SUSTAINING AND MANAGING THE MATERNAL HEALTH OF NIGERIAN THEATRE ARTS TRAINEES DURING PREGNANCY

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Abstract

This study examines the sustainability and management of maternal health among Nigerian Theatre Arts trainees during pregnancy, using selected Theatre Arts students of Prince Abubakar Audu University (PAAU), Anyigba, as the focus. The study was motivated by the physically demanding nature of Theatre Arts training, which involves rehearsals, performances, movement exercises, dancing, prolonged standing and other practical activities that may present additional challenges for pregnant trainees. The study adopted a qualitative research methodology, with data obtained through interviews with four selected Theatre Arts trainees who experienced pregnancy during their training. The findings revealed that participants experienced varying degrees of fatigue, weakness, body pains, dizziness, headaches, stress and emotional pressure. Physically demanding activities such as dancing, prolonged standing, repeated movements, strenuous exercises, heavy lifting and long rehearsals were identified as activities requiring adjustment during pregnancy. The participants managed their maternal health through rest, hydration, proper nutrition, antenatal care, avoidance of strenuous activities, and careful attention to their physical condition. Family members, coursemates, and some lecturers also provided important support. However, institutional support was found to be inconsistent, with limited awareness of formal guidelines specifically addressing pregnant Theatre Arts trainees. The study concludes that pregnancy should not automatically prevent students from continuing Theatre Arts education. It recommends clear institutional guidelines and reasonable modification of practical activities to protect maternal health while maintaining academic continuity.

Keywords: *Maternal Health, Pregnancy, Theatre Arts Trainees, Practical Theatre Training, Self-Care, Institutional Support, Prince Abubakar Audu University.*

Introduction

Maternal health constitutes an important component of public health and reproductive well-being because it encompasses the physical, psychological and social condition of women throughout pregnancy, childbirth and the postnatal period. The World Health Organization (WHO) defines maternal health as the health of women during pregnancy, childbirth, and the postnatal period. It emphasizes that maternal healthcare should extend beyond the mere survival of women to the promotion of their health and well-being. Maternal health is therefore concerned not only with preventing maternal death but also with reducing maternal injury and disability and ensuring access to quality and timely healthcare within supportive environments (World Health Organization).

The significance of maternal health becomes more apparent within developing countries where women continue to encounter considerable barriers to adequate pregnancy and childbirth care. Wright et al. observe that pregnancy and childbirth continue to pose significant risks to women, particularly those living in low- and middle-income countries (LMICs), where women are often confronted with numerous social, economic, and health-system obstacles (2). The Nigerian maternal-health situation is particularly important because the country has historically accounted for a substantial proportion of maternal deaths globally: Wright et al. report that Nigeria was responsible for approximately 30 percent of global maternal-related deaths in 2020, while the 2018 Nigeria Demographic and Health Survey (NDHS) estimated a maternal mortality ratio of 512 deaths per 100,000 live births (2).

Although national and international interventions have attempted to improve maternal healthcare, the persistence of high maternal mortality indicates that access to healthcare, timely antenatal care, socioeconomic circumstances and the availability of supportive environments remain important considerations in pregnancy management. A major component of sustaining maternal health is the effective utilization of antenatal healthcare services. Antenatal care provides an avenue through which pregnant women can receive health information, monitoring, preventive interventions and professional guidance concerning pregnancy and childbirth. Osungbade, Oginni, and Olumide, in their study of antenatal care services in Nigerian secondary health facilities, found considerable variation in the provision of essential antenatal services, particularly haemoglobin testing, urine testing for protein, iron and folate supplementation, and malaria prophylaxis. These variations raised concerns about the adequacy and quality of maternal healthcare available to pregnant women (346). Similarly, Agho et al. identify antenatal care as an essential intervention for improving maternal and child health and demonstrate that the receipt of appropriate antenatal care components is associated with several individual and contextual factors, including place of residence, maternal education, employment status, household wealth, distance to health facilities, and exposure to the media (172–181).

Consequently, effective management of pregnancy requires not only personal responsibility on the part of the pregnant woman but also institutional and healthcare support that enables her to obtain appropriate care. The problem of maternal health becomes particularly significant when pregnancy occurs alongside demanding educational or occupational responsibilities. Students who become pregnant may have to negotiate the physical and psychological demands of pregnancy while simultaneously fulfilling academic requirements.

