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## Content Analysis of Public Instagram Posts about Pelvic Floor Disorders and Pelvic Floor Muscle Training in Pregnancy

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Content Analysis of Public Instagram Posts about Pelvic Floor Disorders and Pelvic Floor

Muscle Training in Pregnancy

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## **Abstract**

**Objective:** To analyze the content of public Instagram posts and describe the discussion of pelvic floor disorders (PFDs) and pelvic floor muscle training (PFMT)/pelvic floor physical therapy (PFPT) in pregnancy.

**Methods:** Public Instagram accounts based in the U.S. with posts within the past 7 days focused on pregnancy were included. We analyzed English posts related to pelvic floor health, PFDs or PFMT. We categorized accounts by user type, health-related expertise, business endorsement, and influencer status. We categorized posts by content (informative, recommendation, sharing experience, meme, advertisement), context (informative, preventive, interventive), and terminology (scientific, lay). We used chi-squared tests to compare scientific terminology use and PFMT/PFPT recommendation presence by user type and health-related expertise.

**Results:** 156 posts from 21 Instagram accounts were included. Most users presented as companies (43%), provided a link to a business (95%), claimed licensed health-related expertise (43%), and were meso-influencers (72%). Most posts were in an informative (45%) or interventive (41%) context, and included information (81%), an advertisement (48%) and/or a recommendation (47%). Fifty-two percent of posts with a recommendation endorsed PFMT/PFPT. Most posts used lay terminology (40%) or scientific and lay terminology (36%). Use of scientific terminology differed by health-related expertise ( $p=0.0014$ ) but not user type ( $p=0.1489$ ). Recommendations for PFMT/PFPT did not differ by user type ( $p=0.0654$ ) or health-related expertise ( $p=0.1277$ ).

**Conclusions:** Public health policy should target preventive information and resources for PFMT towards pregnant persons on social media. Future research is needed to evaluate quality of pelvic floor health information and recommendations during pregnancy.

## **Introduction**

Pelvic floor disorders (PFD) including urinary incontinence, fecal incontinence, and pelvic organ prolapse are common among pregnant and postpartum persons, with 55% reporting urinary incontinence in the first trimester and 70% in the third trimester,<sup>1</sup> and 46% reporting PFD symptoms overall at six-weeks postpartum.<sup>2</sup> These conditions negatively impact quality of life during and after pregnancy, but prenatal education about prevention of PFDs is minimal.<sup>3,4</sup>

Pelvic floor muscle training (PFMT), defined as “exercise to improve pelvic floor muscle strength, endurance, power, relaxation, or a combination of these”,<sup>2</sup> is an effective preventive<sup>5-8</sup> measure and treatment<sup>2,6</sup> method for PFD in pregnancy and postpartum. In fact, PFMT is recommended for pregnant persons by several professional societies including International Olympic Committee, American College of Sports Medicine, and Society of Obstetricians and Gynecologists of Canada/Canadian Society for Exercise Physiology.<sup>9-11</sup> However, pregnant people report limited knowledge about PFD and PFMT as a preventive or treatment strategy, and uncertainty regarding what exercises to perform and how to do them.<sup>12,13</sup>

With Instagram use growing among child-bearing age persons - 71% of people age 18 to 29 and 48% of people age 30 to 49 reported using Instagram in 2021<sup>14</sup> - and the growing number of exercise-related posts and videos on Instagram, pregnant persons may turn to this social media platform for advice on PFDs including prevention or treatment methods like PFMT. Pregnancy content on Instagram is common with over 19 million posts generated from #pregnancy in mid-April 2022, and pregnancy related-accounts can draw large followings as 89% of pregnant and postpartum women reported utilizing social media to answer questions and seek advice related to pregnancy and parenting.<sup>15</sup>

Recent studies of Instagram posts have evaluated hashtags related to PFDs and PFMT. One study that evaluated 20 hashtags for prevalence, authorship and type of information found that the most popular hashtag was #pelvicfloor, most posts were authored by patients and allied health professionals with allied health professionals posting the most informational content.<sup>16</sup> This study utilized medical terminology to inform hashtag choice which may not reach a wide audience as previous studies report limitations with online information seeking about pelvic floor health due to biomedical terminology varying significantly from lay terminology.<sup>17</sup> Another study evaluated posts generated from #pelvicorganprolapse and found that most posts were published by health and wellness groups and PFMT was the most prevalent treatment option mentioned.<sup>18</sup> This suggests that PFMT is a current topic circulating on Instagram, but how widespread this content lies on the platform is unknown as it was only identified in relation to pelvic organ prolapse. Additionally, these studies examine PFD and PFMT content generally, not specific to pregnancy.

