



Women diabetics and the medical profession



5

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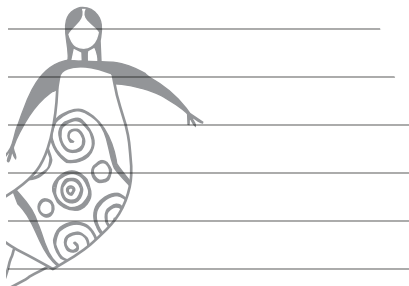
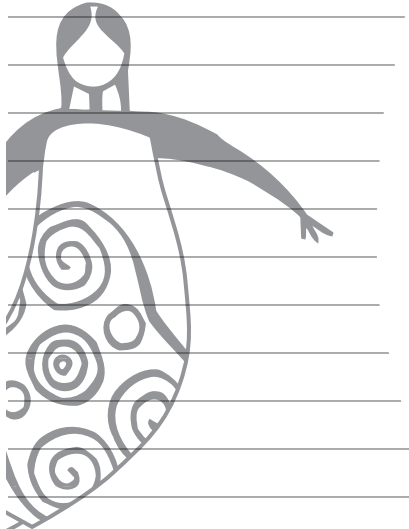
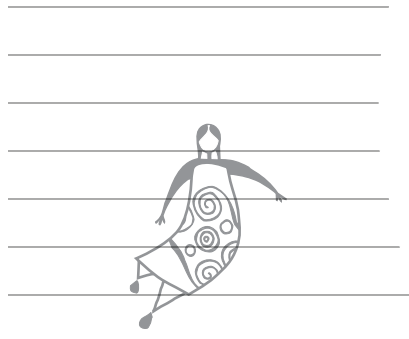
Theme 5: Women diabetics and the medical profession



Now middle-aged, Lucy learned she was diabetic ten years ago. As she had always considered herself in good health the news came as something shocking and unjust. Her reaction was to fire questions at the nurse. Would you give me information? Is diabetes hereditary? It was at that moment that the nurse spoke to her about the complications of diabetes. It was hard to swallow the fact that the diabetes was now part of her and she could fall into a coma if she wasn't careful. Lucy was immediately sent to the hospital for two weeks so that they could determine her health. Shocked at having to take pills or to give herself a needle and, especially, motivated by the fear of her children having a needle by mistake or swallowing a diabeta pill, she thought to herself, "I have to get a handle on this." She demanded to see a nutritionist and even though she was a greedy eater, she was determined not to stray from the strict diet she was given. Something inside of her guided her, inspiring her with confidence and determination in herself. She was able to say, "I am an independent person. I can do it and I have the courage to do it." She never doubted herself: having made her decision, she defended herself against people who tried to undermine her self-confidence.

That something inside of her, it was that she loved and loved her children, and was not afraid to talk about diabetes and confront was others thought. She lost a lot of weight following her diet and walking, dancing during the bad times, or walking up and down stairs in her house, showed her that she could decide how she would live. She got occasional help, but she didn't always have confident people or those with whom she was at ease. In her case, she did it alone.





After the birth of her last child, she was kept at the hospital for 48 hours. Doctors and nurses seeing her solid control of her glycaemia did not want to believe it was true, going so far as to tell her she was cheating. She often felt they were trying to make her afraid by talking to her about the consequences of diabetes and she had to affirm many times her will and ability to control her glycaemia without medication before they would stop giving them to her. How did she get to that point? She drew all the love that she could from her family and most especially, she was very sensitive to what was going on in her body. If she gained several pounds, she noticed. She was aware of the fatigue that she would feel after a large meal and was not afraid to do all she could to feel better, even dancing in the house. Sometimes she went off her diet and ate some chocolate. If, at times, she had less control, the diabetes in charge of her system reminded her that she could not forget. Then she took her time and started over again. Not only health care professionals doubted her, but she also had to confront gossips, among whom were those she believed to be her friends. She believed the people who opened themselves to others when they had diabetes and who, above all, were not afraid to talk and to find answers, on their own, when they needed them. “If you are bothering someone, if they don’t want to know about your questions, go ask someone else.”

