

# Fourth Trimester Podcast

## Episode 20: Fitness Coach Brianna Battles On Exercise During Pregnancy And Postpartum

**Sarah Trott:** [00:00:05] My name is Sarah Trott. I'm a new mama to a baby girl and this podcast is all about postpartum care for the few months following birth, the time period also known as the Fourth Trimester. My postpartum doula, Esther Gallagher, is my co-host. She's a mother, grandmother, perinatal educator, birth and postpartum care provider. I've benefited hugely from her support. All parents can benefit from the wisdom and support that a postpartum Doula provides. Fourth trimester care is about the practical, emotional and social support parents and baby require, and importantly, helps set the tone for the lifelong journey of parenting.

Our podcasts contain expert interviews with specialists from many fields to cover topics including postpartum doula practices, prenatal care, prenatal and postnatal yoga, parenting, breastfeeding, physical recovery from birth, nutrition, newborn care, midwifery, negotiating family visitation, and many more.

First-hand experience is shared through lots of stories from both new and seasoned parents. Hear what other parents are asking and what they have done in their own lives.

We reference other podcasts, internet resources and real-life experts who can help you on your own parenting journey. Visit us at <http://fourthtrimesterpodcast.com>

**Sarah Trott:** [00:00:47] Hi everyone. Welcome back to the fourth trimester podcast. I'm Sarah Trott and I'm joined today with special guest Briana Battles. And today's episode is all about exercise during pregnancy and just after pregnancy in the postpartum period. Before we dive in, I wanted to thank our Patreon sponsors and encourage anyone who's interested in sponsoring the show to go to our Patreon page. And there's a link to that on our website, which is <http://fourthtrimesterpodcast.com>, and that is also

where you can sign up for our newsletter should you be interested in hearing more from us. So please do sign up.

**Sarah Trott:** [00:01:21] So Briana is a strength and conditioning coach and she has a practice out of 1,000 Oaks. She's been doing it for quite a while. She specializes in women's health and fitness and in particular pre and post natal athleticism. And she's also the very busy mommy of a three year old boy.

**Sarah Trott:** [00:01:41] So there's a lot of experience that she has and she brings to the table with these conversations. And I should also say, in addition to having her Master's degree in Coaching and Athletic Administration and her Bachelor's in Kinesiology, and if you'd like to hear more about her background and her practice and everything she does, her website is <https://www.briannabattles.com> and it's very easy to Google and find her as well because her last name is Battles, which is wonderful. So welcome Briana, thank you so much for being on our program today.

**Brianna Battles:** [00:02:17] Thank you. Thank you for having me.

**Sarah Trott:** [00:02:19] I'd love to hear a little bit about how you got into doing what you're doing today.

**Brianna Battles:** [00:02:27] Well, it definitely, I feel is a calling for me. I wasn't always working with primarily women or I haven't always owned my own business, but I've always been in the fitness world in some capacity, at least for the last eight years or so. But what, I guess, encouraged me and when I felt called to start my own business was after the birth of my son about three, almost three and a half years ago, because I had a really rough delivery and a really hard recovery. Fourth trimester was pretty hard for me, and I realized that there's not a lot of information out there for women, at least in America, on how to heal and how to exercise and move postpartum.

**Brianna Battles:** [00:03:24] We're just kind of told you're cleared and you know, you can go back and resume activity, but that's just not good enough information. So it was through my own, like, self advocacy and research that I realized that I had a pretty severe case of Diastasis Recti, which I know we'll touch on a bit later. And just through a lot of trials and tribulations, I ended up getting connected with the right people in order

to help heal that dysfunction. And I realized that if I felt this lost and confused and overwhelmed with the information that exists on the Internet, social media, doctors all saying different things, you know, a lot of women were confused.

**Brianna Battles:** [00:04:05] And moms matter. Their health matters, their physical, mental, emotional, all of that is so connected. And it really has never felt like there was a lot of people advocating for this particular population. It seems like moms get forgotten about a lot. So I just felt really called to take what I could, like my background in education and exercise science and in coaching and start my own business where I could work with women through these chapters and help them recover postpartum to make a return to the fitness that they enjoy.

