

***Living a Balanced Life with Diabetes: A Toolkit  
Addressing Psychosocial Issues for American  
Indian and Alaska Native Peoples***

*The American Indian/Alaska Native Workgroup of the  
National Diabetes Education Program*

***Dr. Gary Ferguson  
Alaska Native Tribal Health Consortium***



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# A Changing Picture...



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# Outline

- Discuss association between diabetes and depression
- Describe goals of the National Diabetes Education Program's (NDEP) American Indian/Alaska Native (AIAN) Workgroup
- Discuss process of developing a psychosocial toolkit to reach American Indian/Alaska Native peoples
- Review components of toolkit
- Highlight access to the toolkit
- Highlight additional resources at Indian Health Services



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# Background

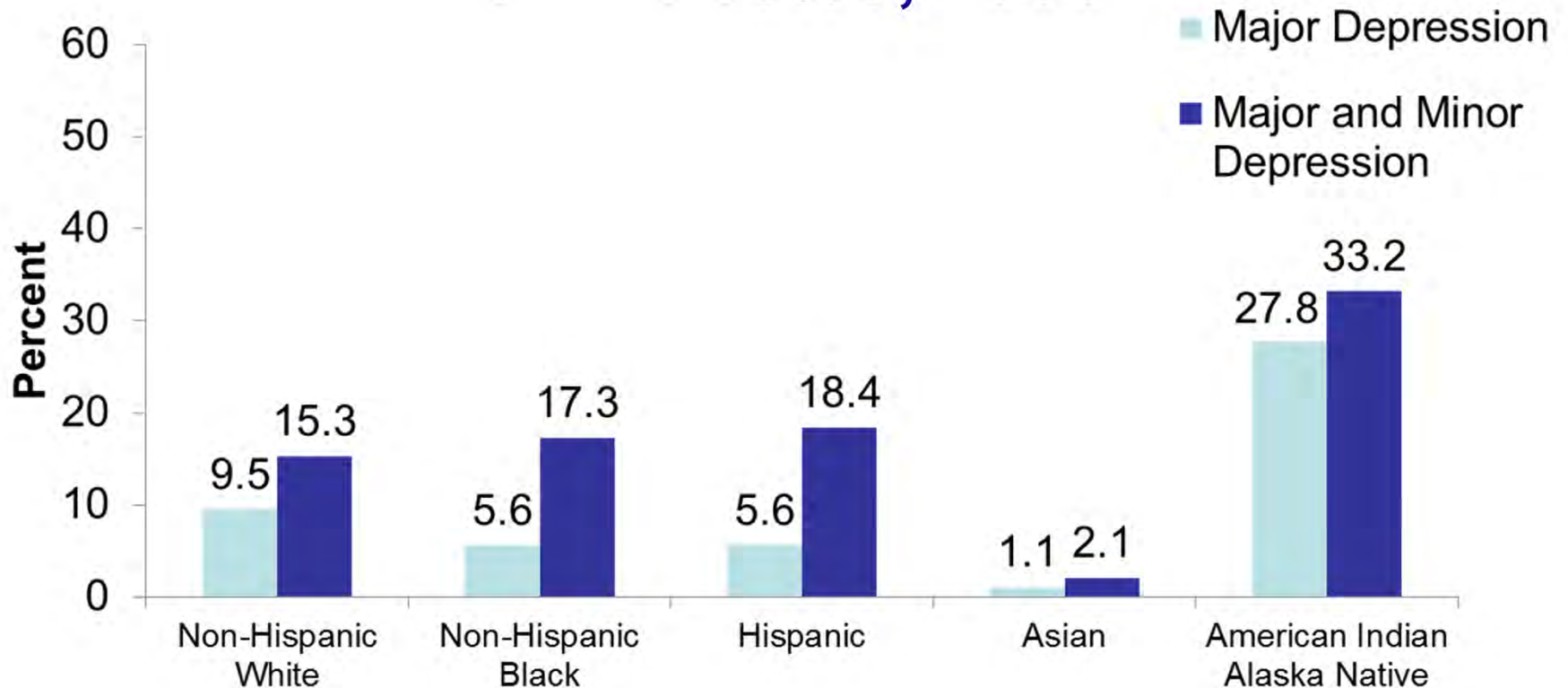
- People with diabetes are twice as likely as people without diabetes to be depressed
- The co-occurrence of diabetes and depression enhances negative outcomes associated with diabetes
- American Indian and Alaska Native People with diabetes are at high risk for depression



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# Prevalence of Depression Among Adults with Diabetes, 2006



Li et al, Diabetes Care 2007



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# Concerns about Depression in Diabetes

- Have difficulty following medical treatment
- Have poor physical and mental functioning
- May isolate self from others
- Adopt unhealthy behaviors
  - Increased risk of being sedentary, with little physical activity
  - Having a poor diet



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# Depression in Diabetes

- Untreated depression in diabetes can result in
  - Hyperglycemia (high blood glucose)
  - Poor metabolic control
  - Decreased quality of life
  - Increased health care usage and costs
  - Increased risk of mortality



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# Untreated Depression and Complications

- Untreated depression places people with diabetes at risk for complications that could be avoided. These complications include—
  - Heart disease
  - Blindness
  - Amputations
  - Erectile Dysfunction
  - Stroke
  - Kidney disease



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# Other Concerns

- Denial, anger, and grief are common
- Yet, psychosocial issues are often overlooked in clinical settings



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# Need for Resources

- Health care providers need resources to address depression
- Creating materials that raise awareness of depression may increase the opportunities for early treatment



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# NDEP American Indian Alaska Native Workgroup

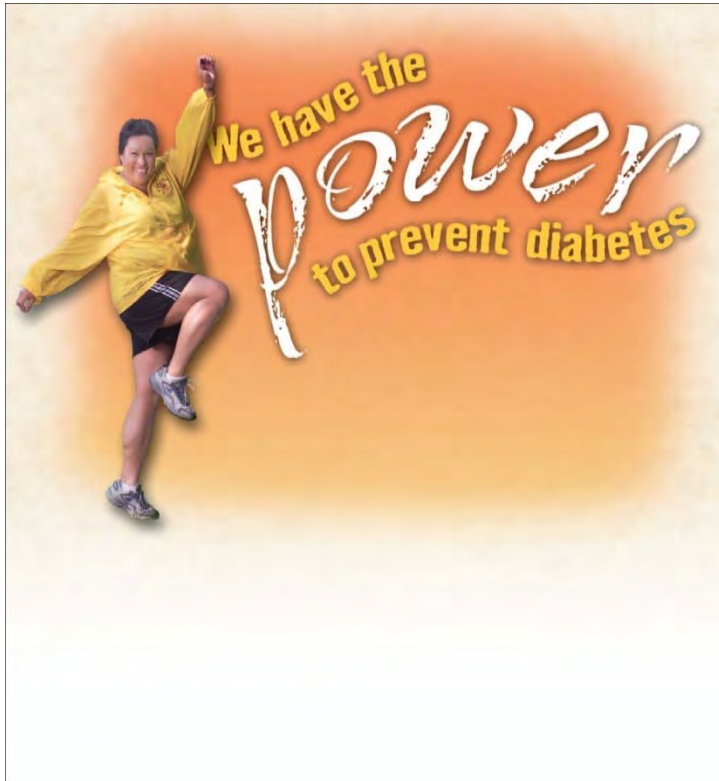
- The American Indian/Alaska Native Workgroup of NDEP
  - chaired by Dr. Charlene Avery, Indian Health Service
- Workgroup identified depression and diabetes in Indian Country as priority areas to address.