Theatre Arts training involves a combination of theoretical instruction and practical engagement. Theatre Arts trainees may participate in acting exercises, movement training, dance, voice and speech exercises, rehearsals, stage performances, technical activities, costume-related tasks, production processes and other forms of embodied performance. These activities may require sustained physical engagement, prolonged standing, movement, vocal exertion, repetitive rehearsal and, depending on the production, interaction with stage properties and production spaces. This relationship between performance training and physical well-being has received increasing scholarly attention. Martin and Battaglini identify actors as an at-risk population

because of the physical demands associated with their profession (108). Their systematic review further indicates that research on actors has examined different career stages, including secondary school, university, and professional training. A more recent study by Stephen-Adesina investigated perceived physical health symptoms and mental wellness among undergraduate theatre artists at the University of Ibadan during a four-week initiation rehearsal process. The longitudinal study involved 55 freshman Theatre Arts students and examined changes in their perceived physical and mental health over the four-week training period, demonstrating the relevance of systematically examining the relationship between theatre training and the physical and psychological well-being of undergraduate theatre artists (Stephen-Adesina).

Pregnancy, however, should not automatically be interpreted as a condition that prevents women from participating in academic or professional activities. Rather, the central concern should be the creation of appropriate conditions under which pregnant women can participate safely, according to their individual health circumstances and professional medical advice. The WHO emphasizes that successful maternal healthcare involves promoting health and well-being throughout pregnancy and ensuring that women receive appropriate and timely care. Therefore, the issue is not simply whether pregnant Theatre Arts trainees should continue their training, but how their training environment can be structured to minimize avoidable risks while allowing them to maintain their educational and artistic development.

Related Studies on Maternal Health Across Professions

Beyond Theatre Arts, a growing body of qualitative research has examined how women in other physically or professionally demanding fields manage pregnancy alongside their responsibilities, offering useful points of comparison for the present study. Among nurses and midwives, self-management during pregnancy has been described as a continuous process of adjusting the body, the workload, and personal priorities in order to keep working while protecting maternal and fetal health, with strategies including monitoring physical symptoms, renegotiating tasks with colleagues, and mentally centring decisions on the wellbeing of the unborn child (Hino and Yano). A related grounded-theory study similarly found that pregnant nurses experience a tension between professional duty and self-protection, which the researchers described as a "prioritizing the foetus" coping identity (Hino, Takashima, and Yano). Iranian nurses facing comparable pressures have been found to rely on strategies ranging from patience-building and emotional regulation to, more concerningly, concealing their pregnancy altogether in order to avoid workplace disadvantage (Shayestefar et al.).

Dancers offer perhaps the closest parallel to Theatre Arts trainees, because their work, like practical theatre training, depends directly on bodily performance. Guidance for professional and recreational dancers indicates that dance can remain safe, and even beneficial, during pregnancy provided that partnered lifts, jumps, and other high-impact movements are avoided or modified (Sanders). Elite athletes face similar dilemmas: qualitative research in the United Kingdom found that pregnant athletes often experience uncertainty about how to adapt training safely because clear, sport-specific guidance is lacking, while a related Norwegian study identified insufficient

supportive networks and unclear return-to-training pathways as recurring difficulties (Caro et al.; Marken et al.).

Pregnancy-related challenges are not confined to physically demanding professions. Research on higher-education faculty has found that pregnancy can carry an academic penalty as well as a physical one, with pregnant instructors in some fields receiving lower teaching evaluations than their non-pregnant counterparts (Olabisi). Closest in structure to the present study, an examination of pregnant nursing students in a Nigerian university found that a large majority recognized pregnancy-related challenges to their studies, with absenteeism, reduced concentration, and lower academic performance among the most frequently reported effects (Ezenwuba). Taken together, this literature suggests that the difficulties experienced by pregnant Theatre Arts trainees in the present study: physical fatigue, activity modification, inconsistent institutional support, and reliance on personal and social coping strategies, mirror patterns observed across a wide range of professions and academic disciplines, reinforcing the case for clearer, field-specific policies rather than an assumption that pregnant women in demanding roles should simply withdraw.

Aim and Objectives

The aim of this study is to examine strategies for sustaining and managing the maternal health of Nigerian Theatre Arts trainees during pregnancy. The specific objectives are to:

i. identify the maternal health challenges experienced by pregnant Theatre Arts trainees;
ii. examine the impact of theatre training activities on maternal health during pregnancy;
iii. investigate institutional support available for pregnant Theatre Arts trainees;
iv. identify coping and health management strategies adopted by pregnant trainees; and
v. recommend measures for improving maternal health management in Theatre Arts training institutions.

