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# INControl

## Cardiovascular Health & Diabetes

### INDIANA STATE DEPARTMENT OF HEALTH CARDIOVASCULAR HEALTH & DIABETES SECTION:

TO REDUCE THE BURDEN OF DIABETES, CARDIOVASCULAR DISEASE AND STROKE IN INDIANA THROUGH DATA SURVEILLANCE, HEALTH COMMUNICATIONS, HEALTHY SYSTEMS DEVELOPMENT, AND DEVELOPMENT AND IMPLEMENTATION OF COMMUNITY INTERVENTIONS AND PROGRAMS.

## DEEP—Diabetes Empowerment Education Program

As National Minority Health Month comes to a close, it is important to remember the programs that continue to improve the health of our minorities in Indiana. The Diabetes Empowerment Education Program Tobacco Control (DEEP TC) is one of those programs. DEEP TC is a proven empowerment and education program being offered statewide by over 20 minority organizations.

DEEP TC was created by the Midwest Latino Health Research, Training and Policy Center at the University of Illinois at Chicago. It was developed to provide community residents with the tools to better manage their diabetes in order to reduce complications and lead healthier, longer lives. Offered as an 8-10 week program, DEEP TC is implemented by Community Health Workers (CHWs) in community locations. The curriculum covers diabetes risk factors, complications, nutrition, physical activity, use of the glucose meter and medications, building partnerships with a diabetes health care team, psychosocial effects of illness, problem-solving strategies, how to access community diabetes resources, and tobacco control tools.

The DEEP TC program goals are for each participant to increase knowledge of diabetes, increase self-management skills, better manage psychosocial issues, reduce A1C and weight, and make short- and long-term behavioral changes.

The curriculum is also available in Spanish. In Indiana, this option has been very valuable in reaching our Spanish speaking Hoosiers.

**To read more on how the Indiana DEEP TC programs are accomplishing their goals and reaching minorities—page 4.**

### DEEP TC Indiana Testimonials . . .

***“100% [of my group participants] liked the health screenings the most. All the activities were a lot of fun”***

• Group Facilitator

***“[I liked] learning how to read food labels”***

• Group Participant

***“[I liked] the exercise about sugar, salt, and carbohydrates; [I needed] more time for this subject”***

• Group Participant

***“[I liked] explanation of harmful conditions, damage, etc.; this info has been greatly appreciated and has been informative, increasing my knowledge of diabetes.”***

• Group Participant

(more on page 4)

### **CDC Diabetes Prevention Recognition Program Launch**

The Centers for Disease Control and Prevention (CDC) invites organizations that offer a lifestyle change program for preventing type 2 diabetes to apply for recognition by the Diabetes Prevention Recognition Program (DPRP). The DPRP has three key objectives:

The DPRP is working to bring together evidence-based lifestyle change programs. The lifestyle program in the research study led by the National Institutes of Health revealed making modest behavior changes (making improved food choices and increasing physical activity) helped participants lose five to seven percent of their body weight. These changes reduced the risk of developing type 2 diabetes by 58 percent in people at high risk for diabetes.

The DPRP has three key objectives:

- Assure quality, consistency and broad dissemination of the lifestyle intervention.
- Develop and maintain a registry of organizations that are recognized for delivering an effective lifestyle program to people at high risk for type 2 diabetes.
- Provide technical assistance to organizations that have applied for recognition to help deliver effective lifestyle programs and achieve and maintain recognition status.

CDC has also established a national registry which provides contact information for programs offering the CDC-recognized lifestyle intervention in communities across the United States. This registry can be used by individuals or healthcare providers to locate an organization offering the classes.

Click here to read more on the [National Diabetes Prevention Program](#).

### **HBO Series: THE WEIGHT OF THE NATION, Addressing the National Obesity Epidemic**

Bringing together the nation's leading research institutions, THE WEIGHT OF THE NATION was developed in partnership with the Institute of Medicine (IOM), in association with the CDC, National Institutes of Health (NIH), the Michael & Susan Dell Foundation and Kaiser Permanente. The series debuts in May, exclusively on HBO.

