

Exploring the lived experience and views of women with gestational diabetes in Ireland: a cross-sectional national survey

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Gestational diabetes (GDM) is associated with short- and long-term risk of complications for both woman and child ⁽¹⁾. Education, appropriate antenatal and postpartum care, and wider support are vital components of gestational diabetes management ⁽²⁾. Women interact with several healthcare professionals (HCPs) during pregnancy, who have the potential to influence their future health behaviours such as weight management, breastfeeding and healthy eating. We aimed to explore experiences and views of women/people with lived experience of gestational diabetes in Ireland.

Women/people with current or prior gestational diabetes were invited to complete an online 23-item cross-sectional survey between April and June 2022. Social media, local media, and personal networks were used for recruitment. The survey had four sections: 1) demographics, 2) gestational diabetes knowledge and experiences, 3) breastfeeding support needs and weight management during pregnancy, and 4) support needs after pregnancy with gestational diabetes. Analysis was performed using SPSS statistical software.

Of the 231 participants, most were aged 35–39 (42%), and had a university degree (29%) or graduate degree (48%). 70% had experienced one gestational diabetes pregnancy. Only 6% correctly identified their increased level of risk for developing type 2 diabetes. 18.6% feel their risk of developing diabetes is too low to worry about. 44.5% participants had sufficient time with their HCP to ask questions about gestational diabetes and have them fully answered, and 51.1% had access to a dietitian when needed. 94.8% were aware of breastfeeding's benefits and 73.5% planned to breastfeed, and 46.3% felt that breastfeeding was discussed in enough detail by HCPs during pregnancy. 18.5% felt the impact of gestational diabetes on mental health was acknowledged at appointments. 69% of participants expressed interest in receiving healthy lifestyle information after pregnancy with gestational diabetes, with most wanting to access from home (69%) or at a community setting close to home (53%). Topics of most interest included preventing diabetes and heart disease (82%), healthy eating for a healthy weight (81%), and approaches to being active (75%) and eating well with a young family (69%).

Our findings highlight a low awareness of risk for future type 2 diabetes after pregnancy with gestational diabetes. Time with and access to HCPs was limited. Awareness of breastfeeding related benefits was high, however more detailed HCP led discussions about breastfeeding were indicated. Participants expressed a desire for increased supports around mental health, and for healthy lifestyle information after pregnancy, with an emphasis on a whole family approach. HCPs have a key role to play in provision of information and support throughout pregnancy and postpartum. Women's experiences and views should inform the design of healthy lifestyle interventions for postpartum women with prior gestational diabetes.

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References

1. Ye W, Luo C, Huang J *et al.* (2022) *BMJ* 377, e067946.
2. ElSayed N, Aleppo G, Aroda V *et al.* (2023) *Diabetes Care* 46, S254–S266.