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- **Notice of Requirements For Successful Completion**
 - Please refer to learning goals and objectives
 - Learners must attend the full activity and complete the evaluation in order to claim continuing education credit/hours
- **Conflict of Interest (COI) and Financial Relationship Disclosures:**
 - Presenter: Cecilia Sauter MS, RDN, CDE, FAADE – No COI/Financial Relationship to disclose
 - Presenter: Ann Constance MA, RDN, CDE, FAADE – No COI/Financial Relationship to disclose
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**No One Understands Me!
Helping People Live Well
with Diabetes**

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Learning Objectives

- Define empowerment and noncompliance in the context of people living with diabetes
- Describe the impact of diabetes distress on diabetes outcomes
- Discuss responses to psychological concern by reflecting on participant-identified concerns and/or behavioral issues

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Non-compliance


Different goals



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Meet Jan – Role Play




- 50 years old
- HTN, heart disease and diabetes
- Weight 280 pounds
- BP: 156/95 mm Hg
- A1c: 10 %
- Multiple medications
- Misses medications "sometimes" and checks blood glucose levels "when she thinks of it"
- Works at convenience store

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What Do You Think?

- What went well?
- What did not work?
- Suggestions?
- Ideas?



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What was missed?



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Empowerment



Helping people **discover** and use their **own** innate ability to gain **mastery** over their **chronic disease**

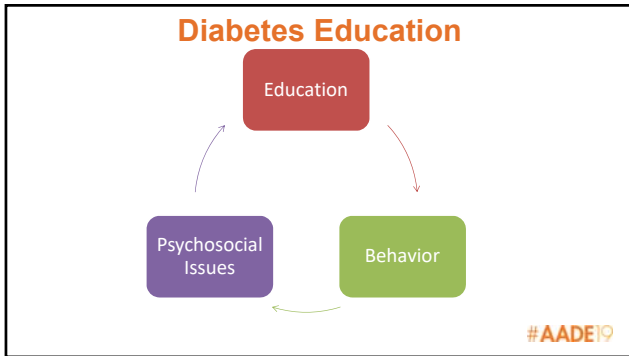
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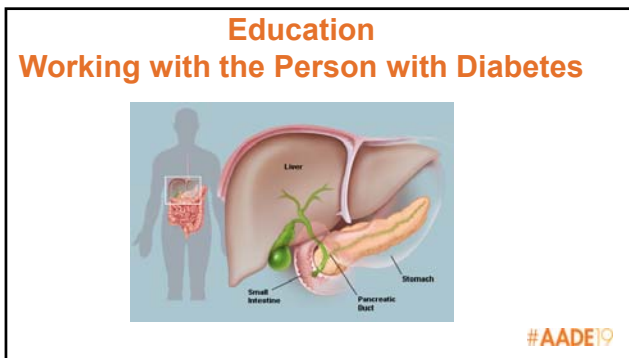
Give up feeling responsible for patients and become responsible to them

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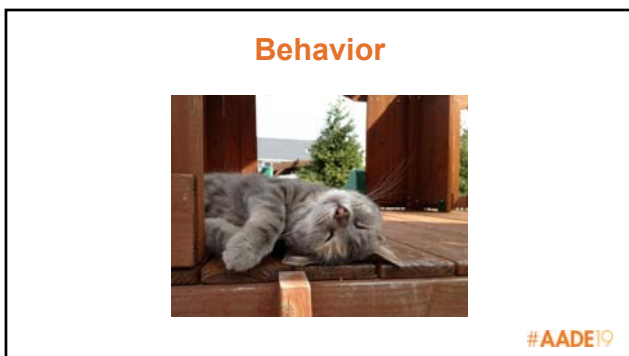
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Psychosocial Issues



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DAWN and DAWN2 Study

(Diabetes, Attitudes, Wishes and Needs Study)

Diabetes Distress is:

- Common
- Rarely addressed
- Seldom treated
- Impacting family members too.



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Illness Related Distress


- Fearful
- Frustrated
- Overwhelmed
- Anxious
- Guilty
- Angry
- Powerless
- Discouraged


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Does it Matter?

 A1C along with poor self management behaviors

 Self efficacy

 Change in meds, status, provider or health plan

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Serious Illness Related Distress

- Women
- Minorities
- Lack of insurance
- Diabetes

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What can we do?

- Recognize
- Understand
- Learn

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Instructions
 In the first four columns, please mark the number (0-10) that best describes how much emotional upset you have been experiencing in the past week, including today. In the final column please indicate how much you need help for these concerns.

	1. Distress	2. Anxiety	3. Depression	4. Anger	5. Help
Extreme					
None					

Can manage by myself

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Health Care Concerns Form



Four
Questions

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Assessment



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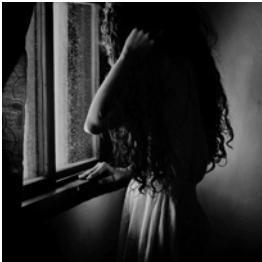
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Diabetes Distress Scale (DDS) Short Form



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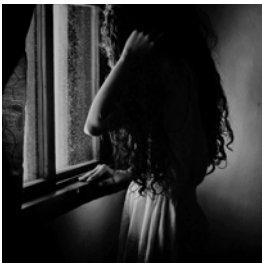


Problem Areas in Diabetes (PAID) Short Form

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Type 1 Diabetes Distress Scale



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AASAP

- Anticipate
- Acknowledge
- Standardize
- Accept
- Plan

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Empowerment Approach



5 Step Model

- Explore the problem
- Clarify feelings
- Develop a plan
- Commit to action
- Experience and evaluate plan

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Empowerment Approach



5 Step Model

- Explore the problem
- **Clarify feelings**
- Develop a plan
- **Commit to action**
- Experience and evaluate plan

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Step 2: Clarify Feelings

- Feelings are not problems to be solved



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THOUGHTS CREATE FEELINGS

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Responding to Emotional Concern



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Rate Your Response



Emotions and problem exploration
Focusing on goals/behavior change



Solving problems for the patient
Judging the patient

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Step 4: Commit to Action



- Collaboratively set goals.
- Create I-SMART behavioral experiments.

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I = Inspiring and Important

S = Specific

M = Measurable

A = Achievable

R = Relevant

T = Timely



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Putting It All Together



Emotional: How do you feel?
Clinical: What to do and why?
Behavioral: How will you do it?

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AADE7 Self-Care Behaviors®

Healthy Coping – recognize, normalize and address emotions.

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Shaping the Future of Our Specialty.



Integrating DM clinical management, self-management education, prevention and support.

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