**INDIAN HEALTH SERVICE** 



TELEBEHAVIORAL HEALTH CENTER OF EXCELLENCE

# Diabetes & Mental Health in Integrated Settings: Stress Management

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#### Lori Raney, M.D., BH2I Integration Consultant



- Board-certified psychiatrist and owner of Collaborative Care Consulting in Dolores, Colorado.
- Leading authority on the collaborative care model and the bidirectional integration of primary care and behavioral health.

Dr. Raney worked for 15 years as the medical director of a rural community mental health center, where she fostered the development of a full range of evidence-based services, including starting integrated care programs. She also works as a staff psychiatrist at the Ute Mountain Ute Health Center in Towaoc, Colorado, and has more than 20 years of experience working with IHS in clinics in the Southwest.

#### Andre Peri, Ph.D.



- Clinical psychologist specialist
- 10+ years of clinical, supervisory, data analytics, program development, and evaluation skills in improving health and wellness of patients from a whole health perspective.

For the last seven years, Dr. Peri has worked with Native/Indigenous communities in both reservation and urban settings. He is passionate about value-based care/patientcentered medical home. Dr. Peri is currently the Mental Health Department Director at Community-University Health Care Center, a federally qualified health center serving immigrant and refugee communities in South Minneapolis.



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### **Objectives**

At the end of this presentation, participants will be able to:

- 1. Examine the ways stress effects the whole person.
- 2. Apply the use of at least two stress management approaches.
- 3. Differentiate the concept of diabetes distress from depression.

#### **Stress is Normal!**

- Stress is a normal reaction the body has when changes occur, resulting in physical, emotional, and intellectual responses.
- Activates the body's "fight or flight" response.



Stress and the Brain | Let's Talk Science (letstalkscience.ca)

# What does stress do to the body and mind?

- Some studies have shown that stress has many effects on the human nervous system and can cause structural changes in different parts of the brain.
- Chronic stress can lead to atrophy of the brain mass and decrease its weight. These structural changes bring about differences in the response to stress, cognition, and memory.
- The amount and intensity of the changes are different according to the stress level and the duration of stress.

#### **Chronic stress and diabetes**

- Under stress, the liver produces extra blood sugar (<u>glucose</u>) to give a boost of energy. If under chronic stress, the body may not be able to keep up with this extra glucose surge.
- Chronic stress may increase the risk of developing type 2 diabetes.
- Historical trauma and stress linked to DM.

#### **Common Effects of Stress On Your**



#### **Stress Management Strategies**

- Stress negatively impacts diabetes management.
  - Stress lowers motivation to engage in healthy behaviors (i.e., exercise, diet).
  - Use of unhealthy coping (i.e., emotional eating).
  - Stress and anxiety releases hormones that raises glucose levels (physiological response).

#### **Stress Management Cont'd**

- Stress management includes ongoing efforts and acute interventions.
- Stress management strategies include
  - Use of social support
  - Physical exercise
  - Relaxation activities and exercises
  - Sleep hygiene
  - Cognitive retraining

#### **Relaxation Activities & Exercises**

- Relaxation activities
  - Hobbies and interest (i.e., fishing, hunting, nature walks)
  - Cultural-specific activities (i.e., traditional handwork (e.g., beading, basket making, regalia making), drumming, singing)

#### **Techniques**

- Relaxation exercises
  - Breathing retraining
  - $\circ$  Bodyscan
  - Progressive muscle relaxation
  - Grounding techniques– uses of senses
  - $\circ$  Visualizations
- Considerations for teaching stress management
  and relaxation skills
  - o practice what you preach

#### **How to Manage Stress - Recap**

If you have stress symptoms, taking steps to manage your stress can have many health benefits. Explore stress management strategies, such as

- Getting regular physical activity.
- Practicing relaxation techniques, including deep breathing, meditation, yoga, tai chi, or massage.
- Keeping a sense of humor.
- Spending time with family and friends.
- Setting aside time for hobbies, such as reading a book or listening to music.

#### Features with NEGATIVE Effects on Diabetes Management & Outcomes

- Conflict or criticism
- Oppositional behaviors:
  - Buying/consuming unhealthy food.
  - Cooking high fat meals/desserts.
  - Lack of accommodation of Diabetes management regimen (i.e., not leaving time for exercise/mealtimes).
- Lack of emotional and practical engagement.
- Focusing on the negative aspects of DM and DM outcomes.
- Not sharing in the burden of DM responsibilities.
- Persistent chiding/nagging about Diabetes restrictions/activities.

