

What is the psychosocial process of living with pre-eclampsia and gestational diabetes as risk factors for cardiovascular disease during pregnancy in Newfoundland and Labrador?

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Cardiovascular disease is the most prevalent cause of morbidity and premature mortality of Canadian women. An abundance of literature now reveals that pregnancy-related non-traditional risk factors for cardiac disease increase the risk for future cardiac conditions in women. In fact, recent literature has described pregnancy as nature's stress test on the heart. Pregnancy-related non-traditional risk factors for cardiac disease include pre-term birth, gestational diabetes, pre-eclampsia, and intrauterine growth restrictions that are found to increase risks for cardiac disease. In particular, women who had gestational diabetes and pre-eclampsia were found to be 30% more likely to develop heart disease later in life. High rates of preeclampsia and gestational diabetes are prevalent across Canada with Newfoundland and Labrador having the highest rates of preeclampsia in the country. Recent Canadian literature reveals that there is a need for future research aimed at pregnancy-related non-traditional risk factors for cardiac disease. However, there is a lack of qualitative studies that explore the psychosocial process of living with pregnancy-related non-traditional risk factors for cardiac disease. Despite the high rates of pre-eclampsia in Newfoundland and Labrador there are currently no studies that explored the meaning of living with preeclampsia or gestational diabetes conducted in the province. I propose a grounded theory (GT) methodology using a Glaserian approach to explore the psychosocial processes of living with pre-eclampsia and gestational diabetes as risk factors for cardiac disease in Newfoundland and Labrador. GT is a qualitative

methodology aimed at the discovery and understanding of a psychosocial process as it unfolds. GT will aid in gaining a further understanding of the meaning of non-traditional risk factors for heart disease through one's interactions, provide a framework to look at how people manage situations and make choices to resolve problems, and make subsequent decisions that could impact women's heart health in the future.