

Diabetes Wellness: American Indian Talking Circles Facilitator's Manual

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**DIABETES WELLNESS:
AMERICAN INDIAN TALKING CIRCLES
CURRICULUM GUIDE**

SECTION I: INTRODUCTION

RECRUITMENT – This can be done by personal contact, flyers in the community, newspaper ads.

Approach families, organizations, community groups -- people that already have a common bond between them

SESSION 1: INTRODUCTION

MAIN POINTS:

- ❖ Provide Information
- ❖ Make Circle members comfortable
- ❖ Give members an opportunity to discuss the impact of diabetes on them personally to promote their commitment to the Circles

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional story
- ❖ Curriculum Flip Chart
- ❖ Pretest questionnaires
- ❖ Pens
- ❖ Food diaries
- ❖ Incentive gift (example: bags to carry all their materials in)
- ❖ Refreshments (should be traditional or healthy choice)

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or ask circle members to say a traditional prayer for the circle and the food.
- ❖ Read traditional story.
- ❖ Introduction/Inclusion exercise:
Circle Facilitator to thank everyone for coming and introduce him/herself. Go around the Circle and ask each member to introduce him/herself and answer the question, “*How has diabetes affected your life?*”
- ❖ Describe Objectives for Session 1 from flip chart.

OBJECTIVES: (FLIP CHART)

- Introduce your diabetes project
- Introduce the meaning of the circles
- Introduce the circle members
- Complete pre-test questionnaire
- Distribute homework of the dietary recall log

When introducing the circle, emphasize: confidentiality, right to pass or not answer a question, housekeeping items such as where the bathrooms are, no smoking policy, need for regular attendance and dates/times of circles.

- ❖ Circle facilitator distribute the pre-test questionnaire. Provide instructions on how to fill them out. Last section on Diabetes History only to be completed if someone

has been told by a health care provider that they have diabetes. It should take 30 minutes to complete the surveys.

- ❖ Review objectives for Session 1 from flip chart to be sure they were all completed.
- ❖ Distribute the incentive gift.
- ❖ Refreshments

SECTION II: DIABETES

SESSION 2: DIABETES – Perceptions

MAIN POINTS

- ❖ Know myths from facts on diabetes.
- ❖ Begin the process of challenging a fatalistic perspective on diabetes.
- ❖ Begin the process of promoting empowerment and having the ability to overcome diabetes.

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional story
- ❖ Paper
- ❖ Pens
- ❖ Diabetes Wellness Video
- ❖ Curriculum Flip Chart
- ❖ Myths of Diabetes Handouts
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or ask circle member to say traditional prayer for circle and food.
- ❖ Read traditional story.
- ❖ Inclusion exercise:
 - Star exercise: Hand out a piece of paper and pen to each person. Ask them to draw a five-pointed star on the paper. Tell them that they will be asked to write something on the point of each star that they will be asked to share.
 - Point 1. Favorite Food
 - Point 2. A famous person with whom they would like to visit.
 - Point 3. Something they like to do in their free time.
 - Point 4. Something they hope to learn in the Talking Circles.
 - Point 5. Why they decided to participate in the Talking Circles.
- ❖ Describe Objectives for Session 2 from flip chart.

OBJECTIVES: FLIP CHART

- Collect the dietary recall log.
- Watch the Diabetes Wellness Video.
- Look at people's perceptions of diabetes.
- Learn diabetes myths from fact.

- ❖ Collect Food Diaries.
- ❖ Show Diabetes Wellness Video.
- ❖ Ask members for comments on the video and their beliefs about diabetes.
- ❖ Distribute Dr. Lehmann's *Myths of Diabetes* handout. Review myths and facts using the flip chart. Promote group discussion on myths and facts.

