

Got Sugar?

Wesley Heights Community Participatory
Diabetes Screening Event



Introduction

- Community partnership to increase the prevention, detection and management of diabetes in African Americans in Greeneville and Greene County specifically Wesley Heights
- Screening and Education event conducted at the Negro Women's Civic Center on November 3rd
- 28 community participants

Greene County Demographics

- Population of 62,909 51.3% are female and 48.7% are male
- 2.1% are African Americans 657 males and 670 females
- 9.6% have less than a 9th Grade education
- 69.9% have graduated from high school, ranking Greene county 45th in Tennessee
- 12.8% have obtained a Bachelor's degree
- 10% are provided health care through TennCare

Wesley Heights Community Demographics

- Historically an African-American community
- Located within 5-6 blocks north of downtown Greeneville
- Approximately 7 churches with close relationships within church families

Needs Statements

- 20.8 million Americans (7%) have diabetes¹
- African American are 1.8x more likely to develop diabetes¹
- Rural African Americans don't realize that weight and lack of exercise are risk factors for developing diabetes²
- African American females have an increased risk of developing Type 2 diabetes due to preventable risk factors³
- Diet, weight loss and exercise can be used to prevent the onset Type 2 diabetes⁴
- Lifestyle interventions have proved to be successful in weight and glycemic control in in rural communities⁵

Project Goal of the Community Partnership

- Increase the
 - prevention,
 - detection, and
 - managementof diabetes in African Americans in Greeneville and Greene County.



Objectives

- Recruitment
 - Recruit members of the Wesley Heights Community to participate in diabetic screening event
 - Develop and implement a healthy diabetic breakfast for the Wesley Heights
- Screening
 - Develop and implement a screening event for diabetes for African Americans in Wesley Heights Community
- Education
 - Develop and implement education methods to inform individuals how to prevent, detect, and manage diabetes
 - Develop and implement an evaluation plan for activities involved in the project

Implementation - Recruitment

- Developed an event flyer
- Distributed flyers to community churches and homes
- Churches announced the event before services
- Broadcasted event details via TV/Radio
- Continual communication with community leaders to coordinate the event
- Offered free diabetic friendly breakfast and door prizes as an incentives

Implementation - Screening

- Obtained donated materials from ETSU school clinic (gloves, gauzes, and alcohol pads)
- Acquired glucometers, lancets, and sharps container from ETSU's Department of Family Medicine and hand sanitizer and sharps container from Laughlin Memorial Hospital.
- Borrowed portable privacy screens from Greene County Health Department
- Developed a tracking system to record results and provide participants with a personal record

Implementation - Screening

- Located health care professional (Dr. Florence) to supervise the screening process
- Written consent obtained from all participants
- Blood glucose levels from 28 community members were measured



