DIABETES





The history of colonization can be directly linked to poorer health outcomes for Indigenous women, girls and gender-diverse people. Events like the residential school system, the 60's scoop, and forced starvation disrupted Indigenous kinship systems, beliefs, and cultures, which resulted in trauma that has been passed down through generations. Inequalities in healthcare have resulted in Indigenous populations experiencing high rates and risk of type 2 diabetes (Crowshoe et al, 2018). Larger issues like poverty and food insecurity play a role in high rates of diabetes experienced by Indigenous populations.

Recent data indicates that Indigenous women are more likely to develop gestational diabetes than non-Indigenous women. A 2011 report by the Public Health Agency of Canada shows diagnoses of 4.8% in First Nations, 4.0% in Inuit, 2.2% in Métis populations, compared to 0.5% in the non-Indigenous population.

What is Diabetes?

Diabetes is a chronic disease where your body either does not make enough insulin or cannot use the insulin it makes. Insulin is the hormone made by the pancreas that allows the body to change glucose (sugar) from food into energy. Without enough insulin, the sugar stays in your blood and causes high blood sugar.

Type 1 Diabetes: occurs when the body's immune system destroys the insulin producing cells in your pancreas, preventing the body from producing enough insulin.

Type 2 Diabetes: is the most common type of diabetes, and occurs when the body does not produce enough insulin, or cannot use the insulin properly.

Gestational Diabetes (GD): GD is a temporary form of diabetes that develops during pregnancy where the mother's body cannot produce enough insulin, which can result in high blood sugar levels. After the baby is born, blood sugar levels often return to normal, however the mother is at a greater risk of developing type 2 diabetes later in life.

How do you know if you have it?

Some of the signs of diabetes include: having to pee often, weight gain, increased fatigue, being thirsty often, getting more frequent infections, cuts and bruises that won't heal, etc. (NADA, 2011).

If you are experiencing these signs, you can get tested for diabetes by your healthcare provider. There are three kinds of diabetes tests:



 A blood test that allows your doctor to determine the levels of blood sugar in your body;



2. A fasting blood sugar test which involves testing your blood levels after you haven't eaten for a period of time; and



3. An oral glucose tolerance test. This test involves testing your blood sugar levels after you've been given a sugary drink (Healthline, 2018).



To know for sure if you have it, you need to get tested.

Prevention

While there is no cure for diabetes, there are steps you can take to prevent diabetes and reduce the risk of diabetes related complications.



These include: eating a healthy balanced diet, exercising regularly, aiming for a healthy body weight, watching your blood sugar level, avoiding smoking and alcohol, taking medications as prescribed, visiting your dentist regularly, getting your eyes checked regularly, etc. It is also important to get screened for diabetes on a regular basis, especially if you have had GD.

These preventative steps are not always accessible for some people due to things like high costs of and difficulty accessing healthy foods. Do the best you can, and if you feel comfortable, talk to your healthcare provider about creating an approach that works for you.

Treatment

While there is no cure for diabetes, people with diabetes can live long healthy lives if they are committed to daily diabetes management. Diabetes can be managed through:



Regular physical activity



Watching what you eat



Weight management



Medication: Type 1 diabetes is treated through insulin, while Type 2 diabetes is managed through physical activity and meal planning, and may also require medications and/or insulin.



Stress management



Trying to maintain a healthy blood pressure level (Diabetes Canada, 2018)

Protective factors:

Prior to colonization, diabetes was less of an issue for Indigenous populations. Traditional lifestyles often included lots of physical activity, and it was easier to access healthy, traditional foods (NADA, 2011). This was part of a wholistic approach to health that included physical, mental, emotional and spiritual well-being. Many people argue that this shift from traditional lifestyles and diets, to one "that is less active with a diet of over-processed foods high in sugar, salt and saturated fat has led to increased rates of diabetes" (NADA, 2011, p. 53).

Diabetes affects all aspects of our lives, and it is important to take care of not only our physical health, but our emotional, mental, and spiritual well-being as well. For some people, connection to culture, ceremony, time spent on the land, and learning about traditional food sources can be a pathway to a healthier more balanced lifestyle. For others, this might mean finding an activity that you enjoy and gets you active such as playing sports, walking, jogging, fishing, canoeing, or gardening (NADA, 2011). Self-care looks different for everyone, but it is important to remember that you deserve to take time for yourself and prioritize your health.



Native Women's **Association of Canada**

L'Association des femmes autochtones du Canada





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