



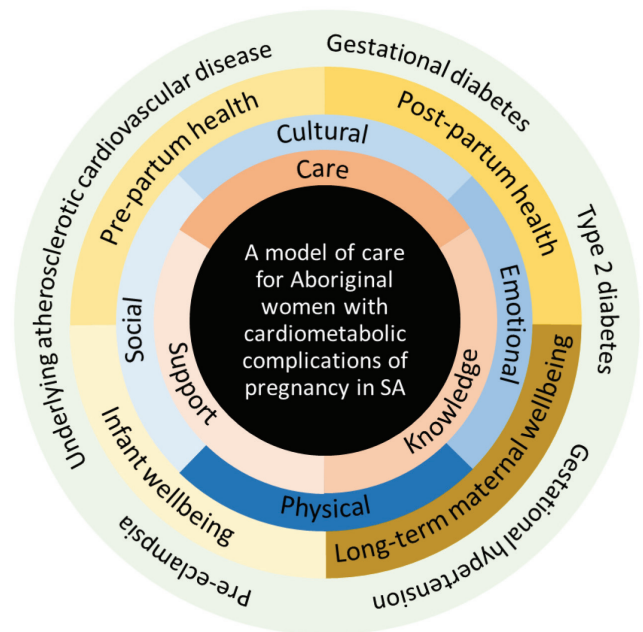
Aboriginal women working to reduce risk of diabetes and cardiovascular complications in pregnancy

Partners: Telethon Kids Institute, Australian National University, South Australian Aboriginal Chronic Disease Consortium, Aboriginal Communities and Families Health Research Alliance (ACRA), Aboriginal Health Council of South Australia, SAHMRI

Date: January 2024

Heart and diabetes complications in pregnancy are linked with poorer pregnancy and long-term health for mother and baby. Aboriginal women experience high burden of high blood pressure and diabetes. Despite high prevalence of heart and diabetes complications, Aboriginal women experience sub-optimal care during and following pregnancy. Limited awareness of pregnancy complications on long-term health for mother and baby leads to sub-optimal practice around prevention, assessment, management and ongoing care. Across heart and diabetes interventions, lack of understanding for Aboriginal cultural needs and the use of Western biomedical models remain significant and preventable gaps. Focus on physical disease alone excludes cultural, social and emotional wellbeing as foundations for lifelong health for Aboriginal women and babies.

This project will design a model of care in South Australia (SA) for Aboriginal women with heart and diabetes complications of pregnancy, and their babies. The design process will bring together Aboriginal women to develop the model, building on women's knowledge of health, wellbeing and expressed health priorities. Once the model is developed, we will work with stakeholders across the health system to start implementation and evaluate this process.



A preliminary environmental scan will be undertaken in collaboration with stakeholders to collate research evidence from across Australia on programs, services and systems to support Aboriginal and Torres Strait Islander women with cardiometabolic complications.

"This project will harness the strength of our communities to reshape care for pregnancy-related health challenges that can lead to ongoing health challenges for Aboriginal and Torres Strait Islander women and families. By working together we're forging a path to better care, ensuring our women receive the support they deserve, laying the foundation for stronger generations to come."

**– Kim Morey, Co-theme Leader SAHMRI
Wardliparingga Aboriginal Health Equity theme and
Executive, Aboriginal Chronic Disease Consortium.**

Method

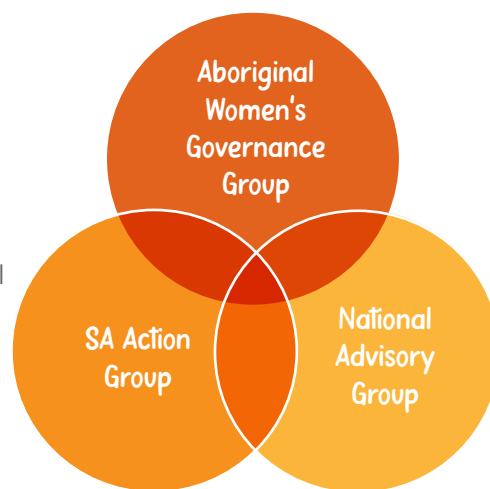
The project will occur in two stages:

- 1 | Co-design of a model of care: The co-design workshops will bring together 16 Aboriginal women with personal experience of cardiometabolic complications in pregnancy and/or professional experience in maternal and/or heart and diabetes health.
- 2 | For each component of the model of care, map across services and care pathways, develop an implementation strategy, and initiate integration of the components into routine care.

Governance

The project has three governance structures:

- An Aboriginal Women's Governance Group with women that have personal and/or professional experience of cardiometabolic complications of pregnancy.
- An SA Action Group with members that have health services and systems experience of Aboriginal primary health, maternal and cardiometabolic health.
- A National Advisory Group that will bring together national health services, systems and research leaders in cardiometabolic complications of pregnancy.



Funding and Ethics

This project received Medical Research Future Funding from the Australian Government's Targeted Translation Research Accelerator program, delivered by MTPConnect (\$998,685) and is funded from September 2023 until August 2025.

Ethics approved by the Aboriginal Health Research Ethics Committee (AHREC) (04-23-1105).

Contact People:



Katharine Brown
T | 0401 612 664
E | katharine.brown@telethonkids.org.au



Karrina DeMasi
T | 0419 208 091
E | Karrina.DeMasi@telethonkids.org.au



Phoebe McColl
E | phoebe.mccoll@telethonkids.org.au



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