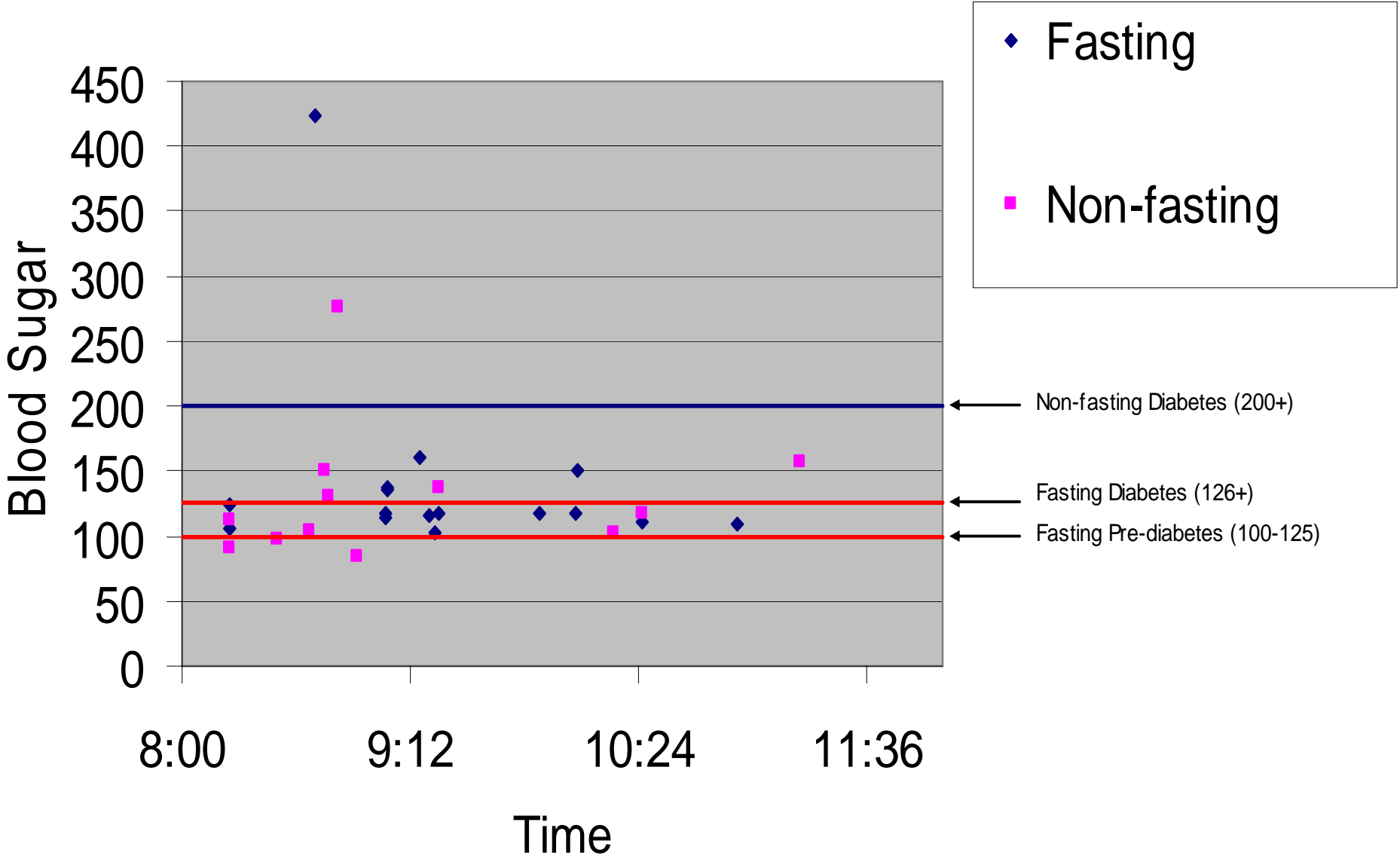
Implementation - Education

- Education guidelines were developed for diabetics, non-diabetics and pre-diabetics
- Education materials for the screening were donated by the American Diabetes Association and Laughlin Memorial Hospital to distribute to participants
- Diabetic educational material were packaged and distributed to participants
- Personal education was given to individuals based upon their glucose levels and history
- Evaluation surveys were distributed to all participants