Diabetes has always been with us, is in all of our families, and is inevitable in our lives. (FALSE)

Nothing that we can do can influence our chances of getting diabetes or help control our disease once we get diabetes. (FALSE)

Diabetes usually shows symptoms when it first starts in the body. (FALSE)

If I must take insulin for diabetes, I will have a poorer outcome than someone who doesn't. (FALSE)

Giving myself a shot of insulin is extremely painful. (FALSE)

Once a person develops a complication from diabetes, there is nothing that can be done. (FALSE)

Diabetes only affects the body, not the mind. (FALSE)

- ❖ Review Objectives for Session 2 from flip chart to be sure they were all completed.
- ❖ Thank circle members for their participation, attendance and commitment.
- ❖ Refreshments.

SESSION 3: DIABETES – Facts and Prevention

MAIN POINTS:

- ❖ Increase knowledge of diabetes
- ❖ Be able to recognize warning signs of diabetes
- ❖ Provide primary prevention actions the members can take

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional story
- ❖ BINGO sheets
- ❖ Flip chart
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or ask circle member to say traditional prayer for circle and food.
- ❖ Read traditional story.
- ❖ Describe Objectives for Session 3 from flip chart.

OBJECTIVES: FLIP CHART

- Understand the different types of diabetes
 - Know who is at risk of diabetes
 - Recognize the warning signs of diabetes
 - Know how to prevent diabetes
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- ❖ Normal breakdown of food – Using the Flip Chart. The body breaks up food in the stomach into sugars called glucose. The glucose enters the blood stream to be used for growth and energy. The pancreas is a large gland behind the stomach. The pancreas produces the hormone insulin. Insulin unlocks the body's cells to allow the glucose to enter.
 - ❖ Definitions – Using the Flip Chart
 - Type I: Insulin is not produced
 - Type II: Insulin is not effective
 - Gestational: When pregnant only
 - Secondary: Caused by damage to the pancreas
 - ❖ When we say “Diabetes” in the talking circles, we are referring to Type II Diabetes.
 - ❖ A risk factor means you are at higher risk of developing diabetes if you fall in one of these categories, but it does not mean you definitely will develop diabetes.
 - ❖ Risk factors – Using Flip Chart
 - Family members with diabetes

- Overweight
 - Over age 45
 - Don't exercise regularly
 - Women who had gestational diabetes or a nine pound plus baby
 - African American (10.8% of African Americans versus 5.2% of the general population)
 - Hispanic American (10.6% versus 5.2% of the general population)
 - American Indian or Alaska Native (12.2% versus 5.2% of the general population)
- ❖ Warning signs for diabetes – Using Flip Chart
 - Frequent urination
 - Unusual thirst
 - Extreme hunger
 - Unusual weight loss
 - Irritability
 - Extreme fatigue
 - Frequent infections
 - Blurred vision
 - Cuts and bruises that are slow to heal
 - Tingling or numbness in hands or feet
 - Recurring skin, gum or bladder infections
 - ❖ Prevention through diet and exercise – Using Flip Chart
 - Diet – Healthy eating helps: balance glucose levels, improve the body's use of insulin, lower blood pressure
 - Exercise – Exercise helps: lower blood glucose levels, increase circulation, lower blood pressure, decrease weight.
 - ❖ Inclusion exercise:
 - DIABETES BINGO: Hand out BINGO cards. Mix with other members and facilitator to get them to initial squares that fit them. One person can initial two squares per card. You can initial your own card if you can't find anyone else to initial a square. You "win" if you complete your card. Give each person a small prize when they fill their card. Limit five to ten minutes (Bingo card is enclosed with section).
 - ❖ Describe Objectives for Session 3 from flip chart.
 - ❖ Review Objectives for Session 3 from flip chart to be sure they were all completed.
 - ❖ Thank circle members for their participation, attendance, and commitment.
 - ❖ Refreshments.

SESSION 4: DIABETES – Secondary Prevention

(* Note: This session you might want to invite a person who is living with complications of diabetes to speak and share with the circle. You may also want to invite a medical person who can answer questions for the treatment part of the circle.)