**Brianna Battles:** [00:04:45] And with my high level athletes, like get them back to competition, and then for my lifestyle fitness moms, just get them moving and functioning as a form of self care. I have a pretty wide scope with the women that I work with, but it keeps me on my toes and I really love it because postpartum doesn't discriminate. Pregnancy is temporary and postpartum is forever. And so the more information we can have about our bodies and health during these chapters, the better.

**Sarah Trott:** [00:05:16] I absolutely agree. I find it fascinating that you yourself felt confused about the right way to care for yourself, given this is your area of expertise.

**Brianna Battles:** [00:05:28] Right. So the funny thing is, like women's health is not taught in undergraduate school for me anyway, in kinesiology science, there's no emphasis in women's health and nor is there any program. So even physical therapists have to get trained, have to have a specialty in this to know. So there's just really not a whole lot of information out there and it did take a lot of my own, like forced continuing education to get better answers because I just assumed I was healthy, I was fit, I was in shape.

**Brianna Battles:** [00:06:06] I felt really confident in my movement patterns and knowledge surrounding my body. But pregnancy poses different demands and postpartum poses even greater demands. So we cannot just, quote, trust our bodies. That's just not good enough information. That is a very small piece of what it means to

take care of our body and recover and actually be fit not just during pregnancy, but for the remainder of our life. That's a priority.

**Sarah Trott:** [00:06:42] And what was your pregnancy and postpartum experience like? Like in general, but also in relation to exercise and how you stayed fit and stayed healthy.

**Brianna Battles:** [00:06:55] Right. Well, during my pregnancy I felt really confident and really fit. I was set on having a natural childbirth and I felt just like really strongly about that. I don't want to say that I thought my body was invincible, but I just felt a lot of confidence in like I was made to do this, you know? And I can keep doing what I've always done because I've been doing this for years.

**Brianna Battles:** [00:07:21] And so it was now I can look back and say that I was confident to a fault because you cannot like pregnancy just requires different demands. And our fitness during that chapter requires us to adapt a little bit, adapt our training a little bit more. And it goes so far beyond just basic exercise modifications. It's everything because our physical structure changes so much.

**Brianna Battles:** [00:07:50] And nobody talked to me about diastasis recti or pelvic floor dysfunction as being potential implications of how we train during pregnancy, how we train in our early postpartum chapter. All I had really seen was the benefits of exercise during pregnancy and listen to your body and just keep moving. But there was no strategy for training. It was just really generic messaging. So it was kind of left to my own devices, which again even with all the education in the world, it just didn't matter because it wasn't good enough for treating the big picture.

**Brianna Battles:** [00:08:36] So my early postpartum chapter was really difficult. I ended up with an emergency C-section and it was really traumatizing. Again I really was set on having a natural childbirth. So I had these high expectations and of myself, of my body, of how things would be.

**Brianna Battles:** [00:08:53] And you know, that didn't happen. And that was really hard for me to recover from in a lot of ways. And I feel like that was sort of what started this snowball effect of just feeling like I was drowning for a long time. Like I was really low,

really anxious, really like I just wanted to feel normal again. I wanted to feel normal in my body. I wanted to feel like I didn't lose my whole life in my identity and acclimating to having a baby and a baby that cried all the time was like it was really hard on me. And I just feel like I just had a really rough time coming into motherhood for a variety of reasons, like problems breastfeeding. But I was really hell bent on pursuing that because I felt like that was the only thing in my control still was trying to breastfeed. So that fourth trimester was brutal.

**Brianna Battles:** [00:09:54] And then the pressure to work in the fitness industry and, quote, get my body back. And like that messaging is so destructive for women. And so I steer clear of talking about that with any of my clients. It's not about getting your body back. It's about getting your function back and healing well and letting like learning to be a mom first because the gym and fitness will always be there and we can do a lot more damage in that desperation to lose weight and force our body to change faster than we do if we just have a slower and more peaceful approach to it.

**Sarah Trott:** [00:10:38] What was your workout regimen like before you were pregnant? I mean, I understand this is your career, so it's probably not like it might not be the example that everyone should hold themselves to or feel bad for not doing that. But like, what was your typical regimen like before you were pregnant and then what was it like during your pregnancy?

