

Diabetes

Community Action Coalition (REACH 2010)



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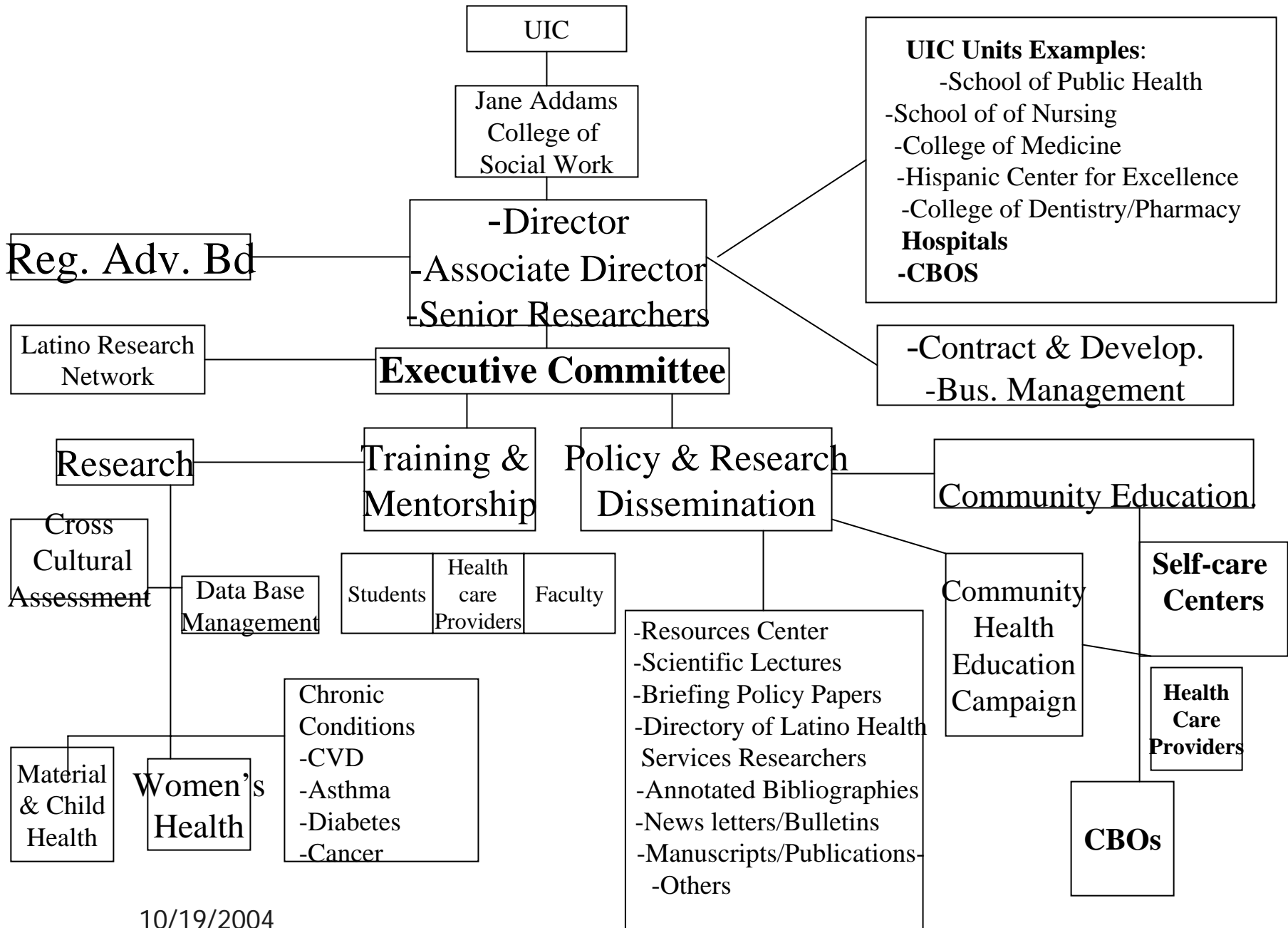
Presentation at NIH NHLB-Charting New Directions for CVD Prevention &
control in Las Americas, October 14, 2004



Presentation Objectives

- Describe the Chicago Southeast Diabetes Community Action Coalition (CSDCAC) as a model of integrated community health approaches

Organizational Chart





Examples of Current Research & Training Programs

Diabetes

- REACH 2010
- Diabetes & Eye Care Project-NEI
- Diabetes Health Promoters training-UPR
- PRDH- San German Demonstration Project
- Others

Cancer

(Redes En Accion) Multi-site

Tobacco

National Partners (multi-site studies)

- Baylor College
- Brooklyn Hosp. Center- NY
- Univ. of Texas S. Antonio
- San Diego State University

Partners

- Latinos for Healthy Il.
- LCAT

Regional Partners

Wisconsin UMOS	MEU
Indiana Latino Institute	Minnesota Hispanic Netwk
Nebraska DHHS	Ohio <i>Adelante</i>
	Kansas CIS

Illinois

CDPH	IDPH	Others
UIC		



Racial and Ethnic Approaches to Community Health

(REACH) 2010



REACH 2010: The US DHHS Six Health priority areas

- **Infant Mortality**
- **Breast and Cervical Cancer
Cardiovascular Diseases**
- **Diabetes**
- **HIV/AIDS**
- **Child and/or Adult Immunizations**

Source: CDC:Racial & Ethnic Approaches to Community Health (REACH 2010)
Demonstration Projects

REACH 2010

Demonstration Projects...



- **Goals:**
 - **To eliminate disparities through:**
 - **Community Capacity-building**
 - **Change among changed-agent**
 - **Target Actions**
 - **System change**

Source: CDC: REACH 2010 Demonstration Projects

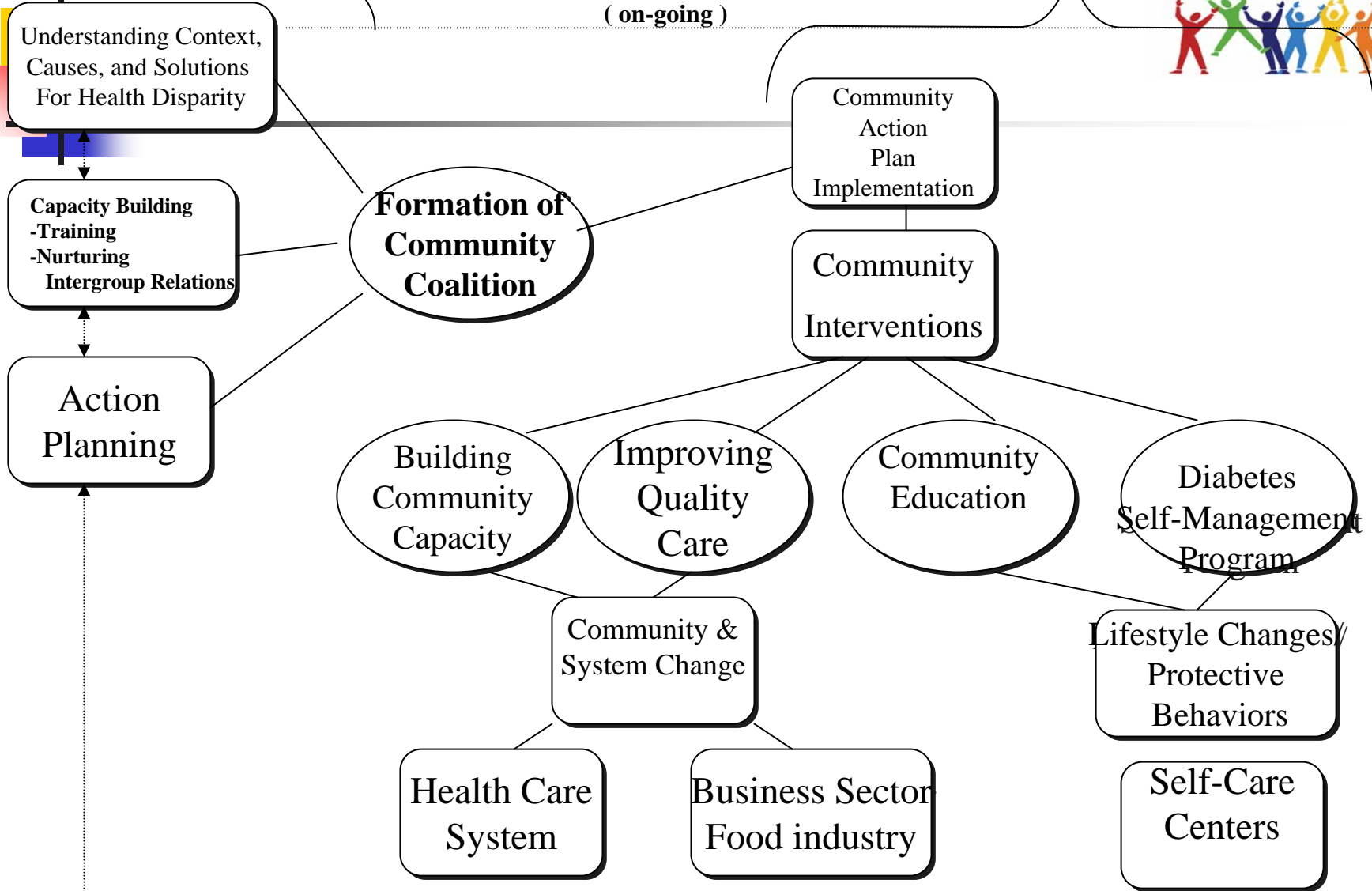
Overview of Activities



Phase I

Phase II

(on-going)





ECOLOGICAL MODEL OF IMPACT



The Individual
The Family
The
Community/Neighborhood
Health Care Delivery System
Other Macro System



CSDCAC Goals

- Reduce diabetes mortality, associated complications, disabilities and cost among residents.
- Delay the onset of diabetes among those at risk for developing diabetes.
- Promote the highest quality of care.
- Impact health and social services, schools and the food industry

Chicago REACH 2010 diabetes Project



- Adopted the concept of empowerment as:
 - a philosophy
 - A process
 - Outcomes
- Community engagement is key
- Uses Community Participatory Action Research and Evaluation Approaches
- Engages in infrastructure-building

Chicago REACH 2010 diabetes Project.....