Many people consider the source and complexity of information when evaluating health information they see online and may impact application of information by pregnant women.<sup>19</sup> Pregnant women prefer and trust information from healthcare providers on various health topics,<sup>20-22</sup> which may translate to Instagram posts from users that present health-related claims of expertise. Pregnant women and mothers also trust information from others who share similar experiences and seek reassurance through anecdotal information.<sup>23-25</sup> Further, complexity of information, including use of medical jargon or scientific terminology, may imply higher credibility and increased likelihood of following recommendations.<sup>26</sup>

The purpose of this study was to analyze the content of public Instagram posts to describe the types and sources of information that are currently being shared regarding PFD and PFMT in

pregnancy. We explored whether PFD and PFMT were being discussed in an informative, preventive, or interventional/treatment context using scientific or lay terminology which provides an opportunity to learn where this population's knowledge lies and perhaps deliver public health messaging about PFD and PFMT in pregnancy via Instagram in the future. We hypothesized that Instagram users with licensed health-related credentials would be more likely to use scientific terminology and provide recommendations for PFMT/PFPT (pelvic floor physical therapy) than users not claiming health-related expertise, and Instagram users that were parents or currently pregnant would be less likely to use scientific terminology and provide recommendations for PFMT/PFPT than users that were not pregnant or parents.

## **Methods**

We conducted a content analysis of public Instagram posts about pelvic floor health, PFDs and PFMT in pregnancy. In February 2022, we searched Google for popular Instagram accounts using the search terms “pregnancy pelvic floor health”, “pregnancy pelvic health”, “pregnancy pelvis”, “pregnancy pelvic floor disorders”, “pregnancy pelvic floor muscle training”, “pregnancy pelvic floor exercises”, and “pregnancy health”. We evaluated lists of accounts and accounts from the first page of results for inclusion. We included Instagram accounts that were mentioned in more than one list in the study. In February 2022, we evaluated each Instagram account to determine eligibility according to the following criteria: public Instagram account based in the United States with posts within the past 7 days focused on pelvic floor health or the general pregnancy experience, and, if applicable, identified in lists posted no more than two years ago. We reviewed up to 20 posts per eligible account posted from January to March 2022. We included posts that were written in English and were related to pelvic floor

health, PFDs or PFMT in pregnancy. As this study only included public posts, it did not meet criteria for human subjects research, and therefore did not require IRB approval.

We conducted a content analysis to categorize post characteristics. We characterized posts by post type: (1) information about pelvic floor in general, pregnancy-specific, or specific PFD(s), (2) recommendation for pregnant women related to pelvic health, (3) sharing personal experience related to pelvic health or PFD(s) and pregnancy, (4) meme or cartoon related to pelvic health or PFD(s) in pregnancy, and (5) advertisement for a pregnancy class, video, book, etc. related to pelvic health or PFD(s). If posts were informational, we characterized whether information was about the pelvic floor in general with no mention of pregnancy, pregnancy-specific pelvic floor health, or related to a specific PFD. If posts included a recommendation, we characterized whether the recommendation was for PFMT or PFPT with specific exercises, PFMT or PFPT with no specific exercises, or method or activity other than PFMT or PFPT. For recommendations with specific exercises, we characterized if these exercises were presented as how-to videos, how-to images, a list of exercises in post text with no description or instruction, or a list of exercises in post text with description or further instruction. We characterized whether posts discussed PFDs or PFMT in an informative, preventive, or interventional/treatment context. We characterized whether posts utilized scientific or lay terminology.

We characterized whether each poster was presenting themselves as an individual as their personal self, healthcare professional, healthcare clinic or hospital, public health organization or government agency, company selling a product or service, or unknown entity. We categorized user type based on the image, text, and user bio. Users that identified as their personal self were further categorized as currently pregnant, a parent (not currently pregnant), or not pregnant or a parent. Users that identified as healthcare professionals or individuals as their personal selves

posting as a business were categorized as companies. Meme accounts or any account that could not be identified as an individual user were considered an unknown entities.

