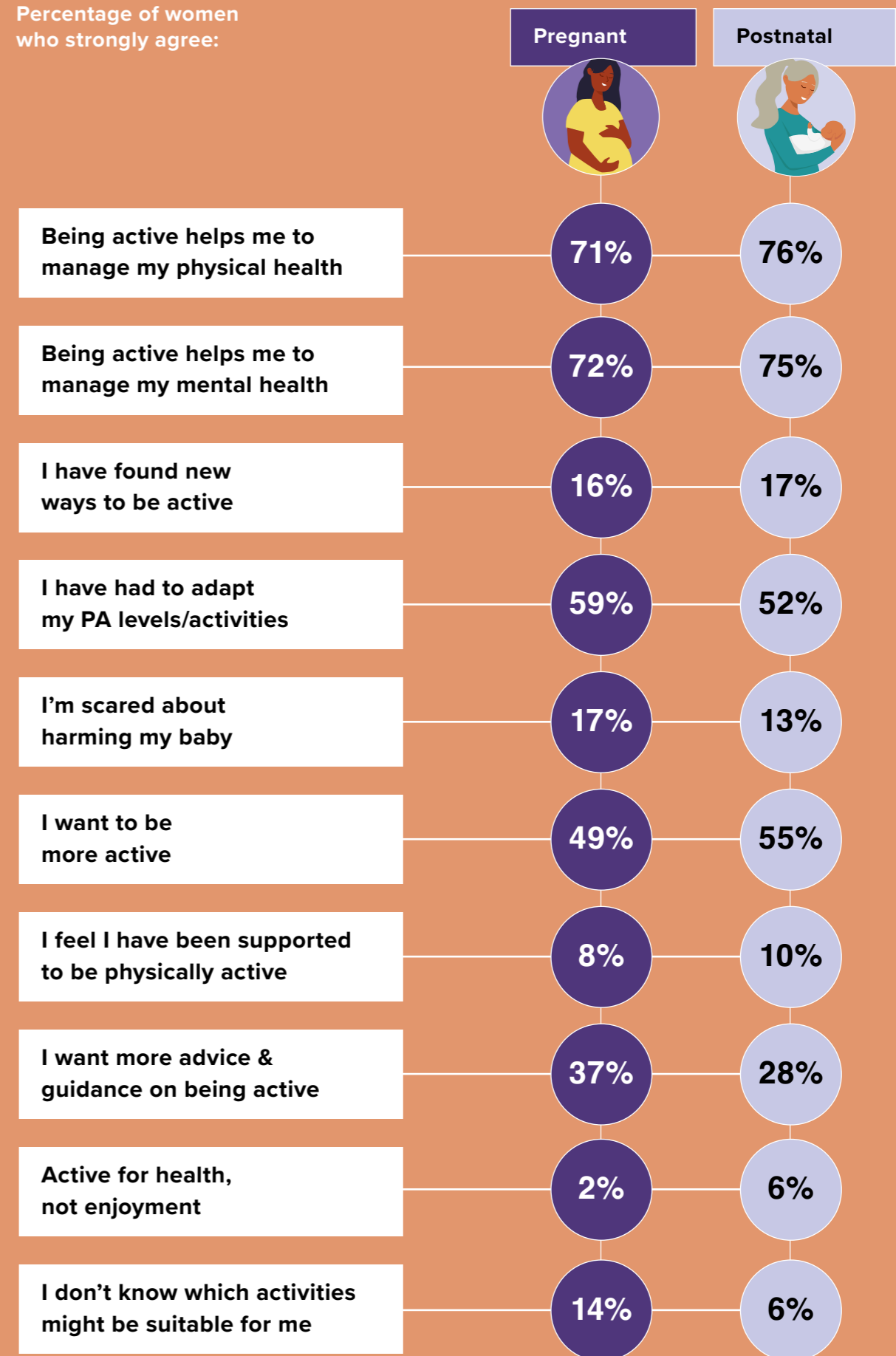
\* Women were able to choose all categories that applied; percentage represents the number of women who responded 'yes' to each category.

### 3. Perceived value of PA

Most women felt that PA was beneficial for managing their physical and mental health, but understandably, 59% of pregnant and 52% of postnatal women felt that they had to adapt their PA levels and the type of activities that they engaged in. Half of the respondents wanted to be more active, but only 8% of pregnant and 10% of postnatal women felt supported to be active. Around one-third of women wanted more advice and guidance about PA.



