



# Living with Diabetes

Month 12

So far you have learned how to control your diabetes. You have all the necessary tools and knowledge of how to control your diabetes; you are constantly taking steps to keep your diabetes under control...Congratulations! But what about our family and those around us?

The family must be considered an important pillar for the support of the [patient with diabetes](#). A lack of support, or the insufficiency thereof, from the closest nucleus can be unfavorable to the metabolic control, limiting or obstructing the adequate control and treatment of the disease.

<https://fmdiabetes.org/diabetes-en-el-entorno-familiar/>

One of the best ways to predict how well a person will manage their diabetes is to see how much support they get from friends and family.



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Daily diabetes care is a lot of work, from taking medicine, injecting insulin, and checking your [blood sugar](#). It also includes eating healthy, being [physically active](#), and keeping your health care appointments. The support of a family member or friend can help make the difference in whether you feel overwhelmed or empowered.

<https://www.cdc.gov>.

# Achieving Goals

Write Them  
Down



Define Them  
specifically



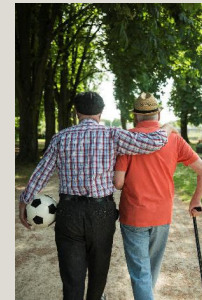
Make Them  
Measurable



Make Them  
Achievable



Be  
Accountable



Throughout this course we have discussed that setting goals is important. Don't give up if you haven't achieved them. We must always be in a process of improving every day, so let's remember the most important strategies to achieve your goals.

The first is to write them down – if you've already reached your goal, don't erase it, keep it on the list as a reminder and as a way to keep pushing yourself to achieve more goals. Remember that your health goals are important, but other goals you may want to add to that list will give you direction to make better decisions.

Define your goals specifically – not vague phrases like “I'm going to eat better...” Make them specific to what you want to achieve – it's more effective this way.

Make it measurable – again it is important to give a date or amount as a goal – “I am not just going to walk for 30 minutes...” make it measurable: “I am going to walk 30 minutes 2 times a week for 1 month...” and then review this goal and improve it.

Make them achievable – if you don't exercise, starting out thinking you're going to run 2 miles every day is just too unattainable. We must go in gradual improvement – not jump into something that we will not be able to sustain for a long time.

Have someone to be accountable to who encourages you....and this leads us more specifically to being able to have people around us who encourage us and with whom we can be honest. We are not always going to achieve our goals, and we are going to want to give up.

## *Diabetes and the Family Environment*

The attitude of those who suffer from diabetes



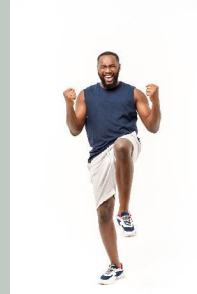
Emotional closeness to the person suffering from



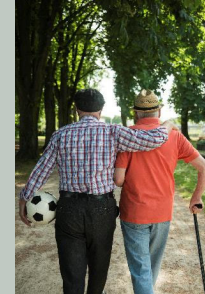
The degree of commitment in relationships



Family adaptation reaction



Social support



The fact that one person in the family unit is diagnosed with a chronic disease does not affect all its members in the same way, since there are many variants that come into play. Factors influence such as: the attitude shown by the person, the emotional closeness with the person with diabetes, the degree of commitment acquired in the relationship and the individual characteristics of the person with diabetes.

We can describe these variables as follows:

### **The attitude of those who suffer from diabetes**

The diagnosis of diabetes that you receive can be assimilated in different ways. The patient may take it as an expected consequence of genetics or as a consequence of having bad eating habits, although some also take it as something that comes out of nowhere. They can also take it as a catastrophe that will disrupt their lifestyle or as a consequence that only needs to be faced with major changes in their day-to-day life.