We categorized whether users made claims of health-related expertise. We examined the post text, text overlaid in the image, videos, and user bio to determine the user's credentials, educational attainment, or claims of expertise. Licensed credentials included professions that require licensure: obstetrician/gynecologist (OB/GYN), other MD/DO/physician, nurse practitioner, Certified Nurse Midwife (CNM), nurse, physical therapist (DPT/PT), occupational therapist, physician assistant, and registered dietician/Certified Nutrition Specialist (CNS). Non-licensed claims of health-related expertise were credentials that did not require licensure but may require certifications: midwife without mention of licensure, nutritionist, doula/birth coach, yoga teacher/instructor, personal trainer/prenatal exercise specialist/Pilates instructor, health coach/wellness coach/lifestyle coach, and researchers/professionals/academics. Posts where the users did not identify any claims of health expertise were categorized as "no claims of health-related expertise". Posts by users claiming more than one health-related expertise were categorized according to the highest achieved category.

We categorized the number of followers to determine influencer status. We categorized micro-influencers as users with up to 10,000 followers, meso-influencers as users with 10,000 to 1 million followers, and macro-influencers as users with over 1 million followers, as done in previous studies.<sup>27</sup>

We noted if the user bio included a link to a business or company selling a subscription, product, or service. If a user bio included a link to a clinic or hospital website and the user was a healthcare professional or healthcare clinic or hospital, the link was categorized as a link to a business or company. If the link in the user bio led to a blog that was selling or endorsing a

subscription, product, or service, the link was categorized as a link to a business or company. If a link led to another website (e.g., Facebook page, blog that is not endorsing a business or company) the link was categorized as a link to another site. If the user bio include a Linktree with multiple websites linked, if there was at least one link to a business or company, the Linktree was categorized as a link to a business or company.

### Statistical analyses

We conducted a directed content analysis<sup>28</sup> of post characteristics by reviewing the post images or videos, text, text overlaid in the image, hashtags in the post and in the first comment if by the user, and user bios. The primary investigator (LRR) reviewed posts from ineligible accounts (not based in the United States and/or no posts within the past 7 days) and developed an initial codebook of post topics. After finalizing the codebook, the primary investigator (LRR) coded all posts. We summarized posts by post type and further categorized informational posts and posts with a recommendation by post content. We summarized the proportion of posts discussing PFD and PFMT in an informative, preventive or interventive context and calculated the percentage of posts utilizing scientific terminology to discuss PFD or PFMT on Instagram. We used chi-squared tests to compare the use of scientific terminology by health-related expertise of users and user type. We used a chi-squared test to compare prevalence of providing a recommendation for PFMT/PFPT by health-related expertise of users and user type. We used REDCap for data management.<sup>29</sup> Quantitative analyses were conducted using SAS 9.4 (SAS Institute, Inc.).

### **Results**

We identified 38 Instagram accounts (26 Instagram accounts and 12 Instagram accounts from 7 lists) from Google searches, from which 21 accounts were included in the study (Figure

1). Instagram accounts were excluded due to identification from lists posted more than 2 years ago (n=2), the link to the list was broken (n=1), the link to the Instagram account was broken (n=1), the last post on the account was not within the past 7 days (n=6), the account was based outside of the United States (n=5), or the main focus of the account was not about pelvic health or the pregnancy experience (n=2; Figure 1).

Characteristics of the 21 Instagram accounts are listed in Table 1. Most users presented as a company (43%), provided a link to a business or company in the user bio (95%), had licensed health-related claims of expertise (43%), and were meso-influencers (72%; Table 1).

After evaluating 405 posts from 21 eligible Instagram accounts, 156 posts about pelvic floor health in general, pregnancy-specific pelvic floor health, or specific PFD(s) were included in the study. Posts were excluded if they were about another aspect of reproductive/sexual health (n=133), another health-related topic (n=68), and/or another topic not related to health (n=70). Each account posted a median of 9 (IQR: 7-12) posts about pelvic floor health in general, pregnancy-specific pelvic floor health, or specific PFD(s) during the study period of January through March 2022.

Most posts were in an informative (45%) or interventive/treatment (41%) context, included information (81%), an advertisement (48%) and/or a recommendation (47%; Table 1). Posts that included information were mostly about general pelvic floor health with no mention of pregnancy (40%) or pregnancy-specific pelvic floor health information (29%; Table 1). Posts that included a recommendation mostly endorsed a method or activity other than PFMT/PFPT (48%) or PFMT/PFPT with no specific exercises (34%; Table 1). Most posts that included a recommendation for PFMT/PFPT presented the recommendation with how-to videos (63%;

Table 1). Most posts utilized lay terminology only (40%) or both scientific and lay terminology (36%; Table 1).

