

Engaging Native Elders and CHRs: *Talking Circles in Community-based Diabetes Education*

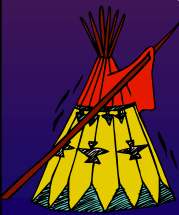
National Resource Center for Native American
Aging (NRCNAA)

Administration on Aging (AOA)

Grant Number 90-AM-2380

UND Nursing Center

*With Special Thanks to CHR Programs of the
Northern Plains*



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Long-term Goals for the Project

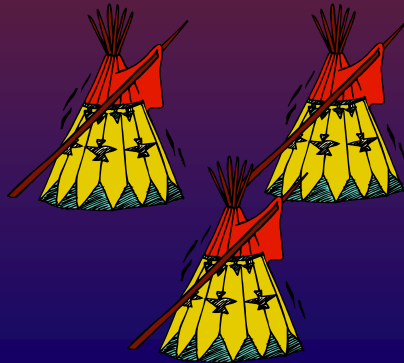
- ❖ To promote diabetes awareness and education in Tribal Nations through community-based diabetes prevention education
- ❖ To tap into existing strengths of native elders and Community Health Representative Programs (CHRs) as leaders in community-based prevention and education



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Short-term Goals for the Project

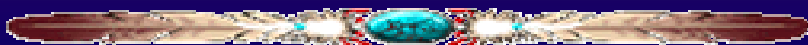
- ❖ Build partnerships for diabetes prevention among:
 - ❖ Native elders
 - ❖ CHRs
 - ❖ I.H.S. professionals
 - ❖ Tribal health personnel
 - ❖ Traditional leaders
 - ❖ Community members
 - ❖ NRCNAA / AOA
 - ❖ UND Nursing Center



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Objectives of the Project

- ❖ Make a culturally competent “translation” of new findings in diabetes research available to communities
- ❖ Empower people with knowledge at the “grass roots” level who live and work with diabetes “day to day”
- ❖ Develop an educational format that effectively links with existing community and cultural strengths

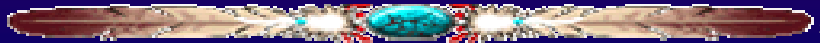


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“Fits” with Goals of the *Steps to a HealthierUS*¹ Initiative


- ❖ Recent Health and Human Services initiative launched to control chronic diseases, especially:
 - ❖ Diabetes
 - ❖ Asthma
 - ❖ Obesity



Building “Healthy Communities”² through Empowerment is an Important Goal

*“Individuals have the power to protect their health,
and prevention is the key.”²*

(HHS Secretary Tommy Thompson, 2002)




Talking Circle Education Project: A Good “First Step”...

❖ Focus fits with *Steps to a HealthierUS*¹

For example:

- ❖ training to “empower patients to manage their chronic conditions effectively”
- ❖ “new and innovative partnerships among federal, state, local, and tribal governments and communities”
- ❖ “communication strategies to inform and influence individual and community decisions on health”


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Why Awareness and Prevention Education for Diabetes?

❖ Today’s Situation

- ❖ Prevention of type 2 diabetes mellitus urgently needs special attention at the national level
- ❖ Diabetes has nearly doubled in the past decade, now approaching 17 million³



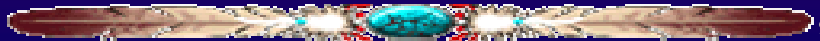
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Burden of Diabetes

- ❖ Significant personal costs!

- ❖ Complications are disabling
- ❖ Costs of personal pain, suffering, disability, and impact on family members are not even measurable...



Burden of Diabetes

- ❖ High financial costs!

- ❖ Estimated \$132 billion spent on diabetes care in the U.S. in 2002.⁴
- ❖ “Health care spending in 2002 for people with diabetes is more than double what spending would be without diabetes.”²⁴ (ADA, p. 917)





Healthy People 2010 Goals for the Next Generation¹²

- ❖ Reduce Incidence of Diabetes
- ❖ Reduce Risk for Complications
- ❖ Reduce Health Disparities

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Translating Research into a HealthierUS...

- ❖ Emerging research findings in diabetes prevention is *very encouraging!*




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The People Need the *Power* of Knowing...

