A STRONGER YOU AFTER MOTHERHOOD

# The Reseal Method™

FEEL CONFIDENT IN YOUR BODY AGAIN

A Stronger, Brighter You

## Laugh, Sneeze & Lift With Confidence Again

A Simple 10-Minute-a-Day Pelvic Floor Routine for Postpartum Leaks

**JUST 10 MINUTES A DAY**

- Stronger Pelvic Floor
- More Confidence
- Active Motherhood
- A Happier You

JAMES E.

PRACTICAL SOLUTIONS FOR REAL MOTHERS

CONTENTS

# The Reseal Method

# Before You Begin

## *A quick note from James*

This guide is written for the common, everyday kind of bladder leakage — the kind that shows up when you laugh, cough, sneeze, lift, jump, or exercise. If that's what you're dealing with, you're in exactly the right place.

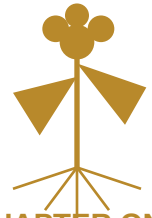
Pregnancy and childbirth — whichever way your child arrived, vaginal or Caesarean, one baby or several — can affect the strength, support, and coordination of your pelvic floor. That's what this guide helps you rebuild.

This guide offers general, educational self-care guidance. It isn't an individual medical diagnosis, and it isn't a replacement for seeing a doctor, physiotherapist, or pelvic-health professional when you need one.

**PLEASE GET MEDICAL ADVICE FIRST IF YOU NOTICE:**

- Blood in your urine
- Significant pain
- Fever
- Difficulty emptying your bladder
- A sudden, severe loss of bladder control
- A feeling of heaviness or bulging in the pelvic area
- Any trouble controlling your bowels
- Unexplained numbness or weakness
- Symptoms that are getting worse quickly
- Difficulty feeling or finding the right muscles at all
- Anything that simply feels seriously wrong

And one more honest thing: if you're 1–3 years postpartum and still leaking regularly, that alone is a perfectly good reason to bring it up with a doctor or pelvic-health physiotherapist — whether or not you've started this guide. Seeking professional help doesn't mean The Reseal Method™ has failed. Think of it as another tool in your corner, not a replacement for this one.



CHAPTER ONE

# The Laugh You've Started Holding Back

You laugh at something your sister said, and before you even finish laughing, you feel it. That warm, unwanted wetness. You cross your legs quickly, hoping nobody noticed, and excuse yourself to “check on something in the kitchen.”

Sound familiar?

Maybe it's not laughing. Maybe it's sneezing during harmattan season, or bending down to pick up your toddler when he refuses to walk one more step. Maybe it's that trampoline your niece begged you to jump on at her birthday party, and you found an excuse to stay by the food table instead, smiling, pretending you just weren't in the mood.

You weren’t “not in the mood.” You were scared. And you’ve gotten so good at hiding it that even the people closest to you don’t know the real reason you’ve started turning down certain invitations.

## The Secret You've Been Keeping From Everyone

Here’s something nobody tells new mothers in Nigeria — or anywhere, really. What’s happening to your body right now is far more common than the silence around it suggests. Ask any group of mothers a quiet,

honest question about this, and more hands would go up than you'd ever guess from the outside. You just never hear about it, because everyone's doing exactly what you're doing: carrying it alone, assuming it's just her.

*Nothing is wrong with you.*

Pregnancy places substantial, sustained load on your pelvic floor for months. Vaginal birth can add further strain on those muscles and the tissue supporting them — and a Caesarean birth, or carrying more than one pregnancy, can affect the pelvic floor too. For some women, strength and coordination return on their own. For many others, it takes real, deliberate work to rebuild. That's not weakness. That's biology.

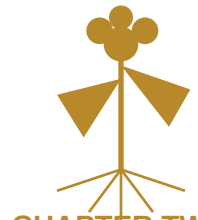
## Why This Isn't Something You Did Wrong

You didn't cause this by lifting your child too much, or by not "praying it away" hard enough, or by waiting too long to see a doctor. You didn't cause it by not doing enough kegels in those early weeks when you could barely keep your eyes open, let alone remember an exercise routine. This is not a punishment, and it isn't a fixed, unchangeable state either.