- Promote strong partnerships among health and human services organizations, including blocks clubs, churches, businesses, etc
- Believe that there are more similarities than differences between racial and ethnic minorities in the U.S.
- Aimed at identifying best practices and engaging in model transfer

Chicago REACH 2010 diabetes Project.....



- Train and use community health promoters in diverse roles:
 - Data collectors
 - Community organizers
 - Outreach workers
 - Diabetes educators
 - Case managers
 - Policy/advocacy work
 - Managers of the self-care centers



Key Coalition Partners

- Healthcare Consortium of IL
- IDHS-Diabetes Control Program
- *Centro Comunitario Juan Diego*
- Hispanic Nurses Association
- Advocate Trinity Hospital
- Jackson Park Hospital
- South Shore Hospital
- *We Care* Dental
- Chicago Family Health Center
- IL Black Nurses Association
- IL African American Dietitians Association
- African American Network of Churches
- Local Chambers of Commerce



Multiple Partnerships

City, state and federal & community-based organizations

Examples:

- US DHHS Office of Minority Health
- US DHHS Region 5 Center for Medicaid and Medicare
- FDA Office of Women's Health
- American Diabetes Association
- IL Foundation for Quality Health Care
- Others





A United Coalition!

... with over 50 members attending monthly meetings.





Coalition Meeting





Family Involvement





Coalition Activities





Quality of Care Committee



Community Education Committee





Research Methodology: Community Participatory Action Research

Participatory Research (cont)



- Involves ordinary people in the research and evaluation process
Creates consciousness-raising among community residents
- This leads to a state of readiness, that can be enhanced through leadership development

Participatory Research (cont)



- Residents and providers can become effective agents of social change
- It is an education process for the investigator and for the community residents



Differences

Mainstream

- Rigid
- No or little community participation
- Research team is in control

Action Research

- Flexible
- Considerable amount of community participation
- There is shared governance with community leaders & partners



Differences

Mainstream

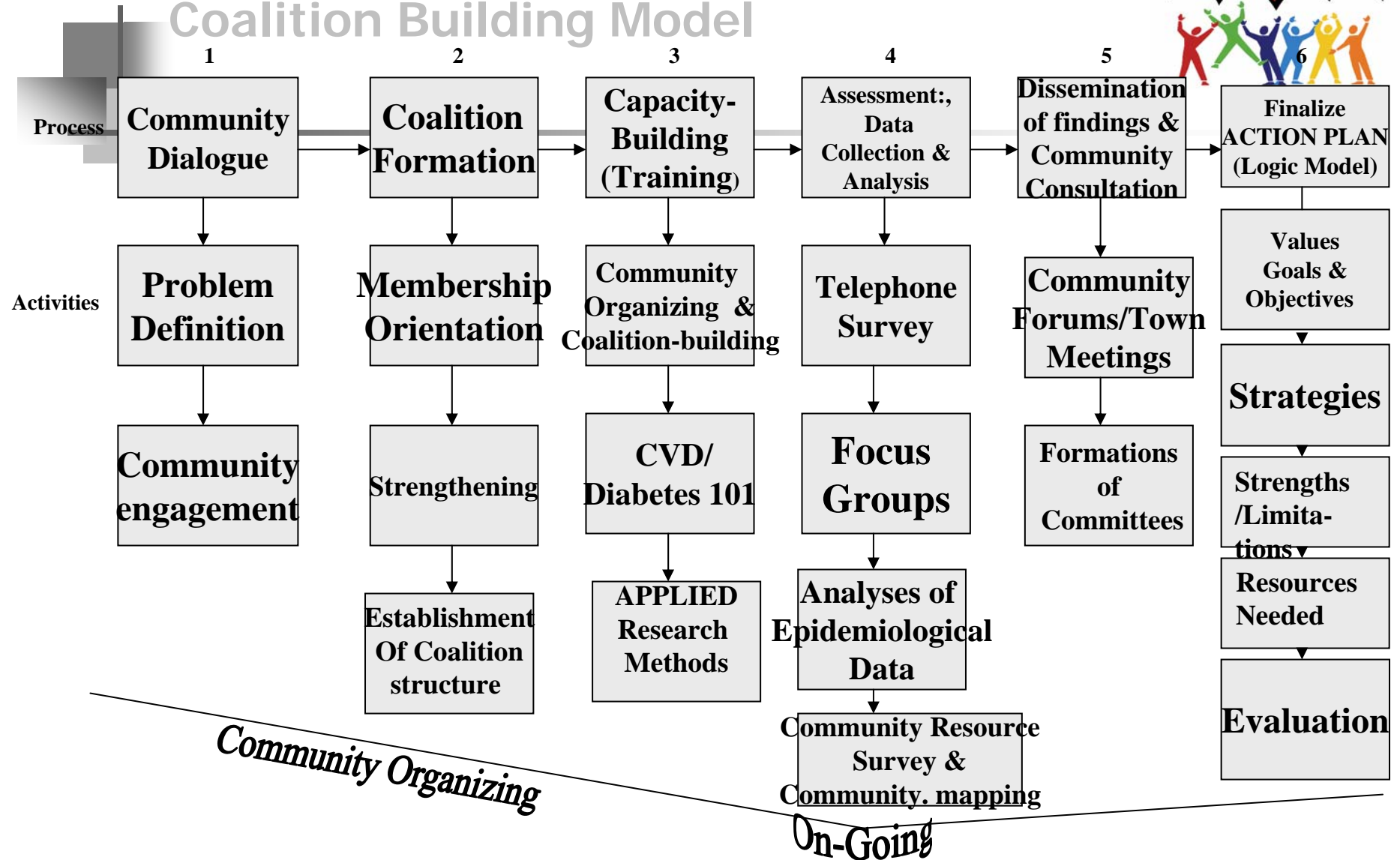
- The project ends when data is collected and analyzed
- There is no partnership or Unequal partnership with community

Action Research

- The real action start when data is collected and analyzed
- Share financial resources Provides jobs,TA and training.

