Interviewer: So how do you offer healthy eating advice to pregnant women?

Response: so ermm in my previous role so where to start, its obviously something we do at booking as part of the normal booking process, you go through things you shouldn’t eat at pregnancy, things you should avoid and general. And so they were classified as Obese class 2 or morbidly obese. Can you still hear me. so as part of that role I did for 6 years, the specialist weight management midwife, I would talk in more depth with women about what they should avoid we sort of discussed glycaemic index and how much they should gain and try to gain in terms of weight and pregnancy and we discussed lifestyle.

Interviewer: So was it like face to face discussions

Response: Yeah, yeah, it was face to face discussions we had we had handouts, because we know not everybody we all learn in different ways. We had handouts. when it comes to low glycaemic index diet. We've also made a traffic light system of foods that are high and sort of high in sugar medium sugar low in sugar. Instead of we went We went them through the appointment, because it was a specialist appointment was quite long. So, we had half an hour to discuss that. And later, we discussed diet and all of that and exercise. So, diet one, we would go through, they would tell me what they would normally eat, and then we try to tweak it in pregnancy. So that they wouldn't gain too much weight. So, we would discuss breakfast, what they normally have if it was toast. You know, is there an alternative to Bread. What could it be, if they do, instead of eating bread, you know, could we skip from white bread say to brown or should we go to seeded bread and things like this. So, we, it was quite an in depth.

Interviewer: The literature has indicated that in the UK, women that are already obessed in pregnancy are not encouraged to lose weight. Is that right?

Response: As far as I know, the green top guidelines. The RCOG guidelines do say, They don't give diet advice, but I always thought they gave advice they shouldn't gain more than A stone and a half sort of stay under the ten kilogram attend mark as total weight gain in pregnancy. I don't think there's advice for women to lose if they are classed as obese or morbidly obese but there is advice that they shouldn't gain too much. I see. Haven't haven't. Like I said, im doing a different role now and I haven't looked at that into too much depth, but

Interviewer: Yeah, you're not you're not far from the truth at all. Yeah. So have you ever offered healthy eating advice to pregnant Africans.

Response: Yeah, some of some of the women that came through that specialist clinic were from an African background.

Interviewer: Okay, and What approach did this the take?

Response: similar to sort of what I've said we would they would tell me what they would usually have for breakfast, lunch, dinner and then we would go through things that we could tweak. Say the thing that I remember is that they ate a lot of fish, which is, you know, favorable Protein we discussed yams, i think they are called and plantains. And in general, sort of portion size. If they're hungry. What kind of vegetable they could pick or fruits that is low in GI, low in sugar ermm yeah

Interviewer: so this service was just available for women that were classified as class 2 obesed?

Response: Yeah, so unfortunately it's only for women with a BMI over 35

Interviewer: So, did you notice that the kind of advice you gave them was different? was it different from other kinds of advice. Did you have to tweak a lot?

Response: Okay, I want to say, I can't remember. Yeah, I honestly can't remember if it was, if we tweaked it a lot or not.

Interviewer: So what was the difference between the advice you give to them and advice to give other people

Response: They have more specific questions about certain types of food.

Interviewer: More specific questions about certain types of food.

Response: Yeah.

Interviewer: can you remember what their diet was basically always made up of, i know you mentioned yam, what about fats -saturated, unsaturated and things like that

Response: we didn't simply go into that specifically. No, I don't think we discussed that.

Interviewer: Okay, so I'm assuming that it's the same advice you offered to them that you offered to everybody.

Response: Yeah. So it's the same handouts that they got. And the general advice was, yeah

Interviewer: Do you consider the eat well guide and pregnancy healthy eating guidelines appropriate to all cultural and social context.

Response: no, indeed, I mean, not your topic, but it doesn't cater for vegans, for example, at all. So it doesn't cater for all cultures at all. I didn't have a lot of Oriental patients that were obese and it didn't. For example, cater for their culture and yeah And I assume it didn't cater for African women appropriately either.

Interviewer: did you find any problems with that?

Response: Ermm it's frustrating and I feel like there wasn't much out there on the internet. We did with one patient. I remember we did Google to find out, but I see we found one website for African but it was specific for Africa diabetic women. Yeah, this this lady was obese. She wasn't diabetic. And she didn't know how to calculate carbohydrates and things like this that is not what we wanted.

Interviewer: . And did you find that You know, sometimes if people can't change, cant modify their own diet. They usually want to change to another diet say the mediteranean diet to be able to lose the weight. Did you find that people, people wanted to do that or they wanted to stick with their own kind of diet

Response: Their own kind of diet. Definitely. They wanted to make little changes to have but stick to what they would usually eat. They didn't. None of them wanted to make huge lifestyle changes they thought that was too complicated. They want to tweak the diet to be healthy in pregnancy and to not gain too much weight, but for it to be as easy as possible.

Interviewer: Do you have any other thing to say like when you got this invitation. What did you think the interview is going to be about.

Response: Its interesting cos ermm Because like I said when I did that specialist role ermm We, we did have stumbling blocks. Yeah, to advise women it's unfortunately I can't remember the numbers of women that came through the clinics. That were of an African background. feel that didn't feel like it was a lot of women, it felt more we had Caucasian women more and the Diet advice reflected properly that diet. More than it would have for specific groups like vegans, Africans, Orientals.

Interviewer: Okay. Do you feel that more Africans didnt come because of the numbers of obese African women? or they just didn't know show for it.

Response: I don't know that our rate of DNA. So people that just not turn up wasn't very high there. I can only assume that they were either under a basic BMI under 35 Or that the demographic area. at Epsom and St Heliers, St Heliers. I was running the service just didn't catch that many women. That would need that specialist service. Does that make sense.

Interviewer: Yes, it does. Yes. Thank you s much for you time

Response: Thank you Thank you