What it is, is a **strength and coordination problem** — and that kind of problem responds to the right, consistent work. Your pelvic floor is a muscle group like any other in your body. It responded to what happened during pregnancy and birth. It can respond just as clearly to the right kind of rebuilding.

I want you to notice something before we go any further: you picked up this guide. That already tells me you're done pretending this will just disappear on its own, and you're done accepting vague advice from people who've never actually explained *why* any of it should work.

That's exactly where the next chapter picks up — because I'm willing to bet you've already tried something for this. Maybe kegels here and there. Maybe an aunty's suggestion. Maybe you just decided to live with it. In the next chapter, I want to walk through why those attempts didn't stick — not because you failed at them, but because almost nobody is ever shown the right way to do this in the first place.



CHAPTER TWO

# Why Random Kegels Often Don’t Work

So now you know this isn’t your fault, and you know it’s not a fixed state. Good. Because what I want to show you in this chapter is exactly why the things you’ve already tried haven’t worked — and it’s not because pelvic floor training doesn’t work. It’s because “just squeeze” is not actually a plan.

Let’s walk through the usual list. See how many of these you recognize.

## “Just do your kegels.”

Someone probably told you this — a nurse, a friend, maybe your own mother. And they weren’t wrong that pelvic floor training matters. But here’s what nobody explains: most women doing kegels are never told which muscles to use, how to breathe while doing it, how to relax fully between squeezes, or how to progress over time. Doing an exercise with no structure behind it for months won’t build much. It’ll just build frustration.

## “It’ll go on its own with time.”

This one is half true, which is what makes it so dangerous. Some mild leaking does improve in the first few months after birth. But if it's been a year, two years, three years, and you're still crossing your legs before every sneeze, "time" has already told you its answer. Time alone was never going to fix this. It needed structure, and nobody gave you any.

## The herbal mixture from an aunty or a village elder.

I know this one is common, and I'm not here to disrespect anyone's grandmother. Home remedies can be a genuine source of comfort, and there's nothing wrong with that. But nobody has shown that any drink or mixture can rebuild pelvic floor strength or cure leakage — and this particular problem is a specific muscle group that needs specific, targeted work, the same way a weak arm needs the right kind of exercise, not a tonic.

## Ignoring it and just buying more pads.

This is the one almost every woman ends up doing eventually, out of sheer exhaustion. You stop trying to fix it and just manage around it — extra pads in your bag, dark-colored trousers only, staying close to a bathroom wherever you go. It's not a solution. It's survival. And you deserve better than survival.

## What All Of These Have In Common

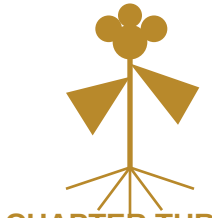
Every single one of these approaches is missing the same thing: **structure, technique, and consistency**. Not a random tip, not a one-off exercise, not a wish. A clear, progressive plan that tells you exactly what to do, in what order, for how long.

*It’s missing structure, technique, and consistency — not effort.*

That’s what I want to give you in this guide. Pelvic floor training isn’t a new idea — it’s well established. What’s missing for most women is a real system around it.

I call it **The Reseal Method™**, and it’s built on three simple phases: rebuilding the muscle correctly, using that strength during real-life pressure, and making the progress stick long-term.

In the next chapter, I’m going to show you what pregnancy and birth actually change inside your body — not in confusing medical language, but in a way that will probably make you say “oh, THAT’S why this happens.” Once you understand that, the exercises in Chapter 4 are going to make a lot more sense.



CHAPTER THREE

# What Pregnancy and Birth Changed Down There

Now that you know why kegels-here-and-there rarely work on their own, let's talk about what actually changes inside your body — because once you understand this, everything else in this guide clicks into place.

I'm not going to throw medical terms at you. I'm going to explain it simply, the way you'd explain it to a close friend.

## An Analogy: The Elastic in a New Pair of Shokoto

When you buy a brand-new pair of shokoto, the drawstring waist holds everything firmly in place. It stretches when you need it to, then snaps right back.