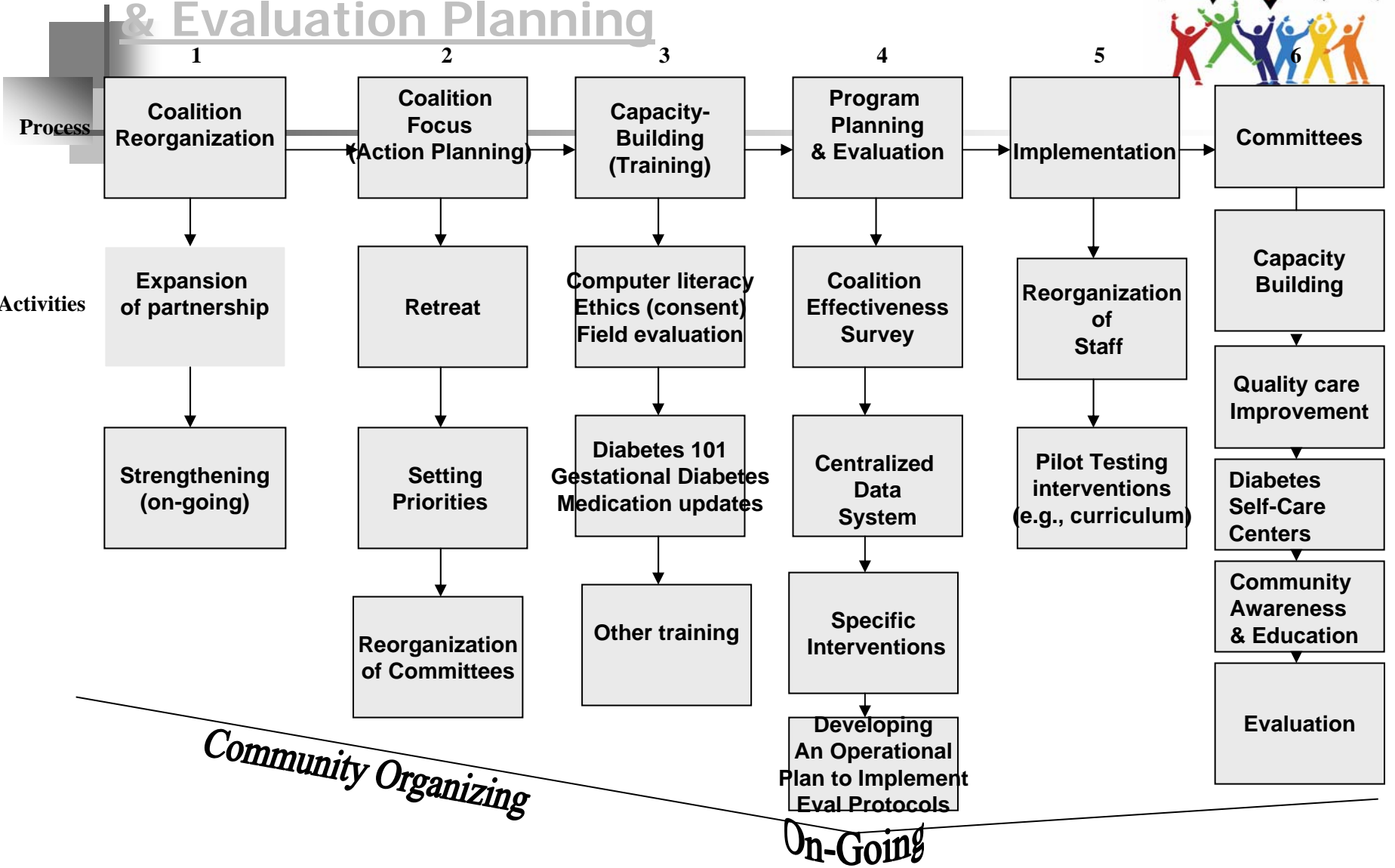
UIC – CSDCAC

Phase I: Participatory Action Research & Coalition Building Model

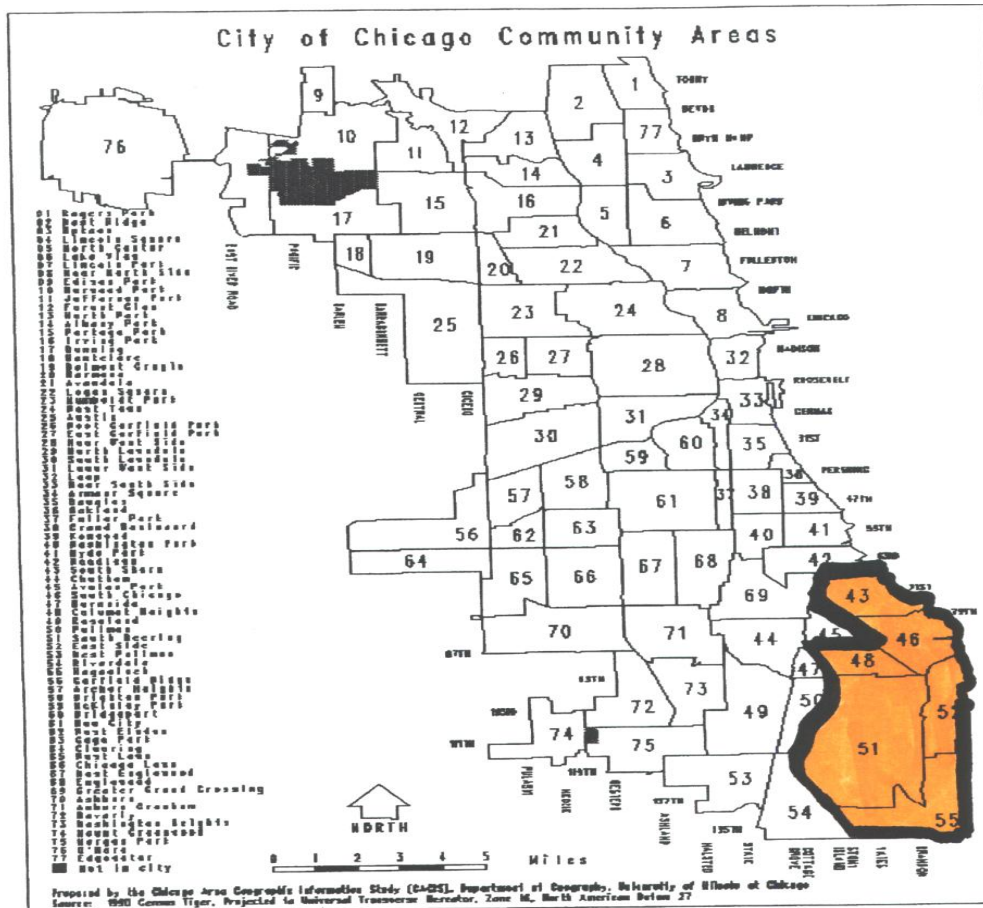


UIC – CSDCAC

Phase II: Participatory Intervention & Evaluation Planning



City of Chicago: Community Target Map





Target communities:

- South Shore
- South Chicago
- South Deering
- Calumet Heights
- Hegewish
- East Side

These communities have been experiencing...



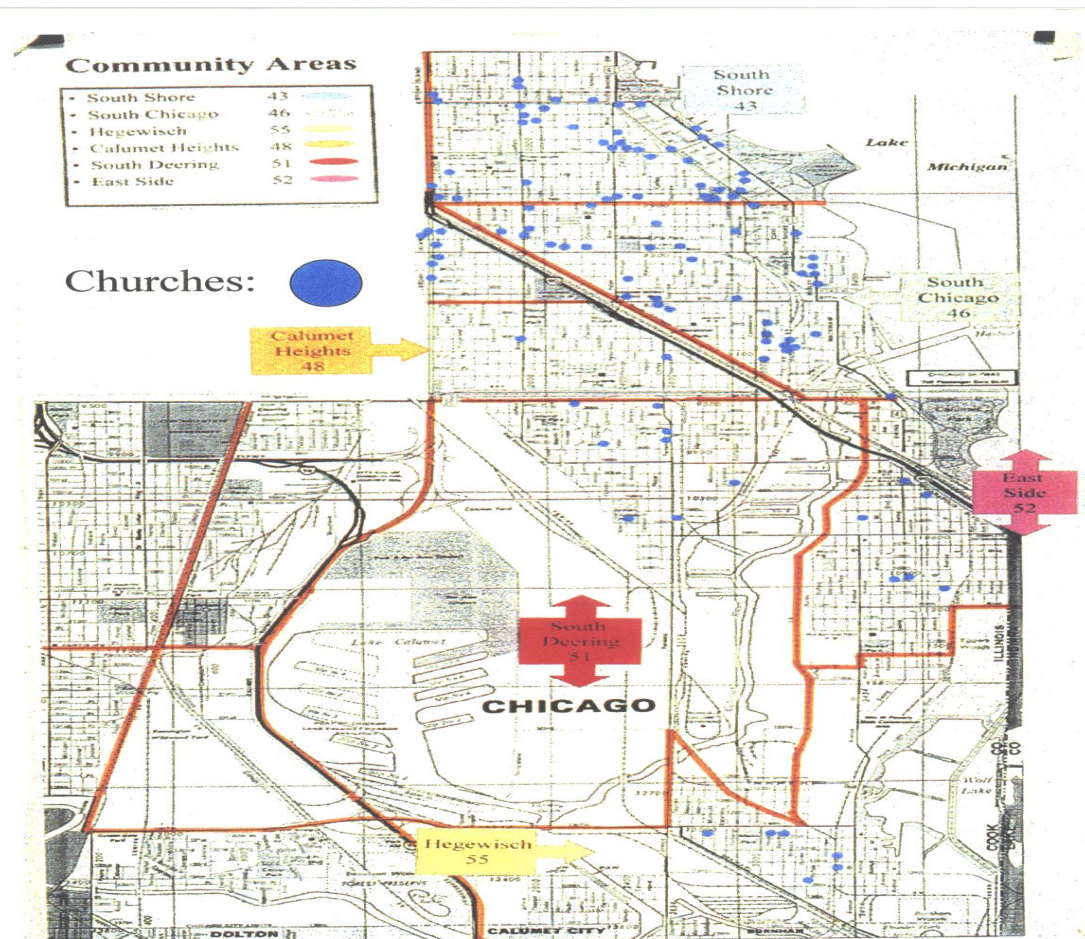
- High unemployment
- Low income
- Low education
- Poor Health
 - × Cancer
 - × Cardiovascular
 - × HIV/AIDS & STDs
 - × Infant mortality
 - × Environmental pollution

REACH 2010: Phase I: Assessment

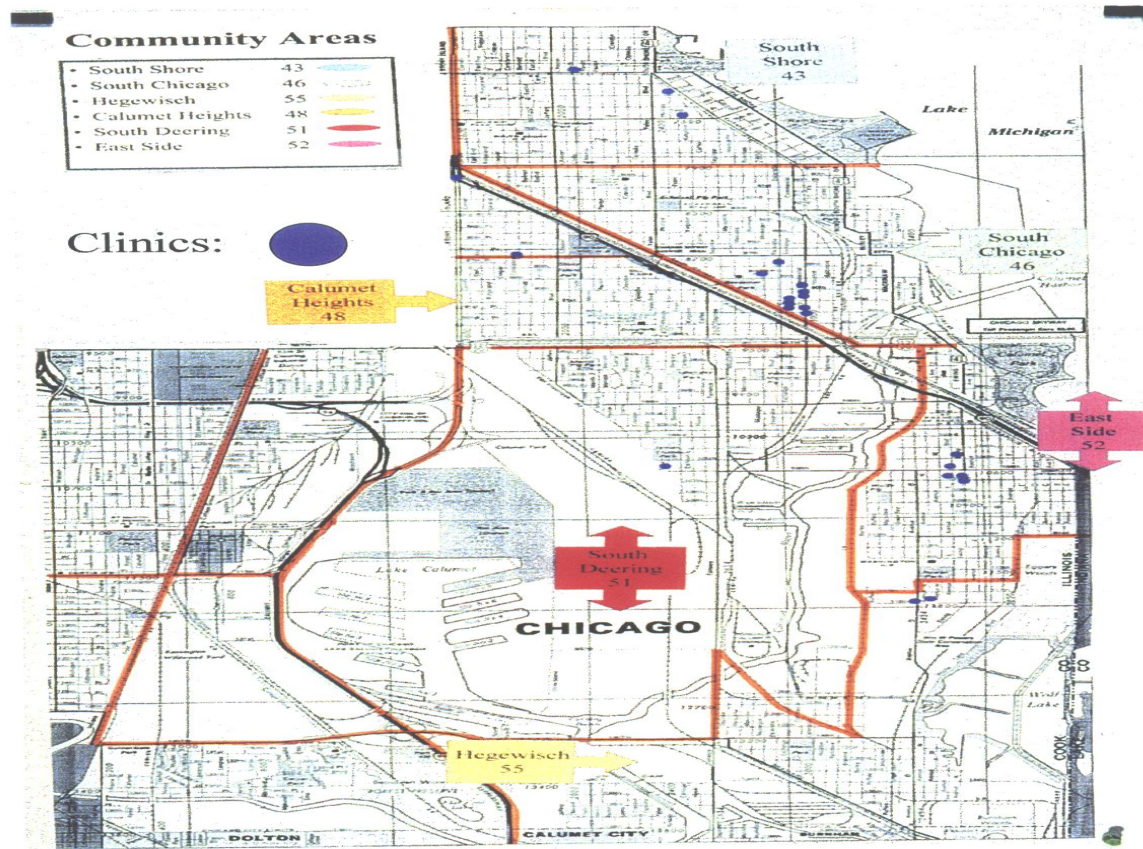


- Analyses of epidemiological data
 - Community Mapping
 - 12 Focus Groups with:
 - Health care providers
 - People at risks for Diabetes
 - People with Diabetes
 - BRFSS telephone survey based on a probability sample. N=400 (pre-assessment/baseline)