Theoretical Framework

This study is anchored on Dorothea Orem's Self-Care Deficit Nursing Theory (SCDNT). The theory was developed by Dorothea Elizabeth Orem, an American nursing scholar. It was initially formulated in the 1950s and systematically presented in her work *Nursing: Concepts of Practice*, first published in 1971. The theory explains the ability of individuals to engage in activities that maintain their life, health, and well-being. It proposes that individuals normally have the capacity and responsibility to perform self-care, but that this capacity may become insufficient when their health or circumstances create additional self-care demands.

The theory provides a framework for understanding how pregnant Theatre Arts trainees can actively manage their maternal health while coping with the physical and academic demands of Theatre Arts training. It emphasizes the individual's capacity to engage in self-care activities necessary for maintaining health and well-being. In the context of this study, such self-care practices include adequate rest, proper nutrition, hydration, regular antenatal care, avoidance of

strenuous activities, recognition of bodily discomfort, and appropriate management of academic and practical responsibilities.

Research Methodology

This study adopted a qualitative research design. The qualitative approach was considered appropriate because the study sought to explore and understand the personal experiences, perceptions, and challenges of Theatre Arts trainees who had experienced pregnancy while undergoing their training at Prince Abubakar Audu University (PAAU), Anyigba. Rather than relying on numerical measurements, the study focused on obtaining detailed descriptions of participants' experiences concerning maternal health, practical Theatre Arts activities, academic participation, and available support mechanisms.

The qualitative design enabled the researcher to obtain in-depth information directly from selected Theatre Arts students who were pregnant, or who had previously been pregnant and given birth, while undergoing their Theatre Arts training. Through their narratives, the researcher examined how the participants experienced pregnancy within the practical and academic environment of Theatre Arts and the strategies they adopted to sustain and manage their maternal health.

Findings and Discussion

This section presents, analyses, and discusses the findings obtained from interviews conducted with four female Theatre Arts trainees of Prince Abubakar Audu University (PAAU), Anyigba, who experienced pregnancy while undergoing Theatre Arts training. The study adopted a qualitative approach in order to obtain detailed accounts of the participants' experiences of pregnancy, practical Theatre Arts training, maternal health managements and institutional support. The participants were selected purposively because they possessed direct experience relevant to the subject of the study. For ethical and confidentiality purposes, Participant 1 (P1) and Participant 2 (P2) are identified by these labels rather than by their personal names. Participant 3 and Participant 4 — Blessing Eleojo and Amupitan Folashade — gave their consent to be identified by name and are referred to accordingly where relevant.

Background Information of the Participants

The four participants differed in age, marital status, level of study, area of Theatre Arts specialization, and pregnancy experience. Participant 1 was a 22-year-old married 400-level student whose area of specialization was Stage Management. She had participated in a community theatre production during pregnancy. Participant 2 was also a Theatre Arts trainee who experienced pregnancy while participating in practical Theatre Arts activities. Participant 3, Blessing Eleojo, was a 24-year-old single 400-level student specializing in Costume and participated in practical Theatre Arts activities during her second trimester. Participant 4, Amupitan Folashade, was a 22-year-old married final-year student specializing in Acting and practical Theatre production and had recently given birth while in training.

Maternal Health Challenges Experienced by Theatre Arts Trainees During Pregnancy

The first major theme emerging from the interviews concerns the health challenges experienced by the participants while combining pregnancy with Theatre Arts education. The responses reveal that the major challenges included fatigue, physical weakness, body pains, dizziness, stress, emotional pressure, and difficulty sustaining physically demanding activities.

Participant 1 described her experience as challenging but rewarding. She explained that during the community theatre production, she experienced tiredness, body discomfort, and difficulty standing or moving for long periods during rehearsals and performances. She further explained that travelling and long hours of activity sometimes became stressful. Similarly, Participant 2 reported experiencing tiredness, back pain, body weakness, and occasional dizziness. She further explained that she became tired easily and could not participate at the same level as before pregnancy. Her account demonstrates that pregnancy affected her physical capacity and required her to manage her energy during 'Theatre Arts' activities. Participant 3 reported experiencing dizziness, weakness, and headaches, and described the overall experience as a very stressful one. However, unlike Participants 1 and 2, she stated that these challenges did not significantly prevent her from participating in her academic activities. Her response indicates that the presence of pregnancy-related symptoms does not necessarily result in identical levels of academic limitation among Theatre Arts trainees. Participant 4 similarly reported tiredness, weakness, body pains and, at times, stress. She explained that standing for long periods and participating in physically demanding activities became increasingly difficult as the pregnancy progressed, and that there were occasions when she could not attend practical sessions because she was not feeling strong enough. The responses therefore reveal a common pattern of physical exhaustion and discomfort, although the intensity and consequences differed among participants. Participants 1, 2, and 4 explicitly described fatigue or tiredness as significant challenges, while Participant 3 emphasized dizziness, weakness, headaches and emotional stress.

