

**DREAM Project CHW Script**

**Session 5**: Stress Management in Diabetes, Access to Services, and Family Support

**Welcome**

**Six Month Survey**

**Review of Last Session and Introduction**

**Physical Activity (10 minutes)**

**Break**

**Objectives:**

At the end of the session the participants will know the following about the stress management and family support:

1. The effect of stress on physical health.
2. The effect of stress on emotional health.
3. Unhealthy ways of managing stress and the solutions to:
	* unhealthy eating
	* smoking
	* being sedentary
	* not sharing emotions
4. Stress Management Techniques
5. The importance of family support in managing stress
6. Nutrition
7. Exercise
8. Diabetes Management
9. Emotional Support
	1. Nagging
	2. Praise
	3. Trigger
10. Health access for undocumented immigrants
11. Language access laws
12. Know Your Rights
13. What to ask the doctor

**The effect of stress on physical health**

Stress is a normal physical response to events that make you feel threatened or upset your balance in some way. It is normal physiological response. But beyond a certain point, stress stops being helpful and starts causing major damage to your health, your mood, your productivity, your relationships, and your quality of life.

When you’re stressed over a busy schedule, an argument with a friend, a traffic jam, or a mountain of bills, your body reacts just as strongly as if you were facing a life-or-death situation. If you have a lot of responsibilities and worries, your emergency stress response may be “on” most of the time. The more your body’s stress system is activated, the easier it is to trip and the harder it is to shut off.

Long-term exposure to stress can lead to serious health problems. Chronic stress disrupts nearly every system in your body. It can raise blood pressure, suppress the immune system, increase the risk of heart attack and stroke, contribute to infertility, and speed up the aging process. Long-term stress can even rewire the brain, leaving you more vulnerable to anxiety and depression.

### Many health problems are caused or exacerbated by stress, including:

|  |  |
| --- | --- |
| * Pain of any kind
* Heart disease
* Digestive problems
* Sleep problems
 | * Depression
* Obesity
* Autoimmune diseases
* Skin conditions, such as eczema
 |

### Common external causes of stress

Not all stress is caused by external factors. Stress can also be self-generated:

|  |  |
| --- | --- |
| * Major life changes
* Work
* Relationship difficulties
 | * Financial problems
* Being too busy
* Children and family
 |

### Common internal causes of stress[[1]](#footnote-1)

Not all stress is caused by external factors. Stress can also be self-generated:

|  |  |
| --- | --- |
| * Inability to accept uncertainty
* Pessimism
* Negative self-talk
 | * Unrealistic expectations
* Perfectionism
* Lack of assertiveness
 |

CHW Question: How does stress impact your diabetes management?

In people who have diabetes, stress can alter blood sugar levels. It does this in two ways.[[2]](#footnote-2)

1. First, people under stress may not take good care of themselves. People who are anxious are under pressures and may lose appetite and skimp on eating, or reach for not-so healthy quick fixes like candy or chips and sometimes seek refuge in food and drink. This can take the form of chocolates, sweets and crisps, often in between meals. The intake of alcohol may be increased. Many people who are under stress turn to food as a source of ‘comfort’. This pattern of ‘comfort eating’ can often play havoc with blood sugar level. Further anxiety leads to less exercise. The results can be disastrous for people with diabetes. They may forget, or not have time, to check their sugar levels or plan good meals.
2. Second, stress hormones may also alter blood sugar levels directly as it antagonizes the action of insulin. When you're stressed, your blood sugar levels rise. Stress hormones like [epinephrine](http://www.medicinenet.com/script/main/art.asp?articlekey=3286) and [cortisol](http://www.medicinenet.com/script/main/art.asp?articlekey=2850) kick in since one of their major functions is to raise blood sugar to help boost energy when it's needed most. Think of the fight-or-flight response. You can't fight danger when your blood sugar is low, so it rises to help meet the challenge. Both physical and emotional stress can prompt an increase in these hormones, increase in blood sugars. While stress can't cause diabetes, it can encourage its onset in a person who is pre-disposed.
3. Stress seems to spikes in blood pressure, which can be dangerous if you have an underlying condition such as heart disease.

**The effect of stress on emotional health**

**CHW Question: How does stress affect our emotional health?**

 Many people go through several emotional stages before they can learn to live healthfully with diabetes. Most people, at some time, go through these general stages:

* Denial. The person refuses to believe that he or she could have diabetes, or refuses to accept that it is a serious condition that requires making some changes.

Depression. Feeling hopeless, helpless, worthless, and guilty is all part of depression. Depression can also express itself as self-hatred. The symptoms of depression sometimes can be subtle and hard to recognize. Not everyone with depression cries all the time or acts irrationally. Some people overeat or turn to alcohol or drugs to try to deal with depression. People experiencing depression may even kill themselves in a way by ignoring their health problems and slowly allowing themselves to die. Depression can lead to a worsening of diabetes if people become unable to make decisions or to take care of their diabetes.

* Anger. Life is not fair, but dealing with this fact by becoming angry is usually not helpful. Anger often leads to blaming, striking out, and actions that further isolate a person from his or her support system: family, friends, and doctors. Some people learn to harness their anger and turn it into action. Statements such as “I’m not going to let this diabetes hold me down!” can be a very positive direction in which to channel anger.
* Bargaining. Trying to make a deal with oneself, or with fate, is a normal human reaction to bad news. But sometimes it leads to unrealistic thoughts, such as, “I promise I won’t yell at my daughter anymore…then this diabetes will go away.” “If I pray hard enough, I’ll be cured.”
* Acceptance. A final emotional stage is accepting the diagnosis of diabetes and the changes a person must make in life to keep diabetes under control. Acceptance doesn’t necessarily mean that a person is happy with the diagnosis, but learning to live with diabetes can be a source of inner personal strength. A person may reach this stage in general, but then may slip back into another stage if a new complication or problem related to diabetes occurs, or if life becomes more stressful in other ways.

People don’t always go through the stages in this order. They may experience them in a different sequence, or they may waver back and forth between emotions. Also, they may experience different emotional stages for different reasons; for example, they may accept that they need to walk more but may be angry about glucose monitoring or in denial about preventing complications.

