



## Final tasks to complete the NEPPE training

### I. Options for completing the NEPPE training

There are two options for the NEPPE training graduates:

1. To get the certificate of participation in the NEPPE training you just need to pass the online theoretical test (similar to this one which you had at the beginning of the training);
2. To confirm your theoretical and practical preparation and gain the supplementary qualification for exercise professionals “Exercise in pregnancy and postpartum” you need to pass:
  - a. the online theoretical test
  - b. two practical tasks (to design 8-week exercise programme and record a video exercise session);
3. After completion theoretical and practical tasks:
  - a. Those NEPPE participants who are currently students, will be registered in the European Register of Exercise Professionals (EREPS);
  - b. Those NEPPE participants who are not students, will be eligible to register individually (paying the registration fee) in the European Register of Exercise Professionals.

### II. The deadlines

1. Theoretical test will be open online for one hour:
  - a) **on Friday, the 31st of March, 16.00-17.00 CET**
  - b) the second date to take the test will be **on Friday, the 7<sup>th</sup> of April, 16.00 CET** (for these participants who would like to improve the scores or will not be able to attend on the **31st of March**)
2. The deadline to send the practical tasks is **the 16<sup>th</sup> of April** (this deadline will not be extended).
3. The participants will be informed about the results of the final practical assessments by the **14<sup>th</sup> of May 2023**.

### III. The theoretical test

1. General information:
  - a) the test will include 50 questions
  - b) 60% of correct answers is required to pass the test
  - c) The participants will get the links to the test via MS Teams platform (we will use the google forms application for the test).
2. During the theoretical test, the participants will confirm the following learning outcomes.



## „Exercise in pregnancy” module

### Unit 1: Theoretical basis of planning and conducting exercise programmes for pregnant women

1. Describes current recommendations for physical activity of the pre-pregnancy inactive, active, female athletes and obese pregnant women (e.g., WHO (1), ACOG (2), SOCG/CSEP (3), SMA (4), IOC (5), UK Sport (6));
2. Describes the structure of the female reproductive organs;
3. Describes the basics of the physiology of pregnancy in each trimester and the physiology of birth;
4. Explains adaptive changes to pregnancy (including to the musculoskeletal, cardiovascular, respiratory, endocrine systems, body composition and biomechanics of women), determining planning and conducting prenatal exercise programmes;
5. Explains the potential benefits of prenatal physical activity for the mother, the course of pregnancy and foetal development and health, labour and delivery (including in terms of cardiovascular parameters, muscular strength, flexibility, neuromotor parameters, body composition and weight gain, posture and quality of life).
6. Describes psychosocial changes related to pregnancy;
7. Lists the main barriers to participation in prenatal physical activity and exercise;
8. Describes signs of depression and anxiety in pregnant women;
9. Describes stress management techniques (e.g., relaxation exercises, breathing exercise, meditation, visualisation, etc.).

### Unit 2: Health issues and safety considerations related to pregnancy

1. Describes the risk factors and prevalence of discomforts and health conditions associated with pregnancy (including gestational diabetes, overweight, obesity, oedema, low back pain, pelvic pain, hypertension, pre-eclampsia, musculoskeletal disorders, diastasis recti abdominis, stress urinary and faecal incontinence and other pelvic-floor disorders, depression and anxiety, oral health, sleep disorders, headache, digestive disorders, foetal macrosomia, etc.);
2. Explains the preventive role of prenatal physical activity in relation to common potential pregnancy discomforts, complications and chronic disease in mothers and children.
3. Lists absolute and relative contraindications for physical activity during pregnancy;
4. Lists reasons for an urgent termination of a prenatal exercise session;
5. Describes the possible adaptations to physical activity and exercise in the presence of specific discomforts in the course of pregnancy and the mother's health (e.g., back pain, UI);
6. Lists sports and physical activities which should be performed with a special caution during pregnancy;
7. Lists sport activities to be avoided during pregnancy (e.g., high risk of fall and contact sports, diving, etc.).
8. Describes basic nutrition recommendations for pregnant women;
9. Describes other aspects of healthy lifestyle related to pregnancy (e.g., use of tobacco, alcohol)



and caffeine, sleep and rest patterns, avoiding stress).

