

Introduction

- Gestational diabetes mellitus (GDM) is the most common complication of pregnancy, affecting 7-18% of all U.S. pregnancies. Obesity increases risk.
- American Indian/ Alaska Native (AI/AN) women have twice the rate of GDM and are 50% more likely to be obese than non-Hispanic whites.
- GDM and obesity complications include large babies, birth defects, high blood pressure, preeclampsia, and a high maternal and offspring risk of developing type 2 diabetes.
- Raising awareness of obesity-related risks during pregnancy and GDM among AI/AN girls is imperative.
- READY-Girls is a validated preconception counseling (PC) program for teens with diabetes to raise awareness, and prevent unplanned pregnancies and complications.

Purpose

To inform the cultural tailoring of the READY-Girls reproductive health education program for adolescent AI/AN females at risk for GDM, using the perspectives and recommendations of experts (healthcare providers and administrators).

Methods

Sample

- 16 health care professionals who are experts in AI/AN youth, adolescent health, and gestational diabetes
- 4 participants were AI/AN.

Design and Procedure

- Focus group (FG) and individual interviews
- Interview guides asked about:
 - providing care for AI/AN girls at risk for GDM
 - experiences with successful programs for AI/AN teens
 - comfort of mother/daughter dyads in talking about diabetes and reproductive health
 - changes to video clips and booklet selections from the validated evidence-based intervention
- Excerpts from the READY-Girls PC educational booklet and video clips used to elicit responses about changes in images, motifs and content.

Data Management and Analysis

- Audio recorded and transcribed verbatim
- Review of transcripts, identification of emergent themes and development of codes to reflect themes
- Three trained researchers coded for triangulation using the constant comparison method.

Semi-Structured Interview Guide

General Questions

What are your experiences with AI/AN girls and their families?

How comfortable do you think girls that you work with will be talking about these kinds of issues with their mothers?

What kinds of programs do you know about or have you seen, that are effective with teenagers? What makes them successful?

Booklet Questions

Are there topics in the Ready-Girls booklet that are not appropriate for this project?

Are there formats that might be more appropriate than a booklet? Such as a DVD? or some sort of magazine?

Video Questions

How can we change the images you see, to make them more relevant?

Who might be appropriate spokespeople?

What kinds of settings or events might be used?



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S. Stotz, M. Terry, S. Thorkelson, and X. Uribe-Rios.

Findings

Theme	Finding
Cultural Tailoring	<ul style="list-style-type: none"> • "...in my experience, families that have more of a traditional Navajo, or even Native American Church perspective, are very accepting of talking about sex." • "...you could put a bunch of Native girls in a centering pregnancy type situation, ... all sitting around ..., having a group prenatal session, ... and maybe passing a talking stick. You know, having something that's more culturally appropriate..." • "...and this has to do with taking care of your diabetes, so obviously it's specific, but I think it's a little too command-y. It's like, "Take your medication, eat healthy foods." It's all do this, do this"
Socio-economic Context	<ul style="list-style-type: none"> • "And then there are many girls who are victims of sexual violence. And anything we do needs to be done with sensitivity to the possibility that [...] sex may have happened already and may not have been by choice" • "[W]e have food insecurities, we have housing insecurities, we have such familial disparity. It's a third world country, where most of our natives are, that aren't essentially in urban settings. And that's our reality,"
Communication	<ul style="list-style-type: none"> • "... on balance, most of the families and young women that I get to work with, are remarkably accepting and willing to have conversations about sex and getting ready to have families." • ... I asked her about how open people were. And she said, "Oh, we've got moms, aunts, grandmas bringing in their 12, 13 year old girls, wanting them to start on birth control, just preventively – whether they're sexually active or not."

Discussion and Implications

- Findings from this study will aid the development of a culturally sensitive, relevant, and educational GDM prevention program for adolescent AI/AN girls that focuses on family, community, and cultural values.
- Inclusion of perspectives of American health care professionals and health program administrators as well as those who provide care for Native youth early in program development helps ensure that the program respects and appreciates AI/AN culture and traditions.
- Efforts to culturally tailor the Stopping GDM program for the AI/AN community must take into account the context in which girls are learning about sexual and reproductive health, and about being healthy females and Native values around balancing mind, body and spirit.