

On Guard **AGAINST DIABETES**

Information on Diabetes
for Persons With Disabilities



ACTIVE LIVING ALLIANCE FOR CANADIANS WITH A DISABILITY
www.ala.ca

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On Guard AGAINST DIABETES

Information on Diabetes for Persons With Disabilities

Are You at Risk for Diabetes?

If you are living with a disability, you know the many ways that having a disability affects your life. Something that you may not know is that living with a disability can put you at risk for developing other conditions, called secondary conditions. These secondary conditions can affect your independence, quality of life and your health. Type 2 diabetes is one of these conditions. More than two million Canadians, including many persons with disabilities, have diabetes. Canadians living with diabetes are at high risk for a heart attack, stroke, kidney failure, blindness or limb amputation. Eighty percent of people with diabetes will die from a heart attack or stroke. Diabetes is a disease that you need to take seriously.



People who have some types of disabilities have a higher risk of getting type 2 diabetes than people who do not have disabilities.

There are two main types of diabetes. Type 1 diabetes cannot be prevented. Type 2 diabetes can be prevented or delayed and may develop as a result of lifestyle changes and other limitations brought on by a disability. Diabetes also causes major disability. Many people who have type 2 diabetes do not know that they have it and in many cases type 2 diabetes is diagnosed due to the presence of another serious condition. This manual will help you understand diabetes, learn how to take care of yourself if you have either type 1 or type 2 diabetes, and suggest strategies you can use to reduce your risk of getting this serious disease.



What is Diabetes?

According to the Public Health Agency of Canada (2007) “Diabetes is a chronic condition that stems from the body’s inability to sufficiently produce and/or properly use insulin”

Diabetes is a condition in which the body cannot produce an important hormone called insulin. Insulin is produced in the pancreas. ***People with diabetes do not make enough insulin in their bodies or they have trouble using the insulin that their bodies produce.*** When your body lacks insulin or you cannot properly use the insulin your body does produce, you can develop many serious health conditions.

There are three types of diabetes: type 1, type 2 and gestational (during pregnancy). Some people develop a condition called **prediabetes** before they develop type 2. Most people who have diabetes have type 2 (about 90%). There is no known cure for diabetes, although researchers are looking for one.

- **Type 1 diabetes** (formerly called juvenile-onset diabetes) has no known cure, and its cause is not yet known. Type 1 diabetes is usually diagnosed before the age of 30, although some people have been diagnosed with type 1 diabetes much later in life. Type 1 diabetes is *not* caused by eating too much sugar. Without insulin injections, people with type 1 diabetes die. With good management of this disease, people with type 1 diabetes may prevent or delay the onset of other serious conditions like heart attacks, kidney disease, blindness and amputation, and premature death. Type 1 diabetes also attacks the immune system, making people vulnerable to infections.
- **Type 2 diabetes** (once called adult diabetes but now found more and more often in children and teenagers) does not yet have a cure, but its causes are known and in almost 50% of cases ***it may be prevented or delayed.*** The single biggest risk for type 2 diabetes is having a parent, brother or sister with the disease. If your family comes from Asia, Latin America, South-East Asia or Africa, you also have a very high risk of getting type 2 diabetes. Being overweight, physically inactive, over 40 years old or being a smoker also puts you at high risk of getting type 2 diabetes. Type 2 diabetes is just as serious as type 1, and can lead to serious health problems. There is good news, though! Type 2 diabetes may be prevented or delayed by eating a healthy diet and being physically active in daily life.



- **Gestational diabetes** is a temporary condition that affects about 4% of women during pregnancy and it usually goes away after the pregnancy is over. However, both mothers and babies in these cases carry a high risk of getting type 2 diabetes as they get older. Up to 40% of women who have gestational diabetes will get type 2 later in life.
- **Prediabetes** happens when people's blood glucose (or blood sugar) levels rise close to the levels shown in people with type 2 diabetes. This does not mean that everyone with high blood glucose (sugar) levels will develop type 2 diabetes, but there are other conditions that increase the risk. If you have high blood pressure, high cholesterol and triglyceride (unsaturated fat) levels, lower levels of the good type of cholesterol (called HDLs) or you have extra weight around your waist, you are at a very high risk of moving from prediabetes to type 2 diabetes. **People who are diagnosed as being prediabetic have a window of opportunity to practice the lifestyle tips described in this newsletter and reduce their risk of developing type 2 diabetes.**

Symptoms of Diabetes

- ▶ Feeling thirsty a lot of the time
- ▶ Needing to urinate often
- ▶ Feeling hungry a lot of the time
- ▶ Not having enough energy to do everyday things
- ▶ Losing or gaining a lot of weight
- ▶ Being unusually short tempered
- ▶ Feeling unusually weak
- ▶ Having cuts or bruises that are slow to heal
- ▶ Having tingling or numbness in your hands or feet
- ▶ Having frequent infections in the gums, skin or bladder
- ▶ Having blurred vision
- ▶ Having trouble getting or maintaining an erection (men)

If you have any of these symptoms, and especially if you have several, see a doctor. It is important to also be aware that some people with type 2 diabetes may not show any symptoms at all.

