

CDC: POWER TO PREVENT DIABETES

Power to Prevent



A Family Lifestyle Approach to Diabetes Prevention



PREVENTING T2DM IN AFRICAN AFRICANS

More than 3 million African Americans 20 years or older have diabetes. Consequently, they are at risk for blindness, kidney and heart disease, stroke, high blood pressure, and amputations. Moreover, the financial impact on humans with diabetes, especially African Americans, is great. In 2002, a United States survey estimated the cost of health care treatment for diabetes to be USD92 billion, and indirect costs, such as disability and work attrition, are USD40 billion. Thus, finding ways to reduce the incidence of diabetes, especially among African Americans, is critical to improving health and saving money.

The Diabetes Prevention Program is a randomized clinical trial conducted by the National Institutes of Health, suggested that humans at risk for T2DM could defer or even prevent diabetes by making simple lifestyle changes. In T2DM, cells do not efficiently use insulin. Being overweight is a risk factor for becoming diabetic or pre-diabetic. Thus, study participants with such weight issues were included.

The *Power to Prevent* program consists of the following 12 sessions (usually held weekly for 6 weeks and then monthly for 6 months).

- Session 1: Introduction to *Power to Prevent*
- Session 2: Small Steps Lead to Big Rewards
- Session 3: Strategies for Healthy Eating
- Session 4: Physical Activity—Get Moving Today
- Session 5: Make Healthy Food Choices One Day at a Time
- Session 6: Diabetes Overview, Parts 1–3 (OPTIONAL session; may be conducted in one meeting or divided into three meetings for more in-depth discussion)
- Session 7: Physical Activity for Families
- Session 8: Portion Size
- Session 9: Navigating Around Eating Out
- Session 10: Partner with Your Health Care Provider
- Session 11: Get Your Family and Friends Involved
- Session 12: Celebrate Big Rewards

On completing this program, you will have learned many of the skills that you need to make healthy changes in your life, and you will have learned how to incorporate healthy eating and increase physical activity into your family's lifestyle.

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The incidence of diabetes was 58% lower in the group who made dietary adjustments, such as losing 7% of initial body weight (average weight loss of 12.3lb) and increased exercise than it was in the control group.

Minorities were included in the Diabetes Prevention Program because race is a risk factor for diabetes. African Americans are 1.8 times as likely to become diabetic as non-Hispanic whites. Dr James R. Gavin III, former chair of the National Diabetes Education Program, suggested that preventing diabetes among African Americans needs to start in their communities. Thus, the *Power to Prevent Program*, a descendant of the Diabetes Prevention Program, was created to be used in the African American faith-based communities.

The course consists of 12 to 14 educational sessions designed to educate participants to become better educated about diabetes and make lifestyle changes that will postpone or prevent T2DM. The first five sessions are designed to get participants to make small changes, such as reducing fat from their diets, selecting healthy foods, and incorporating exercise into their lifestyles. The program provides information and models step-by-step how to make effective changes. For example, portion control is achieved by dividing a 9-inch plate into one-half vegetables, one-quarter whole grains and one-quarter lean meat or fish. Session 6 is about diabetes education and includes information regarding Medicare coverage for diabetes equipment and supplies. Sessions 7 through 11 are devoted to including the family when making lifestyle changes, issues and questions to discuss with the group member's medical provider, and choosing healthy foods when eating out. The last session is to celebrate the achievements made by the group.

This type of program may influence additional health outcomes. In a recent study, for example, African American adults with diabetes reported fewer cardiovascular disease events, possibly as a result of positive lifestyle changes that eliminate the risk factors associated with heart disease (such as smoking, lower blood pressure). Information about the *Power to Prevent* can be found at www.cdc.gov.

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PICTURES ON THESE PAGES WERE ALL TAKEN FROM POWER TO PREVENT, THE 253-PAGE DOCUMENT PUBLISHED IN 2007 BY CENTERS FOR DISEASE CONTROL.

Who is at High Risk for Diabetes?

Ask: "Can anyone tell us what puts a person at increased risk for diabetes?"

Write the risk factors on the flipchart. Be sure to list the following:

- Family member with diabetes (blood relative)
- Older age (type 2 diabetes is more common as people get older). About 1 in 10 people over age 20 years have diabetes; but for people aged 60 and older, 1 in 5 have diabetes.
- Being overweight or obese.
- Sedentary lifestyle (not much physical activity).
- History of diabetes during pregnancy (gestational diabetes).
- Being a member of certain ethnic group: African American, Hispanic/Latino, American Indian/Alaska Native, and Asian American and Pacific Islander.