MAIN POINTS:

- ❖ Learn about the symptoms of diabetes.
- ❖ Secondary prevention actions the members can take to prevent diabetes from progressing
- ❖ Personalize living with diabetes.

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional story
- ❖ Flip chart
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or ask circle members to say a traditional prayer for the circle and the food.
- ❖ Read traditional story
- ❖ Inclusion exercise:
Have each person go around the circle and respond to the question, “*How many people do you know who have diabetes?*”
- ❖ Describe objectives for Session 4 from flip chart.

OBJECTIVES: FLIP CHART

- Learn the symptoms of diabetes
 - Know how to prevent diabetes from getting worse.
 - Hear one person’s experience with diabetes.
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- ❖ Symptoms and their treatment (Flip Chart)
 - Feet and fingers – 60-70% of people with diabetes have mild to sever forms of nerve damage in their feet or fingers where they lose feeling. Diabetes is the most frequent cause of non-traumatic lower limb amputation. Amputation rates among American Indians is three to four times higher than the general population. Need to keep feet clean and protected. Check regularly for cuts, sores, redness or swelling.

- Eyes – Diabetes is the leading cause of new cases of blindness in people ages 20-74. Blood vessel walls in the eye weaken or leak. Approximately 24% of Plains Indians have vision problems due to diabetes. See an eye doctor at least once a year.
- Kidney disease – Ten to twenty-one percent of all people with diabetes develop kidney disease. Dialysis or a kidney transplant may be needed to live. Kidney failure due to diabetes is six times higher among American Indians.
- Heart disease and stroke – People with diabetes are two to four times more likely to have heart disease and die or a stroke.
- Impotence – Diabetes can cause blood vessel blockage which can cause impotence. Men with diabetes over the age of 50 have impotence rates as high as 50-60%.
- Mouth, gum and skin infections – People with diabetes are more likely to get infections. Keep areas clean. Don't let any cuts or sores go untreated. See a doctor if a cut or sore feels warm, itches, or has a bad odor.
- Smoking – Smoking further constricts blood vessels when there may already be circulation problems. Smoking can cause problems in the blood vessels in the eyes, kidneys, and heart. The healing process may also be slowed down with more infections likely to occur. CAIRE (Center of American Indian Research and Education) found quitting “cold turkey” as the most effective way to quit smoking with California Indians.
- Pregnancy – Large babies and other complications can occur. Talk to your doctor before getting pregnant and be sure to get early prenatal care.

❖ Secondary prevention: (Flip chart)

- Dietary guidelines – need to eat regularly, frequently, and healthy balanced foods. Don't forget to drink at least eight cups of water a day. The dietician or nutritionist at your clinic can provide you with help with planning your diet. Need a diet that maintains a normal glucose level, lowers fat/cholesterol levels, and lowers or maintains a healthy weight.
- Exercise – need to exercise regularly when glucose levels are high. Exercise helps to drop glucose levels.
- Medical testing and supervision.
 - Blood tests – finger pricks show the exact amount of blood sugar at any given moment.
 - Urine test – measures ketones in the urine. Ketones are acids that collect in the blood and urine when the body uses fat instead of glucose for energy. This test is less accurate than a finger prick.

- Medication/pills – possible side effects – help your body make more insulin or help the insulin you make to work better. Lowers glucose levels so need to be sure your levels don't get too low.
 - Insulin – shots taken regularly to bring down the glucose levels in your blood. Your health care team will show you how to give yourself shots.
 - Glycated hemoglobin test of the hemoglobin A1c test – done at the clinic about every six months looks at your glucose level over that time.
- ❖ Guest speaker who has an amputated limb or blindness due to diabetes.
(Prior to the circle ask speaker to speak about the symptoms they have experience and what they are doing to prevent the progression of diabetes. Also give them copies of the handouts on Symptoms and Secondary Prevention prior to the circle.)
- ❖ Review objectives for Session 4 from flip chart to be sure they were all completed.
- ❖ Ask circles members to bring a food label from something in their kitchen to next week's circle.
- ❖ Remind everyone of the importance of drinking lots of water.
- ❖ Thank guest speaker and circle members for their participation, attendance and commitment.
- ❖ Refreshments