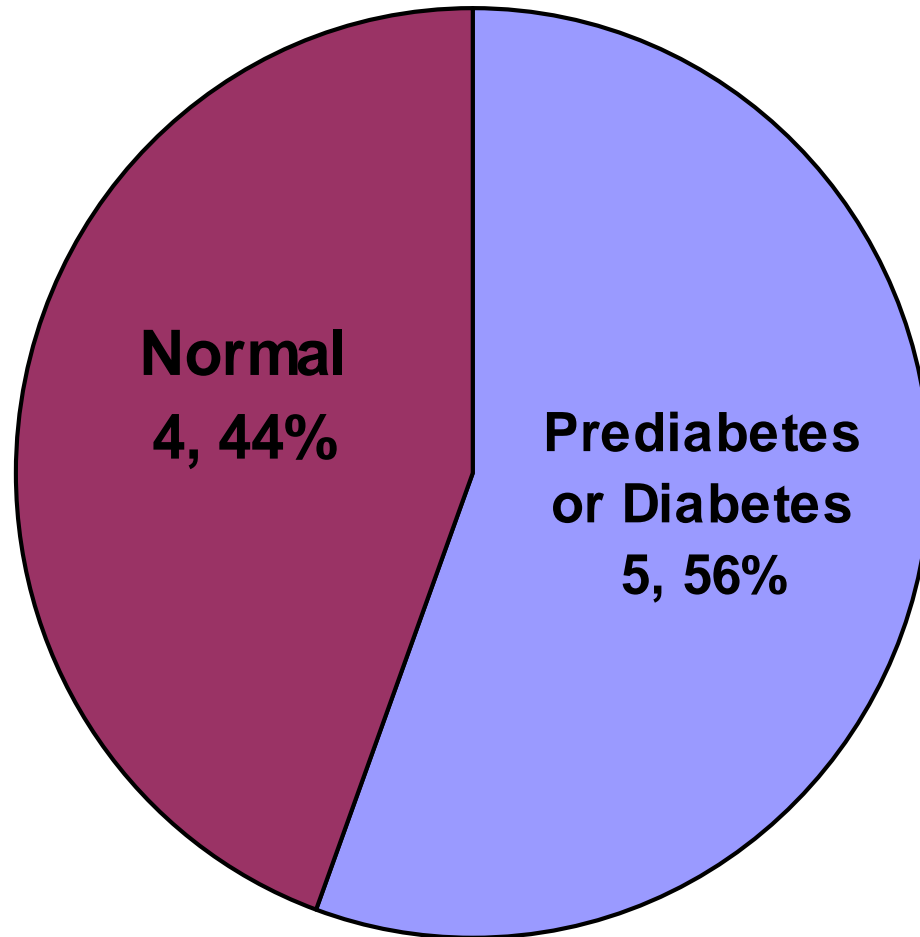
Results

- 28 community members attended screening
 - 27 African Americans, 1 Caucasian
 - 17 females, 10 males, 1 unreported
- Mean Age of Attendees = 55 years old (Range = 7 – 89 years old)
- Attendee's Medical Histories:
 - 9 never before screened for diabetes
 - 19 attendees previously diagnosed as pre- or clinical significant diabetes

