



SESSION #1: "Families and Diabetes"

The purpose of the family program is to...

- Learn more about diabetes and its risk factors.
- Talk about how families with diabetes can stay healthy.
- Join the family together to support a family member with diabetes.
- Join the family together to learn about healthy lifestyles for diabetes prevention.
- Try different healthy foods.
- Try different physical activities like dancing, walking, or stretching.



Program Purpose...





What Is Diabetes?

Diabetes Is Like An Interrupted Pathway...

It Is A Condition In Which The Body Has Too Much Sugar In The Blood...

- The body breaks down food into **glucose** or blood sugar. Glucose is the body's energy source.
- The glucose is carried by the blood to the body's cells.
- A hormone called **insulin** helps the glucose get into the cells where it can be used for energy.
- In the case of diabetes, there is little or no insulin available, or the body's cells resist the insulin.
- When insulin is not available, the glucose builds up in the blood.
- A blood test can show if someone has a high level of blood glucose and has diabetes.

QSA

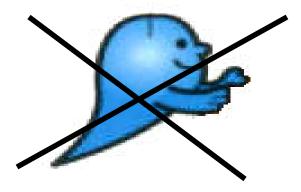
Be sure to give participants an opportunity to ask questions here. They may be concerned about certain words or how the body functions. Try to answer their questions in the most simple way possible to prevent worry or frustration. Try using the pictures to illustrate the ideas being conveyed.

<section-header>

Insulin helps glucose 'travel' to the body's cells...

But with diabetes...

there is no or very little insulin or the body's cells resist the insulin.







Can Diabetes Be Cured?

Diabetes Cannot Be Cured But It Can Be Controlled With...

- Support from family and friends.
- Support from the community (examples: promotoras, doctors, support groups).
- Healthy food choices and portion sizes.
- Physical activity that helps make insulin work better.
- Medications.

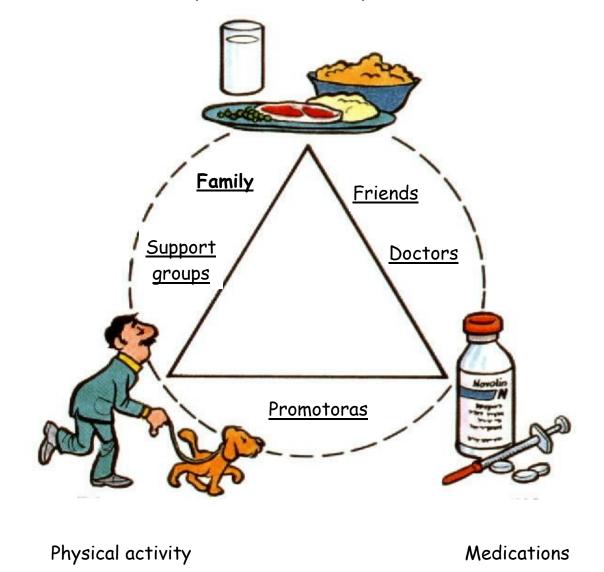


The pictures in the chart represent ways that a person with diabetes can manage their condition. Inside the triangle are the **social aspects** of diabetes support and control. Be sure to take enough time for discussion of this chart's meaning.

Can Diabetes Be Cured?

Diabetes Cannot Be Cured But It Can Be Controlled...

Healthy food choices and portion sizes





Dangers And Complications Of Poorly-Controlled Diabetes Are...

Feeling sad or angry

Session #1

- Feeling sick and tired all the time
- Burning feeling in feet and hands
- Loss of sensation in feet and hands
- Sores or infections on the feet that won't heal
- Digestive problems
- Sexual problems in women and men
- Foot and leg amputations
- Kidney failure
- Problems with eyes and blindness
- Heart attack
- Stroke



Inform participants that we will talk more about the emotions that come with diabetes and also about heart attacks, stroke, and other complications from cardiovascular disease that can be prevented. Show the picture of the heart while you speak.

These complications are listed here in order of severity. Be sure to explain to participants that these complications will not necessarily happen to them. They can be prevented. If they experience one complication they are not destined to experience all of them.

Discussion

Ask participants if they know of any other complications. Do they or does any one they know experience these problems? What is it like for them? How do they cope with it?

<u>What Happens When Diabetes</u> <u>Is Not Controlled?</u>



Tiredness





Sexual problems for men or women



Burning sensation or Loss of sensation in feet or hands



Sores or Infections on the foot



Amputation



Heart attack or Stroke



Blurry vision or Loss of sight



Who Is At Risk For Diabetes?

Individuals Who Have One Or More Of These Characteristics Have An Increased Risk For Diabetes...

- Overweight
- Over 40 years of age
- Not physically active
- + Hispanic, Native American, African American, or Asian decent
- Have diabetes in the family (heredity)

Discussion

Lead a discussion about risk factors. For those who do not have diabetes, could they be at risk? Why? Why not? Do they know other friends or family members that may be at risk? Why? Which of these factors can be changed or controlled? Which cannot?

Who Is At Risk For Diabetes?

People Who Are...



Physically inactive



Overweight



Over 40 years old



Smokers



Related to someone with diabetes (heredity)



Of Hispanic, Native American, African American, or Asian decent



What Are The Symptoms Of Diabetes?

Symptoms Include...

- Tiredness
- Weight loss
- Blurred vision
- Feeling thirsty
- Urinating a lot
- Grouchy and in bad moods



Distribute the pamphlet on high and low blood sugar levels, and on what families can do to help a diabetes patient control their blood sugar.

Discussion

Based on your previous discussion of risk factors and who may be at risk for diabetes, lead a discussion on what someone can do if he or she experiences the symptoms of diabetes.

What Are The Symptoms Of Diabetes?



Fatigue and tiredness



Irritability and frustration



Blurry vision



Weight loss



Urinating frequently



<u>How Can Diabetes Affect</u> <u>The Whole Family?</u>

Diabetes Can Change A Family Because Family Members May...

Become fearful or worried about...

...the health of the person with diabetes. ...how to help this person. ...the future of the family.

• Become angry, resentful, or depressed because...

...nobody seems to understand the illness and family members fear what might happen. ...they feel "Why does this have to happen to our family?" ...they believe that "This illness will change what our family can do." ...they believe that "Our family can't have fun anymore."

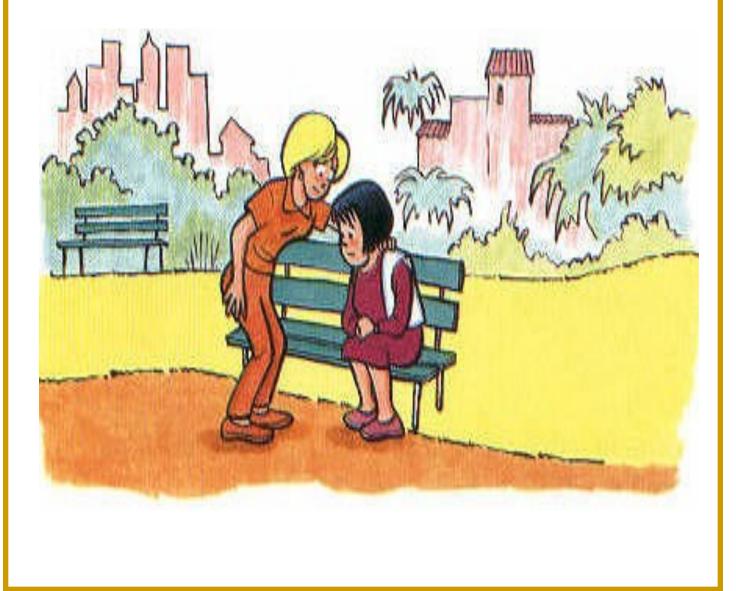
• Create walls or barriers between themselves and other family members to avoid talking about...

...the illness. ...changes.

Discussion

Try having a discussion about the participants' first response to diabetes. How did they feel? Did they feel alone, or helpless? What did they do? Have there been any changes in the family? Do they feel there needs to be some kind of change?

<u>How Can Diabetes Affect</u> <u>The Whole Family?</u>





<u>What Are Some Characteristics Of</u> <u>Healthy Families With Diabetes?</u>

Listen

- Healthy families listen to each other's stories, problems, and accomplishments.
- They listen without interrupting.

Talk

- + Healthy families talk openly about good and bad feelings.
- They do not keep secrets, bury their feelings, or "play games."

Support

- + Healthy families support each other's goals, ideas, plans, or accomplishments.
- They join together to solve problems and get through difficult times.

Value

- Healthy families believe that everyone in the family brings a unique strength to the group.
- They compliment each other for his or her contribution to the family.
- They are proud of their family.
- They believe the family is capable of reaching goals.

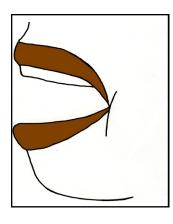
Laugh

- Healthy families enjoy each other's company.
- They can "bounce back" after difficult times, using humor during difficult situations.

Discussion

Ask the group if they can identify any of these characteristics in their families. If so, do they find that these characteristics help their family deal with diabetes? How?

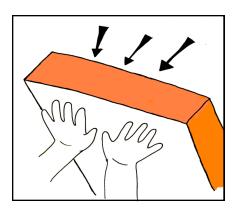
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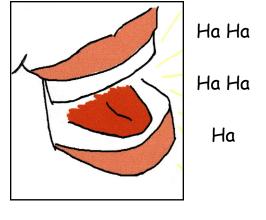


Talk



Listen





Laugh

Support

DIABETES AND THE FAMILY

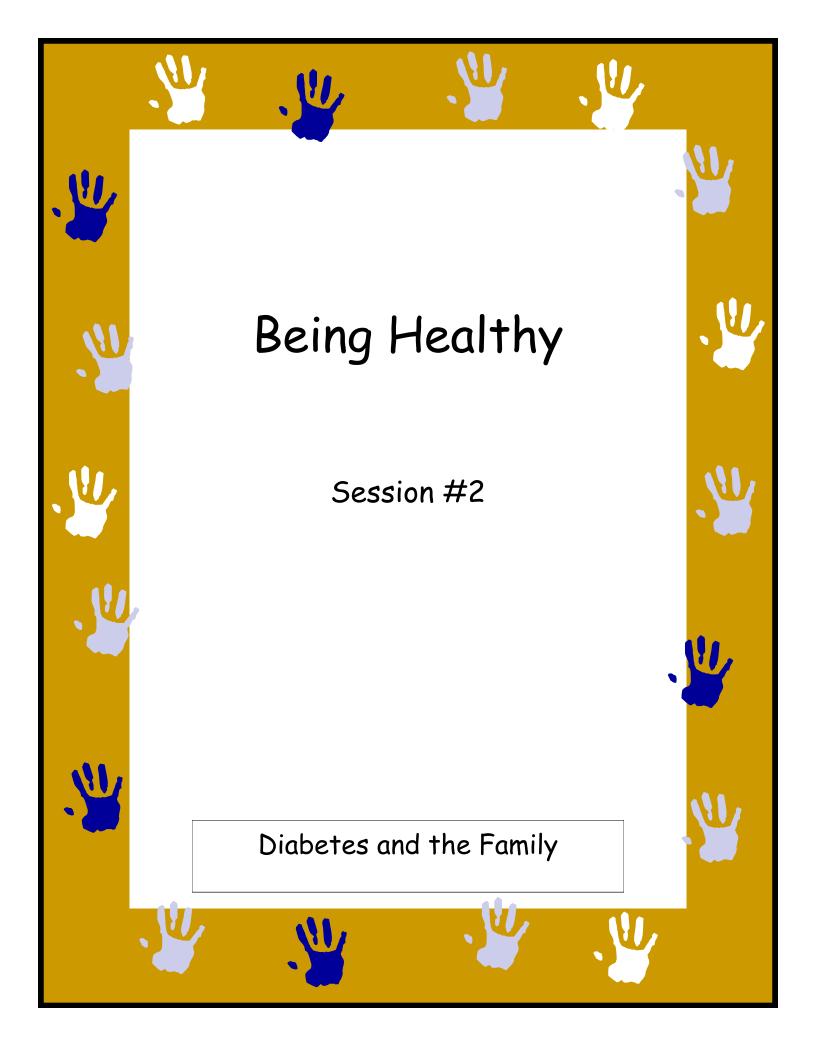
Wrap Up!

SESSION #1 Conclusion

<u>Discussion Questions To Conclude</u> <u>Session #1: "Families and Diabetes"</u>

1. Why are you participating in the program *Diabetes and the Family?*

- 2. Name 2 or more risk factors for diabetes.
- 3. What are 2 or more diabetes complications that you can prevent?
- 4. What are 2 characteristics of a healthy family?





