Partnering to Prevent Diabetes

Minnesotans and Prediabetes

Did you know that…?

- Roughly 1 in 3 Minnesota adults or 1.5 million may have prediabetes
- In 2014, only 7.4 percent of Minnesota adults said their health care team told them they had prediabetes
- Minnesotans with prediabetes are at higher risk of type 2 diabetes, heart disease and stroke

Since 2016, PartnerSHIP 4 Health (PS4H), local public health and community partners in west central Minnesota, offer the Diabetes Prevention Program (DPP) to community members. The DPP provides support and encouragement, with each group meeting weekly for 16 weeks and monthly for 6 months. Sessions foster healthy lifestyle changes related to food, stress, physical activity, and sleep.

Lakeland Mental Health Center (LMHC) collaborated with PS4H, University of Minnesota (MN) Extension, and A Place to Belong (a social club for mental health consumers), to adapt and offer a DPP program that matched the needs and preferences of adults with severe and persistent mental illness in the Fergus Falls community. According to Colleen Kennedy, MSW, LGSW, LMHC Mental Health Practitioner and DPP Lifestyle Coach, “The collaborative effort between the organizations was critical. The work behind the scenes to prepare for the classes and contact other organization to donate incentives for the participants was very helpful and greatly appreciated.”

Making it Work

Each organization contributed unique elements to make the class a reality. Recruiting participants was challenging. Through brainstorming and problem solving, the PS4H staff came up with the idea to collaborate with A Place to Belong and the U of MN Extension, and to offer participant-driven incentives (certificate of attendance, farmer’s market coupons, fresh vegetables, FitBits, and walking shoes). PS4H provided Lifestyle Coach Training and start-up funds for class preparation hours, recruitment time, etc. A Place to Belong added the class to their monthly calendar and provided the meeting room. The U of MN Extension provided the class materials, weight scale, healthy snacks, and additional Lifestyle Coaching.

Class attendance varied between one and 10 due to family issues, transportation barriers, moving out of state, and physical health problems. Weights fluctuated and ended with no overall loss. Participants reported checking labels to help them make healthier decisions when shopping/eating and increasing their physical activity level.

One participant stated, “Boy, it’s been a real growing process for me. Learning about fats, making sure that I watch my fats to prevent weight gain, keeping track of my fats, the book to look up calories, and learning about serving sizes. I also have to push myself to exercise, go for walks around Lake Alice.”

Kennedy said, “Mental illness is a complex problem often compounded by physical health or substance use problems. This leaves little energy for preventive efforts. Getting through the day is an accomplishment for these individuals. Understanding and accepting the interconnection between mental and physical health is necessary in promoting improved well-being. It was an honor to join alongside our community members on their journey towards a stronger, healthier, happier self.”

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1 CDC National Diabetes Statistics Report 2014
2 CDC, Behavioral Risk Factor Surveillance Survey, MDH analysis
http://www.partnership4health.org/
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