SECTION III: NUTRITION

SESSION 5: NUTRITION – Basics

MAIN POINTS:

- ❖ Learn to read a food label
- ❖ Promote eating healthy foods
- ❖ Assessment of community

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional Food Book (*Recipes from the Rez*)
- ❖ Flip Chart
- ❖ Calculator
- ❖ Extra food labels
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in
- ❖ You or ask circle member to say a traditional prayer for the circle and the food
- ❖ Read a traditional story from the *Recipes from the Rez*.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and show what food label they brought.*
- ❖ Describe objectives for Session 5 from flip chart:

OBJECTIVES: FLIP CHART

- Learn how to read food labels.
 - Learn about which foods we should eat most often
 - How to shop for healthy foods in our community
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- ❖ Read food labels using the ones the circle members brought. Distribute calculators to use when looking at food labels. Look at percentages of daily food requirements and nutritional value.
 - ❖ “Always food”, “Sometimes food”, “Never food”
 - ❖ Have circle members separate food labels into “always food”, “sometimes food”, and “never food”. Afterwards promote a discussion with the members on why foods were placed where, what is missing, etc. If water and high fiber foods are not brought up, add those as “always food”. Since fast foods and prepared foods were described in the focus groups as commonly eaten, these should also be brought up. The facilitator should bring labels for water, high fiber foods, and fast

- foods, and prepared foods (such as frozen dinners) so they can also be added to the food board.
- ❖ Circle members to go to the local grocery store to see what foods are available in their community (Facilitator needs to schedule this outing with the store owner beforehand.)
 - ❖ Review objectives for Session 5 from flip chart to be sure they were all completed.
 - ❖ Thank store owner and circle members for their participation, attendance and commitment.
 - ❖ Refreshments

SESSION 6: NUTRITION – Preparation

MAIN POINTS:

- ❖ Promote healthy ways to prepare food
- ❖ Promote awareness of fat and sugar levels of foods
- ❖ Prepare healthy refreshments

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional story
- ❖ Flip chart
- ❖ Food models
- ❖ Fat tubes
- ❖ Sugar tubes
- ❖ Facts on fast foods
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or ask circle member to say a traditional prayer for the circle and the food.
- ❖ Read a traditional story from the *Recipes from the Rez*.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and respond to the question, “Name an Always Food, Sometimes Food, Never Food”*
- ❖ Describe objectives from Session 6 from the flip chart

OBJECTIVES: FLIP CHART

- Learn healthy food preparation
 - How to cook with less fat
 - How to cook with less sugar
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- ❖ Definition of serving sizes – use food models to demonstrate. Let circle members handle the food models. (Use a **small size plate** and place the food models on it with a serving of meat, vegetables, rice/mac. By using a small plate the portions appear to be a lot and the plate is full.)
 - ❖ Look at fat content of various foods using the fat tubes. (Have handouts on fat content of fast foods and processed foods that are brought in the store.) Let the circle handle the fat tubes. Discussion of cooking with less fat while looking at tubes. Ask members how they would cook with less fat.
 - ❖ Look at the sugar content of various foods using the sugar tubes. Let circles members handle the tubes. Discussion of cooking with less sugar while looking at the tubes. Ask members how they would cook with less sugar.