In the United States, 68 percent of adults aged 20 years and older are overweight or obese, while 31.7 percent of the nation's children and adolescents aged 2 to 19 years are overweight or obese. Obesity-related health care costs about \$147 billion annually. Healthcare costs are an average of \$1,400 more a year for someone who is obese.

THE WEIGHT OF THE NATION is a four-part documentary series, each featuring case studies, interviews with our nation's leading experts, and individuals and their families struggling with obesity. The first film, CONSEQUENCES, examines the scope of the obesity epidemic and explores the serious health consequences of being overweight or obese. The second, CHOICES, offers viewers the skinny on fat, revealing what science has shown about how to lose weight, maintain weight loss and prevent weight gain. The third, CHILDREN IN CRISIS, documents the damage obesity is doing to our nation's children. The fourth film, CHALLENGES, examines the major driving forces causing the obesity epidemic,

The series will debut on Monday, May 14 and Tuesday, May 15 on HBO, with two films airing back-to-back each night.

For more information, visit the [Weight of the Nation](#).

### **American Diabetes Association's Camp John Warvel**

Children and teens with diabetes can get a head start on managing their disease by registering online this month for the American Diabetes Association's week-long, residential summer camp in northern Indiana, known as Camp John Warvel.

Camp John Warvel offers traditional camp activities as well as constant medical assistance for children living with diabetes. Children ages 7 to 15 with type 1 or type 2 diabetes are eligible to apply. Teens ages 16 to 18 can also apply for camp staff intern positions.

This year's camp is from June 10-16. Last year, 186 campers registered to participate in Camp John Warvel, which takes place at the YMCA Camp Crosley facility in North Webster.

Download brochure and register online at [www.diabetes.org/adacampjohnwarvel](http://www.diabetes.org/adacampjohnwarvel).

For more information, contact Carol Dixon, 1-888-342-2383, ext. 6732, or [cdixon@diabetes.org](mailto:cdixon@diabetes.org)

## **Announcing the Eagle Books Toolkit!**

The Eagle Books are inspired by the wisdom of traditional ways of health in tribal communities and feature a colorful cast of animal characters and young friends who explore the benefits of being physically active, eating healthy foods, and seeking the wisdom of elders regarding healthy living. They were produced by CDC's Native Diabetes Wellness Program of the Division of Diabetes Translation to broaden type 2 diabetes awareness and prevention in children.

The [Eagle Books Toolkit](#) is now online. It contains information, ideas, downloads and how-to instructions - just about everything you need to hold a community health fair, school assembly or another wellness event. On the site you'll also find lots of Eagle Books materials and activities for parents and teachers.

Click here to learn more about [Eagle Books](#).

## **Primary Care Providers' Article and Tip Sheets on Sodium Reduction**

CDC authored article, "[Primary Health Care Providers' Attitudes and Counseling Behaviors Related to Dietary Sodium Reduction](#)", published in the *Archives of Internal Medicine*, reveals the majority of primary health care providers agreed their patients should reduce sodium intake. The findings from this article indicate that more effort is required to inform health care providers about how to help patients reduce sodium intake according to current *Dietary Guidelines for Americans*. To support this important public health effort, as well as the grantees' work on sodium reduction and awareness in the primary care setting, the CDC has drafted additional resources. The intended audiences and scope for the complementary pieces include:

- *Primary care providers*. This fact sheet contains information about excess sodium intake and means for reduction.
  - ◊ [Sodium: the facts](#)
- *Patients*. These handouts offer practical tips for reducing sodium intake and is intended for distribution to patients in the primary care setting.
  - ◊ [Reducing Sodium in Your Diet to Help Control Your Blood Pressure Sheet](#)
  - ◊ [Get the Facts: Sodium Reduction Tips](#)

## **Report Notes a Decline in Lower-limb Amputations among U.S. Adults with Diagnosed Diabetes**

The rate of leg and foot amputations among U.S. adults aged 40 years and older with diagnosed diabetes declined by 65 percent between 1996 and 2008, according to a new study by the CDC. Better blood glucose (sugar) control, foot care and diabetes management, along with a drop in heart disease, likely helped cut the number of amputations, according to CDC researchers.