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# Existing Products from NDEP AIAN Workgroup



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# Living a Balanced Life with Diabetes: A Toolkit

Purpose:

- Raise awareness
- Provide culturally-appropriate resources



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# Process to Develop Toolkit

- Convened a Psychosocial Subcommittee
- Conducted extensive review of available materials
- Received input from health care providers in various venues



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# Role of NDEP AIAN Workgroup

- Provided input and feedback on toolkit components
- Helped with pre-testing materials
- Provided suggestions for promoting toolkit



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# Living a Balanced Life with Diabetes: Toolkit Components



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# Toolkit Components

- Indian Health Service Diabetes Best Practice Depression Care
- *Using Our Wit and Wisdom* (book and audio CD)
- New Tipsheets for American Indians/Alaska Natives
- Depression Screening Tools
- Suicide Prevention Hotline Magnet
- Indian Health Service Health for Life Magazine Articles
- Resource List



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# INDIAN HEALTH DIABETES BEST PRACTICE

## Depression Care

Revised April 2011



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# Living a Balanced Life with Diabetes Toolkit

## *Indian Health Service Diabetes Best Practice: Depression Care*

- Recent version released in April 2011
- [http://www.ihs.gov/MedicalPrograms/Diabetes/HomeDocs/Tools/BestPractices/2011\\_BP\\_DepressionCare\\_508c.pdf](http://www.ihs.gov/MedicalPrograms/Diabetes/HomeDocs/Tools/BestPractices/2011_BP_DepressionCare_508c.pdf)



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# ***Indian Health Service Diabetes Best Practice: Depression Care***

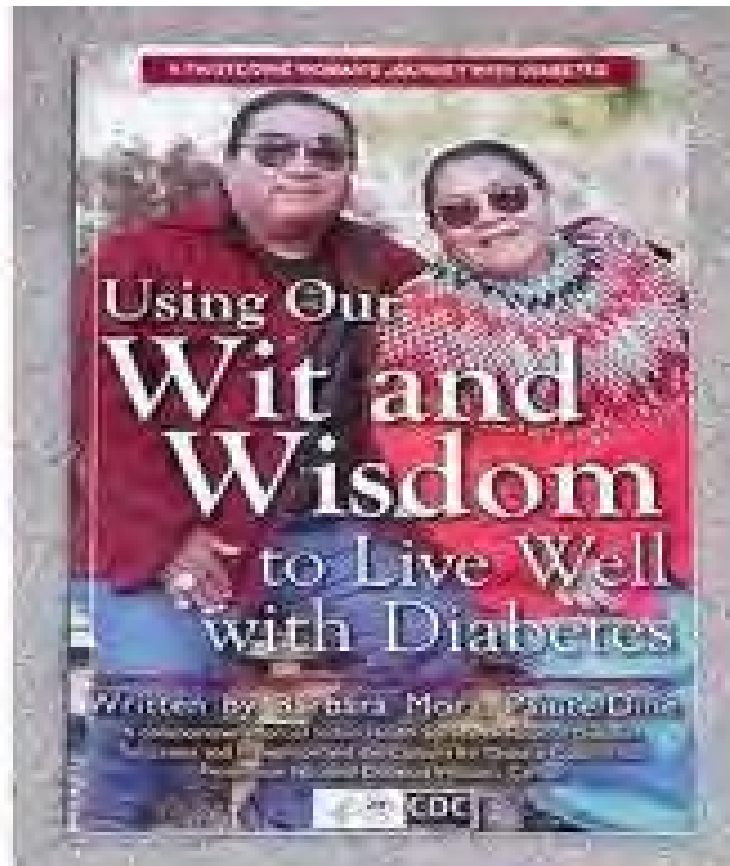
- Provides guidance for programs to improve individuals' diabetes and mental health status
- Describes depression screening and treatment options.



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# ***Using Our Wit and Wisdom to Live Well with Diabetes (book and audio CD)***



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# ***Using Our Wit and Wisdom to Live Well with Diabetes (book and audio CD)***

- Written by Barbara Mora, Paiute/Diné
- Document public health effort to prevent and control diabetes in AIAN people
- Highlights successes and challenges of a person with diabetes



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# New Tipsheets for American Indians and Alaska Natives

- Five tip sheets tailored to AIAN peoples
  - Youth and depression
  - Diabetes and self-esteem
  - Depression and eating behaviors
  - Tobacco and alcohol use
  - Resources for families caring for a loved one with diabetes
- Provide online resources for diabetes and psychosocial issues



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# New Tipsheets for American Indian and Alaska Native People

## Tips for Taking Care of Yourself

- Regarding self-esteem
- Encourages getting support
- How to manage daily life with diabetes



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## LIVING A BALANCED LIFE WITH DIABETES:

Tips for Taking Care of Yourself

National Diabetes Education Program



SOMETIMES HAVING  
DIABETES CAN BE TOUGH!  
TALKING ABOUT YOUR  
FEELINGS WITH THE ELDERS,  
BEING PHYSICALLY ACTIVE,  
AND LEARNING SOMETHING  
NEW ARE A FEW STEPS YOU  
CAN TAKE TO FEEL BETTER.

### DEALING WITH DIABETES

Diabetes is very common in American Indians and Alaska Natives. If you have diabetes, you know that the day-to-day steps needed to manage this illness can be hard. It can sometimes seem like too much to handle.

Most of the time, having diabetes is not a problem; you just deal with it. But, sometimes, it can be tough and you may not always feel good about yourself.

These feelings are normal. A lot of people feel down sometimes. But, there are things that you can do to feel better:

- **Get help from others.** Talk with the elders and seek out their wisdom. Share your feelings with a good friend or family member.
- **Get support for other issues in your life.** For many people, diabetes is only one of the things that causes worry or stress. Along with dealing with diabetes, you may also have concerns about work, family, or other relationships. Get support for things that bother you. When you are stressed, it will often be harder to control your diabetes.
- **Be physically active.** Play hard. Shoot hoops, ride a bike, dance, or take a brisk walk. Being active can help you relax, lower stress, and improve how you feel about yourself.
- **Learn something new.** Read about your tribe's past and share what you have learned with others.
- **Eat healthy foods.** Good eating habits—such as eating fruits and vegetables, whole grain breads, low-fat meats or other proteins, milk, and cheese—can help you take care of yourself.
- **Take time to do things you enjoy.** Staying busy can help you focus on upbeat things. Find out about fun activities that you can do with a friend.
- **Do something nice for someone else.** Helping someone in need can make you feel better. Help out in your community.
- **Make a list of your strengths and accomplishments.** Jot down the things you do well, your successes, and things that make you feel good about yourself.
- **Keep a journal.** Writing down your thoughts can help you work through some issues and it can help you see how you solved a similar problem in the past.