Many women have said that diabetes doesn’t exist. They believe that diabetes wouldn’t develop among people following a traditional lifestyle. Others believe that diabetes could exist, but simply not be “detected.” In any case it would not be a real illness, something that could be named. The word “diabetic” arrived at the same time as the whites—especially those working in clinics. But in each First Nation language one finds version of this word, often in expressions saying: “sugar fighting you,” “sugar in the blood,” or simply “sugar.”



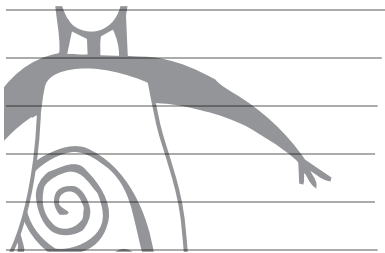
The beginnings of an ambiguous relationship

1. How did we react when our doctor or nurse told us we had diabetes?



Not only do nurses and doctors tell us that we have diabetes, but they hold us in a relationship that can last all of our lives.

2. How do we feel about someone telling us that from now on we must exercise, watch what we eat and often take pills or give ourselves injections?

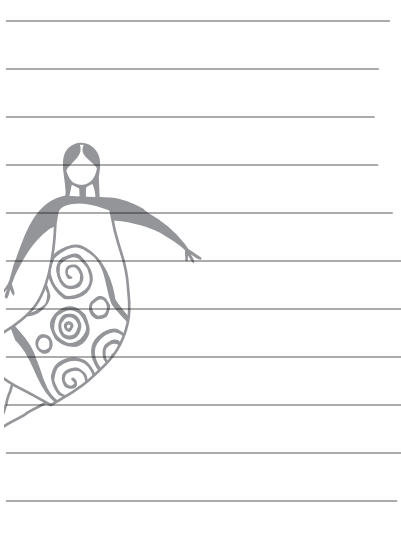


Prescriptions for pills or insulin multiply just like visits to the health centre. At the beginning no one has the capacity to give into these demands. Being diabetic doesn't mean you automatically like pills or clinics—even doctors, nurses or nutritionists!

3. Are we confident enough to speak to the nurses or doctors as equals?

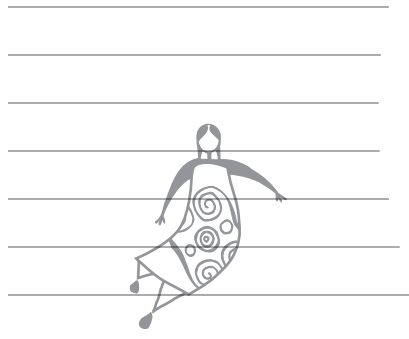


The clinic can inspire a fear that has long held us, the fear of being told you are sick.

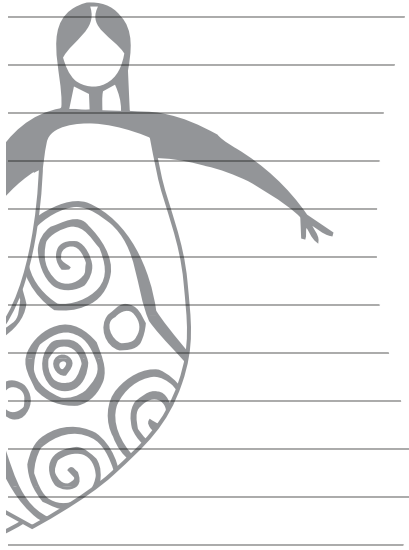


- *There are people who are afraid to know that they are diabetic.*
- *Are they are too afraid to know?*
- *They are too afraid to learn, yet...*
- *Maybe there are people who are afraid to go to the doctor, just the fact of going to the doctor makes them afraid. They are afraid of the examinations, they are afraid...*



