

This product was developed by the Campesinos Diabetes Management Program at Campesinos Sin Fronteras in Somerton, AZ, with support from the Robert Wood Johnson Foundation® in Princeton, NJ.

DIABETES AND THE FAMILY

# Introduction

BACKGROUND AND PURPOSE

### Diabetes and the Family

*Diabetes and the Family* is a diabetes prevention program designed for patients with diabetes and their families. The primary objectives of the program are to:

- 1) provide family members with basic information about diabetes
- teach health behaviors that might reduce all family members' risk of diabetes or secondary complications
- suggest ways that families might unite to support healthy behaviors and the special needs of a family member with diabetes
- 4) have fun learning and experiencing!

An important theme of this program is family unity. When a family member has diabetes, the diagnosis impacts both the patient and the other family members. The patient may be depressed, overwhelmed and frightened. Family members may feel helpless in not being able to "rescue" or "help" their spouse, parent, child or sibling. Family members may also become depressed about how life will change. Or, they may suppress their helplessness and ignore the problem, become anger and resentful, or become over protective. Families can live normal lives if they unite, communicate their feelings and reach an understanding of how they will support their family members with diabetes. This program has been designed for family members of all ages to enjoy building a healthy life-style together, as well as to prevent and manage.

#### About Border Health iSI!

The Border Health Strategic Initiative (ISII) is a comprehensive community-based diabetes prevention program. Border Health ISII was developed to address diabetes prevention at many levels within the community. This program attempts to reach diabetic patients, providers of diabetic patients, families of diabetic patients, neighbors trying to prevent diabetes, school children at a risk of diabetes, and community leaders working to create an environment supportive of health behaviors.

*Border Health ISI* has been a collaborative effort. Health promotion strategies and materials have been created through a partnership between the University of Arizona. College of Public Health and community health service agencies and providers, including promotoras, who work in the US-Mexico border counties of Yuma and Santa Cruz, Arizona. The partners who worked on the development and testing of this program combined their expertise in health promotion, health education, social support and community outreach to yield an approach to diabetes prevention that addresses the needs of people who have limited access to health services and education.

Diabetes and the Family is the family component of Border Health ISI/ This program builds on the skills and expertise of promotoras who have extensive experience with community members, families and patients at the US-Mexico border. This manual was developed for promotoras working with diabetic patients and their families.

#### Border Health iSI! and Diabetes and the Family Would Like To Thank...

#### The promotoras, administrators, and staff of:

Campesinos Sin Fronteras, Somerton AZ Platicamos Salud, Nogales AZ Puentes de Amistad, Somerton AZ

#### for their contributions to the development, implementation, and evaluation of this curriculum.

We would also like to thank the faculty and staff from the Mel and Enid Zuckerman Arizona College of Public Health, and the Centers for Disease Control and Prevention for making this project possible through a congressional appropriation for US-Mexico border health (grant #200-2000-10070).

Finally we would like to acknowledge Microsoft® Corporation's division of "Design Gallery Live" (http://dgl. microsoft.com/?CAG=1), for the provision of Microsoft® Clip Art, from which many of the graphics for this production were obtained.

Every effort was made to acknowledge the source from which materials for this curriculum were adapted. If acknowledgement was not given, it was unintentional and we apologize.

| <u> </u> | 1  | Facilitating this Program           |
|----------|----|-------------------------------------|
|          | 2  | Meeting the Family                  |
|          | З  | Welcome!                            |
|          | 4  | #1 Families and Diabetes            |
|          | 5  | #2 Being Healthy                    |
|          | 6  | #3 Goal Setting                     |
|          | 7  | #4 Working Together                 |
| $\frown$ | 8  | #5 Staying Healthy                  |
|          | 9  | Congratulations!                    |
|          | 10 | Progress Check                      |
|          | 11 | Program Evaluation                  |
|          | 12 | Appendix: Recipes                   |
|          | 13 | Appendix: Physical Activities       |
|          | 14 | <b>Appendix: General Activities</b> |
|          | 15 | Appendix: La Lotería                |
|          |    |                                     |

# Facilitating This Program

INSTRUCTIONS AND GUIDELINES

### <u>Main Ideas</u>

- This chapter will give an overview of the Diabetes and the Family program.
- It describes the major components of the program which include home visits, celebratory events and educational sessions.
- It explains the flexible format of the educational sessions.
- It offers guidance and tips for implementing the program, including how to plan activities and facilitate discussions.
- It offers guidance and tips for evaluation, including use of pre/post-program questionnaire, and an outside evaluator.

# Program Timeline

• The majority of this program will take place over the course of 8 weeks.

The first 8 weeks consist of the following:

Facilitation

There

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| week 1     | First Home Visit and Registration | RV |
|------------|-----------------------------------|----|
| week 2     | Kick Off Event                    | KO |
| week 3     | Informational Session #1          | #1 |
| week 4     | Informational Session #2          | #2 |
| week 5     | Informational Session #3          | #3 |
| week 6     | Informational Session #4          | #4 |
| week 7     | Informational Session #5          | #5 |
| week 8     | Graduation                        | G  |
| are also 2 | follow up home visits             |    |
| week 10    | Promotora Follow-Up Home Visit    | FV |
| week 12    | Evaluation Visit                  | EV |
|            |                                   |    |



### Program Timeline Cont'd...

### The entire program including the two follow up visits will last 12 weeks...

| Sun | Mon | Tue     | Wed | Thu | Fri | Sat |
|-----|-----|---------|-----|-----|-----|-----|
| 1   | RV  |         |     |     |     |     |
| 2   | ко  | 0.0.000 |     |     |     |     |
| 3   | #1  |         |     |     |     |     |
| 4   | #2  |         |     |     |     |     |

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|-----|-----|-----|-----|-----|-----|
| 5   | #3  |     |     |     |     |     |
| 6   | #4  |     |     |     |     |     |
| 7   | #5  |     |     |     |     |     |
| 8   | G   |     |     |     |     |     |

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|-----|-----|-----|-----|-----|-----|
| 9   |     |     |     |     |     |     |
| 10  | FV  |     |     |     |     |     |
| 11  |     |     |     |     |     |     |
| 12  | EV  |     |     |     |     |     |



# About this Manual

This manual includes the following...

#### Facilitating the Program and Instructions (this chapter)

- This chapter gives an overview of the *Diabetes and the Family* program, a program timeline, description of the manual, instructions, and guidelines for implementing this program.
- This program has been successfully implemented in group format and in the home environment. The agency will need to discuss which delivery style is better for their community.

#### Initial and Follow-Up Home Visits

- Home visits are an integral part of this program. They offer a chance to get to know each family individually, build trust and confidence in the participants, and answer any questions families may have regarding the program.
- In addition to its social value, these visits serve at least two other purposes: documentation of participation, and program evaluation.
- The chapters on home visits include the Main Ideas of the visit as well as information and instructions for specific required documentation. There are individual forms (in plastic) that have instructions on the back. These can be taken out to make photocopies as needed, depending on the number of participants and families.

\*Please read instructions carefully!\*



### About This Manual Cont'd...

#### Celebratory Events (Kick Off and Graduation)

 These chapters offer Main Ideas about the events as well as some suggestions for activities and preparation.

#### **Educational Sessions**

- The session chapters contain the Main Ideas and Objectives for each session, suggestions for activities, as well as educational information accompanied by flipcharts containing illustrations.
- Each informational session contains 5 major components which include a:
  - 1. General Activity (games, stories, food preparation, testimonials etc.)
  - 2. <u>Physical Activity</u> (stretching, walking, dancing, relaxation exercises etc.)
  - 3. Healthy Snack or Meal
  - 4. Information and Discussion (with individual chapters, graphics, flipcharts)
  - 5. Wrap Up! (concluding the Session)
- The promotoras can decide the order in which these activities take place. They can also decide which General Activity, Physical Activity, or Snack they want to use. The Sessions include ideas and suggestions for guidance.
- These Session components are discussed in further detail later in this chapter.

#### The Appendix

- Instead of prescribing particular General and Physical activities or Snacks, this program seeks to encourage the promotoras to use their best judgment and experience about what they think families will enjoy.
- The Appendix offers a variety of activities and recipes. When indicated in a Session that there should be an activity, the promotora can choose something that is not in the manual that she knows to be effective for teaching a particular idea.



## Session Components

Sessions will last from 1 1/2 - 2 hours, depending on the planned activities and number of participants. You will need to consider before implementing a Session how long your activities will take. It is recommended to spend at least 30 minutes on Information and Discussion. The following Session components can take place in any sequence. Promotoras can choose which general activity, physical activity, and snack they consider appropriate for each particular Session.

#### 1. Physical Activity (approx. 15 minutes)

- Each Session should have at least one Physical Activity.
- Physical Activities can include: stretching exercises, walking, dancing and physical games.
- There are activities in the Appendix to choose or you may use other activities you consider appropriate.
- As you move through the Sessions, you will probably want to start slow. First, introduce families to low activity relaxation and stretching exercises and then in later Sessions, advance to exercises that increase the heart rate, such as walking and dancing.
- For each physical activity, select a musical tape or CD suitable for the pace of the activity. For relaxation and stretching, music should be calming or soothing. For higher pace activities, music should convey a higher energy level and offer a beat relevant to the activity.
- Remind families to participate in a way that is comfortable to them. Encourage everyone to participate to the best of their ability.
- Choose activities that all participants can do (consider age, number of participants, any
  physical limitations of participants, and <u>relevance to Session topic</u>).
- You may choose one Physical Activity that takes 15 minutes, or 2-3 shorter activities throughout the Session.



### Session Components cont'd:

#### 2. General Activity (approx. 20 minutes)

- Each Session should have at least one General Activity.
- General Activities can include: games, stories, testimonials, food demonstrations.
- There are activities in the Sessions and in the Appendix to choose from or you may use other activities you consider appropriate.
- Choose activities that all participants can do (consider age, number of participants, literacy, and <u>relevance to Session topic</u>).
- You may choose one General Activity that takes 20 minutes, or 2-3 shorter activities throughout the Session.

#### 3. Information and Discussion (approx. 30 minutes)

- Information and Discussion for Sessions #1-5 are included as chapters in this manual.
- You should read through the whole chapter before implementing a Session.
- + Each chapter contains main ideas and objectives. Be sure to read them carefully.
- <u>Review</u>: Each Session (except Session #1) begins with a review. The review contains selected information from the previous Session. Using the graphics, you should try to have participants remember and share the information they learned. It is not necessary to read all the bulleted information again to the group- but you should remind them of any information they may not remember. Do not spend too much time on the Review (5 minutes should be sufficient).
- <u>Session Information</u>: You should familiarize yourself with the Session Information that accompanies the graphics. It is best if you do not read directly from the information. Use the questions on the graphics to generate conversation and lead to talking about the new topic.
- <u>Q&A</u>: Throughout the Informational component of the Session, you will find guidelines for asking and answering questions. These questions are primarily to address any technical or complicated information you present.
- <u>Discussion</u>: Throughout the Informational component of the Session, you will also find places to stop and lead a discussion. These discussions generally will be about families' experiences with diabetes.
- <u>Ideal</u>: Occasionally you will find suggestions or ideas. You may try them or use your own variation.
- <u>1</u>: Occasionally you will find a box indicating something very important to do. Be sure to read these messages.



### Session Components cont'd:

#### 4. <u>Healthy Snack</u> (approx. 15 minutes)

- There should be 1 snack during each Session (except in Session #4 that involves preparing a meal).
- Snacks are meant to be used for food sampling, for participants to try new low-fat, lowsugar, and high fiber alternatives.
- Snacks should be simple to prepare, and are not food demonstrations.
- Try a combination of 2 items that will allow for sampling different foods. For example:
   \* small whole fruit, such as grapes, plums or strawberries
  - \* 1 type of no fat cookies, such as ginger snaps, graham crackers or "non-fat" vanilla wafers
  - \* raw vegetables, such as baby carrots or cut celery
  - \* cut fruit, such as orange wedges, melon wedges or unpeeled banana halves
  - \* pretzels
  - \* bagels and low fat cream cheese
- Do not serve more than 2 items and do not serve large amounts, just enough for everyone to try something. It shouldn't be too filling.
- Do not serve more than two beverages.

\*bottled water

- \*iced tea, with lemon or artificial sweetener available
- \*coffee, with artificial sweetener and fat free creamer available
- \*sugar free lemonade made from a powdered mix
- Remember take napkins and small paper plates.
- You should talk to participants about the snacks. Do they like them? Why/why not?
- 5. Wrap Up! (approx. 10 minutes)
- Each Session or Event has a Wrap Up!
- The Wrap Up! allows participants to share information with the group, and it will let you
  determine if you have met the objectives of the Session.
- Before participants leave a Session or Event, ask them the Wrap Up! questions.
- Each participant does not have to answer every question, but you should try to let at least ask one person from each family to share their answers.



# Suggestions and Recommendations

#### Preparation

- First, read the appropriate chapters for Sessions, Events, and Visits.
- When you plan a Visit, ask yourself:

What Documents do I need? How many copies should I take? Is there anything else I should bring the family?

When you plan a Session or Event, think about all the activities. Ask yourself:

What Snack will I prepare? What Physical Activity and General Activity will I choose? What order will I implement these activities? How long will each activity take? Do I have all the materials and supplies I need? Do I need to make copies of handouts?

#### Time Management

- Be sure to arrive at least 10 minutes early to have all your materials prepared, and be ready to greet families.
- \* Keep track of time, you don't want to hurry through important information.
- · Encourage conversation, but be sure to stay on schedule.

#### Beginning and Ending

- · When you begin, be sure to greet everybody.
- Be sure to take attendance. Any new participants will need to sign a consent form and fill out an evaluation questionnaire.
- Start with asking if anyone has any questions.
- After the Wrap Up! Ask if anyone has any questions, then confirm the time and day of the next Session, Event, or Visit.

DIABETES AND THE FAMILY

# Meeting the Family

REGISTRATION Home Visit #1

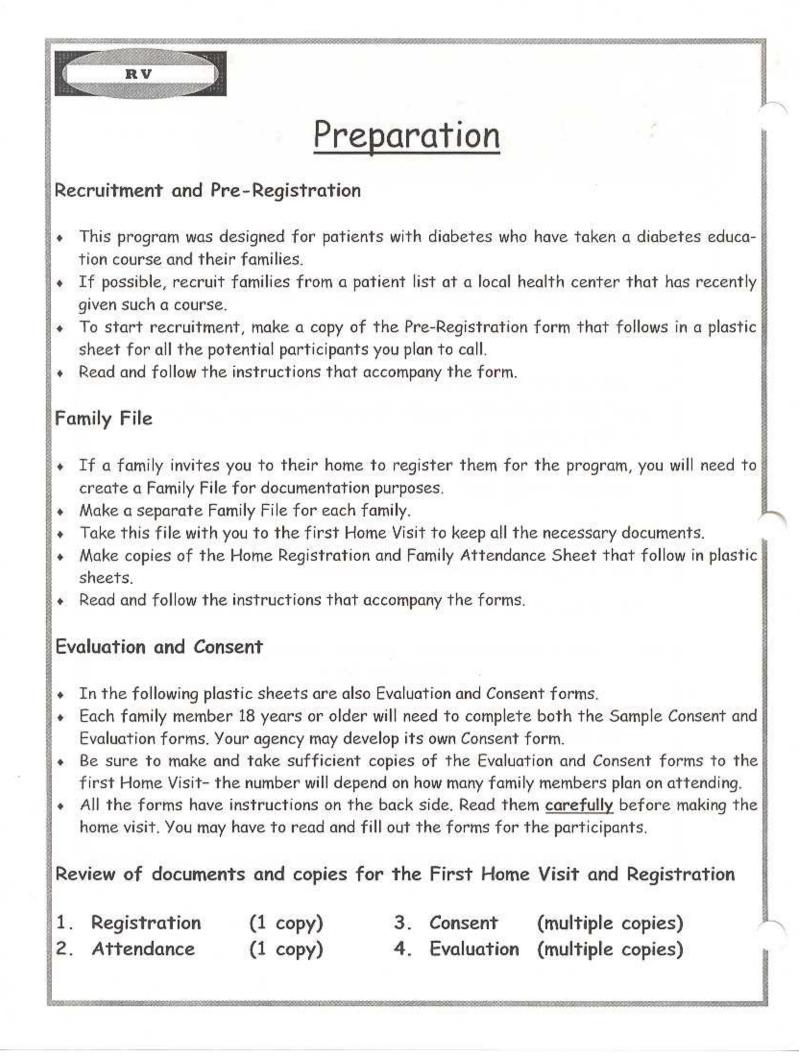
### <u>Main Ideas</u>

- This visit is very important because it gives an opportunity to meet the family and answer any questions they may have regarding the program.
- It helps to build trust and a good relation with participants.
- This chapter gives instructions for creating a family file and how to begin the documentation process.

### **Objectives**

At the end of this home visit, families should have...

 completed the Registration, Consent, and Evaluation forms needed before they begin the program.



### **Pre-Registration**

### **Diabetes and the Family**

#### Instructions and Guidelines:

1. First, select a family to recruit.

2. Record the name and telephone number (or other contact information) of the primary participant (the person with diabetes) on the pre-registration form. You should have this form and speak directly with the primary participant when you call, or make contact.

3. Record on the 'comments' section of the form when and how many times you called. If you do not reach the family after three attempts, you may wish to search for a new family.

4. When you reach a family explain who you are, and how you have their name and number. Then explain why you are calling. You will want to describe the program, and then ask if they would like to participate. If they say 'yes', then fill in question #1 on the form, and continue with the pre-registration questions. If the family would not like to participate, write 'no' for question #1. Note their reasons on the 'comments' section for future reference.

\*\*\*You may wish to use the following as a model when describing the program. If appropriate, consider modifying the description to better describe the program at your organization.

"Diabetes and the Family is a program to teach families about healthy lifestyles, and how to support someone in the family with diabetes. Program activities take place once a week and consist of home visits, educational sessions, and celebratory events. Each of these components is designed to be educational and fun. The program lasts approximately 8 weeks, with additional follow-up home visits. Program participants should commit to attending all of the activities. All family members are invited to participate, but it is required that at least 1 adult family member participates with the person with diabetes in all the activities. Do you think your family would be interested in participating in this program?"

| <b>Pre-Registration</b> | P | re- | Re | gis | stra | tion |
|-------------------------|---|-----|----|-----|------|------|
|-------------------------|---|-----|----|-----|------|------|



### **Diabetes and the Family**

| <b>Name of Primary Participa</b> | ant (person with diabetes):  |
|----------------------------------|--|
| (Last)                           | (First)  |
| Telephone:                       |  |
| (Please read instructions        | on reverse side.)  |
| 1. Would you like to partic      | ipate in this program?   |
| -                                | Ir family have diabetes?   |
| 4. Can you and a relative 1      | 18 years of age or older participate in all<br>including follow up visits? |
|                                  | prefer to read/write?  |
|                                  | at home to register your family? (The<br>companion needs to attend).       |
| Date / Time:                     |  |
| Address:                         |  |
| Comments:                        |  |
|                                  |  |
| Promotora:                       |  |
| Site:                            |  |

### **Consent Form**

### **Diabetes and the Family**

#### Instructions for Completing the Consent Form

- 1. Your agency may use its own consent form, or that of a partnering research organization. Or, you may choose to use the following form, in which case please follow these instructions:
- 2. Each family member 18 years and older needs to read or have read to them the Consent form.
- 3. The name of the individual who is considering signing the form, should be written in the open line under "Purpose".
- 4. The name of any family members under 18 years of age should be written under "Procedure" in the numbered spaces.
- Each individual who agrees to the activities described in the Consent form, needs to sign and date the second page of the form.
- 6. A witness signature is needed only if the family member signing cannot clearly sign their name, or has a mental condition that might make if difficult to know what he or she is signing. The witness signature assures the agency that the signee was not coerced or forced to sign.
- 7. The promotora or person administering the Consent form signs on the line entitled, "Presenter's Signature" and writes in today's date.
- 8. Leave the line entitled "Signature of Investigator" blank.
- 9. Give a copy of the Consent form to the participant. Keep the original form (one for each adult) in the family file.

#### ENGLISH TRANSLATION FOR COMMITTEE CONSENT TO PARTICIPATE IN "BORDER HEALTH ;SI!" and Parent Consent for their Child(ren)'s Participation

I AM BEING ASKED TO READ THE FOLLOWING MATERIAL TO ENSURE THAT I AM INFORMED OF THE NATURE OF THIS RESEARCH STUDY AND OF HOW I WILL PARTICIPATE IN IT, IF I CONSENT TO DO SO. SIGNING THIS FORM WILL INDICATE THAT I HAVE BEEN SO INFORMED AND THAT I GIVE MY CONSENT. FEDERAL REGULATIONS REQUIRE WRITTEN INFORMED CONSENT PRIOR TO PARTICIPATION IN THIS RESEARCH STUDY SO THAT I CAN KNOW THE NATURE AND RISKS OF MY PARTICIPATION AND CAN DECIDE TO PARTICIPATE OR NOT PARTICIPATE IN A FREE AND INFORMED MANNER.

#### Purpose

I \_\_\_\_\_\_, and my family have been invited to participate in the program Border Health ¡SI!" for up to 14 weeks, including the opening and graduation ceremonies. Because of the short time of the program, it is clear our missing any of the sessions will have an effect on the positive outcomes of the program for our family.

#### Selection Criteria

We have been invited to participate in the program because I or a member of my family has diabetes. Approximately 40 families will participate in this project.

#### Procedure

If I decide to participate, I give my consent to taking a pre and post test at the beginning and end of the program to measure the program's effects for our family. I give my consent to participating in an interview with Border Health ;SI! staff, if I am randomly chosen for an interview. I also give my permission that a pre and post test be given to my children who are under age 18 who participate in the program. These children are:

| I | (date of birth) |  |
|---|-----------------|--|
| 2 | (date of birth) |  |
| 3 | (date of birth) |  |
| 4 | (date of birth) |  |
| 5 | (date of birth) |  |

#### Risks

The only risk that could occur in this project is the anxiety which we may experience at the beginning of the program as we learn about the implications of the illness, diabetes.

#### Benefits

Through my participation in this project I will learn skills for the management of the illness, diabetes, which could improve my general health, involve myself in learning new information, and in the education of my spouse, children and relatives regarding the care and prevention of diabetes. Benefits for the community include greater understanding in general regarding the care and prevention of diabetes.

#### Confidentiality

All of the information in this project will be kept confidential at all times. Only the program staff will have access to the recruitment and follow-up forms. All data analisis will use numeric identification codes which will be stored separately from our names. Published data will not identify the names of any individual participants. It is possible that I will be contacted by project evaluators for more information during the project.

#### **Participation Costs**

There will be no monetary costs to me for participating in this project, nor reimbursement for my participation. The only cost to me will be the time taken during the intake and follow up interviews, of approximately 15 minutes each.

#### Contact Information

If I require more information about the project I can talk to Dr. Stuart Cohen, at the University of Arizona College of Public Health at (520) 626-8697. If I have any concerns about my rights as a study participant, I can call the office of the Human Subjects Committee at (520) 626-6721.

AUTHORIZATION: BEFORE GIVING MY CONSENT BY SIGNING THIS FORM, THE METHODS, INCONVENIENCES, RISKS, AND BENEFITS HAVE BEEN EXPLAINED TO ME AND MY QUESTIONS HAVE BEEN ANSWERED. I MAY ASK QUESTIONS AT ANY TIME AND I AM FREE TO WITHDRAW FROM THE PROJECT AT ANY TIME WITHOUT CAUSING BAD FEELINGS OR AFFECTING MY MEDICAL CARE. MY PARTICIPATION IN THIS PROJECT MAY BE ENDED BY THE INVESTIGATOR OR BY THE SPONSOR FOR REASONS THAT WOULD BE EXPLAINED. NEW INFORMATION DEVELOPED DURING THE COURSE OF THIS STUDY, WHICH MAY AFFECT MY WILLINGNESS TO CONTINUE IN THIS RESEARCH PROJECT, WILL BE GIVEN TO ME AS IT BECOMES AVAILABLE. THIS CONSENT FORM WILL BE FILED IN AN AREA DESIGNATED BY THE HUMAN SUBJECTS COMMITTEE WITH ACCESS RESTRICTED TO THE PRINCIPAL INVESTIGATOR, STUART COHEN, ED.D. OF THE COLLEGE OF PUBLIC HEALTH OR AUTHORIZED REPRESENTATIVE OF THE BORDER HEALTH 1SI! PROJECT. I DO NOT GIVE UP ANY OF MY LEGAL RIGHTS BY SIGNING THIS FORM. A COPY OF THIS SIGNED CONSENT FORM WILL BE GIVEN TO ME.

Participant signature

Today's Date

Signature of Witness (if necessary)

Today's Date

#### INVESTIGATOR'S AFFIDAVIT

I have carefully explained to the subject the nature of the above project. I hereby certify that to the best of my knowledge the person who is signing this consent form understands clearly the nature, demands, benefits, and risks involved in his/her participation and his/her signature is legally valid. A medical problem or language or educational barrier has not precluded this understanding.

Presenter's Signature

Date

Signature of Investigator

Date

### **Home Registration**

### **Diabetes and the Family**

#### Instructions and Guidelines:

1. This visit should not take more than 1-1 1/2 hours.

2. During this visit you will register the primary participant for the family program. Because the program requires that <u>at least</u> one adult family member participate in the program, this designated family member needs to attend the First Home Registration Visit. However, you should encourage as many family members as possible to participate in the program and attend the First Home Registration Visit.

3. Emphasize that the program is about healthy families, and that it is meant to teach families how to support the person in the family with diabetes AND how family members can lead healthy lifestyles for diabetes prevention.

4. Record the names of all the family members expected to participate on the attendance sheet ( see instructions on the Family Attendance form).

5. Be sure to take sufficient copies of the appropriate documents to be included in the family folder:

> \*Registration form (1) \*Family Attendance form (1) \*Consent forms (multiple) \*Evaluation forms (multiple)

Each adult who participates needs to sign the Consent form, and complete the Evaluation forms.