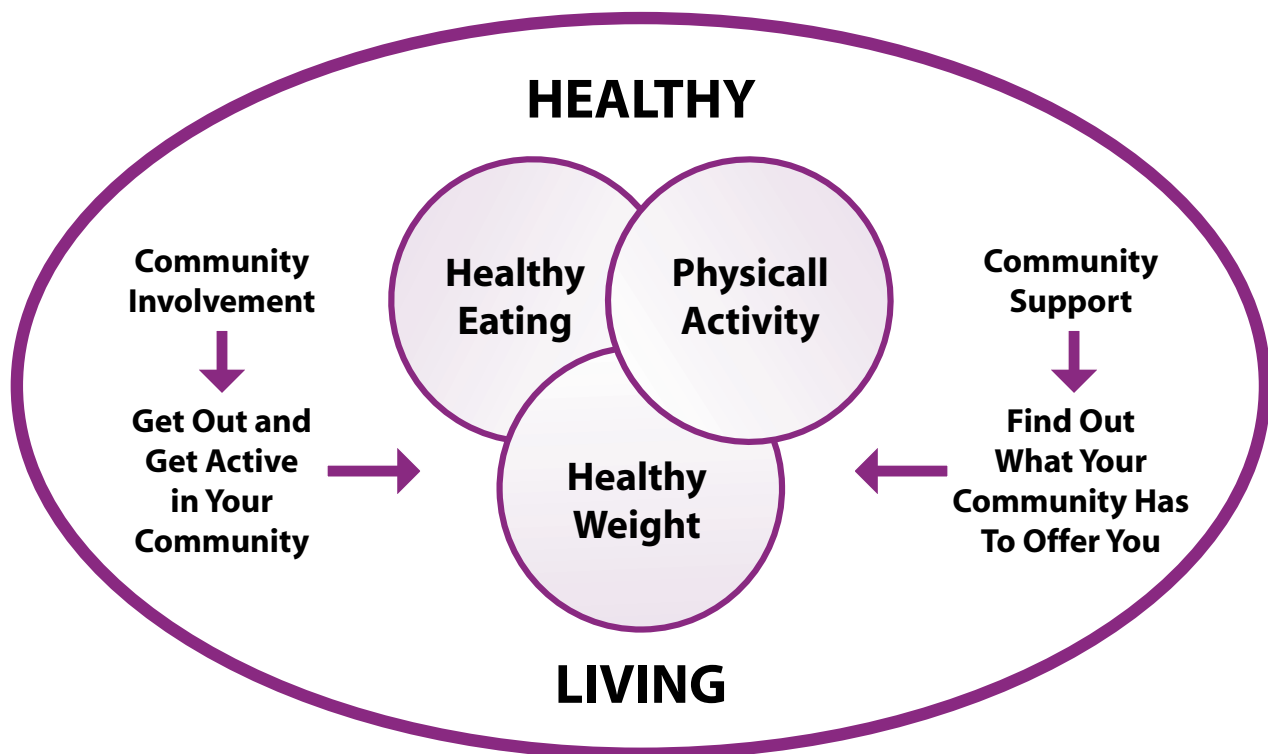


What is Active Living?

Active living is good for all of us whether we have disabilities, diabetes or any chronic health disease. And active living is easy: eat healthy, get into regular physical activity and don't smoke! All of these can help everyone stay healthy and live longer.

Active living means putting some physical activity into your daily life. In a broader sense, **active living means living to the best of your ability and putting your health first.** Active living involves **physical activity**, fuelled by **healthy eating**, keeping people at a **healthy weight**. All three are equally important, and all three support each other. Active living is a cornerstone of health, independence and quality of life. Active living builds physical and mental health, helps people develop the skills and capacities needed to lead independent lives (especially as we get older), and brings benefits like better sleep, higher energy and opportunities to get out and be involved with other people.

Active living is as important for people who have disabilities or chronic illnesses as it is for everyone. Active living can help you manage a disability you already live with and it can help you avoid getting other disabilities. Active living tends to get people out into their communities, doing things with others, having fun and building healthier, more supportive communities wherever they live.



Who Gets Diabetes?

In Canada, 1.8 million people have been diagnosed with diabetes, and up to another half million do not yet know they are living with type 2 diabetes. Among Aboriginal people, the rate is three times higher than for the general population. Diabetes is the seventh leading cause of death in Canada. Eighty percent of people with diabetes will die from a heart attack or stroke. Diabetes is the leading cause of kidney failure, blindness and limb amputation in Canada today. In the United States, more than 17 million people have diabetes and 200,000 people die prematurely from diabetes every year. Worldwide, there are more than 240 million people with diabetes. By 2016, more than 3 million Canadians will be living with diabetes, and there will be more than 300 million around the world.

- **Anyone** can get type 2 diabetes.
- Your risk of getting type 2 diabetes **increases if you have a parent, brother or sister with the disease**, if you are **Aboriginal** or if your family comes from **Asia, South-East Asia, Latin America or Africa**.
- If you are overweight, don't get enough physical activity or smoke you are also at high risk of getting this disease.

Groups at Most Risk for Getting Diabetes

- ▶ People with close relatives who have diabetes
- ▶ Aboriginal Peoples
- ▶ People from Asia, South-East Asia, Latin America or Africa
- ▶ People over 40 years of age
- ▶ People who have high blood pressure, high cholesterol levels or other fats in their blood
- ▶ People who have had gestational diabetes or given birth to a baby that weighed more than 4 kilograms (9 pounds)
- ▶ People who are new to Canada (immigrants and refugees)
- ▶ People who have been diagnosed with prediabetes
- ▶ People who have some types of disabilities

Among people with disabilities, *some disability groups face specific challenges that raise their risk of getting type 2 diabetes. These challenges can be related to changes in body functions or they may result from social and physical barriers to supports and*

services. There has been little research about the links between diabetes and disability, but some researchers have started to pay attention. There are signs that people who have spinal cord injuries (paralysis), people with learning disabilities, people with intellectual disabilities and people with mental health difficulties are at a higher risk of getting type 2 diabetes than people with other types of disabilities. However, there is still a lot that is not known about the links between different kinds of disability and diabetes or the reasons for such links. Here is some of what is known:

Disability Groups with a High Risk for Developing Type 2 Diabetes

- People who have a ***spinal cord injury*** are at high risk of developing type 2 diabetes because the injury affects the whole body and all of its systems and can increase the body's resistance to insulin. People who have a spinal cord injury tend to have more fat and less muscle in their bodies, and they also burn fewer calories. This may change the way that their bodies use insulin. Spinal cord injury also tends to lower peoples' physical activity levels, which can also affect insulin production. People who have lived with their spinal cord injury for 10 or more years may get prediabetes or develop type 2 diabetes, and the older they get, the higher their risk goes. People with spinal cord injuries may also show the effects of aging early, increasing their risk of getting type 2 diabetes.
- People who have a ***vision or hearing impairment*** are at risk of developing type 2 diabetes due to problems getting information about health issues like diabetes. People who cannot access print information are excluded from many sources of health information, and people who are Deaf or hard-of-hearing cannot just walk into an emergency department or clinic and expect to receive services in ASL. People with low vision or blindness can have difficulty getting out of the house and being physically active. Stigma against Deaf persons or lack of communication aides can keep people with hearing loss out of community centres and services that offer information about health issues like diabetes sports and recreation programs.
- People who have an ***intellectual disability*** can have limited ability to care for themselves, making them a high risk for developing type 2 diabetes. They may also live in places where they do not have a lot of control over what they eat or their day to day lives. There may be limited services and programs to help them



lead active, healthy lives. Stigma against people with intellectual disabilities, and popular assumptions about their capacity, can also limit their opportunities to learn and work, and to afford healthy food.

- People who have **mental health issues** can have difficulty following healthy routines and some of the drugs used to treat psychiatric conditions can make them more likely to develop diabetes. They may also lack the resources needed to take care of their health. Research indicates that health care providers may overlook the physical health concerns of people who have a psychiatric disability as they focus on the mental health issues. People with mental health issues may not have the self confidence to challenge doctors when they are worried about their health. Stigma toward mental illness can isolate people, which may also reduce their ability to be physically active and eat healthy.
- People who have **learning disabilities** may also be more likely to develop type 2 diabetes because their physical health concerns may be seen as part of the learning disability. They may also face difficulties finding and using information about health issues. Low self esteem may lower their motivation to look after their overall health needs.
- **Seniors who have disabilities** carry a very high risk of developing type 2 diabetes. The risk of getting type 2 diabetes increases rapidly over the age of 40, and treatment of diabetes in seniors is often complicated by the many health issues that develop due to aging. People with certain types of disabilities (for example, spinal cord injury) can show the effects of aging early, increasing the risk of developing type 2 diabetes.

While it is clear that people who have disabilities face issues and life circumstances that may put them at greater risk of getting type 2 diabetes, more research is needed on the links between disability and diabetes. ***Because research on diabetes and disability is not complete, every person with a disability should take the risk of developing type 2 diabetes seriously.***



Diagnosing Diabetes

A diagnosis of diabetes must be made by a doctor.

Diabetes is diagnosed by measuring the amount of sugar (glucose) in your system. A doctor will test you for diabetes if you report that you are having symptoms of the disease, or if you are overweight or have other signs that you are at risk for diabetes. If you have family members who have diabetes, you should ask your doctor to monitor you for diabetes. Anyone over the age of 40 should have an impaired fasting glucose test every three years, and if you have any of the risk factors for type 2 diabetes, you should be screened more often.

Why Should You Be Concerned About Type 2 Diabetes?

Many people with disabilities lead healthy lives, but there are also lots of barriers to staying healthy with a disability. If you live with a disability, developing type 2 diabetes will add to the challenges of daily life. Fortunately, there are many things you can do to lower your risk.

The most important is to learn how to take good care of your health. Understanding diabetes and your risk of developing this disease is important for everyone, and especially for people who already live with an impairment or chronic illness. ***Many adults with type 2 diabetes do not know that they have the condition until they are diagnosed with a serious diabetes-related condition.*** Make sure that you understand diabetes so that you can take care of your health.

There is a lot of information about diabetes and related issues on the Internet, in libraries, community service offices and in clinics and doctors' offices. The Canadian Diabetes Association and other organizations provide information on their websites and in pamphlets. You will find contact information in the **Useful Resources** section of this newsletter.



Christine's Story – Learning to Stay Healthy

At a mature age of 40 years old, I was diagnosed with type 2 diabetes during a routine blood test. It was a shock to me as I didn't see myself having the condition, despite the fact that my mother had late onset of diabetes as well. I was put on insulin therapy, because my condition wasn't controlled by oral medication. After four years, I went off insulin and medications, and since then I have been able to manage the condition with a diabetic eating plan and exercise.

I am an individual with multiple disabilities who faces multiple barriers in life. The stress level is always intense as I strive with all my strength to become a contributing member of the community. Moreover my addictive personality doesn't help, because on many occasions I find myself turning to comfort food, especially when I'm depressed. You can imagine how devastating it is for me to have a life threatening condition such as diabetes while I have problem controlling my over-eating habit.

Nonetheless my health is vital to me. I've learned not just how to cope, but to manage my diabetic condition through a healthy eating plan, exercise and creative ways to overcome barriers. My first challenge was to adhere to the diabetic eating plan. As a person with a learning disability, apportioning and reading food labels isn't easy. I worked zealously with medical professionals and my diabetic care team, and over a long period of time, I have succeeded in controlling my diet, budgeting my food and eating healthily. Daily screening of blood glucose level is crucial and self discipline is the key.

Routine exercise and staying active is another important component of the entire regime. I walk daily for 3 miles, swim regularly and am active in the community by volunteering and taking interest classes. I keep both my mind and body active, and in the process I learn more about my condition, seek choices available to me and get support from people who care about me.

Christine Feigel (living with type 2 diabetes)
Richmond, BC

What Can You Do To Take Care of Yourself?