**Emotions** such as fear, anxiety, sense of loss, grief, and anger all present barriers to making healthy lifestyle changes and performing daily self-care tasks necessary for controlling diabetes. For a person with diabetes, or for his or her family and friends, expressing these emotions is not “giving in” to diabetes. It is a healthy step towards dealing with these emotions so that one can move on to a course of action. An emotion that is stuck in a person’s heart or head could be absorbing a lot of energy that could be channeled into taking control of diabetes[[3]](#footnote-3).

**CHW QUESTION: How can stress lead to making unhealthy food choices?**

**Unhealthy eating[[4]](#footnote-4)**

Emotional eating or unhealthy eating is the practice of consuming large quantities of food -- usually "comfort" or junk foods -- in response to feelings instead of hunger. Experts estimate that 75% of overeating is caused by emotions.

Many of us learn that food can bring comfort, at least in the short-term. As a result, we often turn to food to heal emotional problems that can be due to stress. Eating becomes a habit preventing us from learning skills that can effectively resolve our emotional distress.

* **Social**. Eating when around other people. For example, excessive eating can result from being encouraged by others to eat; eating to fit in; arguing; or feelings of inadequacy around other people.
* **Emotional**. Eating in response to boredom, stress, fatigue, tension, depression, anger, anxiety or loneliness as a way to "fill the void."
* **Situational**. Eating because the opportunity is there. For example, at a restaurant, seeing an advertisement for a particular food, passing by a bakery. Eating may also be associated with certain activities such as watching TV, going to the movies or a sporting event, etc.
* **Thoughts.** Eating as a result of negative self-worth or making excuses for eating. For example, scolding oneself for looks or a lack of will power.

### Physiological. Eating in response to physical cues. For example, increased hunger due to skipping meals or eating to cure headaches or other pain.

### CHW QUESTION: How do I break myself of the habit of eating when stressed?

### How Do I Break Myself of the Habit?

Developing alternatives to eating is the second step. When you start to reach for food in response to a trigger, try one of the following activities instead.

* Read a good book or magazine or listen to music.
* Go for a [walk](http://www.medicinenet.com/script/main/art.asp?articlekey=81245) or jog
* Do deep breathing exercises.
* Play cards or a board game.
* Talk to a friend.
* Do housework, laundry or yard work.
* Wash the car.
* Write a letter.
* Or do any other pleasurable or necessary activity until the urge to eat passes.

Sometimes simply distracting yourself from eating and developing alternative habits is not enough to manage the emotional distress that leads to excessive eating. To more effectively cope with emotional stress, try

* Relaxation exercises
* Meditation
* Individual or group counseling

**CHW QUESTION: We discussed this in the last session, can you tell me how smoking and diabetes are related?**

**Smoking[[5]](#footnote-5)**

## Health Risks of Smoking with Diabetes

* Many people may not know that smoking can cause the development of Type 2 diabetes. In fact, it may be one of the pieces that can help us identify who is at a greater risk for the disease.
* According to the American Heart Association about 22% of adults with diabetes smoke, even though U.S. research indicates that the most harmful effect of smoking is linked to a significantly higher risk of developing Type 2 diabetes.
* For those who smoke an average of one pack per day, the increased risk of diabetes rose to 61% according to The Journal of the American Medical Association. When compared to non-smokers, the risk of developing diabetes for lighter smokers was still 29%, and nearly as high in former smokers (23%).

## Harmful Effects of Smoking & Diabetes

If you already have diabetes, the harmful effects of smoking can cause even more complications. For example, smokers with diabetes are:

1. More likely to experience nerve damage and kidney disease
2. Three times more likely to die of cardiovascular-related complications than non- smokers with diabetes
3. More likely to have problems maintaining proper blood sugar levels, because smoking raises blood sugar

##  Diabetes & Smoking: Tips for Quitting

If you have diabetes and smoke, you need to quit – and there is no better time than the present.

Of course, quitting may be one of the hardest things you’ll ever do. In addition to the physical addiction your body has developed to nicotine, strong psychological habits have also formed. Withdrawal from nicotine causes a wide range of physical symptoms, ranging from headaches and anxiety to irritability and strong cravings for sugar and salt.
Fortunately, physical nicotine withdrawal symptoms generally subside in 72-hours and one can typically overcome the psychological cravings in about six months. Plus, there are plenty of products on the market that can support your quest to quit smoking by reducing the withdrawal symptoms, as well as improve the likelihood that you will remain smoke-free.

1. **Nicotine replacement therapy (NRT):** Nicotine replacement therapy is one of the most popular smoking cessation methods. There are a variety of gum, patches, lozenges and nasal sprays on the market. According to the American Heart Association, using a NTR product consistently more than doubles the chances of successfully quitting.
2. **Medication:** There are a variety of medications, such as Zyban (Wellbutrin) and Chantix that reduce the urge to smoke. Zyban (Wellbutrin) is a mild anti-depressant whose side effects have been found to help people quit smoking. Chantix, on the other hand, is a new drug specifically designed to help people quit smoking by blocking nicotine from reaching the receptors in your brain. Forty-four percent of smokers that completed a 12-week course of Chantix quit, as opposed to only 18% of those given a placebo.

Other popular smoking cessation methods include acupuncture, hypnosis, behavioral therapy, motivational therapy and quitting “cold turkey.”

Before you begin a smoking stopping program, find out what the success rate is and then determine which one best suits you and your lifestyle. Keep in mind that approximately 25% to 33% of smokers using medications remain smoke-free for over six months.

## Reduce the Health Risks of Smoking by Quitting

When you quit smoking, you will reduce your risk of developing Type 2 diabetes. If you already have the disease and quit smoking, you will make it easier to control your blood sugar level. In addition, you will reduce your risk of cardiovascular and other related complications, while also eliminating other detrimental health effects of smoking. Here are just some of the benefits you will begin to notice:

1. **After 20 minutes**, your heart rate and blood pressure drops.
2. **After 12 hours**, the carbon monoxide level in your blood returns to normal.
3. **From two weeks to nine months**, your circulation improves, your lung functionality increases while coughing and shortness of breath both decrease.
4. **After one year**, the excess risk of coronary heart disease is half that of a smoker's.
5. **After five years**, your risk of stroke is reduced to that of a nonsmoker.
6. **After 10 years**, the lung cancer death rate is about half that of a continuing smoker's. The risk of cancer of the mouth, throat, esophagus, bladder, cervix, and pancreas decrease.
7. **After 15 years**, the risk of coronary heart disease is that of a non-smoker's.

