



Ka Wai Ola

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DIABETES AMONG US

HAWAIIANS MAKE UP 1 IN
5 DIABETICS IN THE STATE

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Dayna Pa, who has Type 2 diabetes, holding son Dallas, with her doctor, Dr. Laurie Tom, on right and Dr. Marjorie Mau, whose research has shown that social support plays a role in Native Hawaiians having healthier lifestyles. - Photo: John De Mello

OHA 30TH ANNIVERSARY



SPECIAL SECTION PAGE 9

LOOK INSIDE FOR A 4-PAGE INSERT FROM KAMEHAMEHA SCHOOLS

DIABETES AMONG US

BY KATHY MUNENO

Illustration: Nelson Gaspar

She was deathly afraid she would lose her unborn baby, he had to quit college before earning his degree, and a little girl teaches adults how to puncture their skin with a needle to help save their lives.

That's the power of diabetes. It pushes you to where you don't necessarily want to go or to do things you'd otherwise choose not to and it hoists on your shoulders the weight of fear, constant vigilance, responsibility and the ever-present threat – perceived or real – of physical deterioration to varying degrees.

"Most of the time it just feels like the weight of the world was tossed onto my shoulders and there's nothing that I can do about it but to deal with it," says 27-year-old Harold Pei of Wai'anae, who was diagnosed with Type 1 diabetes at the age of 1. "A lot of diabetics that I know often feel this way. But with such heavy loads, it makes it easier to appreciate the little things, our own little wins. Most people won't think anything of passing up a mini candy bar, but for some diabetics, it feels like they just achieved the impossible."

And so to rattle off the latest, staggering diabetes numbers almost takes away from the true, individual, day-in and day-out impact of this insidious disease. And yet these numbers cannot be ignored; in fact they should not, because "the Native Hawaiian population is at risk for diabetes in such growing numbers," says Leslie Lam, the Executive Director of the American Diabetes Association (ADA) in Hawai'i.

Quoting 2009 figures just released by the State Department of Health, Lam says



Harold Pei has Type 1 diabetes. He was diagnosed when he was one year old. - Courtesy photo



Dayna Pa, who has Type 2 diabetes, with son Dallas, in Dr. Laurie Tom's office at Queen's Medical Center. Diabetes can lead to various complications in pregnancy, including difficult births and health risks to the baby, and to this day, Pa still remembers the fear she experienced as an expectant mother. - Photo: John de Mello

Before diabetes can be stopped, it has to be understood. What better time to examine diabetes, which affects 20,000 Native Hawaiians in Hawai'i, than now, when the nation marks American Diabetes Month

STOP DIABETES

RISK FACTORS

- age over 45 years
- race or ethnic background (Native Hawaiian, Filipino, Japanese, African American and Hispanic ethnicities have a higher rate of diabetes than Caucasians. Native Hawaiians have the highest mortality rate when compared with other ethnic groups.)
- being overweight (especially around the waist)
- low physical-activity level
- high blood pressure
- family history of diabetes
- history of diabetes during pregnancy

WARNING SIGNS

- ▶ **Type 1 diabetes** (symptoms usually occur suddenly)
 - frequent urination (in large quantities)
 - excessive thirst
 - extreme hunger
 - unusual weight loss
 - extreme tiredness
 - irritability
 - blurry vision
- ▶ **Type 2 diabetes** (symptoms usually occur gradually)
 - any of the Type 1 diabetes symptoms
 - slow-healing infections or wounds
 - tingling or numbness in the hands or feet
 - dry, itchy skin

Source: American Diabetes Association

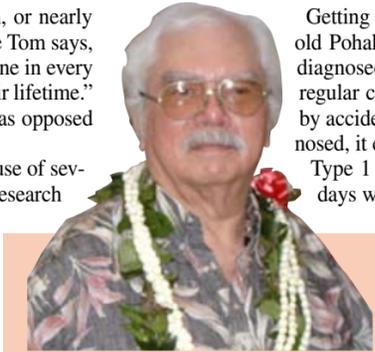
show 1,006 children have diabetes, with 291 of them, or nearly one-third, Native Hawaiian. Endocrinologist Dr. Laurie Tom says, "The estimates are that if we continue current trends, one in every two babies born in Hawai'i will develop diabetes in their lifetime." Still, Lam points out, "We try not to look at numbers as opposed to the 'why' behind it."

