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Healthcare Providers' Views on the Provision of Preconception Care for Women with Diabetes in Nigeria
(2023) *Malaysian Journal of Nursing*, 15 (1), pp. 48-57.

DOI: 10.31674/mjn.2023.v15i01.006

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Abstract

Background: One of the 1989 goals declared by St. Vincent's, which focused on achieving good pregnancy outcomes for diabetic women that should be similar to those for non-diabetic women, has not been achieved among Nigerian childbearing women (CW) due to a lack of preconception care (PCC). Literature indicates an increased prevalence of diabetes, diabetes during pregnancy, and pregnancy-related complications across the country's geopolitical zones. The persistence of pregnancy complications can be catastrophic if PCC is not adequately established and integrated into the national healthcare sector. Healthcare providers (HCPs) offer diabetes care (DC) and PCC to CW to mitigate adverse pregnancy outcomes. This study aimed to explore HCPs' perceptions of PCC and strategies towards its provision for Nigerian diabetic CW. **Design:** This qualitative study used an exploratory approach. **Methods:** Data were collected using in-depth semi-structured interviews, transcribed verbatim, and thematically analyzed. **Results:** Four themes emerged from the data: relevance of PCC, redesign of DC practices, awareness creation, and necessity of diabetes PCC. **Conclusion:** The findings imply that there is an urgent need for upgraded obstetric care for pregnant women to accommodate PCC for diabetic CW to reduce pregnancy complications related to diabetes, improve glycemic control, augment folic acid intake, and ensure proper pregnancy planning. The findings of this research can serve as an evidence-based document to enhance HC policies that would accommodate PCC in existing obstetric care. © 2023 Asia Pacific Higher Learning Sdn Bhd., Lincoln University College. All Rights Reserved.

Author Keywords

Diabetes; Healthcare; PreconceptionCare; Providers'Perceptions; Women

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Publisher: Asia Pacific Higher Learning Sdn Bhd., Lincoln University College

ISSN: 22317007

Language of Original Document: English

Abbreviated Source Title: Malays. J. Nurs.

2-s2.0-85171186320

Document Type: Article

Publication Stage: Final

Source: Scopus