

Border Health ¡Si!
Special Action Group
January 17, 2001

Marilyn Johnson, Family and Youth Agent, welcomed and thanked the guests. Then asked each to introduce themselves. Marilyn discussed about the group and then introduced her first guests' speaker.

Gwen Gallegos' presentation explained, what diabetes is. She spoke about the different types of diabetes and other overall information. Diabetes occurs when the levels of glucose in your body are high and the body does not produce enough insulin. Diabetes is more common in Latinos, Native Americans, Asian Americans and Pacific Islanders. Most people have diabetes for about seven years and do not know that they are diabetics.

Gwen explained about the different types of diabetes. The most common forms of diabetes are type one and type two. Type one diabetes is an autoimmune disease that doesn't produce enough insulin. People with type one diabetes have to take insulin injections every day. Type two diabetes is a metabolic disorder that doesn't produce enough insulin. This is the most common type of diabetes. Obesity can lead to type two diabetes. Another form of diabetes is gestational diabetes, a type of diabetes occurring during pregnancy and goes away after birth. About 40% of these women will develop type two diabetes in about 15 years. Impaired Glucose Tolerance is a high level of glucose occurring in the blood but not high enough to be classified as diabetes.

An overall look and information of complications caused by diabetes: Heart disease 2 to 4 times greater with people who have diabetes. High blood pressure affects 60-65 percent of people with diabetes. Strokes are 2 to 4 times greater with people who have diabetes. Blindness in which about 20,000 causes of Diabetic Retinopathy are known. Kidney disease in diabetes is a leading cause of an end stage renal disease. Nerve diseases about 60-70 percent suffer from nerve damage. Amputations occur with people who have diabetes. Pregnancy complications can cause stillbirth or malformation.

Gwen asked us to take a short assesment to see if we were at risk of having diabetes. Who is at risk of having diabetes? People over the age of 40, women who have had a baby weighing 9 pounds or more, women who have had gestational diabetes, people who don't exercise, are over weight, and have a family history of diabetes. It is important to have some form of aerobic exercise as well as practicing good eating habits.

Some facts about Santa Cruz County: Latinos have a higher risk of developing diabetes, Mexican Americans have a higher rate of diabetic retinopathy. Diabetes prevalence has been documented as high as 17 percent, and mortality rates are higher along the border, which is higher than the rest of the counties. As Gwen commented, we can help our community by improving the information available about diabetes care and education. We can create more awareness about diabetes and educate our community, as well as teaching children the importance of eating properly and exercising more.

Jill de Zapien U of A Technical Team commented on the Santa Cruz Collaborative Diabetes

Project that was held in Douglas, AZ. This project emphasized community outreach and diabetes self management classes to improve their life. They have found that 24 percent of Mexican Americans between the ages of 45 and 74 currently suffer from type 2 diabetes which is more evident in the border region.

In Douglas, AZ, there is a high percentage of uninsured people (54%). A profile shows 71% of presumed diabetics were insured and 29% were not insured. In non diabetics an 66% show they were insured and 36% show they were Not Insured. In the United States, 71% use their healthcare and 21% go to Mexico.

Other statistics Jill commented on were mortality rates. In Arizona between 1985-1995 by ethnicity mortality rates were Non-Hispanic 8%, Hispanic 20%, African-American 23%, Native American 48%. In Douglas, AZ the frequency of diabetes shows a higher rate of about 15.3%, Arizona having a 4 % and the USA having a 5.9%. Proyecto VER a study conducted in Nogales, AZ and South Tucson in which 4774 Hispanics ages 40 and older participated show that between the ages of 40-49 twelve percent have diabetes and the ages between 70-79 thirty four percent have diabetes. A rate of 50% of diabetics have Diabetic Retinopathy . Obesity is another factor that can cause diabetes, according to the body mass of the participants a 36% were obese, 38% were overweight and 24% were normal.

Jill concluded by commenting about the SCCDP program in Douglas, AZ in how it has made a difference in the lives of the participants who were selected in attending self management classes to continue an educational program. There was an increase of participants following their diet of 41% to 82%. An increase in exercising regularly increased 63% to 83%. Blood glucose monitoring increased from 45% to 78%. This shows that we can make a difference!

Marilyn

Thanked the guest speakers for their time and the great information provided for all of us.

Kathy Vandervoet discussed about a new walk path with shade and would like this added to our agenda for discussion each month. Maybe a coalition between our SAGE group and the City of Nogales can help create a new walk path with shade. She would like to know if our group can help Bonnie with the Marriot in setting up a better meal program for the students. **Bonnie Shipatalos'** response is that Marriot already follows the standard guidelines in preparing meals. Although meals are being prepared at standard guidelines, they do provide special meals for special students.

Dina Sanchez commented maybe vending machines can be pulled out of the cafeteria or maybe made available to students later in their lunch hour instead of the beginning of the lunch hour.

JoJean Elenes suggested that maybe more salad bars can be added to the lunch. Getting the principals more involved could help too. She commented on vending machines in schools being a big factor in the cafeteria because, it helps pay for field trips and other school functions. It way decided that SAGE members would share policies and procedures at each meeting from their agency or organization.

Group decided to meet every 4th Wednesday of each month. The next group meeting will be February 28th, 2001, from 12-2 p.m. at the United Church Village.