The most common user types to use scientific terminology were individuals who were parents but not currently pregnant (75%), companies (66%), and individuals who were currently pregnant (53%, Table 2). Use of scientific terminology did not differ by user type ( $p=0.1489$ ; Table 2). Seventy-six percent of posts shared by accounts with no health-related claims of expertise used scientific terminology, whereas 72% of posts by accounts with non-licensed claims and 46% of posts by users with licensed claims of expertise used scientific terminology (Table 2). Use of scientific terminology significantly differed by health-related claims of expertise ( $p=0.0014$ ; Table 2).

Posts by individuals who were currently pregnant most commonly included recommendations for PFMT/PFPT (41%), followed by posts by healthcare professionals (33%) and healthcare clinics or hospitals (33%, Table 2). Prevalence of a recommendation for PFMT/PFPT in posts did not differ by user type ( $p=0.0654$ , Table 2). Posts by users with non-licensed health-related claims of expertise most commonly included recommendations for PFMT/PFPT (36%), followed by posts by users with licensed claims of expertise (23%, Table 2). Prevalence of a recommendation for PFMT/PFPT in posts did not differ by health-related claims of expertise ( $p=0.1277$ , Table 2).

## **Discussion**

We found that public Instagram posts about pelvic floor health, PFDs, and PFMT/PFPT during pregnancy are mostly posted by company accounts that are meso-influencers, which contrasts with findings from other studies of specific PFD or urogynecology content on Instagram that reported health and wellness groups<sup>18</sup> and patients and allied health

professionals<sup>16</sup> publish posts most frequently. However, this difference may be due to methodology of other studies which used hashtags to identify Instagram posts.<sup>16,18</sup> We found that most posts are in an informative or interventive context, contain information, a recommendation, and/or advertisement. Most posts used lay terminology or both lay and scientific terminology, and use of scientific terminology differed by health-related expertise but not user type. About half of posts that included a recommendation endorsed PFMT/PFPT during pregnancy, which is consistent with findings from an Instagram content analysis of pelvic organ prolapse posts,<sup>18</sup> and recommendation for PFMT/PFPT did not differ by health-related expertise or user type. Our findings contribute to understanding the current Instagram landscape regarding pelvic floor health during pregnancy.

We found that the majority of Instagram accounts included a link to a business or company in their user bio, which poses concern due to the potential for commercial bias in information presented by these accounts. Previous studies of Instagram and Pinterest pelvic organ prolapse content reported some posts including commercial bias,<sup>18,30</sup> and future research should evaluate posts for bias and overall quality of information. With the high prevalence of businesses linked from Instagram accounts, it may also be worthwhile to evaluate the followers' activity on these accounts to assess spread of potentially-biased information.<sup>31</sup>

We also found that most posts were presented in an informative or interventive context. This finding is consistent with the intended purpose of using social media by gynecologic patients with pelvic pain which is to understand or manage their symptoms.<sup>32</sup> In fact, a study of non-pregnant adults with pelvic conditions found that those with pain were twice as likely to use social media than those without pain<sup>32</sup>, which could explain why the Instagram landscape for this related topic mostly contains informative or interventive content. Since pregnant women

commonly use the internet to search for physical activity information and are known to implement information or recommendations identified online,<sup>33,34</sup> the lack of preventive materials on Instagram related to pelvic floor health may result in a misinformed public. A systematic review of decision-making during pregnancy reported that labor is a commonly searched topic and the internet influences decisions about type of delivery,<sup>34</sup> thus increased frequency of preventive, evidence-based pelvic floor health and PFMT information could alter pregnant women's decisions about labor and delivery. This possibility should be explored in future research since social media allows for open discussion of pregnancy-related topics such as incontinence that women may view as uncomfortable or too sensitive to discuss with healthcare providers.<sup>15,35</sup>

