Living and Coping with the Disease Diabetes:
The benefits of health education –
The Diabetes Self-Management Program (DSME)
An Explanation about Prevention and the Health Promotion of Diabetes

Introduction:
We must learn all that we can about the disease, diabetes. It is a disease that we can fight and manage. There are a lot of us who are not even aware that we have the disease and this is why it is so important for us to go for regular checkups to doctors or other health care providers. We must improve our vigilance and maintain our commitment to managing diabetes ourselves. It is a disease. It is classified as both a chronic and acute disease, but it can be managed. This article builds on the concepts of self-control of one’s own health and illustrates the successful management of this chronic disease.

Presently, for the benefit of patients, there are many agencies that are educating consumers on the benefits of monitoring their health and managing diabetes. The Latino Health Insurance Program, Inc. (LHIP) is one of these agencies that are devoted to the improvement of one’s health and overall wellbeing. The American Diabetes Association (ADA) was founded in 1940 with a focus on diabetes prevention and wellness. As the ADA has noted, the reason for its focus on diabetes is because “diabetes causes more deaths a year than breast cancer and AIDS combined”. The ADA’s goal is to eradicate diabetes. In this article, there will be additional mention of current data and statistics that supports growing awareness of the treatment and prevention of the disease. Diabetes education, thankfully, is maintaining its momentum in reaching persons with the disease and helping them to manage the disease.

Actual Statistics on The Disease
The article titled “National Standards for Diabetes Self-Management Education and Support” states “according to the most recent statistics on the disease there are 18.8 million persons in our country that have previously been diagnosed with diabetes.” The article explains that there are a considerably larger number of adults who have what is referred to as undiagnosed diabetes. This means that there are over 7 million people designated in this category, who do not even know that they have diabetes. It should be noted that it is imperative to include these almost overlooked people in educational programs for their benefit. The article mentioned that it has become a necessity for the Task Force to make people aware of the need for this segment of society to be recognized and duly educated. For that reason the ADA titled the article the National Standards for Diabetes Self-Management Education and Support. It was previously titled the National Standards for Diabetes Self-Management Education. The change of title was necessary to convey an awareness of the need to educate this additional segment of the population so that more people can benefit from diabetes education. Information from the source cited previously shows that diabetes affects a large segment of the population. The latest statistics on the prevalence of the diabetes was taken from what was formerly called the National Diabetes Fact Sheet. The total number of people in the U.S. with diagnosed and undiagnosed diabetes is 29.1 million or 9.3 percent of the population; 21 million people have a diabetes diagnosis and 8.1 million or 27.8 percent have undiagnosed diabetes.

1 National Standards for Diabetes Self-Management Education and Support, Diabetes Care, Volume 35, November 2012
Researchers have proven that there is a definite connection between Alzheimer’s disease and the diabetes and strongly believe that diabetes causes cancer. It should be noted that diabetes is a major cause of deaths statistically in the United States. This is one of the reasons why medical programs are focusing on educating the public about diabetes awareness, prevention, and treatment and the value of food choices.

**General Ideas of What People Should Know About the Disease**
People who have diabetes or pre-diabetes experience symptoms such as a numbing, stinging pain on the bottom of their feet, which is diagnosed by doctors as diabetic neuropathy. These symptoms and the disease can be treated to prevent further harm to the feet.

**It Is Important to Know That There Are Many Types Of Diabetes**
When discussing diabetes, there are other key questions to consider like how many types of diabetes are there? It is important to know the answer to this question because the most effective type of treatment for this disease depends on a precise diagnosis. In answering any questions about diabetes, one has to consider the complexity of the disease. There is a need to explain that there are many different types of diabetes diagnoses including pre-diabetes, Type 1 diabetes, Type 2 diabetes, gestational diabetes, and at least seven other forms of diabetes that are known.4 A correct diagnosis is essential because it assuredly helps with the treatment of the disease.

In order for the diagnosis to be accurate, it is important to learn more about the symptoms of the disease. After the symptoms are specifically defined, then it becomes an issue of treating the disease and understanding that treatment is a lifelong, continuing process.

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**Who Qualifies?**
Town residents, who are low and moderate income home owners, or the owners of residential properties in Framingham with low and moderate income tenants.