Percentage of women who strongly agree:







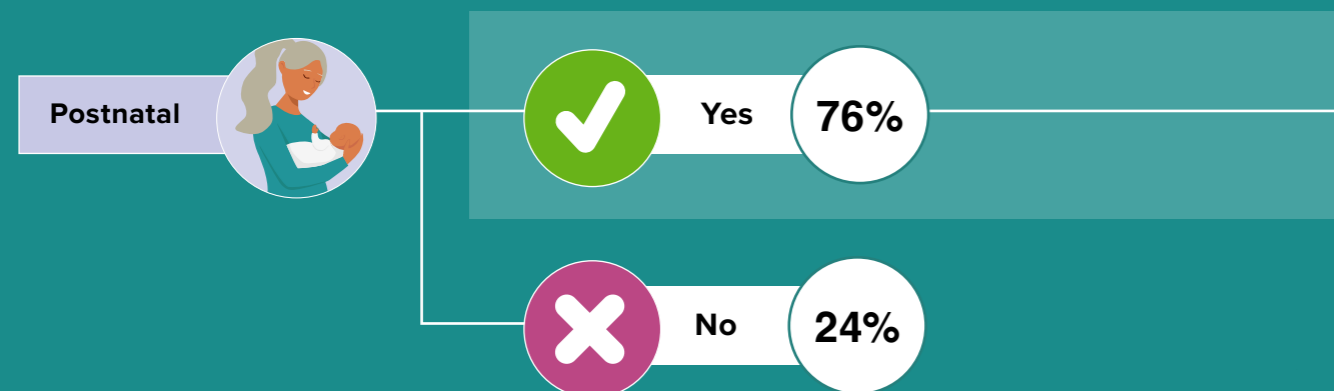
## 4. Support

Less than half of the participants received advice about PA during pregnancy, with midwives and fitness professionals most commonly providing this advice. Postnatally, 76% of women had had their 6-8 week check; PA was discussed with 13% of women during that appointment, and 63% of women had not been given advice about returning to PA. Conversations at the 6–8 week check commonly involved contraception, mental health and physical health, followed by breastfeeding, pelvic floor and then PA. GPs and Physiotherapists most commonly provided information about PA to postnatal women.

Have you been given any advice about being active during your pregnancy?

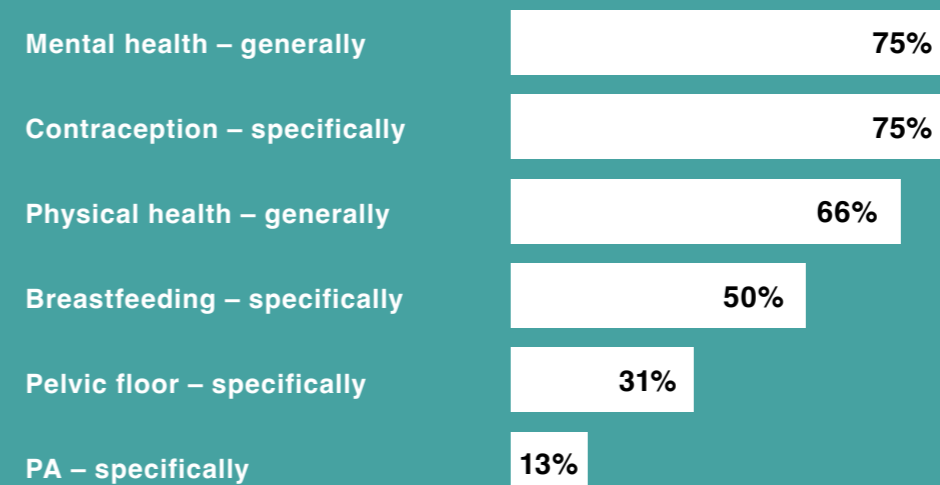


Have you had your 6–8 week postnatal check?



\* Women were able to choose all categories that applied; percentage represents the number of women who responded 'yes' to each category.

If yes, was any of the following discussed\*?



At any time after childbirth, have you been given advice about returning to physical activity?