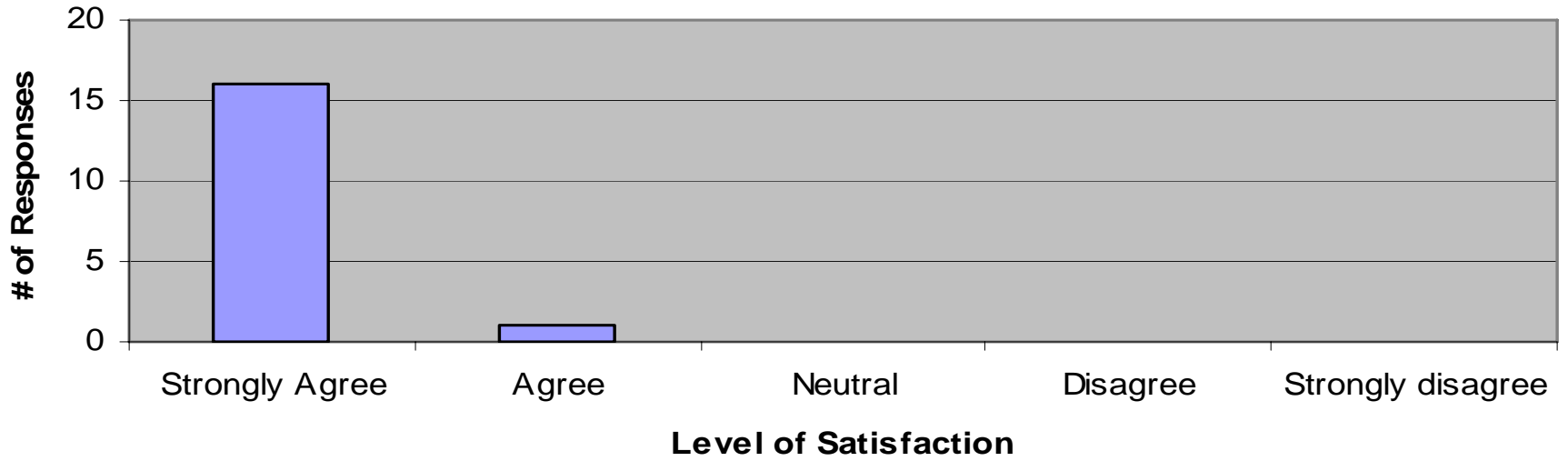
Blood Sugar Record vs Time



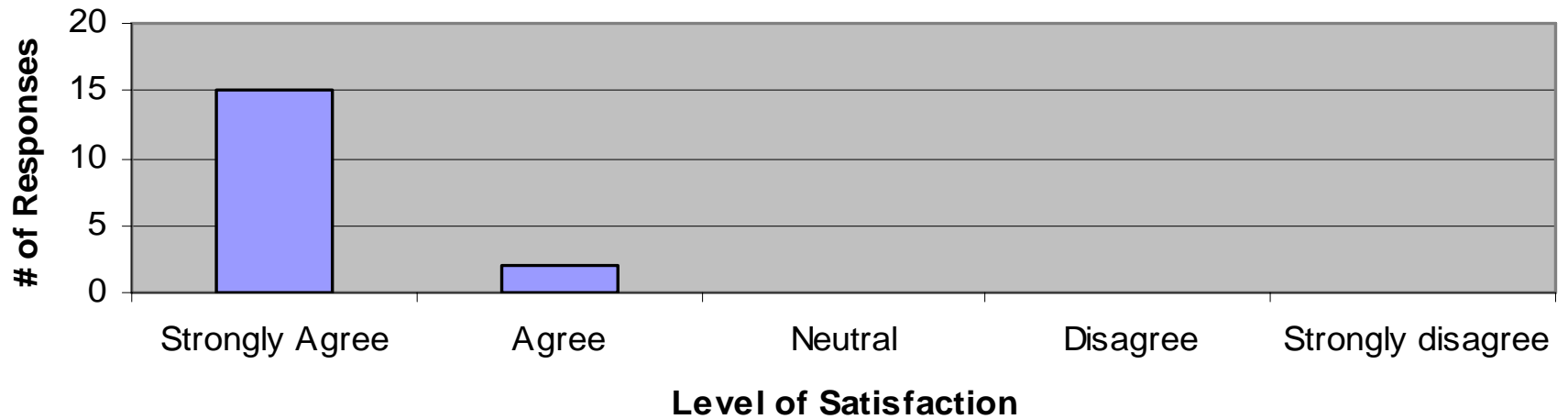
Blood Sugar Outcome of "Never Before Screened" Attendees



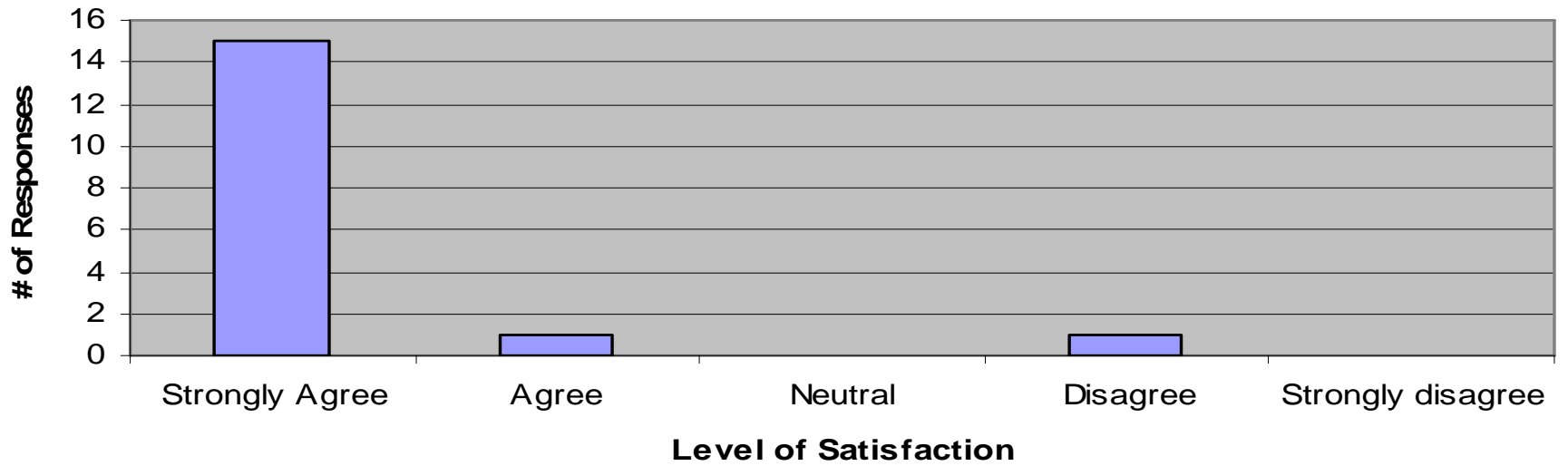
"I was Made to Feel Comfortable While Getting my Blood Sugar Tested"