**Brianna Battles:** [00:11:00] Well, it's pretty much been the same or was the same. So I was training maybe 5 to 6 days a week or so, like I was lifting weights, kind of CrossFit sort of vibe, I suppose, mixed with powerlifting. And then during pregnancy, I kept pretty much training the same way with some basic modifications, but I was still lifting heavy. I ran until I was like seven months pregnant. I just like very general strength and conditioning and then I was cleared at eight weeks postpartum and I wasn't really able to do anything during that time.

**Brianna Battles:** [00:11:43] The first eight weeks were just again, really, really hard. And, you know, my doctor was like, well, everything looks good. You know, your scar is healing well and whatever. And I was just sort of left to kind of troubleshoot what my fitness routine would be like. And I started slow but again, there was no strategy in place as far as my alignment, my breathing, and how to progress. You know, how to

progress my programming. And so I just sort of tried to start slow and then I just did what I thought I should be able to do, but I didn't do it in a way that was helping a diastasis heal and I did not have pelvic floor dysfunction, but I feel like I easily could have.

**Brianna Battles:** [00:12:34] And so many women that are super fit and strong and whether they have great deliveries or not like, and nobody can escape like, I don't know, like pregnancy and postpartum and our deliveries just they don't discriminate like anybody can, is impacted by birth. So there's just no getting around that. And how we train can either help with healing or preventing or it can hinder that and contribute.

**Sarah Trott:** [00:13:07] Yeah, and contribute is what I'm hearing loud and clear. Looking back, would you have worked out as intensely as you did during your pregnancy? Had you known what you know now?

**Brianna Battles:** [00:13:19] It wasn't so much about the intensity, it was how I was doing it. So what I like to say is it's not so much what you're doing, it's how you're doing it. So. And that has a lot to do with how are you moving? Are you holding your breath? How are you standing? How are you, what is your ribcage doing? What kind of pressure is that putting on your abdomen or your pelvic floor? Like it all has to do with strategy. Not so much about set rules with, well, don't do this and don't do that. Now I don't have my clients run pretty much once their belly starts to really show because to me there's we have to learn to measure risk versus reward and not all coaches are going to know how to do that. And not all practitioners, very few actually, will know how to have that conversation.

**Brianna Battles:** [00:14:07] So women need to be informed enough about their body to say, well, can I do this activity or should I do it? And yeah, maybe you can run at nine months pregnant. But I don't think that the risk is worth it. And I can tell you that women who have prolapse and ran through their pregnancy and are now like, why did nobody tell me that, you know, running can create a lot of extra pressure on my pelvic floor and contribute to prolapse? Like, well, like, yeah, maybe for one woman it doesn't happen, but it does increase chances. And so that's where we have to be really aware about our exercise choices, both during pregnancy and in the immediate postpartum chapter. So

our exercise choices that we do after even that can create dysfunction that pregnancy did not create. It's just that we haven't healed yet.

**Sarah Trott:** [00:15:00] I mean, it sounds like with your C section, like the doctors had a specific amount of time that you had to wait. C section or not, what are some general guidelines around the amount of time you think is worth considering?

**Brianna Battles:** [00:15:14] Right. So I guess that's a "it depends" sort of question because every woman's going to be different and there is no rush to start exercising. And I see such a huge spectrum. There's women that are like three days postpartum. I want to start doing something and I'm like, girl, like, slow down and sleep and like, acclimate to this new chapter. But then there's people that are just so tired. They are in a hard transition and like training isn't their top priority. And that's okay too.

**Brianna Battles:** [00:15:49] So I say if you feel good and you want to move that like walking and getting in touch, like doing your breathing and just really paying attention to your alignment, because in those first few months postpartum, all you're doing is sitting and holding a baby and then some women go back to work and more than likely they're going to be sitting even more on their pelvic floor.

**Brianna Battles:** [00:16:14] So like, we just have to pay attention to the little things early on postpartum and then introduce exercise as we feel ready emotionally and for the right reasons, I guess. So, yeah. That guideline is so different. For surgery, they said eight weeks, but I have my C section moms start their breathing and just try to connect their core and pelvic floor early on and same with a vaginal delivery. There's things we can do prior to being, quote, cleared. But is that intense exercise? No. And would I ever recommend intense exercise right after being cleared? No.