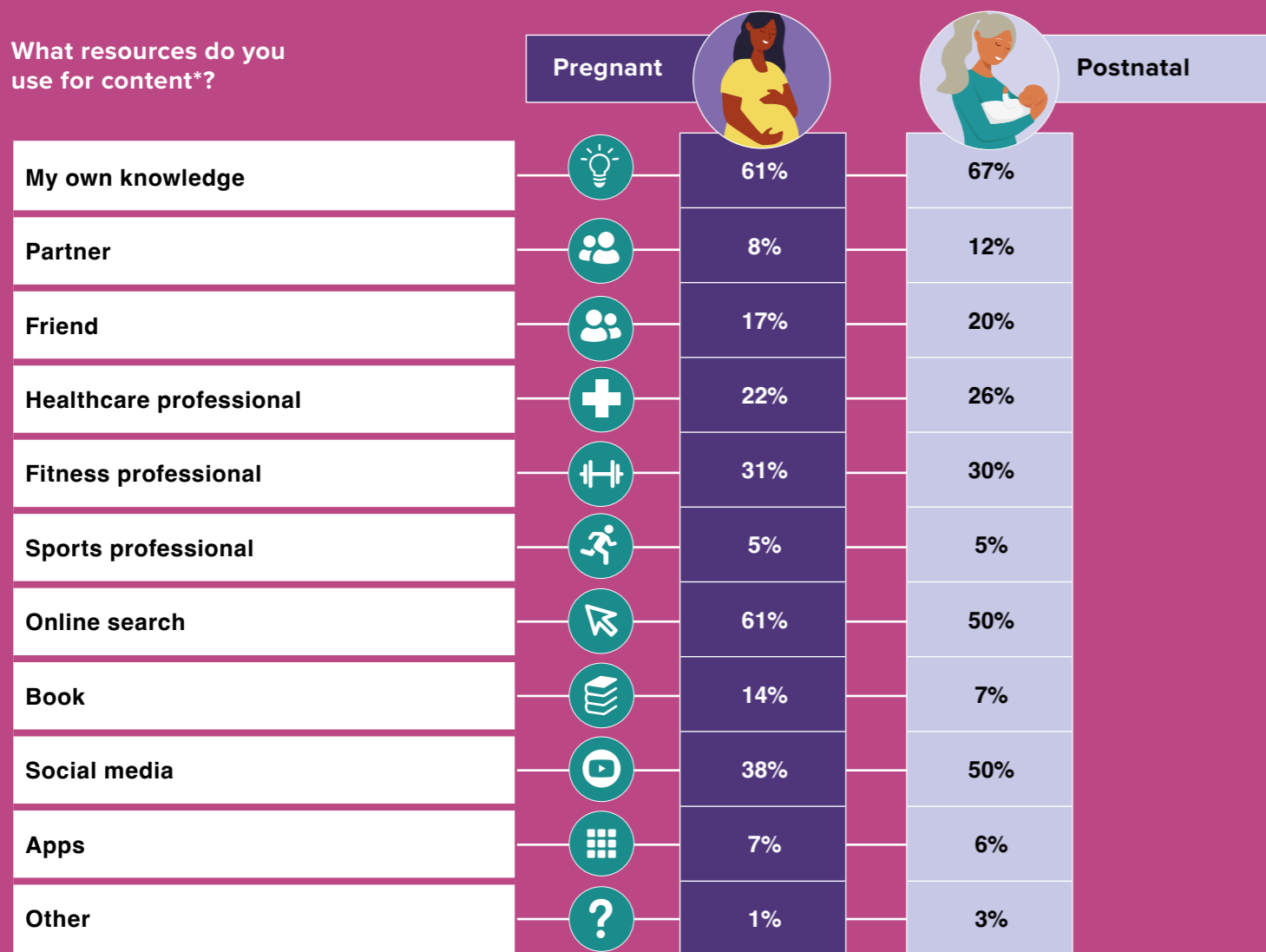
Who gave you advice\*?

Who gave you advice*?	Pregnant	Postnatal	Pregnant	Postnatal
<b>GP</b>	12%	34%	63%	25%
<b>Midwife</b>	63%	25%	5%	8%
<b>Health visitor</b>	–	21%	12%	42%
<b>Physio-therapist</b>	12%	42%	5%	8%
<b>Other healthcare professional</b>	5%	8%	27%	21%
<b>Fitness professional</b>	27%	21%	3%	–
<b>Sports coach</b>	3%	–	12%	9%
<b>Other</b>	12%	9%	–	–