Of the posts in our sample that included a recommendation, only 18% included a recommendation for PFMT/PFPT with specific exercises. Previous studies have reported a lack of consistent recommendation for PFMT and/or complementary instruction during pregnancy from healthcare providers in China and the UK,<sup>35,36</sup> and this trend may also be prevalent in the US since a study of PFPT prescription reported low initiation and adherence.<sup>37</sup> One reason for lack of adherence may be lack of knowledge or confidence in how to perform a correct pelvic floor contraction, as reported by postpartum women in a qualitative study.<sup>35</sup> Pregnant women may benefit from additional teaching during pregnancy since a study of Kegel knowledge and engagement found that women were more likely to perform Kegels during pregnancy if taught by a healthcare provider. However, this may not be feasible due to time constraints, so future research should evaluate development of an app that can aid pregnant and postpartum women with PFMT adherence, since pregnant women engage with several pregnancy-related apps<sup>38</sup> and have expressed interest in an app for PFMT instruction.<sup>35</sup> Further, public health policy should

develop free antenatal classes that incorporate pelvic floor and PFMT education since women who attended such classes in Australia were significantly less likely to think urinary incontinence in pregnancy is normal,<sup>39</sup> and thus may be more likely to seek help.<sup>40</sup>

In the current study, use of medical terminology in posts did not differ by user type. This finding may be due to the recent blending of biomedical and experiential knowledge regarding pregnancy and birth, as one study in the UK found that the value attributed to each type of knowledge is based on personal preference and both can be valued simultaneously.<sup>41</sup> In other words, scientific terminology may no longer be associated only with experts, and lay terminology may not be associated with only lay persons.<sup>41</sup> Further, this non-significant finding may have resulted from the increased knowledge-base and health decision-making confidence that pregnant women and mothers have acquired from online health information seeking during their own experiences and now utilize in posts.<sup>42</sup>

However, use of scientific terminology significantly differed by health-related expertise, with 72% of posts from accounts claiming licensed health-related expertise including scientific terminology compared to 76% of posts from accounts claiming non-licensed health-related expertise and 46% of posts from accounts that did not claim health-related expertise. This finding is important to consider as perceived quality of online health information differs among individuals based on medical terminology. In a systematic review, some adults believed easy to understand information with minimal use of medical terminology accompanied by definitions of terms was high quality, whereas others believed use of scientific terminology illustrated expertise and high quality.<sup>26</sup> Similarly, a study of medical jargon in online health forums reported that adults valued when experts utilized scientific terminology in a way that was easier for the general public to understand, and found experts who use lower amount of jargon more

credible.<sup>43</sup> In future social media messaging about pelvic floor health in pregnancy, scientific terminology accompanied by definitions should be used purposefully since pregnant women appreciate explanations that go beyond “doctor talk”.<sup>44</sup>

Prevalence of a recommendation for PFMT/PFPT did not differ by user type. Since adults have been found to perceive experts as equally trustworthy and persuasive compared to the general public regarding certain health topics,<sup>45</sup> this finding posts concern since some recommendations may not evidence-based and certain user types are more likely to endorse guideline consistent recommendations. A content analysis of lower urinary tract symptom prevention and treatment on social media found that most recommendations were not evidence-based and instead were based on personal experience of the poster,<sup>46</sup> and since women with gynecologic pelvic pain are more likely to trust other women with the same symptoms,<sup>32</sup> future research should evaluate the quality of recommendations for PFMT/PFPT in pregnancy to ensure safety if women decide to physically engage with the material provided.

Prevalence of a recommendation for PFMT/PFPT also did not differ by health-related expertise. This finding is promising because PFMT is consistent with current guidelines for pregnant women. However, only half of posts providing a recommendation endorsed PFMT. Since methods or activities other than PFMT were also recommended in half of posts, there is a possibility that users with a certain categorization of health-related expertise provided contradictory recommendations which may make followers uncertain about implementing any recommendation they see online, even if it is consistent with guidelines.<sup>47</sup> This finding may also be due to the credibility individuals attribute to lay expertise which combines biomedical knowledge and generalized conclusions from personal experience.<sup>48</sup> It is important for future research to assess the criteria that pregnant women use to identify credible sources with

expertise. However, our study did include a greater proportion of posts from users claiming health-related expertise than previous studies,<sup>46</sup> which contributes to understanding the current discussion of pelvic floor health on social media.

