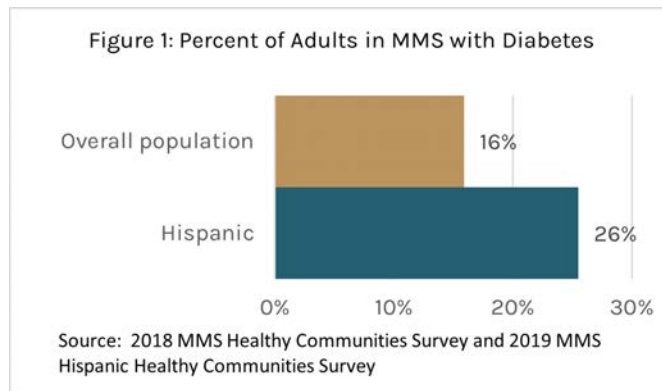


Community Conversations about Diabetes

Diabetes rates in Minnesota have been going up since 2000 and hit an all-time high in 2020.¹ Adults in Meeker-McLeod-Sibley (MMS) have even higher rates than adults in Minnesota (16% versus 10%). When asked in a survey if they have diabetes, Hispanic residents reported even higher rates of diabetes than the overall MMS population (see Figure 1). Education, employment, income and insurance coverage rates are also better for the non-Hispanic population than the Hispanic population. All these factors have an impact on health.



Public health staff had community conversations to learn about the reasons for these differences. We spoke with 35 people in MMS who are Hispanic or work with the Hispanic community.

Results

We heard:

Diabetes, obesity and healthy eating are all health concerns in the Hispanic community.

When we asked why diabetes rates are higher in the Hispanic community, diet and nutrition was the most common response, and people specifically discussed how it is influenced by Hispanic culture.

“Hispanics are very generous with the food that we give. If we have people over, we’re going to feed that person a lot of food because we don’t want them going home hungry.”

People in our community said the following factors affect the ability of the Hispanic community to be healthy as they would like to be:

Economic stability	Education access and quality	Health care access and quality	Neighborhood and built environment	Social and community context
<ul style="list-style-type: none"> • Demanding jobs – long hours, too tired and/or not enough time to cook and exercise • Low pay contributing to lack of resources for healthy food and gym access • Workplaces not allowing time off to go to medical appointments 	<ul style="list-style-type: none"> • Lack of education and knowledge around health affecting making better choices • Lack of information/resources in Spanish language 	<ul style="list-style-type: none"> • Few Spanish speaking providers • Lack of health insurance • Insurance not covering everything • High cost of insulin or other medication 	<ul style="list-style-type: none"> • Inconsistent access to grocery stores • Fast food being easily accessible and plentiful • Cold weather, lack of places to walk indoors • Unhealthy food at schools and work • Limited transportation options to get to appointments 	<ul style="list-style-type: none"> • Unhealthy eating habits; traditional food often is fried/greasy, sugar, carbs and alcohol • Racism • Immigration status • Struggles with mental health

¹ Centers for Disease Control and Prevention. United States Diabetes Surveillance System. <https://gis.cdc.gov/grasp/diabetes/DiabetesAtlas.html>

Community Voices:

“When someone works ten to twelve hours a day it will play a part. Because now they are too tired to exercise or to cook a decent meal. So instead, they will run to Burger King because they have no energy left.”

“If all your money is going to rent, you are not going to have money for a gym membership or buying appropriate food.”

“There are not enough providers who speak Spanish to really relate the information to the patient.”

“I think there is a divide in our community. A lot of time it feels like the Hispanic people are looked down upon....treated differently.”

Ideas To Prevent Diabetes In The Hispanic Community

Provide education: all respondents thought education was important. **Healthy eating was the number one topic respondents would like to learn more about.** This included how to cook healthy meals - with less grease, salt and sugar - and information on calories, vitamins, and portion sizes. Ideas on how to provide education include:

- Have in person, especially for those who do not use the internet
- Use social media
- Provide materials in both English and Spanish; materials in Spanish are better for older generations
- Offer diabetes management classes
- Start with educating kids
- Share in the community at churches, libraries, stores, schools, home visits from health nurses, etc.

Host events, gatherings and activities: They should be fun, centered in Hispanic culture, for kids and families and provide information.

Have more resources in the Spanish language: This includes health workers and educators that speak Spanish.

Improve access to healthcare, affordable healthy food and Hispanic food, gyms and community centers.

Expand partnerships with insurance, schools and churches.

Working Together

Public health staff are using these results, in particular the ideas for how to prevent and address diabetes, to plan projects that address diabetes and related issues in the Hispanic community. We will ask partners from the community to help plan and lead this work with MMS Community Health Services.

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