

Study Plan

Month	Main Topics	Social Barriers to Care	Behavioral Barriers to Care
1	Overview of Diabetes - Describing Diabetes and A1C - Goals, A1C Levels - Preventing Complications	Taking Responsibility - Teaching the Glucometer	Fear
2	Medication Adherence - Why Is Adherence Uncommon? - Reasons to Take Your Medications - Normal Blood Sugar Levels - Overcoming Medication Non-Adherence	Taking Medications	Worry
3	Nutrition - Why Is Nutrition Important? - Why Does It Seem Difficult? - How to Simplify Nutrition? - Setting Goals	MyPlate.gov (My Plate)	Overwhelm
4	Sex/Intimacy and Depression - Diabetes and Complications Related to Sexual Intimacy and Depression - Importance of Glucose Control	Possibility of Counseling	Sadness
5	Preventive Care - Reason for Preventive Care - Diabetes Complications: Arteries, Heart, Kidneys, Eyes, Feet - Vaccines and Preventive Exams by Age	Revisiting Norms by Age	Coping/Moving Forward
6	Exercise - Why Is Exercise Important? - Three Types: Stretching, Aerobic, and Resistance - Practical Resources and Goal Setting	Practice: Exercise Examples	Mental Exercise
7	Depression and Anxiety - Depression and Anxiety, What They Are and What They Are Not - Symptoms, Resources, and Help Lines - Seeking Help When Needed	Involving Family and Breaking the Taboo	Barriers to Involving Family
8	How to Involve Family and Friends in Your Health - The Accountability Partner and Types of Support - Eating and Exercising as a Family - Spirituality and Health Are Connected - What to Do If Family Does Not Support - Goal Setting with Social Support	Including Family and Friends in Health Care	Challenges in Involving Family
9	Connect with the Care You Need - Health Insurance, Clinic Appointments, Medications and Supplies - Preventive Checkups: Flu, Ophthalmology, Dentistry - Place to Exercise and Transportation to Appointments - Community, Family, and Mental Health Support	Reviewing Community Connection Resources	Seeking Help / Overcoming Isolation
10	Tobacco and Diabetes - Effects of Tobacco - Reasons to Quit Tobacco - Ways to Build a Support Community	Reviewing Information About Community Programs (Tobacco)	Identifying Emotional Causes for Smoking
11	Alcohol and Diabetes - Effects of Alcohol - Reasons to Quit Alcohol - Ways to Build a Support Community	Reviewing Information About Community Programs (Alcohol) and Support Groups	Identifying Emotional Causes of Alcohol Use
12	Sleep Well, Live Well: Stress, Sleep, and Diabetes - The Stress-Sleep-Diabetes Risk Triangle - Strategies to Sleep Better and Reduce Cortisol - Who Is at Greater Risk and Why? - Practical and Free Techniques to Break the Cycle	Stress Management and Community Support	Seeking Help / Breaking the Cycle

General Medical, Social, and Behavioral Questions for the Group:

1. Define the topic
2. Of the barriers mentioned, which ones relate to your diabetes?
3. What can you do to improve? (set goals, objectives)

Detailed Curriculum

ONE	Overview of Diabetes
Month's Objective:	By the end of this month, the patient will be able to: identify the basic concepts of diabetes and A1C, and practice using the glucometer.
Social	<p>Topic. Physical Barriers to Care: Taking Control (Glucometers)</p> <p>Supplies. Glucometers (can only be given to those who do not have one) A1c-to-Blood Sugar Level Correlation Chart Glucose Log Sheet</p> <p>Questions.</p> <p>1. Explain: What does it mean to take control? CONTROL: it literally means taking ownership... or being in control of your illness. Some examples of taking control: - Knowing the medications you are taking - Knowing what your numbers are and whether they are good or bad (such as blood sugar levels)</p> <p>2. Overcoming Barriers. What are my barriers or things that get in my way? Money, time, not knowing enough about diabetes</p> <p>3. Goals/Objectives. What can I do to take control?</p> <ol style="list-style-type: none"> Learn to use your glucometer (and check your levels at different times of day) Keep a log of your blood sugar levels (Show the glucose log) Now, how can I help others overcome the barriers we discussed today?
Behavior	<p>Topic. Mental Barriers: Fear</p> <p>Supplies. Fear Handout</p> <p>Questions.</p> <p>1. Explicue: Many people have problems related to diabetes... such as "I feel afraid when I think about living with diabetes." Fear. What is fear? Why do you think many people with diabetes experience fear?</p> <p>2. Overcoming Barriers. Discuss how the mind affects the body and why we cannot ignore it when we want to improve, e.g.: "I am worried, so I will not take my medicine." Reflect on your values and beliefs: - Do you consider yourself a spiritual or religious person? Is spirituality important to you? - Do you have spiritual beliefs that help you cope with fear in difficult times? - What gives meaning to your life?</p> <p>3. Goals/Objectives. What can we do when we are afraid? How do you plan to overcome fear? (set goals and objectives to achieve them) For example: "My goal is not to let fear stop me from taking my medicine, so this week I will _____"</p>
CHW Weekly questions to patients	<p>Each week:</p> <ol style="list-style-type: none"> How are your blood sugar levels? Any problems getting or taking your medications? Questions or concerns? <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> Have you checked your feet this month? Do you know your A1c? Do you know what it should be? Do you have your own glucometer and do you know how to use it?

