	Diabetes Class – Session Two
Place:	Date:
Time:	
	Facilitators:

Objectives: By the end of the class, participants will be able to:

- 1) Name 3 symptoms of hypoglycemia
- 2) Name 3 ways to effectively manage negative emotions like anger, fear, frustration or depression
- 3) Name 2 of the "best times" to check your blood sugar

- 4) Name3 ways to limit salt and cholesterol intake
- 5) Name 2 body parts diabetes medications focus on
- 6) Name 2 symptoms of depression

Preparation before class:

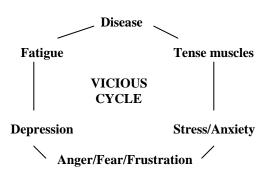
- 1) Have chairs set up in a circle
- 2) Put Class Title, Objectives and Agenda on the wall.
- 3) Buy food and have it "set up" for breakfast when guests arrive, and for lunch.
- * (*#) Indicates chart or worksheet
- ** Please refer to Dinamicas for Popular Education by Noel Wiggins of the Community Capacitation Center, Multnomah County Health Department, March 1999.

Topic	Method	Process	Time	Materials
Introduction	Lecture	 Welcome participants to class – thank them for coming! Introduce facilitators Present objectives of the class Present today's agenda Point to AADE7 Self-Care Behaviors™ octagon, explain that we will finish "filling in" the chart today! Point to the Application Chart, and like last week, the most important part of what we do today, is to help <u>you</u> to figure out how <u>you</u> can apply what you learn! 	15 min.	- Welcome/Class Title Chart (*1) - Objectives - (*2) - Agenda (*3) - AADE7 Self- Care Behaviors Chart (*4) - Application
Warm-up	Dinamica	 Explain that like last week's class, even though we have a scheduled "break," people can get up and move around whenever they need to! Explain that we have "packets" for them, with all of the information written, so they do not need to take notes. Mention that at the end of today's session, we will raffle some prizes!!! First have participants introduce themselves to the group. Next, explain the dinamica "Piña y Naranja" Practice the dinamica 	10 min.	Chart (*5)
Pre-Test	Read aloud slowly; ask pts. To help those who need assistance	 Play the dinamica Explain that first, just like last week, we need their help to figure out if this type of class is an effective way to teach others about diabetes. To do this, we will pass out a paper that has 6 questions. We will go over the questions together, and they can circle their answers. At the end of the class today, we will go over the same questions again. Please do not worry whether your answer is "right" or "wrong," just make your best guess! Please do not "share" answers with the people sitting next to you! Thank-you! 	15 min.	- Pre/Post tests - Pencils

Follow-up on last weeks' Action Plans	Think, Pair, Share	 Explain to the group that you are now going to discuss their goals from last week. Ask for a volunteer to state his or her goal for the past week. Ask if they accomplished their goal. If not the entire goal, did they accomplish part of their goal? Congratulate that person and move on to the next person (only ask for one volunteer, then continue from that person on – in either direction). If someone met obstacles and adjusted their action plan successfully, they should be congratulated for being a good self manager. If a participant mentioned any problems they encountered in trying to accomplish their plan, ask how they dealt with the problem! Ask the group to raise their hands if they anyone else in the group "ever" had a similar problem. Ask the group to brainstorm a list of possible solutions to the problem identified (review Chart of Brainstorming Rules). Write any solutions given on a flip chart or dry-erase board. Class facilitators may give solutions after the participants have offered solutions. Ask the participant who stated the problem in the first place if he/she could use any of the possible solutions given by the group, and if so, which one(s)? (Remember the "Yes But" 3 times and you're out rule!) Explain to the group that to be a successful self manager of their diabetes, they will need to learn to solve problems much the same way we just did here! Explain that whenever you encounter a problem, you can use these steps*: I. Identify the problem 2. List possible solutions (ideas) 3. Choose one idea to try and try it! 	150 min.	- Flip chart - Easels - Markers - Chart with Brainstorming "Rules" from Class (*6) - Chart with Problem Solving Steps (*7)
Hypoglycemia & Hyperglycemia SMBG	Brainstorm/lecture	 2. List possible solutions (ideas) 3. Choose one idea to try and try it! 4. Evaluate the results – did this idea work? 5. If this idea did not work, try another idea 6. Ask others for their ideas if yours did not work 7. Accept that the problem may not be solvable at this time *Adapted from the Chronic Disease Self Management Program, Stanford Univ., 1999. • State that later in today's class, we will be making new goals for next week. • Mention that ultimately, the goal is to have you make your own goals weekly! • Ask for four volunteers to come to the front of the room. Distribute props and ask the person with the construction paper heart to "pretend" it is their heart pounding! Have the person with the pillow act sleepy; the one with Tylenol act like they have a headache; and the one with the small 	20 min.	Symptoms of Hypoglycemia worksheet (*8) -Construction paper
		towel wiping their face c/o sweating. • Ask participants what are some symptoms of hypoglycemia – pointing out the volunteers at the front of the room! Record responses on a flip chart, adding symptoms as needed.		heart -Bottle of Tylenol -Pillow -Small towel