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# Resources to Help a Loved One Deal with Diabetes

- How to encourage and support a loved one who has diabetes
- Steps to help them stay on track with their diabetes management and care



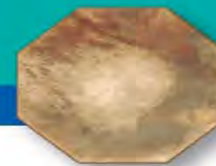
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## LIVING A BALANCED LIFE WITH DIABETES:

Resources to Help a Loved One Deal with Diabetes  
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Diabetes is very common in American Indians and Alaska Natives. If someone you care about has diabetes, there are many things you can do to help them take care of themselves and their diabetes.

### LEARN ABOUT DIABETES

- Read about diabetes online or borrow books from a library. Learn about how American Indians and Alaska Natives are affected by diabetes.
- Go to doctors' visits with your loved one.
- Join a diabetes support group. Ask your loved one's health care team about support groups in your area.

### TALK ABOUT DIABETES

- Let your loved one know that you want to help them manage their diabetes.
- Ask them about any goals they have to take care of themselves and their diabetes. Ask if there are any goals that you can help with.
- Ask them about their plans to become more physically active and to eat healthy foods. Ask if they want your help with these plans.
- Check in with your loved one if you feel that they are having a tough time dealing with their diabetes.
- If your loved one is feeling down or sad, let them know this is normal. Ask your loved one if they know how to get help at the clinic or hospital, or by speaking with a spiritual counselor.

### BE ACTIVE TOGETHER

- Find things that you can do together, like walking, running, or riding bikes.
- Try a new activity that you both might enjoy.



DEALING WITH DIABETES CAN BE HARD. YOU MAY NOTICE THAT YOUR LOVED ONE FEELS DOWN SOMETIMES. ASK WHAT YOU CAN DO TO HELP THEM FEEL BETTER. ENCOURAGE YOUR LOVED ONE TO TALK TO THEIR HEALTH CARE TEAM OR SPIRITUAL COUNSELOR WHEN THEY FEEL DOWN.



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# Dealing with Stress and Making Healthy Food Choices

- How to make healthy food choices even while stressed
- The importance of healthy food choices in diabetes management and care



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## LIVING A BALANCED LIFE WITH DIABETES:

Dealing with Stress and Making Healthy Food Choices  
National Diabetes Education Program



### DIABETES, STRESS, AND HEALTHY FOOD CHOICES

Diabetes is very common among American Indians and Alaska Natives. Yet, for most people, diabetes is only one of the many things in their lives that they have to worry about. At times, work, school, family issues, or other things in life can also be hard to manage.

Different people handle stress in different ways. Some people turn to food as a way to deal with their feelings. Some people may eat too much when they feel down or stressed. They may turn to high-calorie foods like fast food, ice cream, cake, or other snack foods to feel better.

Other people who are stressed may not have a good appetite. They may avoid food or not eat a lot.

Eating too much or not eating enough as a way of dealing with stress can make it hard for you to take care of yourself and your diabetes. Stress and some foods, like white rice, white bread, cookies, pies, or cake, can all raise your blood sugar level. Not eating enough food can cause low blood sugar. If you have diabetes, it is important that you make healthy food choices to keep your blood sugar levels under control. Be aware of the times when you feel down and the kinds of foods you eat when you are stressed. If you find that you eat high-calorie foods when you are feeling down, try having healthy foods around the house to snack on. Healthy snacks include non-fat/no sugar ice cream, whole wheat bread or crackers, low-fat cheese, or half a banana.

### TIPS TO HANDLE STRESS

#### When you feel stressed:

- + Talk with an elder about your concerns.
- + Be with others that you have fun with.
- + Do something nice for someone else.
- + Take a nature walk.
- + Learn a new activity, like fishing, horseback riding, or some other things that you might enjoy doing with others.

Be sure to also talk to your health care team (diabetes educator, dietitian, doctor, nurse, psychologist, or social worker), your spiritual counselor, or some other person that you trust. They can help you get the support you need.

### Make Healthy Food Choices

If you have diabetes, it is important to eat healthy foods to help keep your blood sugar levels under control. Make healthy food choices:

- ☐ Eat a colorful variety of fruits and vegetables.
- ☐ Choose whole grain foods—whole wheat bread and crackers, oatmeal, brown rice, and cereals.
- ☐ Limit the amount of solid fats and sugars when cooking or eating by trimming fat from meat, using less butter or margarine, and using less sugar.
- ☐ Make your meals lighter by using nonfat or low-fat milk, cheese, or mayonnaise. Use cooking spray instead of oil.
- ☐ Eat a healthy snack between meals.
- ☐ Choose water to drink.



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# Tips for American Indian/Alaska Native Teens

- Talking to others about the stress and struggles of diabetes
- Helps teens realize that they are not alone dealing with diabetes



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## LIVING A BALANCED LIFE WITH DIABETES:

Tips for American Indian/Alaska Native Teens  
National Diabetes Education Program



### DIABETES AND YOU

Diabetes is very common among American Indians and Alaska Natives. Sometimes it may seem like you are the only person with diabetes, but there are other teens like you who also have diabetes.

Most of the time, living with diabetes is not a problem, you just deal with it. But, sometimes having diabetes can be tough! You may just want it to go away. Maybe diabetes isn't even the biggest issue you're dealing with, but it can make everything seem harder sometimes.

Diabetes can be hard to deal with every day. Sometimes, you may feel sad, angry, alone, or different.

#### Do you ever...

- Think you're the only one who feels down about having diabetes?
- Wonder why you got diabetes?
- Blame yourself or your family for your diabetes?

All of these feelings are normal. Everyone feels down sometimes, especially when they have a lot of stresses and challenges. But, if you notice that you're feeling down most of the time, then it's important to reach out to others to get help.



FEEL GOOD ABOUT YOURSELF. TALK TO YOUR FRIENDS, FAMILY, THE ELDERS IN YOUR TRIBE, AND YOUR HEALTH CARE TEAM ABOUT HOW IT FEELS TO HAVE DIABETES

#### CHECK THIS OUT

Have you noticed any of the following changes in yourself?

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Getting poor grades in school  | <input type="checkbox"/> Feeling tired most of the time  | <input type="checkbox"/> Eating too much or too little   |
| <input type="checkbox"/> Having little to no interest in being with friends or doing activities you enjoy | <input type="checkbox"/> Feeling angry more often        | <input type="checkbox"/> Sleeping too much or too little |
| <input type="checkbox"/> Feeling sad or hopeless  | <input type="checkbox"/> Having low self-esteem or guilt | <input type="checkbox"/> Using drugs or alcohol          |
|   | <input type="checkbox"/> Finding it hard to concentrate  | <input type="checkbox"/> Having thoughts about suicide   |

If you checked any of these items, talk to your health care team (diabetes educator, dietitian, doctor, nurse, psychologist, or social worker), your spiritual counselor, or some other adult you trust about how you've been feeling. They can help you to get the support you need.