Income limits are based on the number of persons living in a unit, as shown on the chart on the right. Staff will analyze income to determine if applicants have eligible income.

**Examples of Eligible work:**
- **Emergency work:** Building code deficiencies needing immediate repair such as failed heaters, plumbing & electric systems and roofs
- **Hazard abatement:** Lead paint and asbestos abatement
- **Removal of architectural barriers:** Installation of interior and exterior modifications for persons with physical disabilities

**2016 Low – Income Limit (80%)**

<table>
<thead>
<tr>
<th>Household Members:</th>
<th>80% of Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$51,150</td>
</tr>
<tr>
<td>2</td>
<td>$58,450</td>
</tr>
<tr>
<td>3</td>
<td>$65,750</td>
</tr>
<tr>
<td>4</td>
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</tr>
<tr>
<td>5</td>
<td>$78,900</td>
</tr>
<tr>
<td>6</td>
<td>$84,750</td>
</tr>
<tr>
<td>7</td>
<td>$90,600</td>
</tr>
<tr>
<td>8+</td>
<td>$96,450</td>
</tr>
</tbody>
</table>

Funding is provided to a qualified **Owner-Occupant**, as a deferred no interest loan (max. $30,000), and recorded as a lien on the property. The loan is repaid upon sale or transfer of the property or if the low income owner is no longer a full-time resident there, or if there is a refinancing of the property with cash taken out.

**Repairs NOT Eligible:**
- Additions or general remodeling
- Landscaping
- Work started before program participation

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Maria Hernandez
Outreach Manager (Bilingual)

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Migdalia, administradora de cuidados de Caregiver Homes. Juntos, que cuidar y ayudar, hicimos este trabajo desde 2011.

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At workshops today, people are taught that there is hope in dealing with the disease and that the effort of specialists is needed to maintain and control the disease, as well as having frequent blood tests to monitor the blood sugar count in the blood. Managing the diabetes is the key and attending workshops on eating nutritious food is part of the answer and following the recommendations of a nutritionist is highly recommended.

The Types of Diabetes That Are at The Forefront Today

The following types of diabetes are at the forefront in research today: gestational diabetes which affects a woman when she is pregnant and her unborn fetus; type 1 diabetes which is generally inherited and affects children as well as adults; and type 2 diabetes. The majority of the people in the general population and the Latino population have been diagnosed with type 2 diabetes.

Presently, with a diagnosis of prediabetes, one has options and hopes of not developing the disease. Testing the blood for A1C levels reveals the amount of sugar in the blood for the past three months. Exercise is a key part of overall health maintenance and living up to the challenge of dealing with prediabetes.

Suggestions for Combating and preventing the Disease

Concentration on losing weight is key to controlling prediabetes. Getting checkups on a regular basis by one’s primary care physician is important because it provides a means of tracking improvements in one’s health. Getting enough sleep helps control diabetes and eating green vegetables, carrots, broccoli, and additional low-starch vegetables helps to maintain

4 Forms of diabetes-Wow.com, 11-4-2015
5 Ibid
body sugars at lower-levels, which is healthier. Other suggestions include consuming lower fat milk instead of whole milk, brown rice instead of white rice, and eating from one to five servings of fruits and vegetables daily. 

According to the New York Times Health Guide, there is a better chance of recovering from the pre diabetes stage and avoiding the onset of full-blown diabetes with the knowledge available from the volume of research on diabetes. There is a lot more hope that one can take control of one’s destiny in dealing with diabetes. 

### Conditions of the Body That Are Linked to Type 2 Diabetes

Recent research has linked other well-known diseases such as Alzheimer’s disease with diabetes, which may seem surprising but in fact it is often referred to as the type III diabetes by researchers. Another disease that researchers have closely identified with diabetes is polycystic ovary syndrome, which is often referred to by its acronym PCOS and is generally offered as a reason for women’s fertility problems.

Cushing’s syndrome, which is linked to the excess production of cortisol by the body, is another disease of the body that is closely linked to diabetes. Cushing’s syndrome is known to have occurred in the body when the patient has been exposed to the high levels of cortisol for a long period of time.