**CHW QUESTION: Do you think exercising can help manage stress? How does it help in stress management?**

**Being sedentary**

**Health Risks of a Sedentary Lifestyle[[6]](#footnote-6)**

**First and for most is obesity. It can produce a variety of medical conditions**

|  |  |  |  |
| --- | --- | --- | --- |
| **Medical field** | **Condition** | **Medical field** | **Condition** |
| [Cardiology](http://en.wikipedia.org/wiki/Cardiology) | * [ischemic heart disease](http://en.wikipedia.org/wiki/Ischemic_heart_disease):[]](http://en.wikipedia.org/wiki/Obesity#cite_note-Yusuf2004-33) [angina](http://en.wikipedia.org/wiki/Angina_pectoris) and [myocardial infarction](http://en.wikipedia.org/wiki/Myocardial_infarction)
* congestive heart failure]
* high blood pressur
* abnormal cholesterol levels]and
 | [Psychiatry](http://en.wikipedia.org/wiki/Psychiatry) | * [depression](http://en.wikipedia.org/wiki/Major_depressive_disorder) in women
* social [stigmatization](http://en.wikipedia.org/wiki/Stigmatization)
 |
| [Endocrinology](http://en.wikipedia.org/wiki/Endocrinology)  | * [diabetes mellitus](http://en.wikipedia.org/wiki/Diabetes_mellitus)[[2]](http://en.wikipedia.org/wiki/Obesity#cite_note-HaslamJames-1)
 |  |  |
| [Neurology](http://en.wikipedia.org/wiki/Neurology) | * [stroke](http://en.wikipedia.org/wiki/Stroke)
* [migraines](http://en.wikipedia.org/wiki/Migraines)
* hypertension
 |  |  |

* **Heart Disease**: Heart Disease is the leading cause of death and disability for people. People who are overweight are twice as likely to have high blood pressure and cholesterol, two of the major risk factors causing heart disease. Those who have heart disease may suffer a heart attack, congestive heart failure, sudden cardiac death or abnormal heart rhythm.
* **Stroke**: Similar to heart disease, a stroke prevents blood and oxygen to the brain possibly causing paralysis and death. Major risk factors that contribute to stroke susceptibility are: high blood pressure, high cholesterol, diabetes, tobacco and alcohol use, obesity and genetic predisposition. Stroke is the third leading cause of death in the US.
* **High Blood Pressure**: The most recent estimates note that nearly one third of all adult Americans have high blood pressure. It often times goes undetected and, when is uncontrolled, contributes to heart attacks, strokes, heart and kidney failures.

**All these conditions are associated with diabetes thus a sedentary lifestyle cause more complications for diabetics.**

### How to Get Started[[7]](#footnote-7):

* Check with a doctor first to develop a safe activity routine.
* Drink a lot of water.
* Do something while watching TV; lift hand weights or do leg raises.
* Play tag or other outdoor games with family and friends.
* Take the family dog (or a neighbor’s dog) for long walks.
* Take stairs instead of elevators and escalators, and walk wherever possible.

### For Office Workers:

* Spend the lunch hour walking or at the gym.
* Walk to the restroom the long way.
* Park the car far away from the front door.
* Bike or walk to work.
* Walk to coworkers’ offices instead of calling or e-mailing them.

**CHW QUESTION: What are some ways that you manage your stress or what are ways to manage stress in general?**

**Stress Management Techniques[[8]](#footnote-8)**

* Regular courses of yoga, meditation or deep breathing
* Progressive relaxation therapy in which one practices tensing and relaxing major muscle groups in sequence
* Cognitive behavior therapy by helping one to change his behavior and teaching to view the life through more appropriately colored glasses-to take a stand against over-scheduling, be realistic, solving the little problems, to watch what one is thinking
* Talking to a therapist
* Step back from the situation
* ·To keep up healthy eating and exercise routine
* To get a good night’s sleep
* To eliminate Caffeine
* Anti-anxiety medication
* To take up a relaxing hobby
* ·Replace bad thoughts with good ones
* Massage
* Other ways to reduce mental stress- outlook, attitude, and thoughts influence the way to see things. A healthy dose of optimism can help one to make the best of stressful circumstances.
* Building Resilience
* Thinking of change as a challenging and normal part of life
* To see setbacks and problems as temporary and solvable
* To believe that one will succeed if he keeps working toward his goals
* ·To take action to solve problems that crop up
* To build strong relationships and keep commitments to family and friends
* To have a support system and ask for help
* To participate regularly in activities for relaxation and fun

**CHW QUESTION: What is the importance in having family support in managing your diabetes and good health?**

**How can family help you become healthier?**

**What are some barriers that family can put in your path to become healthier?**

* 1. **The importance of family support in managing stress**

Support consist of teaching, encouraging, and enabling another person, but it can also take the form of constraining, warning against, and doing for another. The relationship between social support and disease management is difficult as there are both positive and negative sides to it[[9]](#footnote-9).

* First, you have to decide what, when and how you want support. Then you need to tell the people who are involved with your care what you need. Usually, family members and friends are willing to help. If they have embarrassed or irritated you in the past it might be that they don't understand diabetes, or they are not sure how to help. They simply did what they thought was helpful[[10]](#footnote-10).

Therefore, you need to:

* Educate your family and friends about your diabetes.
* Define how you want family and friends to help.
* Ask them directly for help and teach them how to give it.