### Unit 3: Health screening and fitness assessment in pregnant women

1. Describes the rules and safety considerations in screening and exercise testing of pregnant women;
2. Describes examples of specific tools used in the pre-exercise and fitness assessment of pregnant women, based on questionnaires, e.g., Get Active Questionnaire for Pregnancy (7); the PARQ+; the PPAQ - Pregnancy Physical Activity Questionnaire (8), and based on functional tests e.g., for the assessment of cardiopulmonary capacity, strength, balance, flexibility, etc., or wearables, e.g., pedometer, heart rate monitors.

### Unit 4: Prescription, implementation, and adaptation of exercise for pregnant women

1. Describes current guidelines for exercise prescription for pregnant women, i.e., according to Santos-Rocha R. (9), ACSM (10), Mottola et al. (3);
2. Describes the most recommended forms of exercise (e.g., walking, aerobics/step exercise, water exercise, swimming, indoor cycling, strength training, pelvic-floor training, stretching);
3. Describes the recommended forms of exercise that require previous skill and adaptation (e.g., running and outdoor cycling);
4. Describes the rules of adaptation of the so-called risky sports (e.g., skiing and skating, etc.);
5. Describes the structure of the prenatal exercise session;
6. Describes current recommendations on how to reduce sedentary time during pregnancy.
7. Describes physiological and psychosocial aspects of birth;
8. Explains the role of various tools to decrease the level of anxiety or childbirth fear and implement appropriate exercises against these conditions into an exercise programme (e.g., pregnancy and childbirth visualisation, stress management techniques, exercises for pain relief);
9. Dispel common myths about exercise during pregnancy (e.g., associating first-trimester exercise with miscarriage, associating exercise with adverse birth outcomes);

## „Exercise in postpartum” module

### Unit 1: Theoretical basis of planning and conducting exercise programmes for postpartum women

1. Describes current recommendations for physical activity during postpartum for pre-pregnancy inactive, active, female athletes and obese women (e.g., WHO (1), ACOG (2), SOCG/CSEP (3), SMA (4), IOC (11), UK Sport (6));
2. Describes the basics of the physiology of each phase of postpartum period (acute, immediate, delayed postpartum) and physiology of lactation;



3. Explains adaptive changes to postpartum (including to the musculoskeletal, cardiovascular, respiratory, endocrine systems, body composition and weight loss, and biomechanics of women), determining planning and conducting postnatal exercise programmes;
4. Explains the potential benefits of postnatal physical activity for the mother's health and the course of puerperium (e.g., in terms of body composition, posture, sleep patterns, and quality of life).
5. Describes psychosocial changes related to postpartum period;
6. Describes the potential benefits of PA in postpartum for mother's well-being and interaction with the baby;
7. Lists the main barriers to participation in postnatal physical activity and exercise;
8. Describes signs of depression and anxiety in postpartum women;
9. Describes stress management techniques (e.g., relaxation exercises, breathing exercise, meditation, visualisation, etc.).

#### Unit 2: Health issues and safety considerations related to postpartum period

1. Describes the risk factors and prevalence of discomforts and health conditions associated with postpartum (e.g., inflammation of stitches and vulva veins, perineal injury or caesarean section wound, painful breasts or inflammation of the breasts or mastitis, back pain, hip instability, urinary incontinence, pelvic organ prolapse, diastasis recti abdominis, fatigue, interrupted sleep; overweight; diabetes, hypertension);
2. Explains the preventive role of postnatal physical activity in relation to common potential postpartum discomforts, complications, and chronic disease.
3. Lists contraindications for physical activity during postpartum period;
4. Lists reasons for an urgent termination of a postnatal exercise session;
5. Describes the possible adaptations to physical activity and exercise in the presence of specific complications in the course of puerperium and the mother's health;
6. Lists sport activities to be avoided or limited during at different stages of postpartum (e.g., exercise in water or high-impact activities).
7. Describes basic nutrition recommendations for postpartum and lactating women;
8. Describes other aspects of healthy lifestyle related to postpartum and early motherhood (e.g., sleep and rest patterns, avoiding stress use of tobacco, alcohol and caffeine).