Fatigue and Physical Exhaustion

Fatigue emerged as one of the most consistent maternal-health challenges among the participants. Participants 1, 2, and 4 specifically identified tiredness or fatigue as an important difficulty. Participant 2 explained that her greatest challenge was coping with physical exhaustion while trying to meet the demands of practical training. Participant 4 similarly described physical tiredness as her greatest challenge, explaining that there were occasions when she wanted to participate fully but her body did not provide the strength required.

The finding indicates that fatigue may become an important consideration when pregnant Theatre Arts trainees are required to participate in prolonged or physically demanding activities. However, the interviews also show that the experience is individual: Participant 3 reported that she did not experience severe physical challenges that prevented her from participating in her studies. This indicates that the management of pregnant trainees should be sensitive to individual

health conditions rather than based on the assumption that every pregnant student has the same physical limitations.

Physical Pain, Weakness, and Discomfort

Physical discomfort was another recurring theme. Participant 1 reported body aches, while Participant 2 experienced back pain and body weakness. Participant 4 also experienced body pains and weakness. These responses indicate that pregnancy may influence the physical capacity required for certain Theatre Arts activities. Participant 3, on the other hand, reported dizziness, weakness and headaches but stated that she remained active in her studies. Her experience demonstrates that pregnancy-related symptoms can occur without necessarily resulting in withdrawal from practical activities.

Psychological and Emotional Challenges

The interviews also revealed emotional and psychological dimensions of pregnancy during Theatre Arts training. Participant 1 explained that she sometimes felt stressed, tired and worried about coping with rehearsals, traveling, and other activities, and expressed anxiety concerning her health and that of the baby. Participant 2 similarly reported being worried that pregnancy might negatively affect her academic performance. Participant 4 described experiencing worry and emotional pressure concerning her ability to successfully complete her academic work while managing pregnancy. Participant 3 gave a particularly distinctive account of emotional changes, stating that there were moments when she would start crying for no apparent reason and could become emotional when she saw updates about rehearsals or classes. This indicates that the emotional experience of pregnancy may extend beyond physical limitations and may influence students' responses to academic and production-related demands.

The findings therefore demonstrate that maternal health management among Theatre Arts trainees should not be restricted to physical health. Emotional well-being is also relevant because the participants experienced anxiety, stress, worry and emotional fluctuations while attempting to maintain their academic responsibilities.

Effects of Practical Theatre Arts Activities on Maternal Health

The second major theme concerns the relationship between practical Theatre Arts activities and maternal health. The participants identified dance, repeated movement, prolonged standing, physical acting, early morning exercises, traveling, heavy lifting, jumping, fighting sequences and long rehearsals as activities that could create difficulties for pregnant trainees.

Participant 2 stated that dancing and repeated movement exercises were among the most physically demanding activities during her pregnancy, and explained that prolonged practical activities sometimes caused physical exhaustion and discomfort. Participant 4 similarly identified prolonged standing, repeated movements, dancing and physical acting exercises as demanding, explaining that long rehearsals and activities requiring substantial movement increased tiredness and physical discomfort, particularly as the pregnancy progressed.

Participant 1 provided a somewhat different account. She stated that her participation in community theatre involved traveling and long hours of activity, but explained that there were no regular rehearsals during the following semester, so she did not experience significant disruption to her academic participation during that period. She did, however, identify early morning exercise as an activity she considered unsafe during pregnancy.

Participant 3 stated that practical theatre activities could have both positive and negative effects. According to her, appropriate exercises could contribute to physical fitness, flexibility and mental stimulation, while excessive physical activities and long rehearsals could cause fatigue and weakness. This is an important finding because it prevents the analysis from treating all Theatre Arts practical activities as inherently harmful to pregnant trainees.

The findings indicate that the effect of Theatre Arts activities on maternal health is context-dependent. Practical activities may provide beneficial physical engagement when appropriately managed, but excessive exertion, prolonged activity or activities involving substantial physical risk may increase discomfort and fatigue.