Despite the decline, amputation rates were still eight times higher among people with diabetes in 2008 than for people without diabetes.

- People with diabetes should manage blood sugar to lower the risk of complications.
- People with diabetes should check their feet for sores or injuries once a day, and wear shoes that fit right and do not cause blisters.
- Health care providers should examine the feet of people with diabetes at every checkup, but at least once a year.

For more information on foot care for people with diabetes, please visit <http://www.cdc.gov/Features/DiabetesFootHealth/>.

For more information on the study, read the [CDC press release](#).

# The Indiana DEEP-TC Program

By Manisha Singhal, MPH

In December 2010, the Indiana State Department of Health's Cardiovascular Health and Diabetes Section launched the first in a series of funding opportunities for the community-based implementation of the DEEP TC module. The DEEP TC curriculum was designed to reduce diabetes disparities among disparately impacted populations and enhance the quality of life for Hispanics/Latinos and African Americans living with diabetes by working to build the capacity of targeted communities to plan, implement, and evaluate linguistically and culturally appropriate interventions. The purpose of the funding opportunity was to enable trained community health workers to deliver the DEEP TC to address the needs of Hispanic/Latino and African American populations with diabetes in Indiana. The DEEP TC curriculum was further enhanced through the use of the National Diabetes Education Program (NDEP) materials in every class module.

An initial evaluation was conducted on the behavioral impact of the program, and results showed that the DEEP TC was successful in reaching its target population. Approximately 61.4% of participants were Hispanic, 25.7% were White and 12.9% were African American. Furthermore, approximately 44.1% spoke English as their primary language and 55.9% spoke Spanish as their primary language.

Participant surveys were administered at the end of each class in order to collect information on knowledge, skills and behavior indicators along with participant satisfaction with each module. Survey questions were grouped into two categories: knowledge-oriented or action-oriented questions. For the knowledge-oriented survey questions, 95.3% of respondents cumulatively indicated that they were either "Very Satisfied" or "Satisfied" with the information gleaned from the modules. More specifically, after the completion of each module, 100% positively responded that they had a better understanding of diabetes; 96.3% indicated a better understanding of how to control blood glucose levels; 96.4% reported understanding diabetes risk factors; 93.0% were better able to understand diabetes complications; 100% were better able to understand nutrition and diabetes; 87.0% were able to better understand how to manage medications; 94.0% could better understand the information on depression; 98.1% were able to understand how exercise controls diabetes; and 92.2% reported being able to understand the benefits of quitting smoking for people with diabetes.

For the action-oriented survey questions, 91.1% of the DEEP TC participants cumulatively indicated that they were either "Very Satisfied" or "Satisfied" with the skills they learned from the modules. More specifically, after the completion of each module, 98.0% positively indicated feeling confident to talk about the human body and diabetes; 94.4% reported being able to adequately use the glucose meter at home on their own; 94.6% positively indicated that they are able to recognize diabetes risk factors in their family; 91.2% will apply recommendations to prevent diabetes complications; 98.3% can put into a practice a nutritional plan to manage diabetes; 88.9% reported being able to navigate medications better; 94.0% indicated that they felt confident talking to their family about diabetes; 100% of participants positively responded that they would be able to start an exercise program to prevent or control diabetes; and 58.8% of participants indicated that they would be able to apply strategies for tobacco cessation to help control diabetes complications. Comments suggest that the comparatively lower positive response rate for the tobacco question was due to the ambiguous way the question was worded rather than a lack of motivation on the part of participants, and the question has since been modified.