Native Hawaiians are at higher risk of diabetes because of several factors, often a combination of them. Lam says research shows those factors to be socioeconomic status, lack of diabetes awareness, low educational attainment and lack of access to critical care. Tom says there is a genetic susceptibility as well and that lifestyle and diet "have led to tremendous obesity rates," a significant risk factor for developing diabetes. She says 80 percent to 90 percent of people with Type 2 diabetes, the most common type, are overweight or obese. The particular concern is fat in the stomach area, which, as Tom explains, acts like a large organ whose secretions impair the ability of the pancreas to make the hormone insulin. Without insulin, sugar builds up in the blood stream and creates the condition called diabetes, which can lead to blindness, kidney disease and lower extremity amputation.

Dayna Pa, 36, of Hoolehua, Moloka'i believes it was primarily her weight and genetics (her mother and aunts have diabetes) that brought on her Type 2 diabetes, which is when the body doesn't make enough insulin or doesn't use the insulin it makes. "I want to say yes, I knew that I might be at a higher risk for diabetes, but I don't think it really hit me till I was diagnosed (in 2004)," says Pa, who is the Secretary to OHA Trustee Colette Machado. Then along with elation, fear set in when she found out she was pregnant last summer and, although she was working on it, she says her diabetes was not under control. She was still taking diabetes, high blood pressure and cholesterol medicines that her doctor told her could cause birth defects.

Tom is Pa's doctor and says, "If conception occurs when the woman's diabetes is poorly controlled, there may be an increased risk for congenital defects and fetal malformations." She says there is also the risk of a having a baby weighing more than 9 pounds, which could mean a difficult delivery and possible injury, and once the child is born, it is at risk of hypoglycemia (low blood sugars), which can cause seizures and low calcium. To this day, memory of the fear brings Pa to tears. "I don't think I got to enjoy my pregnancy like most mothers. Just the concern of you know, something might happen ... that I might lose him."

Pa had to go on insulin shots three times a day, see a nutritionist and twice a week fax her food and blood-sugar diaries to a nurse at the Queen's Medical Center for insulin adjustments. Dallas Pa was born slightly hypoglycemic, but he is fine. Tom says babies don't get diabetes from their mothers in the womb, but they of course inherit their mother's genes and babies born weighing more than 9 pounds are at higher risk for diabetes. As for Pa, she's working on exercise and diet, and has lost weight, but like many of us, she says, "I like to eat." Dallas now serves as her major incentive. Pa is still on insulin because she's breastfeeding but hopes to get off it when she stops.



Cataluna on diabetes

"It's all right if you eat some sugar but don't go glut on it," says OHA Kaua'i-Ni'ihau Trustee Donald Cataluna, sharing mana'o about how he approaches his diabetes.

"It is very important to work with your doctor, and listen to what he says."

Cataluna first learned he had Type 2 diabetes, the most common form, in 1976 during a physical for a new job. The hidden disease showed no symptoms. He was told it was controllable and was given pills to take once a day.

Fourteen years later, he went to see a highly recommended doctor on the Big Island. His diabetes was not getting any better and Cataluna was soon put on insulin.

After living with diabetes for more than three decades, Cataluna says that people tend to think it is expensive to eat healthier foods. But that doesn't have to be the case. Get a salad instead of fries, he says. Tofu, chicken and veggies can be affordable.

"You got to watch what you eat," he says. "You have to exercise and you have to take your shots. Don't eat food high in sugar, glucose sugar. Eat vegetables."

For Cataluna, the *Hawai'i Diet* by Dr. Terry Shintani, has been a key resource to learning how to eat better. But Cataluna takes it one step further. "We have a vegetable garden," he says.

"Using herbs to season your food is better for you than seasoning with salt," he says. "We have green onion, Maui onion, lettuce, cabbage, herbs, and my wife started a kalo patch. If we can do it, you can too." — Francine Murray

Getting off insulin shots is not an option for 8-year-old Pohaku Galdeira of Volcano, Hawai'i. She was diagnosed with Type 1 diabetes at age 4 during a regular checkup, says her mom, Keala. "It was not by accident, it was by luck." Had she not been diagnosed, it could have been fatal. Lam says those with Type 1 diabetes could go into a coma after three days without insulin. Type 1 diabetes means your pancreas is making very little or no insulin, according to the ADA. While people are usually born with Type 1 diabetes, or it occurs in young children, Lam says the "alarming trend" is that "now we're finding 13-, 14-, 25-year-olds just being diagnosed with Type 1 diabetes" and no one really knows why.