#### Unit 3: Health screening and fitness assessment in postpartum women

1. Describes the rules and safety considerations in screening and exercise testing of postpartum women;
2. Describes tools which can be used in the pre-exercise and fitness assessment of postpartum women (e.g. the protocol developed by Goom et al. (12), International Physical Activity Questionnaire (13); SF-12 Health Survey (14); PARQ+ (15), or wearables, e.g., pedometer, heart rate monitors.



#### Unit 4: Prescription, implementation, and adaptation of exercise for postpartum women

1. Describes current recommendations for exercise prescription for postpartum women (9);
2. Describes the most recommended forms of exercise for each stage of postpartum period (e.g., walking, dancing, core training, posture correction, resistance and pelvic-floor training, stretching);
3. Explains how the type of delivery may affect the planning and implementation of exercise for women in immediate postpartum period, the so-called “fourth trimester” (e.g., the need of proper selection of exercise positions and equipment);
4. Describes exercises which can be performed by a woman at hospital and at home in the immediate postpartum period;
5. Describes the rules of returning to sport activities of higher intensities, higher impacts, and more advanced skills (e.g., running, outdoor cycling, skating);
6. Describes the structure of the postnatal exercise session and justifies the need for planning shorter intervals of exercise;
7. Explains how the breastfeeding can affect the exercise programme planning and implementation;
8. Describes alternative exercise equipment which can be used by a postpartum participant at home (e.g., a chair, water bottles, barre);
9. Describes potential activities which can reduce time spent sedentary by postpartum women.
10. Dispels common myths about exercise during postpartum (e.g., making breast milk sour through exercise; having to wait up to several months after giving birth before any exercise);



**IV. The practical tasks:**

- a. Task 1: the 6-8 weeks exercise programme for a pregnant or postpartum client
- b. Taks 2: The video of an exercise session for pregnant and postpartum client
- c. The practical tasks must be sent via [info.neppe@awf.gda.pl](mailto:info.neppe@awf.gda.pl)
- d. To complete the NEPPE training, one task is performed for a pregnant client, the other - for a client after childbirth, (e.g. an 8-week exercise programme is prepared for the pregnant client, and a one-time exercise session for the postpartum client. It may be the other way around.) Two different characteristics of clients are required.

**IV. 1. Task 1: the 6-8 weeks exercise programme for a pregnant or postpartum client**

Exercise programme for a **pregnant or postpartum client** (6-8 weeks)

Your name and surname:.....

Description of the pregnant or postpartum client:

1.	PA level	
2.	Age	
3.	Which stage of pregnancy or postpartum?	
4.	Which pregnancy is it/was?	
5.	Any miscarriages (how many)?	
6.	Self-perception of health (any discomforts, which)	
7.	Occupation	
8.	What are the main motivations for exercising?	
9.	Which are the women’s preferences regarding exercise?	
10.	What can be the main barriers and facilitators?	
11.	Other	



List the tools (at least three) which you will use to screen and/or monitor the client’s health and fitness status:

No	The name (or short description) of the tool	Parameters to be measured	Short justification why a particular parameter should be measured in your client
1.			
2.			
3.			