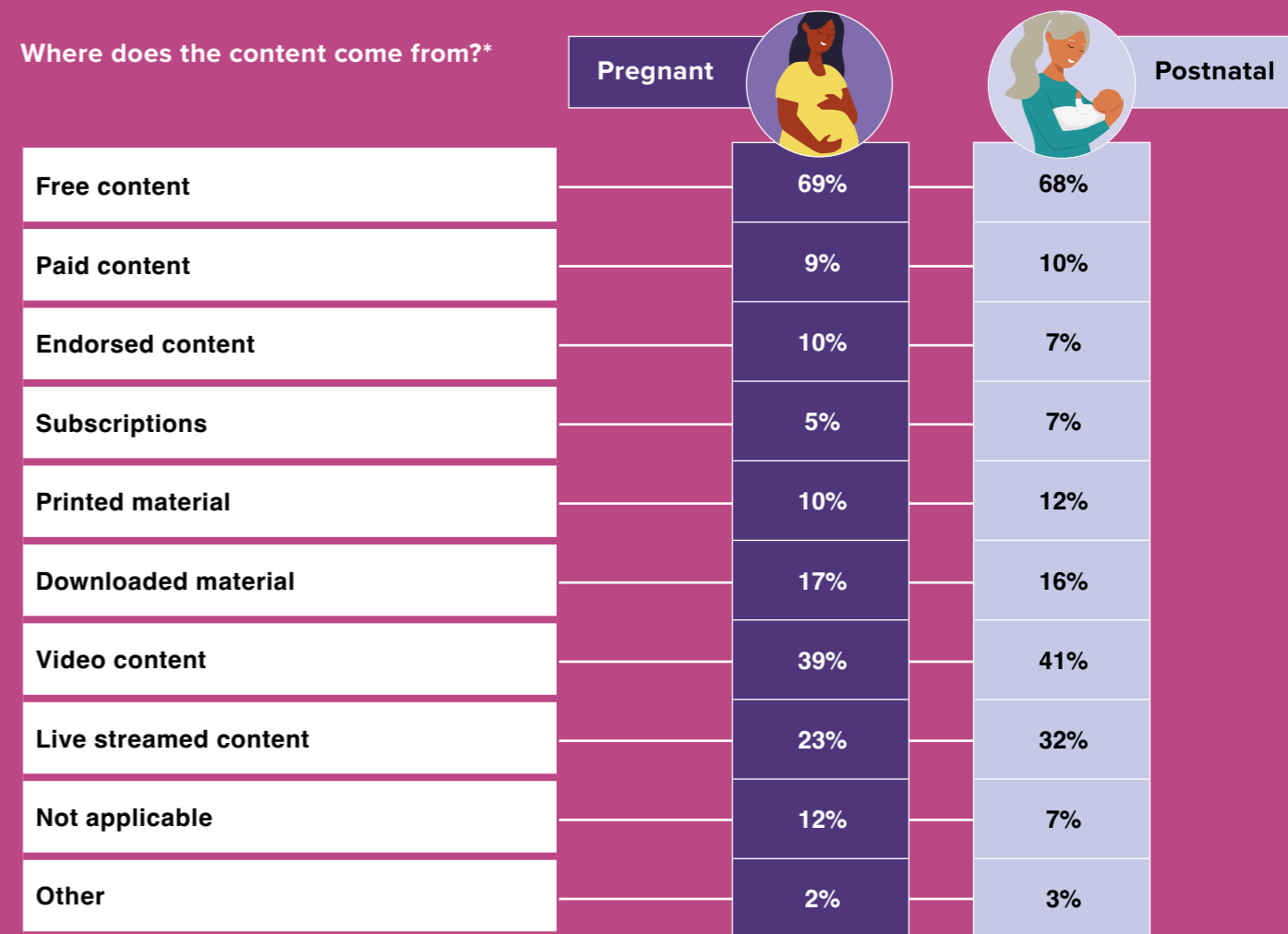
# 5. Resources

Women tend to seek information about PA from a range of sources. They rely heavily on their own knowledge, searching the internet, and social media. They also consult fitness and healthcare professionals for advice. Content accessed is most commonly free or via video and live streams, in line with women commonly engaging in home-based workouts. Women tend to judge the quality based on reviews, recommendations by others, instructor qualifications, and endorsements from health and fitness professionals.