Currently researchers debate the link between pancreatic cancer and Type 2 diabetes, but the fact is a link between the two diseases and how closely they are linked is unknown.

It is important for diabetics to know that the disease causes a serious problem with the nerves on the bottom of their feet and the nerve endings in other parts of their body and is referred to as diabetic peripheral neuropathy. It is a disease that is directly attributable to diabetes and most often attributable to uncontrolled diabetes. It is a disease that presents “a specific type of pain caused by uncontrolled blood sugar over time or fluctuating blood levels.”

### Fact: The Key to Controlling Diabetes is through Proper Nutrition and Diabetes Education

The key to effective treatment and maintaining a healthy lifestyle is eating correctly. Eating vegetables provides the nutrition that is needed. It is important to know that although one must eat carbohydrates, carbohydrates can be stored in the body and excess amounts will turn into fat. Protein can also turn into fat in the body. Too much protein and too many carbohydrates can be converted into glucose in the body.

### Who needs to be screened for diabetes? ADA Recommendations. (Assessment and blood test)

- Screen asymptomatic adults 18 years old or more with a body mass index (BMI) >25 or >22 if of Asian origin with 1 or more of additional risk factors:
  - Previous diagnosis of pre-diabetes
  - High cholesterol or low HDL cholesterol
  - Hypertension (BP> 140/90 or taking medication for hypertension)
  - Physical inactivity
  - Cardiovascular disease
  - First-degree relative with T2 diabetes mellitus
  - Polycystic ovary syndrome
  - Women who had gestational diabetes or who delivered a baby weighing >9 lbs.
  - High-risk ethnicity: African American, Native American/Alaska Native, Hispanic/Latino, Asian American, and Native Hawaiian/Pacific Islander
  - Acanthosis Nigricans, antipsychotic or corticosteroid therapy, sleep disorders
  - In persons without risk factors, testing should begin at 45 years of age. In this group of people, if normal test, repeat test every three years
  - Children and adolescents who are overweight or obese with more than two risk factors

Other guides are also available and are similar. All guides recommend screening everybody who is overweight or obese with any of the risks factors. Ask your doctor if you need to get tested.

### Diabetes Preventive Clinic at the Latino Health Insurance Program, Inc. (LHIP)

We launched our diabetes preventive clinic in January 2016. Rather than conflict with a patient’s previous treatment or their PCP’s recommendations, we provide medical support, counseling, education to fight diabetes and help implementing recommendations and becoming a self-advocate.

### Objectives:

- Prevent the progression of pre-diabetes to diabetes in persons at high risk
- Prevent the acute and chronic complications experienced by people with diabetes
- Promote better health through health literacy education and by encouraging the individual to be proactive and the center of their own care
- Reduce or eliminate barriers to care and social determinants of health for minority patients with diabetes or at risk for this condition

The A1C goals currently recommended by the ADA in an individual with diabetes are <7%.

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8 Smarter.com/pre diabetes, and get.smarter.com/qa/health/can-prevent-diabetes if diagnosed with pre-diabetes
10 Ibid.
11 Ibid.
12 Ibid.
13 Ibid.
Additional benefits may include:

- **Prescription Drugs**
  Thousands of drugs available.

- **Dental Coverage**
  $0 co-pay for dental fillings and dentures.

- **Transportation Assistance**
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UnitedHealthcare SCO is a Coordinated Care plan with a Medicare contract and a contract with the Commonwealth of Massachusetts Medicaid program. Enrollment in the plan depends on the plan’s contract renewal with Medicare. This plan is a voluntary program that is available to anyone 65 and older who qualifies for MassHealth Standard and Original Medicare. If you have MassHealth Standard, but you do not qualify for Original Medicare, you may still be eligible to enroll in our MassHealth Senior Care Option plan and receive all of your MassHealth benefits through our SCO program. This information is not a complete description of benefits. Contact the plan for more information. Limitations, co-payments, and restrictions may apply. Benefits, premium and/or co-payments/co-insurance may change on January 1 of each year. Premiums, co-payments, co-insurance and deductibles may vary based on the level of Extra Help you receive. Please contact the plan for further details. Enrollees have no out of pocket costs.