		 Ask "what is hypoglycemia?" (blood sugar < 70) Ask "what causes hypoglycemia?" Write responses on flip chart Ask "how do you treat hypoglycemia?" Write responses and show food model of ½ cup orange juice, 5 hard candies, 2-3 sugar packets and ½ cup regular soda. Explain that each of these has about the same amount of carbohydrate. Also explain that they can use glucose tablets if available, as these are absorbed into the bloodstream the quickest. Explain the "Rule of 15" to treat hypoglycemia, and that it is important to try to determine "why" they experienced hypoglycemia, so they can avoid a similar situation in the future. 		-food model of ½ cup orange juice -5 hard candies -2 to 3 sugar packets -regular soda (1/2 cup)
Break		• During the break, recruit volunteers for the Role Play on Anger, Fear, and Frustration. Explain to the volunteers that you are going to ask them to pretend they are waiting in the clinic waiting room, and after introducing themselves to each other, they have a discussion for 3-5 minutes about how they feel about their diabetes.	10 min.	
Re-energize	Dynamica	 Explain dinamica – "El Pueblo Manda" (like "Simon Says") Practice dinamica Play dinamica 	10 min.	
Dealing with anger, fear and frustration	Role Play	 1. Explain to the participants that you are now going to do a role play, which is another method used in Popular Education. Introduce your volunteers to the group, and have them Role Play a scenario where they are sitting in the clinic waiting room – waiting for their appointment, and they are talking about their feelings about having diabetes. (the feelings expressed can be "actually felt by the individual or just acted out." Volunteer #1 - newly diagnosed diabetic, who is afraid of losing their eyesight or foot Volunteer #2 – patient who is very frustrated about all the things they have to do to manage their diabetes, and is also very tired Volunteer #3 – patient who is angry about having diabetes Thank your volunteers for their good job! Have participants give them a round of applause! Ask participants if they could "relate" to the "patients" in the role play? And if so, how? 2. Point out that feelings of anger, fear and frustration are very common and are a normal part of dealing with a chronic health problem, such as diabetes. People with asthma, arthritis, high blood pressure and emphysema can all have the same feelings. When we have a chronic health problem, we can often feel a loss of control over our lives and we may worry about the future. 3. Explain the Symptom Cycle*, briefly showing where these emotions can contribute to the vicious symptom cycle, and how learning ways to deal with them can help break the cycle. 	55 min.	- Arrange 3 chairs in a row, place a small table with magazines on it in front of the chairs - Symptom Cycle chart (*9) - Symptoms of depression worksheet (*10) - Reasons for anger, fear, frustration or depression (*11) - Ways to effectively manage anger, fear, frustration and depression (*12) - Flip charts - Markers

SYMPTOM CYCLE



- **4.** Explain that unhappy feelings or depression are common among people with chronic health conditions such as diabetes, we call this "negative emotionality."
- Ask participants: What are some symptoms of depression? Let's brainstorm a list.