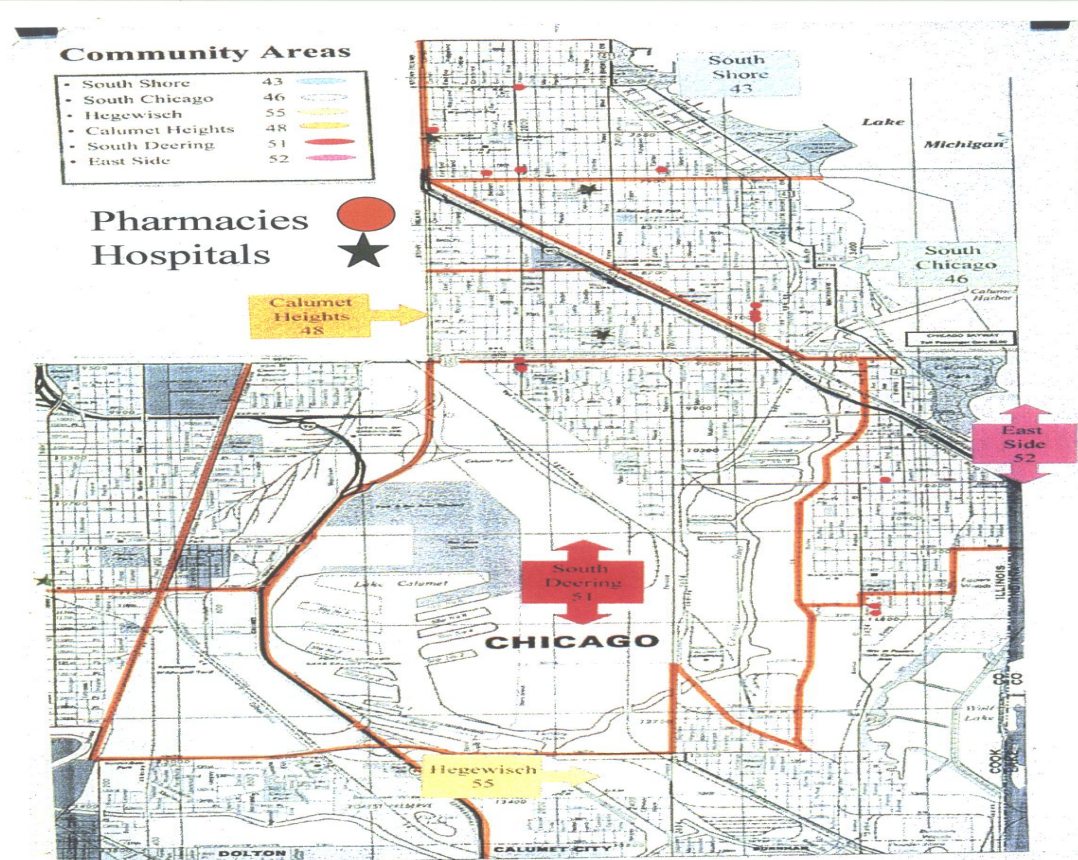
Community Mapping: Churches



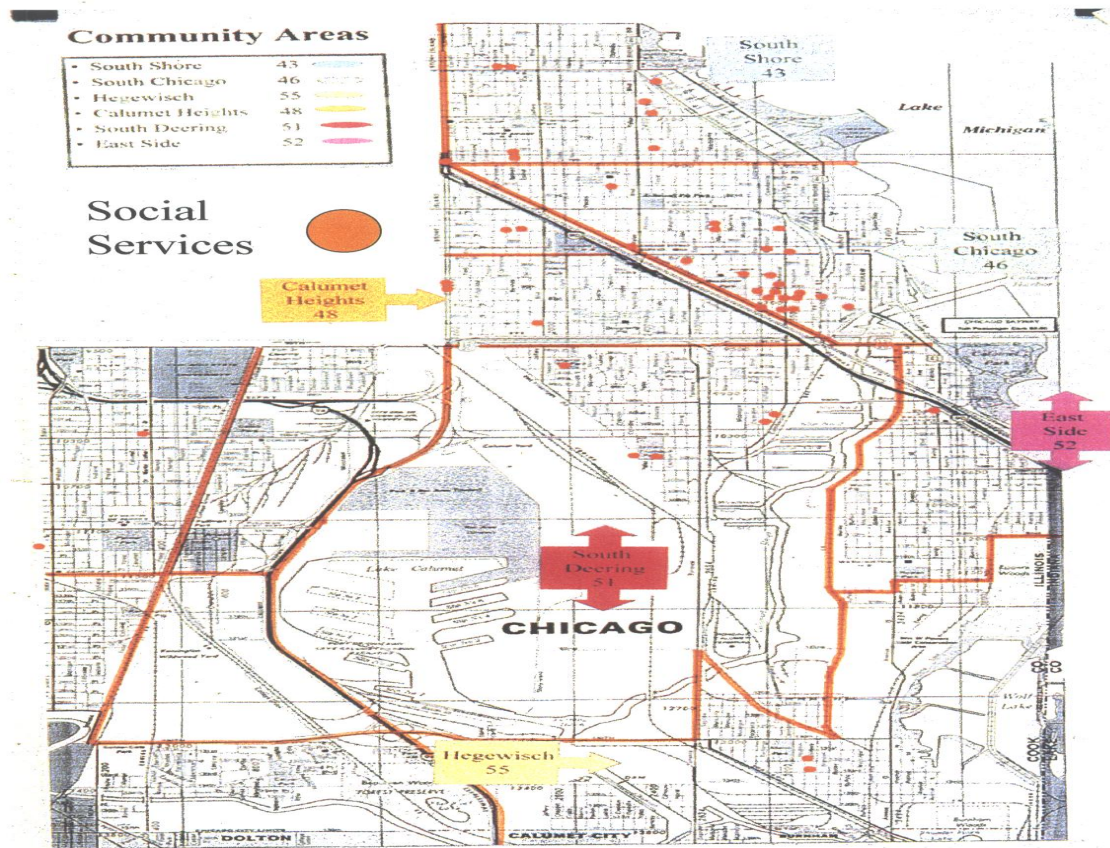
Community Mapping: Clinics



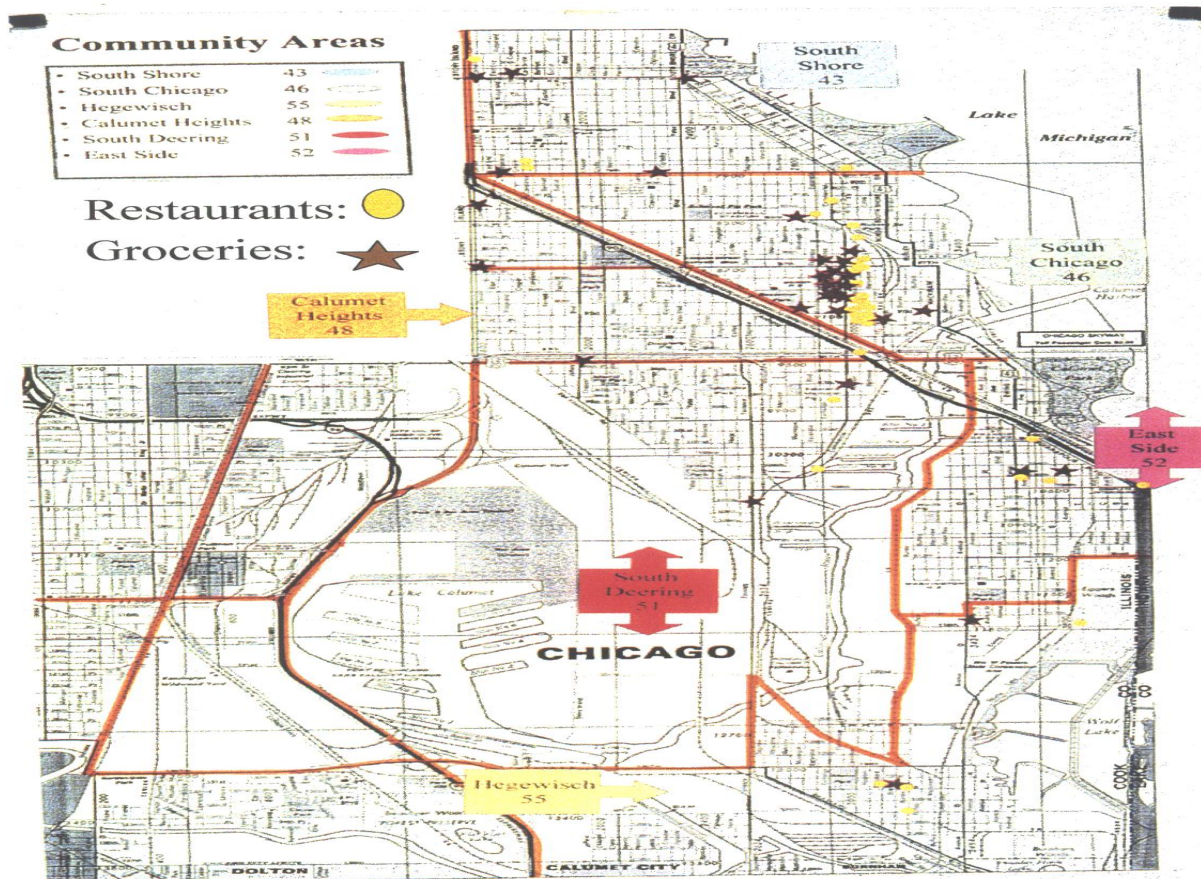
Community Mapping: Pharmacies & Hospitals