Now imagine that same elastic under sustained pressure for nine straight months — and, for many women, stretched further during delivery. Afterward, it doesn't always snap back on its own. It can stay loose, or lose some coordination. It needs to be worked back into shape. This is only an analogy — not a full medical explanation — but it captures the basic idea well.

Your pelvic floor works a bit like that elastic.

## What Your Pelvic Floor Actually Does

Deep inside your pelvis, you have a group of muscles that work like a hammock. This hammock helps support your bladder, your womb, and your bowel. It also acts like a gate — helping keep urine in, and relaxing when you actually want to release it.

Pregnancy places significant, ongoing load on this hammock for months. Vaginal delivery can add further strain on the muscles and the tissue supporting them. But pregnancy itself — not only vaginal delivery — can affect pelvic floor strength and coordination, which is why this can happen after a Caesarean birth too, or after carrying more than one pregnancy.

For some women, the hammock's strength and coordination return naturally within a few weeks. For many others — probably you, since you're reading this — it stays weaker than before. And when something suddenly increases pressure on it — a laugh, a sneeze, a jump, lifting your toddler — the gate can slip open for a moment, and out comes what you've been trying so hard to hold in.

## This Is the Moment I Want You to Really Sit With

Your bladder is not broken. Your body is not betraying you.

The muscles supporting that gate are simply weaker or less coordinated than they used to be, because of exactly what your body went through during pregnancy and birth.

*Your bladder is not broken.*
*Your body is not betraying you.*

And pelvic floor strength and coordination can be rebuilt. This isn't a bold promise — it's the same well-established idea behind physiotherapy for any other muscle group in the body: the right, consistent work leads to real change for most people.

## The Reseal Method™, in Three Phases

Here's exactly how we're going to approach this, in three simple phases:

**Phase 1 — Rebuild.** Understand what changed, then train the muscle correctly with a simple daily routine — the right muscles, the right way, with a clear, gentle progression.

**Phase 2 — Brace.** Learn to use that strength in the real moments that used to catch you off guard — a laugh, a sneeze, a lift.

**Phase 3 — Maintain.** Build the habit into everyday life so your progress sticks, and know what to do if things ever slip.

Everything from here is action. In the next chapter, I'm going to hand you the actual routine — and it genuinely fits into about ten minutes a day.

CHAPTER FOUR

# The 10-Minute Reseal — Getting Started The Right Way

You now understand what changed and why. So let's stop talking about the problem and start rebuilding.

Before we touch a single exercise, there's one thing you need to get right first — because getting this part wrong, even with the best intentions, is exactly what kept most attempts stuck before.

## Step 1: Find the Right Muscles

Imagine you're trying to stop yourself from passing wind, while at the same time trying to stop the flow of urine — both at once. Gently squeeze and lift inside, as if something is drawing upward and inward.

Keep your stomach, thighs, and buttocks as relaxed as you can, and keep breathing normally throughout. You should feel a gentle inward-and-upward lift rather than a hard, whole-body squeeze.

If you can't confidently feel the right muscles after a few tries, that's genuinely common — and professional guidance from a doctor or pelvic-health physiotherapist can help you learn the movement correctly. There's no shame in that; it's simply another way to get the same result.

## The Two Movements You'll Practice

There are two kinds of squeezes in this routine, and you need both.

### THE QUICK LIFT

*Squeeze fast, release immediately — a quick pulse.*

### THE SLOW HOLD

*Squeeze gently, hold for a count, release slowly.*

*The Quick Lift* — squeeze fast and let go immediately. Like a quick pulse.

*The Slow Hold* — squeeze gently, hold for a few seconds, then release slowly — like putting something back down gently, not dropping it.

Most women who've tried kegels before only ever did fast squeezes, without the slow hold. That's like only ever sprinting and never building endurance. You need both.

## Your Daily Routine

This is the entire routine. It stays this simple on purpose — consistency is the whole advantage here, not intensity.