TWO	Taking Your Medications.
Month's Objective:	By the end of this month, the patient will be able to: explain the importance of medication adherence and develop strategies to take them consistently.
Social	<p>Topic. Physical Barriers to Taking Your Medications.</p> <p>Supplies. Prescription Medication Labels Information About GoodRX</p> <p>Before Starting. Take time to review the blood sugar log and how these "match" the A1c. (It's okay if you didn't check your sugars every day; something is better than nothing.) SOMETHING TO DO: Remember to check your blood sugar levels at different times of day, not just in the morning. This way you can see if they are "high" or "low" at other times. Note: This review section is for Month 2 only. At the discretion of the CHW/Promoter, it can be adapted in other months.</p> <p>Questions.</p> <p>1. Explain. What does "controlled diabetes" mean? Why is it difficult?</p>

	<p>A1c <7 (less than 7), allow dialogue. How can I understand my medication label?</p> <p>2. Overcoming Barriers. What barriers or things prevent you from taking your medications? Allow dialogue. "I feel fine," concern about side effects, forgetting, "I am eating well and exercising now," "I feel better not taking them."</p> <p>3. Goals/Objectives. If you are not taking your medications as prescribed, what could you do to take them? First: have them ask themselves, what is the main reason they are not taking their medications? Second: help them make a plan to overcome this barrier Example: "I forget" - perhaps the plan is to set a phone alarm. Side effects, or "I feel fine without them" - perhaps the plan is to discuss it with the doctor. It is important to communicate your concerns to your doctor or CHW/Promoter. We want you to feel well AND take your medications.</p>
Behavior	<p>Topic. Mental Barriers to Taking Your Medications: Worry. Supplies. Worry Handout Questions. 1. Explain. What is worry? Why do you think many people with diabetes suffer from worry about their illness and its complications? 2. Overcoming Barriers. Review: how the mind affects the body and why we should not ignore it when we are trying to improve. Many people have problems related to diabetes: "I worry about the future and the possibility of serious complications." Reflect: How important is spirituality in your life? How does it help you cope with your worries? 3. Goals/Objectives. What can we do when we worry? Example: "My goal is not to let worry prevent me from taking my medications. This week I will _____"</p>
CHW Weekly questions to patients	<p>Each week: 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - Do you know about your medication refills and how to get them? - How could you remember so you don't forget to take your medications? - Have you noticed any difference in how you feel when you take your medications regularly?</p>

THREE	Nutrition
Month's Objective:	By the end of this month, the patient will be able to: apply the MyPlate principles to plan balanced meals and set realistic nutritional goals.
Social	<p>Topic. Mental Barriers to Nutrition. Supplies. MyPlate.gov (My Plate), ideas on how to eat using "My Plate" Questions. 1. Explain. How to eat healthily? Achieving a better weight, eating a balanced diet, eating a "colorful" diet and the right portions, etc. 2. Overcoming Barriers. This sounds easy. Why is it difficult to do? (time, money, transportation, I love food, etc.) Practice drawing "my plate" with examples of: breakfast, lunch, and dinner. 3. Goals/Objectives. Set a goal. Lose weight if the body mass index (BMI) is not normal, or if the BMI is normal, fill up your plate with color. Find 2 or 3 specific ways to do it this month (go to the store every Monday to buy fruit and vegetables; make "my plate," measure portions to understand them).</p>
Behavior	<p>Topic. Mental Barriers to Eating: Overwhelmed. Supplies. Habits Handout Questions. 1. Explain. What is the relationship between diabetes and feeling overwhelmed? 2. Overcoming Barriers. Why do my thoughts greatly influence my behavior? Discuss the connection between our thoughts and actions. Reflect: Has your spirituality or your values influenced how you care for your diabetes and your health in general? 3. Goals/Objectives. Strategies for overcoming feeling overwhelmed. My goal is not to let feeling overwhelmed affect my eating habits. This week I will _____.</p>
CHW Weekly questions to patients	<p>Each week: 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - What types of carbohydrates are you eating? - Have you tried making "My Plate" in any of your meals this week?</p>