If you have been thinking about hurting or killing yourself, get help. Tell someone. You can get support from the Native Youth Crisis Hotline at **1-877-209-1266**, the National Suicide Prevention Hotline at **1-800-273-8255**, or visit [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org).



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# Help for Tobacco and Alcohol Users

- Understand how to handle stress without tobacco and alcohol
- Find help and support
- Learn steps to quit



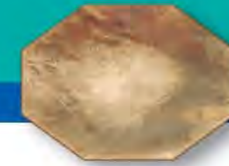
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## LIVING A BALANCED LIFE WITH DIABETES:

Help for Tobacco and Alcohol Users  
National Diabetes Education Program



Diabetes is very common among American Indians and Alaska Natives. Yet, for most people, diabetes is only one of their concerns. At times, there may be many things in life that are stressful and hard to manage.

People react to stress in different ways. Some people turn to food as a way to deal with their feelings; others may turn to alcohol or commercial tobacco.

For someone who has diabetes, drinking and using commercial tobacco can be especially harmful. In people with diabetes, alcohol abuse can increase the risk for high blood pressure, heart disease, eye problems, and nerve damage. Tobacco use by people with diabetes can cause blindness, mouth problems, kidney and heart disease, as well as foot infections.

### The Good News

It's never too late to quit! If you stop drinking or using tobacco this may:

- Improve your health and energy
- Help you feel and look better
- Improve your sense of taste and smell
- Help you save money

PREPARE TO QUIT: SET A QUIT DATE. GET SUPPORT. STAY FOCUSED.

### PREPARE TO QUIT

Quitting can be hard sometimes. So, it's important that you prepare for your success by:

- Setting a quit date.
- Choose a date and tell your family and friends.
- Before the quit date approaches, prepare yourself by:
- Removing alcoholic beverages and/or cigarettes from your home.
- Asking a friend who also uses tobacco or who drinks alcohol to consider quitting with you.
- Not letting people smoke, chew tobacco, or drink alcohol in your home.

### GETTING SUPPORT

You can get help to quit using tobacco or to stop drinking alcohol.

- Ask your health care team about resources in your area.
- Join a support group.
- Ask family and friends to support your plan.
- To get help quitting tobacco use, call **1-800-QUIT-NOW (784-8669)**. They will help you set up a quit plan.

### STAYING FOCUSED

Do things that can keep your mind off drinking or using tobacco. Try:

- Developing interests in activities where smoking or drinking are not allowed (such as, going to the movies, bowling, reading a book at the library).
- Avoiding people, places, or events that may make you want to smoke or drink.
- Planning what you will do when you feel an urge to drink or use tobacco.



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# Pretesting Results

- All tipsheets were pretested with youth and adults
- Responded positively to the tipsheets and felt they resonated with themselves as AIAN people
- Understood main message of the tipsheets



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# Screening Tools



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# Patient Health Questionnaire-9

- Self-administered diagnostic tool
  - Assess whether a person is exhibiting depressive symptoms



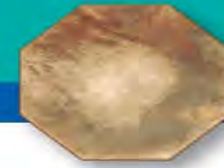
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# LIVING A BALANCED LIFE WITH DIABETES:

PHQ-9 — Nine Symptom Checklist  
National Diabetes Education Program



Patient Name \_\_\_\_\_ Date \_\_\_\_\_

1. Over the last 2 weeks, how often have you been bothered by any of the following problems? Read each item carefully, and circle your response.

a. Little interest or pleasure in doing things	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
b. Feeling down, depressed, or hopeless	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
c. Trouble falling asleep, staying asleep, or sleeping too much	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
d. Feeling tired or having little energy	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
e. Poor appetite or overeating	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
f. Feeling bad about yourself, feeling that you are a failure, or feeling that you have let yourself or your family down	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
g. Trouble concentrating on things such as reading the newspaper or watching television	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
h. Moving or speaking so slowly that other people could have noticed. Or being so fidgety or restless that you have been moving around a lot more than usual	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
i. Thinking that you would be better off dead or that you want to hurt yourself in some way	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>

2. If you checked off any problem on this questionnaire so far, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

**Not difficult at all      Somewhat difficult      Very difficult      Extremely difficult**



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# NDEP Depression Checklist

- Reviews major symptoms of depression
- Determines if depressive symptoms may be present.
- Provides resources for additional information on emotional issues.



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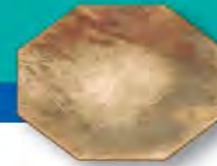




## LIVING A BALANCED LIFE WITH DIABETES:

### Depression Checklist

National Diabetes Education Program



#### **DIABETES AND DEPRESSION: IS THERE A CONNECTION?**

Many American Indians and Alaska Natives have diabetes. Anyone who has this illness knows that, on some days, managing diabetes can be hard and stressful. Sometimes it can be too much to handle. Feeling sad or depressed may make it harder for you to take care of yourself, and keep your blood sugar levels under control.

Feeling down once in a while is normal. However, if you feel sad, don't want to do things you once enjoyed, or feel tired on most days, then you may be depressed.

#### **THE GOOD NEWS**

If you're feeling down or depressed, don't keep it to yourself. Talk to your health care team (your doctor, diabetes educator, nurse, psychologist, or social worker). They can help you get the support you need.

Talking to an elder, a spiritual counselor, or a friend that you trust can help you find new ways to deal with things that may be bothering you.

If you have been thinking about hurting or killing yourself, get help. Tell someone. You can get support from the National Suicide Prevention Hotline at **1-800-273-8255**, or visit [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org).



#### **Here is a checklist of symptoms of depression:**

Check the items that you are dealing with:

- I feel empty or sad for most of the day
- I sleep too much or too little
- I don't want to do things that I used to enjoy
- I'm losing hope
- I feel slowed down or restless
- I eat more or less than I used to, with weight gain or weight loss
- I feel tired all of the time
- I have trouble thinking or staying focused
- I feel like you never do things right and worry that you are a burden to others
- I think of death or suicide

If you checked five or more of these items and you have had them for longer than two weeks, you could be depressed.

#### **Questions to ask your doctor if you think you may be depressed:**

- I'm worried that I may be depressed. What can I do to feel better?
- What can I expect if you send me to talk with a mental health professional?
- What kind of medicine helps with depression?
- If I am given medicine for depression, how long will it take for me to feel better?



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# Living a Balanced Life with Diabetes – Suicide Prevention Hotline Magnet

- Provides phone numbers of suicide prevention hotlines
- One toll-free number is specifically for Native youth.