Activities Considered Unsafe or Requiring Adjustment

All four participants identified activities that they believed should be adjusted for pregnant trainees. Participant 1 identified early morning exercises as unsafe, particularly when the exercises involved strenuous physical activity, and recommended lighter exercises, proper supervision and adequate rest. Participant 2 identified strenuous dance movements, jumping and falling-related activities as activities that should be avoided or modified, explaining that these activities became more concerning as her pregnancy progressed. Participant 3 identified strenuous movements, falls, physical impact, heat, chemical exposure, prolonged rehearsals, prolonged standing and dancing as activities requiring caution. Participant 4 identified heavy lifting, excessive movement, jumping, prolonged standing and strenuous exercises as activities that should be modified according to the trainee's stage of pregnancy and health condition. There is therefore considerable agreement among the four participants that practical activities involving excessive physical exertion, falls, jumping, heavy lifting, prolonged standing and strenuous movement require appropriate adjustment for pregnant Theatre Arts trainees.

Effects on Rehearsals and Performances

The effect of pregnancy on rehearsals and performances varied among participants. Participant 2 stated that pregnancy affected her participation in performances because she had to manage her energy and avoid movements that caused discomfort. Participant 4 similarly reported that she could not always participate at the same level as before pregnancy and sometimes had to rest or reduce her physical activities.

Participant 3 reported that pregnancy did not significantly affect her participation because she did not experience severe sickness and remained committed to her practical activities. She emphasized that she continued attending rehearsals and classes and attempted not to allow her condition to interfere with her responsibilities.

Participant 1's experience was different because she participated in community theatre during pregnancy but subsequently had a semester without a major production. She explained that during that semester she attended lectures and participated in group presentations and enjoyed the academic experience.

These contrasting accounts show that pregnancy does not have a uniform effect on participation. The extent of its effect depends on the individual's physical condition, stage of pregnancy, type of Theatre Arts activity and production schedule.

Strategies Adopted by the Participants to Manage Their Maternal Health

The third major theme concerns the personal strategies adopted by the participants to protect their health while continuing their Theatre Arts training. The major strategies identified were adequate rest, avoidance of strenuous activities, hydration, proper nutrition, antenatal care, careful planning, listening to the body and seeking assistance.

Participant 1 stated that she avoided strenuous activities, took breaks when tired, stayed hydrated, ate properly and obtained sufficient rest, while paying attention to discomfort and avoiding activities that she believed could place herself or the baby at risk.

Participant 2 reported similar practices. She avoided excessively strenuous activities, took regular breaks, drank enough water, ate properly and tried to obtain sufficient rest, and planned her academic responsibilities carefully in order to accommodate antenatal care.

Participant 3 explained that she was careful and mindful of her activities, reporting that she took her personal medications and attended health check-ups in order to avoid complications.

Participant 4 also reported obtaining sufficient rest, avoiding strenuous activities, staying hydrated, attending antenatal appointments and paying attention to bodily changes during practical activities.

The similarity of these responses demonstrates that the participants were active agents in managing their maternal health. Rather than simply withdrawing from Theatre Arts training, they adopted different strategies to regulate their participation and respond to their physical condition.

Rest and Modification of Activities

Rest was repeatedly identified as an important strategy. Participants 1, 2 and 4 specifically stated that they took breaks whenever they became tired, and Participant 4 explained that she reduced participation when she felt physically unable to continue.

This finding suggests that flexible participation may be important in enabling pregnant trainees to remain involved in Theatre Arts training without unnecessarily exposing themselves to physical exhaustion.

Antenatal Care and Health-Seeking Practices

Antenatal care was another important component of maternal-health management. Participants 1, 3 and 4 explicitly reported attending antenatal appointments or health check-ups. Participant 1 explained that her husband encouraged and supported her attendance at antenatal

appointments, while Participant 4 reported that healthcare professionals advised her to avoid unnecessary stress and strenuous activities and to pay attention to unusual symptoms.

These responses demonstrate that the participants did not rely exclusively on personal judgment. Healthcare advice formed part of their strategies for determining how they could safely participate in Theatre Arts activities.

Family and Peer Support

Family and peer support also emerged strongly from the interviews. Participant 1 reported receiving substantial emotional and financial support from her husband, who encouraged her when she felt tired or stressed and helped ensure that she attended antenatal appointments and obtained adequate rest.

Participant 2 reported receiving emotional and physical support from her family, while some coursemates assisted with practical tasks and shared notes when she missed classes. Participant 4 similarly reported support from family members and coursemates, stating that their encouragement helped her cope with the pressure associated with pregnancy and academic work. These accounts demonstrate that maternal health management extends beyond individual behaviour. Social relationships can provide emotional, practical and academic assistance that helps pregnant students continue their education.