### **The emotional closeness or distance in relation to the person who has diabetes**

It is not about the degree of kinship that we have with the patient with diabetes, although sometimes that is very much related. But we must emphasize that the information that someone we love very much has diabetes does not have the same impact on us as someone we simply have affection for.

### **The degree of commitment acquired in the relationship**

The more involved the person is in that relationship, the more they will influence and be influenced by what happens to the other person. Other factors, such as the skills to handle certain situations, the level of motivation, the degree of anxiety... are also elements that will nuance the relationship.

### **Family adaptation reaction**

The adaptation of the family to the diagnosis of diabetes is extremely important, and the reaction of families to a chronic disease is not the same in all cases. Family members need education, as does the patient, in order to help them make changes in lifestyle and give them the necessary support.

### **Social support**

It is the set of social resources that exist and that the individual receives in a certain situation, which are perceived positively or negatively, that influence the evolution of any disease. Currently, two theories have been defined that explain the association between social support and health:

If we talk about the identified risk factors that influence adherence to treatment of any disease, we can highlight: sedentary lifestyle, ignorance of the disease, distrust in the doctor's ability, the short duration of the consultation (normally 5 minutes in which the patient does not feel heard and receives just a bit of information), lack of understanding of medical instruction, low education level, marital status, intolerance of medications, use of alternative therapies... All of these can be categorized as deficiencies in communication between the doctor, the patient and the family nucleus.

In the general population there is low adherence to compliance with the prescribed treatment and medication. Lifestyle changes can become difficult, sometimes due to lack of family support or ignorance of the disease, factors that prevent the patient with diabetes from achieving optimal control.

It is essential to encourage family participation and involve health care personnel to accept the commitment to promote a series of behaviors that favor adherence to treatment.

Source: Bayer Diabetes Care



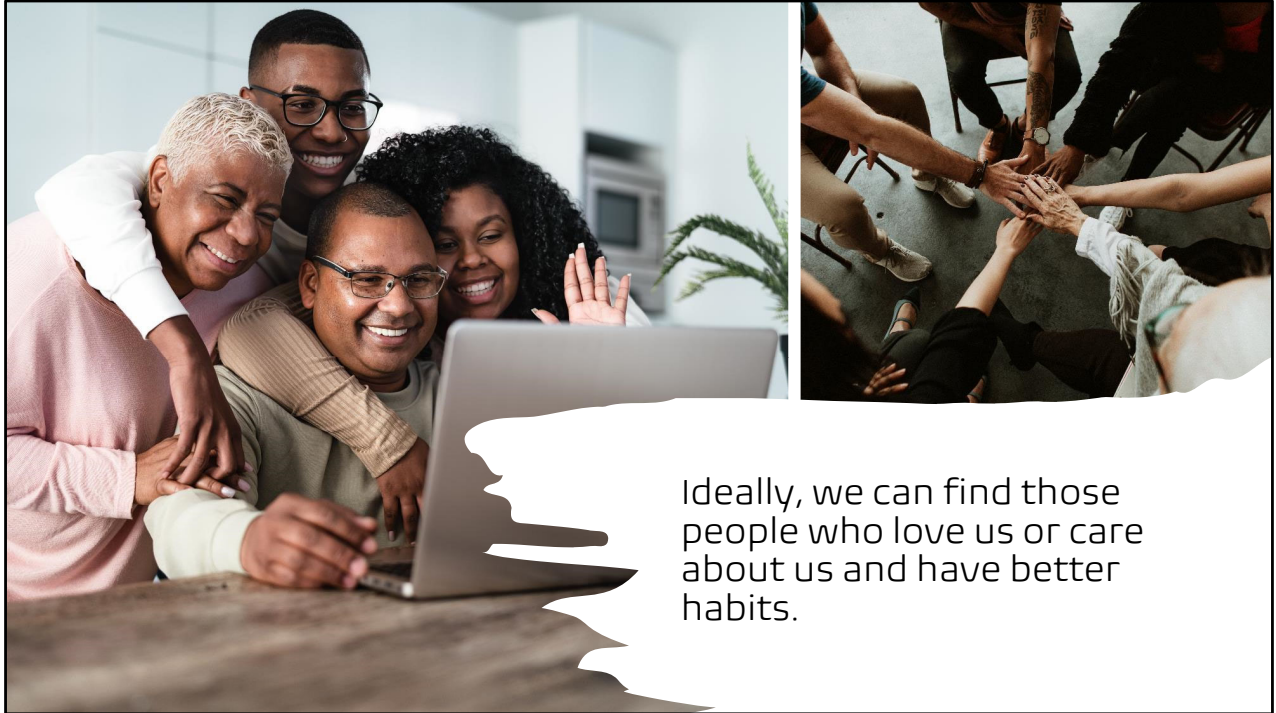
You've already taken steps...but do you have a support system around you?