Additional rounds of DEEP TC funding are currently underway. Future evaluations will assess process and clinical measures (changes in blood glucose, blood pressure and smoking status) in addition to the behavioral measures described above. For additional information, contact the ISDH Cardiovascular Health and Diabetes Section at [diabetes@isdh.in.gov](mailto:diabetes@isdh.in.gov).

## DEEP TC Indiana Testimonials (cont.) . . .

***"Learning about complications (feet, kidneys) was terrifying and an eye opener."***

- Group Participant

***"Very complete information about diabetes and tobacco."***

- Group Facilitator

***"[I liked] learning about side effects of medications and the many types of insulin. The management of my diabetes is improving."***

- Group Participant



## **Blood Pressure Education Awareness Month**

- 1 in 3 American adults have hypertension or high blood pressure.
- 1 in 3 adults with high blood pressure do not get treatment.
- 1 in 2 adults with high blood pressure do not have it under control.

High blood pressure is called the "silent killer" because it often has no warning signs or symptoms. Many people don't realize they have it, so it is important to get blood pressure checked regularly.

If you have high blood pressure, keep it under control by taking medication as prescribed and making healthy life-style choices. Key choices include: eating a low sodium diet, maintaining a healthy weight, 30 minutes of daily physical activity, moderate alcohol consumption and quit smoking.

High blood pressure is a major risk factor for heart disease, stroke, congestive heart failure, and kidney disease. For more information on preventing and controlling high blood pressure, as well as, Blood Pressure Education Month visit the [CDC Blood Pressure](#) page.

## **Stroke Awareness Month**

*submitted by: Tim Harms, American Heart Association*

Stroke is the fourth-leading cause of death in America and Indiana; and is one of the leading causes of long-term disability. If you or someone you know experiences any of the following symptoms, it's important to call 9-1-1 and seek medical help immediately. Life-saving drugs are most effective only if administered in the first three hours of the onset of a stroke.

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden, severe headache with no known cause

For more information on prevention, sign recognition, response and promoting awareness during May, visit the [American Stroke Association](#).

## **Reduce Sodium to Reduce Risk of High Blood Pressure and Stroke**

Most people eat more than double the amount of salt than they should. Current dietary guidelines for adults are 2,300 mg of sodium per day. However, the recommended amount for many special populations is 1,500 mg per day. Those populations include: individuals age 51 years old or older, African Americans, those with high blood pressure, people with diabetes and people with kidney disease.

Most of the sodium Americans consume is not from their salt shaker, but from "hidden" foods. About 65 percent of sodium eaten comes from food bought at retail stores and 25 percent from restaurants. You can find out how much sodium you are eating by checking the labels on food products and totaling up the milligrams of sodium. If at a restaurant, ask for nutritional facts that include sodium.

Try to find ways to reduce your sodium during the month of May. Although eating less sodium can be a challenge, reading labels, and making careful choices can help. More than 40 percent of sodium comes from the following 10 types of foods: breads and rolls, cold cuts and cured meats such as deli or packaged ham and turkey, pizza, fresh and processed poultry, soups, sandwiches such as cheeseburgers, cheese, pasta dishes, meat-mixed dishes such as meat loaf with tomato sauce, and snacks such as chips, pretzels and popcorn.

For more information on salt: visit <http://www.cdc.gov/salt/>

## **Diabeticos Saludables: Sweet Success in the Fight Against Diabetes at Memorial Hospital-South Bend Receives National Honor**

*Special thanks to: Leonora Battani at Memorial Hospital—South Bend, Language and Latino Outreach Services for providing information for this article*

The Diabeticos Saludables: Sweet Success in the Fight Against Diabetes was one of ten programs recently honored with the National Hospital Charitable Service Award as a “Program of Excellence.” The National Hospital Charitable Service Awards is a national program sponsored by Jackson Healthcare, the fourth largest healthcare staffing company in the U.S.

The Diabeticos Saludables: Sweet Success in the Fight Against Diabetes program is part of Memorial Hospital’s Community Health Enhancement Division. The program was initiated over eight years ago and was designed to be a culturally aware educational and case management program for Spanish speaking Latino individuals with type-2 diabetes. It was expanded to serve all uninsured or underinsured English speaking community members at the request of local physicians that noticed improvements in their Latino patients participating in the program.