Institutional Support for Pregnant Theatre Arts Trainees

The interviews revealed an important and somewhat complex picture of institutional support. While some participants reported receiving understanding from individual lecturers and coursemates, the participants generally indicated that there was no clearly communicated and comprehensive institutional policy specifically addressing pregnant Theatre Arts trainees.

Participant 1 assessed the institutional support she received as low. She explained that the department did not provide much direct support and that the practice, once pregnancy was discovered, was to suspend the trainee from practical Theatre Arts activities. She argued that although this could protect pregnant students from some physical risks, it also limited their opportunities to continue their practical education.

Participant 2 described institutional support as moderate. She received understanding from some lecturers who allowed her to rest and excused her from particularly demanding activities, and also received assistance from coursemates. However, she was not aware of a specific policy addressing pregnant Theatre Arts students.

Participant 3 stated that she did not receive institutional support and explained that the department was apparently not aware of her pregnancy. However, she also stated that her lecturers were understanding and supportive of her situation, and reported that the departmental practice was that students discovered to be pregnant would be asked to stay away until after childbirth and until they were physically fit to return.

Participant 4 assessed the support she received as fair. She reported that some lecturers and coursemates were understanding and allowed her to rest or reduce participation when she was

physically unable to continue. However, she was not aware of a specific formal policy for pregnant Theatre Arts trainees.

Absence of Clearly Communicated Formal Guidelines

One of the most significant findings concerns the absence of a clearly communicated formal policy specifically addressing the needs of pregnant Theatre Arts trainees.

Participants 2 and 4 stated that they were not aware of a specific policy. Participant 3 described a departmental practice of asking pregnant students to stay away until they had given birth and were physically fit to return. Participant 1 similarly reported suspension from practical activities after the department discovered her pregnancy.

The accounts suggest that there may be an existing practice of restricting pregnant trainees from practical activities, but the participants did not describe a comprehensive written framework covering alternative practical assignments, modified activities, medical accommodations, flexible schedules or continued assessment during pregnancy.

This distinction is important. A practice of excluding a pregnant trainee from practical activities is not equivalent to a comprehensive maternal-health support policy. The participants' responses suggest a need for clearer procedures that can protect maternal health while also allowing pregnant students to continue their education where medically appropriate.

Lecturer Support

Lecturer support varied among the participants. Participant 1 reported that her lecturers were not supportive, while Participant 2 stated that some lecturers were understanding. Participant 3 described her lecturers as considerate and accommodating, and Participant 4 also reported receiving understanding from some lecturers.

The variation suggests that support may depend partly on individual lecturers rather than being guided by a uniform departmental approach. This can create inconsistency in the experiences of pregnant students because the level of accommodation available to a trainee may depend on the attitude and discretion of particular lecturers.