7. Confirm the time and location of the Kick-Off event, and any special needs the family may have.

## **Home Registration**



### **Diabetes and the Family**

|                   | Primary Participant (per   |  |
|-------------------|--|--|
|                   |  | First)   |
| Age:              | Date of Birth:   | Gender:  |
| Telephor          | 16:  |  |
| Address:          |  |  |
| 1. When           | were you diagnosed with  | diabetes?  |
| 2. Have y         | ou completed a diabete:  | s education program?                                 |
| 3. Was it         | given by a Certified Dial  | petes Educator?                                      |
| 4. How Ic         | ong was the program?   |  |
|                   | and the second |  |
| 6. Did a f        | riend or family member a   | attend with you?                                     |
| 7. Who (r         | relation/age)?   |  |
|                   | other kinds of diabetes e<br>ne visits, support groups   | ducation have you had<br>, written materials etc.)?  |
|                   |  | nber 18 years of age or older<br>program activities? |
| 10. How           | many family members do   | o you think will attend?                             |
| **(Promo          | otora should fill in Family  | Attendance form).                                    |
| 11. Will <b>)</b> | ou need assistance with  | N 2  |
| Transpor          | rtation? C   | hildcare?  |
| Signatur          | e:   |  |
| Promotora         |  |  |
|                   |  |  |

### **Family Attendance**

### **Diabetes and the Family**

#### Instructions and Guidelines:

- You will need this Family Attendance sheet at the First Home Visit and Registration. Take this sheet to all other program events to record family participation.
- 2. Record the name of the primary participant at the top of the page, and then again on the attendance list. Record his or her age, and write the date where it says "RV" (Registration Visit). (Once you've written the date of this visit, you'll only need to write a check mark to record other family members' attendance).
- 3. Next, write the name of the family member who has committed to attend the program with the primary participant. This person should be present during this visit. Record his or her age, and a check mark ( √ ) under "RV".
- 4. Record the names and ages of all the family members expected to attend, even if they are not present at this visit. For those who are present, be sure to record their attendance with a check mark ( $\sqrt{}$ ). Write an "x" by the name of anyone expected to attend in the future but who is not present during this visit.
- 5. If there are new participants at any point in the program, be sure to add their name to the list, record their age and relation to primary participant and mark attendance accordingly. They will need to compete Consent and Evaluation forms.

#### Key:

RV = Registration Visit KO = Kick Off Event 1,2,3,4,5 = Educational Sessions G = Graduation FV = Promotora Follow-Up Visit

EV = Evaluation Visit

|      |                               |      | Dia         | Diabetes and the Family | es   | pue     | the  | Fa   | milly |      | Ð,   |      |
|------|-------------------------------|------|-------------|-------------------------|------|---------|------|------|-------|------|------|------|
| mbre | Relación                      | Edad | RV          | <b>X</b>                | ~    | 2       | en   | 4    | 01    | U    | F    |      |
|      | Evimary<br>Participant        |      | date        | date                    | date | date    | date | date | date  | date | date | date |
|      | Princépal Family<br>Companion |      |             |                         |      |         |      |      |       |      |      |      |
|      |                               |      |             |                         |      | ni Sana |      |      |       |      |      |      |
|      |                               |      |             |                         |      |         |      |      | 12576 |      |      |      |
|      |                               |      | ing sources |                         |      |         |      |      |       |      |      |      |
|      |                               |      |             |                         |      |         |      |      |       |      |      |      |

### **Evaluation Questionnaire**

### **Diabetes and the Family**

To evaluate the effectiveness of this program, it is important to have every adult 18 years or older complete this questionnaire. Every adult needs to complete the questionnaire twice, once before they start the program and once when they have finished the program.

#### **General Instructions:**

- Each adult should complete the questionnaire for the first time during the First Home Visit (RV). If someone is not present at the First Home Visit, he or she should complete it at the beginning of the Kick Off Event or the first Session they attend.
- 2. Each adult who attends 3 or more of the Educational Sessions, should complete the questionnaire for a second time at the Program Evaluation Visit (EV). If a person who attended 3 or more Sessions is not available for the Evaluation Visit, you will need to make arrangements to administer the questionnaire at a time when he/she is available, either at their home or at the agency.
- 3. Ideally, you should arrange for a promotora or other staff member who is not involved in teaching the Sessions, the home visits or the events, to administer the questionnaire at the Evaluation Visit. You may also choose to use a third party evaluator not from your agency.

#### **Specific Instructions**

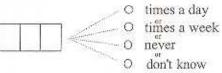
- 1. The instructions for completing the questionnaire are the same for both the first Registration Visit and the Evaluation Visit.
- Remember to bring enough copies of the questionnaire and pencils or pens with black ink.

#### Questionnaire Instructions continued:

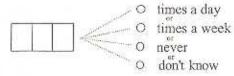
- 3. Pass out a copy of the questionnaire to each adult. As adults are looking at the form, read each line out loud and ask the adults to answer as accurately as possible.
- 4. Instruct each adult 1) to leave the "Individual Number" boxes blank, 2) to write today's date in the "Date" boxes, and 3) to print their first and last name in the spaces provided.
- 5. Completion of the remainder of the boxes is self-explanatory.
- Remind individuals to fill in bubbles completely and <u>not</u> to use checks or "x"s to indicate their answers.
- 7. Neither family members nor promotoras need to write in the boxes labeled "Official Use Only".
- 8. Once everyone has finished, review each questionnaire to make sure every question has been answered. Let the family members know that you are not checking to see if the answers are right or wrong, but making sure that everything is complete.
- 9. For adults who are not comfortable reading and marking the answers themselves, you will need to read the questions aloud and record the answer to each question on the questionnaire.
- 10. Place each family member's completed questionnaire in the Family File.

| 33123   |   |  | Diabetes and the Family   |  |                               | · · · · · · · · · · · · · · · · · · ·       |
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Participant's Name: \_ 33123 6. In the last week, how often did you eat vegetables (not including potatoes)?



In the last week, how often did you drink soda (not diet)? 7.



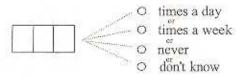
8. In the last week, how often do you drink sweetened drinks such as horchata, tamarindo, jamaica, kool-aide, Tampico, Gatorade®, or Sunny Delight®?

Date:

O Evaporated/condensed (canned milk)

○ Other

O I don't drink milk



9. In the last week, what kind of milk did you drink? (Bubble all that apply)

O Whole milk

O 2% milk

O 1% milk

- O Skim/nonfat milk
- 10. Do you think your family needs to eat healthier foods?
  - O Yes O No
- 11. How confident are you that your family can eat healthier food?

| Not Very Confident |    |     |    | Very Confident |
|--------------------|----|-----|----|----------------|
| 01                 | 02 | O 3 | 04 | 05             |

12. Do you think your family needs to be more physically active?

O Yes O No

13. How confident are you that your family can become more physically active?

| Not Very Confident |    |    |    | Very Confident |
|--------------------|----|----|----|----------------|
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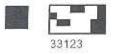
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page 2



#### 14. Please indicate if you "Agree" or "Disagree" with each statement:

Agree Disagree O Agree ○ Disagree a. We generally don't talk about diabetes b. We agree to buy special foods for the family member with diabetes O Agree O Disagree and the rest of the family members pretty much eat what they want. c. We talk about ways that all of us can eat foods low in fat and grease. O Agree O Disagree d. We talk about ways that all of us can be more active, planning walks, O Agree O Disagree or outdoor activities. e. Someone usually goes to the doctor with the family member that has O Agree O Disagree diabetes f. When we eat at a restaurant or pick up prepared food to eat at home, O Agree O Disagree we agree to pick a place that has healthy food choices. g. We often find ourselves criticizing the family member with diabetes O Agree O Disagree for not taking care of him/herself.

15. In our family, family members really help and support one another.

| Don't agree  |    |    |    | Agree |
|--------------|----|----|----|-------|
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DIABETES AND THE FAMILY

# Meeting the Family

REGISTRATION Home Visit #1

## Wrap Up!

- 1. At the end of the visit, review the family file.
- 2. Be sure the following forms are completed:
  - \* Pre-Registration- completed before the visit
  - \* Home Registration- for the primary participant only
  - \* Consent Form- for each adult family member
  - \* Evaluation- for each adult family member
  - \* <u>Family Attendance Sheet</u>- with names, ages, and relation to primary participant of all the family members who plan to participate in the program

DIABETES AND THE FAMILY

# Welcome!

KICK OFF

### Main Ideas

- At the Kick Off event families will meet other families that are participating in *Diabetes and the Family*.
- It is an opportunity for families to enjoy a healthy meal together.
- Families can participate in games and physical activities with other families.
- Everyone will confirm that they have signed up for a fun and informative program.

### **Objectives**

At the end of this session, families should have...

- met other families.
- eaten a low fat, low sugar, and high fiber meal.
- participated in at least one physical activity.

This event relies on the creativity, expertise and resources of the promotoras. The following section is provided as a guide for planning and implementation.

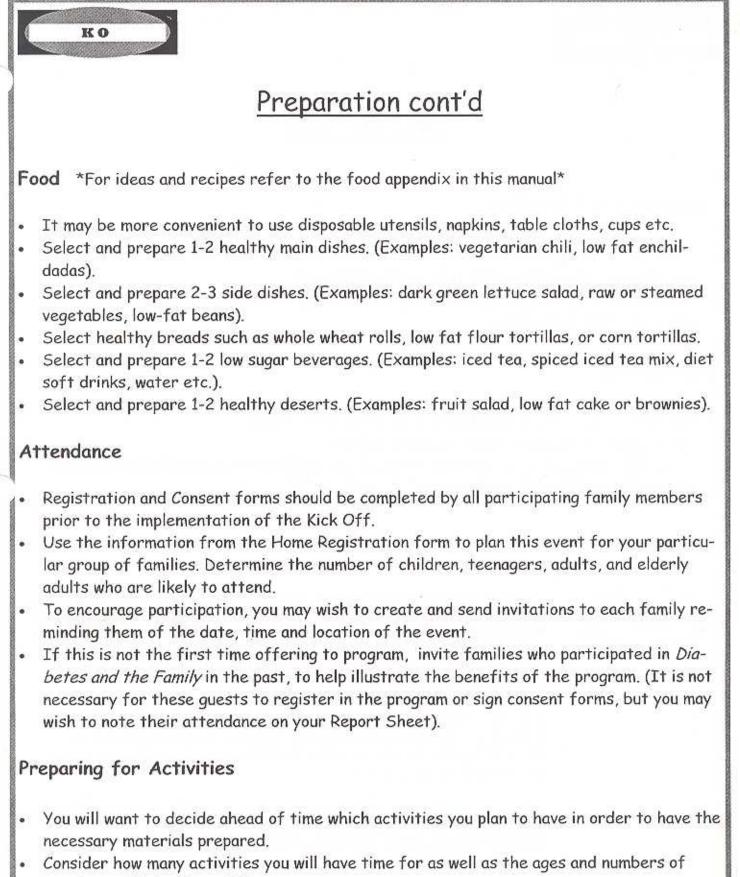
#### Location

KO

- Select a place that has bathrooms, protection from intense sun or rain, and sufficient space for tables, chairs, or picnic tables. (Example: church, park, community center).
- Kitchen facilities are desirable, but food can also be prepared ahead of time and brought to the event.
- It is important to choose a safe place, acceptable for all families.
- It would be better to reserve a place just for this *Diabetes and the Family* event and its participants.

#### Materials and Supplies

- Name tags
- Family Attendance sheets
- 1 table at entrance to greet families, take attendance, sign consent forms etc.
- 1-2 tables for serving food buffet style
- Several tables and chairs for families to sit and eat
- Music (something festive, could be live or tape/cd)
- Decorations such as balloons, streamers etc. (optional)
- Copies of food recipes (optional)
- Prizes for games and activities (optional)



- people you think will participate.
   Use activities appropriate for a celebration with various families. You may select some
  - thing from the Appendix for ideas.

# <u>Activities</u>

#### Attendance and Greetings

KO

- As people arrive greet them and mark their attendance.
- · Give them a name tag to write their name on and wear.
- Show them where to go until everybody has arrived (to the refreshment table for a beverage, to their seats etc.).

#### Introductions

- When you have everybody's attention, make an introduction.
- Introduce yourself, and other facilitators if any.
- + Give an introduction to the program, it's purpose, and brief overview of what to expect.
- · Have each participant introduce him or herself





To begin introductions and "break the ice" you can have participants state their names and answer a funny or interesting question. Try modeling the introduction first for participants to follow.

Example: "Let's go around and introduce ourselves. Why doesn't everybody say their name, and tell the group something about your family that you'd like to share. I'll go first. I'm (name) and every Christmas vacation my family goes to Hermosillo to see my parents."

Choose the next person for introductions and proceed until everyone has had a chance to participate. Try choosing a question or statement that will make people laugh or take interest in each other and feel relaxed. Statements about families are recommended.

### Activities cont'd ...

#### The Order of the Following Activities Can Be Determined by the Promotoras...

Games \*for ideas refer to the Appendix in this manual\*

- · Select 1 or more games that encourage families to work as a team
- Example: Scavanger Hunt

KO

#### Food

- Serve food buffet style
- Invite families to serve themselves
- Talk about why this food is considered healthy
- Share recipes with the families

#### Discussion and Testimonials

- Discussion should include
  - \* a brief overview of the main ideas of the program
  - \* families can introduce themselves to other families
  - \* testimonials from families that previously attended the program
  - \* confirm date/time of Session #1

Wrap Up!

See following page

DIABETES AND THE FAMILY

# Welcome!

KICK OFF CONCLUSION

## Wrap Up!

Discussion Questions to Conclude the Kick Off...

1. Name another family that participated today.

2. What did you think of the food you ate today?

4. What did you think of the physical activity you did?

DIABETES AND THE FAMILY

# Families and Diabetes

SESSION #1

### <u>Main Ideas</u>

This Session explains the reason for a family diabetes education program.

It will give a general overview of diabetes and its risk factors.

It will also describe the characteristics of healthy families with diabetes.

### **Objectives**

At the end of Session #1, families should be able to...

state one reason they are participating in the program.

list 2 or more characteristics of a healthy family.

list 2 or more diabetes risk factors.

### Preparation

#### Special Considerations for Session #1: Diabetes and Families

- In the first Session, it is important to make all family members feel comfortable.
- Greet families at the door so they know they are in the right place.

Session #1

- If you think families cannot remember each other's names since the Kick Off, you may wish to use name tags again for this Session.
- Consider setting up snacks before the Session starts, so you can invite families to help themselves to refreshments while they wait to begin.
- Families may feel more comfortable if they have something to do right away and socialize over snacks.
- At the start of the Session, reintroduce yourself and consider having family members introduce themselves again.
- Consider a name game in which each person says their name and using the first letter of their name, describes something about themselves. For example: "My name is Anna and I love to be Active. This game will help others remember each others' names.
- This Session has a lot of information. Pay attention to the time so you have time to cover all the components.

# Recommended Healthy Snack: Sugar free lemonade made from mix, bottled water and orange wedges and/or pretzels

- There is only time to sample snacks in this Session.
- Select an easy snack that takes little or no preparation.

#### Recommended Physical Activity: Relaxation

- Select an activity you are certain everyone can do, so everyone is included in the first Session.
- Try "Breathe Deeply" or "Good Morning World" exercises (in the Appendix)

### Preparation continued...

#### Recommended General Activity: La Lotería

- Playing this game after you have discussed the risks, symptoms and complications of diabetes using the flipcharts, will give family members an opportunity to review many of these ideas.
- If you decide not to use La Lotería, select a general activity that reviews the concepts introduced in the Session #1 flipcharts.
- + Each La Lotería game set has cards for 12 players
- All players must have at least one game card; if there are enough cards, promotoras may
  decide to let players have two or more cards.
- Distribute a handful of dried beans to each player to be used as game card markers.
- To play the game,

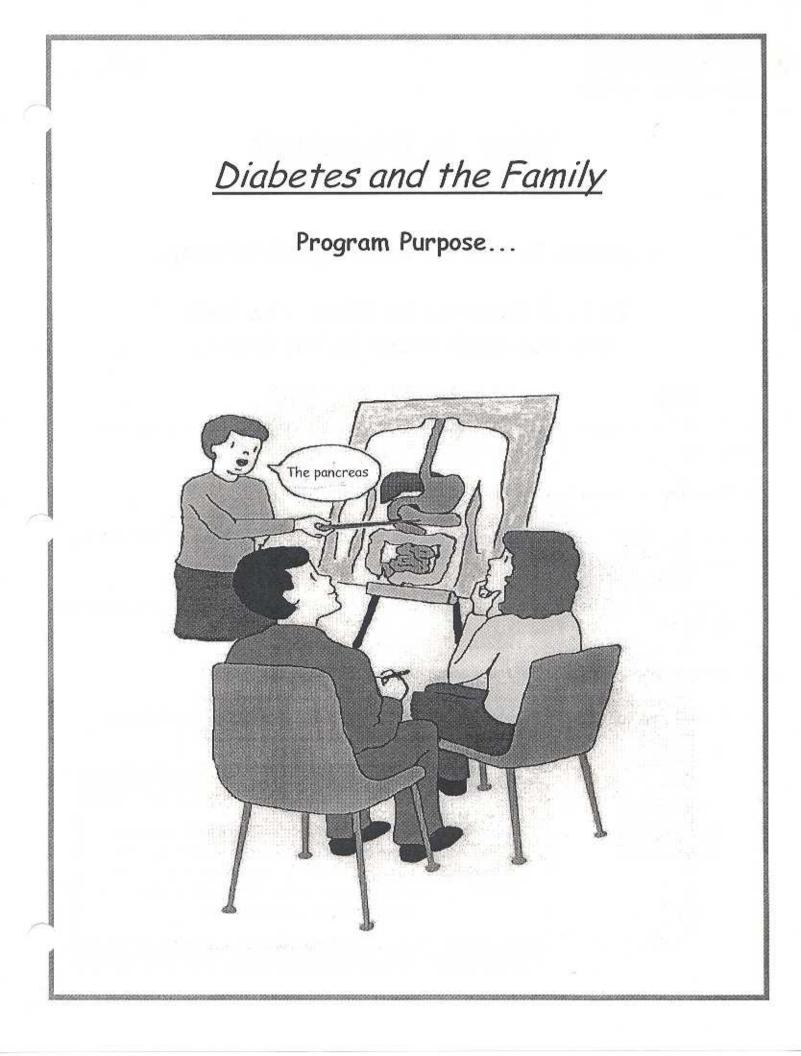
Session #1

- 1. A caller draws one of the 36 cards from the deck, calls out the picture and reads the phrase or expression.
- 2. The players then mark the corresponding picture on their game card with a dried bean.
- 3. The caller asks the group "What does this dicho have to do with diabetes or with building a healthy family?"
- 4. Discuss each card the first time the game is played.
- 5. This process will make the game slow but is important to help players learn the concepts and discuss the ideas.
- 6. The first player who completes a horizontal, vertical or diagonal, calls out "Loterid".
- 7. Ask the winner to call out all the winning pictures.
- Ask the winner to pick out their favorite picture or *dicho* and review why it is important to diabetes or healthy families.

# 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.





### What Is Diabetes?

CHART #2

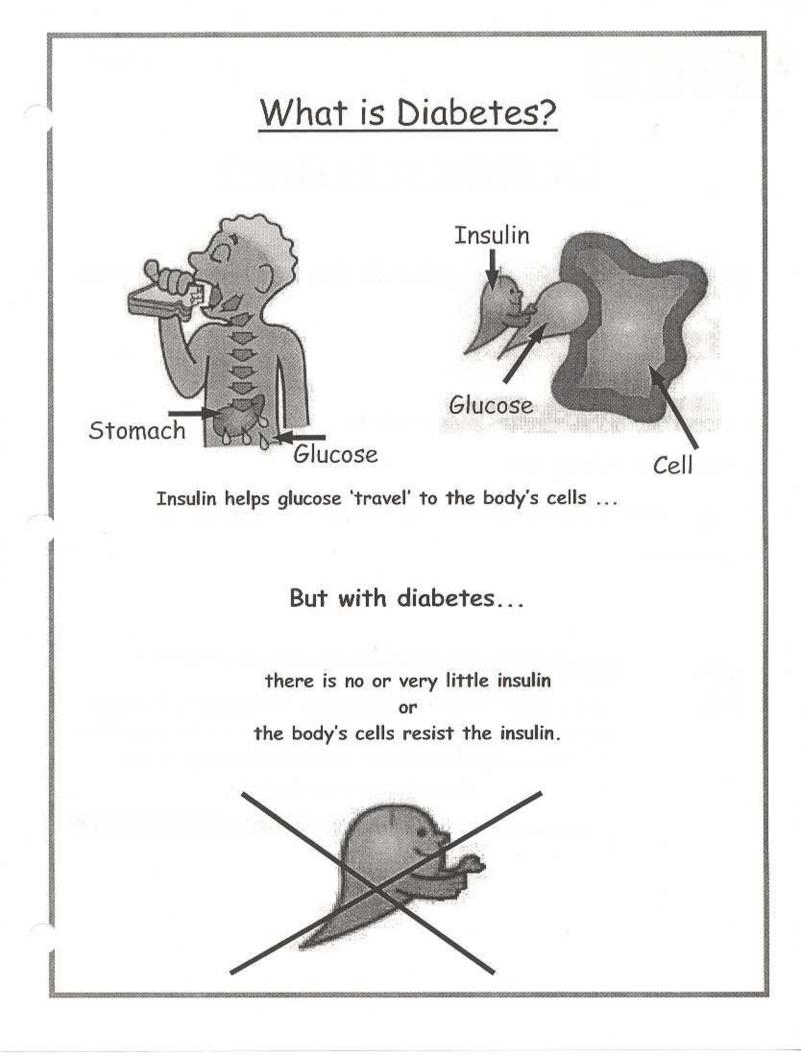
Diabetes Is Like An Interrupted Pathway...

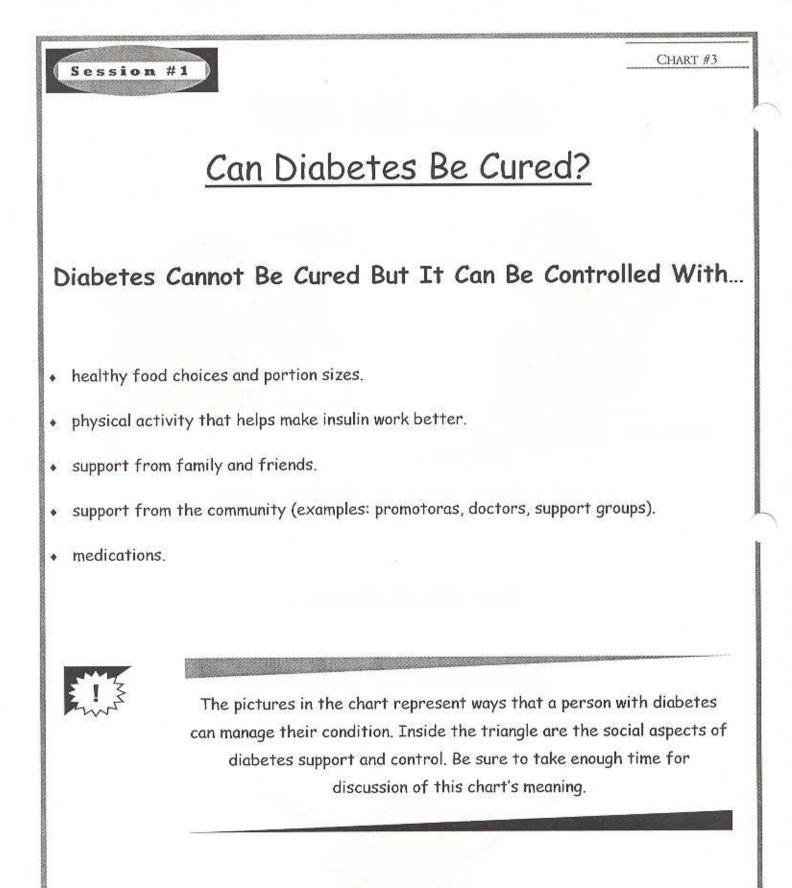
It Is A Condition In Which The Body Has Too Much Sugar In The Blood...

- 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.



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.

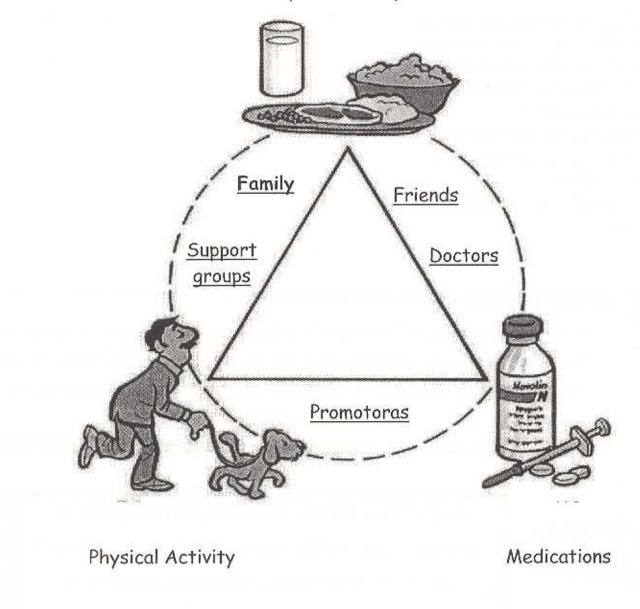




### Can Diabetes Be Cured?

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

Healthy foods and portions



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

### Dangers And Complications Of Poorly Controlled Diabetes are...

- 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

Session #1

- sexual problems in women and men
- foot and leg amputations
- kidney failure
- problems with eyes and blindness
- heart attack
- stroke

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 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>

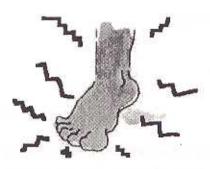


Tiredness





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

Session #1

- 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 that may be at risk? Why? Which of these factors can be changed or controlled? Which can not?

# Who Is At Risk For Diabetes?

People Who Are ...



Physically Inactive



Overweight



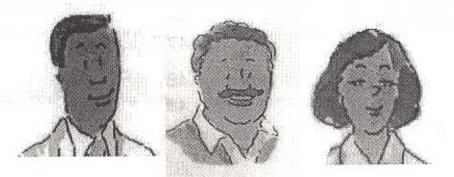
Over 40 Years Old



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

Session #1

- weight loss
- blurred vision
- feeling thirsty
- urinating a lot
- grouchy and in bad moods

# Discussion

Based on your previous discussion of risk factors and who may be at risk for diabetes, lead a discussion on what someone may 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

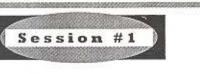


CHART #7

# <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...

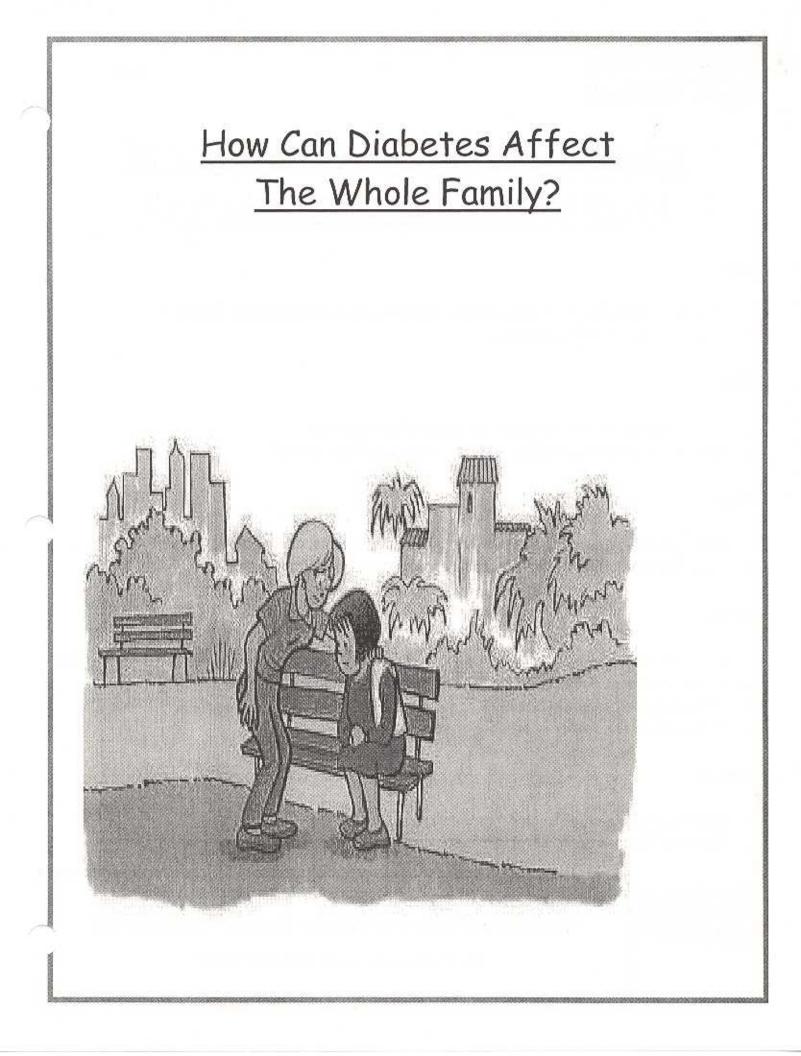
...because nobody seems to understand the illness and fear what might happen. ...asking "Why does this have to happen to our family?" ...believing that "This illness will change what our family can do." ...believing that "Our family can't have fun anymore."

