

Appendix 22: Diabetes and Mental Health

People living with diabetes are often overwhelmed and/or frustrated by the burdensome demands of managing their chronic disease. They may feel angry, guilty, frightened, discouraged, worried, confused, alone, depressed, unmotivated and have strained relationships.

More and more research is demonstrating the relationship between mental health disorders and diabetes. We do not yet understand the relationship between mental health and diabetes, but some evidence shows that treatment for mental health disorders may actually increase the risk of diabetes, especially when certain medications are prescribed. Further, biochemical changes due to the mental health disorders may play a role as well as lifestyle changes and symptoms of mental health disorders.

DEPRESSION:

Approximately 30% of people with diabetes will be affected by symptoms of depression and 10% of people will experience major depression. Further, individuals with depression have an approximately 60% increased risk of developing type 2 diabetes. Depression makes it harder to control blood glucose levels and accelerates the rate of developing complications.

Feeling depressed can:

- Lead to poor physical and mental functioning
- Lower motivation for self-care, which leads to decreased amount of physical activity
- Make it hard to control blood glucose levels
- Not wanting to take medication
- Lead to other diabetes-related problems
- Decrease the quality of life
- Increase family problems

All people living with diabetes should be screened for depression and other mental health disorders by their doctor or community nurse.

Mental health and First Nations Peoples:

Compared to the rest of Canada, First Nations people experience substantial prejudicial inequalities including high rates of poverty, unemployment, lower quality of housing and education. This has led to poor emotional and mental health on the individual and the community as a whole. As a result, First Nations people tend to have elevated rates of anxiety and depression, high rates of substance abuse and addiction, increased rates of family violence and significantly higher rates of youth suicide.

Some First Nations communities have fewer problems than others. There appears to be some protective factors such as having strong cultural practices, history of religious or spiritual practices and rituals, a deep belief of living in harmony with earth and all its creatures and strong traditional values of humility, sharing, sense of responsibility and not hurting others.

Help improve health outcomes of community members by understanding and supporting First Nations cultures, wisdoms and practices. Encourage people living with diabetes to develop a holistic understanding of health and wellness by practicing ceremonies that are central to their tradition and culture. Choose ceremonies that empower individuals to fulfill the spiritual, mental, emotional and physical needs and facilitates the connection between the individual, family and community.

Such ceremonies include, but are not limited to:

- Smudging
- Pipe ceremonies
- Sweat lodge ceremonies

Partner with Elders, community members and leaders to incorporate traditional and community-specific cultural events as part of the ADI program. Asking how you can incorporate tradition and culture into care empowers the person living with diabetes, giving him or her control over his or her own well-being and helps start the healing process.

Many ADI workers host diabetes talking/sharing circles or support groups for people living with diabetes. This is a good opportunity for people living with diabetes to connect and provide support to each other regarding their diabetes and other life events. Living with diabetes can be extremely stressful, frustrating, scary, discouraging, and exhausting. It is important for people living with diabetes to get the support and help they need.



ANXIETY:

Little is known about the relationship between diabetes and anxiety. Recent evidence suggests that the rate of anxiety disorders is elevated in people with type 1 diabetes. Anxiety is common in all people living with diabetes with about 40% of them having at least some anxiety symptoms. These symptoms may include:

- Restlessness
- Feeling tense or on edge
- Fatigue
- Irritability
- Impatience
- Difficulty concentrating
- Muscle tension
- Trouble falling or staying asleep
- Diarrhea
- Headache
- Excessive sweating
- Shortness of breath
- Stomach ache

All people living with diabetes should be screened for anxiety disorders by their doctor or community nurse.

For more information on anxiety and diabetes, visit the Diabetes Canada website at: <http://www.diabetes.ca/diabetes-and-you/complications/anxiety>

STRESS:

Everyone experiences stress at one time or another in their life. A little bit of stress is a good thing. However, stress is a bad thing when it is overwhelming and people do not know how to deal with it. Too much stress can have negative impacts on people's health, including their diabetes.