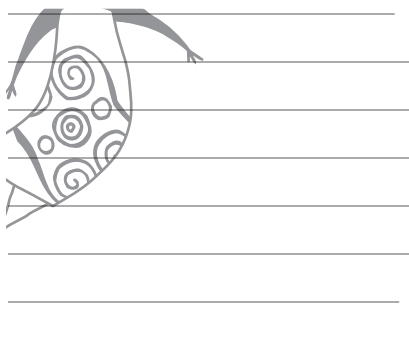


I was ill at ease. Me, I did not want to take the medical tests. But I told myself that I had to go sooner or later. But I didn't want the doctor to tell me, "you have an illness. You have a grave illness." I didn't want to see the doctor. But I went anyway to take the examinations.



- *And I said to myself, "why take pills or insulin if I can't heal the diabetes? Why take medicine when I know I can't be healed?"*
- *How did they respond to you?*
- *They told me, "the diabetes is not a toy, not a game, it's an illness that can kill you." That shocked me. I didn't take it well. I really didn't take it well.*

4. How do we feel about being called by the health care professionals on a regular basis so that we go to the health centre?



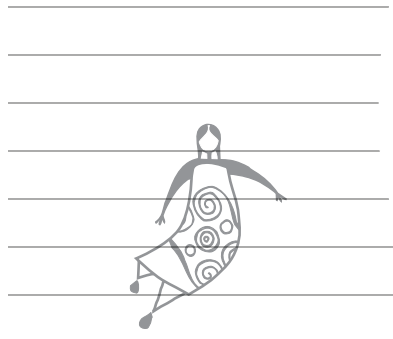
If you learn that you are diabetic at the hospital and you hate hospitals, the reaction can be even more radical: do anything you can to get out as fast as possible. You have a desire to avoid... and maybe you have a longing, as if by magic, that you would not have diabetes anymore once you got through the doors.





They put me in the hospital, and on insulin. I was there for like a month, trying to learn how to take needles. I didn't even understand why I was taking needles. They came in the morning and jabbed me, and they said, "this is your shot." I said, "for what?" I wasn't told I was diabetic. The doctor came in, and he said, "your sugars will have a..." I said, "sugars for what? What do you mean?" I didn't know what he meant about diabetes. I didn't know I was diabetic. So three days after, they came in and they gave me this bottle of sweet stuff to drink. Glucose product they call it. They gave me that, and I said to the doctor, "what are you doing to me?" It took two, three days before they told me that I was diabetic, how my sugar levels were and about the diet. And then I said, "not me." And I said, "well, what's a diabetic? What does that mean?" I didn't want to be in the hospital. And they thought it was because I was going through denial about Diabetes and didn't know nothing about it. I had a hard time adjusting to the insulin, and to the fact that I was diabetic. All kinds of people came, the nurses, the doctors, the dieticians and everyone. And I found it so boring that I was saying, "get me out of here. What are you talking about? I don't want to listen to all of this stuff. Okay, I won't eat, I won't eat." And when the doctor finally came in and told me I was diabetic, I said, "okay, I'm diabetic." He said, "you have to go on insulin." And they were giving me my needles. I said, "well, I want to get out of here." He said, "but the nurses will have to show you how to give yourself your needles." "So where? Where do I give myself my needles?" He said, "on your leg, on your arm." And they said it would've taken two weeks to learn. For me, one jab, and I gave myself the needle. They were surprised. It was not because I was diabetic. I wanted to get out of the hospital.