The idea that you could get type 2 diabetes may seem overwhelming or frightening, or just too much to think about at this point in your life. Following the tips we provide on reducing your risk of getting type 2 diabetes may seem too hard to do, or you may not have the resources you think you need. There are lots of different ways to tackle type 2 diabetes, and some do involve making big lifestyle changes, but the benefits will improve your overall quality and enjoyment of life as well as help you stay healthy.

Putting these lifestyle tips into action may be hard because you can't get the information you need. Perhaps you don't have enough money to buy food that is different from what you usually eat. Maybe it's hard for you to get out of the house for regular physical activity. You may face challenges when it comes to using medical services or getting the information you need. In spite of these barriers, or perhaps because of them, it is important that people with disabilities learn about diabetes so that you can take the right steps to make sure you are putting your own health first.

The most important strategies include eating a healthy diet, getting enough physical activity, watching your weight and paying attention to changes in your health. It is also important to get regular check-ups from a doctor. Asking for support from family, friends and services in your community can make it a lot easier for you to make some of these lifestyle changes.

Tips for Healthy Living and Preventing Type 2 Diabetes

- ▶ Build some physical activity into your day to day life
- ▶ Eat healthy foods and don't overeat
- ▶ Keep your weight down
- ▶ Don't smoke
- ▶ Take care of your teeth and gums
- ▶ Monitor the medications you take
- ▶ Get regular health checkups
- ▶ **PAY ATTENTION TO YOUR HEALTH**

You are the judge of whether you are healthy, and you are the expert on what is happening with your health.

Healthy living is important for everyone, not just for people living with disabilities or people who are at high risk of developing type 2 diabetes. All of us benefit from eating healthy food and being physically active. People with type 1 diabetes need to practice healthy daily habits so that they can prevent or delay serious complications that may lead to disabilities or chronic diseases.

Building a Healthy Life: Sarah's Story

I used to drive a car. I could hang out with my friends whenever I wanted to. I had a great career! I was 25 going on 26. Little did I know I was also going on legally blind.

Diagnosed with juvenile diabetes at the age of three, I had an active life and a very healthy diet. The problem was I had a stressful job – working long hours, taking short lunch breaks, and not testing my blood sugar during the day. Stress increases blood sugar levels and if left undetected over time, it will increase blood pressure, which detached the retinas in both of my eyes. I had 8 eye operations to save what vision I have now.

As horrific as it was for me, it also was for my parents because it is a loss for everyone. I contemplated many things in the first year – reflecting, soul-searching on how to rebuild my life. I was very fortunate in that I didn't feel sorry for myself or play the victim for very long, making it easier for me to accept, adapt and move forward.

Once I was back in my apartment I couldn't go out for a walk unless I made plans with someone. I busied myself with getting familiar with all the rooms so I could be independent. I learned that I loved to cook! I

liked to chop vegetables while listening to a book on CD. I focused on eating 5 healthy meals and snacks each day and incorporated walking on the treadmill (which I borrowed from my parents) while listening to TV – it made the hour go by faster!

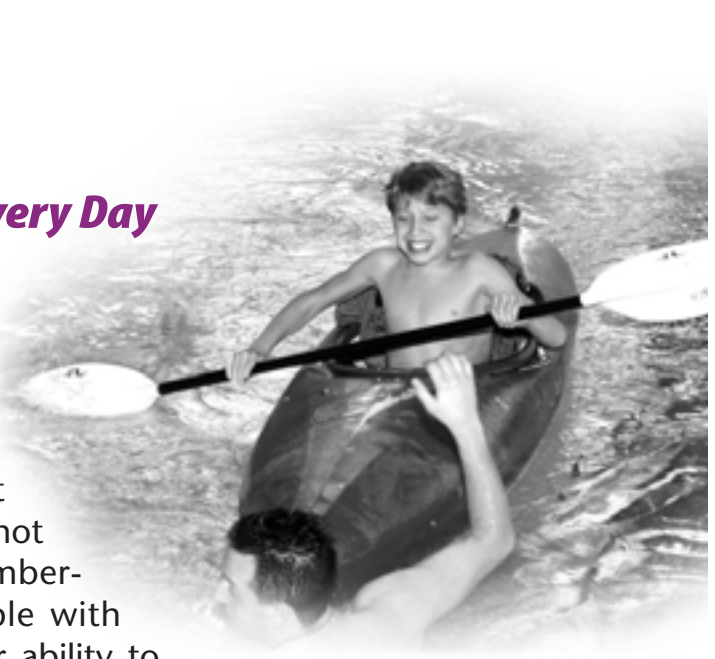
Eventually I got a white cane and my world expanded. I pushed myself to go for a walk everyday. This would not only help improve my mobility skills with my cane but it would keep me active and give me a chance to clear my mind. I found I loved to talk to people and even more so, make them laugh! I got involved in public speaking, which led to stand-up comedy! I'm an advocate for the rights of people with all disabilities to make my city more inclusive. I love acting and have directed 3 films.

I am now 32 and I love my life! I enjoy getting out and trying new experiences like being in a glider plane, going through a corn maze and traveling around the world, because I get to experience it with new heightened senses! I'm grateful for everyone and everything in my life and I would not change a thing! I really believe that I was more blind before I lost my eyesight!

Sarah Empey
Calgary, Alberta

Physical Activity – Get Some Every Day

Everywhere we go, we get messages about the importance of being physically active. Yes, we know it's important, and most of us try to do something about it. But lots of things can get in the way, like not having enough time, being too tired, not having money to pay for a gym membership, or living with daily pain. People with disabilities can also have limits to their ability to do some kinds of physical activity, and they can encounter access issues when it comes to using gyms and community centres. It could be that activity leaders don't know how to adapt activities to be suitable for a person with a particular type of disability. The good news is that it doesn't have to take a lot of time, money or effort for you to get the physical activity you need, and being physically active will help you feel better physically, mentally and emotionally. Being physically active will help you feel hungry if you have a low appetite and burn calories if you are over weight. Being physically active will help you sleep at night. And being physically active is a great way to meet new people and share some fun. You can pick up lots of good ideas about easy ways to get active in this section and the **Useful Resources** section.