REVIEW

Session #1: "Families and Diabetes"

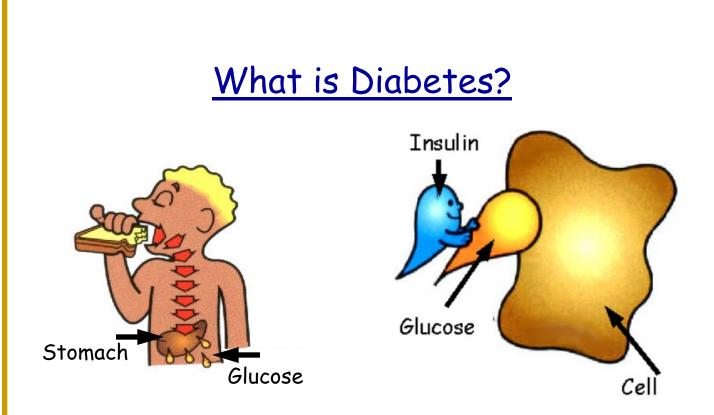
QSA

Ask family members to remember some of the information discussed in last week's session. Show the next 5 questions and graphics first, asking participants to offer answers. Fill in information they may leave out, or answer any questions they may have. Spend sufficient time for a brief discussion of the information, but be sure to move quickly enough to reach the new information of this session.

What Is Diabetes?

Diabetes Is Like An Interrupted Pathway... It Is A Condition In Which The Body Has Too Much Sugar In The Blood...

- The body breaks down food into glucose or blood sugar. Glucose is the body's energy source.
- The glucose is carried by the blood to the body's cells.
- A hormone called insulin helps the glucose get into the cells where it can be used for energy.
- In the case of diabetes, there is little or no insulin available or the body's cells resist the insulin.
- The glucose builds up in the blood.
- A blood test can show if someone has a high level of blood glucose and has diabetes.



Insulin helps glucose 'travel' to the body's cells...

But with diabetes...

there is no or very little insulin or the body's cells resist the insulin.





REVIEW...

<u>What Happens When Diabetes</u> <u>Is Not Controlled?</u>

Dangers And Complications Of Poorly-Controlled Diabetes Are...

- Feeling sad or angry
- Feeling sick and tired all the time
- Burning feeling in feet and hands
- Loss of sensation in feet and hands
- · Sores on the feet that won't heal
- Digestive problems
- Sexual problems in women and men
- Foot and leg amputations
- Kidney failure
- Problems with eyes and blindness
- Heart attack
- Stroke

Heart disease is a serious problem for Hispanics (Mexican-Americans). It is the number one cause of death among Hispanics in this country. One out of four Hispanics dies of heart disease (cardiovascular). Even when glucose levels (diabetes) are under control, diabetes greatly increases the risk of heart disease and stroke. In fact, the majority of people with diabetes die from one form or another of heart disease or ruptured blood vessels.

<u>What Happens When Diabetes</u> <u>Is Not Controlled?</u>



Tiredness





Sexual problems for men or women



Burning sensation or Loss of sensation in feet or hands



Sores or Infections on the foot



Amputation



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REVIEW...

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- + Hispanic, Native American, African American, or Asian decent
- Have diabetes in the family (heredity)



Remember to mention that we need to think about future generations to prevent them from having diabetes.

Who Is At Risk For Diabetes?

People Who Are...



Physically inactive



Overweight



Over 40 years old



Smokers



Related to someone with diabetes (heredity)



Of Hispanic, Native American, African American, or Asian decent



CHART #4

REVIEW...

What Are The Symptoms Of Diabetes?

Symptoms Include...

- Tiredness
- Weight loss
- Blurred vision
- Feeling thirsty
- Urinating a lot
- Grouchy and in bad moods

Remind participants to refer to the pamphlet on high and low blood sugar levels.

What Are The Symptoms Of Diabetes?



Fatigue and tiredness



Irritability and frustration



Blurry vision



Weight loss



Urinating frequently



REVIEW...

<u>What Are Some Characteristics Of</u> <u>Healthy Families With Diabetes?</u>

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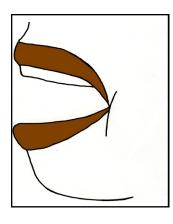
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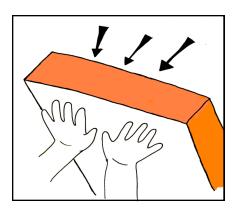
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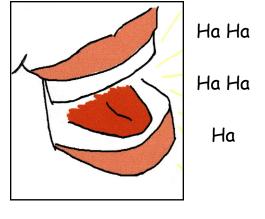
Talk



Listen



Support



Laugh



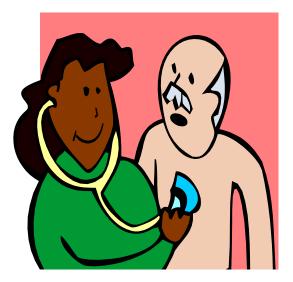
SESSION #2: "Being Healthy"

<u>How Can Physical Activity</u> <u>Keep Us Healthy?</u>

- Physical activity helps insulin work better.
- When insulin works better, more glucose gets into the cells and lowers the glucose level in the blood.
- Physical activity helps strengthen the body's muscles.
- Physical activity exercises the heart and keeps the heart strong.

<u>How Can Physical Activity</u> <u>Keep Us Healthy?</u>







<u>How Can We As A Family</u> <u>Be More Physically Active?</u>

- Make physical activity or exercise a family affair.
- Have a regular time for exercise (example: every other morning, every evening after dinner).
- Walk together.
- Walk to visit friends or family.
- Garden or do yard work together.
- Play basketball or baseball.
- Swimming or water aquatics.
- Have everyone join in with the housework; sweeping, mopping floors, and vacuuming are also exercise!

Discussion

What kinds of physical activity do families do? Let different participants share their experiences. Who goes for walks? What kinds of physical activity do they do at home? Do any families exercise together? With friends? <u>How Can We As A Family</u> <u>Be More Physically Active?</u>















<u>How Can We Build Activity</u> <u>Into Our Family Gatherings?</u>

- Make physical activity a part of being with friends and family.
- During family gatherings, suggest that everyone go out together for a walk, play a game of tag, or dance to music.
- Make physical activity as much a part of visiting as eating.
- After a church service, take a short walk around the church. Encourage other friends and family members to join you.

Discussion

Lead a discussion about the ways families can be more physically active when they get together. Think of the different kinds of family gatherings. Do families have any ideas to share about how to be more active? <u>How Can We Build Activity</u> <u>Into Our Family Gatherings?</u>









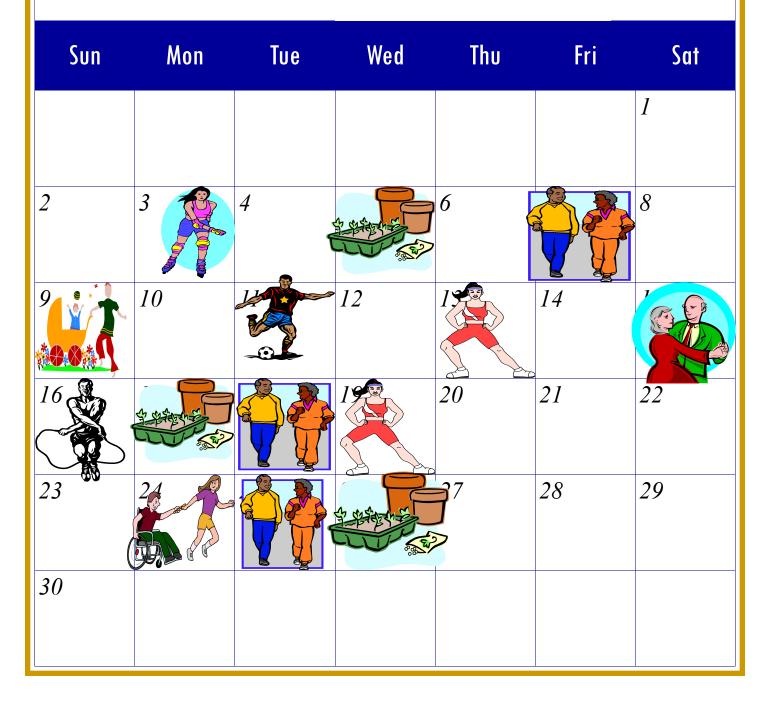
<u>How Much Physical Activity</u> <u>Is Good?</u>

- Small amounts of physical activity throughout the day can build up to make you more active.
- You should participate in a physical activity at a level that you can feel your heart beat faster, but that you can still talk.
- Be active for at least 30 minutes a day, 3-4 times a week.
- These 30 minutes can occur all at one time or in shorter periods that add up to 30 minutes in a day (but at least 10 minutes of activity at a time).

<u>How Much Physical Activity</u> <u>Is Good?</u>



- * 30 minutes
- * 3 or 4 days / week





<u>How Can We Best</u> <u>Prepare To Be Active?</u>

- If you are going to be active for more than 10 minutes, you should stretch using techniques demonstrated in this session.
- Be comfortable. Wear loose-fitting clothing so you can move.
- If you are walking, your shoes should be comfortable.
- If you are riding a bike, the seat should be adjusted so you can sit comfortably as you are pedaling.
- If you are gardening, use gloves.
- Drink at least 8 glasses of water a day, more if it's hot.
- During the summer, exercise in the early morning or inside (example: go for walks inside the mall).
- Wear a hat.

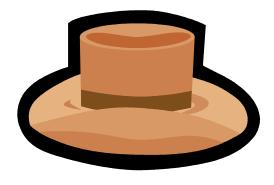
<u>How Can We Best</u> <u>Prepare To Be Active?</u>













Are We Ready?

- If you have not been active recently, don't overwork yourself.
- Start with a slow pace and short amounts of time.
- Work up to 30 minutes or more a day, 3-4 times week.

Discussion

Talk to the families about barriers to physical activity. Are there certain conditions preventing families from exercising or being physically active? Some people may worry about the heat, the availability of locations to walk or play, or the lack of time for physical activity. Others may have physical conditions that prevent them from being active. You should try to address these barriers and guide participants through the options and alternatives they have.



Choose a physical activity for the group to do. It should be something that everyone can participate in, like stretching or walking. *Consult the Appendix for ideas





<u>How Can Healthy Foods Help</u> <u>Prevent And Control Diabetes?</u>

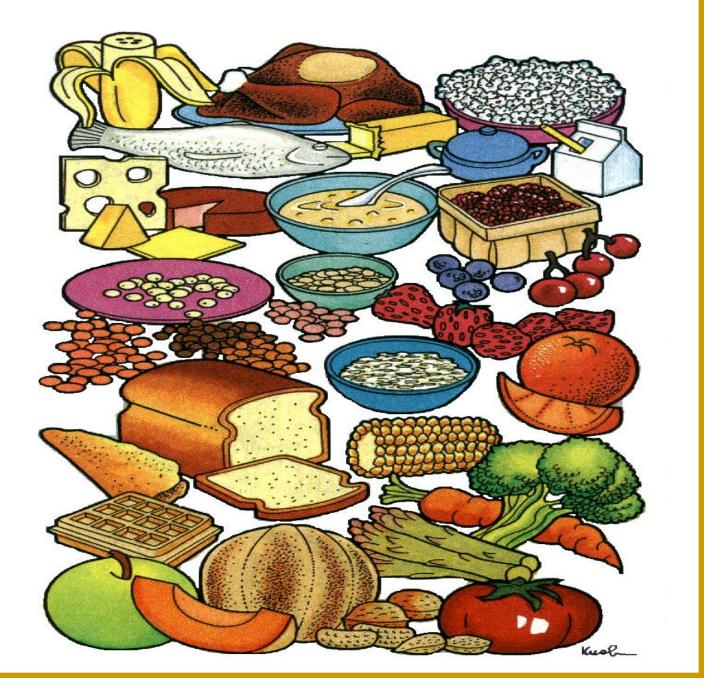
Eating Healthy Foods Can Help Control Body Weight. Healthy Foods Include...

- Beef, pork, chicken, and fish that is baked, broiled, or grilled.
- Beans without added grease (like lard or oil).
- Vegetables and fruits.
- Whole grain foods like high-fiber cereals and breads, and corn or whole wheat tortillas.
- Low-fat and non-fat foods like skim, fat-free, or non-fat milk; non-fat yogurt; low-fat sour cream; and fat-free salad dressing or mayonnaise.

Discussion

Have participants share their experiences with or knowledge of these foods. Has anyone tried any non-fat or low-fat food items? Do they like these foods? Do families eat a lot of vegetables? Why? Why not? What kinds? Do they know how their meat is usually prepared? <u>How Can Healthy Foods Help</u> <u>Prevent And Control Diabetes?</u>

Eating Healthy Foods Can Help Control Body Weight. Healthy Foods Include...