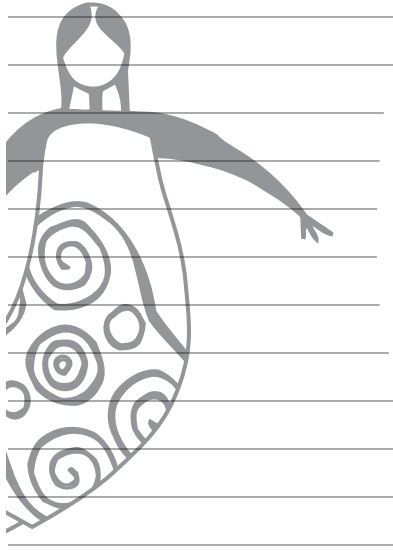




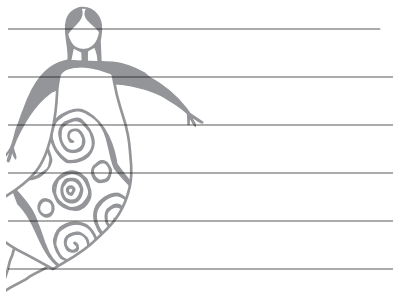
Hospitals, pills, needles are all synonymous with illness. And with sickness, no one likes to be touched. It's easier for some to accept. But for others, the announcement of a long-term struggle with themselves, against everything that is linked, near or far, to being sick. And whether you like it or not, health care professionals are a part of it.



- Did you find it difficult?
- *At the beginning, yes.*
- What was the most difficult?
- *The medications.*

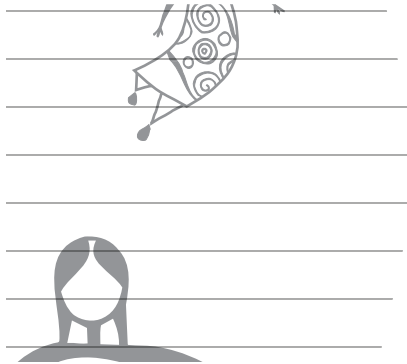


Nurses, doctors, nutritionists talk to us in a way which we would not like to hear. They tell us to totally change our life. We have to tell them the tiniest details about our eating habits. The way in which we feed our children. The fact that, sometimes, we don't have the courage to take a walk. Our relationship with our husbands, for example, if they don't like us going out alone on the streets. We get to the point where it feels as though we are being spied on, and would love to have nothing to say to them, or even not to see them. But on the other hand, we need their help... Health care professionals wear many masks: those of helpful people or those of people who never stop trying to make us afraid; people to whom we have to give account and who make us feel guilty or at fault or still people who guide us in our choices and support us. They are also human with good and bad days, and some use an approach that suits us more than others. On top of all this, they demand that we visit them every month. Of course, we can decide not to go to the appointment. We can also go, say "yes, yes" and then through out the pills. Who could stop us?



Is there too much or not enough fear of health care professionals?

5. Do we feel fear when dealing with our doctors and nurses? Do we express this fear? To whom?



The messages sent by nurses and doctors often contain an element of fear, whether they want them. The persons themselves makes us afraid, because we know what they may tell us, we know their battery of tests by heart—these tests that sometimes betray us, and we know overall what they can tell us. Its like going to Confession each time without knowing for certain whether you will get absolution. The verdict of the test falls like a butcher’s knife revealing whether our control of the diabetes has worked or not...

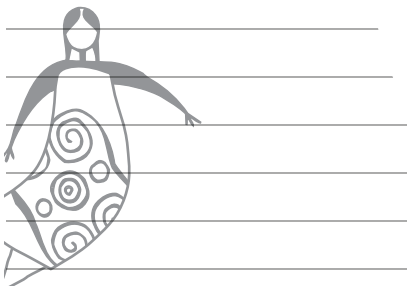
6. Is the fear a stimulus for change? A source of motivation?



Some people (including health care professionals) think that it is simply a case of being afraid of the consequences of diabetes or being afraid that the doctor will act towards us in such a way that it will stir us to action and change the habits of our life. But that is not true for everyone! Some people are truly and permanently motivated by these arguments.

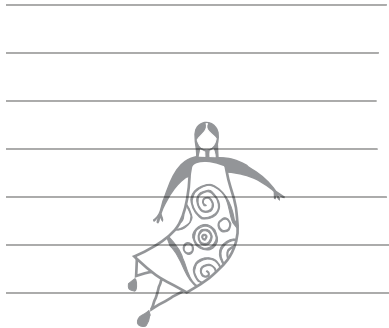


I think most people around here get the motivation from their doctor. Because I know if I go to my doctor and if I have gained weight, he’s gonna tell me, you know. He’s not gonna be pleased at all. So I think that’s where they get most of their motivation from.