Create walls or barriers between themselves 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>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

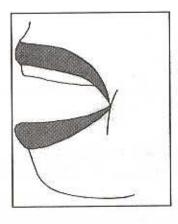
Discussion

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

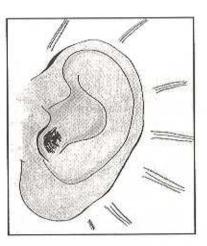
Ask the group if they can identify any of these characteristics in their families. If so, do they find that these characteristics help

their family deal with diabetes? How?

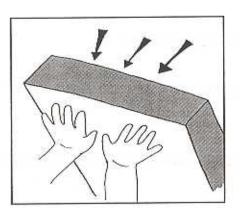
# <u>What are Some Characteristics of</u> <u>Healthy Families with Diabetes?</u>



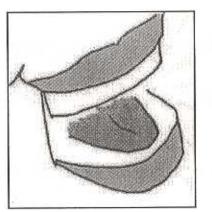
Talk



Listen



Support



Ha Ha Ha Ha Ha

Laugh

DIABETES AND THE FAMILY

# Wrap Up!

SESSION #1 Conclusion

# Discussion Questions to Conclude Session #1: "Families and Diabetes"

- 1. Why are you participating in the program *Diabetes and the Family?*
- 2. What are 2 characteristics of a healthy family?
- 3. Name 2 or more risk factors for diabetes.

DIABETES AND THE FAMILY

# Being Healthy

SESSION #2

### <u>Main Ideas</u>

- This session discusses the role of food and exercise in preventing and controlling diabetes.
- It offers general guidelines for making healthy food choices, and gives ideas for preparing healthy foods.

This session gives ideas for building more physical activity into the day.

 It also describes safety guidelines to follow when doing physical activity or exercise.

#### **Objectives**

At the end of Session #2, families should be able to...

- identify 3 ways to make healthier food choices.
- describe 3 ways to eat healthy when they get together with family or friends.
- identify 2 ways to build more physical activities into their day as a family or as individuals.

### Preparation

#### Special Considerations for Session #2: Being Healthy

Sessions #2-5 include a review section.

Session #2

- The purpose of the review is to encourage family members to share what they remember from the previous week.
- Do not re-read the information from these charts to them. Enourage them to answer the questions posed by each chart.

#### Recommended Foods for Healthy Snack: Skim or 1% milk and ginger snaps and/or low-fat vanilla wafers

- There is only time for food sampling but not a demonstration.
- This Session discusses low fat choices. The recommended snack foods will give family members a chance to taste these foods mentioned in this Session.

#### Recommended Physical Activity: Stretching

- Think about everyone's level of comfort with the activity in Session #1.
- If family members seem ready to move more, select the upper body stretch in the Appendix or a similar activity that involves the arms and upper body.
- If family members have limited mobility, consider another relaxation exercise.



### Preparation cont'd

#### Recommended General Activity: Reading Food Labels

Bring food packaging to class to demonstrate food labels.

Bring:

1) Milk cartons:

non-fat / skim milk 1% 2% and/or whole milk

low fat or fat free

regular

2) Salad Dressing and/or mayonnaise:

3) Bread:

4) Cereal:

high fiber, (≥ 2 grams of fiber) low fiber, (< 2 grams of fiber)

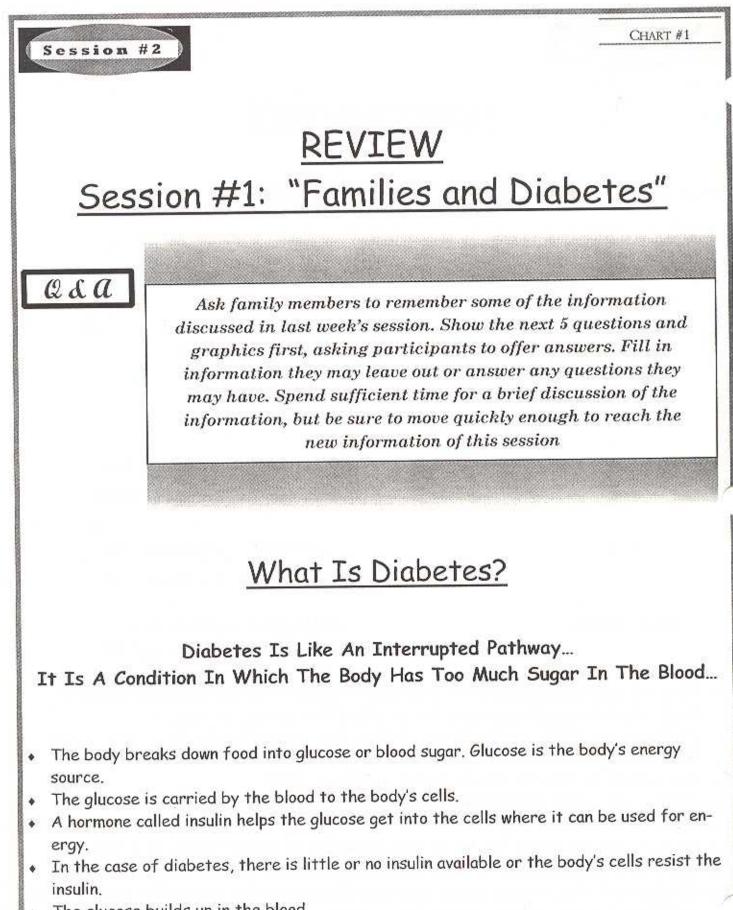
high fiber, (> 2 grams of fiber)

low fiber, (< 2 grams of fiber)

5) Snack foods:

pretzels, (they are low fat) potato chips, (they are high fat)

- Have 2-3 packages with labels from different food items for each family, so that one family might have packages from 1% milk, a low fiber cereal and pretzels.
- Holding up one of the food packages, illustrate how the food label looks on the package and ask everyone to locate the labels on their packages.
- Ask them to locate first the line that states grams of fat.
- Ask the family that has the skim or 1% milk package to read the grams of fat aloud.
- Follow by asking the family that has the 2% milk package to read the grams of fat aloud.
- Then ask the family that has the whole milk package to read the grams of fat aloud.
- Ask if they think there is much difference between these types of milk.
- Continue with this exercise, comparing grams of fat in fat free and regular salad dressing and /or mayonnaise; and pretzels and potato chips.
- Repeat the steps by comparing grams of fiber in breads and cereal.



- The glucose builds up in the blood.
- A blood test can show if someone has a high level of blood glucose and has diabetes.

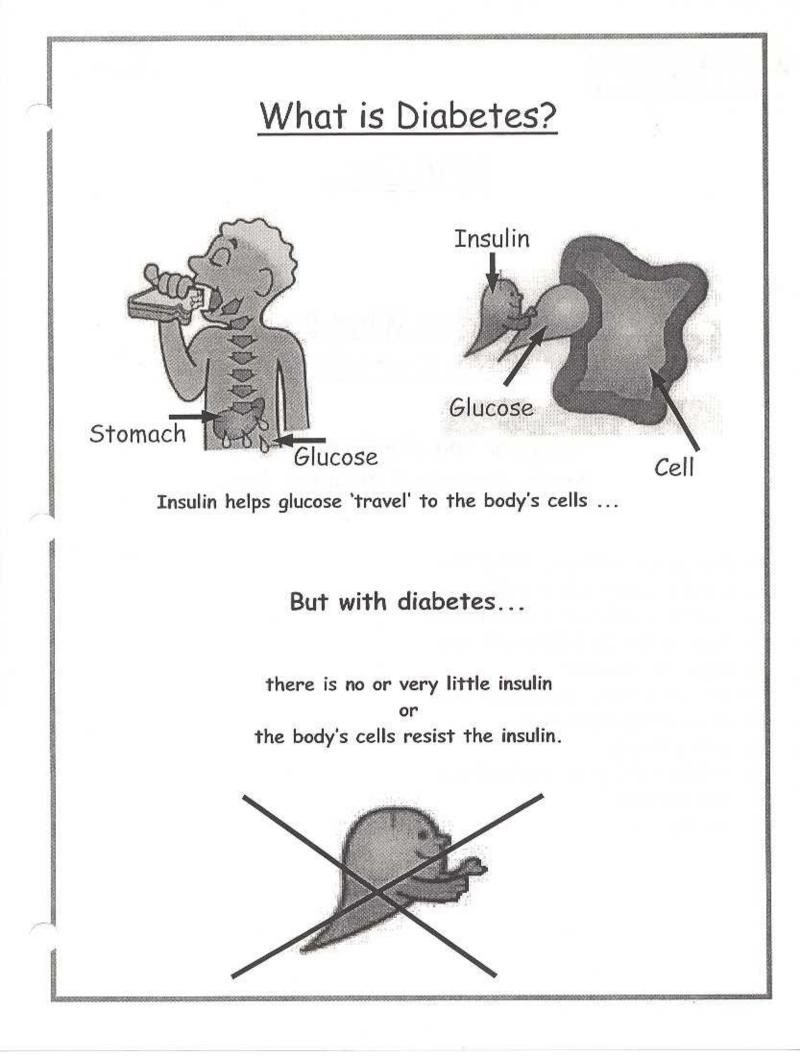


CHART #2

# REVIEW ....

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

### Dangers And Complications Of Poorly Controlled Diabetes are...

- 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

Session #2

- · Sexual problems in women and men
- Foot and leg amputations
- Kidney failure
- Problems with eyes, and blindness
- Heart attack
- Stroke

# <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

CHART #3

# REVIEW ....

### 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

Session #2

- Not physically active
- + Hispanic, Native American, African American, or Asian decent
- Have diabetes in the family (heredity)

# Who Is At Risk For Diabetes?

People Who Are...



Physically Inactive



Overweight



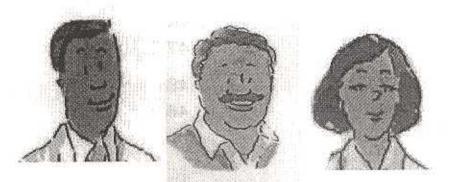
Over 40 Years Old



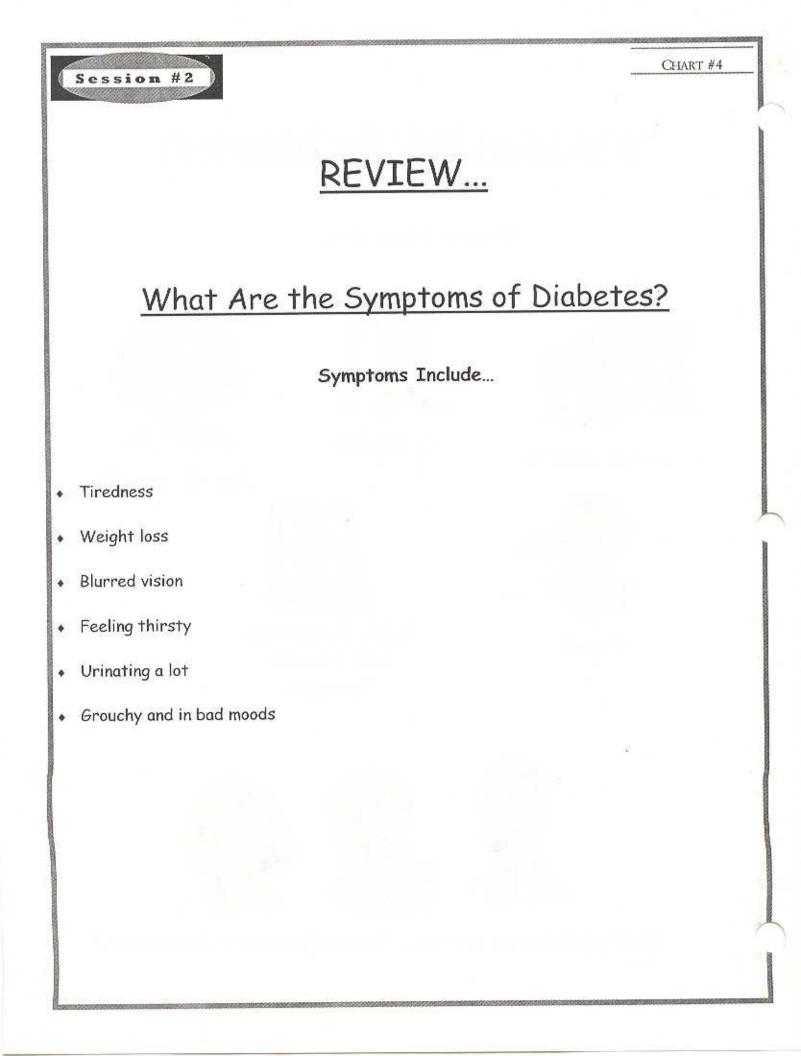
Smokers



Related to someone with diabetes (heredity)



Of Hispanic, Native American, African American or Asian Decent



# What Are the Symptoms of Diabetes?



Fatigue and Tiredness



Irritability and Frustration



**Blurry Vision** 



Weight Loss



Urinating Frequently

CHART #5

# REVIEW ....

### <u>What are Some Characteristics of</u> <u>Healthy Families with Diabetes?</u>

#### Listen

Session #2

- 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.

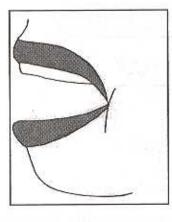
#### Value

- 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.

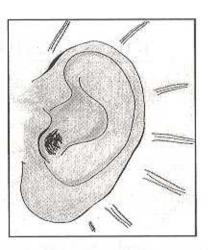
#### Laugh

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

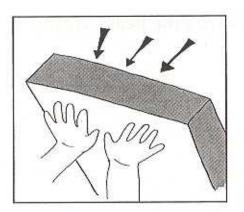
# <u>What are Some Characteristics of</u> <u>Healthy Families with Diabetes?</u>



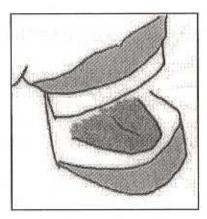
Talk



Listen



Support

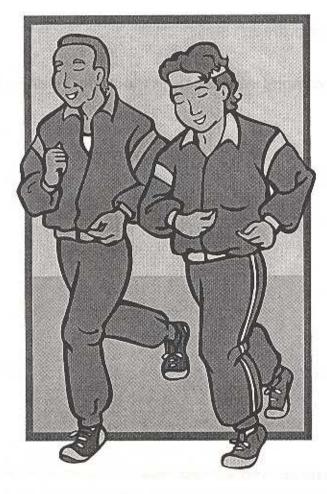


Ha Ha Ha Ha Ha

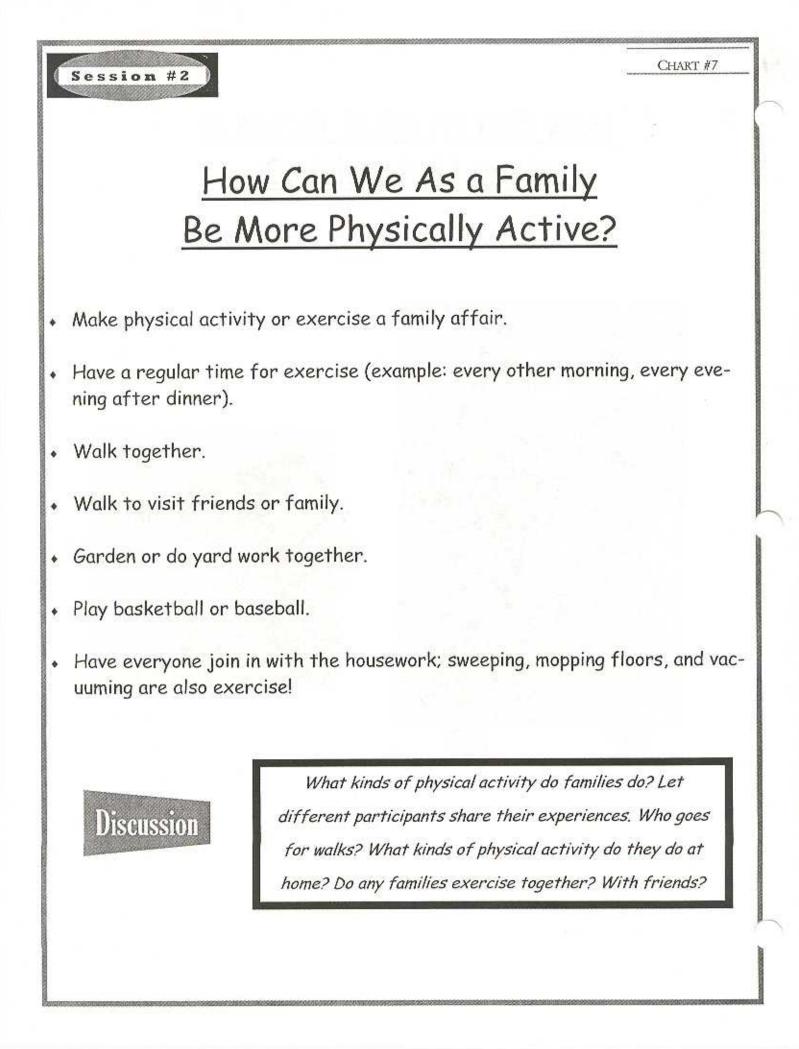
Laugh

# CHART #6 Session #2 SESSION #2: "Being Healthy" How Can Physical Activity Keep Us Healthy? Physical activity helps insulin work better. When insulin works better, more glucose gets into the cells lowering the glucose level in the blood. Physical activity helps strengthen the body's muscles. Physical activity exercises the heart and keeps the heart strong.

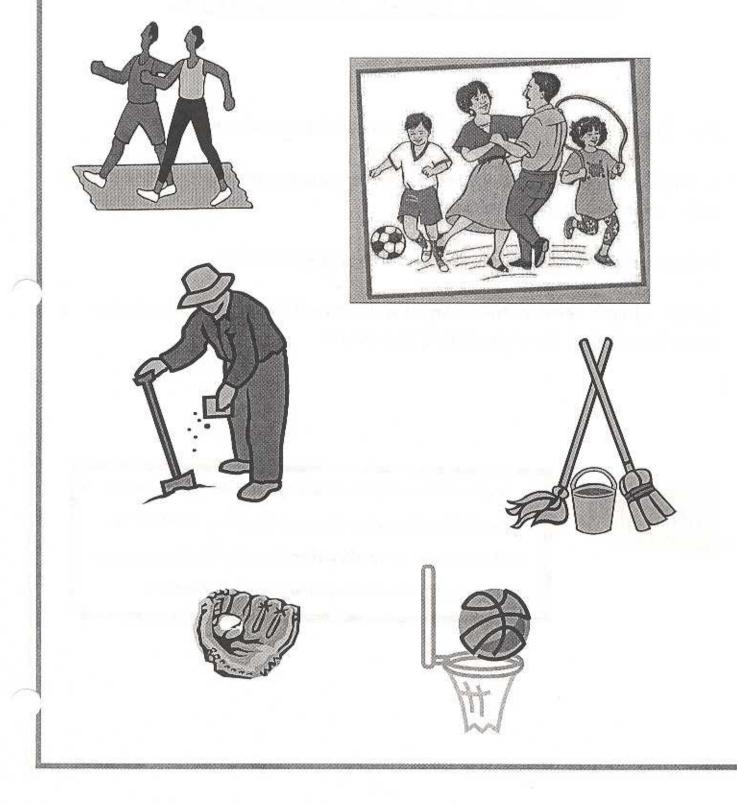
# <u>How Can Physical Activity</u> <u>Keep Us Healthy?</u>

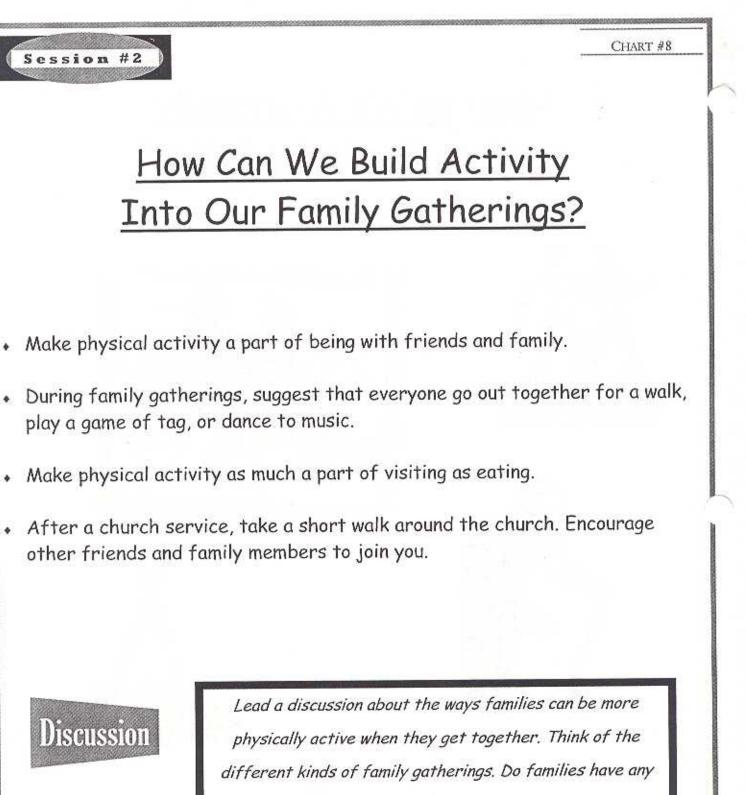




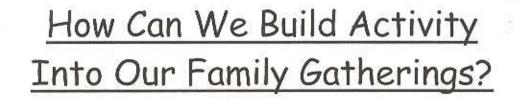


<u>How Can We As a Family</u> <u>Be More Physically Active?</u>

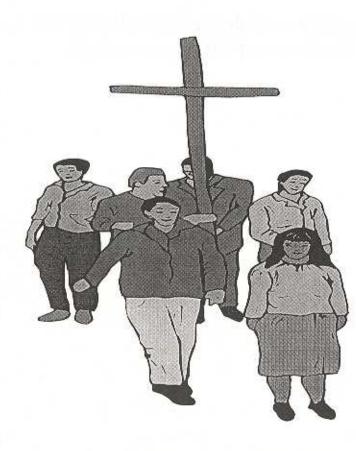




ideas to share about how to be more active?













## <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.

Session #2

 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).