**Sarah Trott:** [00:16:59] A lot of the conversations we have on this podcast are focused around care during the postpartum period. So the specific handful of months right after birth, and it's about allowing the person who's just given birth, allowing her to relax and recover. And that could mean having other people help with taking care of their house and their other children and their other responsibilities and really focusing on that, that healing aspect. And so often, like the topic of exercise, it doesn't really enter into the picture a whole lot. But other than the intense pressure, I think that women feel, which

you've touched on, like, let's talk about let's talk more about that. Like where does this pressure come from? Like, why do women feel this intense pressure to just exercise and bounce back?

**Brianna Battles:** [00:17:45] Well, because that's what we're told and that's what we see is like so and so three months after having a baby. It's unfortunately just our culture and these expectations that we're told, oh, you were so fit, you'll bounce right back or you're so whatever, you'll bounce right back. And so we have this preconceived notion that we grow a baby and that weight should just kind of disappear. And, you know, it typically doesn't even for the most fit person, it just takes it's a process.

**Brianna Battles:** [00:18:14] And in regard to that, slow is fast postpartum. So yeah, slow is fast. When it comes to postpartum fitness, like slower you take it, the faster you'll recover because there won't be that desperation factor and we're giving our body adequate time to heal, just like naturally first hormonally kind of get reset, adjust to breastfeeding if that's what the mother is choosing to do or is able to do.

**Brianna Battles:** [00:18:43] And then my gosh, sleeping, like it has such a huge impact on our body and our healing and our mental health. So those have to be the priority, as obviously you talk about in the Fourth Trimester. But a lot of women I work with just take the fourth trimester and also try to like, you know, exercise their belly off, you know, and they'll try to just get out on a run or start doing sit ups. And those are two things that are really pretty detrimental to our body during that chapter.

**Sarah Trott:** [00:19:18] Hmm. I just want to repeat something you said, because it sounds like if women, if we're able to, give ourselves permission to rest and recover and take it slowly and enjoy that early, early period of recovery in terms of sleeping and taking care of our bodies, then we then recovery actually is faster.

**Brianna Battles:** [00:19:44] Right. Because a lot of women get injured early on or create dysfunction early on because they haven't healed and because they're trying to just resume life as normal and like life isn't normal after you just have a baby. Like, hello. I don't care if it's your first baby or your sixth baby. Like, transition is transition and it takes a toll on our physical body and our mind. And we kind of just have to honor that.



**Brianna Battles:** [00:20:11] And if you feel inclined to move and like for me, movement is my self care. It's my it is good for my mental health. So if my time comes again to go through the first trimester, you know, getting out and doing gentle movement initially, just some walking and not feel like, oh my gosh, I have to get back to the gym, you know, that allows our body to heal. And the more we're able to just give ourself that grace, the faster we will recover. That whole first year, it's so much it's so far beyond the fourth trimester. It's really like that first year postpartum that just, it changes our world. And we have to, like, really prioritize what matters.

**Sarah Trott:** [00:21:01] So much of what you're saying sounds relevant for both our physical selves and our emotional selves and our emotional well being. So, for example, on our last episode, I was speaking with Marisa Belger, who wrote "The First 40 Days, and she was talking a lot about relationships, and she made the point that there's no going back. There's only through. And it's a new thing. There's no after you have the baby, you just go back to something else, that just doesn't exist. And it sounds like the same pitfalls in terms of thinking that can happen with thinking about the body.

**Brianna Battles:** [00:21:40] Right. Right. We just kind of have to like own where we are at, and know that it's kind of a temporary phase and get the support that we need and give ourselves that grace to just heal and get connected and advocate for ourselves. Like if you need something, it doesn't feel right. Like I have so many clients that are like, Well, I know I didn't feel totally normal down there at my six week appointment, but my doctors told me that it's normal and that I'm cleared anyway. And that woman ended up having a pretty severe prolapse. And I'm like, okay, if something does not feel right in your vagina, you need to advocate for yourself because that is a big deal.

**Brianna Battles:** [00:22:25] And we just have this is women's health is just totally like, you know, really just kind of ignored like, it's get the baby, it's, you know, support the woman through the pregnancy, get the baby out. And after that, you're kind of left to your own devices to figure out how to be a mom and figure out what's normal for your body and what's not. And most of the time women have no clue what's normal for their body and what's not.

**Sarah Trott:** [00:22:48] Can we talk about some of the terms in a little more depth? Diastasis Recti, prolapse, pelvic issues, pelvic floor issues? Can we just kind of talk

about what each one of those are and maybe any input you have around how to prepare and strengthen your body so that there's a lower chance of these things developing.

