A. Summary of Progress toward the achievement of the originally stated aims
Eighty-two subjects were enrolled in the study. Twenty-two subjects who were enrolled gave birth immediately prior to meeting eligibility criteria of 14 days of bed rest and were subsequently ineligible. Of the remaining subjects, 43 women completed the study. Attrition of subject was high with most leaving the study at 4 weeks postpartum, a time when women assumed care for their preterm infant(s).

The hypotheses were:
When compared to the control group across time from 2 days to 3 months postpartum, women who receive a tailored intervention for self-management of postpartum health after antepartum bed rest will report an:
1. increase in the number of yards walked in six minutes (a measure of aerobic endurance)
2. increased score on the Chair sit to stand test (a measure of lower body strength)
3. increased score on the two minute step test number of sit to stand in 30 seconds (a measure of aerobic endurance) This hypothesis was deleted as we determined the test was too difficult for women to do at 2 days postpartum. We have another measure of aerobic endurance therefore, we still can assess this outcome (see hypothesis one)
4. increase in perceived health as measured by the General Health Item of the SF 36
5. increase in scores for vigor/activity as measured by the vigor/activity subscale of the Profile of Mood States
6. decrease in scores for postpartum fatigue as measured by the fatigue subscale of the Profile of Mood States
7. decrease in the number of postpartum symptoms as measured by the Postpartum Symptoms Checklist
8. increase in postpartum functional status as measured by the Inventory of Functional Status and
9. decrease in scores for depressive symptoms on the Profile of Mood states.

Self-efficacy will mediate scores for the above outcomes.

B. List of Significant Results
Our data indicate that at 2 days postpartum the physical and psychological status of women in both the experimental and control group had very high physical deterioration in muscle strength and cardiovascular status, and self-reported health. Further, the incidence of depressive symptoms is high across three months and significantly higher for women in the treatment group as measured by the POMS depression scale but not the MAACL-R. However group size was small and the samples differ on key variables. Women in the treatment group had a significantly greater incidence of Cesarean section and length of hospital bed rest.
C. List of Publications