## THE 10-MINUTE RESEAL ROUTINE

| MORNING | EVENING |
|---|---|
| 10 Quick Lifts | 10 Quick Lifts |
| 5 Slow Holds | 5 Slow Holds |
| *About 5 minutes* | *About 5 minutes* |

**TOTAL DAILY TIME: ABOUT 10 MINUTES**

Do the Quick Lifts and Slow Holds seated or lying down, wherever is easiest. Keep your stomach, thighs, and buttocks relaxed, and breathe normally throughout.

| WEEK | WHAT CHANGES |
|---|---|
| 1 | Learn the movement. Same routine, seated or lying down. |
| 2 | Hold each Slow Hold a little longer. Try one session standing. |
| 3–4 | Same routine, plus practising Brace Before You Move in daily life. |

Notice what doesn't change: the time commitment. You're not adding more minutes as you go — you're holding a little longer, trying a new position, and later, applying the strength you've built. That's the whole idea.

## Two Mistakes That Quietly Slow This Down

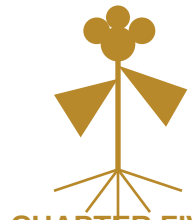
**Mistake 1 — Squeezing everything at once.** If your stomach is tight, your buttocks are clenched, and your breath is held, you're not isolating the right muscle. Relax everything else. Only the pelvic floor should be working.

**Mistake 2 — Skipping days and trying to "catch up."** A big batch of squeezes once a week is nowhere near as effective as a small, steady routine every day. Consistency matters more than effort here.

*Consistency matters more than effort here.*

You don't need privacy, equipment, or even ten free minutes in a row — you can split the day's ten minutes however fits your life. Nobody around you will ever know you're doing it. That's exactly the point.

Getting the exercise right is only half the job, though. In the next chapter, I want to show you how to actually use this strength in the real moments that used to catch you off guard — the sudden sneeze, the unexpected laugh, picking up your toddler without thinking about it first.



CHAPTER FIVE

# From the Mat to Real Life

By now, you've got the routine down. Good. But here's something worth being honest about: doing your exercises calmly on the bed every morning is one thing. Surviving a sudden sneeze at your cousin's wedding, in your best lace, is a completely different thing.

This is exactly where most women give up — not because the exercises don't work, but because nobody ever showed them how to use that strength in the actual moment it's needed.

## The Small Skill That Can Make a Big Difference: Brace Before You Move

The goal isn't just to have a stronger pelvic floor in general. It's to activate it *right before* the moment that would normally cause a leak.

Think of it like this: if someone was about to gently push you from behind, you'd instinctively brace before the push landed, not after. That's what we're training your body to do.

Before you sneeze, laugh, cough, or lift something heavy, give a quick squeeze — the same Quick Lift you've been practicing — right before the moment happens.

I know what you're thinking. **"James, how am I supposed to squeeze before a sneeze? I don't get a warning."**

Fair question. Some sneezes really do come out of nowhere. But a lot of the moments that catch you — bending down to lift your toddler, laughing at a joke you can see coming, reaching for something heavy — actually do give you half a second. With practice, it becomes easier and more automatic, the same way you don't think about balancing when you climb a step. It won't catch every single leak — but with practice, it can make a real difference in the moments you can anticipate.

## Practicing "Brace Before You Move" On Purpose

This week, practice this deliberately, in low-stakes moments, so it becomes second nature before you need it in a real one:

1. Before you stand up from a chair, do one Quick Lift first, then stand.
2. Before you pick up anything heavier than a bag of rice — your toddler included — brace first, then lift.
3. Before a cough you can feel coming, squeeze first.
4. If you know a laugh is coming, brace right as it starts.

## Tracking Your Progress

Some women notice small changes early. For others, progress builds more gradually over several weeks or longer. Your job isn't to race somebody else's timeline — it's to watch whether your own pattern is moving in the right direction. Once a week, check in honestly:

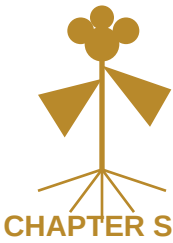
- Were leak moments more or less frequent than last week?
- Were they lighter or heavier when they happened?
- Did I successfully brace before any trigger moment?

- Are the exercises easier to feel and identify now?

You’re not looking for perfection. You’re looking for direction. Fewer leaks, a lighter leak, or one moment where bracing actually worked — these are all real progress, even in a quiet week.

