

## Appendix – Interview Guide

### INTRODUCTION

The Avoiding Diabetes After Pregnancy Together with Moms, shortened to ADAPT-M, is a telephone-based postpartum health coaching program aimed at reducing the risk of type 2 diabetes after GDM. In this program, registered dietitians who are certified health coaches provide diet- and physical activity-focused counselling sessions to postpartum women with a history of GDM. The sessions start between 3 and 12 months postpartum and continue for 6 months. As we are in the planning stages of implementing ADAPT-M at three community health centres in Ontario, we wanted to explore the perspectives of primary care physicians regarding their roles and responsibilities related to postpartum GDM care as well as their needs for communication and collaboration along the care pathway.

### QUESTION 1:

During pregnancy women with GDM may be highly motivated to prioritize their health since they are responsible for the health of their unborn baby. However, after pregnancy, maintaining healthy behaviors may be a lower priority due to a number of factors (e.g., competing priorities, time, etc.). Where do you see your role as a primary care physician to support women about the need for continued healthy behaviors to lower the risk of type 2 diabetes in the postpartum period?

### QUESTION 2:

As you know, women with GDM are advised to follow-up with their primary care physician in the postpartum period, but this doesn't always happen... From your perspective, how should

24 primary care physicians be informed of the need for postpartum follow-up of their GDM  
25 patients? Prompts: post-partum testing OGTT

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27 QUESTION 3:

28 As we discussed, the ADAPT-M program provides women with a dedicated health coach for 6  
29 months for healthy behaviour support... In your opinion, what is your role in the ADAPT-M  
30 program? How do you want to be involved? Examples: Be informed, if so how? Facilitate  
31 testing? Counselling?

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33 QUESTION 4:

34 Do you have any other suggestions on how to improve postpartum diabetes follow-up for women  
35 with GDM?

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