There are times when we have a support system around us that encourages us to continue to take care of our health. What can we do for that support system? Or what if we don't have a family, job, or community to support us?

Allow the answer.

One of the most important tools in the self-management toolbox is good communication. It is essential to be able to use the other tools correctly. And, of course, it is important to get along with other people.

Minor, Marion; Lorig, Kate; Gonzalez, Va.; Sobel, David; Laurent, Diane; Gecht- Silver, Maureen. Taking Control of Your Health (Spanish Edition) (pp. 487-488). Bull Publishing Company. Kindle Edition .



Ideally, we can find those people who love us or care about us and have better habits.

Ideally, we can find those people who love us or care about us and have better habits. And many times our family is the first to want us to improve our habits. If this is the case...let them help you, don't scold – encourage!

Communication is a two-way street. If you don't feel comfortable expressing your feelings or asking for help, chances are others feel the same way. You are the one who decides if you want to open the lines of communication.

These are two keys to good communication:

1. Do not assume that others understand. Don't think “you know what I'm saying”. People can't read minds; you must explain to them how you feel.
2. You can't change the way others communicate. But you can change the way you communicate with them to make sure they understand you.

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Invite them to grow and improve with you!

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Bad habits are often passed on to our children and grandchildren – unintentionally...just because they are part of what we have always done and the way we have always behaved. We eat the same unhealthy foods because we are used to them. We have the same bad habits in terms of exercise because that's the way we grew up.

The history of diabetes in families has more to do with the bad habits we grow up with, rather than with genes. Diabetes is hereditary because customs and habits are inherited from our parents. Start creating a new legacy in your family.



You can start by  
encouraging  
your children and  
your family  
to eat healthier....  
like you !

**Eating healthy is key to managing diabetes and preventing serious complications, and some of your favorite traditional foods can be a part of that. Learn how to prepare foods that connect you to your culture while keeping your blood sugar on target.**

If you have diabetes, you've probably been told how important healthy eating is for managing your blood sugar. And you probably said to yourself: *"Does this mean I have to stop eating all the foods I love?" "The foods I grew up with?"*

Many people connect with their culture through the food they eat. The cultural significance of food is passed down from generation to generation, connecting you to your ancestors and allowing you to tell their stories through food. It's hard to feel like you might have to let go of your history to manage your health. But the good news is that you can still enjoy many of the foods you and your family love and manage your diabetes, too.

But we also transmit phrases and beliefs for generations:

Mention popular phrases that our mothers told us when eating:

"Don't leave anything on your plate!"

"Didn't you like my food?"

"Your granny worked hard to prepare your food, and you don't appreciate it!"

"Food brings the family together!"

"Early Christians ate together!"

You can start by encouraging your children and family to eat healthier...just like you!

Teach them about the healthy plate and what each of the nutrients does in our bodies. Avoid eating junk food - (remember that if you don't buy it at the supermarket – it won't be available at home and it will be easier to avoid temptation).