**Possible Family Roles**

* Do tasks (i.e. do home testing, make medical appointments, give medications)
* Facilitate,(accommodate, remind, motivate and partner in behavior change
* Partner in decision-making and problem solving
* Help patient cope with symptoms and stress
* Help patient connect to information and community resources
* Support patient integration of illness care into existing life roles

Improved

Self-efficacy,

Mental health,

& adjustment to Illness

Improved Self management behavior

Chronic illness control and improved outcomes

* + 1. **Nutrition[[11]](#footnote-11)**
* Active family nutritional support, as measured by culturally relevant categories, is significantly associated with control of triglyceride, cholesterol, and HbA1c levels.
* Specifically, when family members cooked the majority of the meals for the respondent, the individual was significantly more likely to have lower triglyceride, cholesterol, and HbA1c levels**.**
* The findings suggest that the family is a more useful unit of intervention than for the individual alone when designing diabetes care strategies.
* Behaviors beneficial to diabetes control, such as cooking or buying “light” foods, signal family accommodation to the disease. Cooking for the individual signifies assumption of care-giving roles.
* Cooking is an important part of lives of women. Research has noted that whereas women may cook special meals for a chronically ill husband, they are less likely to alter cooking habits for their own disease, because to do so may place them in conflict with maternal and domestic roles that emphasize others’ needs over their own.
* This dilemma may disappear for a diabetic woman when others cook for her. An example of this would be; if the family members request the woman of the house to cook desserts (roshmalai or other sweets) or fried food, and then she will also be tempted to eat them herself. This will have a negative impact on her diet control for diabetes management.
	+ 1. **Exercise**
* Rabina begum 49, learned about her diabetes status and she and her husband decided to slim down together.She credits her husband for providing the support she needed to make a radical lifestyle change. She and her husband walk regularly in the park for 30 minutes everyday. She says it is the biggest support to her and her diabetes is in control.
* Increasing social support for physical activity includes those strategies that seek to create a supportive environment for increasing an individual’s physical activity behaviors. Family-based social support usually target family support as a whole, parent support, or spouse/partner support. Common components of family based social support include education, skill development, and physical activity opportunities for all family members.
* Goal setting by the family can help in making a regime for exercise. For example a family member decides ‘I will ask my sister if she wants to go for a walk with me in the evening two times each week’. This will motivate the person for walks more often.

**Targeted Outcomes of family involvement in physical activity[[12]](#footnote-12):**

1. Increase in physical activity as measured by the frequency and duration of physical activity, the number of physically-active persons, and/or the level of energy expenditure for physically-active persons.
2. Increase in exercise knowledge.
3. Increase in confidence and/or skills related to physical activity.
4. Increase in physical fitness as measured by aerobic flexibility and/or aerobic capacity.
5. Decrease in obesity/overweight or maintenance of healthy weight as measured by individual body mass index, weight, and body fat percentage.

**Objectives[[13]](#footnote-13):**

The purpose of these activities is to have fun and promote active family lifestyles.

**Activities:**

As discussions with family members occur two techniques will be useful.

* The use of brainstorming can help identify as many ideas as possible. Remember, while brainstorming no judgments should be made about whether the ideas are good ones or doable. Just list ideas that can be later discussed more in depth.
* A second technique is problem solving. This is a great way to address a barriers or obstacle that would hinder an activity from occurring. Brainstorming ways to over problems and then having some discussion about the best ideas can help get things started. Keep in mind that the ideas should include physically active things, but can also include things that promote good health or increase knowledge about health.
* Families are busy! Because most people enjoy spending time with family members, an important first step is to think of how fun activities together.
* So a challenge in this activity is getting people to realize the benefits of getting to know family members better and spending some active times together. For instance, what can grandparents and grandchildren do together that will encourage a healthy focus in the family?

**Consider these steps in planning intergenerational activities for families:**

* What interests do family members have in common?
* What activities would fit for all family members or smaller groups of family members? For instance, could there be special grandparent/grandchild activities or an aunt/uncle day?
* What types of activities can the older generation share with the younger generation such as a game

**Create a plan:**

* Once you have a list of intergenerational family activities, you will next want to create a plan as to how these activities will occur. Most things will take some effort and will need to include communication about personal schedules and time management.
* The family may agree to try this for a month and see how it works. While many people do independent activities, the focus here is on having two or more people take part.
* **Create a Family Activity Calendar** so that everyone gets a chance to pick an activity.Put the calendar on the refrigerator with a magnet so everyone can be reminded and see that this is important. Be sure to designate that the family member that chooses an activity must get the family organized and make sure it happens.
* After the first month, the family might want to discuss their plan for the next month.Perhaps some activities will be ones to do a regular basis. Maybe some activities did not turn out so well and will not be repeated. Perhaps someone has a new idea about what they want to try.
* The main idea would be to keep this going in the family. Every month does not need to be the same. You may want to increase the number of activities you do or maybe you need to limit them to the weekend. Family members should each identify the one activity that they found the most fun and be sure it is included.

**Activity ideas to help get you started in your family brainstorming session:**

* Keep a “fun kit” in the car so that you always have a Frisbee, ball(s), and other equipment on hand for any time that there is a waiting period.
* Explore your town or city or any outdoor tourist attractions by biking or walking. Sometimes there are things in local communities where you might visit together.
* Have younger children share their walks to school, their favorite tree, or their favorite gardens with other family members.
* Try one of these—croquet, archery, paddleball, stickball, jumping rope, stretching, fishing, hunting, canoeing, kite flying; baton twirling or cheerleading. Don’t be afraid to be young and act silly!
* Hula hooping—who knew there could be such a variety to this activity? Find out how to start hooping, how to make a hoop, starting a hoop group.
* Walk together to activities instead of driving, and at the very least, make a commitment to park in the back parking lots to gain some extra exercise when attending events.
* Get pedometers to track everyone’s walking and set goals related to the number of steps taken daily.
* Find exercise tapes at the library to see what will work best. Take turns picking out different kinds of exercise tapes.
* Remember to warm up and cool down together too!

**Emotional Support**

* Family members and friends need to understand diabetes, listen to what you think and feel, and support or join you in making some healthy changes. For example, if you are trying to lose weight, it simply will be easier if your family also eats the same lower fat foods.
* Your family and friends will also have concerns and worries (for example, guilt, fear, anger, etc.) about your diabetes that need to be talked about so that realistic expectations can be set, misconceptions corrected, and feelings understood.
* Perhaps the two most important guidelines for family members are to have realistic expectations about blood glucose levels and to avoid blame.
* Family members need your help and the help of your healthcare team in order to understand that you cannot always control blood sugar levels even if you follow your diabetes care plan.
* Blaming the person with diabetes for high or low blood sugar levels never helps and frequently causes hurt feelings, arguments or serious conflict. The key to genuine support is to avoid blame and focus on problem solving.
* With that said, there are times when there may be no clue as to what has caused the problem or how to correct it. At moments like these what may be needed is a sympathetic word or a dozen roses. Family and friends need to understand that this kind of support can be very helpful during frustrating times[[14]](#footnote-14)

