

Diabetes In Latinos Studied

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Cultural Barriers, Language And Diet Make Managing Disease Difficult

Public health officials have long known that diabetes is a scourge of Hartford's large Latino population.

But the first under-the-hood look at

HARTFORD

the problem has found a community that is obese, depressed, overrun with diabetes and completely unequipped to manage the disabling disease.

"I truly think these are people who feel lousy," said Rafael Perez-Escamilla, a nutrition researcher at the University of Connecticut who led a team that interviewed 200 middle-aged Hispanic women living in Hartford. "They are very

sick and very sad."

Escamilla and his colleagues plan to explain details of their findings during a public release of the report today at 11 a.m. at the Hispanic Health Council's headquarters, 175 Main St., Hartford.

To learn more about diabetes in Hartford's largely Puerto Rican communities, the researchers spent a year interviewing 100 women who said they had been diagnosed with diabetes and 100 women who said they did not have the disease.

One of the most startling findings was that both groups were remarkably similar — meaning that even people who

don't have diabetes now could be heading for the disease in the future.

A huge majority — at least 80 percent — of people with and without the disease were obese; almost half of both groups reported symptoms of major depression; most got little or no exercise; and many in both groups had a close relative with diabetes. All are risk factors for diabetes.

At the same time, people in both groups lacked knowledge about how to use the food guide pyramid, and very few were able to read a food label. People with diabetes were even less familiar with food labels than people without the disease.

Type 2 diabetes is a condition in which the body can no longer efficiently use insulin, the hormone needed to process sugars into energy. Instead, large concentrations of sugar remain in the bloodstream, wreaking havoc on the vessels, the kidneys, the heart and other organs. While obesity is not the only cause of Type 2 diabetes, a lack of exercise and a diet high in starchy foods can contribute to the condition.

Escamilla said he believes the Latino community wants to avoid or control diabetes, but language and other cultural barriers get in the way.

"Whenever we [at the Hispanic Health Council] talk about nutrition, people ask us about diabetes because almost everybody has a close friend or relative who has lost a limb or is blind or has kidney trouble because of diabetes," Escamilla said.

One problem, he said, is that there are few Spanish-speaking dietitians in Hartford. At the same time, most of the study participants chose to be interviewed in Spanish, indicating a preference for their native language.

Hunger or the inability to afford enough food also appears to be a troubling factor in the high obesity and diabetes rates among Hartford's Latinos. More than 70 percent of both groups in the study relied on either food stamps or food pantries.

Diabetics were twice as likely to report experiencing hunger

than non-diabetics, indicating that a shortage of fresh, low-carbohydrate food may contribute to the problem.

Grace Damio, director of community nutrition for the Hispanic Health Council, said the results indicate that Hartford's Latino community is in the midst of a diabetes "emergency."

The report recommends deploying a cadre of trained, Spanish-speaking peer educators to spread the word about nutrition, exercise and diabetes prevention

in Hartford's Puerto Rican community.

The researchers also suggest that food pantries and other public nutrition programs offer a larger variety of healthy foods and that government food-assistance programs be expanded to prevent hunger and poor nutrition among all low-income people.

"I am incredibly troubled by the lack of food security," Escamilla said.