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# IHS Health For Native Life Magazine Articles

- What Does Anger Have to Do With Weight Loss?
- Denial and Being Well With Diabetes
- Grief and Getting Fit
- A Positive Spin



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# IHS Health for Native Life Magazine

- Promote wellness and prevention of diabetes in AIAN peoples
- Developed by IHS' Division of Diabetes Treatment and Prevention
  - in partnership with the Tribal Leaders Diabetes Committee



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# What Does **ANGER** Have to Do with **Weight Loss?**

by Kenneth Yazzie, Navajo

**A**t 20 years old, I weighed 160 pounds. I could bench press over 350 pounds. At age 23, my life started falling apart, and I started getting heavier, no, *fatter*—let me say it right! I had gotten a divorce, and I went over the edge. I was drinking and doing a lot of drugs.

I wasn't watching myself. I skipped breakfast and lunch, and would have a huge dinner: steak, lobster, baked potato, smoked oysters.

In all areas of my life, I had lost it. I had lost my marriage. I had lost my children. I had lost my job. I was hanging out with the wrong crowd. I was angry.

I was court ordered to go to anger management. I was angry at first, but after two months, I realized I really was doing everything they told me I was doing. I started to come out of denial. That's when things started to get better.



## Kenneth Yazzie's New Way of Eating

Then	
<b>Weight:</b>	270
<b>Breakfast:</b>	steak, eggs, tortillas, hash browns
<b>Lunch:</b>	half pound burger and French fries
Now	
<b>Weight:</b>	241
<b>Breakfast:</b>	oatmeal
<b>Lunch:</b>	salad with lite dressing

Staying healthy is one way that I can correct my past mistakes. It's one way I can stay around



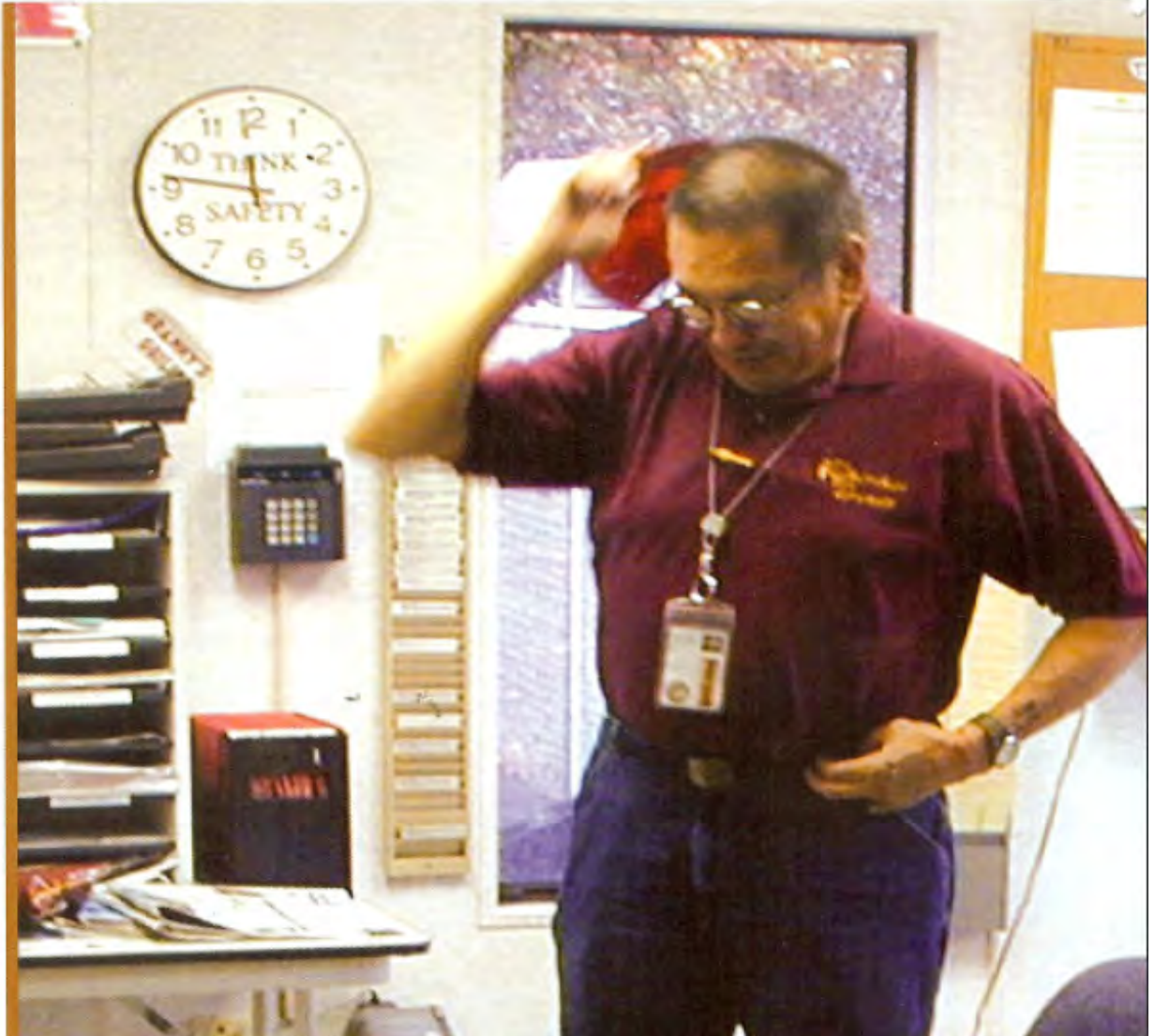
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Reprinted from *IHS Health for Native Life Magazine*.

# Denial and Being Well with Diabetes

By Ronnie Dixon,  
Te-Moak Tribe  
of Western  
Shoshone



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# Grief and Getting Fit: Dealing with One Comes Before Doing the Other

By Barbara Mora  
(Paiute/Dinè)

**GETTING FIT**  
doesn't just happen.  
There are steps to  
take. I have found  
the first step is not  
going to the gym.  
It is not eating a  
spinach salad. It is



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# A Positive Spin



**Teresa Choyguha (Tohono O'odham)** asked herself "What do I have going for me?" One of the answers was the love of her son, **Roberto Narcho**.

## How to Take the Doom and Gloom Out of Diabetes

by **Teresa M. Choyguha (Tohono O'odham)**, Wellness Presenter

Finding out you have diabetes can be a shock. At first, you may see only the bad things. You may think about your parents or grandparents having diabetes. The images can be gloomy -- blindness, amputations and dialysis. But as you learn more, you learn you can live well with diabetes. Our knowledge about diabetes and how to



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# Resource List

- Includes information on diabetes control, nutrition, physical activity, and substance abuse prevention, and other psychosocial issues.
- Provides resources for health care providers and caregivers
- Provides resources for people to find health care facilities



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## LIVING A BALANCED LIFE WITH DIABETES:

Resource Materials for American Indian  
and Alaska Native Peoples

National Diabetes Education Program



### DIABETES MATERIALS FOR AMERICAN INDIANS/ALASKA NATIVES

#### American Diabetes Association

Awakening the Spirit materials

[www.diabetes.org/in-my-community/programs/native-american-programs/awakening-the-spirit.html](http://www.diabetes.org/in-my-community/programs/native-american-programs/awakening-the-spirit.html)

This website provides information about:

- Preventing and controlling diabetes in American Indians

#### Full Circle Diabetes Program Resource Toolkit: Your Guide to Successful Program Implementation

<http://diabetesinitiative.org/resources/tools/ToolsStaffTraining.summary30-MAIC.html>

This website provides information about:

- Developing holistic program interventions for the community
- Diabetes programs centered around community needs and interests

#### Indian Health Service

##### Behavioral Health

[www.ihs.gov/MedicalPrograms/Behavioral/](http://www.ihs.gov/MedicalPrograms/Behavioral/)

##### Division of Diabetes Treatment and Prevention

[www.ihs.gov/MedicalPrograms/Diabetes](http://www.ihs.gov/MedicalPrograms/Diabetes)

##### Indian Health Diabetes Best Practices

[www.ihs.gov/MedicalPrograms/Diabetes/index.cfm?module=toolsBestPractices](http://www.ihs.gov/MedicalPrograms/Diabetes/index.cfm?module=toolsBestPractices)

These Indian Health Service webpages provides information on:

- Treating and preventing diabetes in American Indian/Alaska Natives
- Diabetes treatment, algorithms, training opportunities and educational materials
- Integrative behavioral health, suicide prevention, initiatives and conferences

### RESOURCES ON SUICIDE PREVENTION FOR AMERICAN INDIANS/ ALASKA NATIVES

#### A Guide to Suicide Prevention For American Indian and Alaska Native Communities

<http://oneskycenter.org/documents/AGuidetoSuicidePreventionDRAFT.pdf>

This guide provides information about:

- Suicide prevention and how to create a community response plan

#### Assessment and Planning Tool Kit for Suicide Prevention in First Nations Communities

<http://www.ihs.gov/nonmedicalprograms/nspn/file/assessmentandplanningtoolkitforsuicideprevention-aug12.pdf>

This toolkit provides information about:

- Addressing the issue of suicide in First Nations communities

#### Ensuring the Seventh Generation: A Youth Suicide Prevention Toolkit for Tribal Child Welfare Programs.

[www.nicwa.org/YouthSuicidePreventionToolkit/YSPToolkit.pdf](http://www.nicwa.org/YouthSuicidePreventionToolkit/YSPToolkit.pdf)

This toolkit provides information about:

- Developing policies to prevent youth suicide

#### First Nations Behavioral Health Association Catalogue of Effective Behavioral Health Practices for Tribal Communities

[http://www.fnbha.org/pdf/fnbha\\_catalogue\\_best\\_practices\\_feb%2009.pdf](http://www.fnbha.org/pdf/fnbha_catalogue_best_practices_feb%2009.pdf)

This report provides information about:

- Effective behavioral health practices for tribal communities
- Culturally based mental health and substance abuse prevention and treatment practices

#### The American Indian Life Skills

[www.uwpress.wisc.edu/books/0129.htm](http://www.uwpress.wisc.edu/books/0129.htm)

This website provides information about:

- Addressing key issues in American Indian adolescents' lives and teaching teens life skills

#### To Live To See the Great Day That Dawns: Preventing Suicide by American Indian and Alaska Native Youth and Young Adults

[http://www.sprc.org/library/Suicide\\_Prevention\\_Guide.pdf](http://www.sprc.org/library/Suicide_Prevention_Guide.pdf)

This guide provides information about:

- Implementing programs that reduce the contributing risk factors of suicide



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# Next Steps

- Dissemination to health care providers in AIAN communities
- Webinars
- Post materials on the NDEP and AAIP websites
- Evaluation



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# Promotion

- Conduct a webinar for health care providers
- Teach health care providers how to use the toolkit



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# AIAN Workgroup Members

- Charlene Avery (Chair) – Navajo
- Ronny Bell – Lumbee
- Kansas DuBray – Cheyenne River Sioux
- Margaret Knight – Laguna Pueblo
- Randi Rourke Barreiro – Mohawk
- Lorraine Valdez – Isleta Pueblo
- Dee Sabattus – Passamaquoddy
- JoAnn N. Lehner – Oglala Lakota Sioux
- Gary Ferguson – Aleut
- Shondra McCage – Chicaksaw Nation



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# **AIAN Workgroup Members**

## **Ad Hoc/AAIP Members**

- Gary Lankford - Cherokee
- Sam McCracken - Assiniboine and Sioux
- Lorelei DeCora - Winnebago Tribe of Nebraska - Thunder Bird Clan
- Ralph Forquera - Juaneno Band of Mission Indians - Acjachmen Nation
- Kelly Moore – Creek Nation of Oklahoma
- Carolee Dodge Francis – Oneida
- Gale Marshall - Choctaw
- Ann Bullock – Minnesota Chippewa



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# Federal Agency Representatives

- Sanford Garfield – NIDDK
- Jude McDivitt – NDEP (CDC)
- Joanne Gallivan – NDEP (NIDDK)
- Diane Tuncer – NIDDK
- Lemyra DeBruyn - CDC
- Michelle Owens-Gary – CDC
- Selena Ramkeesoon – ICF International



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# NDEP Psychosocial Toolkit

- <http://ndep.nih.gov/publications/PublicationDetail.aspx?PubId=193>
- or call 1-888-693-NDEP (6337)



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# For More Information

- To request a toolkit for use with American Indian/Alaska Native communities that you serve, and
- To help NDEP promote the toolkit, please visit [www.YourDiabetesInfo.org](http://www.YourDiabetesInfo.org) or call 1-888-693-NDEP (6337)
- For promotion of the toolkit, please email [AIANpt@cdc.gov](mailto:AIANpt@cdc.gov).



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# [www.diabetes.ihs.gov](http://www.diabetes.ihs.gov)

- **Downloadable Resources:**
- My Native Plate
- The Healing Power of Beading
- A Giant Step to Joy (Historical Trauma)
- Secrets to Getting Fit at Any Age
- Change Your Life (Alaska Native)



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# MY NATIVE PLATE

## An Easy Way to Help Your Family Know How Much to Eat

Helping your family eat in a healthy way is EASY!

### Remember these 3 steps:

1. Use a 9-inch plate or 9-inch area of a larger plate.
2. Divide into quarters.
  - 1/4 plate is fruits
  - 1/4 plate is vegetables
  - 1/4 plate is grains or starch
  - 1/4 plate is meat, fish or poultry
3. Stack food no higher than 1-1/2 and a half inches.

### Pictured Here

- Canned peaches, no syrup
- Baked squash and peppers
- Steamed white and brown rice
- Baked deer meat with garlic
- Low-fat, nonfat, lactose-free or soy milk

### Printed Placemats

Large, full-color, printed placemats will be available by fall 2012 at [www.diabetes.nih.gov](http://www.diabetes.nih.gov); click on "Online Catalog." There is no charge for placemats or shipping.

Produced by: Indian Health Service, Division of Diabetes Treatment and Prevention, and based on the USDA My Plate. For more information, go to [www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov)



Fruits



Dairy

Grains/  
Starch

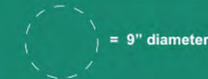


Vegetables

Protein

### Remember:

1. Use a 9-inch plate or 9-inch area of a larger plate.
2. Divide into quarters.
3. Stack food no higher than 1-1/2 and a half inches.