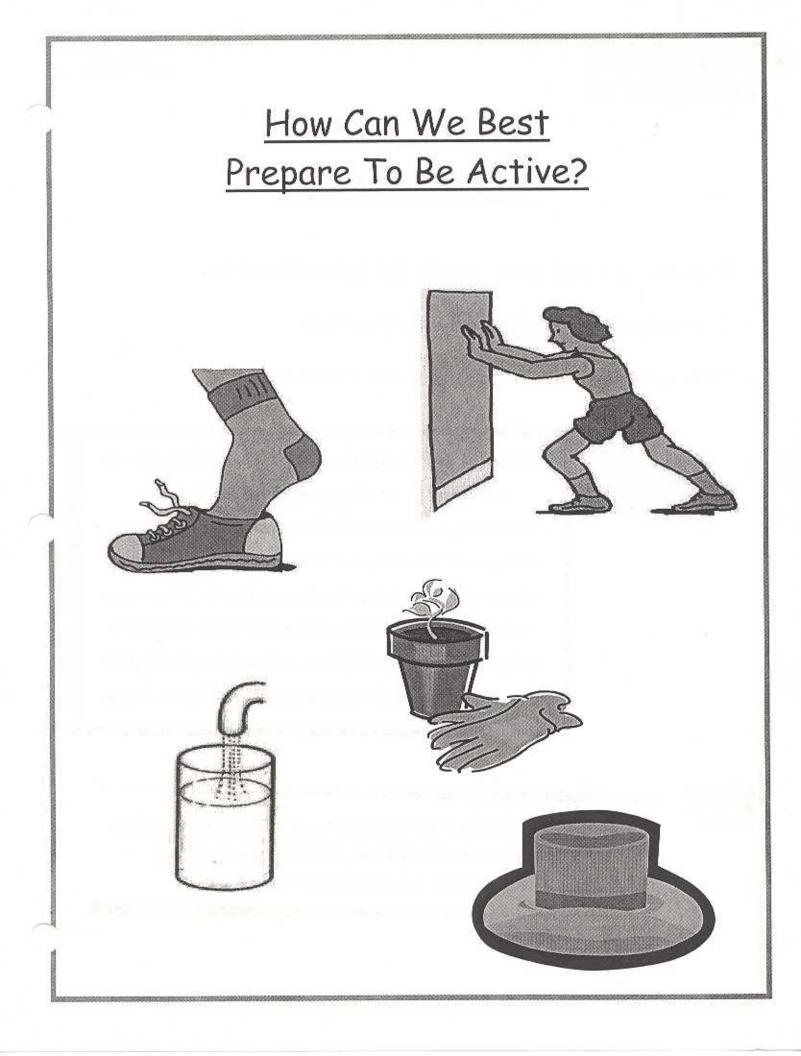
### How Much Physical Activity Is Good? \*30 minutes \*3 or 4 days / week Sun Mon Tue Wed Thu Fri Sat

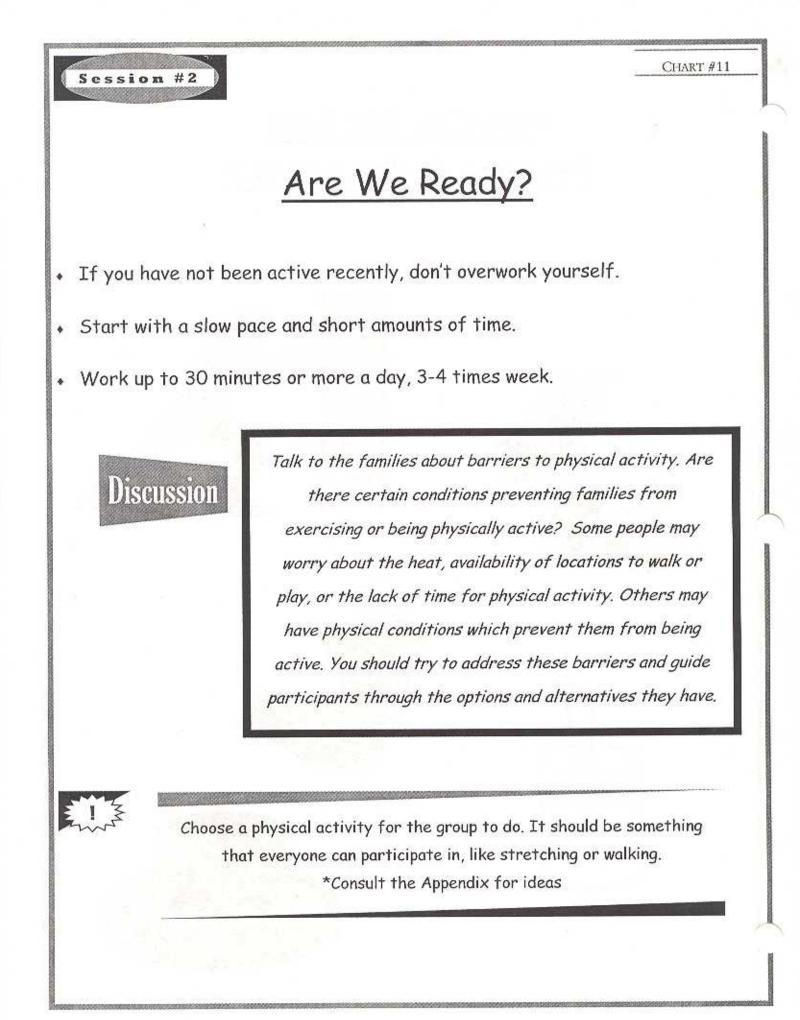
CHART #10

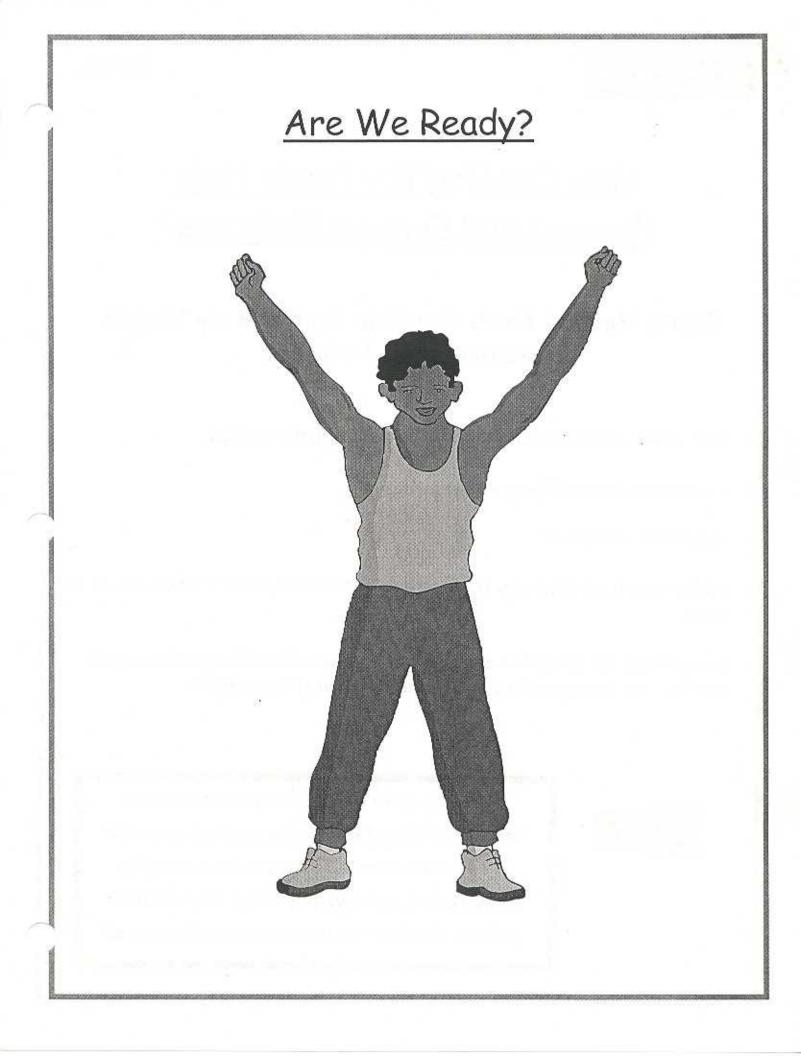
### <u>How Can We Best</u> <u>Prepare To Be Active?</u>

- 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 classes 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.

Session #2







### <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.

Session #2

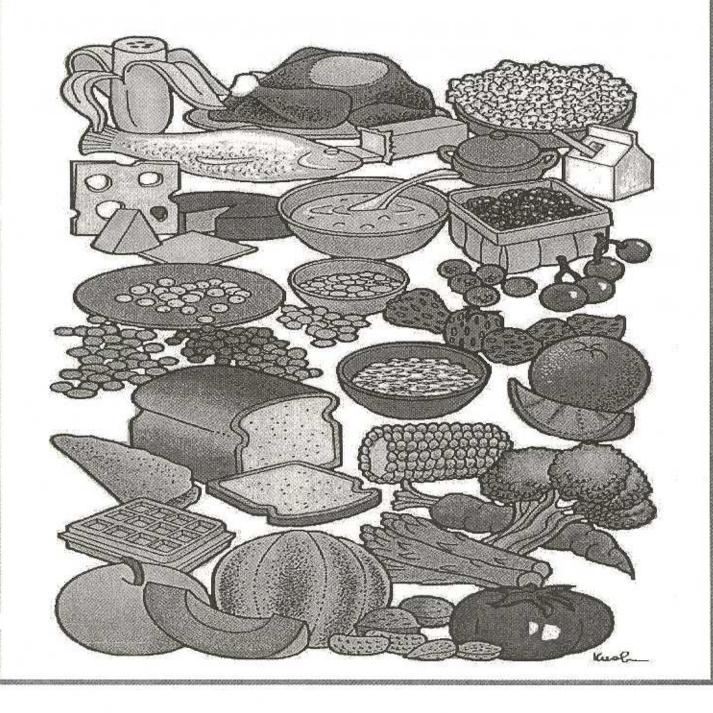
- whole grain foods like high fiber cereals and breads, corn or whole wheat tortillas.
- Low and non-fat foods like skim, fat free, or non-fat milk, non-fat yogurt, low-fat sour cream and fat-free salad dressing or mayonnaise.

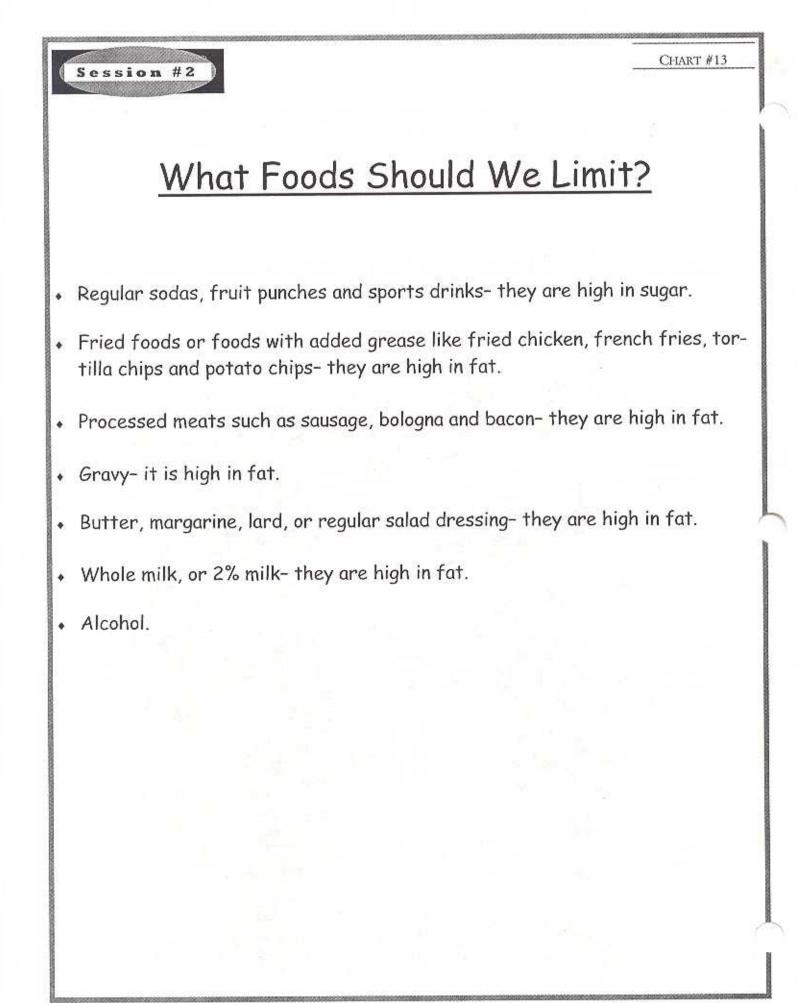
### Discussion

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?

### How Can Healthy Foods Help Prevent and Control Diabetes?

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





### What Foods Should We Limit?



regular sodas



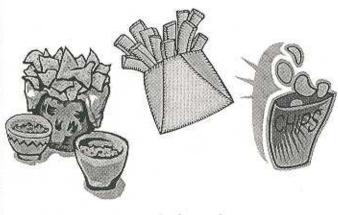
alcohol



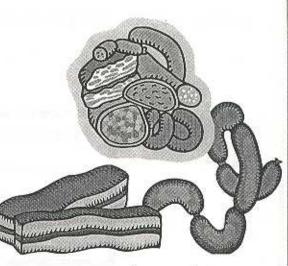
whole milk 2% milk



butter, lard, margarine



fried foods



processed meats



gravy



### How Can We Prepare Healthy Meats?

Trim fat off meat.

Session #2

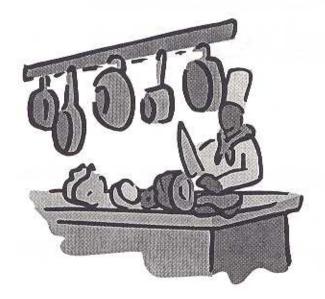
- Take skin off chicken and turkey.
- Bake, grill or broil meats.
- Drain fat or grease from cooked meat.
- Don't fry food- the grease adds fat to food.

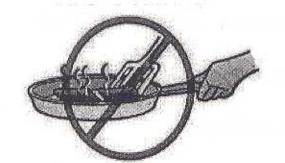


Have participants share their experiences with how they buy, or prepare their foods. Have they tried any of these techniques? Why? Why not? Does it seem like it's an easy or difficult

process?

## How Can We Prepare Healthy Meats?







Bake or Grill Meats



Cut Fat or Skin Off Meat

Don't Fry or Add Oil or Butter



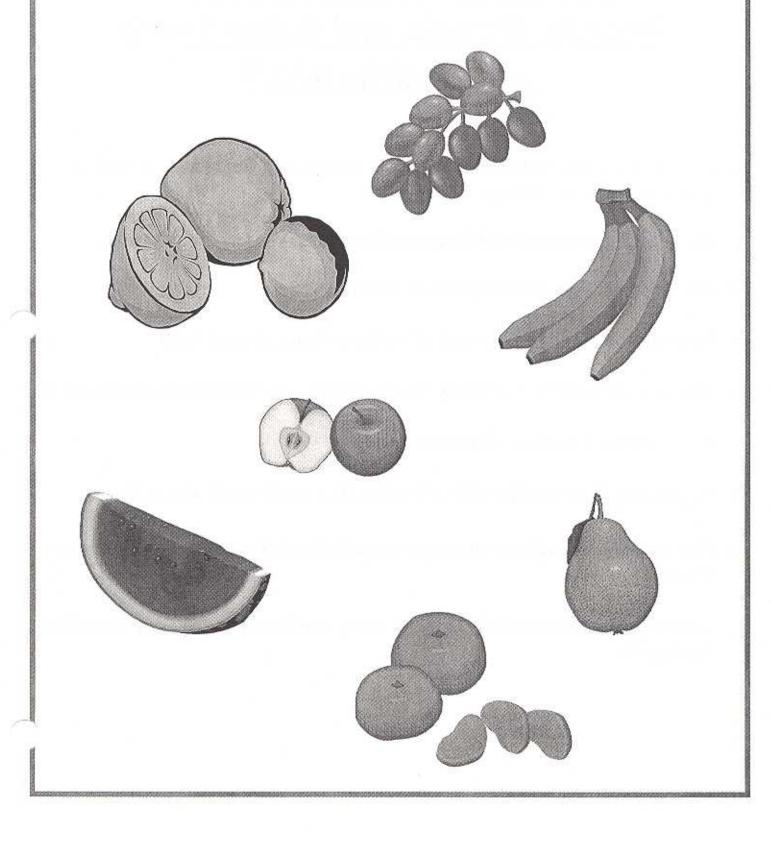
## <u>How Can We Buy and Prepare</u> <u>Healthy Fruits and Vegetables?</u>

Steam or boil vegetables.

Session #2

- 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 than 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>



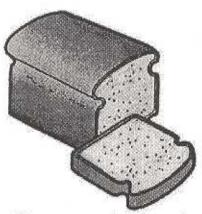
## <u>How Can We Buy and Prepare</u> <u>Breads, Cereals, and Baked Goods</u> <u>in a Healthy Way?</u>

- 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.

Session #2

- Try making flour tortillas with 1/2 white flour + 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 Chee-zit® 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

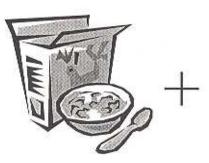




Corn tortillas instead of flour



Fat free snacks





Use skim milk with cereal



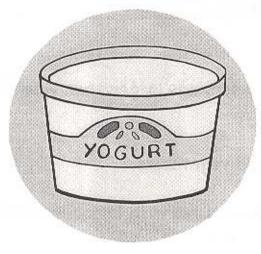
## <u>How Can We Buy and Eat</u> <u>Healthy Milk Products?</u>

- Drink fat-free (non-fat or skim) or low-fat (1%) milk.
- Eat low-fat or fat-free yogurt.

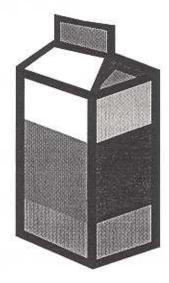
Session #2

Avoid ice cream. Choose low-fat frozen yogurt instead.

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



Non-fat/ Fat Free Low-fat



Non-fat/ Skim Low-fat (1%)



Low Fat Frozen yogurt

## <u>How Can We Eat Healthy 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

Session #2

Discuss the barriers to eating healthy at social gatherings. Ask participants about the celebrations they attend. 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 healthy? Why? Why not? <u>How Can We Eat Healthy When We</u> <u>Are Visiting or Celebrating</u> <u>With Friends and Family?</u>



DIABETES AND THE FAMILY

# Wrap Up!

SESSION #2 CONCLUSION

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

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

DIABETES AND THE FAMILY.

# Goal Setting

SESSION #3

### Main Ideas

- This session gives guidelines for examining one's own health behaviors.
- It describes steps for setting goals to change health behaviors to prevent or better manage diabetes.
- This session describes steps for working toward goals.
- It also offers tips for maintaining healthy behaviors.

### **Objectives**

At the end of Session #3, families should be able to...

- identify at least 2 health behaviors they would like to work toward.
- describe their plans for working toward their goal.
- share their health behavior goals with group facilitators and/or other program participants.

### Preparation

#### Special Considerations for Session #3: Goal Setting

• In this Session, families are asked to work together.

Session #3

- They will need pencils to fill in their health behavior goals.
- + Be sure to give families enough time to decide together and discuss the goals.
- Allow enough time for families to share their goals with the group.

#### Recommended Healthy Snack: Iced tea, bagels and low fat cream cheese

- This Session allows time for food sampling but not a demonstration.
- This Session suggests making new food choices. Bagels and low fat cream cheese may not be as familiar to some families.
- Consider asking families if they usually eat these foods.
- Ask if they've tried toasted bagels for breakfast with sugar free jelly before. It is a good
  alternative to a sweet roll or doughnut.

#### Recommended Physical Activity: More Stretching

- + Consider having family members add leg stretches for this week's physical activity.
- Select the leg stretches from the Appendix or a similar activity that involves legs and hips.
- If someone has limited mobility, consider doing the upper body stretches or relaxation exercises after doing this week's leg stretches.

### Preparation cont'd

#### Recommended General Activity: Family Yarn Toss

- This game illustrates that family success in accomplishing a task or achieving a goal depends on the family being connected.
- Have everyone form a large circle.

Session #3

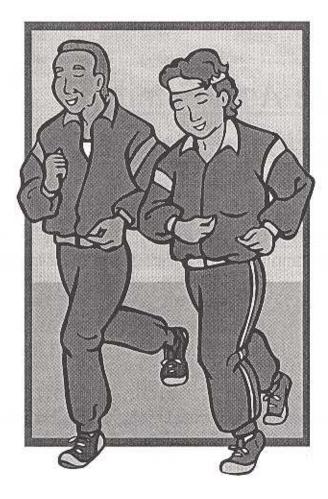
- One person holds on to an end of the yarn ball and throws the ball to another person in the circle.
- Before throwing the ball, the thrower calls out the name of the person to whom he or she will throw the yarn ball.
- The catcher holds on to the yarn and throws the ball to another person, also calling out the new catcher's name.
- The game continues until everyone is connected.
- Ask two people in the circle to drop their end of the yarn.
- Ask the family members, "What happened to the yarn web when two people did not participate?" "What happens in our own families when someone does not participate?"

Discussion: To get families to think about the importance of family connections in solving problems, ask families:

"What happened when someone had trouble catching the ball of yarn?" "Did someone help retrieve the ball?"

"Can we think about what we can do to help out someone who has trouble participating?"

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



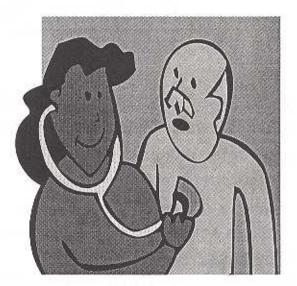


CHART #2

### 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.

Session #3

- 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 ....

Session #3

### <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 it should be at least 10 minutes at a time).

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



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

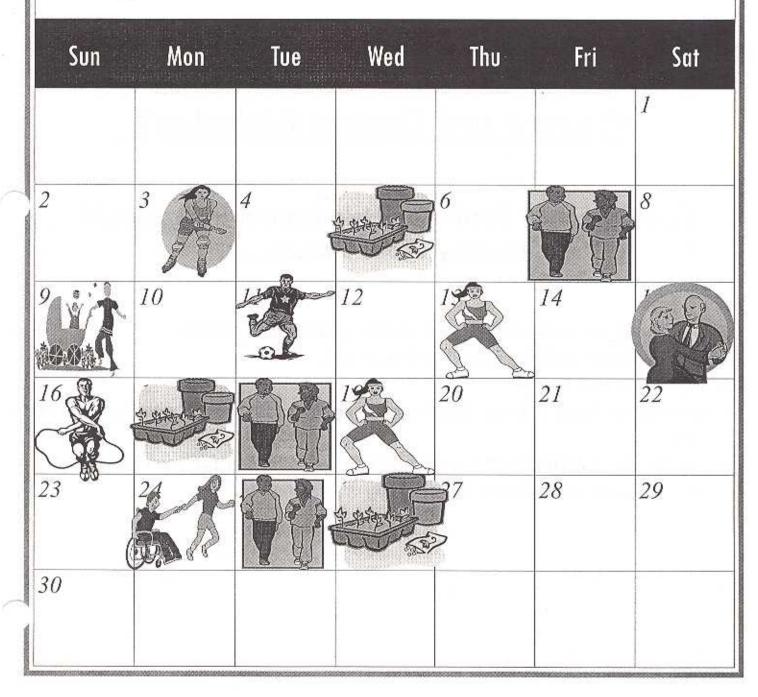


CHART #4

### REVIEW ....

### <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.

Session #3

- whole grain foods like high fiber cereals and breads, corn or whole wheat tortillas.
- low fat and non-fat foods like skim 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...

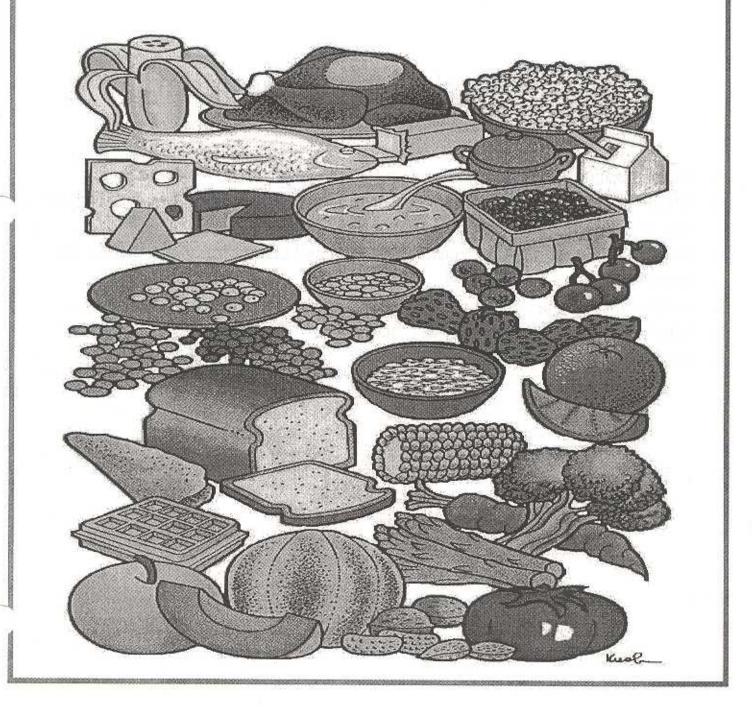


CHART #5

### REVIEW ....

### What Foods Should We Limit?

- Regular sodas, fruit punches and sports drinks- 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.

Session #3

- 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?



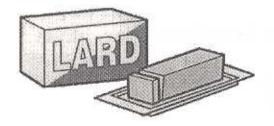
regular sodas



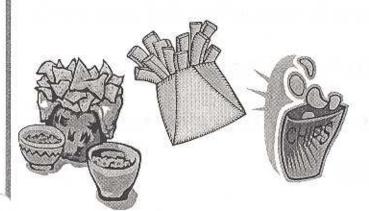
alcohol



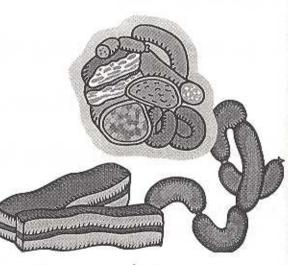
whole milk 2% milk



butter, lard, margarine



fried foods



processed meats



gravy

# SESSION #3: "Goal Setting"

CHART #6

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

Start by talking.

Session #3

Discuss just 2 or 3 changes you would like to make.

\* Would you like to make different food choices?

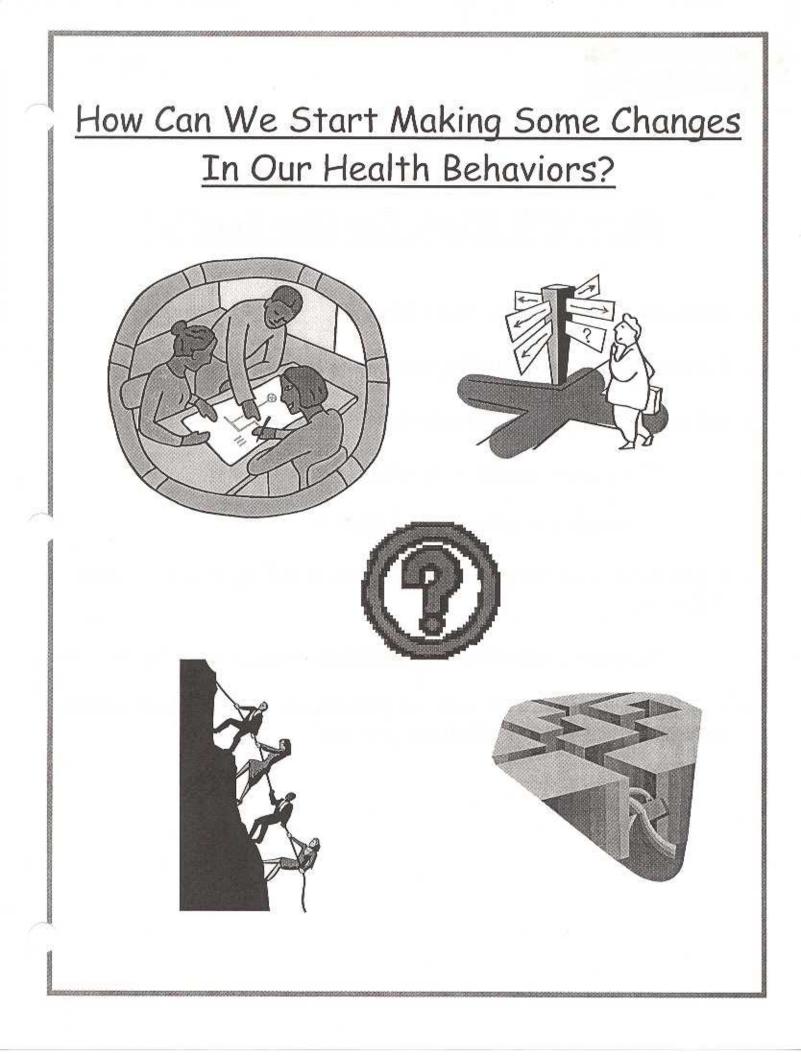
\* Would you like to be more active?

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

CHART #7

Talk about several different health behaviors.

Session #3

- 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!