- Is there a specific food that is difficult for you to control? We can look for alternatives together.

FOUR	Sex, Intimacy, and Depression
Month's Objective:	By the end of this month, the patient will be able to: recognize the connection between diabetes, sexual health, intimacy, and depression, and know when to seek help.
Social	<p>Topic. Physical Barriers to Prevention and Complications with Diabetes. Supplies. None. Questions. 1. Explain. What does prevention mean to you? Would you be surprised to know that controlling diabetes would help you avoid sexual complications? Name one or two things you are doing to prevent complications (taking your medications, controlling or losing weight, getting your prescription before it runs out, etc.) It is never too late to start! 2. Overcoming Barriers. Depression and diabetes are commonly linked to one another and can be a very bad combination. When this happens, people feel sad and it causes the person to worsen by not taking their medications. Reflect: Your mood has a direct impact on your physical health. How can you care for your emotional well-being to improve your diabetes control? 3. Goals/Objectives. Before this gets worse, what can you do? If you think you have depression, seek help. DO NOT HIDE IT. Make an appointment with your doctor to talk face to face. Have 2 or 3 friends with whom you can talk openly, at least once a week. Take care of yourself. (Exercise is a natural medicine.) Let's make a plan this week. What is your goal? How are you going to meet your goal? ***** If the patient has had urges, thoughts, or plans to harm themselves or others, they need help NOW. Notify the doctor; we need to help this person immediately. *****</p>
Behavior	<p>Topic. Mental Barriers to Care: Depression and Its Connection to Sexual Intimacy. Supplies. Depression Handout Questions. 1. Explain. What is depression? Why do you think it is so common with diabetes? Allow dialogue. Why do you think it is good to talk about the topic of complications with your spouse? (Such as sexual dysfunction.) If your partner is not functioning sexually, there may be thoughts of infidelity, when in reality you feel embarrassed to talk about the subject. Help each other so that this can be better understood. As we have said, thoughts and actions are connected. For example, the connection between our thoughts (depression) and the action (not eating well or taking medications) and the consequence causes sexual intimacy not to function. 2. Overcoming Barriers. Reflect: Are you part of a spiritual community? Do you think this is a support for you? How? Is there a group of people who love you or who are important to you? 3. Goals/Objectives. Goals and strategies for coping with diabetes complications (start with your thoughts). My goal is to take care of my mental well-being this month. This week I will _____. ***** If anyone mentions having suicidal attempts or urges, report it to the doctor immediately. *****</p>
CHW Weekly questions to patients	<p>Each week: 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - How did the discussion about sex and depression relate to your life? - Have you talked with your doctor about your emotions or your mood in relation to your diabetes? - Do you have trusted people with whom you can talk openly about your feelings?</p>

FIVE	Preventive Care
Month's Objective:	By the end of this month, the patient will be able to: identify specific preventive actions to avoid diabetes complications and make a plan to carry them out.
Social	<p>Topic. Physical Barriers to Prevention. Supplies. None. Questions. 1. Explain. What is prevention for you? Review diabetes complications: the arteries carry blood throughout the body and uncontrolled diabetes damages them. This can cause: high cholesterol, high blood pressure, strokes, heart attacks, kidney disease, eye disease, and amputations. Review preventive actions: foot exam, vaccines (especially the flu shot), eye exam, mammogram, colonoscopy, Pap smear, PSA (prostate). Share \$4.00 medication resources.</p>