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| --- | --- |
| **Family support** | **Examples** |
| I feel my family should understand why diet is important to people with diabetes | Not offer desserts and fried food to me, even on festivals and in parties. Also do not feel bad if I reject to eat junk food. |
| My family should encourage me to eat foods that are healthy for my diabetes | Should buy green vegetable and fruits. |
| I feel my family should understand why exercise is important to people with diabetes |  |
| My family should encourage me to get exercise and keep active | They should come with me for walks and do stretches with me at home.Ask did I go for a walk, how was it? |
|  My family should understand why my diabetes medicines are important | They should ask me if I am carrying my medication with me while I go out. Also that these medications cannot be stopped if I feel better.They could keep the medication bottle on the table at lunch time. |
| My family support me emotionally if I feel frustrated or down about my diabetes |  They should sit with me and talk to me about the challenges I go through in my day to day life with diabetes. |
| **Family conflict** |  |
| My family nags me about taking my diabetes medications | If I forget they should not say it again and again about it, rather generally ask me the next time if I had my medicine |
| My family complains about eating the kinds of foods that are good for people with diabetes | They should not say we cannot eat fried food because of you, as it bad for diabetics. Rather they should also start eating fresh fruits and vegetables as it is good for everybody. |
| My family argues with me about how I choose to take care of my diabetes | They should not impose things, like you will not eat this or you will go for 1hr walk every day. They should encourage me for trying different things. |
| My family hassles me about getting more exercise | They should give me company in the walks rather than nagging me to go.  |
| My family seem embarrassed about my diabetes | If we go to a party my family should say that I will not eat fried or I will take the tea without sugar |

**HERBAL/NATURAL REMEDIES TO STRESS MANAGEMENT**

**CHW QUESTION: Do you know of any natural or herbal remedies to control stress?**

**Herbal and home remedies for stress**

**Home Remedy For Stress[[15]](#footnote-15),[[16]](#footnote-16)**

* The most effective way to treat stress would be to chew 10-20 leaves of Holy Basil (tulsi) everyday.
* Prepare a paste with dry ginger and water/ milk. Apply this on your forehead. Its cooling properties will help ease off the stress a bit.
* Take some betel leaves and wash them in water. Place the leaves on the forehead and leave them there for sometime. This is likely to bring relief from stress.
* Bishop's Weeds (Ajwain) are effective in treating stress. Put a handful of the seeds in a handkerchief and sniff them for sometime.
* Exercise, yoga and meditation are likely to relieve a person from stress, provided you indulge in them on a regular basis.
* Include lots of green leafy vegetables, fruits, salads, whole wheat grains, beans, grams, sprouts, eggs, cheese, soybeans and fresh curd in your diet.
* It is advisable to have 5 almonds, along with a glass of warm milk, every morning, to get relief from stress.
* Sage is valuable in the treatment of stress. In a cup of boiling water, add a tsp of dried sage leaves. Now, cover the cup with a lid and let the leaves steep for sometime. Strain the decoction and add honey to it. Drink this liquid while it's still warm.
* Have foods rich in Vitamin A and Vitamin B. They would provide your body the nutrients required to combat stress.
* A complete body massage is one of the best home remedies for stress. Stress can cause headaches and body pain. A good body massage can relax the muscles and improve blood circulation in the body. This will give tremendous relief in body pain and stress.
* Head massage can soothe the nerves and gives relief from stress and headaches. Hot bath after massage can cleanse the skin and head that will relax the muscles and reduce the stress.
* Magnesium helps a lot to manage your stress level. Green vegetables like spinach, almonds and seeds are the best source of magnesium. It also helps in muscle spasms.

**Herbal Remedy For Stress[[17]](#footnote-17)**

* Chamomile, lavender, marjoram, frankincense, peppermint, tangerine, rosemary and sandalwood aromatherapy are very beneficial and effective home remedies for stress.
* [Valerian](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2F17700%2Ehtml), has a relaxing effect on the nervous system, it promotes relaxation in persons leading a hectic lifestyle and helps support restful sleep.
* [Passion Flower](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fpassion%2Dflower%2Dinformation%2Ehtml) acts like a sedative. Recent studies have pointed to the flavonoids in passion flower as the primary constituents responsible for its relaxing and anti anxiety effects.
* [Scullcap](http://www.healthynewage.com/blog/skullcap-herb/) is considered the best general nerve tonic of all the nervine herbs.
* [Catnip](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fcatnip%2Dinformation%2Ehtml) nourishes the stomach and nerves. It calms the nervous system and is used also for digestion.
* [Kava Kava](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fkavakava%2Dinformation%2Ehtml) is used for anxiety, stress relief, insomnia, and to relax the body.
* [Chamomile](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fchamomile%2Dinformation%2Ehtml) is helpful as a digestive aid, tranquilizer and immunostimulant. It helps with mild sleep disorders, nervous stomach, and depresses the Central Nervous System.
* [Rhodiola](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Farrootrhodin%2Ehtml) reduces stress on the heart and normalizes irregular heart beat. Research has confirmed its anti-fatigue, anti-stress and cardiotonic effects.
* [Relora](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Frel2590cap%2Ehtml) offers the relaxing qualities of the benzodiazepine class of drugs without negative side effects. Relora is an exciting new natural anti-anxiety, anti-stress relief formula that helps control stress-related eating and drinking that is non-sedating with potential anti-depressant properties.
* [Nerves & Tension Tincture](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fnertentin2oz%2Ehtml) soothes the nervous system to help reduce stress.
* [Ex-Stress Formula](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fnertentin2oz%2Ehtml) combines popular herbs like Valerian, Hops and Black Cohosh traditionally used to relax the body's systems and provide general health maintenance.
* [GABA](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fgaba%2D1%2Ehtml) can be taken to calm the body in much the same way as diazepam (Valium), chlordiazepoxide (Librium), and other tranquilizers, but without fear, of addiction. GABA has been used in the treatment of epilepsy, hypertension, anxiety, and attention disorders.
* [L-Tyrosine](http://www.shareasale.com/r.cfm?u=98381&b=173472&m=22169&afftrack=stressless%2Ehtml&urllink=www%2Eherbalremedies%2Ecom%2Fltyr5060cap%2Ehtml) is an essential amino acid and a precursor of the neurotransmitters dopamine, norepinephrine, epinephrine (adrenaline) and the thyroid hormones. Used to treat insomnia, depression and anxiety, as an appetite suppressor, elevates mood, a natural GH releaser. Should not to be used while taking prescription antidepressants or MAO inhibitors.
* [Bach Rescue Remedy](http://www.healthynewage.com/Bach_Flower_Remedies.htm) contains a combination of five flower essences to help balance the emotions, relieve stress, and reduce fear and nervousness in stressful, traumatic or emergency situations such as receiving sudden bad news, family upset, bereavement, before an exam, meeting, interview, performing, giving a speech, and going to the dentist or hospital.
* Avoid caffeine, sugar, white flour products. Do not eat junk foods! Take a quality daily **Multi-Vitamin/Mineral Supplement**. A good diet will give you the strength to keep your nervous system and immune system in shape, and help to cope with outside influences.