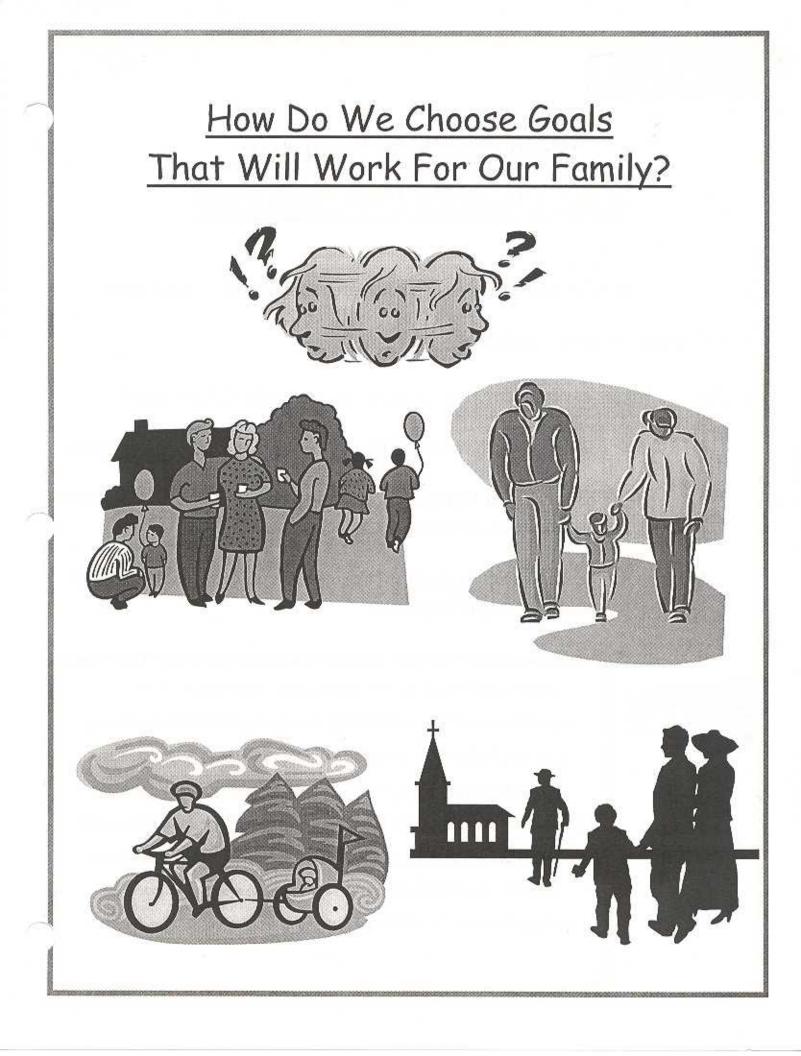


CHART #8

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

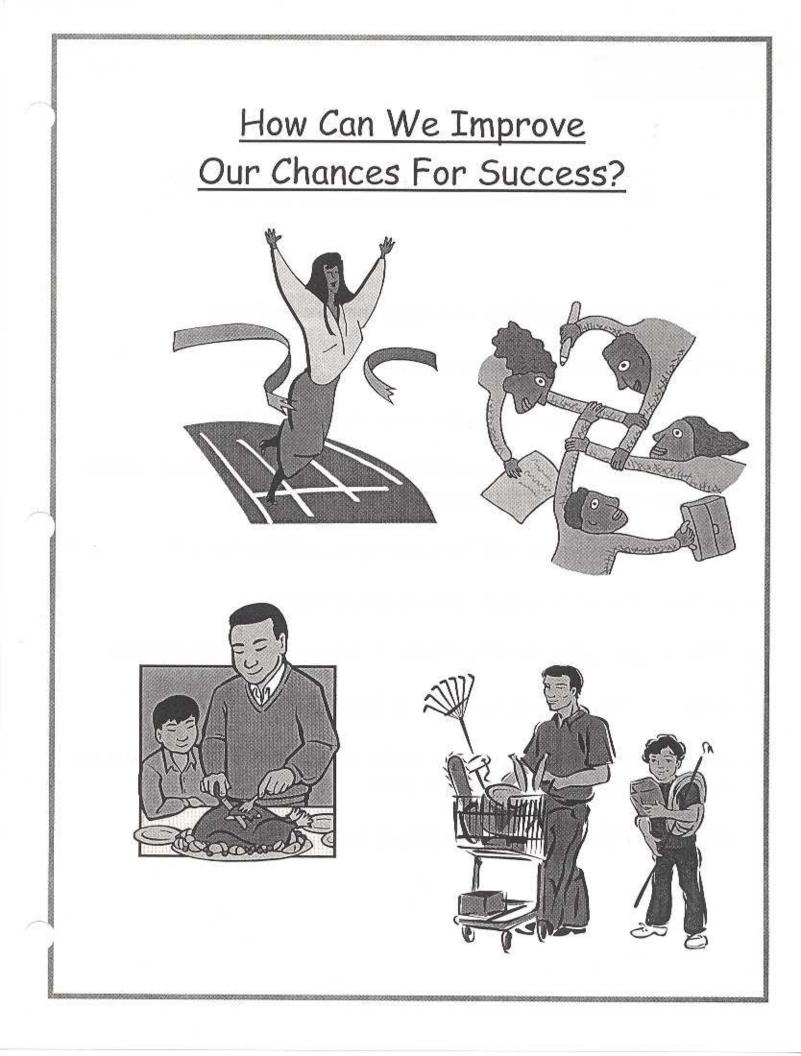
- Start immediately. Don't keep saying you'll start tomorrow or next week.
- Make your new goals a priority.

Session #3

- 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 snacks visible by putting a fruit bowl on the counter, etc.





#### How Can We Stay Motivated?

- Recognize your accomplishments, even if they are small ones.
- At the end of the day, review your progress:

Session #3

- \* 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.



### Activity: Family Health Behavior Goals

- Each family should have a copy of the Family Health Behavior Goals.
- Read through each goal.

Session #3

- 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"

CHART #10

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 like "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<br>will add at least one more word or phrase that describes a<br>positive quality of our family.                             |     |    |
| #2. We will exercise together 3 times a week by<br>walkingdancingstretchingother<br>15 min30 min(fill in) min.   |     |    |
| #3. We will eat small food portions, limiting our serving<br>sizes to the size of the palm or our hands, or a deck of<br>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<br>drinks like fruit punch, Kool-Aid®, Gatorade®, or <i>aguas</i><br><i>frescas</i> like <i>horchata, tamarindo, jamaica</i> . |     |    |
| #7. We will use only fat-free salad dressing and mayon-<br>naise.  |     |    |
| #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<br>meeting to talk and listen. We will discuss our good experi-<br>ences in the week and our problems.                           |     |    |
| #10. Another goal is to:   | ×   |    |

DIABETES AND THE FAMILY

# Wrap Up!

SESSION #3 Conclusion

#### Discussion Questions to Conclude Session #3: "Goal Setting"

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

DIABETES AND THE FAMILY

# Working Together

SESSION #4

#### <u>Main Ideas</u>

- Session #4 will cover family members' experiences with working towards their goals identified in Session #3.
- It will also cover ways families can work together to build family unity.
- This Session also covers ways that families can work together to support the family member with diabetes.

#### <u>Objectives</u>

At the end of Session #4, each family should be able to...

- identify at least one success they've had while working towards their goals.
- identify at least one challenge while working towards their goals.
- list at least one way they can build family unity.
- prepare a healthy meal together.
- list at least two ways that they can support the family member with diabetes to control his or her blood sugar.

#### Preparation

#### Special considerations for Session #4: Working Together

- Budget time carefully in this Session to provide time for families to talk about their experience in working towards their goals set in Session #3.
- In addition, budget time for the family to prepare and enjoy a healthy meal together.

#### Recommended Physical Activity: "Follow the Walking Leader"

- Due to the preparation of the meal, this Session offers limited time for a physical activity.
- Consider walking around the tables while playing music.
- Select one person to start as leader. Ask them to make a motion with their arms, head or upper body while they are walking. Instruct the remaining family members to copy the motion while walking.
- Once everyone has copied the leader, the person behind the first leader becomes the next leader.
- Continue changing leaders and having family members' copy the action until everyone has had a chance to be a leader.

#### \*Recommended Healthy Snack

Session #4

• There is no snack for this Session because you will be preparing a meal together.



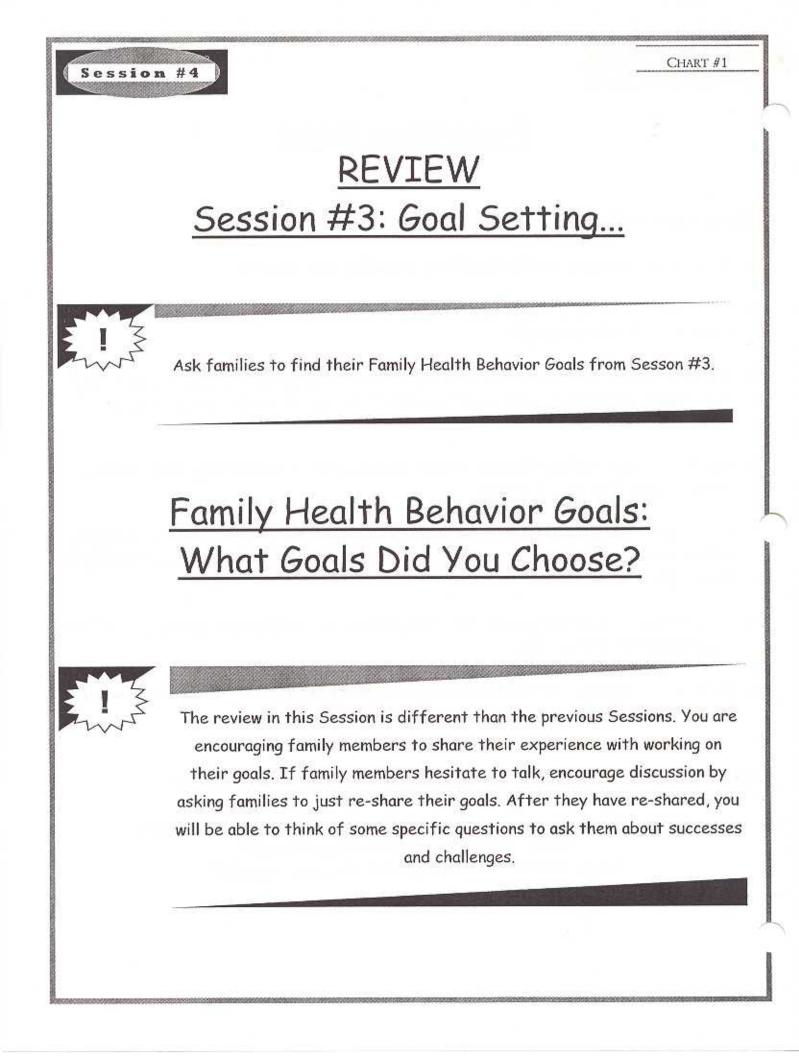
#### Preparation cont'd

#### Recommended General Activity: Preparation of a Light Meal

- This Session provides time for families to prepare a meal together.
- Set-up for families to prepare a meal will require additional time to purchase ingredients and disposable eating utensils.
- Set-up will also require additional time to purchase or gather cooking and serving utensils, for example: broiler pans or baking dishes, bowls, mixing and serving spoons, cutting boards and knives, etc.
- For the entire group, have families prepare one main dish, a salad or vegetable, bread (or fresh corn tortillas), and a dessert.
- Do not plan several main dishes or desserts as family members may be tempted to try all
  of them and as a result eat larger amounts. If the number of food items is increased, add
  more vegetables or salads.
- Consider having each family prepare an item, such as one family preparing dessert and one family preparing a salad, etc.
- Refer to the Appendix for low fat, low sugar, high fiber recipes. If other recipes are selected, choose low fat, low sugar and high fiber recipes.

Discussion: Once families have served themselves and tried the food, ask:

"Was the food prepared differently from the way you cook at home?" "Which techniques would you try at home?" "How does the food taste? Is it what you expected?"



## 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<br>will add at least one more word or phrase that describes a<br>positive quality of our family.                |     |    |
| #2. We will exercise together 3 times a week by<br>walkingdancingstretchingother<br>15 min30 min(fill in) min.  |     |    |
| #3. We will eat small food portions, limiting our serving<br>sizes to the size of the palm or our hands, or a deck of<br>cards.   |     |    |
| #4. We will eat more foods low in fat and limit foods high in fat.  | 3.  |    |
| #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 frescas</i> like <i>horchata, tamarindo, jamaica</i> . |     |    |
| #7. We will use only fat-free salad dressing and mayon-<br>naise.   |     |    |
| #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<br>meeting to talk and listen. We will discuss our good experi-<br>ences in the week and our problems.              |     |    |
| #10. Another goal is to:  |     |    |



CHART #2

#### REVIEW ....

## <u>What Successes Did You Experience</u> <u>Over the Week While Working</u> <u>Towards Your Health Behavior Goals?</u>

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









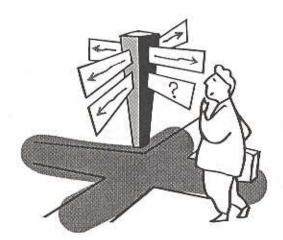
CHART #3

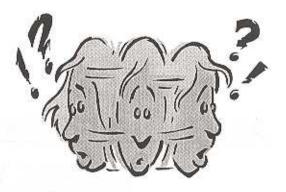
#### REVIEW ....

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

## 2.How Did You Overcome These Challenges?

<u>What Challenges Did You Experience</u> <u>Over the Week While Working</u> <u>Towards Your Health Behavior Goals?</u>





#### How Did You Overcome These Challenges?



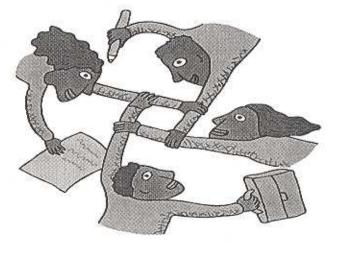


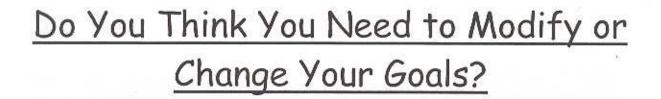


CHART #4

#### REVIEW ....

## <u>Do You Think You Need to Modify or</u> <u>Change Your Goals?</u>

If So, How Will You Modify Your Goals?







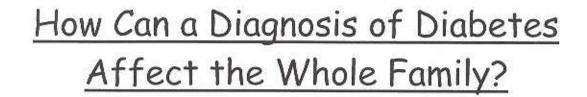


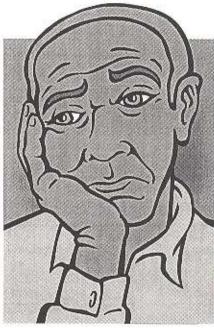
#### Session #4

#### SESSION #4: "Working Together"

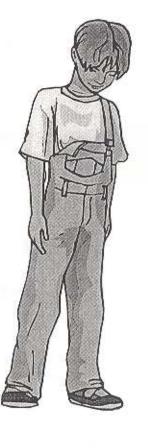
## <u>How Can a Diagnosis of Diabetes</u> <u>Affect the Whole Family?</u>

- + 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 Family Stay</u> <u>Close and Work Together?</u>

CHART #6

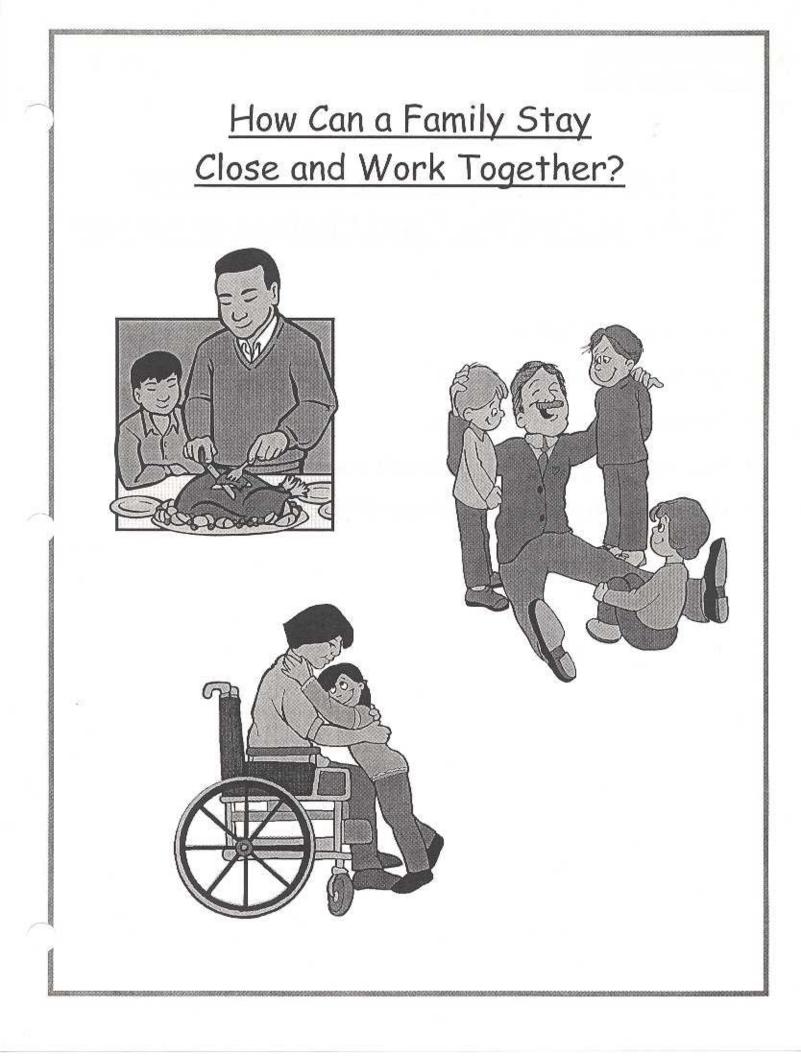
Make time to be together.

Session #4

- 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?



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

CHART #7

They can plan meals together.

Session #4

- 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 decide if they would like to eat this food more often.









## How Can Families Work Together To Make Healthy Food Choices Away From Home?

CHART #8

- 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.

Session #4

- + Ask for foods without sour cream, guacamole and 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>

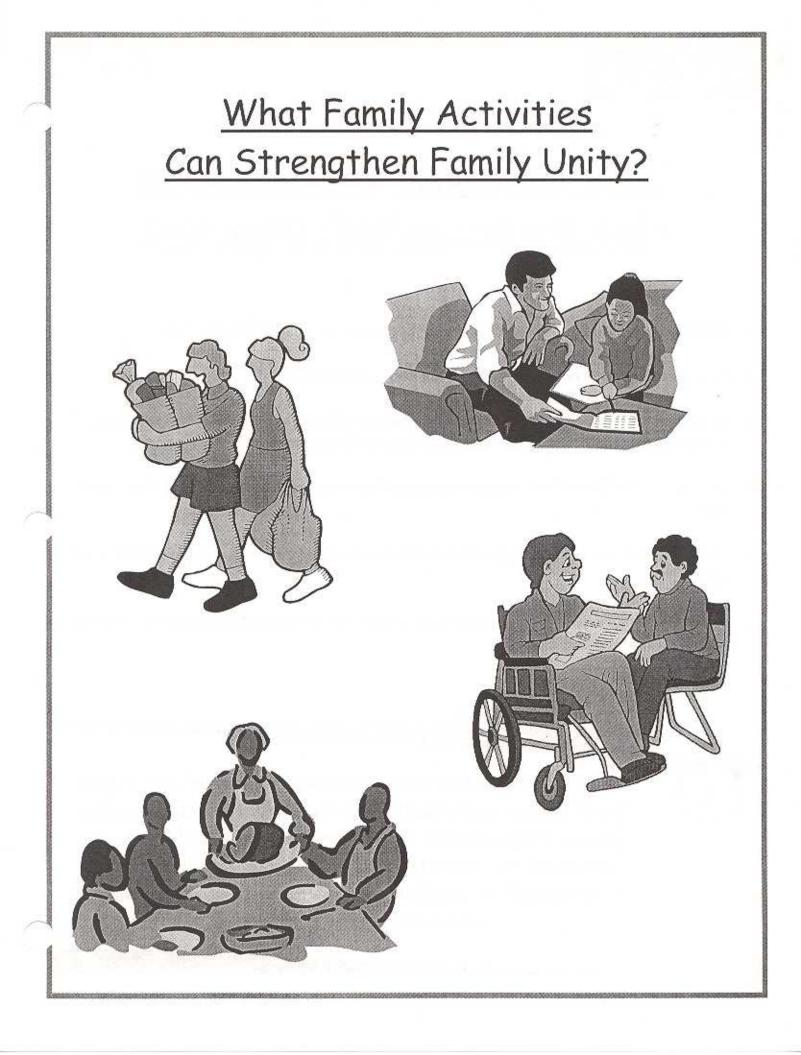


## <u>What Family Activities</u> <u>Can Strengthen Family Unity?</u>

CHART #9

- 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 others' moods.
- Make time to do things together. Go to church or go for walks together.
- Thank or compliment each other.

Session #4



### <u>What Can Family Members Do to</u> <u>Help 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.

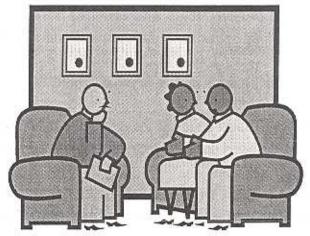


Session #4

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 to avoid miscommunication or arguments about how much a family should remind or help a family member with diabetes.

## What Can Family Members Do to Help the Person With Diabetes?







## <u>How can a Family Support a Family Member</u> <u>Who Shows Symptoms of Uncontrolled</u> Diabetes?

CHART #11

- 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.

Session #4

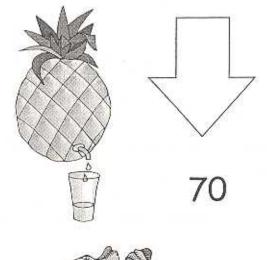
- If not, ask if they would like help checking their blood sugar.
- Note: Generally, the American Diabetes Association recommends blood sugar ranges from 90-130 before meals, and 110-150 before bedtime. The recommendations below are a general guideline to check one's blood sugar, and what to do if it 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.



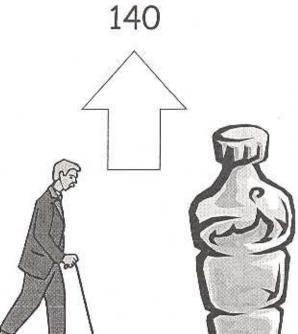
Ask families if they remember some of the symptoms from Session #1. If they cannot, encourage them to look back at the pictures in Session #1. Try having a discussion about how symptoms differ depending on high or low blood sugar. You may wish to make copies of the handout on high and low blood sugar in the General Activities section of the Appendix.

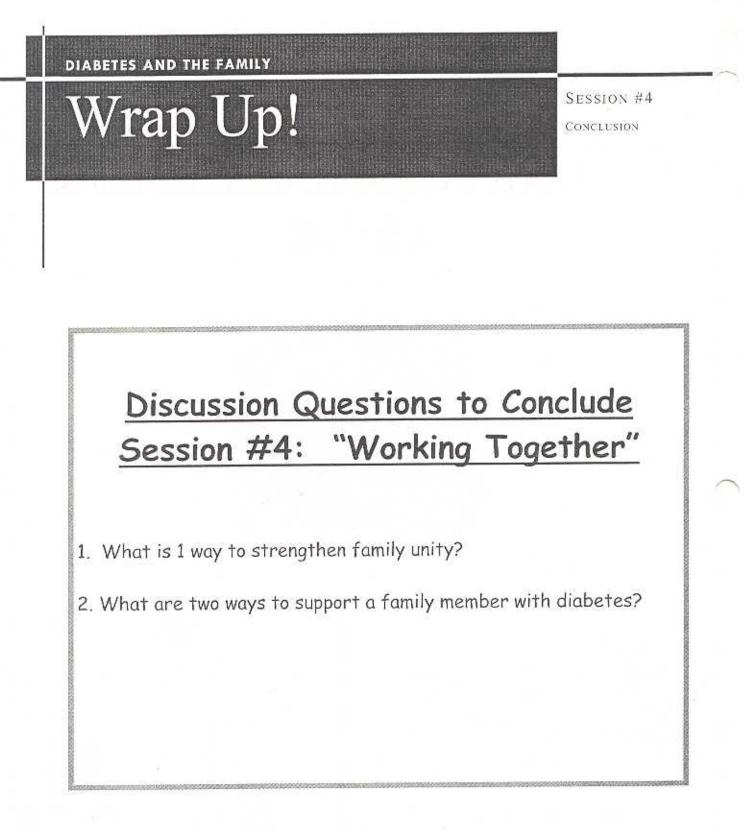
## <u>How can a Family Support a Family Member</u> <u>Who Shows Symptoms of Uncontrolled</u> <u>Diabetes?</u>











DIABETES AND THE FAMILY

# Staying Healthy

SESSION #5

#### <u>Main Ideas</u>

- This session will cover depression as an outcome of diabetes.
- It will cover families' continued experience with working towards their goals.
- It discusses a family plan to continue working towards goals.
- This Session also will also cover a family plan to identify new health behavior goals.

#### **Objectives**

At the end of Session #5, each family should be able to ...

- identify 3 signs of depression.
- describe 1 way to help someone who shows signs of depression.
- identify how they will keep working on their goals.
- explain how they will add new goals as they achieve their current goals.

#### Preparation

#### Special Considerations for Session #5: Staying Healthy

- In this Session family members are encouraged to talk about how having diabetes in their family makes them feel.
- This topic may be difficult for some family members to discuss.
- Consider reading the story indicated in Recommended General Activity #2 as a way to 'break the ice' or approach the topic.

#### Recommended General Activity #1: Planning the Graduation

- First read through the following chapter "Congratulations!" on the Graduation Event.
- Ask the families if they'd like to plan their graduation event.
- Plan a date, time and location.

Session #5

- Consider having families volunteer to bring healthy foods, using the recipes in the Appendix or other ideas..
- Ask families if they'd like to volunteer to lead a game or physical activity.
- Consider having families plan the order in which they will eat, share experiences and play games.

#### Recommended General Activity #2: Story of 'Ma Rufina'

- You'll find this story in the Appendix.
- Try reading the story before beginning this Session's information topic.
- You may wish to make copies of the story for families.
- Try reading the story to the group first, then handing out the copies.
- Or families can take turn reading parts of the story to the group.
- Talk to the families about what the story means to them.

#### Preparation cont'd

#### <u>Recommended Physical Activity: A moderate level activity that increases</u> <u>pulse rate such as walking or dancing</u>

- As in the last Session, consider an activity that requires a fair amount of movement.
- If the weather or time of day permits, consider taking a walk outside.
- Before class, look around the area where the Sessions are held and find a course that will take 15-20 minutes to complete.
- Look for a course with a relatively smooth surface. If possible, avoid cracked sidewalks or an area with holes.
- · Look for a course that is away from traffic.
- Have bottled water for everyone to carry.

Session #5

- Before the walk, have everyone participate in one of the stretching exercises completed in previous Sessions.
- Briefly explain where you will walk and the approximate amount of time it will take to complete.
- Have everyone take a 30 second pulse rate at their wrist or neck while standing still, just before starting the walk.
- After walking for 5 minutes, stop and have them take their pulse rate again.
- The walking pace is appropriate if most participants' pulse rate increased 5-12 beats. If the average heart rate has increased greater than 20 beats, the pace is probably too fast.
- · Remind everyone to drink their water while on the walk.
- If conditions are not appropriate, consider dancing and proceed with checking the pulse rate as described above.

#### Recommended Healthy Snack: Small whole fruit such as grapes, plums or strawberries, graham crackers, bottled water, tea or coffee with fat free creamer and artificial sweetener

- There is only time to try an easy snack.
- If walking or dancing are the physical activities in this Session, having bottled water available is recommended.
- Consider having the coffee and tea with the snack and distributing the water just before doing the physical activity planned.