	<p>Why is prevention important? (If the medication is too expensive, the doctor can provide a less expensive alternative.)</p> <p>2. Overcoming Barriers. What are some of the challenges of "prevention" that you face? (taking your medications, making medical appointments, or if you don't feel sick, why do it?)</p> <p>Allow them to share stories of prevention or of people who have avoided diabetes complications.</p> <p>3. Goals/Objectives. Be specific.</p> <p>"Every Monday I will make sure I have enough medication, or if I don't, I will call the clinic."</p> <p>"I will make an appointment for my eye exam this month."</p> <p>"I will schedule my mammogram / colonoscopy / Pap smear this year."</p> <p>"I will get my flu shot this fall."</p>
Behavior	<p>Topic. Mental Barriers to Prevention (Coping/Moving Forward).</p> <p>Supplies. None.</p> <p>Questions.</p> <p>1. Explain. Make a list of the diabetes complications that you have decided to prioritize avoiding (kidney failure, heart attack, vision loss, loss of limbs, etc.). What does COPING mean? Allow dialogue.</p> <p>Connection between our thoughts (fear of complications), actions (not taking medication or not making appointments), and the outcome (suffering a heart attack or another complication).</p> <p>2. Overcoming Barriers.</p> <p>Reflect on your values and what is most important to you: What gives you strength to take care of your health? What role does your faith, your values, or your spiritual community play in how you care for your health? Are there people in your life who support you in caring for your health? How can you support others?</p> <p>3. Goals/Objectives. Strategies for coping with and preventing diabetes complications.</p> <p>How would you like your CHW/Promoter to help you with preventive care? Your promoter can help you CONNECT with vaccines, eye exams, and other preventive services.</p> <p>My goal is to practice preventive care this week. This week I will _____.</p>
CHW Weekly questions to patients	<p>Each week:</p> <ol style="list-style-type: none"> 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> - Have you been given a referral to make an appointment with an eye doctor? Have you made it? - When was your last preventive medical exam (breast, cervical, colorectal, prostate cancer)? Do you already need to make an appointment? - Have you gotten your flu vaccine this year? - Have you checked your feet this month? Have you noticed anything different?

SIX	Exercise
Month's Objective:	By the end of this month, the patient will be able to: develop a sustainable exercise plan that combines stretching, cardio, and resistance, adapted to your abilities.
Social	<p>Topic. Physical Barriers to Exercise.</p> <p>Supplies. Simple exercise equipment (for example: a water bottle as a weight).</p> <p>Questions.</p> <p>1. Explain. What does exercise mean to you?</p> <p>Exercise is movement with a goal of AT LEAST 20 minutes, THREE TIMES PER WEEK.</p> <p>Help them understand "the wheel/cycle" and why there are three types of exercise that work together:</p> <ol style="list-style-type: none"> 1. STRETCHING (warm-up): prevents injuries, improves circulation, can reduce pain. 2. AEROBIC (cardio): brisk walking, dancing, swimming, cycling. For people with physical limitations: CHAIR CARDIO. 3. STRENGTH/RESISTANCE: with water bottles, food cans, or small weights. No gym is needed. Exercise should be fun. It should not make you feel sick or completely exhausted. <p>2. Overcoming Barriers. Name one or two reasons why it is difficult for you to exercise.</p> <p>Help determine which exercises offer the fewest barriers for each person.</p> <p>For those who say "my knees/hips hurt": chair cardio is an excellent option.</p> <p>3. Goals/Objectives. Help them develop a SPECIFIC exercise plan.</p> <p>What day? At what time? With whom? (An exercise buddy helps a lot with accountability.)</p> <p>Don't focus on only one type of exercise; combining all three is ideal.</p> <p>"Example: "On Tuesday and Thursday I will walk with my neighbor at 6 p.m. for 20 minutes." Spend 10 to 15 minutes demonstrating neck stretches and/or chair exercises.</p>
Behavior	<p>Topic. Mental Barriers to Exercise.</p> <p>Supplies.</p> <p>Afterward, teach "mind exercises."</p> <p>Questions.</p> <p>1. Explain. How are diabetes and our mind connected?</p> <p>Inactivity is both a mental and physical barrier. Sometimes the mind says "I can't" before the body even tries.</p>