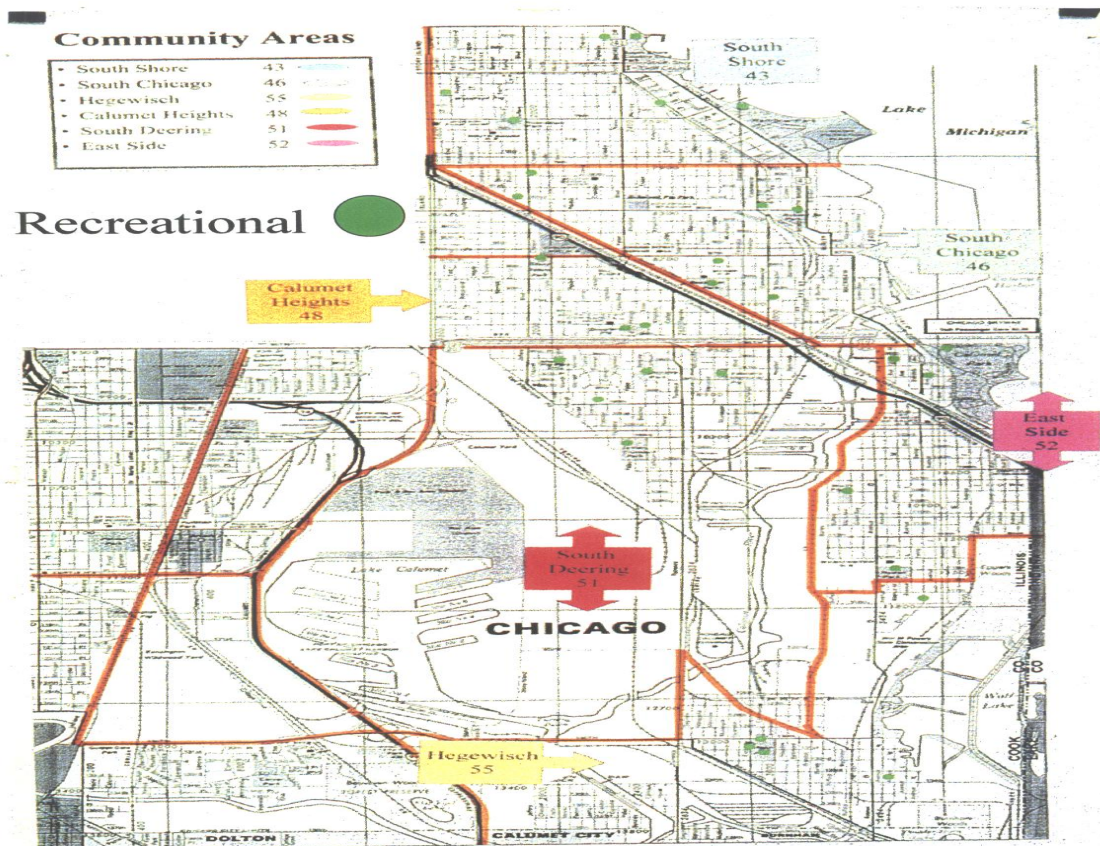
Community Mapping: Social Services



Community Mapping: Restaurants & Groceries



Community Mapping: Recreational Facilities





Disparities in:

- Diabetes
- Gestational diabetes
- Complications (eg., amputations)
- Lack of health insurance coverage
- Poverty and Food Insufficiency
- No or limited physical activity
- Smoking behavior
- Overweight and obesity
- People eating out of the homes 5 days a week
- Poor quality of diabetes care
- Low diabetes knowledge
- High use of ER and hospitalization

Interventions: System Change & Change among Changed Agents



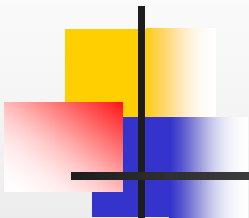
- Work with hospitals to establish Centralized Data System for pt tracking
- Linkage development (Memos of Agreement for services & referrals)
- Establishment of Diabetes care centers in Hospitals
- CME education for physicians & other prof. on diabetes clinical guidelines
- Diabetes classes in hospitals with HP
- Chambers of Commerce
 - Working with groceries to change stocking practices
 - Working with restaurants to have menus options
 - Promoting community healthy eating

Example of Capacity Building and target action for Life Style Changes and Protective Behaviors

Chicago Southeast Diabetes Community Action Coalition (CSDCAC)



UIC College of Pharmacy
 UIC College of Medicine
 UIC College of Allied Health Professionals
 UIC School of Public Health
 UIC College of Nursing
 Chicago State University
 City Colleges of Chicago
 Xavier College



- Neighborhood block clubs
- Churches
- Hospitals
- Clinics
- Chambers of Commerce

REACH 2010

Diabetes Self-Care Centers

Research & Evaluation

Specialty Screening

Policy

Information & Referral

Home Health Care

Psycho-Social & Support Interventions

HP Training

Community Health Promotions

- Eye
- Foot
- Nutrition
- Dental
- Others

Incentive Program
 Gift Shop

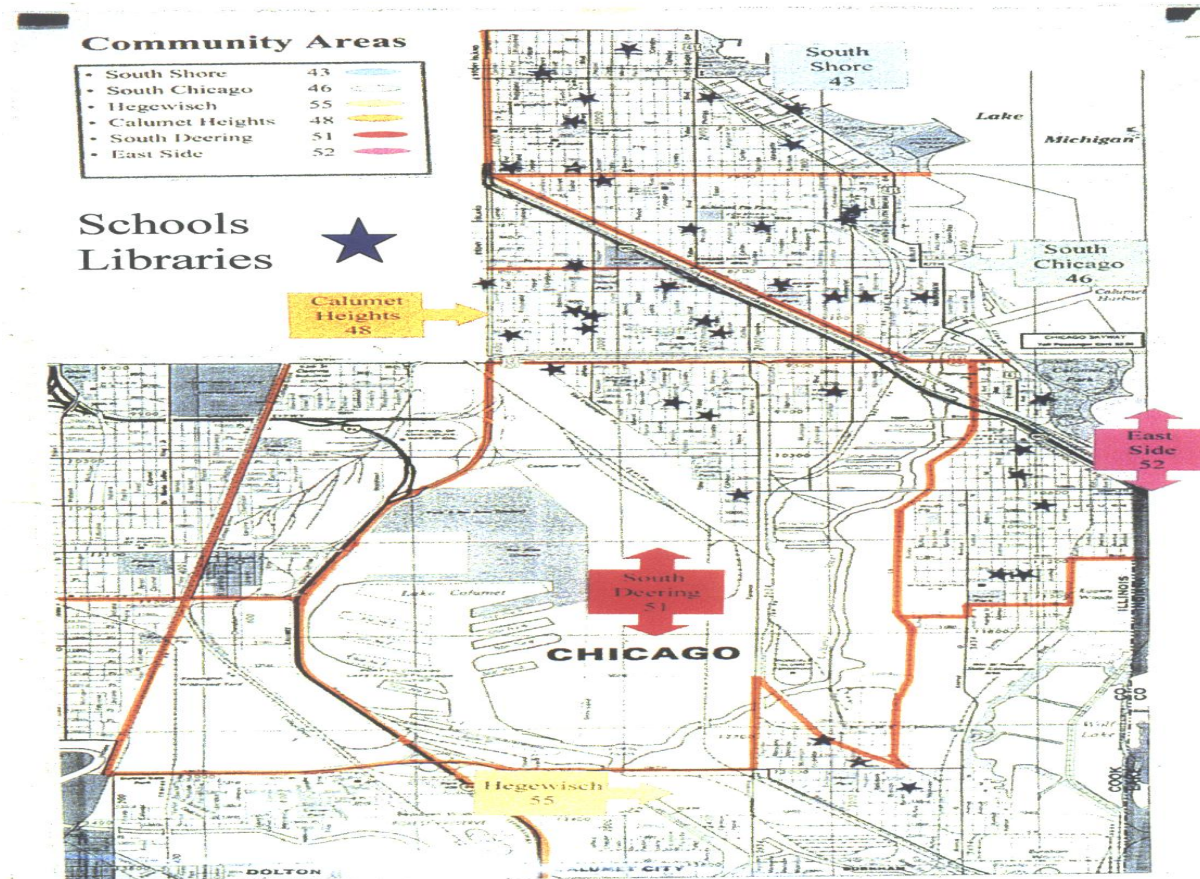
IDCP Telephone Hotline

Financial Assessment for Medicaid / Medicare

Diabetes Health Screenin Fairs
 Nutrition
 Diabetes Educ Home Remedies
 Home Blood Glucose

Insurance Information

Community Mapping: Schools & Libraries



Community Diabetes Self Care Center Grand Opening October 2002



Establishment of 3 Self care Centers



- They are managed by Health Promoters with support from professionals
- They are “Learning Centers”
 - Students from Multiple disciplines, volunteers and health promoters obtain diversity of training and have opportunities to help others
- They promote public health approaches to medical students
- They have diversity of programs and activities

The Self care Centers

Aimed at:



- Providing community services while we document best practices
- Increasing minority interest in
 - health profession careers
 - community health research
- Follows a holistic view of health integrating the physical, mental, emotional and spiritual
 - Address clients spiritual needs and make referrals to local churches

Diabetes Self-care Centers Activities...