*Small wins, stacked over weeks, are what real progress looks like.*

You’ve now got the full system: understanding what changed, the daily routine to rebuild the muscle, and the skill to use that strength exactly when you need it. What’s left is making sure this sticks, and knowing what to do if it ever slips. That’s next.




# Making Your Progress Stick

You've done the real work now. You understand what changed, you've built a daily routine, and you've learned to brace before the moments that used to catch you off guard. This chapter is about helping that stick — and recognizing early if things start to slip.

## Why Progress Sometimes Quietly Fades

As progress begins to build, it can be tempting to think, "great, I'm done," and stop the routine completely. Later, some women notice leaks creeping back and wonder what went wrong.

Nothing necessarily went wrong — muscles that aren't used regularly can lose some of their strength again over time, the same as any other muscle group. The good news is that maintaining progress generally takes less effort than building it did the first time.

## The Maintenance Routine

Once you're consistently seeing progress — fewer leaks, stronger holds, moments where bracing clearly worked — you can scale back to a lighter version:

1. Ten Quick Lifts and five Slow Holds, once a day, most days of the week.

2. Keep “Brace Before You Move” as an everyday habit.
3. Once a month, do a full routine session as a check-in. If it feels noticeably harder than it used to, that’s your sign to go back to twice a day for a couple of weeks.

Think of it like sweeping your compound — you don’t deep-clean every single day forever, but you also don’t stop sweeping just because the house is clean today.

## If You’re Planning Another Pregnancy

Pelvic floor exercises are commonly used around pregnancy, but if you’re pregnant again, follow the advice of your own maternity or healthcare professional — particularly if you have any complications, pain, or have been advised to restrict exercise. Keep things practical, and don’t feel you need to push through if something doesn’t feel right.

## If Things Slip — Life, Illness, or Simply Forgetting

Life happens. Maybe you get busy and stop for a while. Maybe a stubborn cough or chest infection has you straining more than usual for a week. Maybe you simply forget, the way we all forget things that used to matter to us.

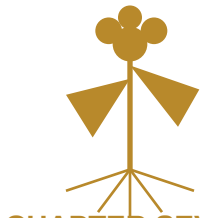
If you notice things slipping, don’t treat it as failure and don’t start over out of guilt. If you return after a break, the movements may feel more familiar than they did the first time — so don’t treat the break as failure. Simply return to the basic routine and rebuild your consistency.

*Missing time doesn’t erase what you learned.*
*Return to the routine and rebuild your consistency.*

### ONE HONEST REMINDER

If your leaking becomes worse, more frequent, painful, or comes with symptoms like fever, blood, or a sudden loss of control, please see a doctor. This guide covers the common, everyday version of this problem — the kind linked to ordinary pelvic floor changes after pregnancy and birth. It isn't a replacement for medical care when something more serious is going on.

You now have what you need to keep this working — not just for a few weeks, but for the long run. The last thing I want to give you is a simple, no-confusion starting point, so you close this guide tonight knowing exactly what to do tomorrow.



CHAPTER SEVEN

# Your First Day — The Exact Plan to Start Tonight

We've covered a lot of ground together. Now let's make sure none of it gets lost in "I'll start on Monday" thinking. Here's exactly what to do, starting tonight.

## Tonight

1. Find the muscle using the wind-and-urine imagery from Chapter 4. You only need to confirm you've found it once.
2. Do your first session: 10 Quick Lifts, 5 Slow Holds. It takes about five minutes.
3. That's it. Don't add anything else tonight. Let this be simple.

## This Week (Week 1)

- Morning and evening, do the routine: 10 Quick Lifts, 5 Slow Holds each session.
- Start noticing the moments that usually catch you — a laugh, a sneeze, lifting your toddler. You're not bracing yet, just noticing.
- Don't judge how it feels yet. Week 1 is about building the habit, nothing more.

## Week 2

- Same routine — hold each Slow Hold a little longer.
- Try one session standing instead of sitting or lying down.
- Start practicing “Brace Before You Move” on purpose.

## Weeks 3 and 4

- Keep the same routine going.
- Let bracing become automatic in daily life.
- Once a week, check in honestly using the questions from Chapter 5.

