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INFORMATION PAPER

MCHB-PH-HEA
11 January 2019

SUBJECT: Army Pregnancy Postpartum Physical Training

1. Purpose. To provide information on the postpartum component of the Pregnancy Postpartum Physical Training (P3T) Program.

2. Facts.

a. The postpartum component of P3T is designed to improve the readiness of postpartum Soldiers by focusing on regaining pre-pregnancy fitness levels for successful integration back to unit physical readiness training, with the goals of achieving Army Physical Fitness Test (APFT) and Army body composition standards by 180 days postpartum.

b. The P3T policy, doctrine, and training content align with exercise recommendations from the American College of Obstetricians and Gynecologists and the 2008 Physical Activity Guidelines for Americans.

c. Postpartum Soldiers are exempt from the APFT for 180 days from the date of pregnancy termination as outlined in TRADOC Army Regulation (AR) 350-1, Army Training and Leader Development. Postpartum females are on a profile for 45 days. Their place of duty for physical training (PT), when they return to duty after the 12 weeks of maternity leave, is at postpartum P3T until their return to unit PT. Exercise is at the Soldier's own pace, with emphasis on recovery and reconditioning.

d. Postpartum exercise is initiated during maternity leave with progressive reconditioning, using exercises the Soldier knows from pregnancy PT. Soldiers are provided with Technical Guide 255M 12-Week At-Home Maternity Leave Guide and are requested to view the Fundamental Concepts of Postpartum Exercise video to assist them in following the recommended maternity leave postpartum exercise program.

e. Exercise upon return from maternity leave is executed five days a week at a vigorous intensity level, with modifications for individual Soldier fitness levels. All exercise sessions include: activities to reinforce balance and coordination; muscle strength and endurance training that accounts for safety restrictions of joints that are still relaxed; abdominal strength and core stability improvement; cardiovascular training that can be performed at different intensity levels dependent on a Soldier's progress, with an emphasis on running; flexibility to help muscles that tend to shorten during pregnancy; and stress management to address the increased stress associated with new parenting.

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f. Soldiers participate in postpartum P3T for a minimum of 4 weeks and up to 180 days post-delivery. Postpartum Soldiers are given a diagnostic APFT monthly to assess fitness and body composition status. Although encouraged to remain in P3T for six months post-delivery, if they pass a diagnostic APFT, meet AR 600-9, The Army Body Composition Program, standards, and are given approval by the P3T Non-commissioned Officer in Charge or the Officer in Charge, health care provider, and unit command, they can return to regular unit physical training before 180 days.

g. A 2012-2017 qualitative evaluation (n=2311) indicated that the majority of postpartum participants agreed or strongly agreed that P3T helped their performance.

(1) Sixty-one percent agreed or strongly agreed that P3T helped them perform physical job responsibilities.

(2) Fifty-seven percent agreed or strongly agreed that P3T helped them perform mental job responsibilities.

(3) Seventy-one percent agreed or strongly agreed that P3T helped them maintain a score of 60 or more for push-ups in 2 minutes.

(4) Sixty-eight percent agreed or strongly agreed that P3T helped them maintain a score of 60 or more for sit-ups in 2 minutes.

(5) Sixty-four percent agreed or strongly agreed that P3T helped them maintain a score of 60 or more for the 2-mile run.

(6) Fifty-one percent agreed or strongly agreed that they would not have passed the APFT after delivery without P3T participation.

(7) Sixty-four percent agreed or strongly agreed that the training alleviated concerns about transitioning back to unit physical training.

h. For information regarding P3T contact: US Army Public Health Center, ATTN: MCHB-PH-HEA (P3T), Aberdeen Proving Ground, MD 21010; Commercial 410-436-2303, DSN 584-2303, usarmy.apg.medcom-phc.mbx.hpw-p3t@mail.mil.

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