= 9" diameter



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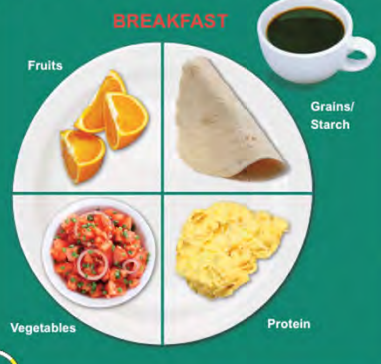
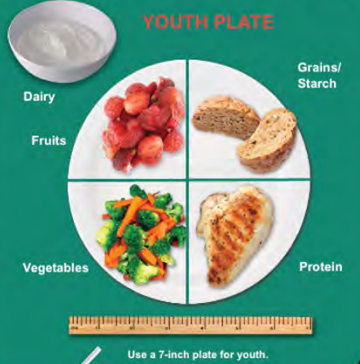
## More My Native Plates for Your Family

**Youth Plate Meal Tips**

- Replace the yogurt with a small glass of low-fat, lactose-free or soy milk.
- Add a small pat of butter or margarine to the roll.

**Pictured Here**

- Fresh strawberries
- Steamed carrots and broccoli
- Small roll
- Baked chicken
- Low-fat yogurt



**Breakfast Tips**

- Wipe a little oil on frying pan before scrambling egg.
- Replace the medium-sized orange with half a cup of orange juice.
- Add a glass of low-fat, nonfat, lactose-free or soy milk.

**Pictured Here**

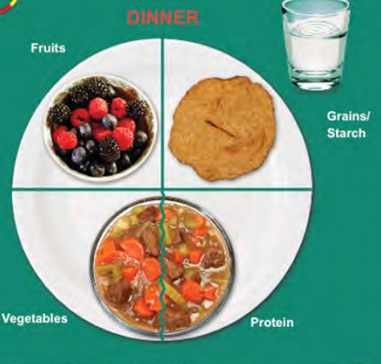
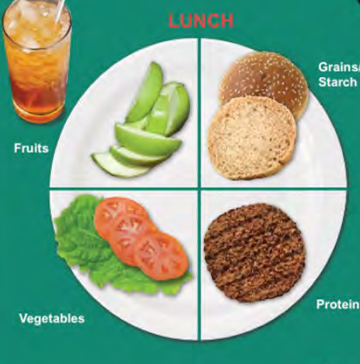
- Medium-sized orange
- Salsa
- Medium tortilla
- Scrambled egg
- Black coffee

**Lunch Tips**

- Use ketchup and mustard on the hamburger.
- Skip mayonnaise.
- Skip French fries.
- Add one slice of cheese to add calcium and vitamins.

**Pictured Here**

- Apple
- Lettuce and tomato
- Small whole-wheat bun
- Small hamburger patty
- Unsweetened iced tea



**Dinner Tips**

- Top berries with low-fat yogurt to add calcium and vitamins.
- Skip butter or margarine, or use one pat.

**Pictured Here**

- Mixed berries
- Beef and vegetable stew
- Small piece baked whole-wheat fry bread
- Water

For recipe ideas, go to [www.diabetes.org](http://www.diabetes.org) and also on Food & Fitness. Produced by: Indian Health Service, Division of Diabetes Treatment and Prevention, and based on the USDA My Plate. For more information, go to [www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov)



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## Educators' Tips for Using **MY NATIVE PLATE** An Easy Way to Help Your Family Know How Much to Eat



*My Native Plate* provides a three-step visual guide to help your clients and patients eat balanced meals of reasonable portion sizes. It can be used as a starting point for nutrition education, a daily reminder, and a way to introduce healthy eating to family members of all ages.

Keep these points in mind and consider discussing them in a positive, supportive way when using *My Native Plate* as a nutrition education tool with clients and their family members:

**1 Depression and stress** can impact your clients' food selection and portion sizes. The reasons why people eat certain foods, and why they overeat, are complex. Consider factors like depression, stress, lack of access to and money for fresh, "healthy" foods and how these factors may impact your clients' ability and desire to eat healthy foods and limit portions. *My Native Plate* foods and/or portions may not match what your clients can and want to eat. Use *My Native Plate* to talk about how your clients actually eat. Ask your clients why they might be eating this way. If needed, refer them to other health care professionals, spiritual leaders or counselors.

**2 Family and social gatherings** are important to your clients and can affect healthy eating. Not eating foods brought to gatherings, potlatches and potlucks can sometimes be considered rude. Talk about how a tablespoon of several dishes from one food group (macaroni salad, mashed potatoes, canned corn) can be combined to make up one *My Native Plate* quadrant (grains/starch).

Talk about the importance of step number 3: *Stack food no higher than 1-1½ inches* and how this step can be used to eat healthier at potlucks and gatherings.

**3 Incorporating traditional foods** into the plate can help your clients eat healthier. Talk to your clients about traditional foods and how they would fit into the plate. Feel free to copy the design of *My Native Plate* and develop a plate with meaningful foods from your region.

**4 Eating out** can be common, especially when traveling to family gatherings, meetings and celebrations. Suggest ways your clients can use the three *My Native Plate* steps when eating at places offering limited menus such as fast food restaurants and convenience stores. Keep in mind that healthier menu options are sometimes more expensive. Honor your client's budget limitations while providing creative ways to eat healthier when dining out.

Tips for Using *My Native Plate* was developed by IHS Division of Diabetes Treatment and Prevention to help educators provide culturally-relevant nutrition information, empathy and support to Native clients when introducing *My Native Plate*. For additional nutrition information, download 10 Tips to a Great Plate at [www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov).

To download *My Native Plate*, go to [www.diabetes.ihs.gov](http://www.diabetes.ihs.gov) and click on "Instant Downloads."  
If you use *My Native Plate* to develop a regional plate for your tribe/organization, please include the statement:  
Developed from *My Native Plate*, created by IHS Division of Diabetes Treatment and Prevention, July 2012.



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## The Healing Power of Beading

How I Went from Depression to Joy with the Help of Beading, My Husband's Support and the Creator's Love



By  
Barbara Mora  
(Paiute/Diné)



**T**here is magic in beading. I have no doubt. When I pick up the needle, then touch the tiny, colored bead, the magic begins. It starts at the beginning. It starts at the round, perfect bead. From there, the magic seems to travel through the needle, then through the thread and into the point of my thumb and forefinger.

If you have ever beaded, you know this. Beading is like a magic dance of bead, fingers, arm and shoulder.


I use the magic of beading to help myself relax and meditate. Through beading, I become closer to my husband, friends and ancestors. I teach others to bead. Some people say beading helps them escape. One friend of mine has a lot of pain in her body. She says beading gives her a break from the pain. For me, beading slows down my mind, so I can listen to my heart.