- Diabetes education using the Diabetes Empowerment and Education curriculum-CDC funded
- Cardiovascular program: *Dulce Corazon*: physical activity & healthy eating with a focus on Latino women, IDPH
- Hypertension and meditation: Partnership with Maharishi University-College of Medicine
- Eye Screening, II Assoc for the Prevention of Blindness

Self care Centers: Programs...



- Diabetes and Eye health program: National Eye Institute
- Cancer Awareness and Education: *Redes En Accion* Cancer Network, a partnership with Baylor College of Medicine.
- Support groups
 - For cancer
 - Diabetes
 - Textile classes

Self care Centers Activities...



- Policy work
 - Voting Registration
 - Policy activities: Supported Cook County Cigarette tax increase
 - Training in Policy Practice
- Interpreter services
- Emergency food



Targeted Action

- **Textile Workshop:**
Lessons Learned:
When designing support groups for persons with chronic disease, the intrinsic benefits of artistic expression should not be overlooked.





Targeted Action

Aerobics classes at the East Side Community Center

- Held Mondays, Wednesdays and Fridays, 9:00-10:00 a.m.
- Participants sign consent forms.
- Jane Addams Park: 7:00 to 8:00 a.m
- Mann Park: Swimming Classes





Targeted Action.....

George Washington Elementary School



YOUNG AUTHOR REGIONAL WINNERS— MARY WOZNIAK and SARA LUCK-CORMAN were winners in the AREA 18 YOUNG AUTHOR'S COMPETITION. They will be invited to the Area 18 Award's Presentation.

PERFECT ATTENDANCE FOR MARCH



Clarissa Rodriguez, 203, Cesar Pulido, 214 and Michelle Campos, 307, were our March Perfect Attendance Winners. They each selected a prize from the PFA nomination box.

BOOK REPORT WINNERS FOR MARCH



Book Report Winners for March were Daniel Kerber, room 102, Cody Oskanec, room 107, and Jodi Krupovich, room 301. They are shown with the prizes they selected from the PFA Prize Box. You need to be here and read to be successful in school and our PFA supports both achievements.



The Knights of Columbus Free Throw Championship has several GWES entries. Lucy Canales, Alex Zavala, Jose Chavez, Jael and Alex Villa, and Vitor are shown with their certificates.



This Parent Group has been meeting regularly for their Nutrition Classes. We have other parent classes scheduled on 4-21-04. Come on out at 9:30.

Page 2

KINDERGARTEN REGISTRATION will be taken starting March 8, 2005. Preschool students need a new registration. JESSIE GILBRKIN 312-409-5621 offers kid 7-14 their FIRST PLANE RIDE absolutely free at the Gary Airport. Call ahead on the line. Cruise Xmas Photo will need to accompanied by a parent or guardian.

*Picture from nutrition class in
school newsletter*



Targeted Action – Health Fairs



Participants at Sept. 26th Ewing Community Center Health Fair

Community Awareness and Education



- Car Sticker: *We are fighting Diabetes, How about you?*
- Stickers for community agencies and businesses
 - *This is a recognized Friendly Diabetes Establishment by the Chicago Southeast Diabetes Community Action Coalition*




Diabetes Training Brochure

University of Illinois at Chicago

**PROGRAMA DE
CAPACITACION Y
EDUCACION SOBRE LA
DIABETES
(DEEP)**

English



Spanish

UN CURRÍCULO DE ENTRENAMIENTO
PARA LA AUTOVIGILANCIA DE LA
DIABETES TIPO 2

Desarrollado bajo el patrocinio de CDC
Division of Diabetes Translation

Midwest Latino Health Research, Training
& Policy Center - Jane Addams College of
Social Work



CSDCAC Brochure

CHICAGO SOUTHEAST
DIABETES COMMUNITY
ACTION COALITION

Racial & Ethnic
Approaches to
Community Health

(REACH 2010)



Funded by the
National Center for Chronic Disease
Control and Health Promotion
Centers for Disease Control
and Prevention (CDC-P)
For additional information contact:
Aida L. Giachello, PI at (312) 413-1952
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Margaret Davis, CO-PI (708) 841-9515
Chandana Nandi (217) 782-2166



Bilingual Coalition Newsletter

Winter 2002

**Chicago Southeast
Diabetes Community
Action Coalition**

Coalition Members

Midwest Latino Health Research, Training & Policy Center
 Jackson Park Hospital
 South Shore Community Church
 South Chicago Chapter of Congress
 Trinity Hospital
 Jackson Park Hospital
 Midwest Hispanic Health Coalition
 F.D.R.I.M.
 Centro Comunitario San Diego
 Chicago Family Health Center
 Health Care Consortium of Illinois
 Gower Stern & Associates
 University of Illinois
 Binax Eye Institute
 U.S. Department of Health and Human Services
 Hispanic Community Consortium
 UNCF/HS/Office of Minority Health
 Villa Guadalupe Senior Center
 We Care Dental
 South Region Chicago Park District
 South Chicago CBPH Facility
 Binax Diabetes Control Program
 A.M. Overton Practice
 Gonzalez Milgosa Community Center
 Tolson Medical Center
 African American Diabetic Association
 Chicago Chapter of the National Black Nurses Association

Committees

Evaluation
 Media and Public Communications
 Quality of Care
 Public Education/Self Management

Staff

Aida Guachillo
 Margaret Davis
 O'Neil Thomackler
 Patricia Carrasco
 Jane Aronson
 Catalina Barrios
 Melinda Alba
 Judith V. Sagast
 Anthony Williams
 Aida Carrascon
 Shante Elibal Parker
 Nobilly Suarez
 Miriam Velazquez
 Michelle Morrison
 Elizabeth Barrios
 Alonah Hardison
 Robert Wingo

Diabetes Update

A Quarterly Bilingual Newsletter



A CDC REACH 2010 Initiative

UIC Midwest Latino Health Research, Training and Policy Center

Edwina Shields' Booklet

Rev. Edwina Shields Founder and Director of "We Care Dental Services"

The disparities in health of African American and Latinos continue to climb despite tons of information circulated thru out our communities. When asked what is diabetes, youth still give a blank look and say I do not know. When asked what is blood sugar, these same youth get a spark of life in their eyes and add: something that causes your leg to be cut off or something that happens when you get too much candy. How can we get the right information to our youth, young adults and baby boomers in a manner that they can understand, retain and implement. I know that one of the answers is comic strips. I remember Popeye as one of my favorite comic strips, in fact my entire circle of friends love spinach because we wanted to be strong like Popeye. When I asked my grandchildren today what foods make you strong, they say spinach.

I know comics are a non-threatening way to introduce life-changing skills. The pictures are something that can be remembered for a lifetime. I can still remember what Little Lulu looked like even though I have not seen her for over 40 years.

We are going to reawaken the original form of health education thru the use of comics and inspire families in our communities to participate in the drawing, scrip writing and distribution. We must use non-traditional ways to educate, motivate and inspire our people to take charge of their health. We are racing against time and we must win this battle against preventable disease and its complications because we have a lot to loose.



Posters- English

You are at risk for diabetes if you...

- Are over 45 years old
- Are Latino or African-American
- Weighed more than 9 pounds when you were born
- Have a relative with diabetes
- Are overweight
- Get little or no exercise
- Had gestational diabetes
- Have given birth to a baby weighing more than 9 pounds

REACH out and call 1-800-323-4769

Visit one of our three Diabetes Self Care Centers located on Chicago's Southeast Side.

For more information, call 312-413-1952.

UIC University of Illinois at Chicago

Sponsored by:

- The Chicago Southeast Diabetes Community Action Coalition (CSDCAC) 2010 Initiative
- The UIC/UCSW Medical Center Health Research Training and Policy Center
- Health Care Consortium of Illinois
- Juan Diego Community Center

What is gestational diabetes?

When high blood sugar occurs during pregnancy.

Mother/baby risks from gestational diabetes are:

- Greater risk of fetal death and still-born babies.
- Greater likelihood of birth defects.
- Baby can be born too large (over 9 pounds).
- Mother can develop high blood pressure.
- Early labor.
- Higher rate of Cesarean section.

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What is diabetes?

- Diabetes keeps your blood glucose (sugar) high
- This may be because the body does not produce or properly use insulin
- Your body needs insulin to convert glucose into energy.
- Glucose provides energy for daily life

Types of diabetes

- Type 1: Your body does not produce any insulin
- Type 2: Your body does not produce enough insulin (insulin deficiency) or it can't use the insulin it produces (insulin resistance)
- Gestational diabetes: Occurs during pregnancy

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Posters- English

Be in control of your diabetes!

Watch your numbers:

- Fasting blood sugar level between 80-120 mg/dl
- Total cholesterol is under 200mg/dl
- Good cholesterol (HDL) over 60 mg/dl
- Bad cholesterol (LDL) under 100 mg/dl
- Blood pressure below 130/80
- Keep your A1C level below 7%.

Adopt healthy behaviors:

- Follow a healthy meal plan
- Make time for regular physical activity
- Visit your health care providers regularly
- Use medication as directed

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How do I take care of my diabetes?

Self-Management Activities

- Monitor blood glucose
- Keep all records and bring them to your appointments
- Follow the directions when taking medicine

At your medical appointment have these checked:

- Feet
- Blood pressure
- Weight
- Blood protein and fat
- Protein in your urine (urine test)

Make sure your questions are fully answered before you leave!

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Complications from diabetes are serious!

Do you know diabetes can ...