IMPORTANT: Write these responses on the left half of the dry-erase board. When they are finished, make sure these are included in the list:

- 1. loss of interest in friends or activities
- 2. isolation or withdrawal
- 3. difficulty or changes in sleep patterns
- 4. increased or decreased appetite
- 5. loss if interest in personal care or appearance
- 6. unintentional weight loss or gain
- 7. general feeling of unhappiness, crying
- 8. loss of interest in sex or intimacy
- 9. suicidal thoughts
- 10. frequent accidents
- 11. low self-image, loss of self-esteem
- 12. frequent arguments or loss of temper
- 13. feeling tired or fatigued
- 14. feeling confused, lack of concentration
- Have participants break into pairs. People with diabetes should pair up together, and significant others/caretakers should pair up with one another.. Family members should <u>not</u> pair up with each other for this exercise.
- Ask each person to share with their "partner" what about their diabetes makes them feel anger, fear, frustration or depression, or what about living with someone with diabetes makes them feel this way.
- **IMPORTANT:** Inform the group that each person will be reporting for their partner. So, if there is anything they do not want to be shared with the whole group, they should either not share it at all, or tell their partner

		 This will take 7 or 8 minutes – at the end of about 4 minutes, tell the group that half their time is up! Do not let them go for more than 8 minutes. Reconvene the group. Ask each person to concisely report on his or her partner's causes of anger, fear or frustration; people with diabetes reporting first, and significant others/caregivers reporting after all the persons with diabetes have reported. Ata the end of each report, check with the partner to see that the report was correct, but don't allow the person to go into a lengthy "story." Participants should only correct misinformation, not add new information. During this exercise, one of the leaders should make a list on a flipchart of all the reasons for feelings of anger, fear, frustration or depression. If a reason comes up more than once, make a check mark next to that reason. When the group is finished, review the list. Thank participants for being willing to share this personal information with the group, and that we realize this is not easy, but it is a very real part of living with diabetes. Say "OK," we don't want to stay in the Symptom Cycle – let's talk about ways to effectively manage anger, fear, frustration and depression. What can you do? Brainstorm a list of responses, recording each on a flip chart. When the group is finished, review responses and thank them for their participation. Explain that it is important to note that not all depression can be handled through self-management. Sometimes depression is severe and needs professional treatment and medication, so if you feel unhappy for more than a few weeks, or think about harming yourself, it is VERY important to talk to your doctor. Severe, clinical depression is a biological illness, and can be treated. Ask participants to volunteer any new things that they are going to do to manage their emotions caused by their diabetes. Just get a few examples. Suggest to participants that they may want to continue to explore thei		
Diabetes Meds	Lecture		20 min.	-Life-sized poster of human body -Med. handout -Diabetes