***Just thirty minutes of physical activity a day will
meet your body's needs. Get out and smell the roses.***

People who are physically active are less likely to get type 2 diabetes.

Being physically active brings lots of health benefits like lower stress, better muscle strength and more energy. Regular physical activity helps lower blood glucose (sugar), blood pressure and cholesterol and helps to keep the heart healthy.

***There are 1440 minutes in every day.
Spend just 30 of those minutes being physically active.***

Thirty minutes is 2% of the day.

Not a lot to invest in your health.

Research shows that people with disabilities tend to be less physically active than people who do not have disabilities, even though they have the same needs for physical activity.

Tips for Getting Physically Active

- ▶ Just going for a 30 minute walk or wheel will help your health.
- ▶ Large indoor spaces like malls can be good places to get some physical activity when the weather is bad.
- ▶ Community centres and schools offer sports and recreation programs in most areas. If your local centre's programs are not accessible, talk to the staff about your needs and talk to other people to find out about other places to get involved.
- ▶ Short periods of activity every day are better than occasional hard workouts. Wheeling a wheelchair or walking for half an hour a day are good ways to get active.
- ▶ Try to get involved in different types of physical activity. Aerobic activities get your heart rate up, which is good for heart health, weight control and mental health. Walking, dancing, wheeling, swimming, or even shoveling snow or vacuuming are all forms of aerobic activity. You should also try to build strength, for example by using weights or carrying groceries. Stretching will help you increase your range of motion in muscles and joints, for example by doing yoga, Tai Chi or Pilates.
- ▶ Upper body activity can be a good option for people who use wheelchairs. Use hand weights to develop muscle strength.
- ▶ Functional electrical stimulation (stimulating muscles with low level electricity) can help people with little motor control get the physical activity they need.
- ▶ Exercising with a partner can boost your motivation and help you be physically active safely, especially if you have a vision or mobility impairment.
- ▶ Physical therapists and recreation specialists can help you design a physical activity program that suits your needs and abilities.



Some important points to keep in mind about changing your level of physical activity:

- If you have a physical disability and decide to get into a new activity program, check with a doctor or other professional before starting.
- If pain makes it hard for you to be physically active, talk to a doctor, recreation professional or physical therapist about ways to get active despite the pain.
- There are many different ways to get the activity you need, and physical activity may help to reduce pain if it is done in the right ways.
- If you are not used to being physically active, start with short bouts (about 10 minutes) and make your sessions longer as you go on.
- You don't have to get involved in a structured program. Hiking in the woods, cutting the grass, playing catch with the kids, or swimming at the lake can be just as beneficial as organized programs at a gym.



Don't let Barriers Get in Your Way

- There are organizations that help with the cost of sports equipment and program fees, especially for children. Talk to your local community services or municipal recreation department to find out if you qualify.
- There are many different types of sports and recreation programs (like sailing, skiing and horse back riding) that make accommodations for people who have disabilities. Find out what is available where you live by checking the *EnableLink* website (www.enablelink.org) or asking at your local community centre.

Healthy Eating – Learn How to Eat Healthy and Do It

What is healthy eating? Is it complicated? Is it expensive? Is it boring? Does it mean having to eat broccoli? Eating healthy may not be high on your list of priorities, but it should be. What we eat plays a direct role in our health. This should not be news to you – it's everywhere, on the news, in magazines, on TV, radio and the talk at the local playground. We all know we should pay attention to what we eat. The harder part is knowing how to eat healthy. The hardest part is doing it.



Pizza, chips, hamburgers and fries – if you are an average Canadian, you probably eat these foods because they are tasty, convenient and cheap, even though you know they don't make up a healthy diet. Enjoyment plays a big role in how we decide what to eat. So do cost and convenience. You may believe that eating healthy means eating bland food, spending hours cooking and a fortune on obscure foods, and giving up everything you love to eat. In fact, healthy eating is not expensive, bland or a lot of work. And in the long run it costs a lot less to eat if you cut down on the junk food. Healthy eating does mean understanding your body's need for food and how to eat to meet those needs.



Even when people know a lot about healthy eating, it can be hard to find stores with healthy, affordable food close to home. The costs of fresh and healthy foods can be too high for people living on limited incomes. For people with disabilities, additional factors can get in the way of healthy eating. Medications may increase or lower the appetite, and depression and other mental health conditions can do the same. Some people do not have a lot of control over what they eat. For example, people who make use of personal aides for cooking and people living in institutions may not have much say in what they eat. And people who cannot use print because of a vision loss or learning disability may have difficulty finding information on healthy eating. Don't let these kinds of barriers get in your way – use the tips that follow to do whatever you can to make sure your body gets the nutrition it needs every day.

Basics of Healthy Eating

- ▶ Eat your meals at the same times every day.
- ▶ Do not skip meals.
- ▶ Do not overeat – eat a regular portion and wait 10 minutes after you've finished before deciding you need more food.
- ▶ Eat lots of fresh food – fruit and vegetable juice are also good.
- ▶ Avoid sweets.
- ▶ Avoid fatty foods – especially fried foods.

A basic healthy diet should include fruits and vegetables, whole grains, and protein. That may sound simple, but what is a whole grain, and doesn't fruit have a lot of sugar? Does protein just come from meat, or can you get it from other foods? Information on healthy eating can be confusing, and there is a lot of debate about



how to eat healthy (like, is red wine good or bad for your heart?). There are many places where you can get answers to these kinds of questions along with easy to use information that will help you figure out what you need to eat. Look in the **Useful Resources** section for suggestions.