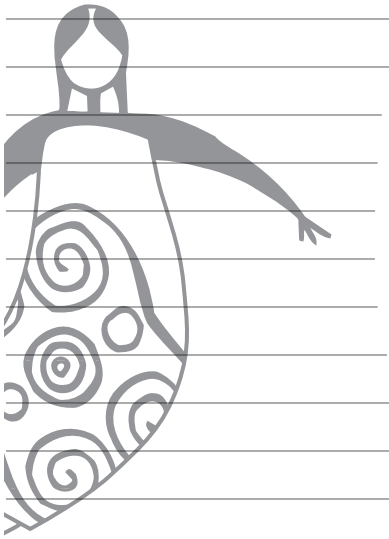


I know that there are some people suffering from diabetes who have lost limbs, I believe, who have had their legs cut off. And I also know that there are some people who have become blind because of diabetes. In fact, I often visit a woman who became blind because of her diabetes. But it’s all these things, you know, that show me I’ve got to take it in hand.



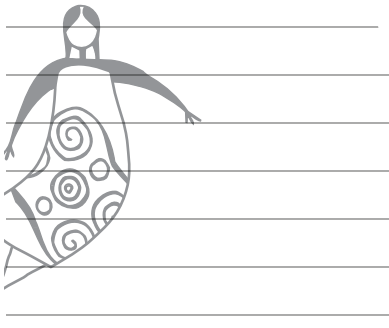


I only started my pills about three months ago. Before that, I wasn't even on the pill. No. But now, the doctor told me, "if you don't listen, the next will be the needle." And I'm so scared of needles. So I said I would listen.



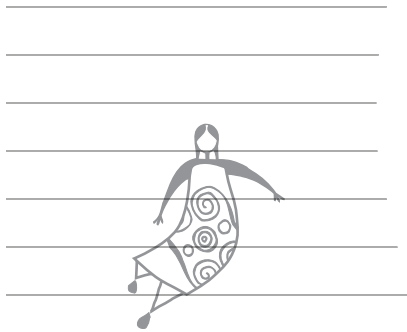
The stress that comes with a fear of hospitals or of the reaction of health care professionals can be so intense it causes us to change our behaviour for a time. But fear is not a good engine of change for everyone: it can also push us until we stop sleeping and become depressed... completely discouraging us with its intensity and bringing us to a point of being resigned to the seemingly inevitable consequences of diabetes.

There was one doctor that was more strict. I was more afraid. I kept my Diabetes regular, I was a good diabetic. I was eating properly, losing weight, and I kept on losing and I was all excited. I got pregnant, and in the eight, ninth months I was still losing weight. But near the end, he said: " don't want you to be losing weight." He said: "are you eating?." I said: "well, yes." But I was eating the right portions, following everything. I was really doing so good. But I was scared because I didn't want to go in the hospital. That's the reason why I followed everything.

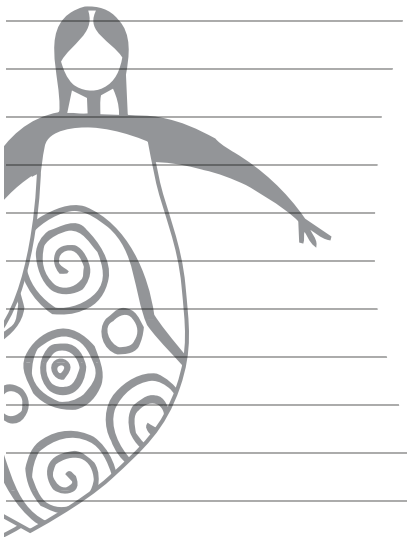


• The doctor talked to me, and that is what brought on the stress. I'd see his face, again and again, when he was angry with me. And at night, I couldn't sleep because I kept seeing his face.
• The fact of the doctor?
• Yes. And after that that I went to see him when he came to the clinic, and I talked to him. I said to him: "I keep seeing your face, you are stressing me." Each time I slept I saw his face.