**Brianna Battles:** [00:23:10] Right? So Diastasis Recti is when the left and the right sides of the abdomen separate to make room for the baby during pregnancy. So that's like the line of the six pack, that fascia line called the Linea Alba needs to spread to make room for the growing baby. Now, after pregnancy, a Diastasis is normal, but if it does not heal, that's when it becomes a dysfunction, because that's that fascia that is just so stretched out. And with it not being able to even kind of approximate again, it can create back pain, hip pain. People say, oh my gosh, I feel like my core is just so weak or I'm not, I'm not connected there. And that's like what I had. Pelvic floor dysfunction is incontinence and that's leaking when you sneeze or run or jump.

**Brianna Battles:** [00:24:04] And moms always laugh and say, Oh my gosh, I just peed a little. And they think it's pretty normal and it's common, but it is not normal. And that is a sign of pelvic floor dysfunction. And then prolapse is when your vaginal walls collapse and it can feel like sex can be painful, it can feel like a tampon is hanging out a little bit. It can be hard to walk. So these are things that women feel, they experience and oftentimes they don't realize is an issue because nobody really talks about it. Pelvic floor physical therapy in the United States just isn't super common. Like, I mean, it definitely exists, but a lot of people do not know that it exists.

[00:25:00] So I try to, you know, make sure that people know that that is a service that's available. And then there are people like me who try to bridge the gap between physical therapy and fitness and supporting women so that they do know kind of what's up with their body and what to do about it. So what do you do about it? Is that kind of like the next question?

**Sarah Trott:** [00:25:27] Yeah, absolutely. Like, there are probably a lot of listeners who are thinking about becoming pregnant for the first time or who are pregnant or who just had a baby. What can we share with them to help either prevent the chances of these things from happening or, or just address how to gently address each one from a physical and exercise standpoint.

**Brianna Battles:** [00:25:51] Right. Well, a lot of it, again, it's not so much about what you do as it is how you're doing it, but our alignment really matters. And that's, you know, obviously we can't guys can't see me right now. But how we're standing during the day, a lot of moms even before pregnancy, but pregnancy really brings this out and postpartum definitely does. Stand with their butt totally tucked under their body, which brings the trajectory of their stomach up. And so that makes it really hard for the diaphragm to work with the pelvic floor.

**Brianna Battles:** [00:26:26] That also puts a lot more pressure on the linea alba, that's that line of the six pack. And so how we hold our body, how our pressure is distributed in our core and in our pelvic floor through our lifestyle habits really matters. And now we add exercise on top of that. So with an already kind of strained pressure system due to pregnancy, due to how we're most likely standing, you know, that if we're then holding our breath for everything and not realizing it, like I have so many moms, I'm like, show me, show me how you squat. And they'll do a squat and they'll be holding their breath the whole time. And so, you know, that's something to keep in mind, too, is, well, why are we holding our breath? And it's probably because they don't feel very stable. But there's a way of training that. So and that's sinking our breathing to our pelvic floor and that's adjusting how we stand.

**Brianna Battles:** [00:27:27] So diastasis, pelvic floor dysfunction, they're the same thing, like they are sisters. They work together. So what can help prevent a diastasis or heal a diastasis can also help prevent and heal pelvic floor dysfunction and has everything to do with how we stand, how we move, and how we breathe.

**Brianna Battles:** [00:27:48] Unfortunately, in the fitness communities, we've been cued to like tuck your tuck your tailbone or bring your belly button to your spine and all of that. I mean, we need our glutes to be involved in everything that we do, not just tucked and squeezed all the time. That's not how any other muscle works. That's not how our pelvic floor works either. And so the glutes and the pelvic floor like BFFs. So we have to have strong glutes during pregnancy, strong glutes postpartum, and be aware of how we're breathing and how we're standing when we're not at the gym, when we're not trying to start exercising.

It's how you're holding your baby at 2:00 in the morning, because it's not just 2:00 in the morning, it's all day every day. If you're baby wearing, if you're holding that baby, you have that baby on your shoulder, your butt is tucked under and you're just like your ribcage is really thrust up. Like, just think of like the mom stance, right? Like or if you look at a pregnant woman and she's waddling like, what does the front of her look like? Her belly is really rung up, her butt is pretty flat looking, and it just creates more pressure on her linea alba and then on her pelvic floor. And then you add a delivery to that.