Discussion of Findings

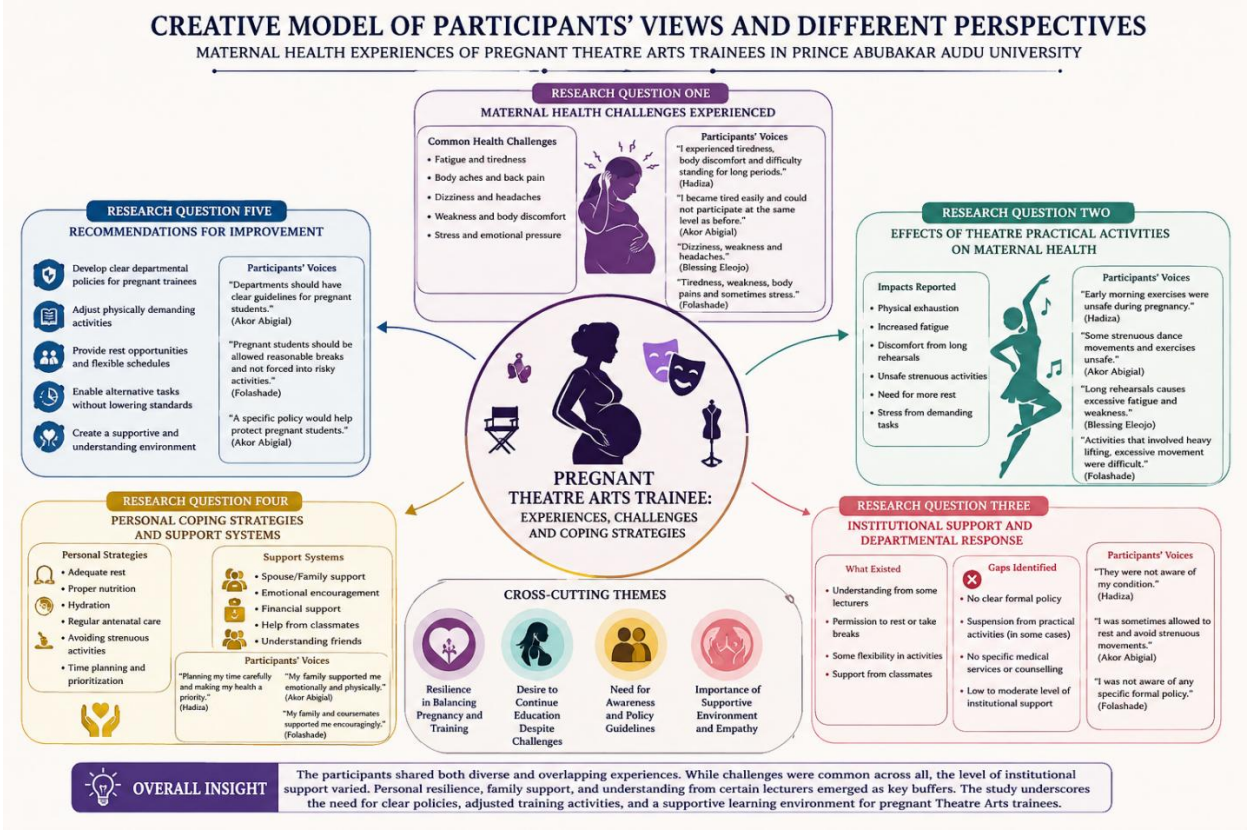


Figure 1. Creative model of participants' views and different perspectives on the maternal health experiences of pregnant Theatre Arts trainees at Prince Abubakar Audu University.

The findings of this study reveal that pregnancy presents a combination of physical, emotional, academic and practical challenges for Theatre Arts trainees. Fatigue, body pains, weakness, dizziness and stress were among the most commonly reported challenges. However, the experiences were not uniform. Participant 3, for instance, remained highly active and reported that pregnancy did not significantly interfere with her academic participation, while Participants 2 and 4 experienced greater physical limitations. This variation is important because it demonstrates that pregnancy should not automatically be interpreted as an inability to participate in Theatre Arts education. Rather, the participants' experiences suggest that the appropriate level of participation should take account of individual health circumstances, the stage of pregnancy and the nature of the particular Theatre Arts activity.

The findings also demonstrate that practical Theatre Arts activities can create additional physical demands for pregnant trainees. Dancing, repeated movements, prolonged standing, strenuous exercises, jumping, falling, heavy lifting and long rehearsals were repeatedly identified as activities requiring modification or caution. However, Participant 3's observation that appropriate exercise could contribute to fitness, flexibility and mental stimulation indicates that practical activities should not be treated as inherently harmful. The central issue is the appropriate management of intensity, duration and risk.

Another major finding concerns the role of self-management. All four participants described strategies involving rest, avoidance of strenuous activities, hydration, nutrition,

antenatal care and attention to bodily signals. This finding demonstrates that pregnant Theatre Arts trainees exercise agency in managing their health. Their responses are consistent with the central principle of the Self-Care Deficit Nursing Theory, which emphasizes the individual's ability to undertake actions necessary for maintaining health and well-being.

The findings further demonstrate that self-care alone may not be sufficient. Participants described receiving varying degrees of assistance from family members, coursemates and lecturers. Family support was particularly important for Participants 1, 2 and 4. The accounts therefore suggest that maternal-health management is both an individual and a social process.

The findings consequently point toward a need for a more balanced institutional approach. Instead of treating pregnancy solely as a reason for withdrawal from practical training, departments could consider appropriate adjustments that preserve academic standards while responding to individual health needs. Such adjustments may include modified practical tasks, alternative assignments, rest periods, flexible scheduling and avoidance of activities involving unnecessary physical risks.

The findings also show that communication is central to effective maternal-health management. Participant 3's experience demonstrates that lecturers may be supportive when they are aware of a student's circumstances, while Participant 1 reported that her lecturers were unaware of her condition. This indicates that an institutional framework should encourage confidential and respectful communication between pregnant students and appropriate academic personnel.