**Organizational Structure:**

The Diabetes Preventive Clinic has 2 physicians (one serves as a coordinator), 4 CHWs, 2 CMAs and 1 nurse. Our CHWs received the Stanford Leadership Training of Diabetes Self-Management Education. Our physicians and assistants use the National Diabetes Prevention Program’s Test for Pre-Diabetes. The physicians received the American Association of Diabetes Educators training and work with the National Standards for Diabetes Self-Management Education and Support (AADE and ADA).

**Activities:**

Pre-screen all people age 18 and older who are overweight, obese or have high blood pressure using the CDC’s test to screen for pre-diabetes. We measure a patient’s height, weight and waist, document his or her medical history and current problems if any. Patients at risk are counseled to increase physical activity to 150/min/week, lose weight and eat healthy. Also upon consent we refer them to exercise programs and follow them up to 3-months.

We assess, measure and counsel all individuals with a previous diagnosis of diabetes. We also address potential barriers and social problems the individual may face and help them apply for medical and dental coverage, federal nutritional programs, such as SNAP (formerly known as food stamps) and make referrals to mental health providers, home modification programs, smoking cessation programs, immunizations, and the services listed below:

- **Immunizations updated**
- **Laboratory tests**
- **Annual eye exam by ophthalmologist or optometrist**
- **Foot exam in each medical visit**
- **Education on physical activity**
- **Tobacco counseling and treatment**
- **Mental health screening/psychosocial care and appropriate referrals**
- **Medical nutrition therapy**
- **Dental exam**
- **Diabetes Self-Management Education**
- **Cancer screening**
- **Treatment and follow-up referrals**

**Follow Up and Referrals:**

Once we evaluate our patients, we refer them to their PCP for follow-ups and to specialists based on their needs (i.e. mental health provider, podiatrist, ophthalmologist if they have not had an exam in the past year, or other specialists that they may require). LHIP patients receive general diabetes counseling and follow-up every three months.

Upon consent we refer the patient to the Diabetes Self-Management Education Program (DSME) in our office, which is referred to as “Mi Vida, Mi salud”: Supporting Latino Families with Diabetes Program. DSME is an ongoing process of facilitating the knowledge and skills necessary for diabetes self-care. These workshops are patient centered, respectful and responsive to the patient’s needs and values, culturally tailored and designed to assess the patient’s particular issues.

Stanford University’s DSME program (DSME Support) coupled with medical nutrition therapy and counseling to promote healthy living are the foundations of care for people living with diabetes. Patients with diabetes are referred to the DSME program.

The DSME training, which consists of six weekly sessions lasting 2.5 hours/session, has proven to help participants improve and maintain outcomes for six
Summary:
We are a nation that is endowed with the resources to fund highly scientific methods of research and the use of sophisticated medical equipment to concentrate on helping persons with diabetes live full lives without complications from the diabetes. Participation in programs that enhance control of the disease and attendance at educational workshops that redefine the options for control and complete remission must be continuous. Diabetes can be controlled. There is no reason for the disease to get worse and cause harmful damage to the body. More knowledge about the disease is forthcoming with discoveries about the diagnosis, treatment, and cure surfacing daily. Even though statistics indicate that the disease is on the rise, on the increase also is the amount of information pouring forth that will help anyone who has the disease to mitigate its devastating effects. Isn’t it wonderful that diabetes is a disease that can be controlled? Diabetes is a disease that can be prevented by changing lifestyle. In individuals with diabetes, DSME and DSMS have been shown to improve health outcomes by changing their health behaviors. Participation in these programs is high and our diabetes patients are experiencing success. We think that DSME/DSMS are going to rise in number across the country and hopefully, more patients with diabetes with benefit from them.