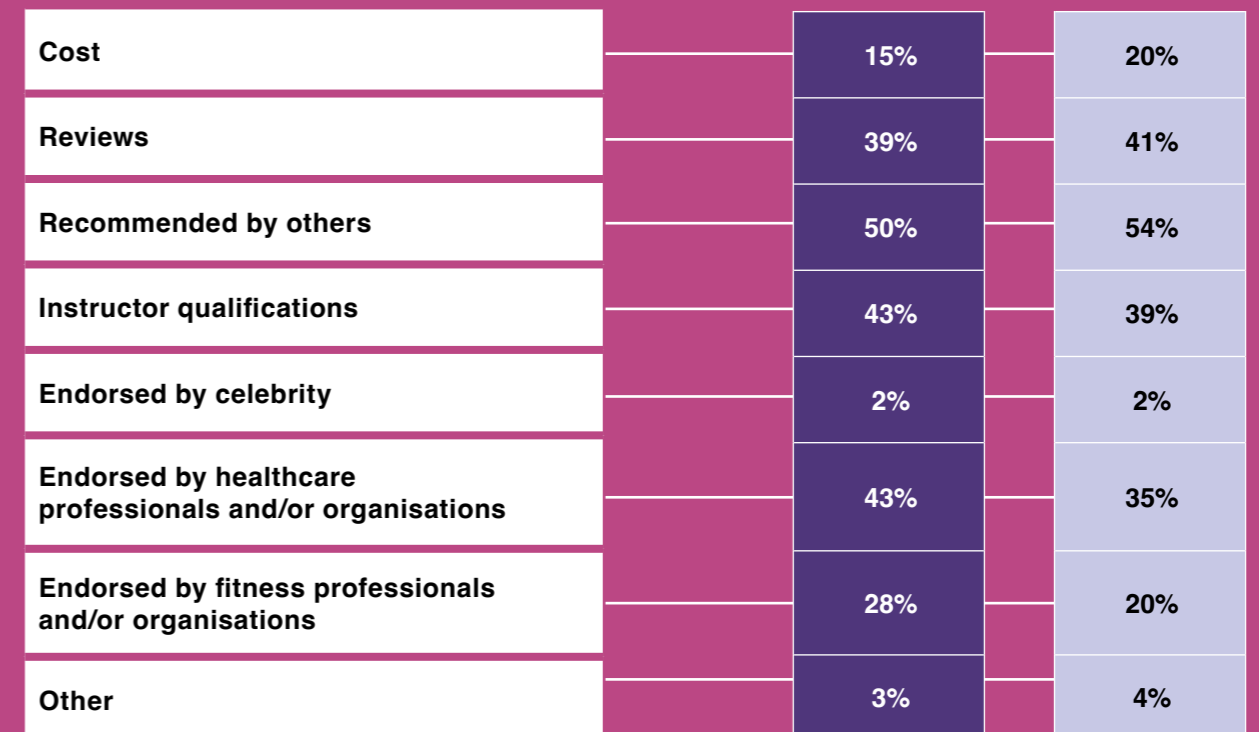
What resources do you use for content\*?



Where does the content come from?\*



How do you judge the quality of content?\*



\* Women were able to choose all options that applied; percentage represents the number of women who responded positively to each category.

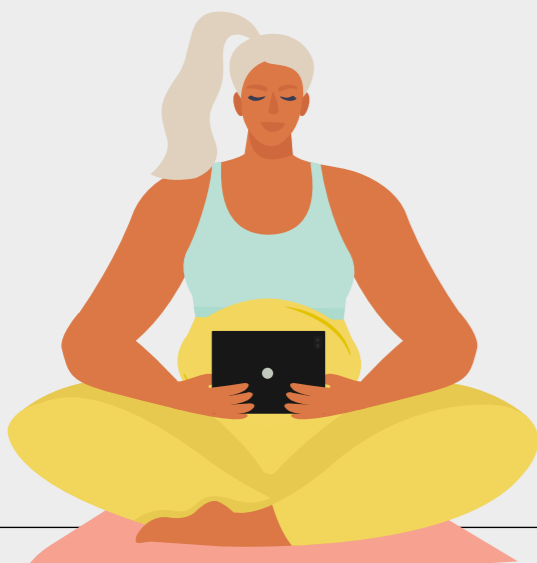
## 6. Conclusion

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The Active Pregnancy Foundation Annual Survey 2022 provides clear evidence of the critical and continuing need for better support to enable women to be active throughout pregnancy and the postnatal period.

The results indicate that postnatal PA levels often remain low; initiating a higher baseline during pregnancy is proposed as advantageous for both women and infants. It is recommended that postnatal women require tailored support to integrate PA at a pace aligned with their individual needs. While women express a strong desire to be more active, perceived barriers such as time constraints and childcare responsibilities hinder their ability to do so.

Tackling these barriers is a priority in creating an environment that provides women with the resources needed to engage in PA, with a specific focus on supporting those with childcare responsibilities.