Description of the exercise programme for pregnant or postpartum client:

Type	Intensity	Duration	Frequency	Progression / Adaptation / Comments (if applicable)
<b>Aerobic</b>				



PROGRAM SPINAKEK



Resistance*				
Flexibility*				
Neuromotor*				





PROGRAM SPINAKER



<b>Pelvic floor training*</b>				

\*All exercises must be described: 1. starting position, 2. the movement, 3. which muscles are mainly involved, 4. when you exhale and inhale 5. when you activate the PFM 6. potential precautions and options of difficulty (e.g. in terms of the posture, women's well-being)

Additional comments:

.....

.....

.....

.....

.....

.....

.....



## IV.2. Assessment Form for Exercise programme design form for pregnant and postpartum client

To complete the NEPPE training, one task is performed for a pregnant client, the other - for a client after childbirth, (e.g. an 8-week exercise programme is prepared for the pregnant client, and a one-time exercise session for the postpartum client. It may be the other way around.) Two different characteristics of clients are required.

Name and surname of the NEPPE training participant:		
No		Scores
1.	Score of client description	
2.	Score of list the tools to screen and/or monitor the client's health and fitness status	
3.	Score of exercise programme design form	
<b>Total score:</b>		

### PART 1 -

The material of the pregnant or postpartum client description is assessed in accordance with the following scoring criteria:

- 0 – did not fill in the field,
- 1 – fill.

		Scores (0-1)
12.	PA level	
13.	Age	
14.	Which stage of pregnancy or postpartum?	
15.	Which pregnancy is it/was?	
16.	Any miscarriages (how many)?	
17.	Self-perception of health (any discomforts, which)	
18.	Occupation	



19.	What are the main motivations for exercising?	
20.	Which are the women's preferences regarding exercise?	
21.	What can be the main barriers and facilitators?	
22.	Other, if applicable	
<b>Total score:</b>		

**PART 2 -**

The material of list the tools to screen and/or monitor the client's health and fitness status is assessed in accordance with the following scoring criteria:

- 0 – did not fill in the field or incorrect,
- 1 – sufficient,
- 2 – good,
- \*Extra 1 point - for at least three tools

No	Description	Score (0-2)
1.	First tool	
	The name (or short description) of the tool	
	Parameters to be measured	
2.	Second tool	
	The name (or short description) of the tool	
	Parameters to be measured	
3.	Third tool	
	The name (or short description) of the tool	
	Parameters to be measured	
4.	Preparation of at least the required 3 tools*	



<b>Total score:</b>	
---------------------	--

**PART 3 -**

The material of exercise programme design form for pregnant and postpartum client is assessed in accordance with the following scoring criteria:

- 0 – did not fill in the field or incorrect,
- 1 – sufficient,
- 2 – good,
- 3 – very good,
- \*Score 0-1 – for Progression / Adaptation/ Comments
- \*\*Extra 1 point - for additional comments

No	Description	Score (0-3)	
1.	Aerobic	Type	
		Intensity	
		Duration	
		Frequency	
		Progression / Adaptation/ Comments*	
2.	Resistance	Type	
		Intensity	
		Duration	
		Frequency	
		Progression / Adaptation/ Comments*	
3.	Flexibility	Type	
		Intensity	
		Duration	
		Frequency	
		Progression / Adaptation/ Comments*	



4.	Neuromotor	Type	
		Intensity	
		Duration	
		Frequency	
		Progression / Adaptation/ Comments*	
5.	Pelvic floor training	Type	
		Intensity	
		Duration	
		Frequency	
		Progression / Adaptation/ Comments*	
6.	Additional comments**		
<b>Total score:</b>			



### IV.3. Taks 2: The video of an exercise session for pregnant and postpartum client

#### Assessment Form for conducting an exercise session for pregnant and postpartum client

The video material confirms the ability to plan and conduct a pro-health exercise session for a pregnant or postpartum client and should meet the following requirements:

1. The exercise session is conducted with at least **one pregnant or postpartum participant** (The client can simulate pregnancy or postpartum).
2. **In the video material, before starting the session, the NEPPE training participant presents the pregnant or postpartum client, according to the criteria set out in point 10);**
3. The material is supplied in the video file, not exceeding the size of 800 MB;
4. The exercise session can be conducted anywhere (in the gym, at home, outdoors).
5. Any sports equipment can be used in the session, but it is not necessary (only exercises with own body resistance can be used);
6. The session should last at least 30 minutes, maximum 90 minutes (the duration and the intensity should be properly planned taking into account the characteristics of the client)
7. A person participating in the exercise session as a pregnant or postpartum client, before starting the recording, must give written consent to the recording and use of their image in the recruitment process. The NEPPE training participant may be asked to send this consent to the NEPPE training organizer.
8. At the beginning of the video file, the NEPPE training participant should display the information that the presented exercise session is carried out as a final practical exam in the international training of instructors and trainers working with pregnant and postpartum clients. If possible, include the NEPPE logo and the obligatory logo of the financing institution and EU.
9. The NEPPE training participant agrees that the provided video material will be used for educational and promotional purposes of the NEPPE project.
10. The pregnant or postpartum client description should include following information:

23.	PA level	
24.	Age	
25.	Which stage of pregnancy or postpartum?	
26.	Which pregnancy is it/was?	
27.	Any miscarriages (how many)?	
28.	Self-perception of health (any discomforts, which)	
29.	Occupation	
30.	What are the main motivations for exercising?	



31.	Which are the women's preferences regarding exercise?	
32.	What can be the main barriers and facilitators?	
33.	Other, if applicable	

To complete the NEPPE training, one task is performed for a pregnant client, the other - for a client after childbirth, (e.g. an 8-week exercise programme is prepared for the pregnant client, and a one-time exercise session for the postpartum client. It may be the other way around.) Two different characteristics of clients are required.



### IV.4. Assessment Form for the exercise session with pregnant or postpartum client (video material)

The video material is assessed in accordance with the following criteria (all skills must attain at least the score of 1):

Name and surname of the NEPPE training participant:			
No	The NEPPE training participant presents following skills:	Indicate time in your session*	Scores (0-3)**
1.	plans the correct structure of the exercise session (warm-up, main part, cool down):		
	A) Aerobic exercises***		
	B) Resistance exercises for major muscle groups (including abdominal muscle exercises)		
	C) Flexibility exercises		
	D) Neuromotor exercises		
	E) Pelvic floor training		
	F) Breathing exercises, relaxation, visualisation and/or birth preparation exercises.		
2.	correctly selects exercises, their difficulty and intensity appropriate to the needs, abilities, stage of pregnancy/postpartum, potential discomforts of the client <b>(based on the provided characteristics of the pregnant or postpartum client)</b> ;		
3.	safely organizes the exercise session, e.g. in terms of proper use of exercise equipment, removing dangerous objects from the exercise site, checking the client's preparation and readiness to participate in the session;		
4.	demonstrates the exercises correctly;		





5.	monitors the intensity, e.g. observing the client, asking questions, with the Borg's RPE scale, pulsometer;		
6.	depending on the client's performance, modifies the intensity and difficulty of the exercises, e.g. using breaks, breathing exercises, changing the tempo of exercise or adapting exercises;		
7.	clearly instructs the client about the correct technique of the exercise, e.g. about the starting position, breathing pattern, technical tips;		
8.	informs participants about the purpose of individual exercises and health benefits, e.g. "in these exercises we stimulate the cardiovascular system, strengthen the abdominal muscles", "thanks to these exercises you will prevent backache", etc.		
9.	notices the technical mistakes of the client and reacts to them, (e.g. by changing the exercise, modifying, instructing, commenting), and enforces the correct exercise technique from the client;		
10.	greet and says goodbye to the client and makes eye contact;		
11.	asks the client about the well-being at the beginning, during and at the end of the session;		
12.	motivates the client to the physical effort during the session and encourages to participate in future classes;		
13.	uses professional language in contact with the client;		
14.	presents an appropriate level of motor preparation, which enables proper technique demonstration and proper course of the exercise session;		
15.	wears sports clothes and shoes, appropriate to the environment of the exercise session.		
<b>Total score:</b>			
*to be filled in by the participant			
** to be filled in by the assessor: 0 – incompetent, 1 – sufficient, 2- good, 3 – very good			
*** all types of exercise from the A-F points must be presented			