Again, regardless of how that baby comes out, it's still trauma. Whether it's through a C-section or a vaginal delivery, it still takes a toll on a woman's body. And we learn to compensate really, really well, because that's what we're great at as human beings.

**Sarah Trott:** [00:29:18] So what's the perfect stance? I mean, it sounds like even if women aren't necessarily going out and exercising, just some small tweaks around breathing and posture could make a big difference. So what's the perfect way to be standing and breathing right?

**Brianna Battles:** [00:29:32] And, you know, like nothing's ever going to be perfect, right? Because we're moms and there's 1000 demands and we can't always be really aware of like, we can't always just be standing perfectly. Like, that's not practical. But the more aware we are of like, Oh my gosh, I've totally been standing with my butt tucked under for like ever now, and we can make that adjustment the better.

**Brianna Battles:** [00:29:53] So I do want to just say like we can't put extra pressure on to be, you know, perfectly aligned all the time because that's just, it's so impractical. But, you know, to stand with your weight over the mid part of your foot versus standing with it in the heel. So ideally you want your weight really distributed well across the middle part of your foot. And then you want to have your ribs over your hips.

**Brianna Battles:** [00:30:18] So a lot of times our ribs are really thrust up and this will still allow you to stand up straight. A lot of times people will hunch their shoulders to accomplish this, but we need to learn how to separate our shoulders from our ribcage. So standing with your ribs over your hips and just kind of like leaning forward slightly to untuck your butt, like literally an inch or so. And sometimes women will feel like, Oh my

gosh, I'm leaning so far forward or I feel like I'm going to fall forward. But really, like, they're standing up straight now. They were just leaning back a ton before, so our body kind of has to adapt to like a new homeostasis.

**Sarah Trott:** [00:30:52] Mm Hmm. Yeah. And the temptation to lean back is what? Because we're trying to balance this heavy belly?

**Brianna Battles:** [00:30:57] Right? The heavy belly. And then holding a baby, breastfeeding, bottle feeding, everything in our life is forward. And we need to be strong posteriorly. Get our glutes involved. When we're totally tucked under, they're not involved. When you're able to, like, distribute your weight, change the trajectory of your belly, whether you're pregnant or not. This is like a universal conversation truly, that really impacts how efficient we are and how much we're using our body to, like, preserve our health, strength and function.

**Sarah Trott:** [00:31:34] What? Yeah, I'm sitting up so much taller now, in this conversation. So what do you, what would you say for like the new mom who's just had you know, she's just had her new baby, like how could like we talked a little bit about the when and timings, but like, how could they start to sort of safely, slowly begin to do exercise again while respecting the needs of the pelvic floor and the entire abdomen?

**Brianna Battles:** [00:32:03] Right. In a very perfect world, I'd say if they're feeling like they're starting to get a little bit more sleep or they do feel like, okay, moving is going to make me feel better. If moving is going to make them feel worse, then it's just not worth it yet. So it's really like listening to that side of your body where you can figure out when exercise is appropriate based on how you are feeling with sleep and adjusting and whatever.

**Brianna Battles:** [00:32:33] And then from there I'd say if you can go to a pelvic floor physical therapist in your area, and it just never hurts to have them check you out. Like, it just doesn't, it doesn't mean that you have to keep going to therapy with them but to have a consult and see if they can do an internal exam or somebody who specializes in pelvic health. And that's, you know, it can be hard, hard to find, but there are resources.

And that way they can just kind of give you more information than what your OB is about, your body. And if you're near a program that has or if you are near like a pre and post natal trainer or somebody like me who specializes in this stuff, like we can also be good points of contact prior to beginning an exercise routine.

**Brianna Battles:** [00:33:20] Okay, are you checked for diastasis? How is your pelvic floor functioning? How is your breathing? How is your alignment? Because all of that matters before you really start trying to get back into a fitness routine. But in general, I have a lot of my clients, I have them just start walking. Walking hills is awesome for healing that core and pelvic floor.