#### Features with POSITIVE Effects on Diabetes Management & Outcomes

- Family and partner support/expression of support.
  - Understanding/learning about the disease and impact on lifestyle.
  - "Nice" reminders about taking medications and glucose monitoring.
  - Monitoring and responding to potential crises (i.e., hypoglycemic crises).
  - Expressions of empathy and what family member is going through.
- Marital adjustment/Intimacy/Stress Management
  - Acknowledging need for independence/privacy.
- Sharing Responsibilities
  - Food preparations
  - Coordinating routines/accommodating need to exercise.

#### **Diabetes Distress vs. Depression**

#### **Diabetes Distress**

Symptoms are linked to diabetes and management of this disease.

- feeling overwhelmed by the demands of living with DM.
- failure in following a prescribed DM routine.
- feeling unsupported by friends and family.
- feeling angry, scared, and/or depressed about living with DM.
- feeling that long-term complications of DM are inevitable.

#### Depression

At least 5 of the DSM-5 criterion for MDD nearly every day during the same 2-week period.

- Depressed mood most of the day.
- Reduced interest/pleasure in almost all or all activities.
- Marked weight loss/gain.
- Sleep disorders.
- Psychomotor agitation/retardation.
- Fatigue or loss of energy.
- Feelings of worthlessness or guilt (excessive/inappropriate).
- Problems concentrating or indecisiveness.
- Recurrent thoughts of death, suicide ideation or attempt.

#### **Diabetes Distress Screening**

- 17 potential problem areas that people with DM may experience.
- Divided into
- o Emotional burden
- Physician-related burden
- Regimen-related burden
- o Interpersonal burden
- Degree of distress/bothered by situations "During the past month." (rated 1-6)
- Moderate or high distress scoring associated with higher A1C levels responds to addressing distress not antidepressants.
  - Score 4 or more problematic

#### The Diabetes Distress Screening Scale

**DIRECTIONS:** Living with diabetes can sometimes be tough. There may be many problems and hassles concerning diabetes and they can vary greatly in severity. Problems may range from minor hassles to major life difficulties. Listed below are 17 potential problem areas that people with diabetes may experience. Consider the degree to which each of the 17 items may have distressed or bothered you DURING THE PAST MONTH and circle the appropriate number.

Please note that we are asking you to indicate the degree to which each item may be bothering you in your life, NOT whether the item is merely true for you. If you feel that a particular item is not a bother or a problem for you, you would circle "1". If it is very bothersome to you, you might circle "6".

	Not a Problem	A Slight Problem	A Moderate Problem	Somewhat Serious Problem	A Serious Problem	A Very Serious Problem
1. Feeling that diabetes is taking up too much of my mental and physical energy every day.	1	2	3	4	5	6
2. Feeling that my doctor doesn't know enough about diabetes and diabetes care.	1	2	3	4	5	6
3. Not feeling confident in my day-to-day ability to manage diabetes.	1	2	3	4	5	6

# Self-management demands for Diabetes

- High for diabetes due to needing to address various factors: physical, emotional, behavioral, and environmental.
- Help patients not become overwhelmed by the number of lifestyle changes needed.
- Increase problem-solving skills to improve selfefficacy and decrease stress.

#### **AI/AN Cultural Considerations**

- Acceptance of a holistic view of behavioral health. Among many American Indian and Alaska Native cultures substance use and mental illness are not defined as diseases, diagnoses, or moral maladies, nor are they viewed as physical or character flaws.
- Instead, they are seen as symptoms of imbalance in the individual's relationship with the world.
- Thus, healing and treatment approaches must be inclusive of all aspects of life: spiritual, emotional, physical, social, behavioral, and cognitive.

#### Resources

- <u>Emotions Stress.pdf (diabetes.org)</u>
- IHS Special Diabetes Program <u>Division of Diabetes</u> <u>Treatment and Prevention | Indian Health Service (IHS)</u>
- <u>Special Diabetes Program for Indians (SDPI) | Indian</u> <u>Health Service (IHS)</u>
- Diabetes and Mental Health | CDC
- <u>NCJTC Stress and Community.pdf</u> (cossapresources.org)

#### **Presenter Contact Information**

Please contact the BH2I T/TA Team for any questions/feedback regarding the presentation at:

<u>Request Technical Assistance – Behavioral</u> <u>Health Integration Initiative (bh2itoolkit.com)</u>