The Mental Health of Diabetes: An Integrated Approach to Wellness

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Introduction

- Diabetes produces a number of health concerns and remains the seventh leading cause of death of those in the United States (ADA, 2014).
- Depression affects about 20-25% of diabetic patients, almost twice as many as the general medical population, and patients with diabetes and coexisting depression have higher death rates than non-depressed diabetic patients (Yavari & Mashinchi, 2010).
- Compared to the general population, diabetics who suffer from depression have worse glycemic control, noncompliance to treatment suggestions, poor metabolic control, and an increased risk of vascular complications (Campayo et al., 2010).
- The purpose of this proposal was to write a grant to fund a program for those diagnosed with diabetes and experiencing depressive symptoms.
- Under an integrated model facilitated by a MSW and LVN, the program’s main goals are to increase diabetes self-management while reducing depressive symptoms and increasing quality of life.
Social Work Relevance

- Both diabetes and depression are public health concerns that are of special interest to social workers. Diabetes combined with depression can lead to negative health outcomes that are associated with higher healthcare costs, morbidity, and mortality.

- Social workers must adhere to the NASW Code of Ethics and ensure the wellbeing and worth of all individuals. Social workers must advocate for programs that address the specific and complicated needs of society’s most vulnerable individuals.

- Integrated care has been a useful approach in treating people with co-morbid conditions. Social workers are a valued member of these teams and have special skills to provide insights on issues relating to cultural sensitivity and cultural competency.

- Social workers must continue to implement and evaluate programs that will increase individuals quality of life and promote social justice.
Cross Cultural Relevance

- Prevalence rates for diabetes have been higher in American Indians, African Americans, and Hispanics compared to Whites.
- According to the Center for Disease Control and Prevention (CDC, 2014) National Diabetes Statistics Report, 15.9% of American Indians and Alaska Natives age 20 and over have diabetes compared to 13.2% of African Americans, 12.8% Hispanics, 9% Asians, and 7.2% Whites.
- Minorities experience higher hospitalization rates due to complications of diabetes such as diabetic retinopathy, renal disease, and amputations (Peek et al., 2014).
- Depression rates also disproportionally affect minority ethnic and racial groups. The incidence of major depression is higher in African Americans, Puerto Ricans, and Mexican Americans while also having significantly lower care use than Whites (González et al., 2010).
Methods

• **Target Population**
  ◦ The target population is people who have diabetes and co-occurring depressive symptoms. This population will encompass residents in the Long Beach area served by Mental Health America’s (MHA) Village in Long Beach, California.

• **Strategies Used to Identify and Select Funding Source**
  ◦ Online searches using google.com, grants.gov, and governmental websites proved useful. Search terms included *California grants mental health, diabetes, depression, and integrated care.*

• **Funding Source Selected**
  ◦ After reviewing the 5 identified potential sources, California Community Foundation was selected as the primary funding source for this grant.
Methods (Continued)

- Sources used for the needs assessment
  - Information gathered from the City of Long Beach database (2013) was used, including City of Long Beach Health Statistics, City of Long Beach Adult Health Profile, and City of Long Beach Community Health Assessment.

- Projected budget
  - The funding target is set at 88,319 to cover staffing of an MSW, LVN, peer facilitator, training expenses, office supplies, medical equipment for participants, and graduation incentives.
Grant Proposal

• Program description
  ◦ The will be a yearlong pilot program targeting adults who have Type 2 Diabetes and a diagnosis of Major Depressive Disorder or experiencing depressive symptoms (subclinical depression).
  ◦ The program will combine diabetic education and cognitive behavioral group therapy to increase self-management of the disease, provide mutual aid, decrease depressive symptoms, and increase overall quality of life. The program will be hosted by MHALA’s Village and referrals will come from the case workers working with members in various Village teams.

• Population served
  ◦ The ideal number of group participants is 10. Those being served will be members from MHALA’s Village program located in downtown Long Beach California.
Grant Proposal (Continued)

- Program objectives
  - There are five main objectives to reach the program’s goal. They are: (1) Recruit and hire personnel who have experience and knowledge relating to diabetes, depression, running groups, and integrated care; identify members of the village who meet program criteria of having Type 2 Diabetes and depressive symptoms by reaching out to care team staff and outreaching at the agency; provide diabetic education and CBT group sessions for participants once a week for 12 weeks; (4) reduce depressive symptoms and increase overall quality of life and self-management of both depression and diabetes; and (5) measure outcomes and report results.

- Evaluation
  - Participants will be given Patient Health Questionnaires (PHQ-2 and PHQ-9) to measure depression before and at the conclusion of the program. Additional pre and post assessment includes the World Health Organization Quality of Life (WHOQOL) assessment.
  - A1C's will be recorded at the start and ending of the program as well as weekly glucose testing.
Lessons Learned/Implications for Social Work

- Lessons learned
  - Grant writing skills are essential for social workers to have as they may be serving on teams that need to acquire additional funding to run programs outside money given by the federal and state government.
  - Research skills are crucial for this portion of the grant writing process to provide factual evidence of previous successes and failures of a particular type of program.

- Implications for Social Work
  - Integrated care has been shown to have successful outcomes for treating a person with both chronic mental and physical illness. Social workers have a role on these teams and must use their special skill set to intervene.
References