**Access to Services and Family Support**

1. **Insurance options for low income individuals**

**What is Health Insurance?**

Important Factors to Consider When Obtaining Health Insurance[[18]](#footnote-18)

* The type of coverage offered by the health plans or carriers
* Range of choice in benefit options
* Relative ease of the enrollment and billing process
* Affordability, including monthly premiums and out of pocket expenses, such as co-payments and deductibles
* Special program policies, such as pre-existing condition limitations

Most insurance plans fall into two main categories[[19]](#footnote-19).

**Fee-for-service:** Under this type of plan, you go to a doctor, a clinic, or a hospital. Then—if the kind of service you received is covered by your insurance— either you or the person who took care of you sends the bill to your insurance plan. Fee for-service plans generally give you a wide choice of doctors and hospitals, although you may have to pay more if the one you choose is outside the network.

**Managed care:** Under most managed care plans, you choose a Primary Care Provider from the doctors within your insurance plan’s network. This person sees you most of the time, and arranges for other medical services if you need them. In many of these plans, you’re expected to get all your health services from providers within their specific network. Managed care plans can be less expensive than fee-for-service, because the “co-pay” fees for individual visits are low, the amount of your own money you must spend each year before the plan starts paying for your care is generally low, and routine care is nearly always covered.

Public Insurance

What are the main kinds of public insurance?

* Medicaid
* Emergency Medicaid
* Family health plus
* Medicare
* Child health plus
* Healthy New York

Health insurance options for low income in NYC

* Med health insurance
1. **Medicaid/Medicare**

**Who can get Medicaid?[[20]](#footnote-20)**

1. *Anyone has the right to apply for Medicaid, but not everyone can get it.* There are two major requirements:

a. **The person must be poor or low-income.** As a general rule, a successful applicant for Medicaid must demonstrate that his/her income and resources fall below levels set by the state. The amount of income and resources that an applicant can have will depend on the specific limits set by the state, and the limits may vary between the different eligibility groups offered by the state.

b. **The person must fit into a group that is covered by Medicaid.** It is not enough to be poor; you must also fit into the profile of one of the groups that Medicaid covers. Millions of poor men and women are ineligible for Medicaid because they do not fit the profile of any of the covered groups

**What does Medicaid cover?**

States must cover a basic package of health care services including hospital care, nursing home care, physician services, laboratory and x-ray services, family planning services, health center and rural health center services, nurse midwife, and nurse practitioner services. Medicaid also provides a comprehensive children’s health benefit package known as Early and Periodic Screening, Diagnosis, and Treatment (EPSDT). EPSDT covers a wide range of screening, diagnostic, and treatment services for children under age 21.

States have the option to provide additional services under Medicaid, including prescription drugs, institutional care for people with mental retardation, home and community-based care for the elderly, case management services, personal care and other services for individuals with disabilities, and adult dental and vision care.

**3. Health Access for undocumented immigrants**

Unauthorized immigrants and temporary visa holders (e.g., those with student or temporary work visas) are not eligible for Medicaid, except for Medicaid coverage of emergency room services. Elderly immigrants, though often ineligible for Medicare because they did not work in the United States for a sufficient number of years to qualify for it or Social Security, may still be eligible for Medicaid if they are poor enough and meet other criteria[[21]](#footnote-21).

The health care bill recently passed by the U.S. House of Representatives (H.R. 3962) clearly and directly contradicts the President's declarations and promises. Under H.R. 3962:[[22]](#footnote-22)

* Illegal immigrants are clearly permitted to purchase health insurance under the government health insurance exchange created by the bill.
* Illegal immigrants are permitted to receive coverage under the "public health insurance option" created in the bill.
* Illegal immigrants are ostensibly barred from receiving taxpayer-funded "affordability credits" to subsidize their health care, but the verification procedures used to determine the [legal](http://www.heritage.org/Issues/Legal) status of those who receive credits are weak and subject to fraud.
* The bill expands the Medicaid program. Illegal immigrants are nominally barred from receiving most Medicaid services, but the verification procedures used to determine the legal status of those who receive credits are also weak and subject to fraud.
* All illegal immigrant women who do not have private health insurance and who give birth inside the United States will have the full cost of childbirth paid by the U.S. taxpayers. There will be no effort to have the mother repay any of the cost. Given the fact that nearly 400,000 children are born inside the U.S. each year to illegal immigrant women, these costs could be quite large.
* The bill will provide tax credits to small businesses to subsidize the purchase of health insurance for illegal immigrant employees. Under H.R. 3962, small businesses will be given tax credits to encourage them to purchase health coverage for employees; because firms are not required to verify the legal status of subsidized employees, both legal and illegal employees will receive taxpayer support.
* Illegal immigrants will continue to receive so-called emergency medical services under the Medicaid program.

**4. Language Access Laws[[23]](#footnote-23)**

 **Who has language access rights under the law?** Limited English Proficient (LEP) patients and disabled patients have language access rights under the law. Those rights may also extend to the parents of minor children and/or to spouses or family members in certain circumstances. Patients need not be U.S. citizens to have language access rights under American law.

 **Who must comply with the language access laws?** If a hospital or clinic receives Medicare or Medicaid, the hospital has a legal duty to provide language assistance services. This legal duty escalates if:

* your primary market has a higher percentage of LEP individuals than surrounding areas;
* you provide care to LEP patients frequently;
* your organization provides acute and particularly emergency care and
* your organization has above average financial resources.