The current study has strengths and limitations. This is one of few studies, to our knowledge, to perform a content analysis of public Instagram posts about pelvic floor health, PFDs, and PFMT/PFPT during pregnancy. We identified Instagram accounts via Google searches instead of hashtags, since many pregnant women and mothers turn to Google as a primary search engine when searching for online health information.<sup>49,50</sup> Future research should combine methodologies for account identification to capture all potential avenues pregnant women may use to access pelvic floor health information on Instagram, including asking pregnant persons accounts they follow or hashtags they use to identify accounts posting about these topics. Due to the time period of data collection (January through March 2022), topical spikes occurred in February around Valentine's Day which resulted in several posts about sexual health and dysfunction which may have replaced normal content about pelvic floor health. Also, some accounts reported being diagnosed with or had family diagnosed with COVID-19 during the time period which likely interfered with their typical posting patterns. Our study design only included posts in English from accounts based in the United States and had a small sample size, which limits generalizability of findings. Future research should evaluate a larger number of Instagram accounts and posts from the U.S. and other English-speaking countries to better understand the current landscape of pelvic floor health information during pregnancy on the platform that pregnant women may access. Research should also explore Instagram posts in other languages to compare prevalence and quality of information and recommendations, and to

understand pelvic floor health information available on Instagram for pregnant patients whose primary language is not English.

Our findings have implications for public health policy which can target preventive information and resources for PFMT towards pregnant women on social media. Specifically, increasing the frequency of PFMT discussion and availability of information, as interest was expressed by pregnant women,<sup>35</sup> may increase likelihood of implementation of recommendations. Future research is needed to evaluate quality and spread of pelvic floor health information and recommendations during pregnancy on Instagram. Prenatal care providers should be encouraged to consistently recommend PFMT to their pregnant patients and supplement recommendations with adequate instruction to avoid negative health outcomes due to improper technique. Prenatal care teams may also want to recommend to their pregnant patients Instagram accounts that post information and instruction consistent with guidelines as a way to combat online misinformation related to pelvic health, PFD, and PFMT during pregnancy.