Why? Because it forces you to use your glutes and puts you in a position walking uphill that keeps that core and pelvic floor in a good like just in a nice position to kind of practice breathing and getting the glutes involved. But it totally depends on the client. I wish there was a set of rules for saying things like, this is the order of operations, but there's just not, it's so dependent.

**Sarah Trott:** [00:34:14] There just isn't, is there? Would you say, would you say that it's a good idea to wait until one has stopped bleeding before doing a lot of heavy walking?

**Brianna Battles:** [00:34:27] Yeah. And then I think even that depends. Like, how are they feeling? Are they feeling like they could go on like a little half mile, walk like, up a few houses or something, then great, if they really feel like they can do that. But I don't think anything is really like there's no need to push anything really.

So if we have to also know the mindset of the woman, like if she I call them my athlete brains and I'm also one of them, like where like, oh, I can go walk a little bit further or no, I feel good enough and like, do you or is that just your brain trying to like kind of push it beyond what is actually going to be beneficial for you? So it's really taking a hard look at yourself, your habits, your mindset, and being able to make really quality decisions for your long term fitness during this kind of vulnerable chapter of your life.

**Sarah Trott:** [00:35:21] Mm hmm. I mean, personally, I had to be told not to do a lot of exercise or walking around. I guess I think I benefited from having a lot of information up front where I was being advised to prepare not to be very active for the first couple of

months. And I'm so, so thankful that I heard that loud and clear and was able to to recover because it just, I can't imagine on top of everything my body was going through with recovering from delivering a baby to then have some kind of complication thrown on top that I had caused myself.

**Brianna Battles:** [00:36:01] Right. Right. And it's hard, you know, a lot of women live with some serious guilt and it does contribute to postpartum depression when you have a dysfunction and when you start beating yourself up going, why did that happen? Or what did I do during pregnancy? And sometimes, sometimes we do cause it, but sometimes, it just unfortunately comes with the territory. It's not to be disempowering, but it's again, to be able to make informed choices around what we do and what we don't do. And being able to measure risk versus reward. Because for me, I know that movement was really important to me and it was a huge part of my self care and my mental health.

**Brianna Battles:** [00:36:46] But could I be smarter about it? Yeah, And I think there's a lot of women that that's the conversation we need to have. If you're really desiring to exercise and move, great, how can we meet you where you are? And if you're somebody who's like, I just need to chill and adjust to this whirlwind of whatever, then great. Like, do that and here's some things you can do that will help you connect with your core and pelvic floor so that it assists in your healing. So, it's really so individual and there are no rules. There's just strategies to helping women understand this chapter.

**Sarah Trott:** [00:37:24] How do you feel about Mommy baby boot camps?

**Brianna Battles:** [00:37:28] Um, there's not a lot of quality control there. I think in theory it's great because in a good sense it's a good community for moms to meet other moms to be able to bring their their kids with them or their baby. But I am yet to find a good organization. Pretty much anywhere that is run by somebody who's truly qualified to work with that population, which seems very contradictory, but because you would think somebody who's running a mommy baby boot camp sort of park workout program would have an idea about working with that population.

**Brianna Battles:** [00:38:11] And this subject has gotten me in so much heat, but there is no quality control. I can watch my own local community who I'll drive by and I just see moms with newborns that are jogging and doing so many sit ups and crunches and their form is awful. And I'm just like, of all chapters in your athletic life, this is when we have to be paying the most attention to volume, intensity form, all of that. And so there's just not a whole lot of quality control. And I've tried reaching out to a few organizations to say like, hey, would you like me to do a continuing education chapter for your coaches? And they're not a fan of that.

**Brianna Battles:** [00:38:50] So, but it's a problem because this is what women have in their communities. It's what they think to go to and do. And their coaches will, you know, pose as being like qualified, I suppose, or aware of these things. But more often than not, they're not asking women if they're peeing their pants when they're running or jumping, and they're not checking them for diastasis and they're not giving them any strategies on how to heal that or modifications for when they do have that kind of injury.

**Brianna Battles:** [00:39:23] So then women are like, oh my gosh, my left hip has been hurting forever now and I've been doing stroller, blah blah, blah program for a year and yeah, what's up with this? And they go and they, I have them go to a pelvic floor physical therapist, the left side of their pelvic floor is in spasm and they have a diastasis and they've been peeing for a year when they run and they just, nobody knew that and they just thought that was normal. So that is like a chronic case. I hear that almost every day.