- ❖ Review the objectives for Session 6 from flip chart to be sure they were all completed.
- ❖ Ask the circle members to bring a traditional food recipe to the next circle.
- ❖ Thank circle members for their participation, attendance and commitment.
- ❖ Refreshments

SESSION 7: NUTRITION – Traditional Foods

MAIN POINTS:

- ❖ Benefits of traditional foods
- ❖ Promote ability to eat traditional foods

MATERIALS:

- ❖ Sign-in sheet
- ❖ Traditional Food Book (*Recipes from the Rez*)
- ❖ Flip Chart
- ❖ Traditional Food Books to hand out to participants
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or have a circle member say a traditional prayer for the circle and the food.
- ❖ Read a traditional story from the *Recipes from the Rez*.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and respond to the question, “What is your favorite traditional food?” and share their traditional recipe they brought.*
- ❖ Describe objectives for Session 7 from the flip chart:

OBJECTIVES: FLIP CHART

- Discussion of what foods are traditional
 - Health benefits of traditional foods
 - How to get traditional food
 - How to prepare traditional foods
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- ❖ Introduce the guest speaker. (When scheduling with an elder or historian, ask them to speak on the nutritional values and ceremonial uses of traditional foods. Facilitator must contact guest speaker before circle and invite them to sit in for the entire circle.)
 - ❖ Harvest of traditional foods. (Guest speaker to lead circle members to a harvest of a traditional food depending on what is in season. For example, wild potatoes may be dug up, berries picked, or herbs picked for teas. During the walk to obtain these foods, have the speaker also talk about the availability of other traditional foods.)
 - ❖ Refreshments. *OPTIONAL: prepare foods that were harvested for the refreshments.
 - ❖ Recipes of local traditional foods. Traditional food books as giveaway to members and guest speaker. Look through briefly with circle members.

- ❖ Review objectives for Session 7 from flip chart.
- ❖ Ask one of the circle members to bring a traditional story for the next circle.
- ❖ Thank guest speaker and circle members for their participation, attendance and commitment.
- ❖ Have the circle members prepare and bring a health/traditional food to the next circle to share for refreshments.

SECTION IV: HEALTHY LIFESTYLES

SESSION 8: HEALTHY LIFESTYLES – Physical

MAIN POINTS:

- ❖ Promote routine medical care
- ❖ Promote specialized medical care
- ❖ Demonstrate the importance of exercise

MATERIALS:

- ❖ Sign-in sheet
- ❖ Flip Chart
- ❖ Exercise bike
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign-in.
- ❖ You or have a circle member say a traditional prayer for the circle and the food.
- ❖ Have the circle member that brought the traditional story share/read it.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and report on one time they chose to eat healthier foods or cook in healthier ways.*
- ❖ Describe objectives for Session 8 from flip chart:

OBJECTIVES: FLIP CHART

- Learn about suggested routine medical care
 - Learn about suggested specialized medical care
 - See how exercise affects glucose levels
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- ❖ Introduce guest speaker. (A health care provider i.e. doctor, nurse, CHR, nursing student, etc. When scheduling with the speaker, ask them to address routine medical care and specialized medical care that are important to staying healthy and preventing diabetes.) Have the speaker also take members' blood pressures as an example of routine medical care.
 - ❖ Impact of exercise on glucose levels. Facilitator have diabetic circle members measure their glucose level with a finger prick. They then ride an exercise bike for 15 minutes. They then measure their glucose level with a finger prick again. There should be a dramatic difference. (May have half the circle doing activity 5 and half doing activity 6. Then switch so both halves do both activities.)
 - ❖ Review objectives for Session 8 from flip chart to be sure they were all completed.

- ❖ Ask circle members to bring something next week that symbolizes a hobby or something they like to do.
- ❖ Ask a circle member to bring a traditional story for the next circle.
- ❖ Have members describe what food they brought to share and how it was prepared.
- ❖ Thank guest speaker and circle members for their participation, attendance and commitment.