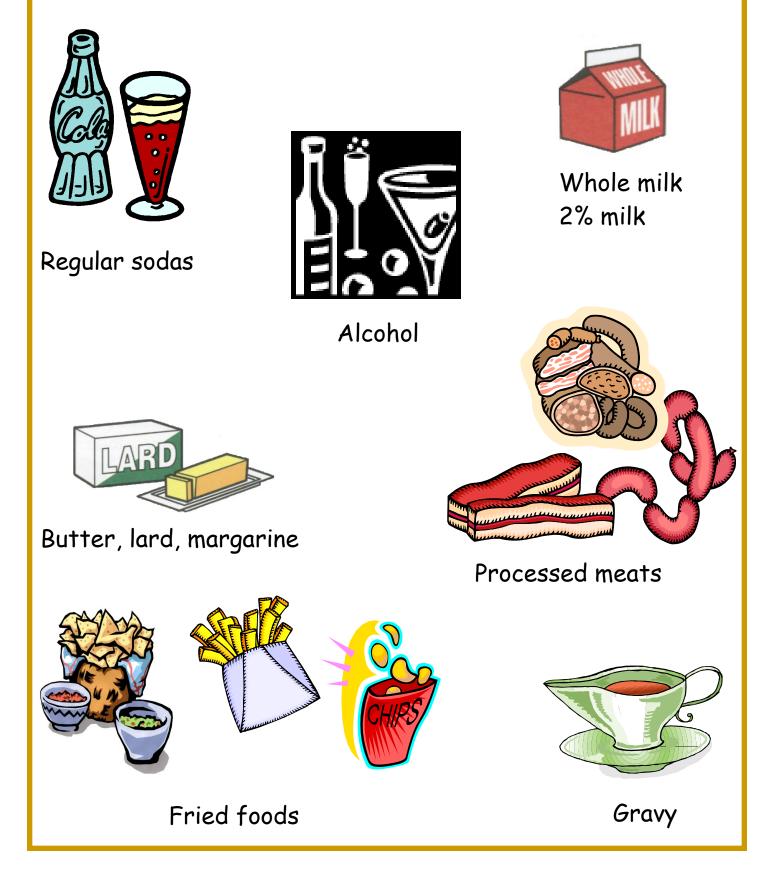




What Foods Should We Limit?

- Regular sodas (it's better to choose diet sodas).
- Sweetened drinks (like Kool-Aid[®], fruit punch, and sports drinks like Gatorade[®]) and aguas frescas like horchata, jamaica, or tamarindo because they are high in sugar.
- Fried foods or foods with added grease like fried chicken, french fries, tortilla chips, and potato chips—they are high in fat.
- Processed meats such as sausage, bologna, and bacon—they are high in fat.
- Gravy—it is high in fat.
- Butter, margarine, lard, or regular salad dressing—they are high in fat.
- Whole milk or 2% milk—they are high in fat.
- Alcohol.

What Foods Should We Limit?





How Can We Prepare Healthy Meats?

• Trim fat off meat.

Discussion

- Take skin off chicken and turkey.
- Bake, grill, or broil meats.
- Drain fat or grease from cooked meat.
- Don't fry food—the grease adds fat to food.

Have participants share their experiences with how they buy or prepare their foods. Have they tried any of these techniques? Why? Why not? Does it seem like it's an easy or difficult process?

How Can We Prepare Healthy Meats?





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Cut fat or skin off meat
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Don't fry or add oil or butter



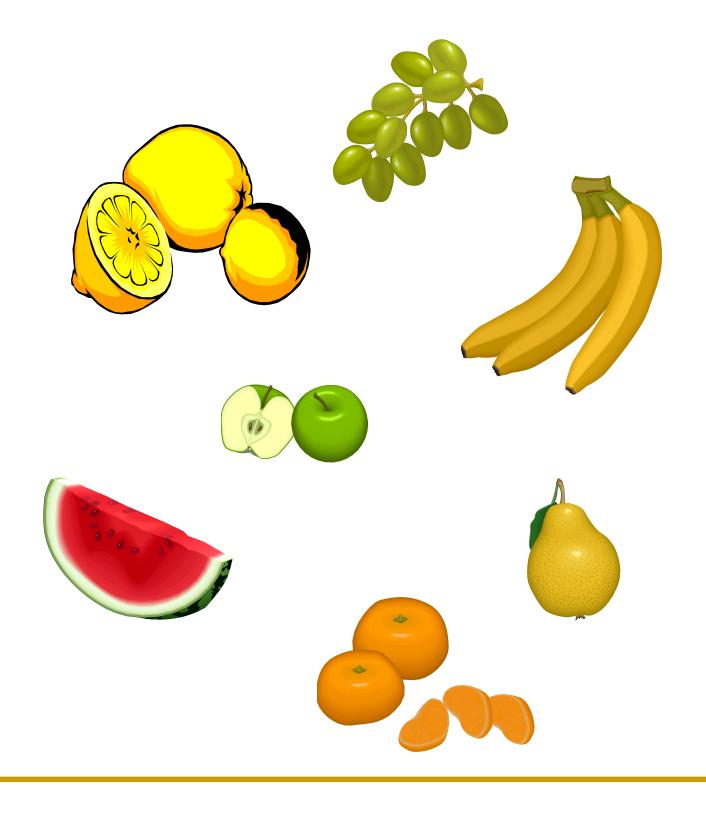
Bake or grill meats



<u>How Can We Buy And Prepare</u> <u>Healthy Fruits And Vegetables?</u>

- Steam or boil vegetables.
- Do not add butter or margarine to vegetables—try lemon or lime juice for flavor.
- Eat fruit instead of drinking fruit juice—the pieces of fruit will make you feel full.
- If you drink fruit juice, drink a small amount—no more than a cup.
- If you buy canned fruit, buy fruit that is packed in its own juice.
- Do not buy canned fruits that are packed in syrup.

<u>How Can We Buy And Prepare</u> <u>Healthy Fruits And Vegetables?</u>

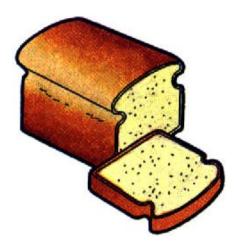




<u>How Can We Buy And Prepare</u> <u>Breads, Cereals, And Baked Goods</u> <u>In A Healthy Way?</u>

- Buy cereals and bread that are 2 grams or higher in fiber—look at the label to see the amount of fiber.
- Eat or cook cereal with fat-free (non-fat or skim) or low-fat (1%) milk.
- Use mustard instead of mayonnaise on sandwiches.
- Use reduced-sugar jelly instead of butter or margarine on toast.
- Choose corn tortillas instead of flour tortillas—corn tortillas are lower in fat.
- Eat fresh corn tortillas instead of fried.
- Try making flour tortillas with $\frac{1}{2}$ white flour + $\frac{1}{2}$ whole wheat flour.
- Choose graham crackers and ginger snaps instead of cookies, cakes, and pastries.
- Choose pretzels instead of chips and snack crackers like Cheez-it[®] and Ritz Crackers[®].

<u>How Can We Buy And Prepare</u> <u>Breads, Cereals, And Baked Goods</u> <u>In A Healthy Way?</u>

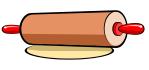


Choose whole wheat breads



Mustard instead of mayonnaise





Corn tortillas instead of flour



Fat-free snacks





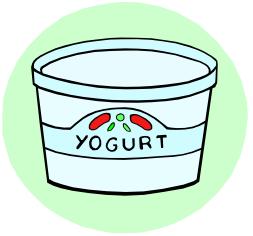
Use skim milk with cereal

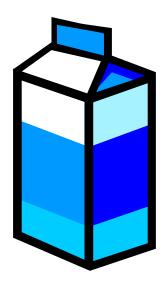


<u>How Can We Buy And Eat</u> <u>Healthy Milk Products?</u>

- Drink fat-free (non-fat or skim) or low-fat (1%) milk.
- Eat low-fat or fat-free yogurt.
- Avoid ice cream. Choose low-fat frozen yogurt instead.

<u>How Can We Buy And Eat</u> <u>Healthy Milk Products?</u>





Yogurt or Milk non-fat / fat-free / low-fat



Low-fat frozen yogurt

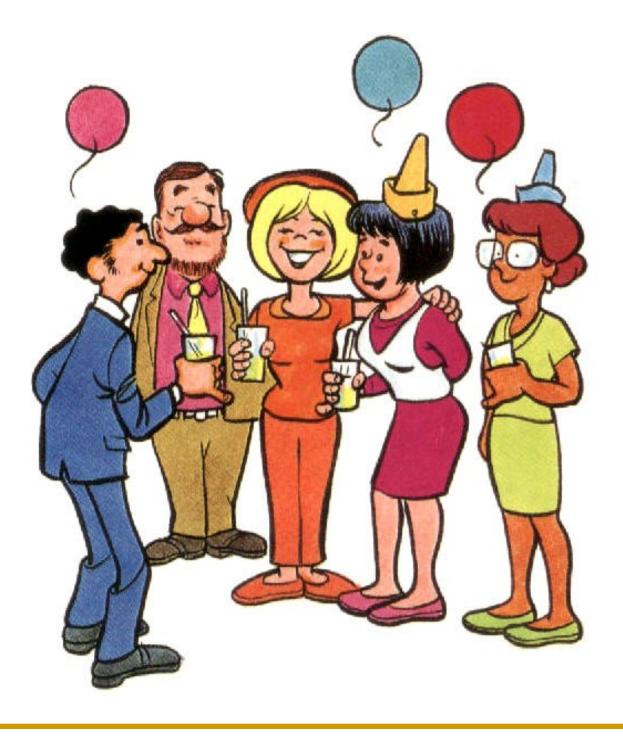


<u>How Can We Eat Healthily When We</u> <u>Are Visiting Or Celebrating</u> <u>With Friends And Family?</u>

- Take small portions of food. Don't take any servings larger than your palm or a deck of cards.
- Fill up on the low-fat choices, like fruits and vegetables.
- Avoid sodas and alcoholic beverages. Drink iced tea with lemon instead.
- If you use sugar, use only a small amount, or use an artificial sweetener.
- If you are the host, serve grilled, baked, or broiled meat; one or more vegetables; and a fresh fruit salad for dessert.
- If you are the guest, bring a salad with lots of vegetables and low-fat or fatfree dressing, or corn tortillas.

Discussion

Discuss the barriers to eating healthily at social gatherings. Ask participants about the celebrations they go to. What kinds of foods are usually served? What kind of foods do they usually eat when visiting their friends and family? Would it be easy or difficult to eat healthier? Why? Why not? <u>How Can We Eat Healthily When We</u> <u>Are Visiting Or Celebrating</u> <u>With Friends And Family?</u>



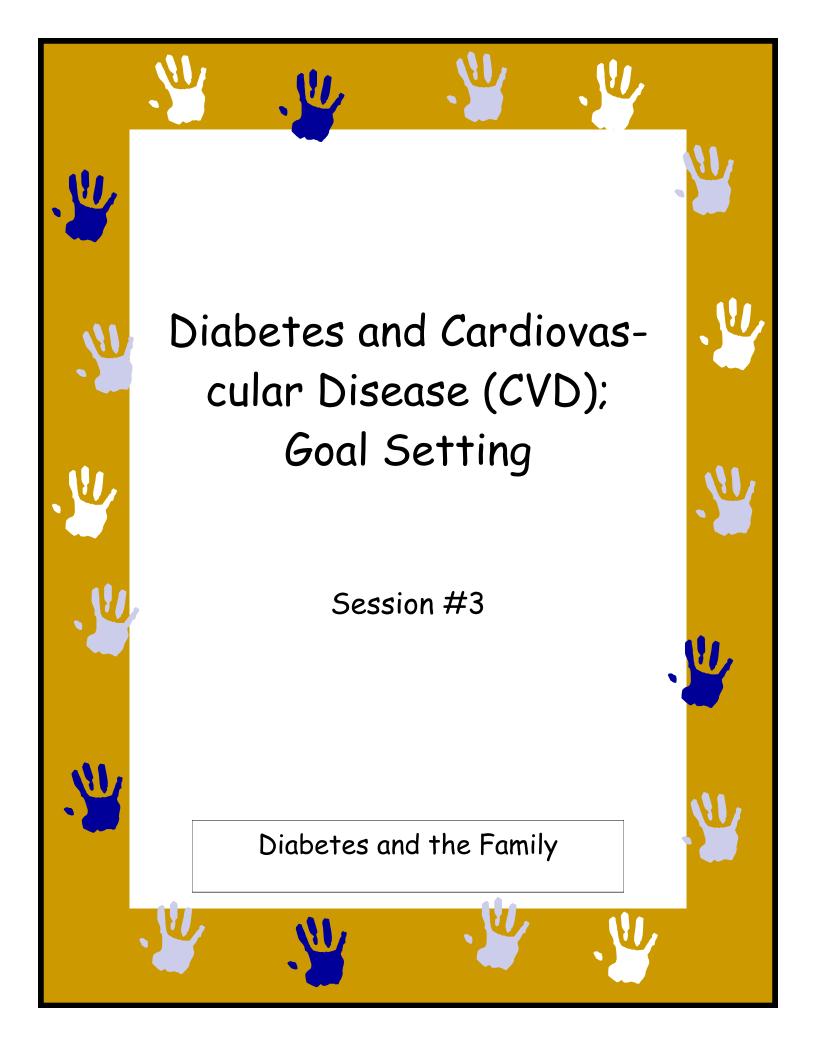


Wrap Up!