# REVIEW

#### 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 others' moods.
- Make time to do things together- for example, go to church or walk together.
- Thank or compliment each other.

Session #5

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



CHART #2

#### REVIEW ....

### <u>What Can Families Do To Support</u> <u>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.

Session #5

- Talk about medications and doctor visits. How often the person with diabetes need to take medicine. How often does he or she need see a physician?
- 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 listen 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.

## <u>What Can Family Members Do to</u> <u>Help the Person With Diabetes?</u>



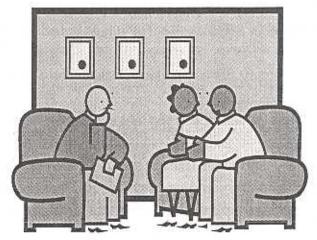




CHART #3

# Session #5

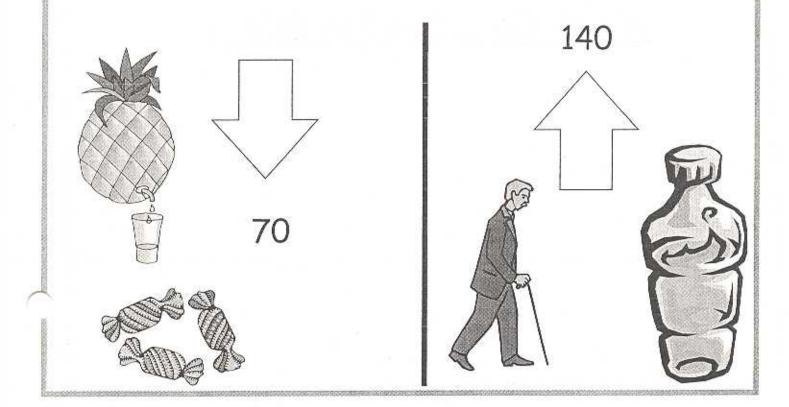
### REVIEW .....

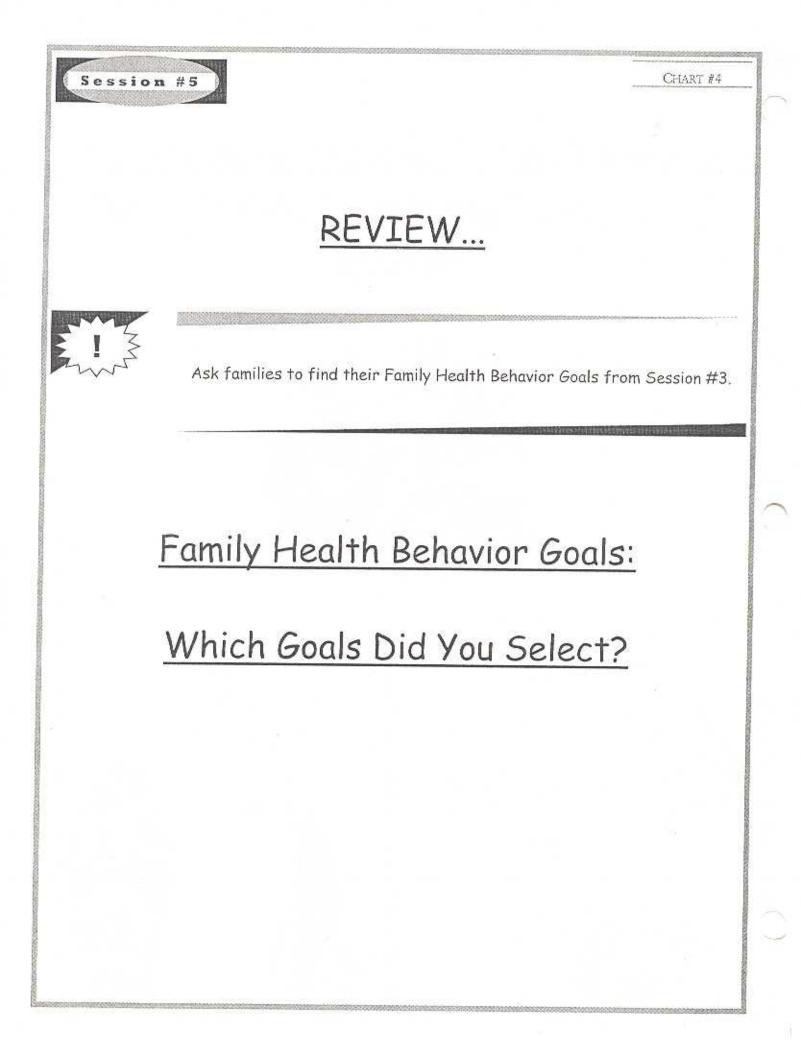
# <u>How Can a Family Support a Family</u> <u>Member Who Is Showing Symptoms of</u> <u>Uncontrolled Diabetes?</u>

- Know the symptoms of uncontrolled diabetes. These symptoms are the same as those described in Session #1, for undetected diabetes.
- Ask if they have checked their blood sugar recently.
- If they haven't, ask if they would like help checking their blood sugar.
- Note: Generally, the American Diabetes Association recommends blood sugar ranges from 90-130 before meals, and 110-150 before bedtime. The recommendations below are a general guideline to check one's blood sugar, and what to do if it seems too high or too low.
- If the person's glucose level is greater than 140, suggest that he or she drink some water and walk around.
- If it is lower than 70, suggest that he or she eat something sweet, like a piece of hard candy, or drink some juice.
- After a short time (1-3 minutes), check blood sugar again. If it doesn't change, call or visit
  a 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 Member</u> <u>Who Shows Symptoms of Uncontrolled</u> <u>Diabetes?</u>







# 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<br>will add at least one more word or phrase that describes a<br>positive quality of our family.                             |     |    |
| #2. We will exercise together 3 times a week by<br>walkingdancingstretchingother<br>15 min30 min(fill in) min.   |     |    |
| #3. We will eat small food portions, limiting our serving<br>sizes to the size of the palm or our hands, or a deck of<br>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<br>drinks like fruit punch, Kool-Aid®, Gatorade®, or <i>aguas</i><br><i>frescas</i> like <i>horchata, tamaríndo, jamaíca</i> . |     |    |
| #7. We will use only fat-free salad dressing and mayon-<br>naise.  |     |    |
| #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<br>meeting to talk and listen. We will discuss our good experi-<br>ences in the week and our problems.                           |     |    |
| #10. Another goal is to:   |     |    |

CHART #5

#### REVIEW ....

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

Discussion

Session #5

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 Over</u> <u>The Week While Working Towards Your</u> <u>Health Behavior Goals?</u>







#### SESSION #5: "Staying Healthy"

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

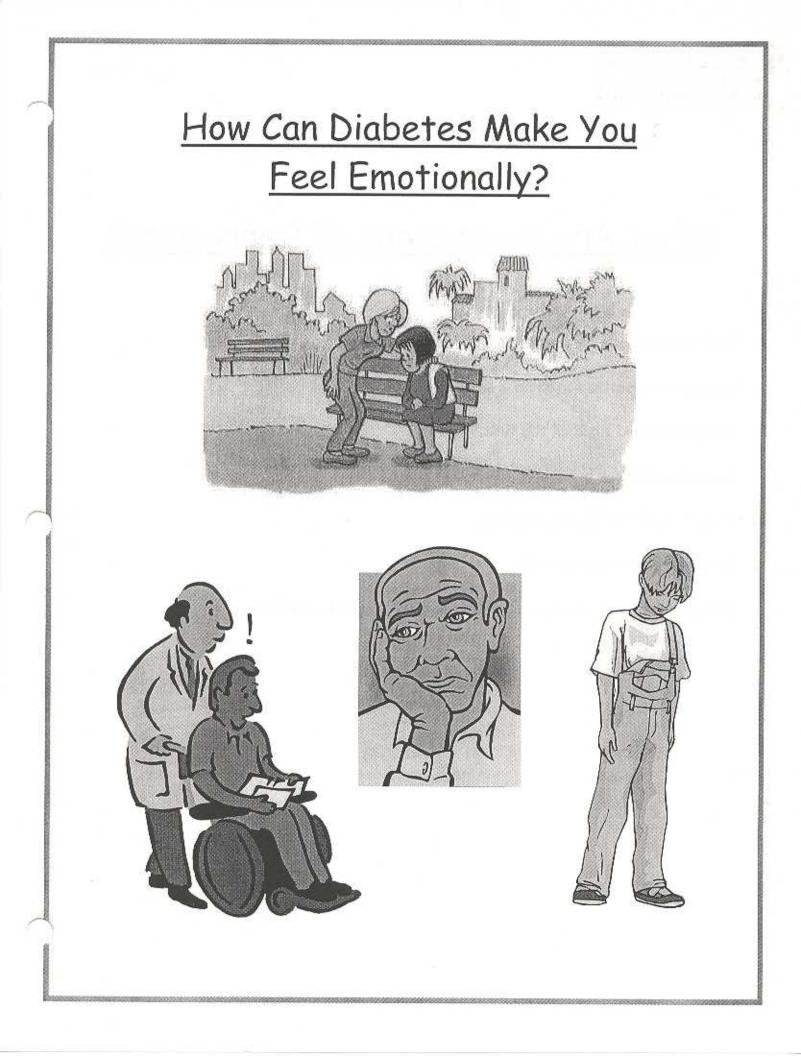
- People react differently to a diagnosis of diabetes.
- Some people may be angry and think "Why me?" or "It's not fair!"
- Some people may get sad about having to make lifestyle changes.
- Some people may think about the complications and become scared or depressed.
- These reactions are normal.

Session #5

Family members should talk about their feelings.

#### 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.



#### What Are Some Signs of Depression?

- Feeling sad all day for about 2 weeks.
- Losing your appetite for about 2 weeks.
- Being sleepy and tired all the time.
- Going days without being able to sleep at night.
- Being forgetful or distracted often.
- Not being able to concentrate.
- Having thoughts of death and/ or suicide that keep coming back.

# What Are Some Signs of Depression?



Fatigue



Sadness



Unable to Sleep



Confused or Distracted

### <u>What is the Connection Between</u> <u>Depression</u>, Stress, and Diabetes?

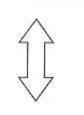
- People who feel constantly stressed or feel as though they have too much stress can become depressed.
- Depressed or stressed, people may not take good care of themselves. They may not exercise or eat healthy. They may drink alcohol. They might not check their blood glucose or take their medication.
- 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.



Session #5

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 promotoras 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>





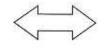






Diabetes







#### Session #5

### 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.



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

# How Can Families Cope With Stress?









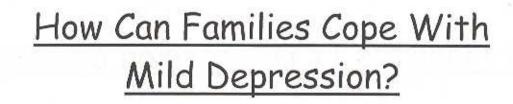
## <u>How Can Families Cope With</u> <u>Mild Depression?</u>

- 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,

Session #5

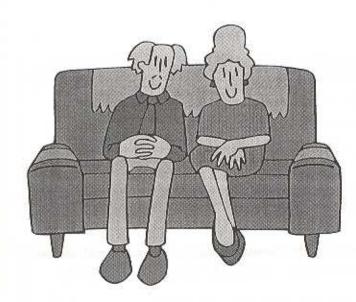
\* Walking or gardening as a family can lift everyone's spirits.

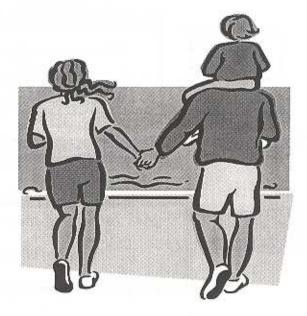
- \* Volunteering as a family or as individuals at your church or local school can make you feel good.
- \*Visiting or calling a friend outside family member just to say "hi" can encourage you to think positive and to focus on brightening someone's day.











### 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.

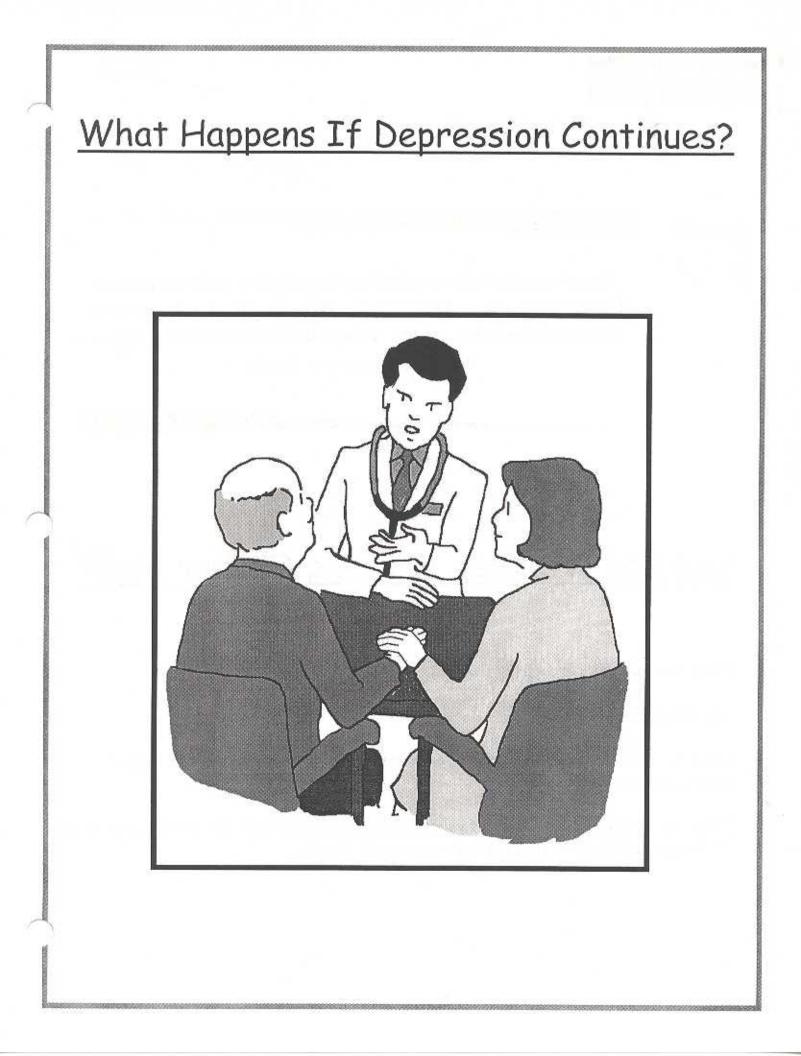


Session #5

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 for them.

Discussion

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



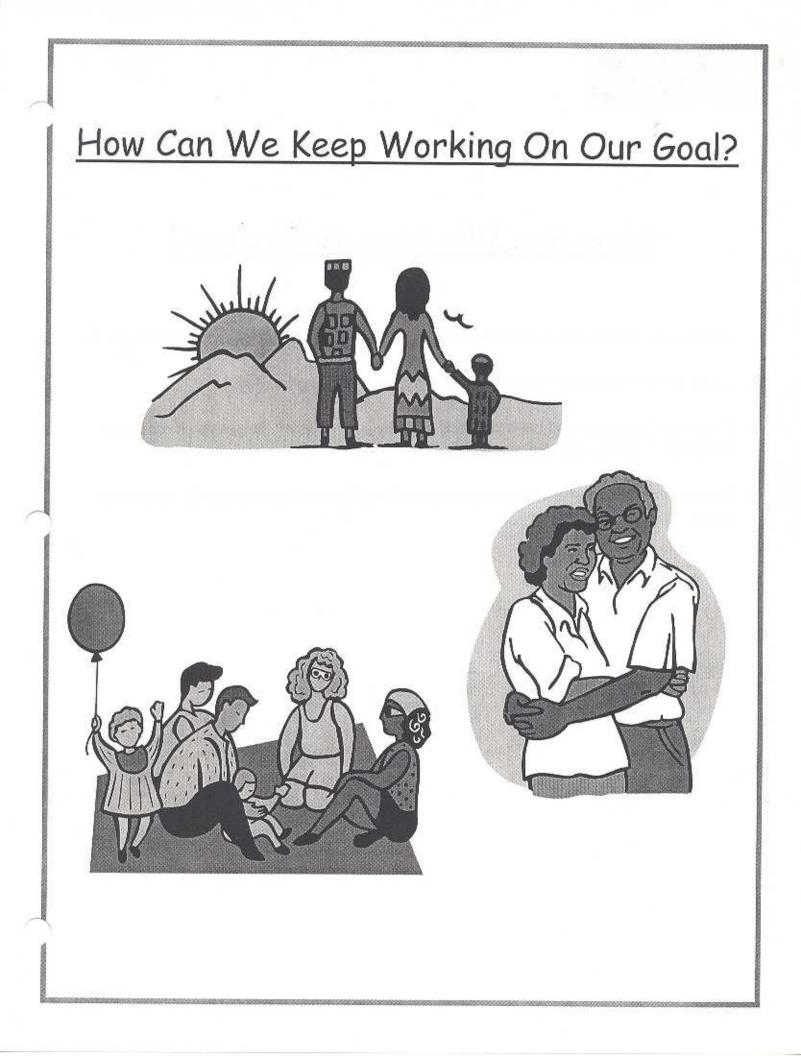


Session #5

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."

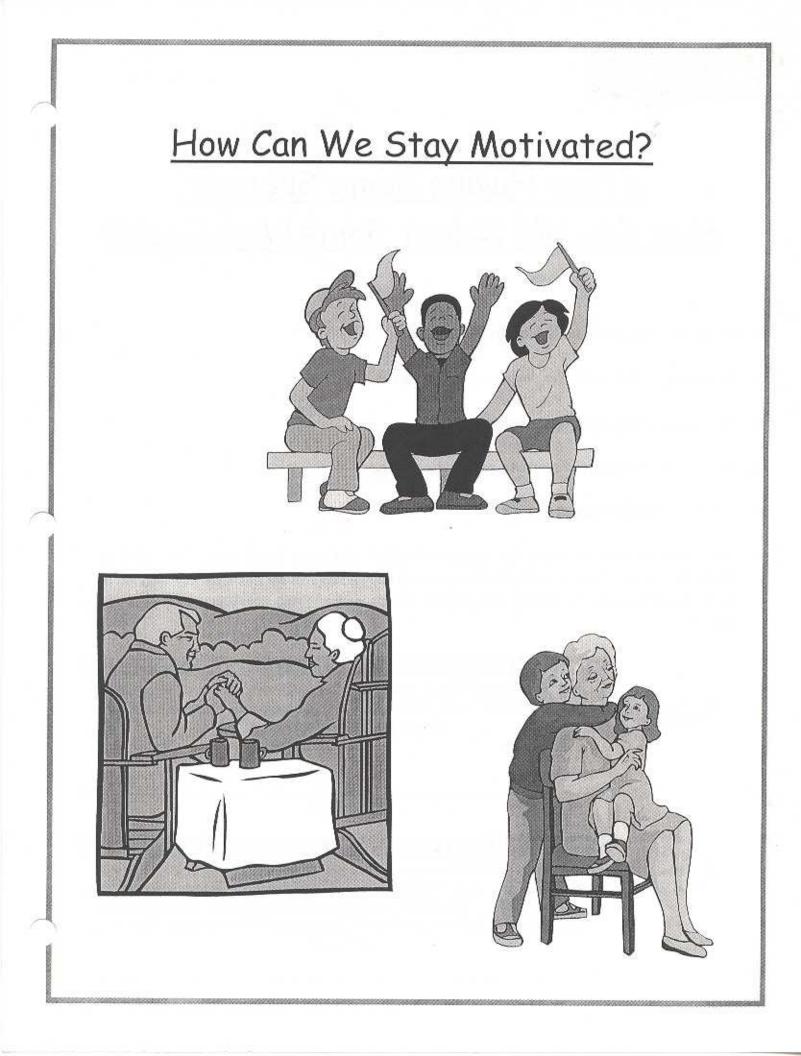
### How Can We Keep Working On Our Goal?

- 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 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.



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

CHART #14

- Refer back to your Family Health Behavior Goals.
- 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.

Session #5

 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?"



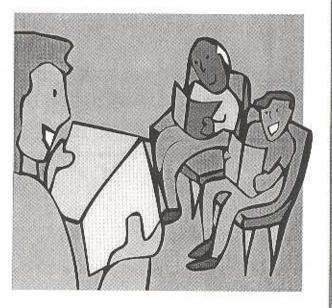
Give each family 5 minutes to discuss if they are ready for another goal. If so, what would they choose and how will they work towards that goal? Ask each family to share their decision.



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 towards your goals?
- 4. How will your family add new Family Health Behavior Goals?

DIABETES AND THE FAMILY

# Congratulations!

GRADUATION

#### Main Ideas

 At the Graduation Event families and promotoras will be able to acknowledge everyone's participation in the program.

Families will be able to demonstrate their newly acquired knowledge.

 This event will congratulate families, formally praising their involvement in the program and their skills in diabetes prevention and control.

#### **Objectives**

At the end of the Graduation Event, families will have...

- demonstrated their ability to prepare a healthy food dish.
- demonstrated their ability to contribute to the planning of 1-2 physical activities to be enjoyed by a group.
- eaten a low fat, high fiber and low sugar meal.
- participated in at least one physical activity.
- been awarded a Certificate, recognizing their involvement in the program and their contribution to their family.

### G

#### Preparation

This event draws on the promotoras' abilities to act as a coordinator and facilitator. Promotoras will work with families to plan the Graduation Event menu and activities in Session #5. The following should be used as a guide for planning this process.

#### Location

- Select a place that has bathrooms, protection from intense sun or rain, and sufficient space for tables, chairs, or picnic tables. (Example: church, park, community center).
- Kitchen facilities are desirable, but food can also be prepared ahead of time and brought to the event.
- It is important to choose a safe place, acceptable for all families.
- It would be better to reserve a place just for this Diabetes and the Family event and its participants.

#### Materials and Supplies

- Name tags
- Family Attendance sheets
- 1 table at entrance to greet families, take attendance, prepare name tags, etc.
- 1-2 tables for serving food buffet style
- · Several tables and chairs for families to sit and eat
- Music (something festive, could be live or tape/cd)
- Decorations such as balloons, streamers etc. (optional)
- Copies of food recipes (optional)
- Prizes for games and activities (optional)
- Certificates with family names and signed by promotoras and perhaps agency director.

#### Preparation cont'd

Food \*For ideas and recipes refer to the food appendix in this manual\*

- Promotoras should provide copies of a range of low fat, high fiber, low sugar recipes at Session #5, so that families might plan what food they would like to prepare and bring to the graduation.
- Families should volunteer to bring a main dish, side dish, beverage, dessert, utensils, plates, bowls, cups and/or table clothes for the event.
- The program can provide the main dishes if the cost or time of preparing these larger dishes create too much of a burden for the participants.
- It may be more convenient to use disposable utensils, napkins, table cloths, cups etc.
- Families should be discouraged from bringing foods that do not promote low fat, high fiber and low sugar food choices.

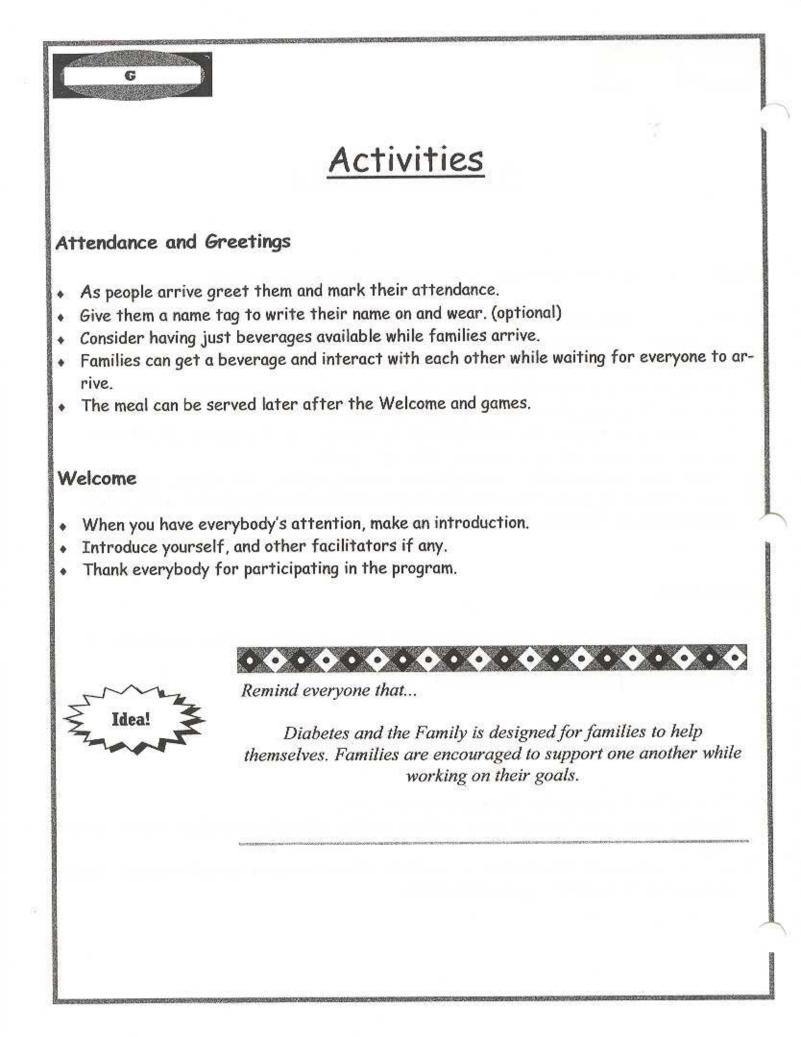
#### Attendance

G

- Determine the number of children, teenagers, adults and elderly adults who will attend. Encourage families to plan activities accordingly.
- Decide on a date, time and location of the event.

#### **Preparing for Activities**

- Decide who will record attendance as families arrive.
- Decide who will provide a welcoming statement and an acknowledgement of everyone's participation.
- Decide how many Certificates will be awarded- to each family, or to each individual family member? They should be signed beforehand.



### Activities cont'd...

#### Testimonials and Presentation of Certificates

- Give each family and/or family member time to express what they *learned* in the program, or what they *liked* about the program.
- Present certificates.

G

• If possible take pictures of each family when they have received their certificate. You can take a copy of the photo to the Promotora Follow Up Home Visit.

#### Food

- Consider setting table with table cloths and center pieces.
- Serve food buffet style.
- Have families describe why the food they brought to the Graduation Event are healthy foods.

#### Games/ Dancing

- If games require music, have equipment and CD/tapes available.
- Decide if games will require moving tables to make enough room. If so, plan the order of games, dancing, and eating to accommodate moving tables.

#### Wrap Up!

- Congratulate family members on their accomplishments.
- Remind families that they will be visited by the promotoras once more to see how they are doing on their goals and to collect some follow-up information.