	<p>What type of exercise can you start with and at what level? Help determine which exercises will be part of this week's plan.</p> <p>2. Overcoming Barriers. What mental barriers prevent you from exercising? What exercise-related changes will be part of your daily routine? Reflect: How can your faith community, your values, or your personal relationships support you in being more active? Is there a walking group, dance class, or activity at your church or community that you can take advantage of? Review "mind exercises."</p> <p>3. Goals/Objectives. Implement an exercise routine that overcomes the barriers. "Mind exercise." Be specific when writing down the name of the activity, the time, and the day of the week. Help them determine their exercise goal for this week and follow up next week. My goal is to exercise regularly this week. This week I will _____.</p>
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CHW Weekly questions to patients	<p>Each week:</p> <ol style="list-style-type: none"> How are your blood sugar levels? Any problems getting or taking your medications? Questions or concerns? <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> Have you found someone to exercise with? Have you practiced looking up some of these exercises online? Have you been able to implement exercises at home using these ideas? Have you tried chair cardio? How did it go?
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SEVEN	Depression and Anxiety
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Month's Objective:	By the end of this month, the patient will be able to: identify the symptoms of depression and anxiety and know the resources available to seek help.
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Social	<p>Topic. Physical Barriers to the Prevention and Management of Depression and Anxiety.</p> <p>Supplies. None</p> <p>Questions.</p> <p>1. Explain. What do depression and anxiety mean to you? Explain what depression and anxiety are NOT: they are not weaknesses, lack of spirituality, madness, ignorance, sin, or lack of prayer. They are illnesses, like diabetes or high blood pressure. Many people feel ashamed but ignoring them does not help. Would you be surprised to know that controlling diabetes would help reduce these complications? It is never too late to start!</p> <p>2. Overcoming Barriers. Depression, anxiety, and diabetes are commonly linked to one another and can be a very bad combination. When this happens, people feel sad and it causes the person to worsen by not taking their medications. Reflect: How has your faith, your values, or your community given you strength to seek help when you have needed it?</p> <p>3. Goals/Objectives. Before this gets worse, what can you do? If you think you have depression or anxiety, seek help. DO NOT HIDE IT. Make an appointment with your doctor to talk face to face. Have 2 or 3 friends with whom you can talk openly, at least once a week, and to whom you can be accountable regarding your medications. Take care of yourself. (Exercise is a natural medicine.) Let's make a plan this week. What is your goal? How are you going to meet it? ***** If the patient has had urges, thoughts, or plans to harm themselves or others, they need help NOW. Call 988 (Suicide Prevention Lifeline, in Spanish, available 24/7) or notify the doctor immediately. *****</p>
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Behavior	<p>Topic. Mental Barriers to Caring for Depression and Anxiety.</p> <p>Supplies. Depression Handout</p> <p>Questions.</p> <p>1. Explain. What is depression? Why do you think it is so common with diabetes? Allow dialogue. As we have said, thoughts and actions are connected. For example, the connection between our thoughts (depression or anxiety) and the action (not eating well or taking medications) and the consequence (diabetes complications). It is difficult on our own to overcome the barriers of our thoughts and actions. Seeking help is a sign of strength, not weakness.</p> <p>2. Overcoming Barriers. Reflect: Are you part of a spiritual community? Do you think this is a support for you? How? Is there a group of people who love you or who are important to you?</p> <p>3. Goals/Objectives. Goals and strategies for coping with diabetes complications (start with your thoughts). Taking small steps counts talk to your promoter, request an appointment with the doctor, sleep 8 hours, eat fruits and vegetables, move for 20 minutes a day. My goal is to seek support for my mental health this week. This week I will _____.</p>
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	***** If anyone mentions having suicidal attempts or urges, report it to the doctor immediately. Crisis number: 988 (call or text, in English and Spanish). *****
CHW Weekly questions to patients	<p>Each week:</p> <ol style="list-style-type: none"> 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> - How do you relate to the topics of depression and anxiety? - How do you handle moments of depression and anxiety in your daily life? - Have you considered talking with your doctor about your emotions at your next appointment?