 **What must the hospital do to comply with the language access laws?**

* Ask the patient about their primary oral language and preferred written language.
* Determine whether the patient needs an interpreter. (Be sure to ask the patient!)
* Inform the patient of their right to a competent interpreter at no charge to them.
* Use a qualified interpreter during patient medical exams, to obtain a patient’s history and informed consent, and when giving treatment or hospital discharge instructions.
* Provide translated written documents in the patient’s preferred written language. (Only “vital documents” must be translated. Vital documents would include intake forms, consent forms and forms that affect the patient’s legal rights or medical services and benefits. Patient discharge forms and medication instructions should be translated.)

**Other key points to keep in mind:**

* A health care provider must pay for an interpreter or auxiliary aid even if the cost exceeds the provider’s charge for the appointment.
* A patient may not bring their own interpreter and bill the health professional for the cost.
* A substantial number of reported cases establish that a provider’s failure to address language barriers will result in a lack of informed consent.
1. **“Know Your Rights” health access for immigrants[[24]](#footnote-24)**
* You have a right to go to a doctor, a clinic, an Emergency Room, a hospital, or call an ambulance, no matter what your immigration status is. Using medical care should not affect your immigration status, it should not keep you from getting a green card or becoming a U.S. citizen, or stop you from sponsoring family members who wish to immigrate.
* All immigrants have the right to be treated if they have a medical emergency. Uninsured individuals and undocumented immigrants have the same rights to emergency care as all other New Yorkers. There are laws that protect the rights of all people who need emergency care.
* Anyone with a medical emergency has the right to an ambulance (emergency medical transportation), regardless of immigration status or ability to pay. You can get an ambulance by calling 911.
* You do not have to tell health workers what your immigration status is before receiving care.
* You do not need a Social Security Number (SSN) to receive emergency care or emergency medical transportation. You may be asked about a Social Security Number, but do not be discouraged if you do not have one. You cannot be denied care in a medical emergency even if you do not have a Social Security Number.
* You also have the right to have information about your health care kept confidential, which means that this information cannot be shared without your permission. You should not provide false information or false documents when applying for health benefits.
* Even if it is not an emergency, you can get care regardless of your immigration status or your ability to pay, in any public hospital and in any federally funded Community Health Center throughout the state. If your condition is not an immediate emergency, it is best to schedule an appointment in a hospital clinic or Community Health Center rather than going to the Emergency Room.
* Health care facilities throughout New York State are required by federal and state law to provide free language assistance to services for patients and family members whose English-language abilities are limited. It is your right to be understood by hospital staff, and to understand what hospital staff is trying to communicate to you.

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1. Information on health reform bill passed by President Obama (very simple information):[[25]](#footnote-25)
* By and large, the House bill better exemplifies the general goals of health reform – making health insurance more affordable for millions of people (including immigrants who are naturalized citizens and lawful residents), helping to contain the skyrocketing costs of the health care system in the United States, and including many provisions to reduce health disparities and improve health outcomes.

However, there are still grave inequities for immigrant community members, both lawfully residing and undocumented, .

* While naturalized citizens and many lawfully residing immigrants would gain access to more affordable health insurance, the five-year waiting period in federal Medicaid for lawfully residing immigrants’ remains and undocumented immigrants are excluded from reforms. Most appalling is a provision in the Senate bill, which will be used as the basis for negotiations that prohibits undocumented immigrants from buying full-price insurance with their own money in the new Exchange insurance marketplace.
* Tragically, neither bill restores federal Medicaid eligibility for lawful permanent residents within their first five years. This means that the most recent, lowest income legal residents will still not have access to a critical safety net benefit that their own tax money supports. Yet these same people will be required to buy insurance. Importantly, as a result of a lawsuit in 2001, New York extends Medicaid and Family Health Plus coverage to all lawfully residing immigrants who meet the income guidelines regardless of how long they have been lawful residents, and must continue to do so with state-only money.
	1. How beneficial for immigrants
	2. How not beneficial for immigrants
1. **How to navigate a public hospital:**
	1. Step by step guide: you can use this check list to choose a hospital[[26]](#footnote-26).

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|  | **Hospital Checklist**

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| **Ask your doctor or health care provider**  |
| Which hospitals do you work with? | 1.
2.
3.
4.
 |
| Which hospital has the best care and results for my condition? |   |
| How well were your other patients treated at that hospital? |   |
| Why do you recommend this hospital for my care? What are you basing your recommendation on? Why is this the best hospital for me?  |   |
| **Find out if the hospital**  |
| Is accredited (voluntarily met national health and safety standards) by a national organization like the [The Joint Commission](http://www.hospitalcompare.hhs.gov/Hospital/Static/SupportingInformation_tabset.asp?activeTab=4&subtab=4&language=English&version=default) or the [American Osteopathic Association (AOA)](http://www.hospitalcompare.hhs.gov/Hospital/Static/SupportingInformation_tabset.asp?activeTab=4&subtab=4&language=English&version=default) .  |   |
| Checks and improves its quality of care? Ask how problems with care are handled. |   |
| Is conveniently located for you and your family. Can you and your family get there easily for planned or emergency care? |   |
| Has convenient visiting hours and other rules that are important to you and your family. For instance, can someone stay overnight in the room with you?  |   |
| Is clean. Visit the hospital and look around. Do the rooms look comfortable?  |   |
| Has rooms that offer privacy?  |   |
| **Check with your insurance company or health plan to see whether you**  |
| Have to go to a certain hospital for non-emergency care.  |   |
| Have to pay a different amount depending on which hospital you use.  |   |

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1. **Options for health care:**
* Public hospitals are administered by the local government, while private hospitals in New York State are nonprofit, non-governmental organizations. Private hospitals have charitable organization status and receive government funds to help cover the cost of providing care to the uninsured.

