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# Exercise Beliefs During Pregnancy in a Predominantly Low-Income, Urban Minority Population

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## INTRODUCTION

In 2002, and reaffirmed in 2009, The American College of Obstetricians and Gynecologists recommended that healthy pregnant women exercise for at least thirty minutes most days of the week. Exercise during a healthy pregnancy is safe and has many maternal and fetal benefits. Identified benefits include management of weight gain, improvement in mood, and preparation for labor. Previous research has evaluated women's beliefs and practices of exercise in pregnancy, but it has focused on affluent, ethnic majority populations. This survey study was performed to assess beliefs about exercise in pregnancy in a predominantly low-income, urban minority population.

## METHODS

Pregnant patients at two academic practices providing routine prenatal care voluntarily completed surveys evaluating beliefs about exercise and exercise habits during pregnancy. The survey was anonymous and consisted of an introduction with descriptive information about the survey; standard university consent information; and fourteen multiple-choice questions with additional opportunities for free text answers when applicable. Answers were compared between high- and low-income categories using chi-squared test and logistic regression.

## FIGURES

TABLE 1. Demographics of Patients

	<b>1</b> 0	0/
	n	<u>%</u>
RACE/ETHNICITY		
African American	129	70.9%
Caucasian	25	13.7%
Hispanic	9	4.9%
Asian/Pacific Islander	10	5.5%
Native American	1	0.5%
Other	8	4.4%
Household Income		
\$0-24,999	90	54.5%
\$25,000-49,999	45	27.3%
\$50,000-74,999	13	7.9%
\$75,000-99,999	10	6.1%
\$100,000+	7	4.2%

TABLE 2. Selected Survey Answers

	n	%	
Is it safe to exercise in pregnancy?			
Yes	150	86.2%	
No	2	1.1%	
"I don't know"	22	12.6%	
Does exercise hurt/injure your baby?			
Yes	4	2.3%	
No	134	77.0%	
"I don't know"	32	18.4%	
Does your doctor talk to you about exercise during your pregnancy?			
Yes	92	52.9%	
No	68	39.1%	

## RESULTS

Most of the 176 participants were single (72.8%), African American (70.1%), and low-income (77.6% with household income < \$50,000). The majority of women believe that exercise is safe and this did not differ significantly between income categories. The low impact aerobic exercises of walking and swimming were most often cited as safe exercises. However, higherincome women were more likely to report exercising and receiving counseling on exercise during their pregnancy from their provider. This was statistically different between the two income categories (p=0.004), with higher income women 4.11 times more likely to report having been counseled by their physician about exercise in pregnancy.

#### CONCLUSION

These results support that the majority of women, regardless of ethnic or economic background, believe exercise is safe in pregnancy. Interestingly, there was a difference in reported counseling by providers between income classes, which may contribute to the differences in exercise practice during pregnancy. Possible causes of this discrepancy may income provider bias in perceived access to safe places in which to exercise, speculation on compliance if counseling was provided, more pressing social issues, or medical concerns during pregnancy. However, further research is needed to determine if and why there is a difference in counseling between socioeconomic classes.