EIGHT	How to Involve Family and Friends in Your Health
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Month's Objective:	By the end of this month, the patient will be able to: identify at least one support person and actively involve them in your health care.
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Social	<p>Topic. Physical Barriers to Involving Family and Friends in Health Care.</p> <p>Supplies. None.</p> <p>Questions.</p> <ol style="list-style-type: none"> 1. Explain. How can friends and family help you with your health? Think about who is trustworthy and who truly cares about you. These are good people to include. Some people may not support your goals; you do not have to include these people. You can have an accountability partner: a person who helps you stay on the right path. Remember: it is about support, not pressure. 2. Overcoming Barriers. There are several types of support that family and friends can provide: Emotional support: being close to people who care about you helps reduce stress. Practical support: family can help you plan meals, remember medications, and exercise. Motivation: loved ones can encourage you to follow your treatment and healthy habits. Guidance: family members who understand your illness can help you follow your doctor's instructions. Reflect: Who is the trusted person in your life with whom you can share your health goals? How could you involve them this week? 3. Goals/Objectives. Encourage your family to eat healthier: fill the plate with fruits and vegetables, control portions, limit sugar and junk food. Exercise as a family: fun activities like playing sports, riding bikes, taking walks. What if your family does not support you? Seek support at your church, from friends, or in the community. My goal is to involve a trusted person in my health care this week. This week I will _____.
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Behavior	<p>Topic. Mental Barriers to Involving Family: Spirituality and Health Are Connected.</p> <p>Supplies. None.</p> <p>Questions.</p> <ol style="list-style-type: none"> 1. Explain. Did you know that spirituality and health are connected? Studies show that people who participate in spiritual or faith practices often have: less stress, better mental health, and sometimes better control of chronic illnesses like diabetes. Believing in something greater than oneself, praying, or attending church can give you strength and hope. Combining the support of people and your faith can make it easier to reach your health goals. 2. Overcoming Barriers. How set goals with the support of others? Setting goals is essential. Not reaching them immediately does not mean failure; improving is a daily process. Goals should be: specific, measurable, and realistic. Good communication: do not assume people understand; explain clearly how you feel. 3. Goals/Objectives. Reflect: What are your values and beliefs that give you strength to involve your family in your health care? How can your faith community or your personal relationships support you in reaching your health goals? My goal is to strengthen my support network this week. This week I will _____.
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CHW Weekly questions to patients.	<p>Each week:</p> <ol style="list-style-type: none"> 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> - Do you have an accountability partner for your health goals? - Have you been able to involve your family in your eating or exercise habits? - What barriers do you have to ask for help from your family or friends?
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NINE	Connect with the Care You Need
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Month's	By the end of this month, the patient will be able to: connect with at least one community resource that will help them
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Objective:	access medical care, medications, or transportation.
Social	<p>Topic. Physical Barriers to Connecting to Medical Care and Community Resources. Supplies. None. Questions. 1. Explain. The promoter can help you CONNECT in these key areas: HEALTH INSURANCE / CLINIC: Many people do not know they qualify. Your promoter can help you apply for Medicaid or CHIP, find a nearby FQHC, enroll in sliding-scale fees, fill out forms. KEY POINT: You do NOT need insurance to be seen at many community clinics. MEDICATIONS AND SUPPLIES: Your promoter can help you find pharmacies with \$4 medications, apply for patient assistance programs (PAP), and obtain free glucometers and test strips. PREVENTIVE CHECKUPS: Flu shot (often free at pharmacies). Dilated eye exams, every year. Dental care: gum disease worsens blood sugar levels. TRANSPORTATION: Options: Medicaid Transportation (NEMT, FREE for beneficiaries), volunteer church drivers, community van programs, rideshare assistance. Reflect: What community resources do you already know about? Is there someone in your life who has helped you connect with health resources? 2. Overcoming Barriers. In which of these areas do you need the most help connecting? Allow participants to identify the areas where they have the most difficulty. 3. Goals/Objectives. Set a specific objective TODAY. Example: "This week I will call my promoter to help me get transportation to my next appointment." "I will ask about low-cost medication programs this week." "I will make an appointment for my eye exam this month."</p>
Behavior	<p>Topic. Mental Barriers to Accessing Care: Depression and Health Are Connected. Supplies. None. Questions. 1. Explain. Depression is twice as common in people with diabetes than in the general population. It is a medical fact, not a personal weakness. The stress of managing a chronic illness, economic pressures, and social isolation negatively affect mental health. This creates a vicious cycle: depression worsens diabetes and diabetes worsens depression. Symptoms to watch for: feeling sad, hopeless, or empty for more than two weeks; being too tired or unmotivated to care for yourself; changes in sleep or appetite. 2. Overcoming Barriers. COMMUNITY SUPPORT: Churches and religious communities can be powerful allies in health matters: transportation, encouragement, mutual accountability. Consider creating a diabetes support group at your church. FAMILY AND FRIENDS: Family members can encourage you to adopt better habits. Invite them to learn with you. SUPPORT GROUPS: Many clinics and community centers offer free support groups. Reflect: Who supports you in your life to manage your health? What prevents you from asking for help? 3. Goals/Objectives. Caring for your mind IS caring for your diabetes. You do not have to feel this way. Help is available. Your promoter can listen to you without judging, connect you with free counseling services, and work with the clinic team to address mental health alongside diabetes. My goal is to connect with at least one community resource this month. This week I will _____.</p>
CHW Weekly questions to patients	<p>Each week: 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - Do you have health insurance? If not, do you know if you qualify for Medicaid or another program? - Have you had problems getting or paying for your medications? - Have you missed any medical appointments due to lack of transportation? - Have you had your eye exam this year? Have you visited the dentist recently? - Have you felt sad, overwhelmed, or unmotivated to take care of your health?</p>