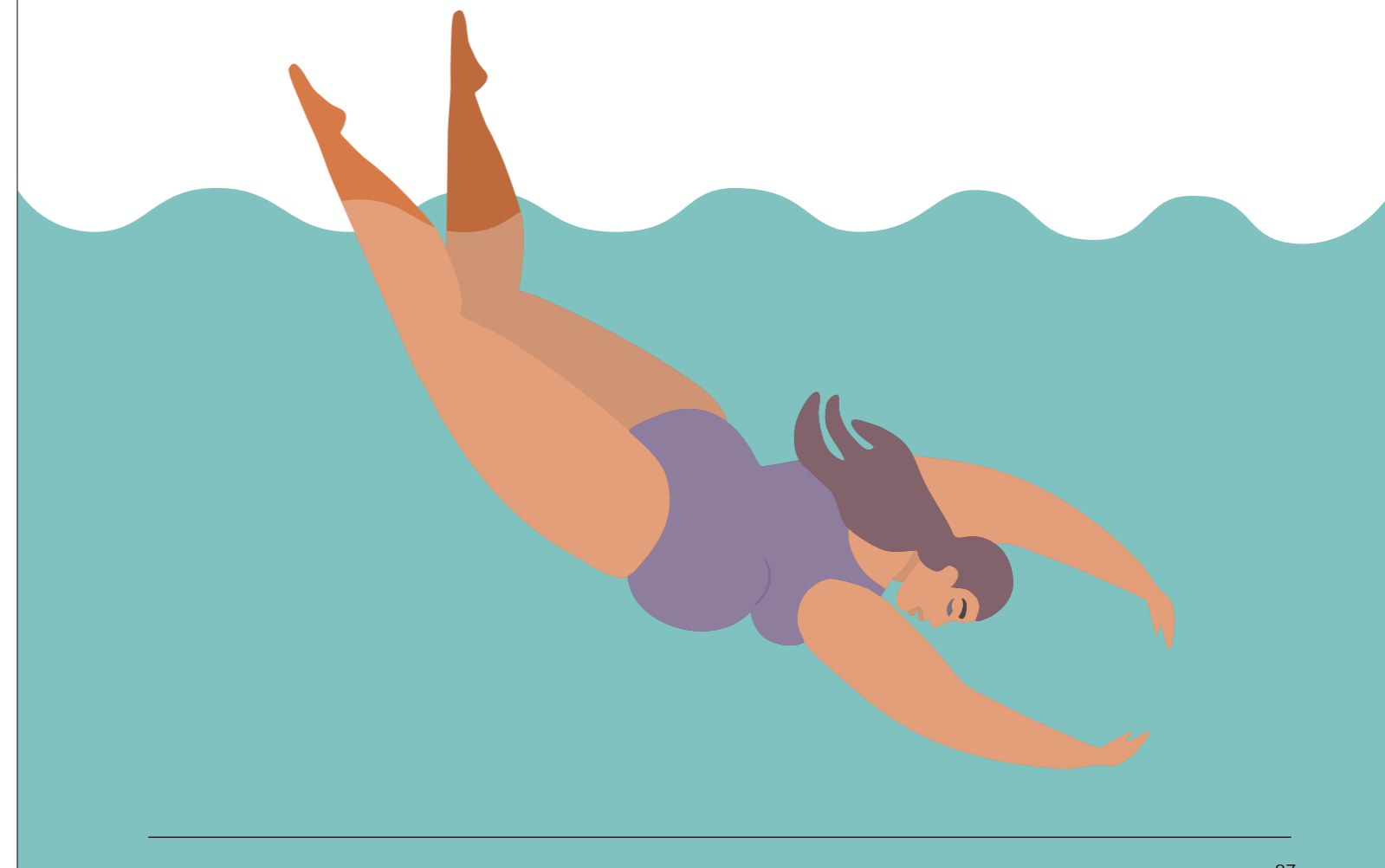


The survey highlights a prevalent need among women to adapt and modify their PA routines, underscoring the importance of accessible information on safe practices for women to navigate these alterations. However, a significant gap exists in the provision of adequate help, support, and advice regarding PA and sports during and after pregnancy.

To bridge this gap, there is a call for knowledgeable healthcare teams, and sports and fitness professionals to offer appropriate guidance and supportive environments. Furthermore, women continue to seek information on online platforms, reviews, and endorsements, yet express a desire for access to reliable and evidence-based content. Therefore ensuring the visibility, trustworthiness and appropriateness of such resources is crucial to significantly boost women's confidence in engaging in physical activities and sports throughout the transition to motherhood.

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# Sheffield Hallam University

*MOMentum Lost: Unpicking Maternal Physical Activity Patterns in 2022*

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