

# HEALTHCARE PROVIDERS' GESTATIONAL WEIGHT GAIN COUNSELLING PRACTISES AND THE INFLUENCE OF KNOWLEDGE AND ATTITUDES:

A cross-sectional mixed methods study



## BACKGROUND

Supporting all women to achieve healthy gestational weight gain (GWG) is of clinical importance because GWG lower or higher than recommended is linked to a range of poor maternal, fetal and childhood outcomes. The Institute of Medicine (IOM) and Health Canada recommend that healthcare providers advise women on the recommended range of GWG based on prepregnancy BMI, and that they track and discuss weight progress over the course of pregnancy, as well as offering tailored counselling on dietary intake and physical activity. There is evidence to suggest that the quality of GWG counselling interactions needs improvement. Healthcare providers may lack knowledge or skills to undertake this type of counselling or consider GWG to be a low priority in the context of a typical prenatal visit. There is some evidence to suggest that the approach to GWG counselling may vary by healthcare provider discipline.

## THE STUDY

**This mixed-methods study characterise and compare the GWG counselling practices of healthcare providers who provide prenatal care; and to examine potential influences on counselling practices.** Healthcare providers (n=508) including general practitioners, obstetricians, midwives, nurse practitioners and registered nurses in primary care settings from across Canada completed an online survey. Survey participants provided information about their professional characteristics, and were asked to respond to questions regarding their practices, knowledge and attitudes related to GWG, nutrition and physical activity. Twenty-three health care providers from the same disciplines participated in individual semi-structured interviews that asked about their practices in relation to GWG, the reasons behind these practices, as well as provider knowledge in and attitudes towards GWG.

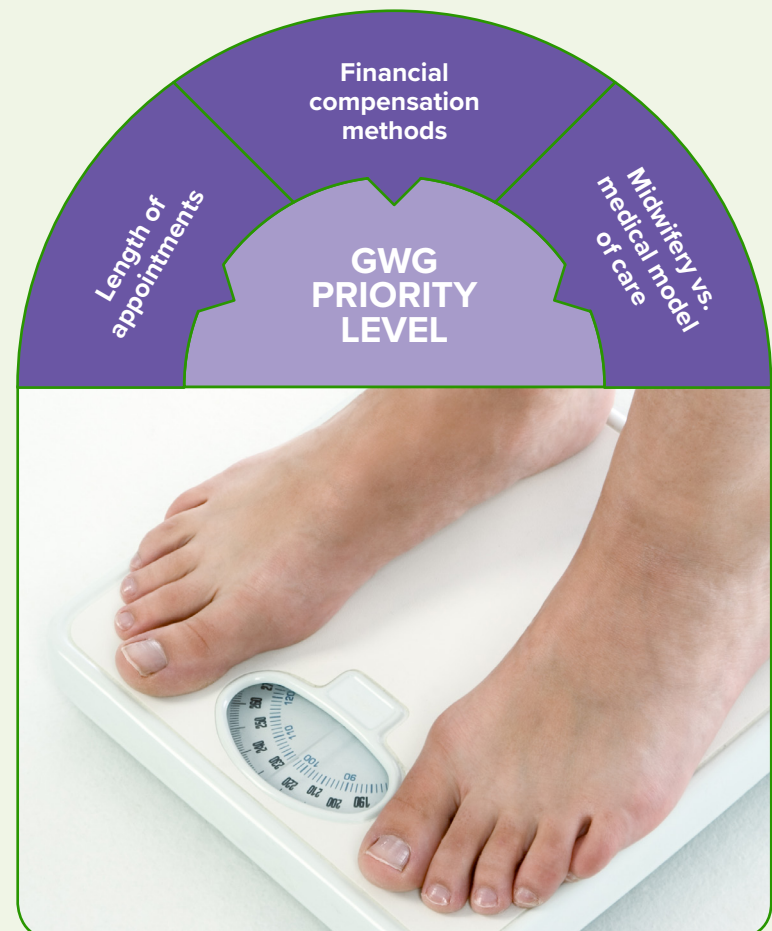
## FINDINGS

### GWG COUNSELLING PRACTICES OF HEALTHCARE PROVIDERS

- Typically, GWG information was provided early in pregnancy, but not discussed again unless there was a concern.
- 21% of healthcare providers routinely provided women with a GWG target based on their prepregnancy BMI and 16% discussed recommended rate of GWG based on their GWG target. 20% & 19% routinely discussed the impacts of inappropriate GWG on mother and baby, respectively.
- 46% of healthcare providers reported routinely discussing physical activity and 28% reported discussing food requirements with women; midwives had discussions about these 2 topics more often than those from other disciplines (except nurse practitioners).

### PREDICTORS OF COUNSELLING PRACTICES

- Those who placed a higher priority on GWG were more likely to provide GWG advice and discuss risks of high or low GWG. Those with more detailed knowledge of GWG, nutrition and physical activity guidelines were also more likely to discuss these topics with women.
- Healthcare providers noted that the short length of prenatal appointments and restrictions on billing interfered with them discussing GWG with women.
- Midwives noted that they focused on overall wellness instead of weight, and longer appointment times allowed them to provide more in-depth counselling.



## CONCLUSION

Healthcare providers would like additional training to enhance their skills in working with women to support healthy GWG. Such training should consider the range of factors that influence the priority level healthcare providers place on GWG counselling.

Morris, J., Nikolopoulos, H., Berry, T., Jain, V., Vallis, M., Piccinini-Vallis, H., & Bell, R. C. (2018). Healthcare providers' gestational weight gain counselling practices and the influence of knowledge and attitudes: a cross-sectional mixed methods study. *BMJ Open*, 7(11), 1-10.



ENRICH Research Program  
University of Alberta, Edmonton, Alberta  
[enrich.ualberta.ca](http://enrich.ualberta.ca)