SESSION #2 Conclusion

Discussion Questions To Conclude Session #2: "Being Healthy"

- 1. What are 3 ways to make healthier food choices?
- 2. Describe 3 ways to eat healthily at gatherings with family or friends.
- 3. What are 3 ways for the family to be more physically active?





<u>REVIEW</u> Session #2: "Being Healthy"

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<u>How Can Physical Activity</u> <u>Keep Us Healthy?</u>



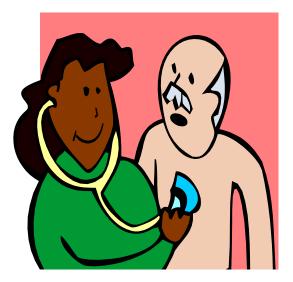


CHART #2



REVIEW...

<u>How Can We As A Family</u> <u>Be More Physically Active?</u>

- Make physical activity or exercise a family affair.
- Have a regular time for exercise (example: every other morning, every evening after dinner).
- Walk together.
- Walk to visit friends or family.
- Garden or do yard work together.
- Play basketball or baseball.
- Have everyone join in with the housework; sweeping, mopping floors, and vacuuming are also exercise!

<u>How Can We As A Family</u> <u>Be More Physically Active?</u>













CHART #3



REVIEW...

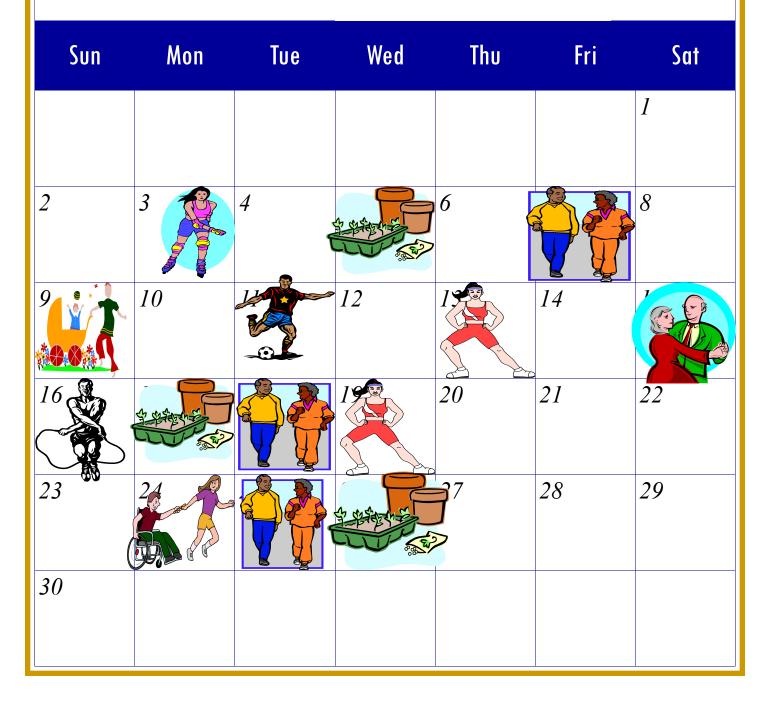
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- Vegetables and fruits.
- Whole grain foods like high-fiber cereals and breads, and corn or whole wheat tortillas.
- Low-fat and non-fat foods like skim, fat-free, or non-fat milk; non-fat yogurt; low-fat sour cream; and fat-free salad dressing or mayonnaise.

<u>How Can Healthy Foods Help</u> <u>Prevent And Control Diabetes?</u>

Eating Healthy Foods Can Help Control Body Weight. Healthy Foods Include...

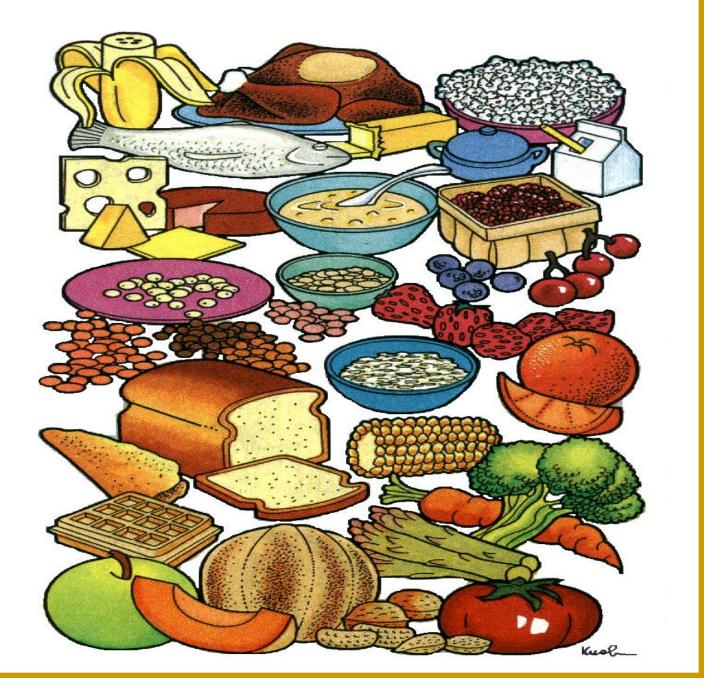


CHART #5



REVIEW...

What Foods Should We Limit?

- Regular sodas (it's better to choose diet sodas).
- Sweetened drinks (like Kool-Aid®, fruit punch, and sports drinks like Gatorade®) and aguas frescas like horchata, jamaica, or tamarindo because they are high in sugar.
- Fried foods or foods with added grease like fried chicken, french fries, tortilla chips, and potato chips—they are high in fat.
- Processed meats such as sausage, bologna, and bacon—they are high in fat.
- Gravy—it is high in fat.
- Butter, margarine, lard, or regular salad dressing—they are high in fat.
- Whole milk or 2% milk—they are high in fat.
- Alcohol.

What Foods Should We Limit?





<u>SESSION #3: "Diabetes and</u> <u>Cardiovascular Disease (CVD)"</u>

- Who is at risk for cardiovascular disease (CVD)?
 - Everyone!
 - Especially people with diabetes or with more than one risk factor for CVD.
- What are the symptoms for CVD?
 - An uncomfortable tightness, fullness, squeezing or pain in the center of the chest that lasts for more than a few minutes and may stay or return. Remember that symptoms are VERY different in women (nausea, vertigo, very severe toothache).
 - Pain that spreads from the shoulders, neck or arms.
 - Chest discomfort with drowsiness, fainting, sweating, nausea, or shortness of breath.
- What happens when you cannot control the illness?
 - Physical incapacity
 - Death

Cardiovascular disease is serious, and can be life threatening.



REMEMBER THAT WHEN YOU ARE TAKING CARE OF YOUR DIABETES, YOU ARE TAKING CARE OF YOUR HEART!



- CVD Risk Factors That CANNOT be Controlled -

<u>Age</u>

Heart attack or stroke (cardiovascular diseases) can present themselves at any age. However, one is more likely to develop these illnesses or have a heart attack at an older age.

Heredity (Family History)

If your brother, father or grandfather had a heart attack before they were 55 years old, or your sister, mother or grandmother had one before age 65, you too are at risk. If you have already had a heart attack, you are at great risk to have a second heart attack.

Ethnic Origen (Race)

African-Americans have more problems with high blood pressure than the white population and a higher risk for cardiovascular disease. Compared to the white population, Mexican-Americans, American Indians, and Native Hawaiians have a greater risk for heart disease. This is because, in part, of higher percentages of obesity and diabetes. - CVD Risk Factors That CANNOT be Controlled -



Heredity







Ethnic Origen



<u>Smoking - A CVD Risk Factor</u> <u>That CAN be Controlled</u>

Smoking can cause:

- Heart attack and stroke (cardiovascular diseases)
- Approximately 80 to 90 percent of heart attacks and strokes are related to smoking
- One year after a person quits smoking, their risk for heart attack or stroke is cut in half.

Stop smoking for the health and wellbeing of you and your family!

- The smoke from one cigarette puts more than 4,000 damaging substances in the air.
- You put your and your family's health at risk when you smoke.
- Smoking raises your risk of heart attack, emphysema, stroke and cancer.



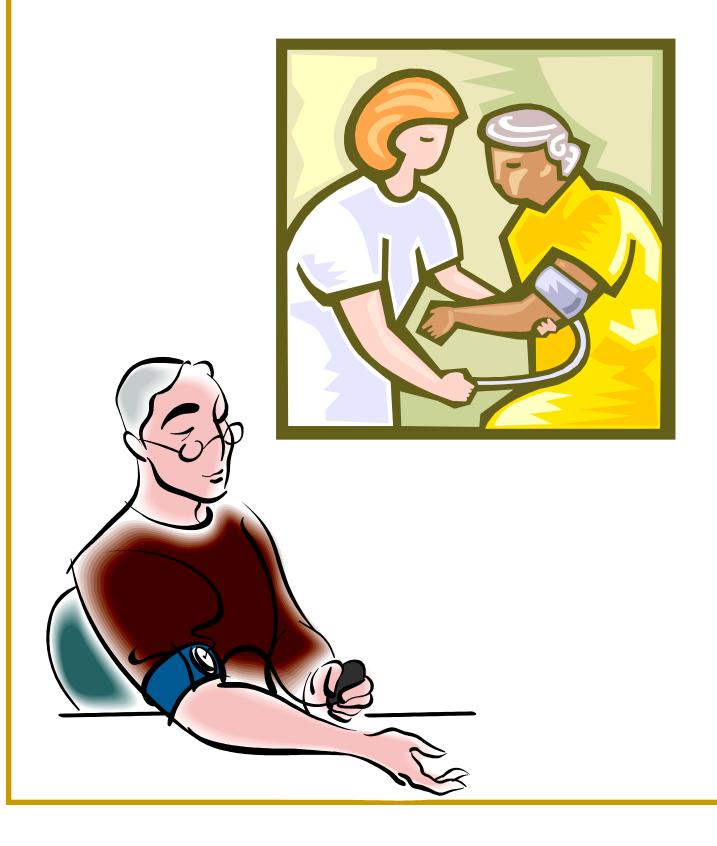


<u>Blood Pressure - A CVD Risk Factor</u> <u>That CAN be Controlled</u>

What is blood pressure?

- Blood pressure is the force that blood exerts against artery walls.
- Blood pressure is necessary to circulate blood around the whole body.
- (1) The blood pressure lesson has two numbers. Both numbers are important.
 - The first number (120) is the blood pressure when the heart beats.
 - The second number (80) is the pressure when the heart rests.
 - You write it like this: 120/80
- (2) Not keeping one's blood pressure at 120/80 can result in HIGH blood pressure. High blood pressure increases the risk of having a brain hemorrhage, heart attack, kidney problems and blindness.
- (3) The best way to know if you have high blood pressure is to have it measured once each year. If you do have high blood pressure, you have to measure it more often.

<u>Blood Pressure - A CVD Risk Factor</u> <u>That CAN be Controlled</u>





<u>Cholesterol - A CVD Risk Factor</u> <u>That CAN be Controlled</u>

What is cholesterol?

- Cholesterol circulates through the blood in different kinds of packets called lipoproteins (fat plus protein).
- Lipoproteins with low density, or LDL, carry cholesterol through blood vessels blocking them like sediment in a pipe. This is why LDL cholesterol is called "bad" cholesterol.
- Cholesterol also circulates in the blood with high density lipoproteins, or HDL. These help to remove the accumulated cholesterol in the arteries. This is why HDL cholesterol is called "good" cholesterol.

(1) Let's look at it like this:

The car LDL (bad cholesterol) leaves fat and cholesterol in the street (like in your blood vessels). The HDL man (good cholesterol) sweeps up the fat and cholesterol that the LDL left behind and throws it away. (In the body, the liver gets rid of it.)

(2) What do different levels mean?

Below 200: Great News!

200-239: Alert! This level needs attention. It's time to change what you eat, your activity and your weight.