PAYMENT

* Hospitals are required to provide affordable services to people who have limited income. The New York City public hospital system (known as the Health and Hospitals Corporation, also called HHC) operates many hospitals and outpatient clinics. Outside New York City, there are only a few public hospitals throughout the state—the biggest are in Buffalo, Westchester County, and Nassau County[[27]](#footnote-27).
* All hospitals, public and private alike, have the ability to reduce the fee for your health care, as do clinics and health centers. Medical financial assistance is often referred to as sliding fee scale, fee reductions, fee settlement, and charity care. A lower charge is offered based on a patient’s income, which makes the health care more affordable.
* Payment plans are also available, allowing patients to pay their reduced medical bills over time. You can learn about sliding fee scales and insurance at the time you seek care or even after you have received the bill. If you did not have insurance at the time you received care, you may still be able to enroll in insurance and have the bill paid by insurance, or you may be able to negotiate with the medical provider to reduce the fee based on your income. These options are safe for immigrants, and it is important to ask your health provider about insurance and financial assistance.

**Public hospitals**

The public hospitals and Community Health Centers are required to serve everyone, including undocumented immigrants, regardless of their ability to pay. If you cannot pay the full cost, a sliding-fee scale that reduces the cost will be arranged according to your income at all hospitals, public and private, all HHC facilities, and Community Health Centers. You may also be able to arrange a payment plan that will allow you to pay for your care over time.

**Emergency Rooms**: When should you go to the ER[[28]](#footnote-28)

Examples of situations that may be life threatening includes:

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| dot_red | Repeated attacks of chest pain or pressure with sweating, pain in the jaw or arms  |
| dot_red | Choking  |
| dot_red | Loss of consciousness  |
| dot_red | Not breathing or difficulty breathing  |
| dot_red | Suspected poisoning or overdose  |
| dot_red | Severe injuries, such as suspected broken bones, head injuries or heavy bleeding  |
| dot_red | Suicide attempt  |
| dot_red | Seizures or convulsions  |
| dot_red | Numbness or paralysis of an arm, leg or one side of the body  |
| dot_red | A sudden, severe headache, especially if there is neck pain or a change in consciousness at the same time  |
| dot_red | Domestic violence  |
| dot_red | Coughing up blood  |
| dot_red | Vomiting blood or something that looks like coffee grounds  |
| dot_red | A change in mental ability, such as not knowing where you are or being unable to recognize familiar people  |
| dot_red | Heavy bleeding |

**Continued Care** is required for routine medical problems. These are not life-threatening emergencies or urgent medical problems. For these problems or situations, you should make an appointment with your physician or clinic.
 Routine medical problems include:

|  |  |
| --- | --- |
| dot_red | Immunizations  |
| dot_red | School check-ups  |
| dot_red | Colds and sore throats  |
| dot_red | Important health maintenance visits, including mammograms, pap and pelvic exams and prostate exams  |
| dot_red | Follow-up visits for chronic problems such as diabetes or high blood pressure  |
| dot_red | Prenatal visits |

**Private clinics**

Generally, each clinic, or health center will require you to go through its own financial counseling or fee scaling process if you are uninsured. Some clinics require the patient to make a clinic appointment or receive services first and then work out the billing arrangements and fee reductions, while other clinics require the individual to meet with the billing or financial staff before scheduling clinic appointments or tests. Be sure to ask your medical provider about their financial assistance policy, including how to get fee scaled and set up a billing plan if you are uninsured

**Community Doctors/ community health services**

Federally funded Community Health Centers throughout the state and HHC’s hospitals and clinics must ensure that a patient’s inability to pay for care does not create an obstacle to obtaining care or cause financial ruin for the patient. Federally funded Community Health Centers, public hospitals, including HHC facilities, and private hospitals all offer care at a reduced rate based on a patient’s ability to pay. These rates must be in writing and shared with the patient. It is HHC’s policy that no patient will be required to pay more than he/she can afford, and no patient will be denied care because of an inability to pay. Medical care, however, is rarely free in America, and all patients are asked to contribute a “reasonable” amount toward their care, taking into consideration their income and resources.

1. What to ask your doctor when you go for care:
	1. Primary Care Doctor:

See your health care team **at least twice a year** to find and treat any problems early. Ask what steps you can take to reach your goals.

**At each visit be sure you have a:**

* blood pressure check
* foot check
* weight check. Try to attain a body mass index of 25 (but the average diabetic is 40 pounds overweight!) Your Body Mass Index or BMI is calculated based on your height and weight and measures your body fat.
	+ 1. A1C - Ask your health care team what your A1C number is, what it should be, and what you need to do to reach your A1C goal. Ask for an A1c test at least twice a year.Regular testing will help you and your doctor to track your blood sugar levels over time and plan long-term treatment options to reach your target level of control. If your treatment changes or if your blood sugar level stays too high, you should get a hemoglobin A1c test at least every three months until your blood sugar level improves.
		2. Blood Pressure - The goal for most people with diabetes is below 130/80.High blood pressure makes your heart work too hard. It can cause heart attack, stroke, and kidney disease
		3. Cholesterol - Cholesterol is a substance that is made by the body and used for many important functions. Cholesterol is also found in some food derived from animals. When cholesterol is too high, the insides of large blood vessels become narrowed or clogged. The LDL goal for most people is below 100. The HDL goal for most people is above 40
		4. Yearly check ups - **Once each year be sure you have a:**
* cholesterol test
* triglyceride (try-GLISS-er-ide) test — a type of blood fat
* complete foot exam
* dental exam to check teeth and gums — tell your dentist you have diabetes
* dilated eye exam to check for eye problems
* flu shot
* urine and a blood test to check for kidney problems
* Talk to your doctor about ACE inhibitors (lisinopril, ramipril, etc) to keep the kidneys from failing
* pneumonia (nu-mo-nya) shot
1. Specialists: if you have complications developing your primary care phisician will direct you to the specialist.
	1. Podiatrist
	2. Optometrist
	3. Cardiologist
	4. Nephrology
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5. http://www.diabeticcareservices.com/diabetes-education/diabetes-and-smoking [↑](#footnote-ref-5)
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9. www.journal.diabetes.org [↑](#footnote-ref-9)
10. www.joslin.org [↑](#footnote-ref-10)
11. [www.care.diabetesjournals.ord](http://www.care.diabetesjournals.ord); American diabetic association [↑](#footnote-ref-11)
12. http://www.centertrt.org/Downloads/Obesity\_Prevention/Strategies/Physical\_Activity/Social\_Support\_for\_PA.pdf [↑](#footnote-ref-12)
13. http://www.diabetesfamily.net/toolkit/activities/family/intergenerational-family.pdf [↑](#footnote-ref-13)
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