Eating a healthy diet can help you keep your weight down, boost your energy, and may protect you from getting diseases like type 2 diabetes. Eating healthy can be hard for a number of reasons, including what you like to eat, what you can buy close to where you live, having to cook, and cost. People with some types of disabilities may have diet restrictions that limit the foods they can eat. However, many of these challenges can be overcome by learning about how to eat as healthy as possible with what is available to you. There is a lot of information about how to eat healthy in doctors' offices, on the internet, in magazines and on TV.

Basic Tips To Help You Follow A Healthy Diet

- **Use free or low cost healthy eating guides** like the **Canada Food Guide** and the Canadian Diabetes Association's **Beyond the Basics** to help you understand how to eat healthy (you'll find contact information in the **Useful Resources** section).
- **Use cookbooks that give you healthy, low cost recipes.** There are examples in the Useful Resources section, and libraries lend out cookbooks.
- **Read the 'Nutrition Facts' on food cans and packages** to understand what is in them. If you can't read the information on labels, ask someone to help you. Use the information in the following chart to help you when you shop for food.
- Make use of **grocery stores that deliver** if it's hard to find healthy food close to your home.
- Buy grains and other foods in **bulk** to lower the cost.
- Join a **food co-op** to have affordable access to food.
- Use your local **food bank**.
- Join or form a **community kitchen** with other people if cooking is a challenge for you – especially if you don't like to cook or cannot manage cooking.
- Include foods you really like in your diet so that you **enjoy eating**.
- Make mealtimes a **pleasant** time.
- When you eat out, choose **healthy menu items** (some restaurants label items as healthy in their menus).
- Talk to a **dietitian** if you have special dietary needs.



How to Read a Nutrition Facts Label

Serving Size – tells you the size of the standard serving for one person

Servings per Container – how many standard servings are in the container

Calories – number of calories in a standard serving

Total Fat – amount of fat in one standard serving (fat has the most calories)

Saturated Fat – increases risk of heart disease. Saturated fats should make up no more than 7% of the total calories you eat each day, or 15.5 grams of saturated fat for the average person

Trans Fats – these are even more harmful to your health than saturated fats. Only 1% of your daily calories should come from Trans Fats, or 2 grams in a 2000 calorie day

Monounsaturated and Polyunsaturated Fat – good fats that help keep your heart healthy

Dietary Fibre – found mostly in fruits, vegetables, nuts, seeds, whole grains and beans. Dietary fibre helps you digest food and keep your weight down.

Cholesterol – found in meats, dairy products, and in shrimp and egg yolks. Cholesterol plays a role in heart disease and people should have no more than 300 milligrams of cholesterol a day

Sodium – amount of salt. You should have no more than 2,400 milligrams of salt a day.

Total Carbohydrate – amount of carbohydrates in a standard serving

Sugars – amount of sugar. Stay away from foods with a lot of sugar, and keep your daily sugar intake lower than your intake of both carbohydrates and fibre together

Protein – amount of protein

Vitamins and Minerals – usually the amount of vitamins A and C, calcium and iron

Community Kitchens

The community kitchen model

started in Canada, and has spread around the world. A community kitchen involves a group of people or families that finds a space for cooking together. They buy food in bulk and share costs, shopping and cooking chores.

Community kitchens help people eat healthier food for less money, and connect people to others in their communities.

Community kitchens often find space in community centers or churches.

Community organizations can help you form a community kitchen. There is information on how to start a community kitchen in the **Useful Resources** section.

Healthy Weight – Keep Your Weight Down

Obesity has been in the news a lot lately due to concerns that there is an ‘obesity epidemic’ in North America. ***Most people are overweight at the time that they are diagnosed with type 2 diabetes*** . Keeping your weight under control brings many health benefits, including lowering joint and muscle pain, reducing stress and preventing chronic diseases like diabetes and heart disease. People who have limited mobility due to paralysis, fatigue, vision loss or chronic illness tend to be overweight because of physical inactivity. For people with a spinal cord injury, changes to the body following the injury (for example, lower metabolism and loss of muscle) along with a lower activity level can lead to obesity. ***Eating a healthy diet and being physically active are the best ways of maintaining a healthy weight.*** Dietitians, recreation leaders and exercise specialists can help you develop a plan that will help you control your weight.

It is better to eat healthy on a regular basis than to try dieting. Eating healthy will lower the amount of calories you take in day by day and will help your body process foods. Dieting can lead to rapid loss of weight that easily comes back. Tips for keeping your weight down include:

- Eat a diet that is low in sugar and fats
- Avoid fried food
- Avoid junk food
- Eat smaller portions
- ***DON'T SUPERSIZE IT!***
- Avoid restaurant buffets
- Eat regular meals and snacks – skipping meals can make you feel even hungrier
- Eat breakfast – people who eat breakfast tend to weigh less
- Drink lots of water



Monitor Your Medications – Watch for Complications

Many people with disabilities take medications on a daily basis, and some take more than one type of pill. If you take daily medications, pay attention to your health and if you start to notice changes, especially negative changes like the ones listed in the **Symptoms Of Diabetes** chart, talk to your doctor about possible drug reactions or interactions between different drugs you take.

Get Regular Check-Ups - Monitor Your Health

It is very important to get a health check-up from your doctor or a clinic every year, especially if you have any of the risks for developing type 2 diabetes or if you already have diabetes. Health care services may have barriers to accessibility, and you may have to advocate to get the health services you need. If you cannot see a doctor every year due to access problems, talk to your closest Independent Living Centre or community service centre to find out what can be done.