- ❖ Diabetes complications can be prevented¹⁴
- ❖ Type 2 diabetes is *preventable!*¹⁵

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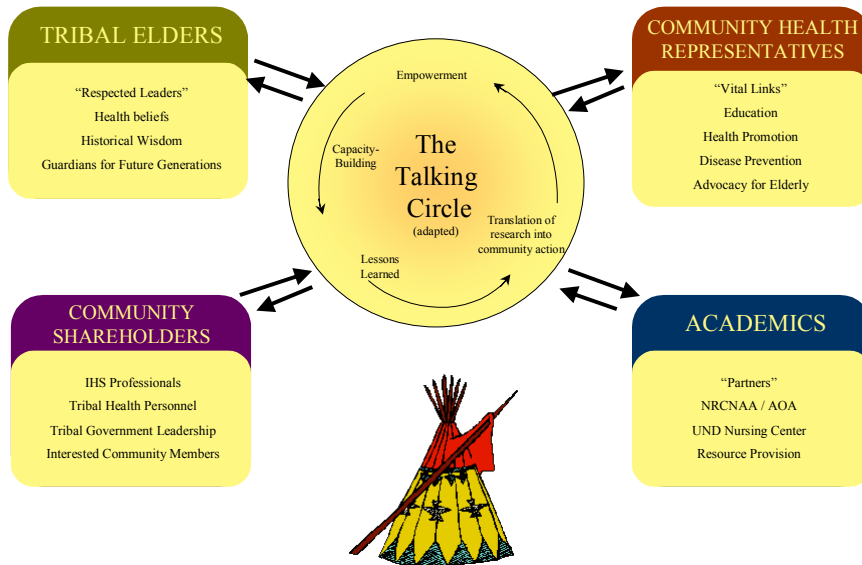
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- ❖ A Northern Plains “*Step*” towards ...
 - ❖ Building Capacity for Community-based Awareness, Education & Prevention for Diabetes



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Engaging Native Elders and Community Health Representatives in the Creation of Healthy Communities: An Adapted Talking Circles Model for Diabetes Prevention Education



Purposes of *Talking Circle* Project

❖ Create an innovative format for delivery of diabetes prevention education that is:

- ❖ Culturally relevant
- ❖ Community-based
- ❖ Assets-oriented¹⁶



*Adapted *Talking Circle* Format

❖ Why the *Talking Circle* Model?



- ❖ Provides opportunities for individuals both to speak and to listen to the wisdom of the entire group of participants
- ❖ Drawn from an oral tradition approach for communication¹⁸
- ❖ Has been used effectively in diabetes education in smaller support group settings¹⁸

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Next Steps...

- ❖ Use the “cross-pollination” of medical and cultural knowledge that was shared to plan future community-based diabetes prevention programming

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More Next Steps...

- ❖ Discuss building the evaluation component for future workshops with Tribal leadership
 - ❖ Work collaboratively on an evaluation plan for future workshops and the impact on community diabetes prevention

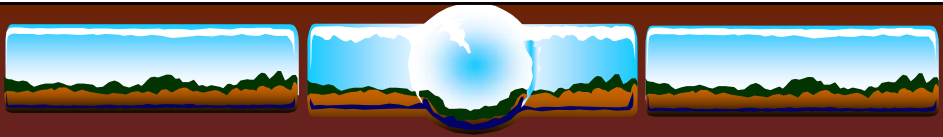
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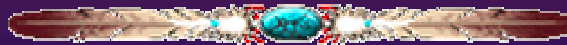
Helpful Website Links

- ❖ <http://www.ihs.gov/medicalPrograms/diabetes/2001soc.pdf>
- ❖ <http://www.ihs.gov/medicalPrograms/diabetes/AIEldersandDiab.asp>
- ❖ <http://www.ihs.gov/medicalPrograms/diabetes/NDPreferences.asp>
- ❖ http://www.HealthierUS.gov/steps/summit/prevportfolio/Power_Of_Prevention.pdf
- ❖ <http://www.cdc.gov/Diabetes/projects/comm.htm>
- ❖ <http://www.niddk.nih.gov/patient/dpp/dpp.htm>
- ❖ <http://www.cdc.gov/diabetes/news/docs/qucomm.htm>

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