Findings in Relation to the Research Questions

Research Question One: What maternal health challenges do pregnant Theatre Arts trainees experience?

The study found that pregnant Theatre Arts trainees may experience fatigue, physical weakness, body aches, back pain, dizziness, headaches, stress, anxiety and emotional pressure. The intensity of these experiences varies among individuals. Participants 1, 2 and 4 particularly emphasized fatigue and physical exhaustion, while Participant 3 reported dizziness, weakness and headaches but remained active in her studies.

The findings further indicate that pregnancy may become more physically demanding as it progresses, particularly where practical activities involve prolonged standing, repeated movements or strenuous physical exertion.

Research Question Two: How do Theatre Arts practical activities affect maternal health during pregnancy?

The study found that practical Theatre Arts activities can contribute to physical exhaustion, discomfort and stress when they involve prolonged or strenuous physical activity. Dancing, repeated movement exercises, prolonged standing, heavy lifting, jumping, falling, physical acting and long rehearsals were identified as activities requiring caution or modification.

At the same time, the findings do not support the conclusion that all practical Theatre Arts activities are harmful to pregnant trainees. Participant 3 specifically identified possible positive effects of appropriate exercise, including fitness, flexibility and mental stimulation. The implication is that practical activities should be managed according to the trainee's individual health condition and stage of pregnancy.

Research Question Three: What institutional support exists for pregnant Theatre Arts trainees?

The study found that institutional support exists primarily in informal and individualized forms rather than through a clearly communicated formal support structure. Some participants received understanding from lecturers, permission to rest, reduced participation in strenuous activities and assistance from coursemates.

However, the participants generally reported that there was no clearly communicated formal policy specifically addressing pregnant Theatre Arts trainees. Participants 1 and 3 described a departmental practice of restricting pregnant students from practical activities or asking them to remain away until after childbirth and recovery. The findings therefore suggest that institutional support remains inconsistent and requires greater structure.

Research Question Four: What strategies do pregnant Theatre Arts trainees adopt to manage their maternal health?

The participants adopted several strategies, including adequate rest, hydration, proper nutrition, antenatal care, avoidance of strenuous activities, activity modification, careful planning, attention to bodily signals and seeking assistance from family and coursemates.

These strategies demonstrate that participants actively attempted to balance maternal-health needs with academic and practical responsibilities. Their experiences indicate that personal self-care is central to remaining engaged in Theatre Arts training during pregnancy.

Research Question Five: What measures can improve maternal health management within Theatre Arts departments?

The participants recommended the development of clear departmental policies and guidelines, modification of strenuous practical activities, provision of adequate rest periods, alternative practical responsibilities, improved lecturer understanding, flexible scheduling and stronger communication between pregnant students and academic personnel.

A particularly important recommendation was that pregnancy should not automatically result in the termination of a student's Theatre Arts education. Instead, reasonable adjustments should be considered where appropriate so that students can continue their academic development without exposing themselves to unnecessary health risks.

Conclusion and Recommendations

The study concludes that pregnancy does not necessarily prevent Theatre Arts trainees from continuing their academic and practical training, but it can introduce physical and emotional challenges, particularly where training involves prolonged standing, strenuous movement, dancing, repeated exercises, heavy lifting and long rehearsals. The experiences of the four participants show that maternal-health challenges differ from one trainee to another and are influenced by individual health conditions, stage of pregnancy and the nature of practical activities undertaken. Effective maternal-health management therefore requires a balance between the protection of the pregnant trainee's health and the continuity of her academic training. The study further concludes that personal self-care practices such as adequate rest, hydration, proper nutrition, antenatal care and avoidance of strenuous activities, together with support from family, colleagues and lecturers, are important in sustaining the well-being of pregnant Theatre Arts trainees.

Based on these findings, the study recommends, first, that the Theatre Arts Department of Prince Abubakar Audu University develop clear and specific guidelines for pregnant trainees, outlining appropriate procedures for practical participation, rest periods, modification of physically demanding activities and alternative practical responsibilities. Such guidelines should promote reasonable adjustment rather than automatic exclusion from practical training, while taking into consideration the individual health condition and stage of pregnancy of each trainee. Second, lecturers, directors and production supervisors should adopt a more supportive and flexible approach to practical Theatre Arts training during pregnancy by reducing activities involving excessive physical exertion, prolonged standing, heavy lifting, strenuous dancing, jumping and other potentially demanding movements, while providing suitable alternative tasks that enable pregnant trainees to meet academic requirements without compromising their maternal health.

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