- Damage the heart and circulatory system?
- Increase blood pressure?
- Cause impotence and sexual problems?
- Make you more susceptible to flu and other infections?
- Lead to blindness (retinopathy)?
- Cause kidney failure (nephropathy)?
- Cause wounds and sores to get infected and heal slowly?
- Cause amputations?
- Lead to nerve damage (neuropathy)?
- Cause gum disease and tooth loss?

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Posters- Spanish

Usted tiene riesgo de desarrollar diabetes si...

- Tiene más de 45 años de edad
- Es latino o afroamericano
- Peso más de 9 libras al nacer
- Tiene un familiar con diabetes
- Tiene sobrepeso
- No hace o hace poco ejercicio
- Ha tenido diabetes gestacional
- Ha tenido un bebé que pese más de 9 libras al nacer

¡Llame, alguien le contestará 1-800-323-4769

Visite uno de nuestros tres Centros Comunitarios de Autocuidado localizados en el Sureste de Chicago. Para más información llame al 312-413-1952

UIC University of Illinois at Chicago

Patrocinado por:

- The Chicago Southwest Diabetes Center (UIC) at Jackson Park
- The UIC/UCR Hispanic and Latino Health Research Training and Policy Center
- Health Care Community of Illinois
- Juan Diego Community Center

¿Qué es la diabetes?

- Es cuando la glucosa (azúcar) en la sangre está alta
- Esto puede ser porque su cuerpo no produce insulina o no la utiliza adecuadamente
- El cuerpo necesita insulina para convertir la glucosa en energía
- La glucosa produce energía para la vida

Tipos de diabetes

- Tipo 1: el cuerpo no produce insulina
- Tipo 2: el cuerpo no produce suficiente insulina (deficiencia de insulina) o si la produce, no puede utilizarla (resistencia a la insulina)
- Diabetes gestacional: ocurre durante el embarazo

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¿Qué es la diabetes gestacional?

La diabetes que ocurre durante el embarazo. La diabetes gestacional presenta los siguientes riesgos para la madre y el bebé:

- Mayor riesgo de muerte fetal o bebés nacidos muertos
- Mayor riesgo de defectos de nacimiento
- Bebés macrosómicos (muy grandes, más de nueve libras)
- Madre puede desarrollar presión arterial alta
- Trabajo de parto prematuro
- Mayor riesgo de operación cesárea

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Posters- Spanish

¡Hágase cargo de su diabetes!

Aprenda sus números. Mantenga:

- Su glucosa en ayunas en niveles de 80 a 120 mg/dl
- Su colesterol total es de 200 mg/dl
- Su colesterol bueno (HDL) sobre 60 mg/dl
- Su colesterol malo (LDL) menos de 100 mg/dl
- Su presión arterial en 130/80
- Su A1C menos de 7

Adopte conductas saludables:

- Elija alimentos saludables y reduzca porciones
- Dése tiempo para la actividad física
- Visite a su médico regularmente
- Use los medicamentos según indicaciones

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¡Las complicaciones de la diabetes son serias!

¿Sabe que la diabetes puede...

- Dañar su corazón y sistema circulatorio?
- Elevar su presión arterial?
- Causar impotencia y otros problemas sexuales?
- Hacerlo más susceptible a la gripe común y otras infecciones?
- Conducir a la ceguera (retinopatía)?
- Causar fallo renal (nefropatía)?
- Hacer que las heridas y cortadas se infecten y sanen lentamente?
- Causar amputaciones?
- Dañar las terminaciones nerviosas (neuropatía)?
- Causar enfermedad de la encía y pérdida de dientes?

Llame, alguien le contestará 1-800-323-4769

Visite uno de nuestros tres Centros Comunitarios de Autocuidado localizados en el Sureste de Chicago Para más información llame al 312-413-1952

Patrocinado por:
 • The Chicago Southwest Diabetes Research and Action Coalition (CSAC)
 • The CDC/UCM Midwest Latino Health Research Training and Policy Center
 • Health Care Collaborator of Illinois
 • San Diego Community Center

UIC University of Illinois at Chicago

Dissemination of Reports





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DRAFT
CHICAGO SOUTHEAST DIABETES COMMUNITY ASSESSMENT & COMMUNITY ACTION PLAN


Prepared by
 UIC-Midwest Latino Health Research, Training and Policy Center










in collaboration with
 Southside Health Consortium (SHC)
 Illinois Diabetes Control Program (IDCP)

On behalf of the
 Chicago Southeast Diabetes Community Action Coalition
 (CSEDCAC)
 (Under CDC REACH 2010 Initiative)

"Working Together for a Healthier Community"



<p>Medical Care</p> 	<p>Physical Activity</p> 	<p>Foot Care</p> <p><i>Check your feet every day</i></p> 
<p>COMMUNITY ASSESSMENT ACTION SUMMARY REPORT: DISPARITIES IN DIABETES HEALTH IN SOUTHEAST CHICAGO</p>		
	<p>Healthy Eating</p> 	<p>Take Prescribed Medication</p> 
<p>PREPARED BY SOUTHEAST CHICAGO DIABETES COMMUNITY ACTION COALITION University of Illinois at Chicago-Midwest Latino Health Research Center Healthcare Consortium of Illinois Illinois Diabetes Control Program (IDHS)</p>		
<p>Check Daily Your Blood Sugar Levels</p> 		<p>Oral Health</p> 

Funded by the Centers For Disease Control and Prevention - grant # U50/CCU 5173880
 JANUARY 2002



Press Conference







Media Exposure

- Interview with United Press International
- NBC National Network spent a day in our office/site learning about the diabetes program
- Frequent local newspaper coverage
- Partnership with IDPH for diabetes cable program



News Articles

#0079 P.002/004

Chicago Sun-Times

METRO

Sunday, February 24, 2002 ☆ 5A

Surge in diabetes spurs help for Hispanics

FDA CHI/DO

FEB-20 2002 10:55 AM 3126966280



Publication Submissions

- Journal of Public Health Reports

*Reducing Diabetes Health Disparities through
Community Based Participatory Action
Research: The Chicago Southeast Diabetes
Community Action Coalition*

Website:

www.uic.edu/jaddams/scdcac



**Midwest Latino Health,
Research, Training, and Policy Center**



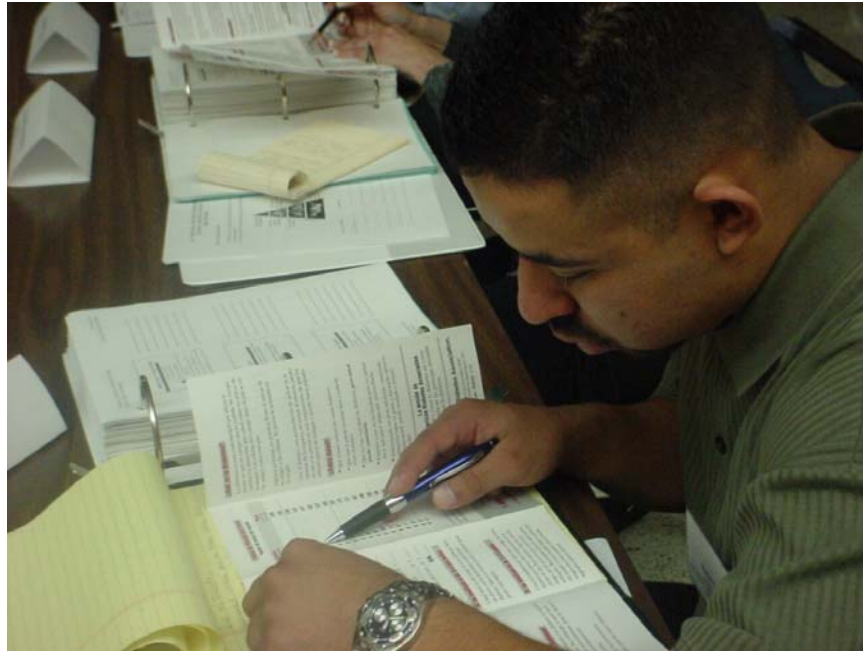
**University of Illinois at Chicago
Jane Addams College of Social Work
1640 W. Roosevelt, Suite 636
Chicago, IL 60608
Tel: (312)413-1952 Fax: (312)996-3212**

Evaluation: Diabetes Empowerment Education Program (DEEP)



- Pre-assessment, post—assessment and 6 months follow-up (1 year)
- Measures, clinical outcomes, behavioral and quality of life
- Relative Survey (to validate patients self-reporting)
- Cost effectiveness of using health promoters and impact on reducing ER and hospitalization