DIABETES AND THE FAMILY

# Progress Check

FOLLOW-UP #1 Home Visit

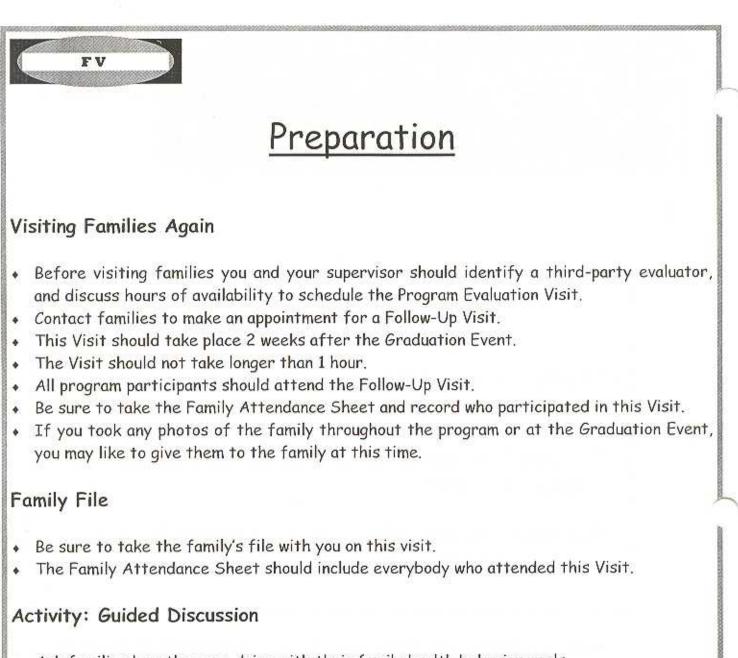
### <u>Main Ideas</u>

- This Visit serves as a follow-up to check on families' progress with their health behavior goals.
- The Visit is an opportunity to discuss the successes and challenges to their goals.
- Families are informed of the purpose of the next Program Evaluation Visit they will receive in two weeks.

### **Objectives**

At the end of the Promotora Follow-Up Home Visit, families should have...

- received positive reinforcement for their successes, and assistance with addressing barriers to achieving health behavior goals.
- scheduled their Program Evaluation Visit



- Ask families how they are doing with their family health behavior goals.
- Ask if they have had any questions or problems that you could help with.
- The following page includes some questions to help guide your discussion.
- Make a copy of this sheet to take with you on your visit.
- It is not necessary to record all the families' responses, but you may wish to note any 'highlights', such as unexpected problems, or special successes.
- You might choose to use these notes for your agency's evaluation reports.

Documents and Copies for the Promotora Follow-Up Home Visit (FV)

Family Attendance Sheet (the original) Guided Discussion Comments Sheet (1 copy)



Family Name: \_\_\_\_\_ Date: \_\_\_\_\_

## **Guided Discussion**

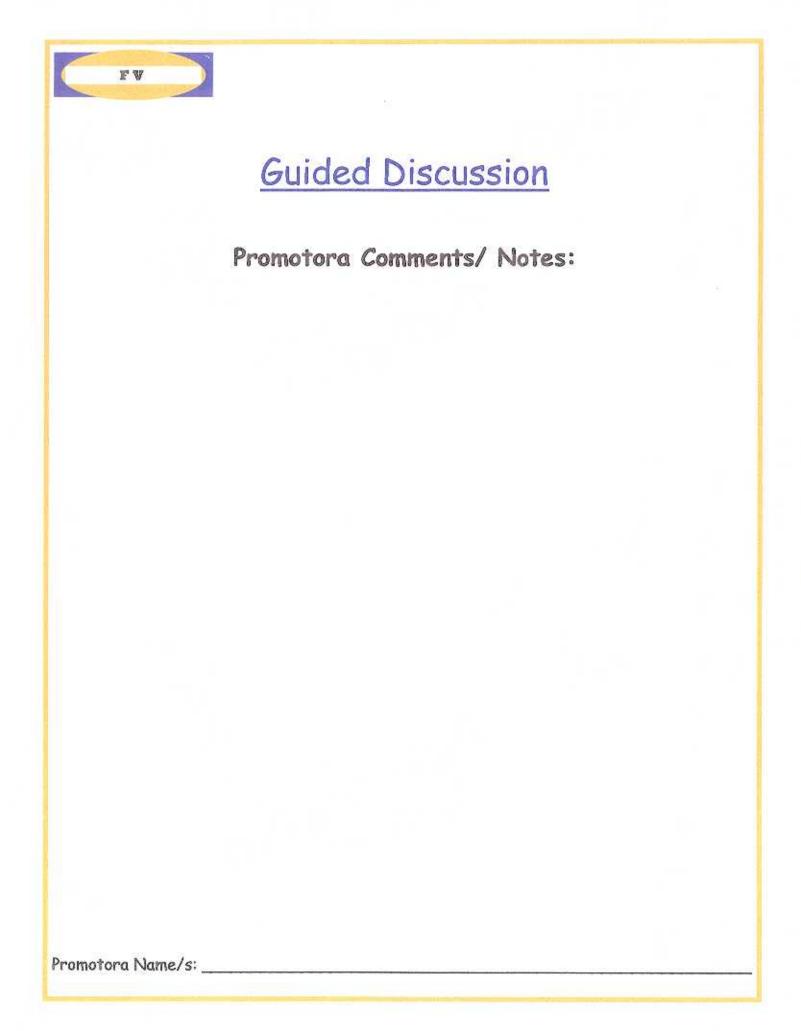
Use these questions as a guide to discuss with families their health behavior goals. Be sure to give positive reinforcement for their success, and assistance with any obstacles they may have encountered with goals. You may note specific comments in the spaces below, or general comments on the back side of this page.

What was your first family health goal? Describe your successes. Describe any barriers.

Did you create any new goals? Describe your successes. Describe any barriers.

Would you like to create a new family goal? What will your new goal be? What steps can the whole family take toward this goal?

How did the program help you understand diabetes? What was the most memorable part of the program for you?



DIABETES AND THE FAMILY



FOLOW-UP #1 Home Visit

# <u>Concluding the</u> "Promotora Follow-Up Visit"

- 1. Thank families for participating in the program.
- 2. Explain the reason and need for a Program Evaluation is to help understand how the program affects families.
- Explain that a different person may visit to administer the evaluation, and schedule the visit.
- 4. Arrange a way for the evaluator to confirm the next visit.
- 5. Make sure the family file is complete:
  - \* Pre-Registration- for primary participant only
  - \* Home Registration- for primary participant only
  - \* Consent Form- for each adult family member
  - \* <u>Family Attendance Sheet</u>- with names of all the family members who attended Visits, Events and Sessions.
  - \* Pre-Program Evaluation- for each adult family member
  - \* <u>Guided Discussion Comments Sheet</u>- one per family

(!) Remember, the final documents to be filed after the Program Evaluation Visit will be the:

- \* Post-Program <u>Evaluation</u>- for each adult who participated in at least 3 Educational Sessions
- \* Family Comments Sheet- one per family

DIABETES AND THE FAMILY

# Program Evaluation

FOLOW-UP #2 Home Visit

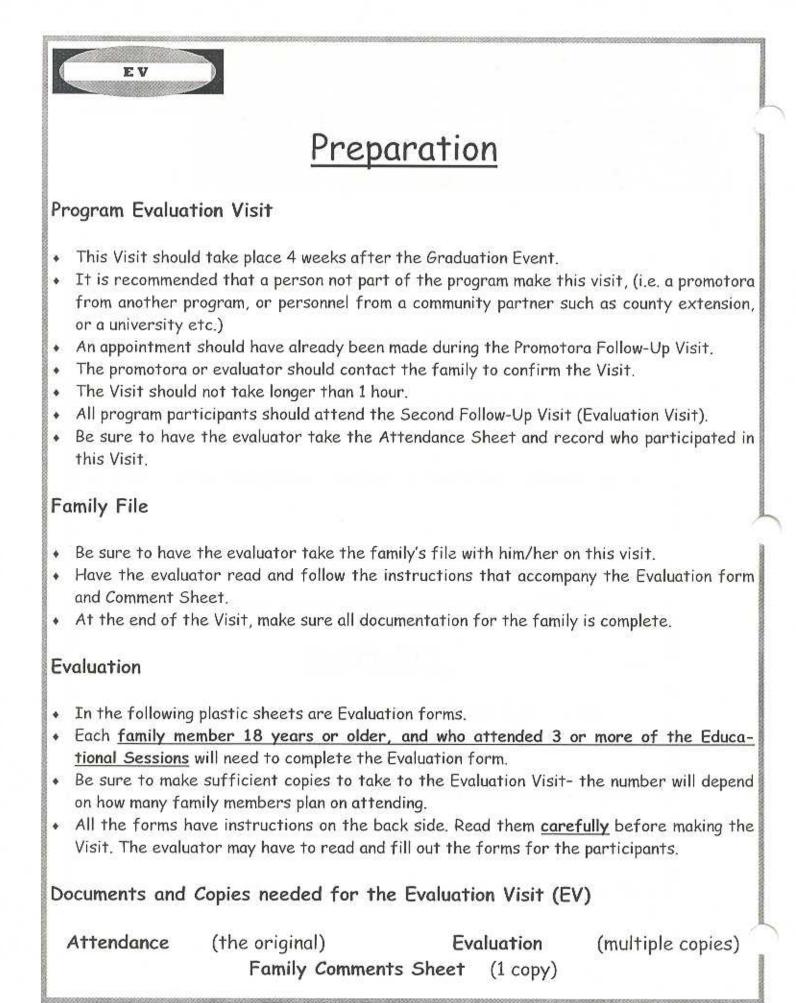
### <u>Main Ideas</u>

- During this Visit families will complete a post-program evaluation questionnaire.
- It is a final opportunity for families to comment on the program.

### **Objectives**

At the end of the Program Evaluation Home Visit, families should have...

- completed the evaluation post-program questionnaire.
- completed a general question regarding the program experience.



| 33123   |   |  |   | er Health ;Sí!<br>s and the Family              | 7          |                        | 1   |
|---|---|--|---|---|------------|------------------------|---|
| Individual Number   | ]-[]                                    |  |   | Date  | ] /        |                        | OFFICE USE ONLY<br>Check one:<br>O Pre-Test<br>(First home vesit) |
| Name  |   |  |   |   |            | Age                    | O Post-Test<br>(Second visit)                                     |
| First Name  |   |  | Last Name   |   |            |                        |   |
| In Questions 1-3, plea  | se think                                | about the activ                                | Person/P<br>filling ou<br>ities you did at                | t form:   | ing the la | st week.               | Sinft ID  |
| Now think about those<br>gardening or yard wor<br>1. How many days in | e activition<br>k, joggin<br>i the last | es that make y<br>g, swimming,<br>week did you | our heart beat fa<br>lifting heavy ob<br>do these activit | aster. Some example<br>ojects, major housew     | s are walk | king fast,<br>lancing. | Family Code 1   |
| make your heart be<br>2. When you did thes<br>member participate      | e activite                              | es, how many                                   |   | d a family                                      | times a w  | eek                    | Puerd's Cole 2  |
| <ol> <li>Who? (State the re</li> </ol>                                | lation an                               | d age of all th                                | e people that pa  | rticipate with you).                            |            |                        |   |
| 4. Please bubble "yes"<br>diabetes. Bubble "n                         |   |  |   | you think put you at<br>ristics put you at gree |            | ik for                 |   |
| Heredity  | ○ Yes                                   | O No   | Cont  | act with a diabetic                             | O Yes      | O No                   |   |
| Stress  | O Yes                                   | O No   |   | Being overweight                                | ⊖ Yes      | O No                   |   |
| Being Hispanic  | 0 Yes                                   | O No   |   | Being inactive                                  | O Yes      | O No                   |   |
| Fear or trauma  | ⊖ Yes                                   | O No   | Being 45 yea  | ars of age or more                              | 0 Yes      | O No                   |   |
| <ol> <li>In the last week, h</li> </ol>                               | ow often                                | did you eat fi                                 | uit?  |   |            |                        |   |
|   | 0                                       | times a day                                    |   |   |            |                        | O 55.R  |
|   | 000                                     | times a week<br>never<br>don't know            |   |   |            |                        | ○ 88.N<br>○ 99.M  |

|  | ame:   |                                   | Date:/                                       | J  |
|--|--|-----------------------------------|--|--|
| 33123<br>6. In the last week, how often  | did you eat vegeta   | bles (not inclu                   | dina nototoes19                              | OFFICE USE ONLY  |
|  | times a day<br>times a week<br>never<br>don't know   |                                   | nul bi for the source of the                 | <ul> <li>○ 55.R</li> <li>○ 88.N</li> <li>○ 99.M</li> </ul> |
| 7. In the last week, how often   | times a day  | a (not diet)?                     |  | ○ 55.R<br>○ 88.N<br>○ 99.M                                 |
|  | do you drink swee<br>o, Gatorade®, or S<br>times a day<br>times a week<br>ກຍັບer<br>don't know | tened drinks st<br>lunny Delight@ | ich as horchata, tamarindo<br>)?             | ,<br>O 55.R<br>O 88.N<br>O 99.M                            |
| <ol> <li>In the last week, what kind of Whole milk</li> <li>O 2% milk</li> </ol> | 0 1  |                                   | l <i>that apply)</i><br>densed (canned milk) | O 55.R<br>O 88.N<br>O 99.M                                 |
| ○ 1% milk<br>○ Skim/nonfat milk  |  | don't drink mi                    | lk   | Milk Ciste   |
| 10. Do you think your family ne<br>○ Yes ○ No                                    | eds to eat healthie  | r foods?                          |  | 0 55.R<br>0 88.N<br>0 99.M                                 |
| 11. How confident are you that   | your family can e  | it healthier foo                  | d?   |  |
| Not Very Confident<br>O 1 O 2  | 03   | 04                                | Very Confident<br>O 5                        | 0 55.R<br>0 88.N<br>0 99.M                                 |
| <ol> <li>Do you think your family net</li> <li>○ Yes</li> <li>○ No</li> </ol>    | eds to be more phy   | sically active?                   |  | 0 55.R<br>0 88.N<br>0 99.M                                 |
| 13. How confident are you that y   | our family can be  | come more phy                     | sically active?                              | O 55.R   |
| Not Very Confident   | O 3  | 04                                | Very Confident<br>O 5                        | ○.88.N<br>○.99.M   |

page 2



#### 14. Please indicate if you "Agree" or "Disagree" with each statement:

|  | Agree   | Disagree   |
|--|---------|------------|
| a. We generally don't talk about diabetes  | ○ Ågree | O Disagree |
| 5. We agree to buy special foods for the family member with diabetes<br>and the rest of the family members pretty much eat what they want. | O Agree | ⊖ Disagree |
| c. We talk about ways that all of us can eat foods low in fat and grease.  | O Agree | ⊖ Disagree |
| d. We talk about ways that all of us can be more active, planning walks,<br>or outdoor activities.   | O Agree | O Disagree |
| e. Someone usually goes to the doctor with the family member that has diabetes   | ⊖ Agree | O Disagree |
| When we eat at a restaurant or pick up prepared food to eat at home,<br>we agree to pick a place that has healthy food choices.            | O Agree | O Disagree |
| t. We often find ourselves criticizing the family member with diabetes<br>for not taking care of him/herself.                              | O Agree | O Disagree |

15. In our family, family members really help and support one another,

| Don't agree |    |    |    | Agree |
|-------------|----|----|----|-------|
| 01          | 02 | 03 | 04 | 05    |

|          | OFFICE USE ONL | Concernence of the second s |
|----------|----------------|---|
| Trch. 10 | DP Batch:      |   |
| Date:    |                |   |

○ 55.R ○ 88.N ○ 99.M

OFFICE USE ONLY



Family Name: \_\_\_\_\_

Date:

# Family Comments

Evaluator: Please take a copy of this sheet with you on the Evaluation Visit. After families finish the questionnaire, ask them if they have any final questions or comments about the family program. Record their responses below, and return sheet to family file along with the questionnaire.

Comments:

Questions:

Evaluator's Name: \_\_\_\_

Agency:

DIABETES AND THE FAMILY

# Wrap Up!

FOLLOW-UP #2 Home Visit

### Concluding the "Evaluation Visit"

- 1. After completing the home visit, review the family file.
- 2. Be sure the following (8) forms are dated and complete:
  - \* Pre-Registration- for primary participant only
  - \* <u>Home Registration</u>- for primary participant only
  - \* <u>Consent Form</u>- for each adult family member
  - \* <u>Family Attendance Sheet</u>- with names of all the family members who attended Visits, Events and Sessions.
  - \* Pre-Program Evaluation- for each adult family member
  - \* Post-Program <u>Evaluation</u>- for each adult who participated in at least 3 Events or Sessions.
  - \* Guided Discussion Sheet (1st Follow-up)- one per family
  - \* Family Comments Sheet (2nd Follow-up)- one per family



#### Greek Style Garbanzo Bean Salad\*

1+1/2 cups garbanzo beans (or one 15-oz can, drained)
1/2 cup red onion, in thin slices
1/2 cup of tomatoes, cut in cubes
1/2 cup chopped green pepper
3 tablespoons of vinegar
2 tablespoons lime juice
2 tablespoons olive oil
1 tablespoon chopped garlic
2 teaspoons fresh parsley, chopped
Salt and pepper to taste

Combine all the ingredients in a large bowl. Let marinate a few hours at room temperature, then refrigerate.

\*Adapted from 5 a Day- for Better Health, NIH



#### Cole Slaw\*

1/4 cup vegetable oil
2 tablespoons of lemon juice
2 tablespoons of lite or fat free mayonnaise
1/2 teaspoon mustard
1/4 teaspoon celery salt
1/2 teaspoon salt
1/2 teaspoon salt
1 head cabbage, shredded
Ground black pepper, to taste
Paprika, to taste

Mix all ingredients in blender until desired consistency is achieved.

\*Adapted from Hualapai Family Retreat Recipes , Hualapai Tribe, Dept. of Planning and Community Vision



#### Veggie Potato Salad\*

2 lbs new red potatoes, cooked, peeled, and sliced (about 6 cups) 2 cups frozen peas, defrosted 1 large carrot, coarsely grated (about 1 cup) 1-1/2 cups corn (kernels), drained 2 cups fresh broccoli florets, 1/2- inch pieces 4 green onions, sliced (about 1/2 cup) 1/2 cup low-fat plain yogurt 1/4 cup lite or fat free mayonnaise 1 teaspoon dry dill weed 3/4 teaspoon salt, to taste

Cook whole potatoes in boiling water until barely tender. Drain, cool, then slice potatoes 1/4 inch thick. In a large bowl, combine potatoes with peas, carrots, corn, and broccoli. In a small bowl, stir together the yogurt, mayonnaise, mustard, dill week, salt, and sliced green onions. Gently toss the yogurt-mayonnaise mixture into the vegetable mixture. (makes 12 one-cup servings)

\*Adopted from Hualapai Family Retreat Recipes , Hualapai Tribe, Dept. of Planning and Community Vision



#### Jícama with Lime Juice\*

1 medium jícama 2+ 1/2 tablespoons lime juice 1/4 teaspoon chili powder Salt to taste

Peel jícama and cut into thin sticks. (Jícama can be prepared up to 2 days ahead and stored covered in a bowl of cold water in the refrigerator.) Just before serving, sprinkle with lime juice, chili, and salt.

#### Apple Salad\*\*

2 cups of plain yogurt (preferably low/non fat) 2 red apples, chopped 2 green apples, chopped 2 celery stalks, chopped 1/2 cup raisins 4 ounces granola

Mix all the ingredients in a bowl, refrigerate for 15 minutes, and serve.

\*Adapted from the New Mexico Dept. of Health's *Words to the Wise* \*\*Adapted from Campesinos Sin Fronteras, Somerton AZ



#### Beef Stew with Vegetables\*

2 lbs. beef, cut in cubes 1 can of cream of mushroom soup (can be 'low fat' or 'lite') 2 cups chopped onion 2 cups chopped carrots 1 cup chopped green pepper 2 cubes beef bouillon (low sodium) 2 cups water 1/2 cup red wine (optional)

Mix all the ingredients in a large stew pot. Bring to boil and reduce heat. Cook on low heat until meat completely cooked. Serve with warm rice, or potatoes.

\*Adapted from Un Mundo de Sabor, Bristol Myers Squibb Company

#### Picadillo\*

1 lb. Ground beef 1 onion, chopped 3 cloves garlic, minced 1 can (14 oz.) tomatoes 2 potatoes, peeled and chopped 1 carrot, chopped 2 teaspoons raisins, chopped 1 jalapeño chili, seeded and chopped, (or 1 tablespoon pickled jalapeños, chopped) 2 teaspoons chili powder 1 teaspoon oregano 1 teaspoon cumin 1/4 teaspoon pepper

In a non-stick pot, cook the beef, onion, and garlic on medium heat breaking down the meat with a spoon for 10 minutes o until the meat has browned. Add the rest of the ingredients. Bring to boil. Reduce heat, cover and cook, stirring occasionally, for 15 minutes or until the potatoes are cooked. Uncover, and cook a few more minutes until liquid evaporates.

\*Adapted from Un Mundo de Sabor, Bristol Myers Squibb Company



#### Chiles Rellenos\*

2 chicken breasts 10 California chilies 1 tomato 1/2 onion Salt and pepper to taste

Boil chicken breasts with 1/2 the onion and garlic salt until fully cooked, then drain. In a bowl or pot, shred the chicken into small pieces. Grill chilies and peel. Chop tomato and onion, mix with chicken. Remove seeds from chilies and fill with chicken. Serve with sour cream and steamed rice.

\*Adopted from Compesinos Sin Fronteros, Somerton AZ

#### Salpicon de Pollo\*

2 chicken breasts, cut into small pieces 1 tomato 1/2 head of lettuce, chopped 1 avocado 1/2 red onion 2 tablespoons olive oil Pepper, garlic salt, lime juice to taste Cilantro, green chili, jalapeño to taste

Cook chicken breast with garlic salt and onion. When it is cooked, break it down with a spoon. Chop the tomato and onion in thin slices. Chop all other vegetables. Add the rest of the ingredients, and stir to season. Serve with tostadas.

\*Adapted from Campesinos Sin Fronteras, Somerton AZ



#### Pasta Tricolor\*

12 oz. tricolor pasta 1 lb. frozen vegetables (broccoli, cauliflower, carrot) 1 red onion, chopped in small pieces 2 15-oz of garbanzo beans, drained 5 tablespoons olive oil 5 tablespoons vinegar 1/2 teaspoon salt 1/4 teaspoon ground pepper 1/4 teaspoon garlic powder 2 tablespoons Parmesan cheese, grated

Cook pasta and drain. Cook vegetables and drain. In a salad bowl, combine all ingredients except the Parmesan cheese. Mix together and refrigerate for at least 2 hours. Serve with Parmesan cheese.

#### Quesadillas\*

4 flour tortillas (7 inches) 1/2 cup low fat mozzarella, shredded 2 slices of chicken or smoked turkey, cut into small pieces 2 large green onions cut in thin slices 1/2 cup fresh cilantro, finely chopped 1 tomato, finely chopped and drained 2 teaspoons pickled jalapeños, chopped

Place each tortilla on a non-stick pan.

On top of each one put 1/4 of the cheese, chicken or turkey, onion, cilantro, tomato and chili. Heat over medium heat, until the cheese starts to melt. (Don't burn the tortilla.) Fold the tortilla in half, and press down so it doesn't move. Transfer to a cookie sheet and place in oven at low temperature. Repeat with the rest of ingredients. Cut each guesadilla into thirds and serve hot.

\*Adapted from Un Mundo de Sabor, Bristol Myers Squibb Company



#### Winter Squash Soup\*

2 tablespoons butter 2 medium onions, chopped 2 medium carrots, chopped 2 cloves garlic, chopped 1 cup tomato puree 2 fresh, hot chilies, seeded and chopped 2+ 1/2 lbs. butternut squash, peeled and cubed 5 cups low-sodium chicken broth pepper to taste pinch of salt lime wedges

In a large, non-aluminum saucepan, warm the butter over medium heat. Stir in the onions, carrots, and garlic. Cook for 3 minutes and then cover the pan. Lower heat and cook for 3 or 4 more minutes, until the vegetables are very tender. Stir in the tomato puree, chilies, butternut squash, and chicken broth. Bring the soup to a simmer and cook for 30 minutes. Mash the squash pieces with a potato masher or the back of a spoon (the soup does not need to be completely smooth). Season to taste and serve. Pass lime wedges to be squeezed into each bowl of soup.

May be served with corn bread, or corn tortillas. (Makes 8 servings)

\*Adapted from Celebre la Cocina Hispana Healthy Hispanic Recipes, NIH



### Healthy Sauces and Dips...

#### Salsa de Pepino\*

(Delicious on tostadas, in tacos, or as a relish on meats.)

Chop the following ingredients:

2 cucumbers, peeled 1/2 bunch cilantro 4 green onions 2 tomatoes 1 fresh jalapeño chili

Mix with: 1 tablespoon red chili + 1 tablespoon rice vinegar

#### Low Fat Guacamole\*\*

2 zucchinis, grated 1 onion, finely chopped 1 garlic clove, minced 1 jalapeño chili, chopped (or 1 tablespoon of pickled jalapeño peppers) 1 tablespoon lime juice 1/2 teaspoon salt 1 ripe avocado

In a steamer, or hot water, steam the zucchinis for 5 minutes, or until soft. Drain, and mash or puree. Let cool. In a container, mix the onion, garlic, chili, lime and salt. Remove pit and peel from avocado, and mash until smooth. Combine onion mixture with zucchinis, and avocado. Mix until smooth (it can have a few small chunks). To avoid that the guacamole turns brown, squeeze some lime juice on top, and cover with Saran Wrap<sup>®</sup>. The guacamole can be refrigerated up to 2 days Stir with a spoon before serving.

\*Adapted from the New Mexico Dept. of Health's Wards to the Wise \*\*Adapted from Un Mundo de Sabar, Bristol Myers Squibb Company



# Healthy Desserts...

#### Low Fat Berry Bavarian\*

3/4 cup boiling water 1 package of sugar free strawberry or raspberry Jello® 1/2 cup cold water 1 3/8 cups lite Cool Whip®

Stir boiling water into gelatin bowl for 2 minutes or until completely dissolved. Mix cold water and ice cubes to make 2 cups. Add to gelatin, stirring until slightly thickened. Remove any remaining ice cubes. Stir in whipped topping with wire whisk until smooth. Spoon into dessert dishes. Refrigerate 2 hours or until firm. Garnish with additional whipped topping if desired.

#### Strawberry Pudding\*\*

1 box of instant vanilla pudding (preferably sugar free) 1 cup low fat or fat free (skim) milk 2 small cartons of low fat or fat free yogurt 2 cups strawberries, fresh or frozen

In a medium size container, using an electric mixer, mix the pudding and milk until smooth. Slowly add in the yogurt and strawberries and mix with a spoon. Pour into 8 dishes, cover and refrigerate over night (or until firm).

\*Adapted from the New Mexico Dept, of Health's *Words to the Wise* \*\*Adapted from Campesinos Sin Fronteras, Somerton AZ



## Healthy Desserts...

#### Apple Crisp\*

4 cups cooking apples, peeled, cored, and sliced (about 1 -1/2 lbs) 1/2 cup rolled oats 3/4 cup flour 1/2 cup brown sugar 1/4 teaspoon salt 1 teaspoon cinnamon 1/4 cup softened margarine Lite whipped topping (optional)

Place prepared apples in a 2-quart glass utility dish. In a small bowl, combine rolled oats, flour. Brown sugar, salt, and cinnamon. Cut in the softened margarine until mixture is crumbly. Sprinkle evenly over sliced apples. Bake either in microwave or conventional oven.