				Medications (*13)
Lunch	Active Participation	Similar to last week, encourage participants to serve themselves according to the Plate Method!	30 min.	
Re-energize!	Chair Aerobics	Lead group in 5 minutes of chair aerobics	5 min.	-Music CD
Diet & Diabetes Part II	Food Lab	 Say: Now we're going to "lighten up" and have some fun! Break participants into two groups – by having them say either Pinâ or Naranja. Go around the circle until everyone has a fruit name. Have the pinâ group go to the pinâ table, and have the Naranja group go to the Naranja table. Tell participants that they will have 5 minutes to complete the first part of the exercise! Ask participants to select a group leader, and have the leader read the directions. Pinâ table - participants will decide which foods/food models are high or low in sodium, and place them on the appropriate side of the poster board. Naranja table – participants will decide which foods/food models are high or low in saturated/trans fats, and place them on the appropriate side of the poster board. Once both tables have finished, have them show the entire group how they separated the foods. Offer corrections when needed. Point out that most foods in their "natural" state are low in sodium! So, all fruits and vegetables are naturally low in sodium, as are most meats. (an exception would be hot dogs and sausage which are processed meats). Also, most processed foods are higher in sodium and/or sugar, so canned foods/dry packaged soups and snacks tend to be very high in sodium. Regarding saturated and trans fats, explain that the more solid at room temperature a fat is, the more saturated it is, so vegetable shortening (e.g. Crisco), lard, stick butter or margarine, the fat you can cut off around red meat and chicken are all high in saturated fat or trans fats; while liquid oils, particularly olive and canola, and fat-free butter spray are all good choices and are low in saturated fats. The type of fat that is more difficult to identify is trans fats. Many processed foods have trans fats, because they are cheap, so the food manufacturers like them, and they give food a nice texture, whether it's creamy, as in ice cream and Cool Whip, or it's crunchy as in cr	25 min.	- flip chart - markers - poster board divided with "high sodium" and low sodium," and the other with "high saturated/trans fats" and low saturated/trans fats" - food models - dried spices and herbs - canned foods, including cup-a- soup and Vienna sausages - boxes/packages of crackers, cookies, Cool Whip, ice cream, butter, butter spray, light tub margarine, olive and canola oil, Crisco solid shortening, breakfast cereals - written instructions for each table, pen for writing notes - diabetes ABC's chart (*14)

		they separated their foods/food models. Again, offer corrections when needed. Next, have the table leaders lead their table in a discussion of the barriers to eating a low-fat or lower sodium diet, and have their group come up with possible solutions to these barriers. Be sure each group has someone to write down responses. Tell participants they have five minutes to complete this exercise. Reconvene the group and ask group leaders to read their barriers to either eating low-fat or lower in sodium, as well as the solutions their table proposed. Thank the table leaders and participants for their efforts! Next, say — why are we talking about eating less saturated and trans fats and sodium? How are they related to diabetes? Why should you care? Have group brainstorm a quick list. Write answers on flip chart. Group similar answers together. Fill in any "missing" information: Risk management - prevention of loss of eyesight, kidney function, limb amputations, heart attack and stroke. In a nut shell, we're talking about B and C of diabetes ABC's — blood pressure and cholesterol control As a refresher from last week, can anyone tell me what the A stands for in the diabetes ABC's? Right! The hemoglobin "a1c" which is a representation of a three month average of your blood sugar.		
"Review"	Dynamica	 While playing "La Tortilla Caliente" – have patients share one way they can apply what they learned today! Write responses on Application Chart 	10 min.	- Tortilla food model - music CD
Post-Test		 Explain that just as we mentioned at the beginning of the class, we need their help to figure out if this type of class is an effective way to teach others about diabetes. Just as we did at the beginning of the class, we will pass out a paper that has the same 6 questions we went over at the beginning of the class. We will go over the questions together, and they can circle their answers. Again, please do not worry whether your answers are "right" or "wrong," just do the best you can! 	15 min.	- Application Chart - Post-Tests - Pencils - Thank-you chart (*15)
Class evaluations	Manual Brainstorming	 Explain that similar to last weeks' class, we would like to know what they thought about this weeks' class. Mention that this is the first time we have offered this class and that we value their input! Explain that we are going to give everyone two shapes. On one shape, they are to answer the question, "What did you like or find useful about the class?" On the other shape, they are to answer the question: "How could the class be 	10 min.	- 2 different shapes of paper, enough for 1 for each participant - pencils - flip charts

		improved?		-tape
		Hand out shapes and give everyone time to answer questions.		
		Thank participants for their time and for their comments!		
Prize drawing & distribution of packets	Lecture	 Have a participant volunteer to "draw" names out of a basket for the prizes! Distribute "packets" of handouts to participants. Applaud all who completed the classes. Thank participants for their time and attention. Encourage participants to ask questions of program staff and CHWs if needed. 	5 min.	- prizes - "packets"