240 or more: DANGER! You are at high risk of having your ateries blocked, which can result in a heart attack. Consult your doctor at once!

(3) How can you know if you have high cholesterol?

Cholesterol can be measured with a blood analysis, normally in the doctor's office or places where they measure cholesterol, like a health fair.





<u>Excess Weight and Obesity</u> <u>- CVD Risk Factors That</u> <u>CAN be Controlled</u>

 Being overweight or obese can increase your risk of cardiovascular disease.

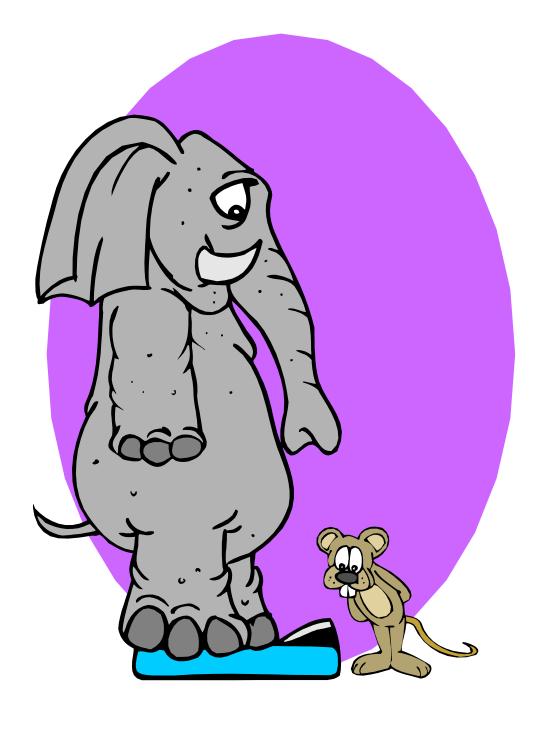
Example:

Mariano weighs 175 pounds and is 5 feet 6 inches tall (1.68 meters). Virginia, his wife, weighs 125 pounds and is 5 feet tall (1.52 meters). Let's look at the weight chart to see if Mariano and Virginia are within the healthy weight scale. Answer: Mariano is moderately overweight and Virginia has a healthy weight.

A woman's waist is large if it is more than 35 inches around. A man's waist is large if it is more than 40 inches around. A large waist can increase the risk of developing heart disease.

The key to losing weight is to be physically active and exercise at least 3-4 times a week for a period of at least 30 minutes a day.

 Another key to lose weight is to know what to eat and how much is one portion. <u>Excess Weight and Obesity</u> <u>- CVD Risk Factors That</u> <u>CAN be Controlled</u>





SESSION #3: "Goal Setting"

<u>How Can We Start Making Some Changes</u> <u>In Our Health Behaviors?</u>

- Start by talking.
- Discuss just 2 or 3 changes you would like to make.

* Would you like to make different food choices?

* Would you like to be more active?

- Then, be specific. Identify specific behaviors or activities that would help you make those changes.
- For example: If your family would like to be more active, what could you do?

* Could you walk every morning for 30 minutes?

- * Could you work in the garden together every other evening?
- Avoid being too general, by saying things like:

"I want to be more active every day."

<u>How Can We Start Making Some Changes</u> <u>In Our Health Behaviors?</u>





<u>How Do We Choose Goals</u> <u>That Will Work For Our Family?</u>

- Talk about several different health behaviors.
- Discuss the challenges of working on each new behavior.
- Ask yourself questions to test your chances of success, for example:

* Will everyone wake up 30 minutes earlier to walk?

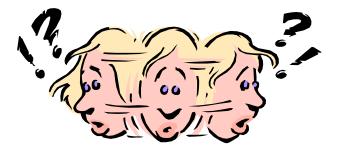
* Can everyone walk for 30 minutes?

• If your answers are "no," talk about behaviors that everyone can accomplish if they try.

* Example: You could start by walking 15 minutes every other morning.

• Once you have defined a behavior everyone believes they can do with effort and support, you have identified your first goal!

<u>How Do We Choose Goals</u> <u>That Will Work For Our Family?</u>











<u>How Can We Improve</u> <u>Our Chances For Success?</u>

- Start immediately. Don't keep saying you'll start tomorrow or next week.
- Make your new goals a priority.
- Create a family environment that will support your goals, for example:
 - * If you're going to walk in the morning, agree to go to bed a little earlier.
 - * If you are going to limit high-fat foods, agree to order grilled chicken at a fast food restaurant, or agree not to order french fries.
 - * If you are going to stop drinking soft drinks, stop buying soft drinks or high-sugared drinks even for guests.

Discussion

Have families discuss how cues in their own environment can support or challenge their attempts to change their behavior. For example, if they plan to walk does everyone have shoes that are comfortable for walking? Have families identify how they could make little changes in their homes to support their food choice and activity goals. Families should generate ideas that are specific to their households, such as putting their shoes by the door, or making fruit sacks visible by putting a fruit bowl on the counter, etc.

<u>How Can We Improve</u> <u>Our Chances For Success?</u>





How Can We Stay Motivated?

- Recognize your accomplishments, even if they are small ones.
- At the end of the day, review your progress:
 - * If you walked, give each other a hug or a pat on the back.
 - * If you ate grilled chicken instead of fried chicken, remind each other that you achieved success toward your goal.
 - * Mark on a calendar each day you were successful with a goal.
- In the week, work to have at least one successful day.
- If you are struggling, discuss possible reasons in a short family meeting.
- Identify problems and try to overcome the barrier.
- At the end of the week, review the marks on the calendar. Count how many days you actually accomplished your goals.
- Congratulate yourselves on accomplishing your first steps.

How Can We Stay Motivated?





Activity: Family Health Behavior Goals

- Each family should have a copy of the "Family Health Behavior Goals" handout.
- Read through each goal.
- Ask families to discuss and together select (check) at least 2 goals on which they will work.
- Have families discuss plans to work on their goal.
- For example, if they choose Goal #9: To have a weekly family meeting,

* Encourage families to be specific

* They should say what day and time like:

"Wednesday evening after dinner"

or "Sunday after church"

- If families select Goal #10 and write one of their own goals, help them focus:
 - * For example, goals like "to eat better" or "to lose weight" are too general.
 - * Encourage them to identify what they will do to eat better or to lose weight—what is the specific behavior they should have?
 - * They can then write a specific behavior goal, such as, "Eat more salads."
- Have families share their goals and describe their plans to achieve them.

Family Health Behavior Goals

Choose at least 2 goals to improve your family's health...

Goal	Yes	No
#1. We will create a list of family strengths. Each week we will add at least one more word or phrase that describes a positive quality of our family.		
#2. We will exercise together 3 times a week by walking dancingstretching other 15 min 30 min (fill in) min.		
#3. We will eat small food portions, limiting our serving sizes to the size of the palm of our hands, or a deck of cards.		
#4. We will eat more foods low in fat and limit foods high in fat.		
#5. We will drink only skim milk or 1% milk.		
#6. We will not drink regular soft drinks or high-sugared drinks like fruit punch, Kool-Aid®, Gatorade®, or <i>aguas</i> <i>frescas</i> like <i>horchata, tamarindo</i> , or <i>jamaica</i> .		
#7. We will use only fat-free salad dressing and mayonnaise.		
#8. We will compliment each other at least once a week by identifying a skill, strength, or behavior expressed by each family member.		
#9. We will make time at least once a week for a family meeting to talk and listen. We will discuss our good experi- ences in the week and our problems.		
#10. Another goal is to:		



Wrap Up!

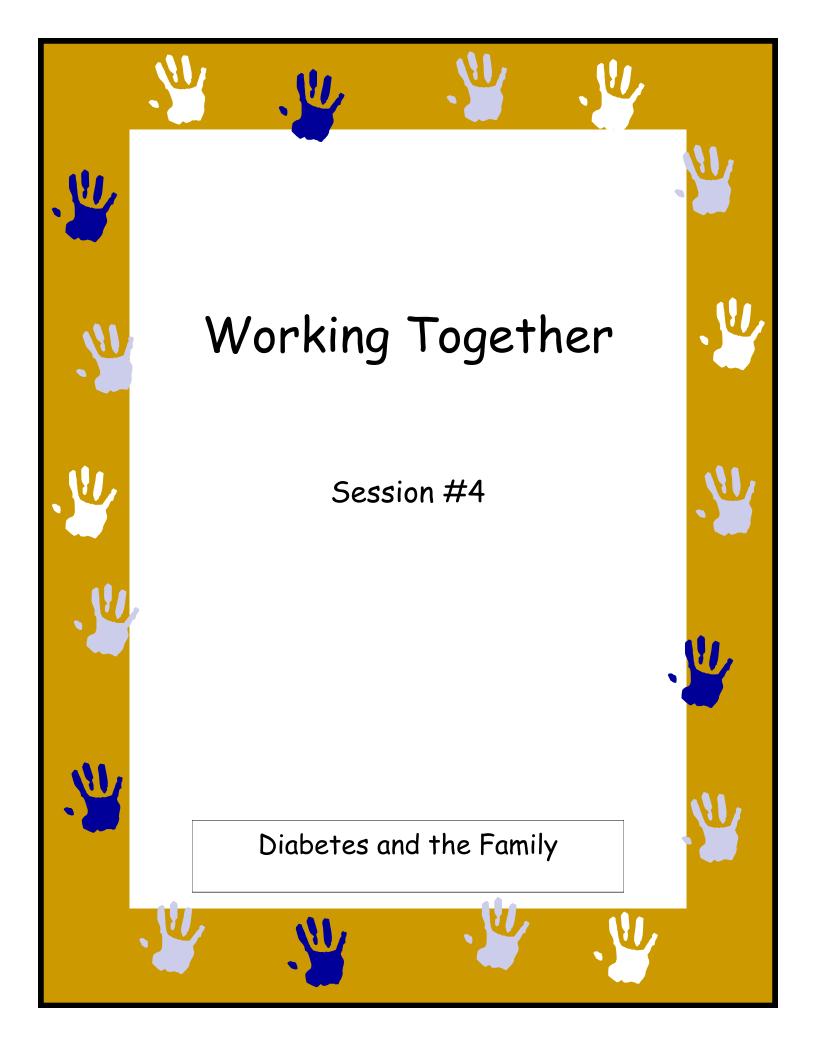
SESSION #3 Conclusion

<u>Discussion Questions To Conclude</u> <u>Session #3: Diabetes and CVD; Goal Setting</u>

1. Let's play the Cardiovascular Disease Risk Factor Game.

Please check the Appendix!

- 2. What are 2 (or more) health behavior goals you would like to work toward?
- 3. What are your plans for working toward your 2 goals?





<u>REVIEW</u>

<u>SESSION #3: "Diabetes and</u> <u>Cardiovascular Disease (CVD)"</u>

Ask the families about the information presented in the previous section. Show the following questions and pictures, and ask for responses. Fill in any missing information, or answer your questions. Use enough time to have a brief conversation about the information, but the new information and the preparation of the food should occupy most of the time.

- Who is at risk for cardiovascular disease?
 - Everyone!
 - Especially people with diabetes or with more tan one risk factor for CVD.
- What are the symptoms for CVD?
 - An uncomfortable tightness, squeezing or pain in the center of the chest that lasts for more tan a few minutes, it could be that this pain stops or returns. Remember that symptoms are VERY different in women (nausea, vertigo, severe pain in the teeth).
 - Pain that extends to the shoulders, neck or arms.
 - Discomfort in the chest with drowsiness, faintness, perspiration, nausea, or shortness of breath.
- What happens when you cannot control the illness?
 - Physical incapacity
 - Death

Cardiovascular disease is serious, and can be life threatening.



REMEMBER THAT WHEN YOU ARE TAKING CARE OF YOUR DIABETES, YOU ARE TAKING CARE OF YOUR HEART!