"All I can say is I don't really like it (diabetes)," says Pohaku, a spunky, mature third grader who gives herself five shots a day, tests her blood-sugar level several times a day (sometimes in class), and reads food labels to know how many carbs she's eating so she knows how much insulin to give herself. She's very matter-of-fact and an inspiration to many, including adults with diabetes like her uncle, as well as a school bus driver and teachers who have benefited from her teaching them how to give themselves shots. Truth is, "I don't like doing the shots a lot. It's sore," Pohaku says, but she won't tell them that. "I usually tell my uncle to just do it and you'll get it over with," she says.

As Pohaku grows and her body changes, it's difficult to manage her diabetes with her sugar levels sometimes getting too high or too low, sending her to the hospital with seizures maybe twice a year. But, as her mother says: "We have to control it. We can't let it control us."

There is the financial burden of diabetes as well. Pei, the 27-year-old Wai'anae man, says, "Health insurance plays a big part in any diabetic's life." He says without it he'd be paying more than \$900 a month for insulin alone. "When I turned 23, the health insurance provider that I was with had stopped my coverage because that was how they (designed) their plans. At the time, I was focusing on school; however, I had to change my plans quickly. I had started immediately looking for full-time work so that I could get health coverage through an employer. Because of that, I haven't finished get-

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ting my degree.”

He is now a drafter, digitizing sketches from engineers at Lockheed Martin Corp. But his hours have been cut back because of federal budget cuts. With his income taking a hit, he says it “makes it harder to eat healthier.” Still, Pei says, although he’s not on a strict diet, he counts his carbs and limits the amount he eats.

Eating healthy is important in managing diabetes, whatever the type. In addition, becoming more physically active every day and losing weight can delay or prevent Type 2 diabetes, according to research, says the ADA. In terms of exercise, Tom suggests “five days a week for at least 30 minutes. However, not everyone can exercise vigorously, so activity and movement of any type such as housework, yard work, also counts.”

What is also proving to be an important factor for Native Hawaiians is having some kind of support system. Dr. Marjorie Mau, Professor of Native Hawaiian Health at the John A. Burns School of Medicine, has spearheaded several studies including one that had each subject paired with a support person – brother, sister, mother, friend. Mau says, “Our conclusion then was that social support shows promise as a means to improve healthy lifestyles for Native Hawaiian adults with or at high risk for diabetes.” She says a larger trial study called the Diabetes Prevention Program again showed “social support was an important piece of ensuring that lifestyle changes actually had an impact.”

Corporate Hawai‘i is stepping up in a supportive role as well, says Lam, the ADA Executive Director. Take for instance Grove Farm Co. on the island of Kaua‘i. It supports the Grove Farm Fit Club started by employees two years ago. Vice President Marissa Sandblom says



Eight-year-old Pohaku Galdeira was diagnosed with Type 1 diabetes during a routine checkup when she was 4. Here, she is shown with big brother Mana at home in Volcano. - Photo: Courtesy of Keala Galdeira

once a week employees will walk or jog the equivalent of 2 miles around the park across the street or play football, volleyball, bon dance or incorporate a community-service project like walking to

collect flowers for lei to donate for Memorial Day. After exercise they eat a healthy meal together, one partially sponsored by the company and supplemented by produce from the company garden they maintain.

In turn, Sandblom says, the Fit Club has helped morale. “Some of our best business ideas and sharing of project updates have occurred during the lunch following a workout, and people aren’t taking as many sick days.”

Information for companies and individuals abound through the ADA especially as November is American Diabetes Month. A new movement is kicking off to stop diabetes and you can join it at www.stopdiabetes.com. You can also go to www.diabetes.org for diabetes facts, symptoms and a test to see if you’re at risk. There is no cure for diabetes, but as Tom, the endocrinologist, says, “The best cure for diabetes is to prevent it. Once someone has diabetes, it is important to control it.” ■

Kathy Muneno is a Contributing Writer for Ka Wai Ola. She is a weekend weather anchor at KHON2.

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- CDL license

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- Vacation
- Investment
- Re-lending by borrower
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- Applicant must be of native Hawaiian Ancestry
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- Loans must be for the primary applicants benefit
- Loans are available to individuals, only (partnerships, corporations, sole proprietorships, etc., are excluded)

For more information or a downloadable application, please visit www.oha.org/cmlp or call, (808) 594-1916 or email quentinf@oha.org.



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