

Rahab Hashim

Biography

RGN, MSc Diabetes Clinical Care and Management/ King's College. NMP. PG cert in Diabetes/ Cardiff Uni. PG HCL (open Uni).

Rahab qualified as a registered nurse from the University of the West of England and began work at Weston General Hospital in a general surgical ward. Initially working as a junior sister specialising in Care of the Elderly, Rahab then took a development role to specialise in diabetes.

Since 2015, Rahab has worked as a Diabetes Specialist Nurse at Weston General Hospital, with specialist interest in inpatient diabetes, type 1 diabetes, foot care and healthcare professionals' education.

Rahab has completed MSc degree in Diabetes Clinical Care and Management at King's college through FEND. Her chosen subject was sexual dysfunction in women with Type 1 Diabetes, which is an area that has not been fully covered in the literature and little is known about the women's experience and their expectations.

Abstract

Sexual dysfunction in women with Type 1 diabetes

Satisfactory sexual function is an important aspect of human relationships and sexual dysfunction (SD) can have a significant impact on the quality of life and psychological wellbeing of people with diabetes. In women, SD includes a low libido and pain or discomfort in intercourse. These difficulties may also cause psychological distress and impact on personal relationships.

Women with Type 1 diabetes (T1D) appear to experience a higher prevalence of SD compared to women with Type 2 diabetes and healthy women. However, the issue of SD is neglected in women with diabetes possibly due to the social embarrassment associated with it. This research, therefore, aimed to explore the lived experience of SD in women with T1D to develop a better understanding of its impact on women's lives.

We conducted a small exploratory qualitative study to explore women with T1D's experiences of SD. Semi-structured interviews with six women with experience of SD were analysed through the Interpretive Phenomenological Analysis approach. The analysis revealed that there are diabetes-specific factors that contribute to SD in women with T1D such as body image, hypoglycaemia and diabetes control as well as generic factors which can be exacerbated by the presence of diabetes such as age, daily stressors and depression. The study highlighted that SD is a significant problem that is generally not attended to by health care professionals (HCPs). It

showed that the women were not confident that their HCPs would address their sexual health needs effectively.

Future research could include a co-design study where the women, who are experts as a result of their experiences, and HCPs can collaborate together to formulate a way forward for addressing SD in clinical care. Another idea is to construct a psychometrically validated questionnaire to measure SD in women with T1D.