## What To Expect

Don’t expect a dramatic before-and-after by Friday. Expect small, real signs — a sneeze that didn’t leak as much, a laugh you didn’t have to interrupt. Progress is usually built exactly like this, in small pieces that add up.

## When You Get There

Once you’re consistently noticing improvement, drop to the maintenance routine from Chapter 6 — once a day, most days, with bracing as a permanent habit.

That’s the whole plan. No mystery left, no more guessing. You already know more about what’s actually happening in your body than most women ever get told. The only thing left is doing the ten minutes tonight.

**You’ve carried this quietly for long enough.**
**Let tonight be the night you stop just managing it,**
**and start actually working on it.**

# Your Reseal Toolkit

A quick-reference set of everything you need, in one place — worth saving to your phone.

## THE 10-MINUTE RESEAL ROUTINE

| MORNING | EVENING |
|---|---|
| 10 Quick Lifts | 10 Quick Lifts |
| 5 Slow Holds | 5 Slow Holds |
| *About 5 minutes* | *About 5 minutes* |

**TOTAL DAILY TIME: ABOUT 10 MINUTES**

## 4-Week Progress Tracker

| WEEK | AM | PM | BRACE | LEAKS | NOTES |
|---|---|---|---|---|---|
| Week 1 | ___/7 | ___/7 | Y/N | ___ | |
| Week 2 | ___/7 | ___/7 | Y/N | ___ | |
| Week 3 | ___/7 | ___/7 | Y/N | ___ | |
| Week 4 | ___/7 | ___/7 | Y/N | ___ | |

## Technique Checklist

Run through this before each session:

- [ ] Breathing normally
- [ ] Stomach relaxed
- [ ] Buttocks relaxed
- [ ] Thighs relaxed
- [ ] Squeeze and lift
- [ ] Release completely

If this guide made you think of another mum who’s been quietly dealing with the same thing, send her the link you used to get your own copy — chances are, she’s dealing with it too, even if she’s never said so.

# Sources & Further Reading

This guide reflects widely available, mainstream guidance on postpartum pelvic floor recovery — not invented studies or statistics. If you'd like to read further, these are reputable places to start:

### NHS — Your Post-Pregnancy Body

Public health guidance on pelvic floor exercises and common physical changes after childbirth, including bladder leakage.
nhs.uk/baby/support-and-services/your-post-pregnancy-body/

### Mayo Clinic — Exercise After Pregnancy

General guidance on returning to exercise after pregnancy, including pelvic floor (Kegel) training.
mayoclinic.org — search "exercise after pregnancy"

### Kaiser Permanente — Pelvic Floor Exercises for After Childbirth

Patient-education guidance on pelvic floor exercises following childbirth.
healthy.kaiserpermanente.org — search "pelvic floor exercises after childbirth"

### Cochrane — Pelvic Floor Muscle Training for Urinary Incontinence in Women

An independent review of the research evidence on whether pelvic floor muscle training helps women with urinary incontinence.
cochrane.org — search "pelvic floor muscle training urinary incontinence"

*This page is for general orientation only and is not a complete or exhaustive review of the medical literature.*

# About the Author

James E. created The Reseal Method™ to turn an uncomfortable, often confusing subject into a simple, practical guide mothers can actually follow. He brings more than eight years of experience in family and relationships work to this project, with a focus on clear explanations, shame-free education, and realistic routines designed to fit around everyday family life.

He is married with two children, and believes no mother should have to choose between joining in and staying near the bathroom door.

# What To Do Next

You now have The Reseal Method™ in full, along with your Toolkit. Print this guide, or save it to your phone where you can pull it up easily during your daily routine.

## Know Another Mum Who Needs This?

If another mum came to mind while reading this guide, there's a good chance she has been carrying the same problem quietly too.

Please don't forward your personal copy of The Reseal Method™.

Instead, send her the official product link so she can get her own copy, her own Toolkit, and the latest version of the guide:

**[OFFICIAL PRODUCT LINK]**

# Disclaimer

This guide provides general educational information and is not individualized medical advice. It does not diagnose any medical condition. Results vary from person to person. If you have symptoms that are severe, worsening, or persistent — or any of the symptoms listed in “Before You Begin” — please seek care from a qualified healthcare provider.