Chart #2

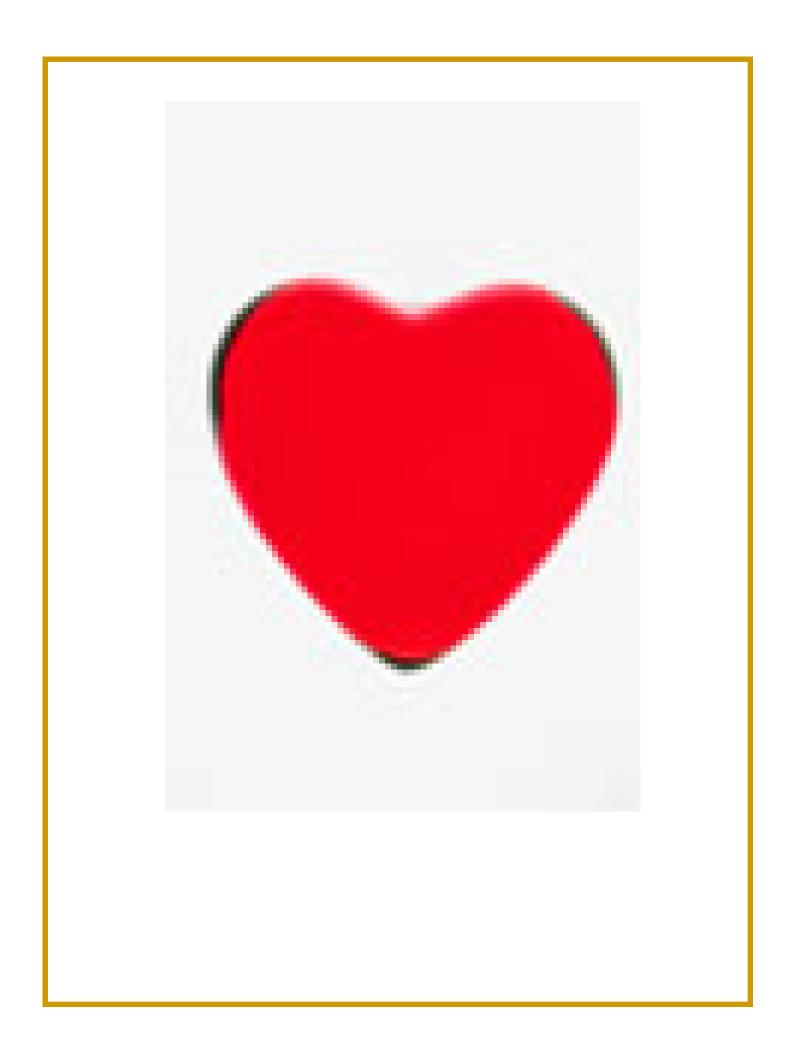
<u>REVIEW</u> <u>CVD Risk Factors...</u>

... That CANNOT be Controlled

- Age
- Heredity
- Ethic Origen

... That CAN be Controlled

- . Smoking
- Blood Pressure
- · Cholesterol
- Excess Weight and Obesity



<u>REVIEW</u> Session #3: "Goal Setting"



Ask families to find the "Family Health Behavior Goals" handout they received in Session #3.

Family Health Behavior Goals: What Goals Did You Choose?



The review in this Session is different than in the previous Sessions. You are encouraging family members to share their experience with working on their goals. If family members hesitate to talk, encourage discussion by asking families to just re-share their goals. After they have re-shared, you will be able to think of some specific questions to ask them about successes and challenges.

Family Health Behavior Goals

Choose at least 2 goals to improve your family's health...

Goal	Yes	No
#1. We will create a list of family strengths. Each week we will add at least one more word or phrase that describes a positive quality of our family.		
#2. We will exercise together 3 times a week by walking dancingstretching other 15 min 30 min (fill in) min.		
#3. We will eat small food portions, limiting our serving sizes to the size of the palm of our hands, or a deck of cards.		
#4. We will eat more foods low in fat and limit foods high in fat.		
#5. We will drink only skim milk or 1% milk.		
#6. We will not drink regular soft drinks or high-sugared drinks like fruit punch, Kool-Aid®, Gatorade®, or <i>aguas</i> <i>frescas</i> like <i>horchata, tamarindo</i> , or <i>jamaica</i> .		
#7. We will use only fat-free salad dressing and mayonnaise.		
#8. We will compliment each other at least once a week by identifying a skill, strength, or behavior expressed by each family member.		
#9. We will make time at least once a week for a family meeting to talk and listen. We will discuss our good experi- ences in the week and our problems.		
#10. Another goal is to:		

Chart #4



REVIEW...

<u>What Successes Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>

<u>What Successes Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>





Chart #5

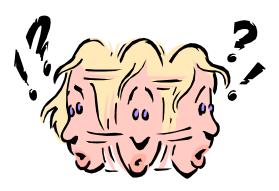


REVIEW...

<u>1. What Challenges Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>

2. How Did You Overcome These Challenges? <u>What Challenges Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>





How Did You Overcome These Challenges?



CHART #6





<u>Do You Think You Need To Modify Or</u> <u>Change Your Goals?</u>

If So, How Will You Modify Your Goals?

<u>Do You Think You Need To Modify Or</u> <u>Change Your Goals?</u>









SESSION #4: "Working Together"

<u>How Can A Diagnosis Of Diabetes</u> <u>Affect The Whole Family?</u>

- Everyone in the family may feel unhappy.
- Family members may be concerned that they do not know how to take care of someone with diabetes.
- Family members may be unsure how to react if there is a problem.
- The person with diabetes may feel that they will become a burden to their family.

<u>How Can A Diagnosis Of Diabetes</u> <u>Affect The Whole Family?</u>









<u>How Can A Family Stay</u> <u>Close And Work Together?</u>

- Make time to be together.
- Listen and talk together.
- Work together to solve problems.
- Support each other through words and actions.

Discussion

Challenge families to try problem solving. For example, someone with diabetes may forget or avoid taking their blood sugar level. How could a family member help to solve this problem and encourage better self-monitoring? Can the families think of other examples of difficulties that someone with diabetes may have? How can the families help? <u>How Can A Family Stay</u> <u>Close And Work Together?</u>





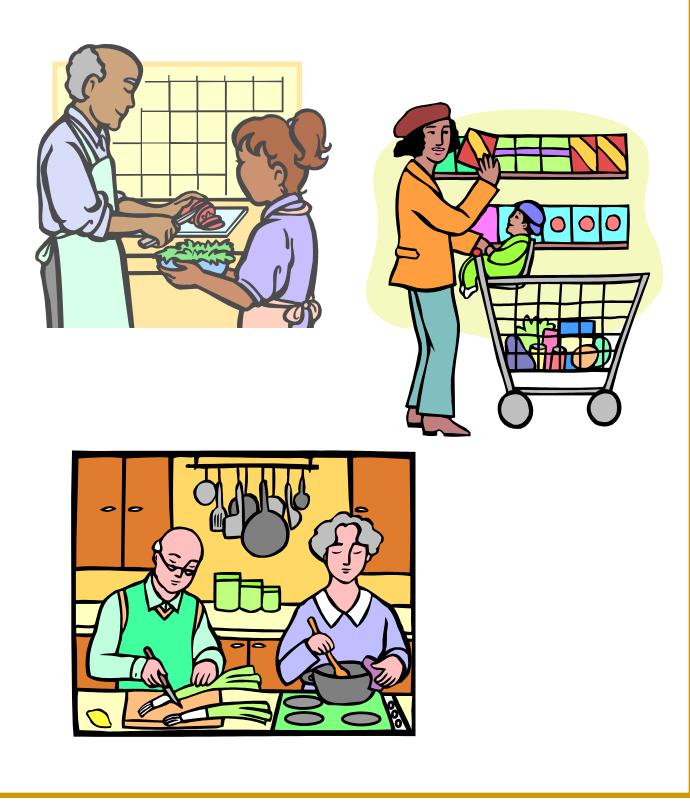




<u>How Can Families Work Together</u> <u>To Make Healthy Food Choices At Home?</u>

- They can plan meals together.
- They can go grocery shopping together.
- They can agree to buy only healthy foods.
- They can prepare a healthy meal together and eat together at least once a week.
- When trying new foods, they can decide if they would like to eat this food more often.

<u>How Can Families Work Together</u> <u>To Make Healthy Food Choices At Home?</u>





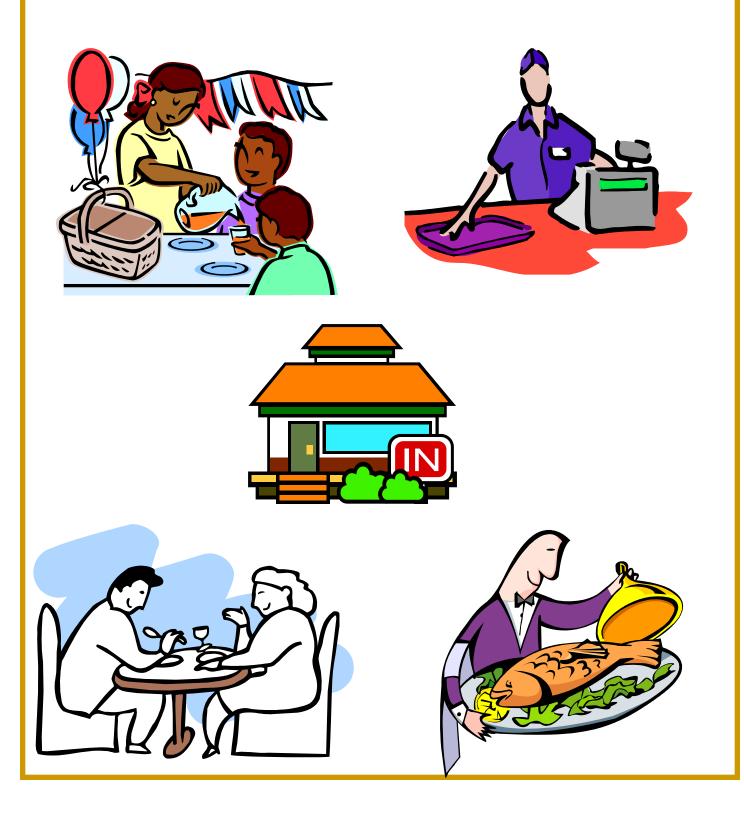
<u>How Can Families Work Together To Make</u> <u>Healthy Food Choices Away From Home?</u>

- Restaurant foods and fast foods are often high in fat.
- Restaurant foods and fast food servings sizes are 2-3 times larger than anyone needs.
- Encourage each other to choose grilled or broiled meats.
- Take the skin off the chicken.
- Ask for foods without sour cream, guacamole, or cheese—these foods are high in fat.
- Choose smaller portions, for example, single hamburgers. Don't choose "biggie" sizes.
- Share a small order of french fries.

Discussion

Start a discussion by asking families where they eat most often when they eat out. Ask if they can think of healthy choices available at these places.

<u>How Can Families Work Together To Make</u> <u>Healthy Food Choices Away From Home?</u>





<u>What Family Activities</u> <u>Can Strengthen Family Unity?</u>

- Eat together and talk. Do not eat in front of the TV—it reduces chances to talk during dinner.
- Let everyone finish his or her statement. Don't interrupt each other.
- Encourage each other to talk when depressed or sad. Do not ignore each other's moods.
- Make time to do things together. Go to church or go for walks together.
- Thank or compliment each other.

<u>What Family Activities</u> <u>Can Strengthen Family Unity?</u>











<u>What Can Family Members Do To</u> <u>Support The Person With Diabetes?</u>

- Make recommended dietary changes easy. Everyone can start eating healthier.
- Make physical activity easy. Everyone can start being active.
- Talk about medications and doctor visits. How often does the person with diabetes need to take medication? How often does he or she need to go to the doctor's office?
- Discuss if a family member should accompany the person with diabetes to doctor appointments.
- If a family member does not go, ask about the outcome of the visit and <u>listen</u> to the answer.
- If there are more questions or doubts, ask the doctor or nurse at the clinic, or ask a promotora to find out the answers.



Be sure to talk about the difference between "supporting" and "nagging." Would the person with diabetes like to be reminded about checking blood glucose, taking medication, or meeting with a doctor? Families should be encouraged to work out an agreement. This agreement will help avoid miscommunication or arguments about how much a family should remind or help a family member with diabetes.

<u>What Can Family Members Do To</u> <u>Support The Person With Diabetes?</u>









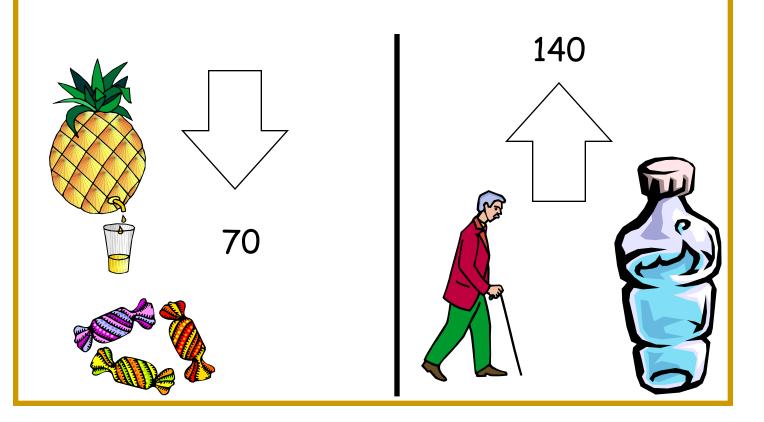
<u>How Can A Family Support A Family</u> <u>Member Who Shows Symptoms Of</u> <u>Uncontrolled Diabetes?</u>

- These symptoms are the same as those described in Session #1, for undetected or undiagnosed diabetes.
- Ask if they have checked their blood sugar recently.
- If not, ask if they would like help checking their blood sugar.
- Note: Generally, the American Diabetes Association recommends blood sugar ranges from 70-130 before meals, less than 180 after a meal, and 110-150 before bedtime. The recommendations that follow are a general guideline to check one's blood sugar, and what to do if it seems too high or too low.
- If their blood sugar is greater than 140, suggest they drink some water and walk around.
- If their blood sugar is lower than 70, suggest that they eat something sweet, such as a piece of hard candy, or drink some fruit juice.
- After a short time (1-3 minutes), recheck the person's blood sugar level. If the level is not changing, call or visit your health care provider.
- Family members should react calmly and not get upset or angry with the diabetic family member over low or high sugar levels.