Currently, Diabeticos Saludables serves 300 community residents who experience the greatest disparities in health status and access to healthcare. Each participant is taught better ways to care for themselves and family members with type-2 diabetes. Nutrition education, exercise tips and case management are included for each participant. Each individual is required to participate in “Zumba,” a Latin-inspired dance fitness class, two hours each month, as well.

The program utilizes residents of the community as trained Community Health Workers (CHWs). Each of the Diabeticos Saludables’ CHWs are certified Zumba instructors. This is one of the innovative ways to provide the program at a significant cost savings. Partnerships have allowed the program to be implemented within community clinics, in particular the designated Federally Qualified Health Centers, Indiana Health Center and Project Home Coming.

Diabeticos Saludables was chosen to receive the honor for their impact upon the health and quality of life in their community. The program is replicable and clearly one of the nation’s best practices in empowering clients to self-manage their health and improve their quality of life. Each of the ten programs were commended for their exceptional work in setting new standards for giving back to their communities in sustainable ways.

According to the Jackson Healthcare press release, each winning program was presented with a \$10,000 investment toward program extension.

[View the Jackson Healthcare press release.](#)  
[Learn more about Memorial Hospital—South Bend.](#)  
[Learn more about Jackson Healthcare.](#)

### **Who are Community Health Workers?**

- Frontline public health workers
- Trusted members of the community they serve
- Liaison between health and social services and the community
- Provide services to the community such as outreach, education, informal counseling, social support and advocacy
- Learn more from the CDC Online training, [Promoting Policy and Systems Change to Expand Employment of Community Health Workers \(CHWs\)](#)

## Click on each event for details

**June 14-15, 2012**

**15th Annual Rural Health Conference**

**JW Marriott; Indianapolis**

**August 1-4, 2012**

**American Association of Diabetes Educators**

**Annual Conference**

**Indianapolis, IN**

## **Cardiovascular Health and Diabetes Coalition of Indiana (CADI) Update**

CADI is currently in the process of transition and expansion to address cardiovascular health and diabetes within their new capabilities as a coalition. The Coalition is searching for new partners interested in cardiovascular health, stroke and diabetes. CADI is focused on engaging partners interested in uniting healthcare professionals and programs statewide to face the future of preventing and treating each patient, educating healthcare professionals, and increasing awareness of cardiovascular disease, stroke and diabetes.

The Coalition is in the process of completing a statewide plan that addresses diabetes issues with cardiovascular health goals and strategies.

CADI meets quarterly. The next meeting will be Wednesday, June 13, 2012 at 1 p.m. The meeting will be held at the State Department of Health, 8th Floor Training Rooms, 2 N. Meridian Street, Indianapolis, IN 46204.

For more information, contact Jena Grosser at [jena.grosser@gmail.com](mailto:jena.grosser@gmail.com)

## **NEWSLETTER CONTRIBUTIONS**

The Cardiovascular Health and Diabetes Section will be publishing newsletters on a quarterly basis during 2012. The intent of the newsletter is to network diabetes, stroke and cardiovascular health care professionals around the state of Indiana, make readers aware of current programs and opportunities throughout the state and to provide the most current data and information on cardiovascular health, stroke and diabetes.

If you have any suggestions, articles, current events or topics that you would like to be a part of the next newsletter, please call Gail Wright at 317.233.7755. The deadlines for 2012 are:

**3rd Quarter Deadline**  
Submission: June 27, 2012

**4th Quarter Deadline**  
Submission: Sept. 26, 2012

## Collaborative Partners

\* Logos used with permission of organizations.



If you would like to be added to the email mailing list to receive this quarterly newsletter, please contact: Diabetes/Cardiovascular Health Section, Phone: 317.233.7755 or Email: [gawright@isdh.in.gov](mailto:gawright@isdh.in.gov)



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