DEEP TRAINING





DEEP TRAINING





DEEP TRAINING





DEEP TRAINING





DEEP TRAINING





CSDCAC DEEP classes











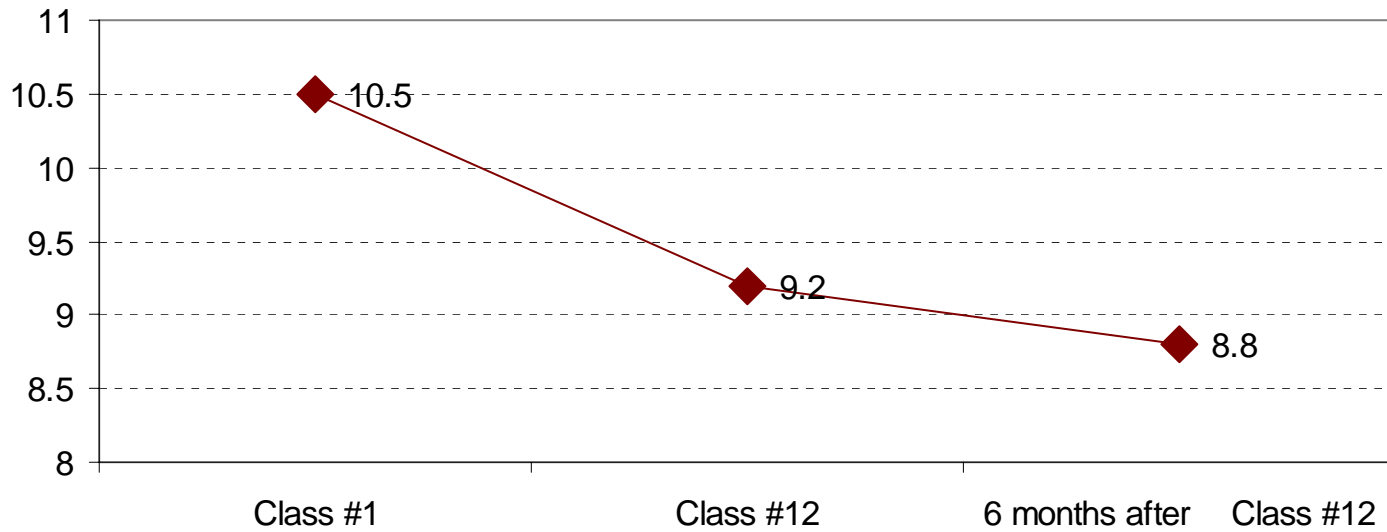


Clinical findings, 2004

Parameters	Pre-Test N=80	Post-Test N=57
Fasting G L	193.4 [80]	150 [57] P=0.005
Weight	172.6 [75]	171.9 [69] P=0.136
A1c	10.5 [56]	9.2 [36] P=.096
Cholesterol	201.4 [53]	187.6 [25] P=0.031

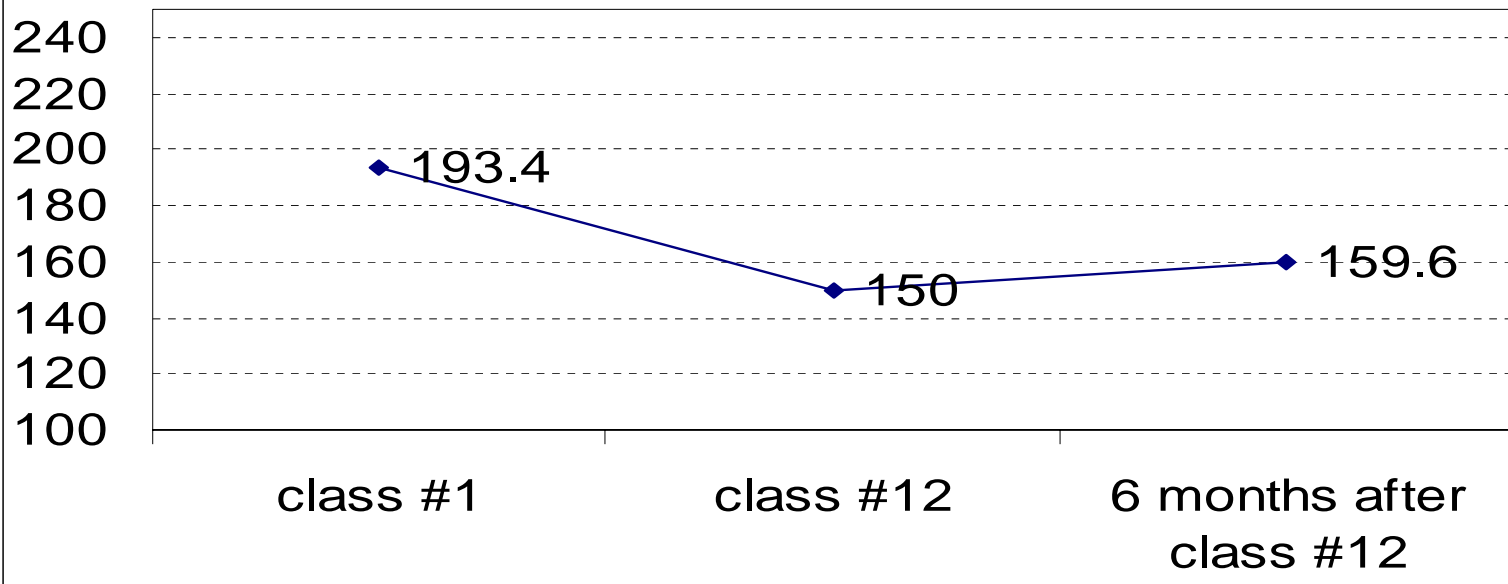


*Changes in HbA1c Level
Wave 1*



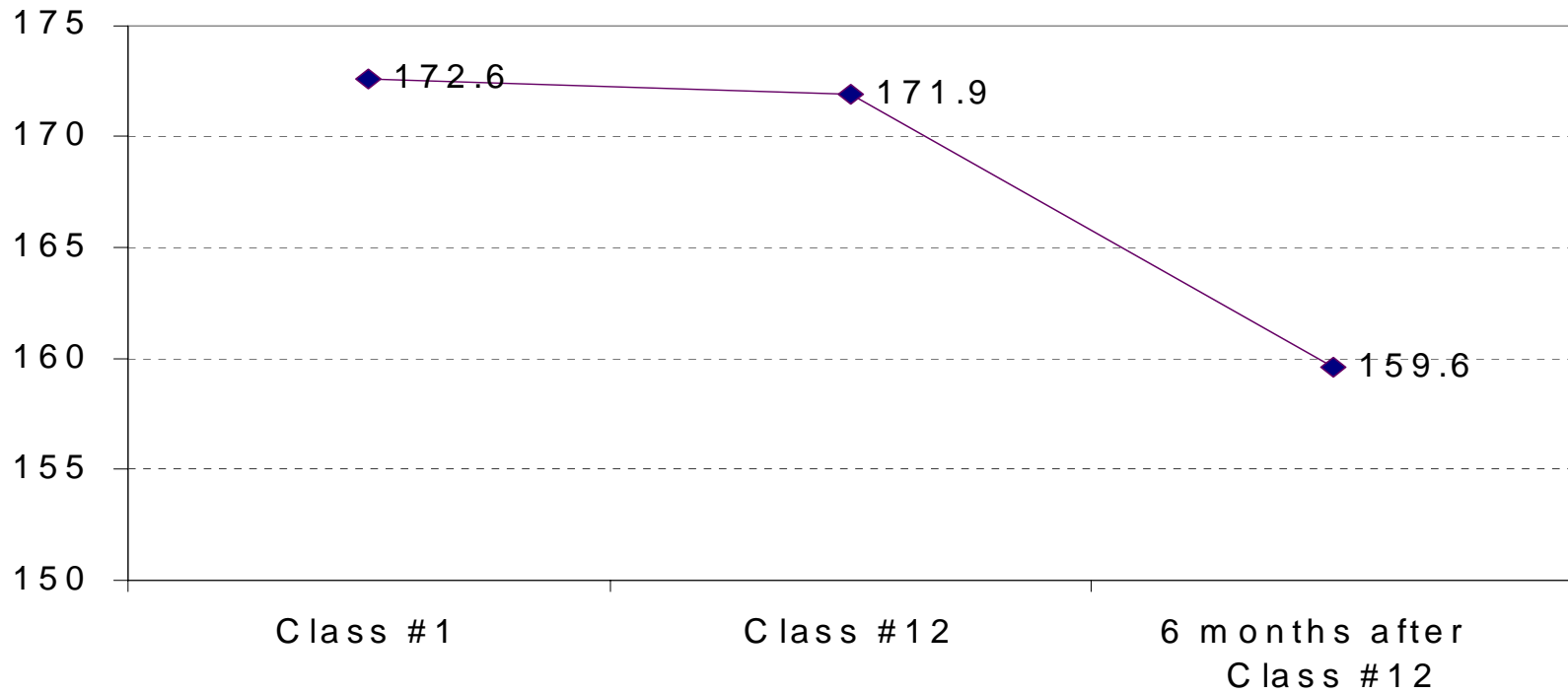


Changes of FPG Glucose levels Wave 1





Changes in Weight Wave 1



Coalition activities: Past year



- Health fairs: 11,500
- Other outreach activities: 13,263
- Participants of support groups: 876
- Exercise/walk-in clubs, etc: 1,596
- Case-management: 1,540
- Training participants: 2741
- Referrals: 1,500

Coalition effectiveness survey



- 90% perceived coalition work as very effective
- 4% said it is fair
- 6% No comments.

Other Accomplishments...



Diabetes Curriculum Update

Diabetes Type 2 Self-Management Education Program for delivery by Health Promoters and Peer Educators



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Sponsored by the Centers for Disease
Control and Prevention,
Center for Chronic Disease Prevention
and Health Promotion,
Division of Diabetes Translation
U48/CCU509661

Midwest Latino Health Research, Training
and Policy Center
Jane Addams College of Social Work
University of Illinois at Chicago

February 2001



Accomplishments

- Two local hospitals have established ADA-recognized Diabetes Education Center
- Partnership with the Chambers of Commerce is beginning to impact the food industries (e.g., restaurants and grocery stores)



Lessons learned

- Partnerships with key Community-based organizations that have credibility and trust, and who get things done
- Incentives are important for key partners
- Dealing with group dynamics first (trust, cohesiveness, decision-making framework)
- Empowering communities through information, skill-building and ownership of the process



Lessons learned...

- Provision of services (e.g., flu shots, diabetes screening, physical activities) are concrete services that allow the coalition members to see immediate benefits for themselves and their communities



Challenges

- Communication System when you have diversity of members (from homeless to physicians and hospital administration)
- Race relations (developing constant opportunities for people to know each other and to work with each on common goals and tasks)
- Participatory processes slow down the accomplishments of tasks, combined with university bureaucratic system



Acknowledgements

- CDC - Mr. Levator Brown,
Project Officer
- Coalition Partners
- Community Residents
- Center Staff
- Students

