ABSTRACT

Introduction:

There is a significant risk of developing type 2 diabetes (T2DM) in women with a history of gestational diabetes (WWGDM) and evidence-based interventions are recommended to for the prevention or delay of development T2DM. Post-natal period is considered suitable for such interventions.

Objective:

To describe the knowledge, perceptions and practices of public health midwives (PHM) and post-natal WWGDM and factors associated with provision of post-natal care for women with GDM in selected Medical Officer of Health (MOH) areas in Gampaha District.

Methods:

A descriptive cross-sectional study was carried out in 2021 in randomly selected nine MOH areas in Gampaha District. Multistage sampling technique was used to recruit 368 PHMs and 404 WWGDM. Data were collected with a self-administered questionnaire from PHMs on knowledge, perceptions and practices and interviewer administered questionnaire from WWGDM on knowledge and practices; both pre-tested. Data were collected by trained data collectors: Knowledge, perceptions and practices were categorized as good, or poor based on a cut off of 60% on calculated scores. Descriptive statistics and significances were calculated through SPSS software version 21.

Results:

There were 355 PHMs (response rate of 98%) and 400 women with GDM (response rate of 86%). Of them, 316 (89.0%) PHMs had a good knowledge, 225 (63.4%) good practice and 347 (97.7%) good perception on prevention of T2DM in women with GDM. Among women with GDM, 258 (64.5%) had a good knowledge. 308 (77.0%) poor practices. Age, experience in service, knowledge and perceptions of PHMs were not significantly associated ($p>0.05$) with good practice. Similarly for women with GDM the age, parity, employment status and postnatal period had no significant association ($p>0.05$) with their practices. There was a significant association with the knowledge and the practices of the women with GDM ($p<0.05$).

Conclusion and recommendations:

The PHMs knowledge and perceptions were good l however, practices were comparatively poor. Since there is a significant association of knowledge and practices of WWGDM, improvement of their knowledge can produce better practice. Further studies needed to identify the reasons for poor practices among PHMs and conduct awareness programs to enhance knowledge on GDM to WWGDM.

Key words: Gestational diabetes, post-natal care, type two diabetes