



PREGNANCY GUIDELINES



GUIDANCE DOCUMENT



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Introduction

1.1 IFAF supports moderate to low impact exercise during pregnancy.

1.2 However, to IFAF, prioritising a pregnant athlete's health and that of the foetus or unborn child, as well as the safety of other athletes are priorities.

1.3 The IFAF medical committee notes among others that:

a) Maternal and foetal responses to exercise may vary with pregestational maternal fitness level, coexisting medical conditions or pregnancy complications

b) Redistribution of body weight can alter an athlete's sense of balance and co-ordination and increase risk of falls in the second half of pregnancy.

c) In the first Trimester, the foetus is contained in the pelvic girdle which protects the foetus from blows to the abdomen. But as pregnancy continues the foetus moves higher in the abdomen and is more susceptible to direct blows to the region if an athlete were to continue playing.

c) By the second Trimester the foetus moves higher and is unprotected by the Pelvis. There is high risk of damage to foetus itself by direct impact and there is a higher risk of ligament injury due to laxity of the joints brought upon by hormonal changes.

1.4 Keeping the above and other medical facts in mind, the following provides the IFAF Medical Committee position on the participation of pregnant athletes in international level American Football competition.

1.5 IFAF notes that for physical activity outside of official IFAF competitions, the decision to train to play is the athlete's responsibility along with her gynecologist and her national member federation. The latter will decide on eligibility for competition.

1.6 In all cases – the **athlete ultimately voluntarily accepts all the risks involved in competing whilst pregnant and absolves IFAF from any liability in relation to the same.**

1.7 IFAF shall not be responsible for any injuries to the athlete or the foetus where a pregnant athlete chooses to train or compete during the course of IFAF competitions.

Guidelines

2.1 There is a distinct difference between Tackle and Flag football in terms of eligibility.

Tackle Football

2.2 Tackle Football is not recommended or supported by IFAF during pregnancy due to the potential increased risk of injury to both unborn child and mother.

2.3 For the safety and wellbeing of the athlete and fellow competitors, pregnant athletes shall neither be allowed to no be eligible to compete in International American Football – Tackle Competitions.

2.4 Should any pregnant athlete choose to participate in international level American Football – Tackle, without disclosure their Member Federation or IFAF, neither IFAF nor the Organising Committee of the event in question may be held liable for any injuries to the athlete or her foetus arising out of the same.

Flag Football

2.5 Flag Football is generally not recommended for any athlete during pregnancy, especially after the first trimester.

2.6 The following are some (but not all) of the risks involved:

- a) Contact: Even with no-contact rules, there is always a risk of accidental collisions or falls, which can be harmful to both the pregnant individual and the baby.
- b) Impact: The force of a fall or collision can impact the abdomen and potentially affect the pregnancy, especially in the early stages.
- c) Balance: As pregnancy progresses, a woman's centre of gravity shifts, making her more prone to falls and instability.
- d) Overheating: Pregnancy can make it harder to regulate body temperature, and overheating during exercise can be dangerous.

2.7 A formal request for an athlete to participate in International Competition may be made to a member federation if a woman is in her first or second trimester and seeks permission from IFAF to participate whilst pregnant.

2.8 If wishing to compete during the first trimester of pregnancy, an athlete could more readily be eligible to play since the uterus is protected and there is no placentation. But it must always be understood that the responsibility lies with the athlete and should be highlighted that this is against the recommendation made by IFAF.

2.9 When such a request is made to a member federation, then IFAF expects and recommends that the request be supported by written confirmation from an appropriately qualified medical practitioner who has highlighted the risks of participation in American Flag Football whilst pregnant and confirmed in writing that it is safe for this athlete and unborn child to participate in International Level IFAF Competition in Flag Football.

2.10 Where a pregnant athlete has been cleared to compete by her member federation with supporting documentation, IFAF always reserves the right to withdraw the athlete's eligibility if IFAF deems that allowing the athlete to compete poses a security or health risk to the Athlete and or other athletes competing against her.

2.11 Should any pregnant athlete choose to Participate in international level American Football – Flag, without disclosure to IFAF or their Member Federation, neither IFAF nor the Organising Committee of the event in question may be held liable for any injuries to the athletes or her foetus arising out of the same.

Scientific Basis for the Guidelines

3.1 Current research supports the recommendation that a moderate level of exercise during an uncomplicated pregnancy has minimal risk for the fetus and beneficial cardiovascular, metabolic and chronic disease effects for exercising women ^{1 5 6}.

3.2 Pregnancy has an impact on women that can increase the predisposition to injury during exercise. Hormonal changes are known to increase elasticity of muscles and ligaments which can affect lower back and pelvis structures. As the uterus enlarges, balance and co-ordination can also be affected due to a shift in the centre of gravity ².

3.3 Studies related to women's Rugby confirm that the abdomen is responsible for 1.6% of all injuries ³. There are no evidence-based studies quantifying the risk to a pregnant woman or unborn child whilst playing Football. There is evidence, however, that blunt abdominal trauma that may arise from tackling does pose a risk of placental abruption, preterm labor and uterine rupture ⁴.

References

¹ Dr J Alleyne & Dr P Peticca. Canadian Academy of Sport and Exercise Medicine. Exercise and Pregnancy Discussion Paper. 2008.

² Ireland, M.L., Ott, S. The Effects of Pregnancy on the Musculoskeletal System. Clinical Orthopedics and Related Research. 2000; 372: 169-179.

³ Schick et al. Injuries during 2006 Women's RWC. BJSM 2008;42:447-451.

⁴ Williams JK, McClain L, Rosemurgy AS, Colorado NM. Evaluation of blunt abdominal trauma in the third trimester of pregnancy: maternal and fetal considerations. Obstet. Gynecol. 1990; 75(1): 33-37.

⁵ Zavorsky GS, Longo LD. Adding Strength Training, Exercise Intensity, and Caloric Expenditure to Exercise Guidelines in Pregnancy. Obstet. Gynecol. 2011; 117(6): 1399-1402.

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