Chronic stress can:

- Elevate blood pressure
- Elevate blood glucose levels, increasing risks for complications
- Compromise the immune system, making illnesses more likely
- Increase the possibility for depression and anxiety
- Increase the likelihood of blood clots

Strategies for managing stress:

Because too much stress leads to poorer health outcomes, it is important for people living with diabetes to find healthy ways to cope with their stress. Some coping strategies include:

- Physical fitness – physical activity increases 'the happy hormones', endorphins
- Mental fitness - talking to a therapist, family member or friend can be helpful

For more information on stress and diabetes, visit the Diabetes Canada website at: <http://www.diabetes.ca/diabetes-and-you/healthy-living-resources/heart-health/stress-management-high-blood-pressure>

EATING DISORDERS:

Eating disorders, such as anorexia nervosa, bulimia nervosa and binge eating, have been found to be more common in people with diabetes than with the general population. In people living with diabetes, eating disorders can lead to poor blood glucose control and repeated hospitalizations for dangerously high or low blood glucose. Poor blood glucose control can lead to long-term complications.

People living with type 2 diabetes who have depressive symptoms may experience night eating syndrome. This is characterized by the consumption of more than 25% of daily calories after the evening meal and waking at night to eat. This can result in weight gain, poor blood glucose control and an increased number of diabetes complications.

Eating disorders are serious. People with an eating disorder should talk to the community nurse or mental health therapist to seek support.

Medicine wheel

Many nations use the circle and the four directions of the medicine wheel to symbolize completeness, wholeness, connectedness, unity and strength. The medicine wheel is based on cultural values, traditions and beliefs. The medicine wheel can:

- Help us understand the changes we encounter on our journey in life
- Explain difficult concepts, helping us to see and understand things that we normally do not see or understand
- Show how things are connected within us and with the rest of creation
- Provide us with a way to understand life and the world around us
- Provide us with a holistic outlook on life

When there is disturbance in any aspects of the medicine wheel, it can affect other dimensions of wellness and even cause illness. The four aspects are also needed for when healing needs to occur.

As well, diabetes affects all four aspects of life.

- Having proper understanding of diabetes, how to prevent and treat helps people living with diabetes care for their mental health;
- Eating healthy and being physically active helps people living with diabetes care for their physical health;
- Accepting diabetes and learning to live with diabetes helps people living with diabetes care for their emotional health and
- Developing a strong spiritual sense for healing and the feeling of connection between the body, the world and the Creator helps people living with diabetes care for their spiritual health

Diabetes self-management

There is a lot that individuals living with diabetes can do to effectively manage their diabetes including self-managing blood glucose, nutrition, physical activity and taking medication/insulin on time.

Remind individuals living with diabetes that they are the center of their healthcare team. They are the ones who lives and manages their diabetes every minute of every hour of every day. Only individuals living with diabetes can take charge and manage their care, because they are an expert on themselves. Individuals living with diabetes should be encouraged to speak to a health care professional if they are feeling overwhelmed.

Mental health and diabetes resources

- Mental health and diabetes powepoint presentation (Developed by Shannon Spence, Tribal Diabetes Coordinator (TDC), IRTC). For a copy of the powerpoint presentation, ask your TDC, a FNIHB staff, or visit the website: www.mfndlc.ca
- Canadian Mental Health Association - website: <https://cmha.ca/>
 - Resources: Printable pamphlets on anxiety, childhood depression, bipolar disorder, eating disorders, anger, mental illness, stress, schizophrenia, preventing suicide, and supporting loved ones
- Mood Disorders Society of Canada – website: <https://mdsc.ca>
 - Resources: Printable factsheets on depression, helping children cope, building resilience, & risk of suicide
- Canadian Psychological Association – website : <https://www.cpa.ca>
 - Resources: Factsheets diabetes & mental health, anxiety, sleep disorders, eating disorders, stress, suicide, depression, and healthy living