



extension  
**IMPACTS**

This five-session program combines education on diabetes self-care with recipe demonstrations, food tasting, nutrition information, and low-impact physical activity for people of all fitness levels.

## Dining with Diabetes provides valuable self-care education

### Situation:

Nearly 21 million Americans – about 7 percent of the population – have diabetes. The Centers for Disease Control and Prevention’s Behavioral Risk Factor Surveillance System reports for Wyoming that the rate of diabetes in adults has more than doubled from 1997 (3 percent) to 2007 (7 percent). This percentage represents about 28,000 Wyoming adults.

Estimated economic costs of diabetes in 2002 were \$132 billion; on a per-capita basis, that translates to an economic burden in Wyoming of \$22 million. Quality-of-life costs of complications resulting from uncontrolled diabetes – complications such as amputations, blindness, and kidney failure – are incalculable.

In response, University of Wyoming Cooperative Extension Service (UW CES) nutrition and food safety educators, with support from the Wyoming Diabetes Prevention and Control Program, teamed with local diabetes educators to conduct *Dining with Diabetes in Wyoming*. This five-session program combines education on diabetes self-care with recipe demonstrations, food tasting, nutrition information, and low-impact physical activity for people of all fitness levels. Participants complete questionnaires at the beginning of the first class (pre), at the end of the fourth class (post), and at the beginning of the fifth class (follow-up – two to four months after the fourth class).

Eight programs were completed between October 1, 2007, and September 30, 2008. An additional 12 programs were held since inception in 2006. Over the three-year period, 170 individuals took the course.

## Impacts:

Based on completed questionnaires in 2008 (72 at pre-program, 61 at post-program, and 48 at follow-up), the program is helping to significantly improve people's knowledge, attitudes, and behaviors in several different areas, including the following:

### **Shorter term** (by the end of the program)

- *Better understanding of...* the plate method for portioning their food
- Feeling more strongly... that they can eat their favorite foods

### **Longer term** (at three-month follow-up)

- *Decreasing* the proportion of participants...
  - » who drink whole or 2% milk
  - » who are never physically active
- *Feeling more strongly...* that physical activity comes more easily to them



### **Selected comments:**

- Diabetes can be a scary diagnosis. This class helped to inform me about the choices I do have.
- I have definitely made changes in serving sizes.
- The food was awesome and encouraged me to try foods I might not have tried.
- I have changed my cooking style, modifying recipes to be more healthy.
- I realize I need to be more serious about what I'm eating – not just once in awhile but all the time.
- I feel much more encouraged about being able to help my diabetic family members (and myself) eat healthy.
- I have really learned a lot about how to cook for my husband (and) how important exercise is. (I also) understand more about how he feels with higher and lower blood sugars.
- I have (had Type II diabetes) for 9 years . . . but this class re-motivated me to GET 'ER DONE and to know what I need to do.

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**Dining with Diabetes in Wyoming team members who helped teach programs this year or have state-level responsibilities:**  
Lori Bickford, Karla Case, Sarah Francis, Linda Funk, Joe Grandpre, Vicki Hayman, Betty Holmes, Renee Krysl, Phyllis Lewis, Star Morrison, Christine Pasley, Suzanne Pelican, Denise Smith, Lucy Stacy, Mary Tvedt, Marge Wilson