Outline for Article on Diabetes
An Explanation about Prevention and the Health Promotion of the Chronic Disease, Diabetes
• Actual statistics
• What does diabetes education stress?
• How does diabetes affect the body?
• General ideas of what people should know about the disease
• It is important to know that there are many types of diabetes
• The types of diabetes that are at the forefront today
• Suggestions for combating the disease
• Conditions of the body that are linked to type 2 diabetes
• Fact: The key to controlling diabetes is proper nutrition
• Who needs to be screened for diabetes? ADA Recommendations. (Assessment and blood tests)
• Diabetes Preventive Clinic at the Latino Health Insurance Program, Inc.
• Summary
• Footnotes
• Bibliography

months and more after completing the program. Behavior change is the key outcome and provides a useful framework for assessment and documentation. We offer these workshops in Spanish, Portuguese, and English. You can call us at 508-875-1237 or visit our offices in Framingham, Milford, East Boston, and Worcester (www.lhiprogram.org) to learn how to participate in our diabetes program and about our multiple services.

Services:
LHIP provides the following programs and services:
• Bilingual/Trilingual Chronic Disease and Diabetes Self-Management Education Program
• Isolation and depression screening, referrals, and support for seniors
• Prediabetes screening, education, and referrals to exercise programs
• Care coordination and cancer prevention
• A Matter of Balance Program for patients 60+
• Health and dental insurance coverage and renewals
• SNAP and WIC enrollment and referrals to food pantries
• Home safety assessment
• Bilingual asthma home visiting program
• Transportation for individuals 60+ and escort services when needed
• ESL classes
• Bi-monthly, trilingual magazine “Todo el Mundo” (Everyone)
• Referrals to medical appointments and specialists
• Referrals to other health services and programs
All services are offered in English, Spanish and Portuguese.

We assess the 7 Self-Care Behaviors in our individuals with diabetes:
1. Healthy Eating
2. Being Active
3. Monitoring
4. Taking Medication
5. Problem Solving
6. Healthy Coping
7. Reducing Risks
Contact us at 508-875-1237, if you would like to know more on how to participate in our diabetes health education workshops or need more information about our diabetes clinic.

Testimony of a patient Oscar Hernandez:

“The services that I receive in the programs are excellent! When I go there, I have always felt welcome. They make me feel confident to ask any questions. I will continue to participate in the different programs that LHIP offers that their doctor referred me, such as Tomando taking control of my health, diabetes self-management, A matter of Balance, and education on cancer of prostate and colon. Thanks to LHIP I am participating in a food program (meals on wheels). In that program, they bring me food daily. They referred me also to discount medication programs, where they helped me to get my medicines for diabetes at a lower cost. These are good assistances, because I am not working now due to the surgery. I recommended it to my friends that if they need help with medical coverage or with any medical assistance, to reach LHIP, because they will help them. My friends pay attention to the care and services that I have received through LHIP. Thanks to “Mi Vida, Mi salud” program I am alive!”

Footnotes

1. National Standards for Diabetes Self-Management Education and Support, DiabetesCare
Acknowledgement

This article is dedicated to all the families, who suffer of the disease diabetes and to our supporters and collaborators. Let us all work together to eliminate this disease in our communities, so help us to spread the word about health education and prevention. Our partnerships with many community-based agencies, health care providers, and churches enable us to help members of our community to maximize their interactions with the health care system. Special acknowledgment to Tufts Health Plan Foundation, which funds our “Mi, vida, Mi salud”: Supporting Latino Families with Diabetes Program, Inc. If you want to know more on how to support our prevention efforts, or how to refer a patient or client to our diabetes services, please call us at 508-875-1237. You can also know more about our agency by login in our webpage www.lhiprogram.org

We would like to thank the following institutions for underwriting the cost to produce and distribute Todo El Mundo free of charge to members of our community:

- Caregiver Homes
- Peabody Resident Services
- Senior Whole Health
- United Healthcare
- Town of Framingham Housing
- Rehabilitation Assistance Program

The Latino Health Insurance Program, Inc. Framingham and Milford Diabetes Self-Management Education* Programs have been Recognized by the American Diabetes Association for Quality Self-Management Education and Support.

If you want copies of this article, please call us at 508-875-1237, or email us at help@lhiprogram.org.

This article is available in English, Spanish, and Portuguese.

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On May 9th LHIP received the prestigious Kate Lorig Healthy Living Innovation award. This award was originally presented by Health Living Center of Excellence to Kate Lorig, who founded the Stanford CDSMP, for these evidence based programs that are offered nationally and in Massachusetts. LHIP is the first provider in the Commonwealth to receive the award.

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