TEN	Tobacco and Diabetes
Month's Objective:	By the end of this month, the patient will be able to: recognize the effects of tobacco on diabetes and develop a plan to reduce or eliminate its use.
Social	<p>Topic. Physical Barriers to Avoiding Tobacco. Supplies. Resources on Quitting Smoking and Respiratory Problems Questions. 1. Explain. What are the complications of smoking among patients with diabetes? Help the patient understand that all types of tobacco are harmful, how it damages health, and why it is important for their health.</p>

	<p>2. Overcoming Barriers. List 1-2 reasons why quitting tobacco is difficult for you. Help the patient understand what is stopping them from quitting that habit. Reflect: What people, values, or beliefs give you strength to make difficult changes in your life, such as quitting tobacco?</p> <p>3. Goals/Objectives. Help develop a plan to quit tobacco by naming 1-2 ways for the person to learn how to ask for help or seek medical assistance and how to find friends who will hold them accountable for their habit. Help the patient understand why being held accountable is important and why it works.</p>
Behavior	<p>Topic. Mental Barriers to Avoiding Tobacco. Supplies. List of Local Resources for Quitting Smoking Questions.</p> <p>1. Explain. How is tobacco connected to diabetes management? Help the patient understand that smoking damages blood vessels, the same ones that diabetes already has at risk.</p> <p>2. Overcoming Barriers: What mental barriers prevent you from quitting these habits? Help the patient identify the situations or emotions that trigger the urge to smoke.</p> <p>3. Goals/Objectives. Help the patient develop a plan to quit tobacco by recognizing these emotional triggers. Reflect: What people, values, or beliefs give you strength to make difficult changes in your life? Look for community support resources (cessation groups, state programs, etc.). My goal is to make progress in quitting tobacco this week. This week I will _____.</p>
CHW Weekly questions to patients	<p>Each week:</p> <ol style="list-style-type: none"> How are your blood sugar levels? Any problems getting or taking your medications? Questions or concerns? <p>Others throughout the month at the discretion of the CHW/Promoter</p> <ul style="list-style-type: none"> Have you assessed whether you or someone in your family needs help with this topic? Can we help you find community resources near your area? Have you tried to reduce the number of cigarettes or another form of tobacco this week?

ELEVEN	Alcohol and Diabetes
Month's Objective:	By the end of this month, the patient will be able to: recognize the effects of alcohol on diabetes and develop a plan to reduce or eliminate its use.
Social	<p>Topic. Physical Barriers to Avoiding Alcohol Abuse. Supplies. Local information from AA, Al-Anon. Questions.</p> <p>1. Explain. What are the complications of alcohol abuse in patients with diabetes? Help the patient understand how alcohol abuse damages family relationships and health; why it is important for their health.</p> <p>2. Overcoming Barriers. List 1-2 reasons why quitting alcohol is difficult for you. Help the patient understand what is stopping them from quitting that habit. Reflect: What role does your family and your community play in your process of change? How can they support you in quitting alcohol?</p> <p>3. Goals/Objectives. Help develop a plan to quit alcohol by naming 1-2 ways for the person to learn how to ask for help or seek medical assistance and how to find friends who will hold them accountable for their habit. Help the patient understand why being held accountable is important and why it works.</p>
Behavior	<p>Topic. Mental Barriers to Avoiding Alcohol Abuse. Supplies. Guide to Alcohol Consumption. Questions.</p> <p>1. Explain. The general overview of alcohol in relation to diabetes management... How are they connected? Help the patient understand that alcohol is harmful and how alcohol abuse damages relationships, and why quitting these habits is important for their family life.</p> <p>2. Overcoming Barriers. What mental barriers prevent you from quitting these habits? Help the patient identify the things that trigger or push them toward these unhealthy behaviors.</p> <p>3. Goals/Objectives. Help the patient develop a plan to quit alcohol by recognizing these emotional triggers. Reflect: What role do your community, your values, and your beliefs play in your process of change? Look for community support resources (support groups, community resources). My goal is to reduce or eliminate alcohol consumption this week. This week I will _____.</p>
CHW	Each week:

Weekly questions to patients.	1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - Have you assessed whether you or someone in your family needs help with this topic? - Can we help you find community resources near your area? - Have you talked with a trusted person about your alcohol consumption this week?
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TWELVE	Sleep Well, Live Well: Stress, Sleep, and Diabetes
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Month's Objective:	By the end of this month, the patient will be able to: identify the connection between stress, sleep, and diabetes, and practice at least one technique to break the cycle.
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Social	<p>Topic. Physical Barriers to Managing Stress and Improving Sleep. Supplies. None. Questions. 1. Explain. How many nights last week did you sleep 6 hours or less? Most adults need 7 to 9 hours of quality sleep per night. More than 1 in 3 American adults do not get enough sleep regularly. Chronic sleep deprivation is an important risk factor for type 2 diabetes. The TRIANGLE of stress-sleep-diabetes: stress makes sleep difficult; poor sleep raises stress hormones; both together raise blood sugar and reduce the effectiveness of insulin.</p> <p>2. Overcoming Barriers. Practical and free strategies: Set a sleep schedule: go to bed and wake up at the same time every day, including weekends. Turn off screens (phone, television) at least 30 minutes before sleeping. Blue light blocks melatonin production. 4-7-8 breathing technique: inhale 4 seconds, hold 7 seconds, exhale 8 seconds. Activates the relaxation response in less than 2 minutes. Move daily: even 10 to 15 minutes of walking reduces cortisol and improves sleep quality that same night. Avoid caffeine after 2 p.m. and alcohol. Both disrupt deep sleep stages. Reflect: How can your faith, your values, or your community help you better manage stress and care for your sleep?</p> <p>3. Goals/Objectives. A small step tonight can start to break the cycle. This week: try the 4-7-8 breathing technique before sleeping. This week: set a fixed bedtime and turn off the screen 30 minutes before.</p>
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Behavior	<p>Topic. Mental Barriers to Managing Stress: Breaking the Cycle. Supplies. Stress Handout Questions. 1. Explain. What does stress do to your body? When we experience stress, the body releases cortisol, a hormone that tells the liver to release sugar into the blood to provide quick energy. Over time, this causes cells to become resistant to insulin, the first step toward type 2 diabetes. People with high chronic stress have up to a 45% greater risk of developing type 2 diabetes.</p> <p>2. Overcoming Barriers. Higher-risk groups: Hispanic/Latino communities: 2 times more likely to develop type 2 diabetes; they frequently face greater chronic stress due to economic factors. Night shift workers, caregivers, people with economic stress; all have greater risk. Reflect: What are the main sources of stress in your life? How does stress affect your diabetes management? Reflect: What role does your faith, your values, or your spiritual community play in how you manage stress? Community and faith support are proven protective factors for health, especially in Latino communities.</p> <p>3. Goals/Objectives. Strategies to break the cycle: You do not have to fix everything at once. Breaking any link in the chain starts to slow the entire cycle. Seek support: in your family, your church, your community. Isolation worsens both stress and diabetes. How would you like your CHW/Promoter to help you manage stress and improve your sleep? My goal is to improve my sleep and reduce stress this week. This week I will _____.</p>
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CHW Weekly questions to patients	<p>Each week: 1. How are your blood sugar levels? 2. Any problems getting or taking your medications? 3. Questions or concerns? Others throughout the month at the discretion of the CHW/Promoter - How many hours do you sleep per night? Do you feel rested when you wake up? - What are the main sources of stress in your life at this time? - Have you tried any techniques to manage stress or improve your sleep? - What is your next step to better care for your sleep and reduce stress?</p>
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