Ask families if they remember some of the symptoms from Session #1. If they cannot, encourage them to look back at the pictures in Session #1. Try having a discussion about how symptoms differ depending on high or low blood sugar. You may wish to make copies of the handout on high and low blood sugar in the General Activities section of the Appendix. <u>How Can A Family Support A Family</u> <u>Member Who Shows Symptoms Of</u> <u>Uncontrolled Diabetes?</u>





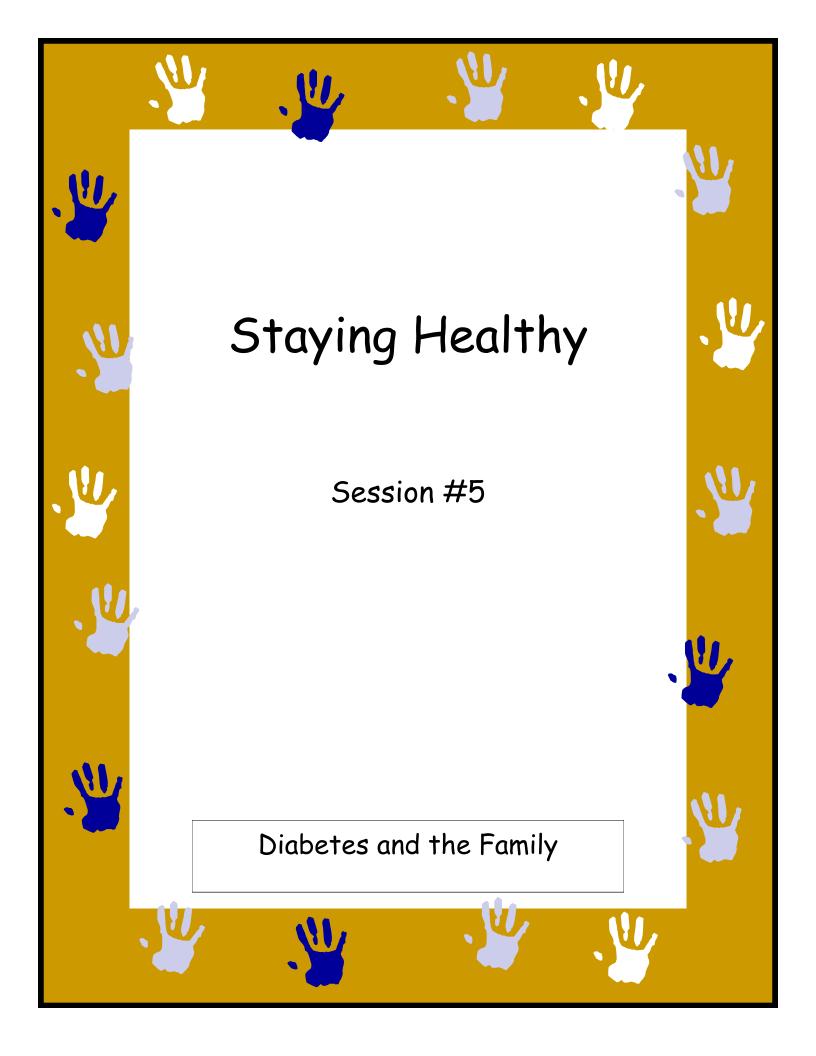


Wrap Up!

SESSION #4 Conclusion

Discussion Questions To Conclude Session #4: "Working Together"

- 1. What is 1 way to strengthen family unity?
- 2. What are 2 ways to support a family member with diabetes?





<u>REVIEW</u> Session #4: "Working Together"

<u>What Family Activities</u> <u>Can Strengthen Family Unity?</u>

- Eat together and talk. Don't eat in front of the TV—it reduces chances to talk during meals.
- Let everyone finish his or her statement. Don't interrupt.
- Encourage each other to talk when sad or depressed. Don't ignore each other's moods.
- Make time to do things together—for example, go to church or walk together.
- Thank or compliment each other.

<u>What Family Activities</u> <u>Can Strengthen Family Unity?</u>



CHART #2



REVIEW...

<u>What Can Family Members Do To</u> <u>Support The Person With Diabetes?</u>

- Make recommended dietary changes easy. Everyone can start eating healthier.
- Make being more physically active easy. Everyone can start being active.
- Talk about medications and doctor visits. How often does the person with diabetes need to take medication? How often does he or she need to go to the doctor's office?
- Discuss if another family member should also go to the doctor's office.
- If someone does not go, ask about the outcome of the visit and <u>listen</u> to the answer.
- If there are more questions or concerns, ask the doctor or nurse at the clinic, or ask a promotora to find out the answers for you.



Remind participants about the pamphlets on hypoglycemia and hyperglycemia.

<u>What Can Family Members Do To</u> <u>Support The Person With Diabetes?</u>









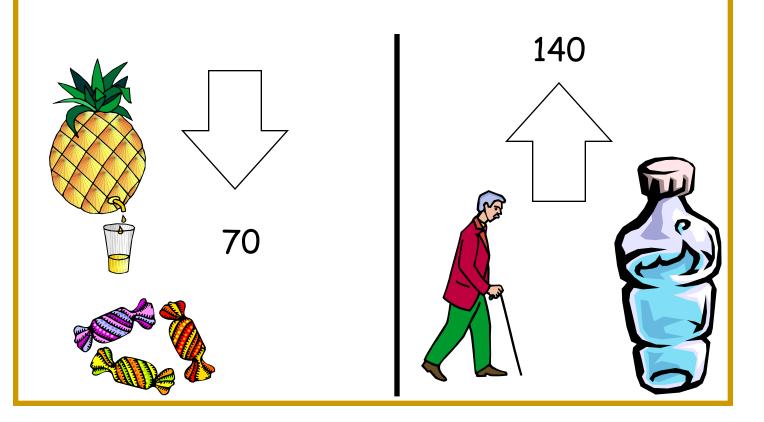
REVIEW....

How Can a Family Support A Family Member Who Shows Symptoms Of Uncontrolled Diabetes?

- These symptoms are the same as those described in Session #1, for undetected or undiagnosed diabetes.
- Ask if they have checked their blood sugar recently.
- If not, ask if they would like help checking their blood sugar.
- Note: Generally, the American Diabetes Association recommends blood sugar ranges from 70-130 before meals, less than 180 after meals, and 110-150 before bedtime. The recommendations that follow are a general guideline to check one's blood sugar, and what to do if it seems too high or too low.
- If their blood sugar is greater than 140, suggest they drink some water and walk around.
- If their blood sugar is lower than 70, suggest that they eat something sweet, such as a piece of hard candy, or drink some fruit juice.
- After a short time (1-3 minutes), recheck the person's blood sugar level. If the level is not changing, call or visit your health care provider.
- Family members should react calmly and not get upset or angry with the diabetic family member over low or high sugar levels.

<u>How Can A Family Support A Family</u> <u>Member Who Shows Symptoms Of</u> <u>Uncontrolled Diabetes?</u>







REVIEW...



Ask families to find the "Family Health Behavior Goals" handout they received in Session #3.

Family Health Behavior Goals:

Which Goals Did You Select?

Family Health Behavior Goals

Choose at least 2 goals to improve your family's health...

Goal	Yes	No
#1. We will create a list of family strengths. Each week we will add at least one more word or phrase that describes a positive quality of our family.		
#2. We will exercise together 3 times a week by walking dancingstretching other 15 min 30 min (fill in) min.		
#3. We will eat small food portions, limiting our serving sizes to the size of the palm of our hands, or a deck of cards.		
#4. We will eat more foods low in fat and limit foods high in fat.		
#5. We will drink only skim milk or 1% milk.		
#6. We will not drink regular soft drinks or high-sugared drinks like fruit punch, Kool-Aid®, Gatorade®, or <i>aguas</i> <i>frescas</i> like <i>horchata, tamarindo</i> , or <i>jamaica</i> .		
#7. We will use only fat-free salad dressing and mayonnaise.		
#8. We will compliment each other at least once a week by identifying a skill, strength, or behavior expressed by each family member.		
#9. We will make time at least once a week for a family meeting to talk and listen. We will discuss our good experi- ences in the week and our problems.		
#10. Another goal is to:		

CHART #5



REVIEW...

<u>What Successes Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>

Discussion

Ask families if they are seeing any early results with their goals. Are their muscles sore? Sore muscles are a sign that muscles are being used and are becoming stronger. Are they tired after walking? Being tired in the beginning is normal. They will soon build their endurance and be able to complete the walk with less effort. <u>What Successes Did You Experience</u> <u>Over The Week While Working</u> <u>Toward Your Health Behavior Goals?</u>







SESSION #5: "Staying Healthy"

<u>How Can Diabetes Make You</u> <u>Feel Emotionally?</u>

- People react differently to a diagnosis of diabetes.
- Some people may be angry and think "Why me?" or "It's not fair!"
- Some people may get sad about having to make lifestyle changes.
- Some people may think about the complications and become scared or depressed.
- These reactions are normal.
- Family members should talk about their feelings.
- You need to talk about your feelings with a family member, a friend, a promotora or community health worker, or your health services provider.

Discussion

Ask the family members with diabetes about how they felt when they learned they had diabetes. Do they still feel the same? Has anything changed for them? Consider asking families to share how they felt when they first learned that someone in their family had diabetes.

<u>How Can Diabetes Make You</u> <u>Feel Emotionally?</u>









What is Depression?

Though depression is common among people of all ages and ethnic groups, there are certain groups that are more affected than others:

- Depression is two times more common in women than in men.
- Hispanics in the United States have higher percentages of depression than non-Hispanic whites.
- According to population studies in the United States, depression occurs most frequently in adults between 25 and 44 years old.

Depression is a mood problem that frequently coexists with other emotional/ physical problems, like anxiety and diabetes, respectively. The suffering that results from severe depression not only affects the individual, but also their friends and family.

Depression is defined as an emotional state marked by a feeling of great sadness, feelings that one isn't worth anything, guilt and anxiety. Almost all adults will experience these emotions with the loss of a loved one or other tragic events.

Severe depression differs from these normal negative emotions in duration or intensity. Severe depression does not consist of a feeling of passing sadness, nor a sign of personal weakness. People that suffer from severe depression need help to get better.

Though the symptoms may last weeks, months or years without treatment, people with depression can recover with appropriate treatment.

Sources:

- U.S. Department of Health and Human Services. *Mental Health: A Report of the Surgeon General. Rockville.* MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center of Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999. PP. 244-245.
- 2. Compañeros en la Salud.

What is Depression?











What are the Symptoms of Depression?

PHYSICAL		
Changes in sleep habits	Having problems sleeping, waking up during the night, wanting to sleep more often than normal, wanting to sleep during the day	
Changes in eating habits	Reduced appetite and weight loss, or increased appe- tite and weight gain	
Loss of energy, fatigue	Feeling tired all the time	
Feeling worried	Feeling anxious all the time and not being able to calm down	
Lowered Libido	Loss of interest in sex or intimacy	
Persistent physical symptoms	Including headaches, chronic pains, constipation or other digestive problems that don't' respond to treat- ment	
Frequent accidents	Unintentional injuries, bruises	
PSYCHOLOGICAL		
Loss of interest in everyday activities	Loss of interest in doing things one used to enjoy	
Feeling depressed or sad	Persistent sadness, anxiety, irritability, or states of feeling "empty"	
Pessimism, desperation	One feels that nothing is good.	
Isolation or withdrawal		
Guilt, feeling useless	Feeling that one never does anything well; inappropriate guilt.	
Morning sadness	Feeling worse in the morning than the rest of the day	
Greater anger	Frequent arguments or loss of temper	
Loss of interest in personal attention and personal appearance		
THOUGHT		
Less concentration and less ability to pay at- tention	Unable to watch TV or read because other thoughts and feelings interrupt	
Confusion, bad memory	Less capacity to remember common things.	
Slow thought process	Difficulty making decisions	
Suicidal thoughts	Wanting to die; thinking of ways to harm oneself	

Sources:

(1) Lozano-Vranich B, Petit J. 2003. <u>The Seven Beliefs – A Step-By-Step Guide to Help Latinas Recognize and Overcome Depression</u>. New York, NY: Harper Collins Publishers. P. 29.

