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FINAL version

**Title:**

Developing a Gestational Diabetes Risk Reduction and Reproductive Health Education Program for American Indian/Alaska Native Adolescent Females: Perspectives from Key Stakeholders

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**250 Word Unstructured Abstract**

The purpose of this research was to understand key stakeholders' perspectives on culturally tailoring a validated, preconception counseling education intervention originally made for Caucasian and African- American adolescent girls with diabetes. The curriculum will be designed to meet the unique needs of American Indian/Alaska Native (AIAN) adolescent females at high risk for gestational diabetes (GDM). This curriculum will teach skills for positive mother/daughter communication, increase knowledge about reproductive health and pregnancy planning, and address modifiable risk factors for GDM prevention (i.e., weight management through culturally-appropriate healthy eating and physical activity). We employed a constructivist single case study approach, with the developing curriculum, entitled Stopping Gestational Diabetes (Stopping-GDM), as the case. We conducted focus groups and individual interviews with key stakeholders including elected inter-tribal leaders and tribal health administrators (n=12), AIAN adult women with history of GDM (n=5), adolescent AIAN girls (age 12-20) (n=13), AIAN adult female caregivers (n=9), and health care professionals/experts in AIAN health (7 were AIAN), diabetes, reproductive health, gestational diabetes, and mother/daughter communication (n=16). All participants agreed GDM risk reduction for AIAN adolescents is important, but resources available to AIAN adolescents at risk for GDM are sparse. They recommended the program be Native family and community focused, use 'real' stories, include cultural aspects of healthy lifestyle (i.e. traditional foods), and provide tools and resources to address multi-level barriers to healthy eating, physical activity, and healthy reproductive practices. Empowering girls to make healthy and safe choices by using their community and extended family support systems was prioritized.