Pay attention to your own health. If you start to have symptoms like of diabetes the ones described in the first section, go to see a health professional and talk about what these changes mean. Work with health professionals to make sure you get the care you need. Take care of yourself. ***The most important factor in your health is you.***



Meeting Life Head On – David’s Story

I first met David when he attended one of our monthly dive club meetings. The Pacific Northwest Scuba Challenge is a unique dive club in that it has people with and without disabilities as its members. When I noticed David, I didn’t notice that he had a disability. It wasn’t until his companion helped him get seated that I realized he was blind. I must admit this did strike me as a little strange, that someone who was blind would want to scuba dive, but later in our relationship, when I really got to know him and realized his unique perspective on life, it seemed like the most natural thing in the world.

I learned he had been born with type 1 diabetes. From an early age, David was told that he had to be very careful with his diet. He also told me that he was a very willful child, and as a teenager he ate whatever he wanted without following the advice about healthy eating. As a result, his unmanaged diabetes led to the loss of his sight. David’s experience, coupled with my own knowledge of diabetes, really reinforced in me the importance of a healthy lifestyle in combating disease.

Some people with mobility impairments such as my own (paraplegia) tend to be much less active than they might like to be, and rely on fast foods that have a lot of sugar and fat. This kind of a lifestyle can lead to the onset of type 2 diabetes and can have serious implications for peoples’ health. I moved to another city and the two of us lost touch. His story really touched me though; his incredible attitude has always been an inspiration, and his story a very dramatic and cautionary tale.

Miles Stratholt
Victoria British Columbia

How Can You Take Care of Yourself if You Have Diabetes?

Taking care of yourself is a top priority for people who live with either type 1 or type 2 diabetes. There are many ways to stay healthy even if you have diabetes. In order to protect yourself from developing heart attacks, kidney failure, blindness or nerve damage as a result of living with diabetes, you have to take the lead in caring for your health.

All of the advice about preventing type 2 diabetes is smart advice for people living with diabetes. Regular physical activity and eating well are key to managing your diabetes effectively. Working with your diabetes health care team is very important, as is monitoring your blood glucose (sugar) level every day. All type 1 diabetics need to take insulin injections every day. People living with type 2 diabetes may start out managing their disease through healthy eating and physical activity, but because diabetes is a progressive disease, doctors will prescribe up to 8 different oral medications to manage their blood glucose, blood pressure and cholesterol levels and to prevent kidney disease. A lot of information on taking care of yourself with diabetes can be found through the **Useful Resources** section of this newsletter. The following tips will help you learn the basics of how to take care of yourself with diabetes.

How is Diabetes Treated?

People with disabilities who are diagnosed with diabetes can live active and independent lives if they commit to careful diabetes management, which includes:

- **Diabetes education** - everyone with diabetes needs to be informed about how to manage and live well with this disease.
- **Physical activity** - helps your body lower blood glucose (sugar) levels, promotes weight loss, reduces stress and enhances your overall sense of well-being.
- **Healthy diet** - what, when and how much you eat plays an important role in living healthily and well with diabetes.
- **Weight Management** - a healthy weight is especially important in the management of type 2 diabetes.
- **Medication** - Type 1 diabetes is always treated with insulin. Type 2 diabetes may be managed at the beginning with physical activity and diet, but over time may require medications and/or insulin to assist your body in making or using insulin more effectively.
- **Lifestyle Management** - reducing stress levels in day to day life can help people with diabetes better manage their disease.
- **Blood Pressure** - High blood pressure can lead to eye disease, heart disease, stroke and kidney disease, so people with diabetes should try to maintain a blood pressure level at or below 130/80.



Lifestyle Strategies for Living Well with Diabetes

- ▶ Work with your diabetes health care team and follow your diabetes management plan every day.
- ▶ Know your ABCs – know the recommended target levels for your A1c - blood glucose (sugar), Blood pressure and Cholesterol levels.
- ▶ Ask your doctor to send you for diabetes education.
- ▶ Monitor your blood glucose every day and make the necessary adjustments to your medications or lifestyle.
- ▶ Take your prescribed medications as directed by your doctor.
- ▶ Monitor your weight, your blood pressure and your cholesterol to keep on top of your health.
- ▶ If you smoke, stop smoking. If you don't, avoid smoking.
- ▶ Get an annual flu shot.
- ▶ Wear a diabetes identification tag all of the time.
- ▶ Seek support from professionals, family and friends.
- ▶ Talk to other people who have diabetes.

The most important thing you can do to protect your health if you have diabetes is to take charge of your health. Make sure you or a family member or friend understands what is going on and what to do about it. If you have a hard time making decisions about your care, ask for more information and find support to help you make your decisions.

Health Care Professionals Who Provide Care for Diabetes

- | | |
|---|---------------------------------------|
| ▶ Doctors | ▶ Exercise professionals |
| ▶ Nurses | ▶ Pharmacists |
| ▶ Diabetes Educators | ▶ Eye care specialists |
| ▶ Endocrinologists (doctors who treat disorders of the endocrine system and hormones) | ▶ (Ophthalmologists and Optometrists) |
| ▶ Dentists | ▶ Foot care specialists (Podiatrists) |
| ▶ Physical Therapists | ▶ Social Workers |
| ▶ Dietitians | ▶ Psychologists |



If you have diabetes, you should see your doctor regularly. Your doctor will be prescribing regular checks to help you manage your diabetes according to the best available evidence and clinical practice. These include the ABCs of diabetes management:

- A – lab tests to measure your A1c levels (to see your blood glucose or sugar levels over the past 6 months).
- B – monitoring your blood pressure.
- C – measuring your cholesterol levels.