SESSION 9: HEALTHY LIFESTYLE – Emotional/Spiritual

MAIN POINTS:

- ❖ Normalize the grieving process
- ❖ Promote emotionally healthy ways to manage diabetes
- ❖ Spiritual aspects of diabetes

MATERIALS:

- ❖ Sign-in sheet
- ❖ Flip Chart
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign-in.
- ❖ You or have a circle member say a traditional prayer for the circle and the food.
- ❖ Have the circle member that brought the traditional story share it with the circle.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and share what they brought to symbolize a hobby or something they like to do.*
- √ Emphasize the need for hobbies or personal time to relieve stress and relax.
- ❖ Describe objectives for Session 9 from flip chart:

OBJECTIVES: FLIP CHART

- Grieving process as it relates to diabetes
 - Emotional aspects to diabetes
 - Taking care of yourself emotionally
 - Spirituality as it relates to diabetes
-
- ❖ Grieving process (flip chart)
 - People may go through a grieving process when diagnosed with diabetes. They are grieving for the loss of their health. The grieving process may vary from person to person. People may spend different amounts of time in the various stages. People may also skip or go back to a previous stage:
 - *First Stage: Denial – “I can’t believe this is happening to me.” People may not change their lifestyle because they think if they pretend they don’t have diabetes, it will just go away.*
 - *Second Stage: Anger – “I’m really mad that I got diabetes too – why me and not someone else?” People may feel out of control over their body and angry about this loss. They*

may feel angry that they were at high risk for diabetes by merely being an Indian. They may feel angry that they got diabetes and not the guy next door.

- *Third Stage: Bargaining – “If I eat right now, it will just go away.” People may spend a short period of time bargaining to do something in exchange for not having diabetes at all. This stage allows people a little time to postpone having to accept diabetes and lets the fact sink in.*
 - *Fourth Stage: Depression – “I cried myself to sleep last night because now I have to worry about my diabetes.” People feel a sadness about the loss of their “healthy” self and lifestyle.*
 - *Fifth Stage: Acceptance – “I know what I have to do so I can be around to play with my grandchildren. And I’m going to do it too!” People accept that their lifestyle must change with diabetes. They accept that they can still have control over their lives, but in a different way.*
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- ❖ Promote a discussion on what they do to feel good about themselves, how they take care of themselves emotionally, what they do to manage stress effectively, how they see others deal with diabetes that seems to work well emotionally. Facilitator should also have local referral source for counseling and support groups such as at the clinic or through the tribe.
 - ❖ Tribal spiritual leader as guest speaker. (When scheduling guest speaker, ask them to speak on how Indian spiritual beliefs or identification with the tribe can help people deal with diabetes.)
 - ❖ Review objectives for Session 9 from flip chart to be sure they were all completed.
 - ❖ Ask a circle member to bring a traditional story next week.
 - ❖ Thank the guest speaker and the circle members for their participation, attendance and commitment.
 - ❖ Refreshments.

SESSION 10: HEALTHY LIFESTYLE – Family

MAIN POINTS:

- ❖ Expand diabetes from the person with the disease to the family
- ❖ Promote a healthy family response to diabetes
- ❖ Explore the complications of alcoholism with diabetes

MATERIALS:

- ❖ Sign-in sheet
- ❖ Flip Chart
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign in.
- ❖ You or have a circle member say a traditional prayer for the circle and the food.
- ❖ Have a circle member that brought the traditional story share it with the circle.
- ❖ Inclusion Exercise:
 - *Have each person go around the circle and respond to the question, “Who do you define as your family?”*
- ❖ Describe objectives for Session 10 from flip chart:

OBJECTIVES: FLIP CHART

- Diabetes effects on the family
 - How a family can deal with diabetes in a healthy way
 - How alcoholism and diabetes both affect a family
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- ❖ Promote a discussion on how the circle members and their families enjoy one another despite having to deal with diabetes, how they support one another emotionally, what they do to manage stress effectively, how they see other families deal with diabetes that seems to work well. Facilitator should also have local referral sources for counseling and support groups such as at the clinic or through the tribe.
 - ❖ Guest speaker of treatment provider from a treatment facility for both alcoholism and diabetes. (When scheduling with the guest speaker, ask them to talk about the physical effects of alcohol with diabetes, how alcoholism and diabetes affect the family and treatment goals.)
 - ❖ Review objectives for Session 10 from flip chart to be sure they were all completed.
 - ❖ Ask circle member to bring a traditional story for the next week.
 - ❖ Ask circle members to continue to write down “What I can do to confront diabetes” over the course of the week. Inform members that we will share these thoughts next week.
 - ❖ Refreshments.