<u>Conventional oven</u>: Sprinkle 1 tablespoon of water on top of apples before oat mixture is poured on top. Cover dish with foil and bake at 375° F for 30 minutes. Remove foil and continue baking uncovered 15 more minutes. Serve warm with small dollop low fat yogurt, ice cream or whipped topping.

<u>Microwave oven</u>: Cook for 14 minutes, turning dish 1/4 turn every 2 minutes. (If microwave has turntable, rotating by hand is unnecessary).

\*Adapted from Hualapai Family Retreat Recipes , Hualapai Tribe, Dept. of Planning and Community Vision



# Healthy Drinks ...

#### Spiced Tea Mix\*

1+ 1/4 cups instant tea 1+ 3/4 oz. sugar free lemonade 1+ 3/4 oz. sugar free Tang® 2 teaspoons ground cinnamon 1/2 teaspoon nutmeg

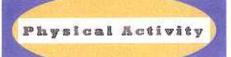
Mix all ingredients and store in a tightly sealed container. To serve, add on heaping teaspoon to 1 cup boiling water.

#### Natural Limeade\*\*

5 limes 1 gallon water 3/4 cup sugar (you can try substituting part of all of the sugar with an artificial sweetener )

Cut the limes into 4 pieces each and put in blender. Blend quickly (mixture will be slightly 'chunky'), and pour into strainer, over a pitcher. Squeeze through any bigger pieces of lime. Add water and sugar, and stir.

\*Adapted from the New Mexico Dept. of Health's Words to the Wise \*\*Adapted from Campesinos Sin Fronteras, Somerton AZ



# Stretching Exercises

#### Do these stretches gently and slowly. Do not bounce.



1. Deep breathing Arms up, breathe in, arms down, breathe out. Two times each.



5. Waist Stretches Side to side three times in each direction.



2. Neck Stretching Side to side, front to back. Two times in each direction.



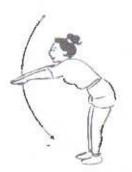
3. Shoulder Stretches 4. Side Stretches Up and down five times on each side.



Up and down five times in each direction.



6. Twists Side to side three times in each direction.



7. Back and Leg Stretches Down and up five times.



8. Back Stretch Arms through legs six times.



11. Leg Stretch (3) Move heels up and down six times.

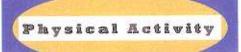


9. Leg Stretch (1) Hold on to ankle, four times on each side.

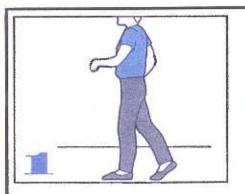


10. Leg Stretch (2) Down and up five times.

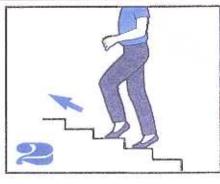
\*Adaptaded from the NIH- Su Corazón Su Vida. Developed by the California Diabetes Control Program, Dept. Health Sciences, State of California



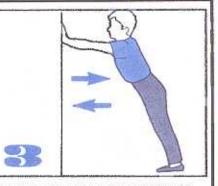
# Nine Different Leg Exercises



Walk vigorously every day for 30 minutes to an hour. Try to increase the distance you walk each day.



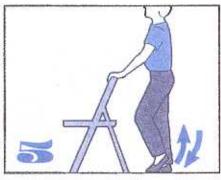
Climb stairs vigorously, step by step, using only the tips of your feet. feet.



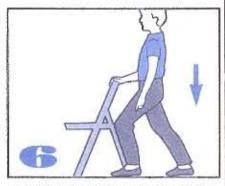
Place the palms of your hands against the wall. Standing away from the wall like the figure above, keep your feet firmly on the ground. Push against the wall 10 times without bending your back or your legs.



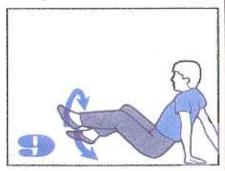
Sit on a chair and stand up 10 times keeping your arms crossed.



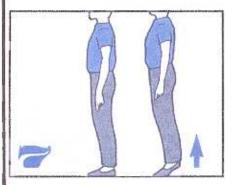
Using the back of a chair, lift your body up and down, using one foot at a time.



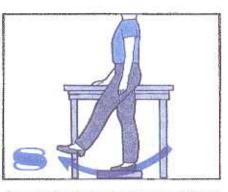
Using the back of a chair, place one foot forward like the figure above. Keeping your back straight and both feet on the floor lift and lower your body 10 times on each leg



Sit on the floor and lean back on your arms and hands. Move and gently shake your feet until they are relaxed and warm.



Lift yourself up on the balls of your feet 20 times. Try placing all your weight on one foot, then on the other.



Stand lightly on a book with one leg. Balancing against a table or chair, move your free leg slowly forward and back 10 times. Change legs and repeat.



### "Breathe Deeply"

- This exercise teaches how to relax with breathing techniques to reduce tension.
- You can use similar instructions to the script that follows.
- The best posture for deep breathing is to lie down on a firm surface with knees flexed, feet flat and slightly apart. If there is not enough space, or if you think the group won't like this position, they can sit comfortably in their chairs, with feet flat on the floor and arms supported as much as possible. Arms and backs should be straight, but not rigid.
- When everybody is ready, read the following script on the back of this page.
- After facilitating this exercise ask the families how they felt about the exercise. Was it easy? Is it something they could do every day? Why? Why not?
- Encourage them to do breathing exercises like this one for 5 minutes, twice a day.
- Tell the families that once they have practiced a few times they can do this exercise whenever...standing, seated, lying down, alone, or with other people. The key is to pay attention to the chest's movement, and the feeling of air entering and leaving the body...and the comfortable feeling that goes along with breathing deeply.
- Deep breathing exercises can be done whenever somebody starts feeling tense- it only takes a few minutes.



### Script: "Breathe Deeply"

First, I'd like you to close your eyes and get as comfortable as possible ...

Put one of your hands flat on your chest, and one hand on your abdomen between your navel and your breastbone. Take a deep breath, noticing the movement of your hands as you inhale and exhale.

Now I'd like you to breathe in slowly and deeply through your nose, bringing your breath all the way down into your belly so that it pushes up your hand as much as feels comfortable. Your chest should move only slightly and only as your belly rises.

Continue this slow deep breathing in through your nose and down into your belly...then gently let your breath go out again at a pace that's comfortable for you...

Pause: Allow everyone to find a comfortable rhythm. If anyone seems to be having trouble, repeat the last paragraph once or twice before moving on.

Now, smile slightly...relaxing your face muscles, while keeping up your own rhythm of breathing...And on the next breath please inhale deeply through your nose as before, and this time exhale through your mouth...making a soft and gently "whooshing" sound, like the wind in the pines or the ocean surf, as you blow out.

Let your mouth, tongue, jaw and throat relax as you continue to take long slow breaths in through your nose...deep into your belly...and let them out through your mouth with a soft whooshing sound...

Focus on the sound and feeling of your breathing...as your belly rises and lowers and you become more and more relaxed.

Pause: Wait 3-4 minutes. If necessary, repeat the last two phrases once or twice during that time to keep the group inhaling deeply and exhaling noisily.

Compare the tension you feel now with the tension you felt at the beginning...when you open you feel ready, open your eyes and bring your attention back to the room.



Cont'd ...

When Lucinda told her the bad news, Ma Rufina looked at Lucinda with her bright eyes and said, "Don't worry so much, mija. You'll be OK. I've had diabetes for 15 years!"

Lucinda was shocked and said, "I'm sorry, I didn't know you were sick."

Ma Rufina said, "I'm not sick, mija. I have diabetes. I'm one of the lucky ones! I know how to take care of myself. I'll let you in on a secret: Salud y alegría, belleza crían."

Lucinda didn't understand Spanish too well and asked Ma Rufina to explain it to her. "It's simple, my dear: health and happiness create beauty! People with diabetes can be healthy and happy. A happy person feels good about herself and in turn, takes good care of herself. It's like a circle".

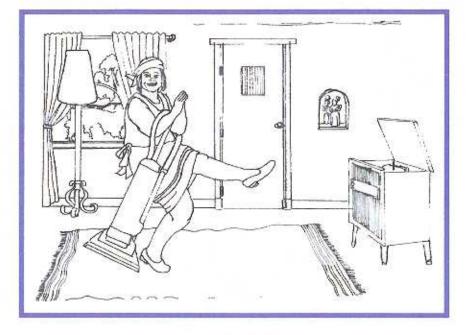
Ma Rufina's attitude brought tears to Lucinda's eyes. All this time Ma Rufina had diabetes and Lucinda didn't even know it. Ma Rufina was always helping others. She had a beautiful way of living and this helped her stay healthy and wise.

"It never fails," Lucinda said. "You always lift my spirits!" she gave Ma Rufina a big hug. As Lucinda walked down the street to her house she felt warm inside. It wasn't going to be easy to learn to take care of herself, but she knew that she had Ma Rufina's support. If Ma Rufina could be healthy and happy, she could

too!



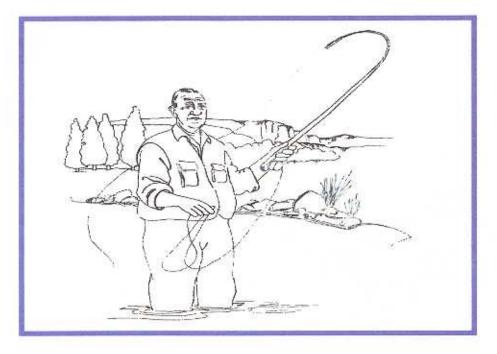
# <u>Rosita Fernandez</u>



Hello, I am Rosita Fernandez and I stretch every day for about 10 minutes. But the thing I like best is a clean house! My house sparkles.
I like my vacuum cleaner so much I named her Josie. Every day I put on some rachera music and do about 20 minutes of heavy duty cleaning. My favorite is washing the windows. That really gets my heart thumping. Other favorites besides vacuuming, are mopping the floors and scrubbing the tubs. Who says you have to go outside to be active?



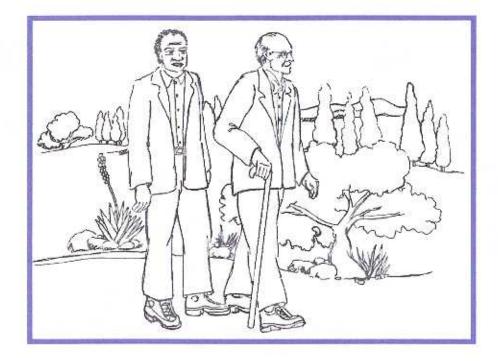
### Frank Garcia



Hola, I'm Frank Garcia and I have diabetes. I don't like to do the same things over and over again. I like variety in what I do. So, on Mondays and Wednesday I go for a walk around my neighborhood with my granddaughter and her little dog. On Tuesdays, I bowl in a league with my buddies from the VFW. On Saturdays, my vieja likes to take me dancing. But my favorite thing to do is fly fishing. I fly fish whenever I get a chance!



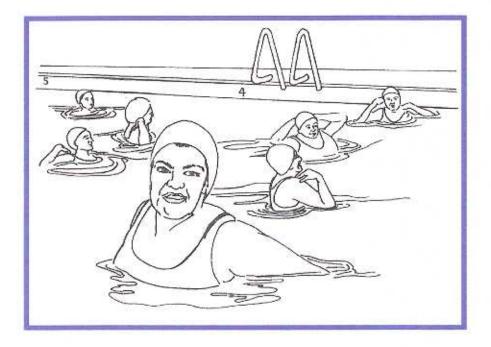
# Jorge Jimenez



Hi I'm Jorge Jimenez. I'm a walker and a talker. Every day or so, around 3:00 in the afternoon, I go over to my neighbor's and knock on his door. Roberto and I walk and talk at the same time! We talk about our kids, the Republicans and the Democrats, and when we're going to go for our next walk in the city park. We always stretch a little before we start and cool down slowly before we stop.



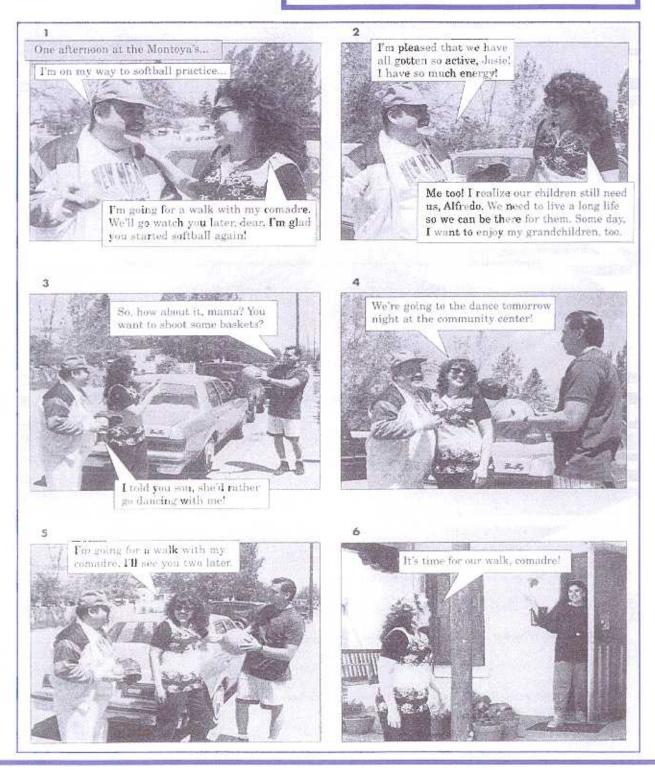
# <u>Margarita</u> Peña



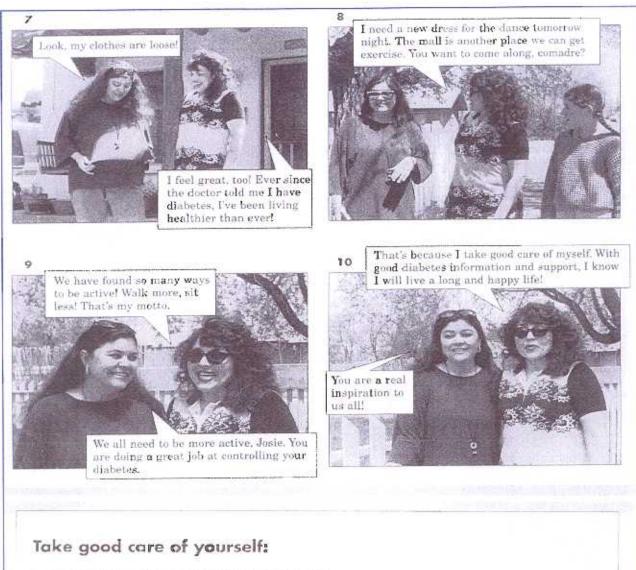
Hi, I'm Margarita Peña and I have diabetes. One of the things that I do that helps control my diabetes is water aerobics. I get together with my friends at a local pool and do exercises in the water. We always start slow, with easy and safe stretches and then work for about 20 minutes. Sure, being active helps me control my diabetes, but I also get to see my friends and have fun. Don't forget to do your stretches before you start you exercise. Fotostory



### The Montoya Family talks about Physical Activity



## The Montoya Family talks about Physical Activity



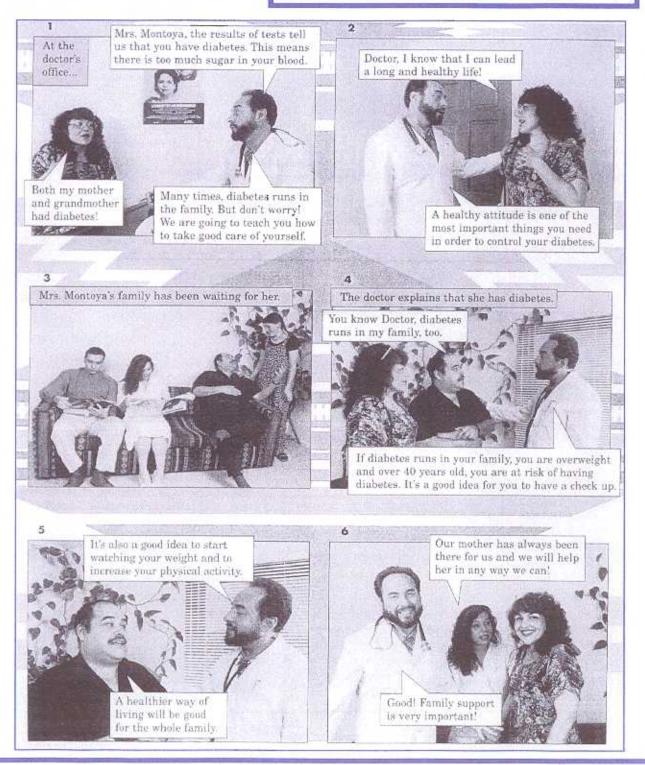
- · Move your body every day. Do things that are fun!
- · Ask a friend or a family member to join yout
- Always wear comfortable shoes like walking shoes or tennis shoes to avoid blisters or calluses.
- · Drink lots of water before and after any physical activity.
- · Check your bland-glucose every day, as recommended by your doctor.
- · Check with your doctor before beginning any new activity.

\*Adapted from Diabetes Control Program, NMDH

Fotostory



### The Montoya Family talks about a Healthy Attitude



## The Montoya Family talks about a Healthy Attitude



There are three ways you can control diabetes: Eat a low fat, high fiber diet. Exercise at least three times a week. And take the medication prescribed by your doctor.



Doctor. We love our native Mexican food, Will we have to give up chile, beans and tortillas?

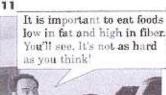


Oh no! Mrs. Montoya. People with diabetes can eat anything. They just have to eat the right amounts of a variety of foods. Even desserts like natillas, flan and bizcochitos can be eaten in moderation!

10



people with diabetes ate only vegetables!









Your mother doesn't need medication right now. If she follows our plan, she may not need to take **any** medicine. But, if we can't get the diabetes under control, we may prescribe something, later.



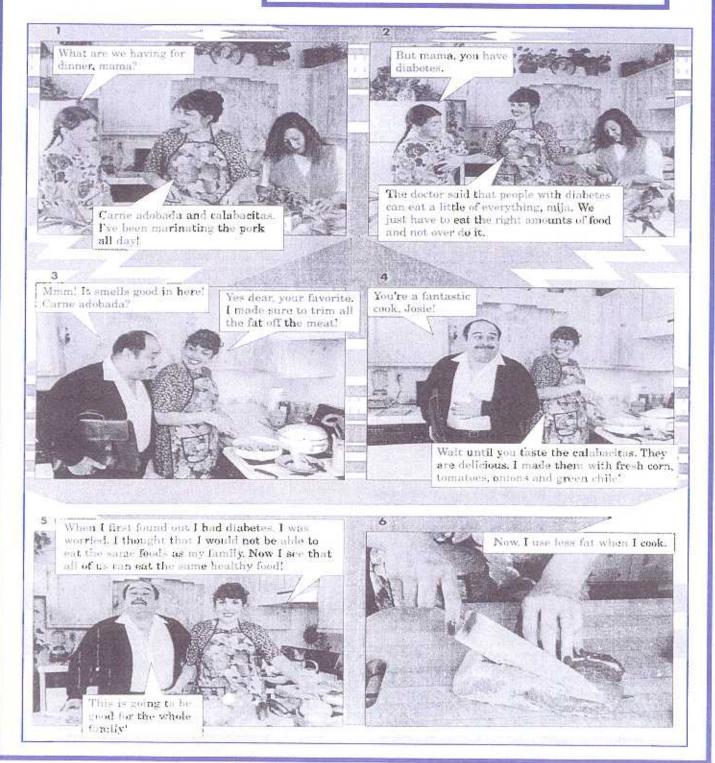
I see that you'll have no trouble! You have a healthy attitude, the support of your family, and good diabetes information!



\*Adapted from Diabetes Control Program, NMDH



## The Montoya Family talks about a 'Little of Everything'



Fotostory



## The Montoya Family talks about a 'Little of Everything'





## <u>Helping a Family Member</u> <u>Who Has Diabetes</u>

#### Signs of High Blood Pressure

This often happens when the person <u>has eaten too much</u>, has <u>too little insulin in his or</u> her body or <u>is under a lot of stress</u>. Be alert for these signs in your relative:

> Frequent need to urinate Drowsiness Nausea Extreme thirst Hunger Blurred Vision

#### Signs of Low Blood Pressure

This often happens when the person <u>has eaten too little</u>, has <u>too much insulin</u> in his or her body or <u>has exercised beyond his or her limits</u>. Be alert for these signs in your relative:

> Shaking Fast heartbeat Sweating Anxiety Dizziness Hunger Weakness and tiredness Irritability

\*Adapted from American Academy of Physicians 1999



# "Having Fun"

#### Instructions to Promotora

- This activity is about brainstorming how to put fun in your life.
- Have families as a group and make a list of ten things they like to do that are really fun.
- You may wish to give a small prize to the family with the silliest idea.
- End by asking each family to share one funny experience they had as a group, or a family story that always makes them laugh.



## Diabetes Plática

#### **Instructions to Promotora**

This plática is about listening. It should be done with two family members working together. To get the most out of the plática it is important to follow these rules:

- 1. Take turns so that each family member completes each sentence.
- 2. No comments are allowed.
- 3. The listener only listens.
- No questions are allowed until both family members finish taking their turn completing all the sentences.

(Note to promotora: You do not need to hand this out to families. You may wish to write sentences on a chalkboard, or poster paper. This activity can be written or oral. After families finish completing their sentences, you may wish to read each sentence and call on family members to share. )

- 1. When I found out I /my mother/ my sister/ my dad... had diabetes, I felt...
- 2. The worst thing about diabetes is ...
- 3. The best thing about diabetes is...
- As a person with diabetes, the thing I need most is...
   (Or, As a family member of someone with diabetes, the thing I need most is...)
- 5. My wish for all people who have diabetes is...
- 6. The best way to help my family prevent diabetes is...
- 7. The best way to help and support the person/people in my family who are coping with diabetes is...

\*Adapted from Words to the Wise, NMDH



## "Managing Stress"

#### Instructions to Promotora

- Ask participants: "What is Stress?"
- After some discussion, share the following

#### Definition of Stress:

Stress is the body's response to physical or mental pressures or changes. All kinds of change creates stress. Stress is a normal part of life.

The most important part of stress is to learn how to manage it, so that it doesn't negatively affect your health and quality of life.

 Go over each of the following "keys to management" and ask participants for specific ways to use the management ideas.

#### Three Keys to Stress Management:

1. Live a life of wellness: be active and choose healthy foods.

2. Learn to relax: learn deep relaxation, hug a loved one, laugh, dance,

enjoy music, or pray.

- 3. Get moral support from friends and family: take time to talk to others.
- Make sure to talk about the importance of laughter in our lives. Having a good sense of humor is of high value in most Hispanic cultures. Laughter, like crying is a great release.
- Encourage participants to share how their spiritual beliefs and faith have helped them with their diabetes. Studies show that people who have faith in God or in a power greater than themselves have better luck managing their health conditions.
- End by asking everybody to participate in a relaxation exercise. Use your most calm and gentle voice to read the relaxation script.

\*Adapted from Words to the Wise, NMDPH



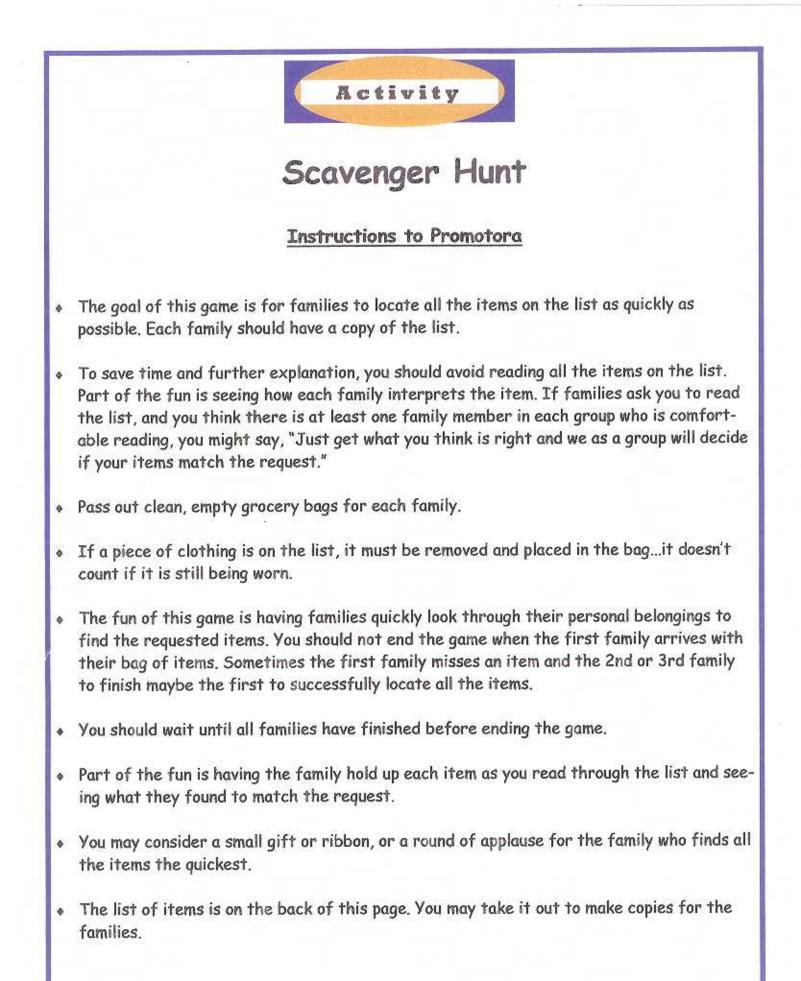
### **Relaxation Script**

Get in a comfortable position and close your eyes. Take a deep breath and as you breathe out, picture all the tension in your body leaving you.

Continue to take deep breaths. With each breath, relax each part of your body. Start with your feet, then go to your legs, thighs, torso, abdomen, chest, arms, shoulders and head. Each breath you take makes you feel more and more relaxed.

After you breathe in and out paying attention to each part of your body, picture yourself in a beautiful green meadow. All you see around you is green grass, trees and beautiful flowers. You can smell the fresh air smell the fragrant grass and flowers. The sky is clear and blue and you are completely at peace.

Take your time to enjoy this special place and keep breathing in and out. When you are ready, open your eyes.



\*Adapted from the Tobacco Prevention and Youth Wellness Programs of the Navajo Nation.



## Scavenger Hunt: Items

- A dark colored sock
- A left shoe
- One tissue or Kleenex®
- One piece of gum or candy
- A signature from someone on a different family team
- One belt
- A pencil or a pen
- A star
- A comb or brush
- A packet of sugar substitute
- A nickel
- An earring
- A plastic wallet size card, such as a grocery store card, student ID, license, etc.
- A receipt from any store
- A calendar
- A photograph