About Our Program

We are a single-site program in a rural area. More than 95% of our population is English-speaking Caucasian with the remaining 5% from a very wide range of cultures.

Utilize Information to Adapt Sessions

The initial phone call to schedule diabetes education offers the first opportunity to identify any language, cultural, psychological or individualized considerations. This helps prepare slides, handouts and information to accommodate specific needs. It’s important to keep in mind that there are times that the needs identified may warrant individualized classes in lieu of group classes.

Our intake assessment is the next layer that asks questions that encourages our participants to express their individual, cultural, learning and language needs.

Next, we meet with participants individually for one-hour prior to group classes. This is an excellent time for very open dialogue to understand specific needs. Asking open-ended questions and getting the participant to talk is the key strategy to identifying what is important to them and what drives their behaviors. It’s also important to ask participants to help us be aware of any needs that may be relevant to their culture/lifestyle as they learn to manage diabetes.

Using all the information collected, we adapt slides ahead of time to meet the individualized needs throughout the group. For example, if someone in the class can only do upper-body exercises, we add slides that include exercises specific to upper-body and YouTube links that offer upper-body exercises. We also include handouts for upper-body exercise, for example.

For additional tips, visit DiabetesEducator.org/EngagingDSMES.