SESSION 11: HEALTHY LIFESTYLE – Community

MAIN POINTS:

- ❖ Help define their sense of community
- ❖ Look at affects of diabetes on the community
- ❖ Empower members to change their community

MATERIALS:

- ❖ Sign-in sheet
- ❖ Flip Chart
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive. Have them sign-in.
- ❖ You or a circle member say a traditional prayer for the circle and the food.
- ❖ Have circle member that brought the traditional story share it with the circle.
- ❖ Inclusion exercise:
 - *Have each person go around the circle and respond to the question, “What do you consider to be your community? Facilitator to write these down on the blank Flip Chart using dry erase marker.*
- ❖ Describe objectives for Session 11 from flip chart.

OBJECTIVES: FLIP CHART

- Define community
- Brainstorm ideas on how to confront diabetes
- Plan how to change diabetes in our community
- ❖ Facilitator to ask the circle members if they think the following should also be added to the list of community definitions (if not said):
 - Neighborhood
 - Friends
 - Church
 - Co-workers
 - Clubs and teams
 - Tribe
- ❖ Have circle members break up into groups. Ask each member to share in this small group what they had written on “what I can do to confront diabetes.” Because of time constraints, you may need to limit people to what they feel are their top five ideas. This is a brainstorming session so people are not to comment on other people’s ideas at this point. Have someone in each group act as a recorder. Limit to 15 minutes.

- ❖ Have each group develop a plan on what they could do to confront diabetes. Include time frames and people responsible for different parts of the plan. This is the time for people to comment on others' ideas and work together. Limit to 20 minutes.
- ❖ Bring everyone back together to the one circle. Have a spokesperson from each small group report on that group's plan. There may be additional planning as to what the entire group can do or how some of the small groups can work together. It is not expected that a complete plan be formulated in this session. Circle members may plan to meet outside the circle to finish their planning and to implement that plan.
- ❖ Review objectives for Session 11 from flip chart to be sure they were all completed.
- ❖ Distribute Food Diary with instructions. Instruct members to complete this for one weekend day and two weekdays. (Facilitator to call each circle member to remind them to fill out the Food Diary.)
- ❖ Ask a circle member to bring a traditional story for the next week.
- ❖ Thank circle members for their participation, attendance and commitment.
- ❖ Refreshments.

SECTION V: CLOSURE

SESSION 12: CLOSURE

MAIN POINTS:

- ❖ Evaluation of project
- ❖ Closure to group process

MATERIALS:

- ❖ Sign-in sheet
- ❖ Flip Chart
- ❖ Post Test Questionnaires
- ❖ Certificates of Completion
- ❖ Refreshments

ACTIVITIES:

- ❖ Welcome circle members as they arrive.
- ❖ You or a circle member say a prayer for the circle and the food.
- ❖ Inclusion exercise:
 - *Go around the circle and ask each member to name one thing they learned from the Talking Circles.*
- ❖ Describe the objectives for Session 12 from the flip chart:

OBJECTIVES: FLIP CHART

- Complete Post-Test Questionnaire
 - Complete Evaluation
 - Celebration
-
- ❖ Collect Food Diaries
 - ❖ Distribute post-test questionnaires and give instructions on how to fill them out.
 - ❖ Review objectives for Session 12 from flip chart to be sure they were all completed.
 - ❖ Thank circle members for their participation, attendance and commitment.
 - ❖ Refreshments