"I Found the Information about my Blood Sugar Results to be Helpful"



"The Diabetes Education Information Presented was Useful."



"The Materials Given were Helpful"





“I liked the information I found out concerning myself because diabetes runs in my family and I felt like I have knowledge of what I need to do. The information was a relief for me.”

-Attendee

Discussion

- Strengths of Project
 - Strong partnership with community leaders resulting in open and steady communication.
 - Well-coordinated relationships with all the community churches.
 - Highly motivated community members.
 - Abundance of donated supplies for screening and education.

Discussion

- Weaknesses of Project
 - Time constraints
 - Conflicting schedules between students and community leaders.
 - Upfront indecisiveness regarding project event.

Recommendations for Future Study

- Continue to build upon established momentum by continuing on diabetes forefront
- Include entire city of Greeneville
- Extend screenings to an annual basis
- Increase screening time from 3 to 6 hours
- Have periodic educational diabetes seminars

Reflections/Lessons Learned

- Need for community clinics.
- Surprising # of attendees in the pre-diabetic range.
- Need for longer screening period.
- Not enough emphasis on child screening.
- Difficult to educate in 15 minutes about a disease that affects many aspects of life (diet, exercise, medications, etc.)
- Lack of non-church-going participants.
- How do you deal with patient fear/denial?

Special Thanks



- Community Members
 - Leroy Ripley
 - Pastor Thomas Watson
 - Mrs. Jones
 - Anna Maddox
 - Rev. Sharon Bowers
- Faculty
 - Dr. Dorothy Dobbins
 - Dr. Mary Ann Littleton
 - Dr. Joe Florence
- ETSU Family Medicine
- ETSU Student Health Clinic
- Laughlin Memorial Hospital
- Greene County Health Department

Works Cited

1. All About Diabetes. Retrieved October 3, 2007, from American Diabetes Association Web site: <http://www.diabetes.org>
2. Skelly, AH, Dougherty, Molly, Gesler, WM, Soward, CM, Burns, D, & Arcury, TA (2006). African American beliefs about diabetes. *28*, 9-29.
3. Branacati, FL, Kao, LW, Folsom, AR, Watson, RL, & Szklo, M (May 3, 2000). Incident type 2 diabetes mellitus in African Americans and white adults: the atherosclerosis risk in communities study. *JAMA: Journal of the American Medical Association*. *283*, 2253-2259.
4. National Diabetes Statistics (2005, November). Retrieved October 3, 2007, from National Diabetes Information Clearinghouse Web site: <http://diabetes.niddk.nih.gov/dm/pubs/statistics/index.htm>
5. Mayer-Davis, EJ, D'Antonio, AM, Smith, SM, Kirkner, G, Martn, SL, & Parra-Medina, D (October 2004). Pounds off with empowerment (power): a clinical trial of weight management strategies for blk and white adults with diabetes who live in medically underserved rural communities. *94*, 1736-1742. National Diabetes Statistics (2005, November). Retrieved October 3, 2007, from National Diabetes Information Clearinghouse Web site: <http://diabetes.niddk.nih.gov/dm/pubs/statistics/index.htm>