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## Tables and Figures

Figure 1. Instagram account eligibility

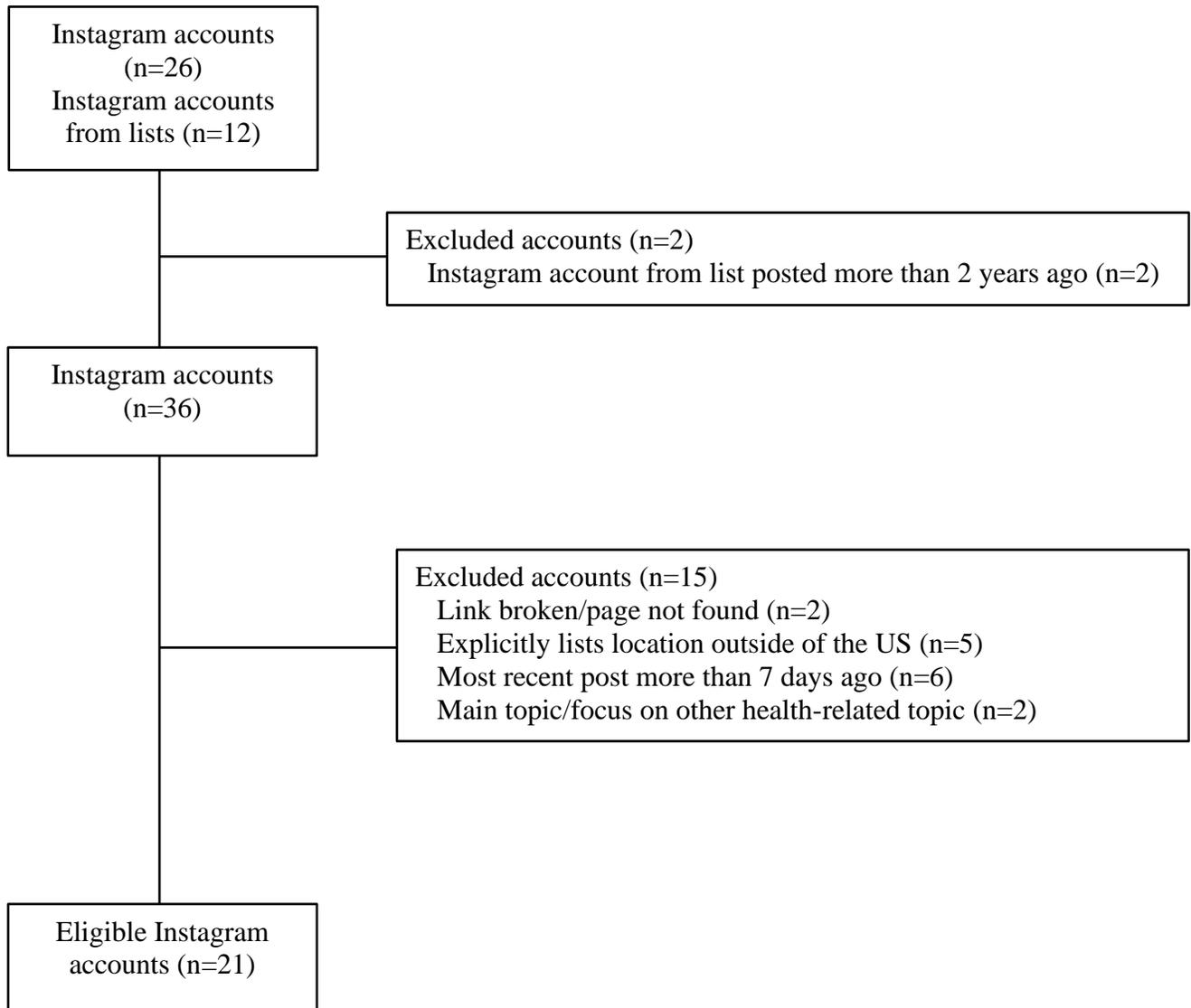


Table 1. Characteristics of public Instagram accounts and posts about pelvic floor health, N (%)

	N (%)
Instagram accounts (N=21)	
User type	
Individual as personal self, currently pregnant	2 (10)
Individual as personal self, parent (not currently pregnant)	3 (14)
Individual as personal self, not pregnant or a parent	--
Healthcare professional	3 (14)
Healthcare clinic or hospital	3 (14)
Public health organization or government agency	--
Company	9 (43)
Unknown entity	1 (5)
Link to a business in user bio	
Link to a business or company	20 (95)
Link to another site	--
No link	1 (5)
Health-related claims of expertise	
Licensed claims of expertise	9 (43)
Non-licensed claims of expertise	5 (24)
No claims of health-related expertise	7 (33)
Number of followers	
<10,000 followers (micro-influencer)	5 (24)
10,000 – 1 million followers (meso-influencer)	15 (71)

More than 1 million followers (macro-influencer)	1 (5)
Posts about pelvic floor health, pregnancy-specific pelvic floor health, or specific PFD(s) (N=156)	
Post context	
Informative	70 (45)
Preventive	22 (14)
Interventive/treatment	64 (41)
Post type	
Information	127 (81)
Recommendation	73 (47)
Sharing personal experience	31 (20)
Meme or cartoon	15 (10)
Advertisement	75 (48)
Included information	
General pelvic floor information	50 (40)
Pregnancy-specific pelvic floor information	37 (29)
Specific PFD(s) information	12 (9)
Other health-related information	28 (22)
Included recommendation	
PFMT/PFPT and no specific exercise(s)	25 (34)
PFMT/PFPT and specific exercise(s)	13 (18)
How-to video(s)	10 (63)
How-to image(s)	--

List of exercises with no description or instruction	4 (25)
List of exercises with description or instruction	2 (12)
Method other than PFMT/PFPT	35 (48)
Post terminology	
Scientific/medical	38 (24)
Lay/common	62 (40)
Both scientific/medical and lay/common	56 (36)

Table 2. Scientific terminology and recommendation for PFMT/PFPT in public Instagram posts about pelvic floor health by user type and health-related claims of expertise, n (%)

	Scientific terminology	p-value	Recommendation for PFMT/PFPT	p-value
User type*		0.1489		0.0654
Individual as personal self, currently pregnant	10 (59)		7 (41)	
Individual as personal self, parent (not currently pregnant)	21 (75)		6 (21)	
Healthcare professional	6 (40)		5 (33)	
Healthcare clinic or hospital	21 (53)		13 (33)	
Company	36 (66)		7 (13)	
Health-related claims of expertise		0.0014		0.1277
Licensed claims of expertise	36 (46)		18 (23)	
Non-licensed claims of expertise	26 (72)		13 (36)	
No claims of health-related expertise	32 (76)		7 (17)	

\* User type “unknown entity” excluded from analysis due to small numbers (n=1).