Your doctor may prescribe lab tests to see how well your kidneys are functioning as well. And you should also have a dental checkup and an eye exam every year.

Finally, ask your diabetes educator or your pharmacist to help you check your blood glucose monitor regularly. The monitor which measures your blood glucose or sugar levels from a test strip that you use daily, needs to be coded appropriately to ensure the information you are getting is accurate. Be sure to have it checked regularly!

The Good News

Don't let all the information on diabetes scare you. ***The good news about type 2 diabetes is that there are lots of ways you can reduce or delay your risk of getting it.*** If you already have diabetes, there are many ways to stay healthy and avoid the serious complications. There are also many organizations and professionals who can give you advice, support and services to help you manage and live well with your diabetes. And while there are millions of people all over the world who are affected by diabetes, that also means that there are many people who share the experience of living with diabetes who can support one another and add to our knowledge about diabetes.

The other piece of good news about diabetes is that active living, healthy eating and not smoking can help you reduce your risk of getting type 2 diabetes and keep you healthy if you live with diabetes. ***Healthy living is a way of taking control of your life.***

The best news is that the most important factor in managing diabetes is YOU! Use this newsletter as a jumping off point to make sure that you are doing all you can to take charge of your health and lead a healthy, active life.



Taking Control – Michelle's Story

Ten years ago, diabetes burst uninvited into my life! I had been hospitalized with a host of other ailments when I developed an insatiable thirst that could not be quenched. I was angry that my health had spiraled out of control, that my muscles were not working, and that I was spending most of my time in a hospital bed.

I vividly remember an enthusiastic diabetes nurse coming into my room to begin teaching me how to live with diabetes. I told her I did not want to have any conversation about managing my diabetes. It is not that I feared taking needles or watching my diet (I watched my diet anyway). It was just that on top of my other medical conditions, diabetes would create further bondage to the health care system. However, when I took some time to thoroughly examine my health situation, I realized that the one area I could have control over was my diabetes!

At first, I was on a pretty consistent diet and took the same amount of insulin each day. I have a mobility disability and at that time was using a wheelchair, so my physical activity didn't change much. As I became more familiar with diabetes and diet control, I started counting carbohydrates and adjusting the amount of insulin I took to meet my own needs at each meal. Because I often feel nauseous, particularly in the morning, I find the rapid-acting insulin lets me eat first and then calculate the insulin dose I need. This is great if I eat more or less than I intended to first thing in the morning! Like most people with disabilities, I learned to adapt to a body that functions differently, so I just do regular blood sugar checks to manage my diabetes.

I am tremendously successful in managing all aspects of my diabetes. Although I may not accomplish my goals in exactly the same way as others, I firmly believe diabetes is the one health condition I have the most control over. And it is empowering to be in control!

Michelle Murdoch (living with type 1 diabetes)
St John's NL

USEFUL RESOURCES

SOURCES	RESOURCES	CONTACT INFORMATION
Information on Diabetes		
Canadian Diabetes Association	A lot of easy to read, reliable information about diabetes is available on their website, in pamphlets and reports, and in their offices.	www.diabetes.ca 1-800-BANTING (Or 1-800-226-8464) There are 29 Regional Leadership Centres across Canada.
Diabète Québec	This is a Quebec based diabetes resource serving Francophones.	www.diabete.qc.ca
Public Health Agency of Canada	Reliable information about diabetes in Canada. Includes information on prevention, treatment and living with diabetes.	www.phac-aspc.gc.ca
National Diabetes Information Clearinghouse (U.S.)	Reliable scientific information about diabetes.	diabetes.niddk.nih.gov/about/dateline/spri02/8.htm



SOURCES**RESOURCES****CONTACT INFORMATION****Information on Physical Activity**

Active Living Alliance for Canadians with a Disability	Reliable information on how people with disabilities can lead active and healthy lives	www.ala.ca
Canadian Abilities Foundation	EnableLink is a list of sports and recreation services across Canada that provide programs for persons with disabilities. They also have information on many other disability issues.	www.enablelink.org/sports
Canadian Physiotherapy Association	S.M.A.R.T. brochures on how to be physically activity easily. Information on what physiotherapy is and how it helps people. Information on how to find a physiotherapist.	www.physiotherapy.ca
National Center on Physical Activity and Disability (U.S.)	Lots of advice on being active with a disability and on healthy eating and healthy weights. A video/DVD and a Quick Series of booklets are available on their website	www.ncpad.org
Disability Online (Australia)	Lots of free information about active living and healthy eating.	www.disability.vic.gov.au



SOURCES**RESOURCES****CONTACT INFORMATION****Information on Healthy Eating**

Healthy Eating	Illustrated recipe cards for low cost, healthy meals available as free downloads.	www.healthyalberta.com
Dietitians of Canada	The EatTracker program helps you figure out how many calories you are eating and how to lower the calories you eat. Let's Make a Meal! Helps you develop weekly meal plans and compare the benefits of different recipes, ingredients and dishes. Both are available on their website	www.dietitians.ca
Canadian Diabetes Association	Beyond the Basics gives lots of tips on healthy eating. Traditional Aboriginal recipes for healthy eating.	www.diabetes.ca
Public Health Agency of Canada	The Canada Food Guide is available for free on their website and in print. There is a lot of health information available on the Health Canada website.	www.hc-sc.gc.ca



SOURCES

RESOURCES

CONTACT INFORMATION

Information on Accessible Equipment

CNIB

Formerly called the Canadian National Institute for the Blind. Their Products for Independence Catalogue includes accessible blood sugar monitoring equipment. They also provide support for adjusting to vision loss.

www.cnib.ca

Information on Independent Living and Advocacy

Canadian Association of Independent Living Centres

Provide information, advice and advocacy on independent living issues.

www.cailc.ca



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www.ala.ca