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The Eastern Band of Cherokee Indians, located in Cherokee, North Carolina, uses many ways to help people prevent or manage diabetes. Through a program called Cherokee Choices, the tribe offers many different activities including exercise classes, foot and kidney clinics and healthy eating classes.

But tribal diabetes program staff know that taking care of people's bodies alone will not win the battle against diabetes. A major step in preventing or managing diabetes is to reduce stress and increase joy. In other words, a happy person, someone who

wakes up with a feeling of peace that continues throughout the day is more likely to not get diabetes, or more likely to be able to manage it well.


The tribe wants to increase the peaceful feelings of its tribal members, and reduce the incidence and affects of diabetes. One of the ways it is achieving this goal is to look at the reasons why some tribal members may not feel peace.

"I have lived most of my life being scared. I'm not exactly sure what I'm afraid of," says a member of the Eastern Band of Cherokee Indians.

"I feel a lot of anger. I think I'm mad at my parents. I think I'm angry

**A  
Giant Step  
to Joy**

**Understanding  
Historical Grief  
and  
Trauma**



To order free magazines, go to [www.diabetes.ihs.gov](http://www.diabetes.ihs.gov), click **Online Catalog**. Number 9 • HEALTH FOR NATIVE LIFE 36



Arlee Newingham (White Mountain Apache), age 49

## The Secrets to Getting Fit at Any Age

What motivates people to start getting fit when they are in their 40s and beyond? No, it's not wanting a trim waist and firm muscles. In fact, it's not about looks at all...

Paschal Johnson (White Mountain Apache), age 74



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**Change  
Your Life**  
“It’s so simple!”

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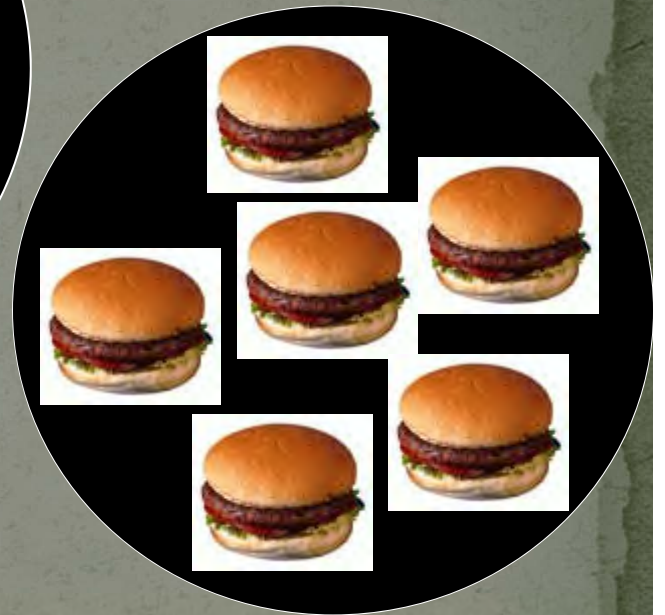


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# IRON

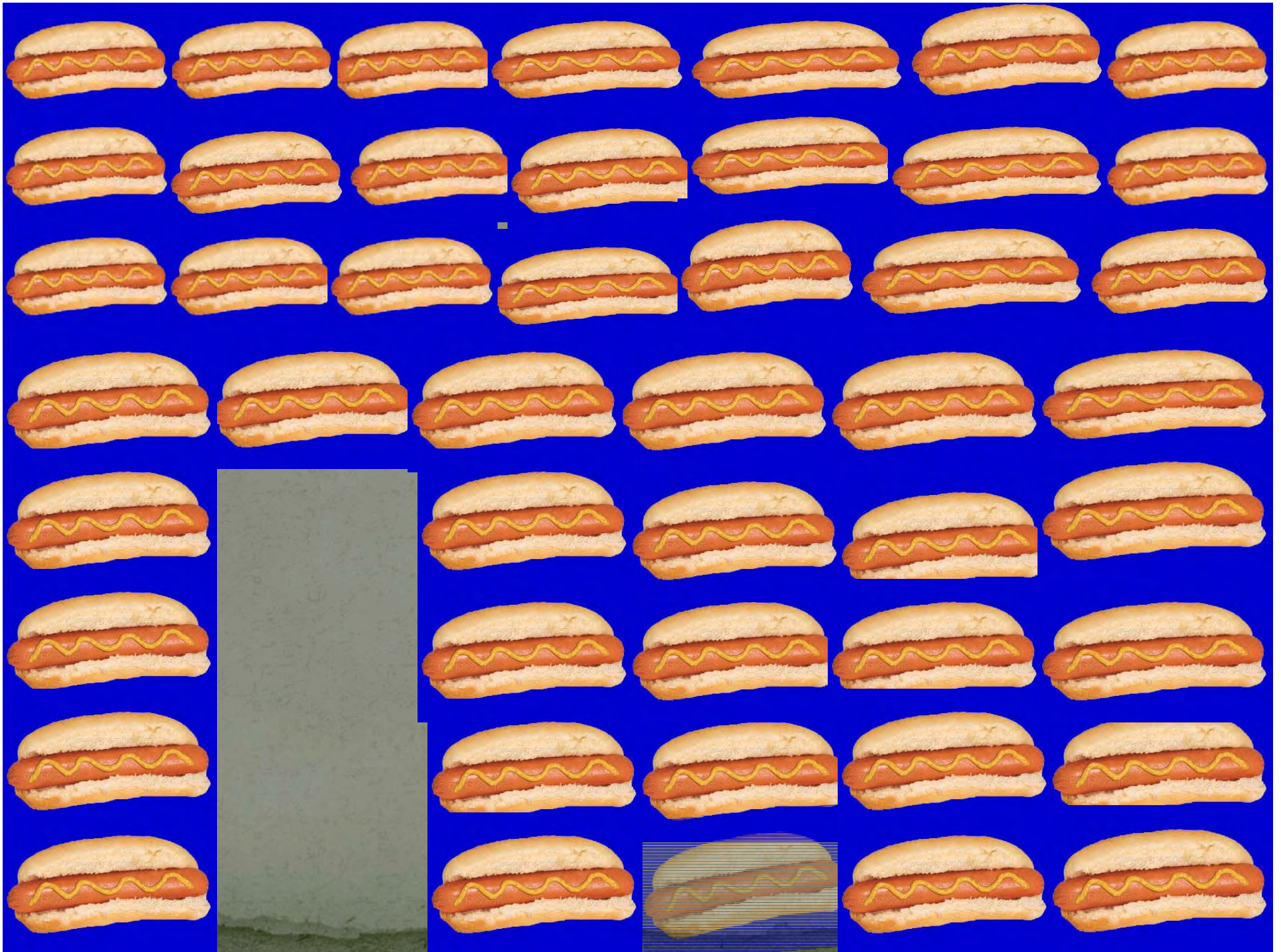


IRON....



how many hotdogs?

Country food is good for you and your family



# Questions for Discussion

- What issues do you see in managing people with diabetes and psychosocial issues?
- What feedback do you have about the content of the toolkit?
- How can we best spread the word about the toolkit?



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# Thank You!



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