**Sarah Trott:** [00:39:55] That's so sad because I imagine there's a portion of the population of moms in these groups that maybe didn't really have a regular exercise regimen before. And this exercise thing is just all about the ideas that they might have about like, oh, I need to bounce back, I need to exercise, so now's the time to do it. And it's the most tender, vulnerable time for the body. It's almost the worst time.

**Brianna Battles:** [00:40:17] It is. And these programs capitalize on that exact desperation. We have 21 day fixes. We have body back programs. We have the companies that, all of these predatory marketing that go after new moms that want to get their body back and they prey on that vulnerability with non evidence based harmful practices. And it's it, nothing pisses me off more, to be completely honest, than seeing



that kind of spam and how many women fall for the quick fixes and for coaches and trainers and exercise programs that just are not helping them.

**Brianna Battles:** [00:41:04] If anything, they're kind of hurting them. And even if it's not immediate, like what's going to be sustainable? Like, that's the conversation we need to have about postpartum fitness, is what is truly sustainable in a way that you can keep showing up for something you enjoy and something that's going to keep you injury free and healthy.

But people don't care about that until they have to care about that. They care about fitting into their jeans again. And so that's the mindset shift that I'm really trying to advocate. But it's hard when you can't, we're just surrounded by a fitness and honestly, like the female culture of wanting to look good and and have that perception that, like, our life is put together and perfect and it's just it's not like for anybody, oh my gosh, everybody's a hot mess. Like, hello.

**Brianna Battles:** [00:41:57] So, yeah, it's really hard. But, you know, slowly I do see the message catching on. And in my community, I do try to really be a voice of reason. And there are other coaches and women doing what I do across the world and I know them like I am connected with them so I can refer to the good ones for sure. But unfortunately, we're still pretty inundated with people that are either 30 years behind in research or don't have any business coaching, you know, pregnant and postpartum women.

**Sarah Trott:** [00:42:37] I just wish we could go and replace all of that messaging with with a completely different script that our bodies performed miracles that they need to be loved and adored and honored and change is okay and change is expected and it's an honor that change is healthy. And that's okay, right?

**Brianna Battles:** [00:42:57] Change is good. And like, you know what? Like when people talk about getting their body back, like our bodies are supposed to change and there is no avoiding that. We get older every single day. And isn't that a blessing? You know, we are supposed to go through a metamorphosis. That's just how we're designed.

And pregnancy is just one of those examples. And recovering is just another example and like falling into a new body and lifestyle and habits, like all of that, it's just this continual process because what life is like as a 30 year old is probably not what life is going to be like as a 40 year old. And we have this opportunity to keep changing, you know, and it doesn't have to be bad, like transitions are good. They can be good. It's just how we approach that.

**Sarah Trott:** [00:43:53] Absolutely. What final thoughts do you have for our listeners today?

**Brianna Battles:** [00:43:58] Just be your own advocate. Like so much of what I had to go through was because I never stopped trying to heal. To truly, like, take care of myself and get answers even in the face of being told a thousand different things. There is, there is always hope and there are people out there that want to help you, that have the right tools to help you. But it's being aware, it's being your own advocate during pregnancy and especially after, because both chapters are really vulnerable and give yourself that grace to feel confident in your body and what it can do. But that can sometimes take time and that's okay.

[00:44:42] That fitness, like the gym, it will always be there. The gym is not going anywhere, but the chapter of life that you're in with pregnancy and that early postpartum is just, it's so fragile and short, even though it can feel like forever. I totally get that. It's just the gym will always be there and that can wait. And there are smart ways to go about it that will keep you, that will allow you to have self care and allow you to have strength, strength and function and health that you want.

**Sarah Trott:** [00:45:14] Thank you so much, Brianna. We've learned so much from you today.

**Brianna Battles:** [00:45:18] Oh, thanks for having me.

**Sarah Trott:** [00:45:20] Absolutely. And thank you to our patrons who are sponsoring our program. If you'd like to sponsor the fourth trimester podcast, you can go to Patreon.com. And you can sign up for our newsletter <http://fourthtrimesterpodcast.com>

**Sarah Trott:** [00:45:32] Please do remember to share this podcast with any new or expecting parents in your life, and we'll see you next time. Thank you.

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