## References:

1. WHO. WHO guidelines on physical activity and sedentary behaviour. Geneva: World Health Organization. Geneva: World Health Organization; 2020.
2. ACOG. ACOG Committee Opinion No. 804: Physical Activity and Exercise During Pregnancy and the Postpartum Period. *Obstetrics and Gynecology* [Internet]. 2020; 135(4):[e178-e88 pp.].
3. Mottola MF, Davenport MH, Ruchat S-M, Davies GA, Poitras VJ, Gray CE, et al. 2019 Canadian guideline for physical activity throughout pregnancy. *British Journal of Sports Medicine*. 2018;52(21):1339-46.
4. Hayman M, Brown W, Ferrar K, Marchese R, Tan J. SMA Position Statement for Exercise in Pregnancy and the Postpartum Period 2016. Available from: <http://sma.org.au/wp-content/uploads/2016/09/SMA-Position-Statement-Exercise-Pregnancy.pdf>.
5. Bø K, Artal R, Barakat R, Brown W, Davies GAL, Dooley M, et al. Exercise and pregnancy in recreational and elite athletes: 2016 evidence summary from the IOC expert group meeting, Lausanne. Part 1-exercise in women planning pregnancy and those who are pregnant. *British Journal of Sports Medicine*. 2016;50(10):571-89.
6. UKSport. Pregnancy Introduction Guidance and Support for UK Sport Funded Athletes. Governing Body and Athlete Guidance | UK Sport: UK Sport; 2021.
7. CSEP/SCPE. Get Active Questionnaire for Pregnancy (GAQ-P). [www.csep.ca/getactivequestionnaire-pregnancy](http://www.csep.ca/getactivequestionnaire-pregnancy): Canadian Society for Exercise Physiology (CSEP); 2021.
8. Chasan-Taber L, Schmidt MD, Roberts DE, Hosmer D, Markenson G, Freedson PS. Development and validation of a pregnancy physical activity questionnaire. *Medicine and Science in Sports and Exercise*. 2004;36(10):1750-60.
9. Santos-Rocha R, editor. Exercise and sporting activity during pregnancy and postpartum. Evidence-based guidelines. 2nd ed. Cham: Springer International Publishing; 2022.
10. Liguori G, editor. ACSM's Guidelines for Exercise Testing and Prescription. 11th ed: Wolters Kluwer; 2021.
11. Bø K, Artal R, Barakat R, Brown WJ, Davies GAL, Dooley M, et al. Exercise and pregnancy in recreational and elite athletes: 2016/17 evidence summary from the IOC Expert Group Meeting, Lausanne. Part 3-exercise in the postpartum period. *British Journal of Sports Medicine*. 2017;51(21):1516-25.
12. Goom T, Donnelly G, Brockwell E. Returning to running postnatal. Guidelines for medical, health and fitness professionals managing this population.: The Association of Chartered Physiotherapists in Sports and Exercise Medicine; 2019.
13. Craig CL, Marshall AL, Sjostrom M, Bauman AE, Booth ML, Ainsworth BE, et al. International physical activity questionnaire: 12-country reliability and validity. *Medicine and Science in Sports and Exercise*. 2003;35(8):1381-95.
14. Gandek B, Ware JE, Aaronson NK, Apolone G, Bjorner JB, Brazier JE, et al. Cross-validation of item selection and scoring for the SF-12 Health Survey in nine countries: results from the IQOLA Project. *International Quality of Life Assessment*. *Journal of clinical epidemiology*. 1998;51(11):1171-8.
15. The Physical Activity Readiness Questionnaire for Everyone (PARQ+). [eparmedx.com](http://eparmedx.com) 2021.