Sadly, this subject is seldom taught in the schools of your children or grandchildren....Be encouraged to share with them what you have learned. The way a person with diabetes should eat is actually the way EVERYONE should eat. Forming these new habits of eating more fruits and vegetables, eating in healthier portions, and not consuming excess sugars is something that if we instill it in our children – it will remain as a habit in their adult years.

Try to measure your portions! This is one of the keys to eating well...sometimes we don't know how much of each type of healthy food we should put on a plate! In the social class they will help you to remember and define these portions. Share this information with your family.

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## Let's exercise as a family!



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Encourage them to move together...if your children and family are willing to exercise together – you can do fun things to move! Play a sport with them, ride a bike if you have one. Have family competitions.

Be creative...Remember what we learned a few months ago about exercise? Try to implement exercises with them. Pick up cans of food instead of buying weights, etc.

BUT....what if  
your family  
doesn't help  
you to meet  
your goals?

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But sometimes getting your family's support isn't that easy!

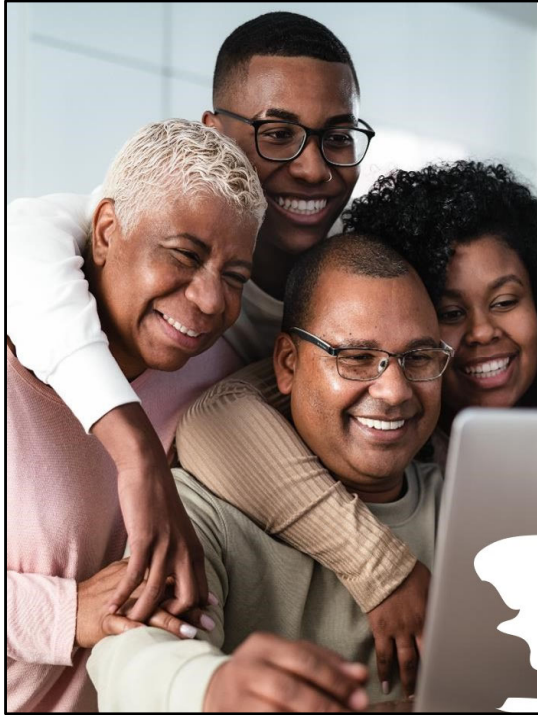
If your family does not support your changes or puts temptations within your reach...have an action plan!

Look for support in your church or community of friends. Make new friends who make health a priority.

Remember that we always have options.....

The Bible says in 1 Corinthians 10:13 - No temptation has overtaken you that is not human; but faithful is God, who will not let you be tempted beyond what you can bear, but will also provide a way out with the temptation, so that you can endure.

Remember that God is on your side as you take care of your health! We can look to God for help when all of our support systems fail us.



## Your options

- Remember that your health is your priority
- Not everyone around you will understand your goals
- Learn to communicate
- Consider that it takes time to assimilate that we must make changes
- You can't please everyone all the time - be the leader of your own life
- If relationships are unhealthy, learn to set healthy boundaries.

If your family member was diagnosed with diabetes, what would you like to know about him/her?

Tool/Communication- Learn to communicate:

- Your goals
- Obstacles
- Your limits
- Your fears: of complications, of finances, of depending on others, of being isolated, of being ignored, of the future, of death. etc.
- Be accountable
- Express your feelings
- Ask for help, get help.

Remember that we are here to help you!



Even though this program is coming to an end – Clínica Casa El Buen Samaritano is always here to help you continue your diabetes care.

We hope this diabetes health and management program has helped you.





## Referencias

- Sartorius N. (2018). Depression and diabetes. *Dialogues in clinical neuroscience*, 20(1), 47–52.
- Bădescu, S. V., Tătaru, C., Kobylinska, L., Georgescu, E. L., Zahiu, D. M., Zăgrean, A. M., & Zăgrean, L. (2016). The association between Diabetes mellitus and Depression. *Journal of medicine and life*, 9(2), 120–125.