(2) *Campesinos sin Fronteras*. CDMP Campesinos Diabetes Management Program. Somerton, Arizona. (Materials adapted from: Stanford Patient Education Center.)

(3) Stimmel, GL. 2000. Mood Disorders. In: Herfindal ET, Gourley DR (eds). <u>Clinical Pharmacy and Therapeutics</u>, 7th <u>Edition</u>. Baltimore, MD: Williams & Wilkins, 1203-1216.

(4) American Diabetes Association. Disponible en <u>www.diabetes.org/type-2-diabetes/depression.jsp</u>.

What Are Some Signs Of Depression?



Fatigue



Sadness



Unable to sleep



Confused or distracted



HISPANICS TEND TO EXPRESS THEIR EMOTIONS PHYSICALLY: EMOTIONS AFFECT THEY WAY THAT HISPANICS FEEL PHYSICALLY.

Physical manifestations are not imaginary, but real. Physical manifestations are known as somatization.

Depression can be expressed as...

... *a heaviness*, weight on one's shoulders, tension in the chest, or the inability to take deep breaths

... pain in one's bones, or a physical pain that hurts even in the soul

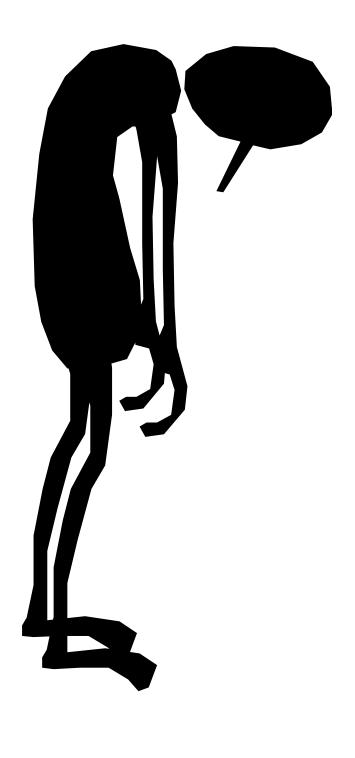
... *nerves or fatigue*, which refers to a general vulnerability in life towards stressful events, or a specific reaction to an emotionally distressing life experience. Physical symptoms include headache, stomachache, trembling, trouble sleeping, inability to function, and tearfulness.

Source:

(1) Lozano-Vranich B, Petit J. 2003. The <u>Seven Beliefs - A Step-By-Step Guide to Help Latinas Recognize</u> <u>and Overcome Depression.</u> New York, NY: Harper Collins Publishers. Pp. 35-36.

Discuss

Ask the participants: Do you talk about depression in your family? Which words do you use? After talking about somatization, indicate to family members that it is important to explain to the doctor that nerves or fatigue could refer to depression in your medical culture. HISPANICS TEND TO EXPRESS THEIR EMOTIONS PHYSICALLY: EMOTIONS AFFECT THE WAY THAT HISPANICS FEEL PHYSICALLY.





Some Causes of Depression

- •Genetic factors
 - ... Susceptibility to depression can be hereditary
- Psychological factors
 - ... Low self-esteem or little love for one's self
 - ... Pessimism
 - ... Difficulty dealing with stress
 - ... Inability to manage one's own problems
- Environmental factors
 - ... Physical illness, severe or chronic
 - ... Abnormal functioning hormones
 - ... A significant loss (job, loved one, etc.)
 - ... Financial problems
- NOTE: In general, depression is caused by a combination of all of these factors. To prevent or alleviate depression, it is important to deal with multiple causes.

Source: Campesinos sin Fronteras with materials edited by Deena E. Staab, Ph.D.; Translation by Rebecca Calderon. Information compiled by D/ART Public Inquiries; National Institute of Mental Health.

Can We Prevent Depression?

- Controlling one's diabetes can help prevent depression.
- Reducing tension can help or alleviate feelings of depression and help to control levels of glucose in the blood.

Discuss

Diabetes is not the only cause of depression, but it is a contributing

factor. It is important to remind participants that there is no reason

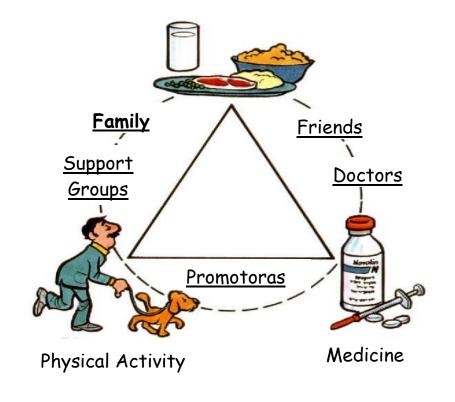
to devalue people with depression. It is better to help them.

Some Causes of Depression



Genetic Factors, Psychological Factors, and Environmental Factors

How Can We Prevent Depression?





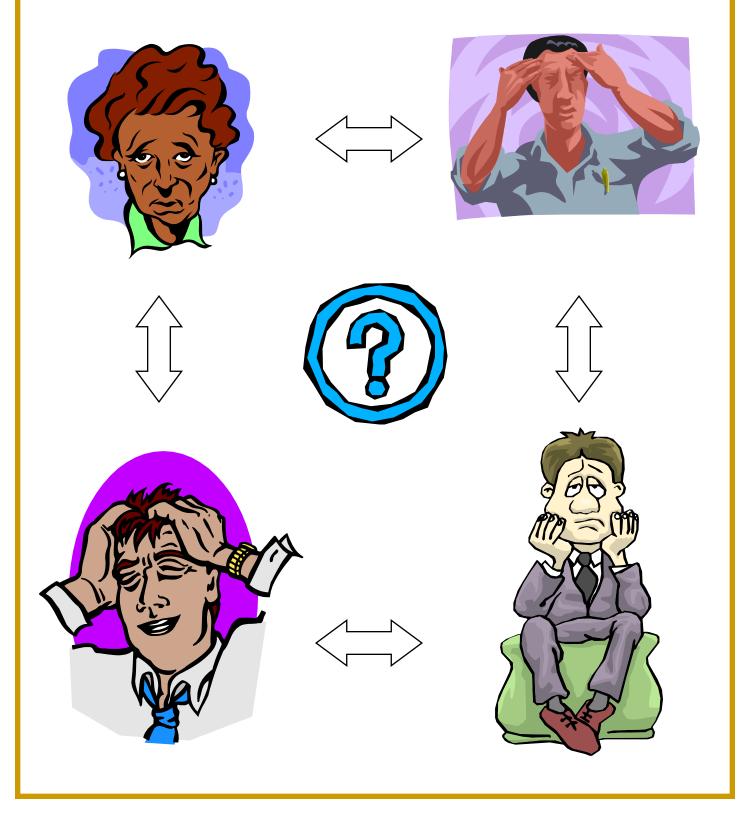
<u>What Is The Connection Between</u> <u>Depression, Stress, And Diabetes?</u>

- People who feel constantly stressed or feel as though they have too much stress can become depressed.
- Depressed or stressed, people may not take good care of themselves. They may not exercise or eat healthily. They may drink alcohol. They might not check their blood glucose or take their medication.
- For many people, hormones released during times of stress can cause blood sugar levels to increase.
- Reducing stress can help to ease feelings of depression and help control blood glucose levels.
- In a family with diabetes, the family member with diabetes as well as other family members may feel stressed and depressed.



People with diabetes are more likely to have clinical depression than people who do not have diabetes. When working with people with diabetes, it is important for you, the promotora, to be aware of the signs of depression.
If you suspect someone is suffering from depression, you should not try to handle the problem alone, but offer gentle support, and refer him or her for professional help, if possible.

<u>What Is The Connection Between</u> <u>Depression, Stress, And Diabetes?</u>





How Can Families Cope With Stress?

- Learn to relax.
- Do breathing exercises at least once a day. Sit or lie down and uncross your legs and arms. Take a deep breath. Slowly push out as much air as you can, while relaxing your body.
- Repeat this breathing and relaxing exercise for 5 to 15 minutes at a time.
- Replace troubling thoughts with good thoughts. When you sense a troubling thought, replace the thought with a happy memory, a poem, an expression, or a prayer.
- You can practice these relaxation techniques as a family or individually.



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Try using the activities found in the Appendix called "Managing Stress" and "Having Fun."

How Can Families Cope With Stress?











<u>How Can Families Cope With</u> <u>Mild Depression?</u>

- Talking about feelings can help reduce mild depression in some people.
- Family members can support each other by taking time to listen. You might consider setting some time aside each week to share happy and troubling feelings.
- Add positive activities in your life. For example,

* Walking or gardening as a family can lift everyone's spirits.

- * Volunteering as a family or as individuals at your church or local school can make you feel good.
- * Visiting or calling a friend just to say "hi" can encourage you to think positively and to focus on brightening someone's day.
- Family members can accompany the patient to the doctor to demonstrate their support.

<u>How Can Families Cope With</u> <u>Mild Depression?</u>











What Happens If Depression Continues?

- Even family members who don't have diabetes may get depressed.
- Any family member who continues to show signs of depression, even after talking with other family members, may be severely depressed.
- Anyone who shows signs of depression for more than 2 weeks should consult a physician.
- Help a severely depressed family member make an appointment.
- A severely depressed person may feel embarrassed and say that "Nothing is wrong" or "I'm just sad. I'll get over it."
- Severe depression may require medication.

Give families enough time to ask questions. They may not be familiar with this topic, or have specific concerns. For example, the difference between mild or severe depression may not be clear to them.

Discussion

QSA

Ask families if they have any experiences to share that could be helpful to others in dealing with depression.

What Happens If Depression Continues?







The information topic switches here to re-focus on goals and planning for the future. You might want to give everyone a break, play a game, or simply say "In this last Session, we want to discuss how you can keep up the good work and stay healthy."

How Can We Keep Working On Our Goal?

- Talk about your goals and early results.
- Keep everyone involved.
- Talk about what you like about working on your goals—such as having more energy, or spending more time together.
- Talk about what you don't like about your goals, or what is difficult. For example, not being able to eat your favorite foods, or getting up early to walk.

How Can We Keep Working On Our Goal?







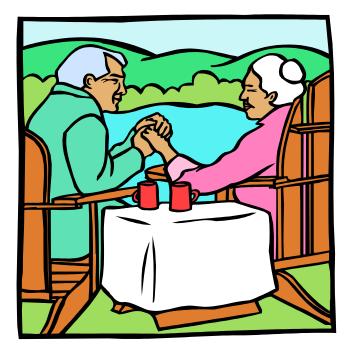


How Can We Stay Motivated?

- Decide on a reward for your family when you reach and continue your goals for a month.
- Select a reward that reinforces family unity, such as going bowling.
- Try to avoid setting food rewards, such as going out to dinner, unless you have found a restaurant that offers healthy choices.
- Decide on another reward when you have continued to maintain your goals for another month.

How Can We Stay Motivated?







Session #5

<u>After Having Some Success,</u> <u>How Can We Select Some New Goals?</u>

- Refer back to your "Family Health Behavior Goals" handout.
- As a family, read over the goals you did not pick.
- Can everyone agree on another goal?
- Talk about the specific steps to reach the new goal.
- Try not to speak too generally.
- Remember that if you select, for example, Goal #4: Eat more foods low in fat and limit foods high in fat—that you should ask yourselves, "What will we actually do? Can we agree to eat a vegetable with dinner every night? Or a piece of fruit every morning for breakfast?"



Give each family 5 minutes to discuss if they are ready for another goal. If so, what would they choose and how will they work toward that goal? Ask each family to share their decision.

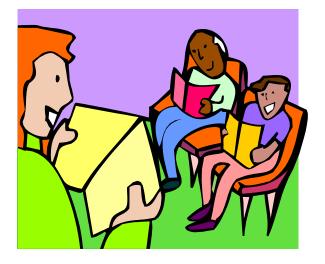


Give each family 10 minutes to plan how they will keep working on several goals. Could they meet once a week to review progress? Could one person in the family agree to be a health promoter by scheduling family walks or planning healthy meals? Ask each family to share their plan for continuing to work on their goal.

<u>After Having Some Success</u>, <u>How Can We Select Some New Goals?</u>







DIABETES AND THE FAMILY

Wrap Up!

SESSION #5 Conclusion

Discussion Questions To Conclude Session #5: "Staying Healthy"

- 1. What are 3 signs of depression?
- 2. How can you help someone who shows signs of depression?
- 3. How will your family continue to work toward your goals?
- 4. How will your family add new Family Health Behavior Goals?