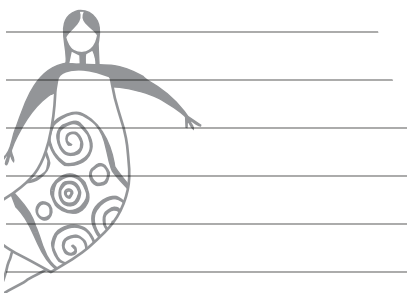
- *Each time I saw the doctor, he would say: “you have to pay attention or you are going to die from this.”*
- *And what would that do to you?*
- *It made me sad... I was sad.*



Each diabetic, or almost, has in their head distressing images that haunt them. Mutilated bodies, blind eyes... These images, they're the medicine that often sends us back. It is hard to not associate these images with the nurses and doctors, with the pills and the injections. In trying to escape these fears, we can adopt several attitudes: avoid the medical world which is the bearer of these images, try to outdo our own disgust as well as can be expected and change our behaviours even if it does not necessarily last a long time, or be truly inspired to take it in hand.



And until you get some kind of infection, like if you have a sore and you hear of someone losing a toe, it's scary... It's something that can happen to me . But I am in denial.

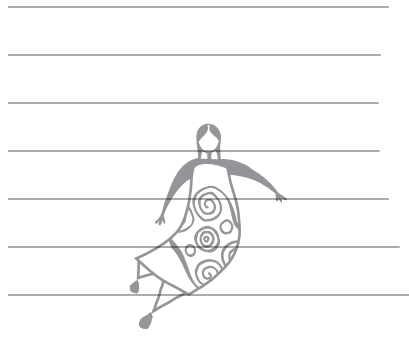


They were showing horrible pictures of people having their legs and their feet cut off and all that. I said: «oh my god!». And you know what? They were serving all kinds of food. All kinds of cake, small little pieces, you name it. I didn't eat any of it.

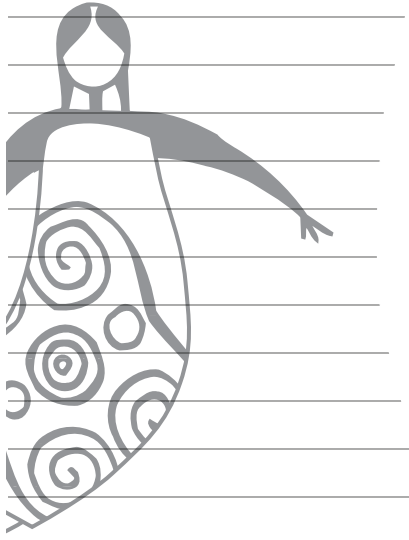


Sometimes, when I am cutting the nails on my toes, I don't pay attention. Then I have to go back and take a mirror to check my toes, behind my toes, to see if they're okay, nice and dry. I always take a soft towel to dry my toes just so, I may be a bit manic, you know, but I'm so afraid of amputation.



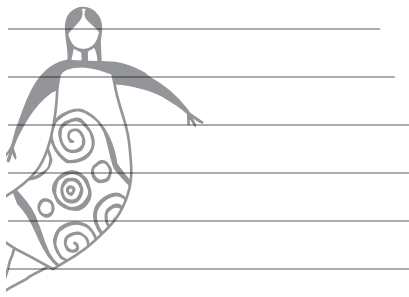


For me, the thing that really scares me, is amputations. To cut off a leg or else a toe. Because, if I think about it, I'm still traumatised by my grandfather's feet. What really scares me, above all, is amputation. I know that there are other things that could happen, the kidneys, sight and all that. But for me, what really scares me, is to have a leg cut off or worse.

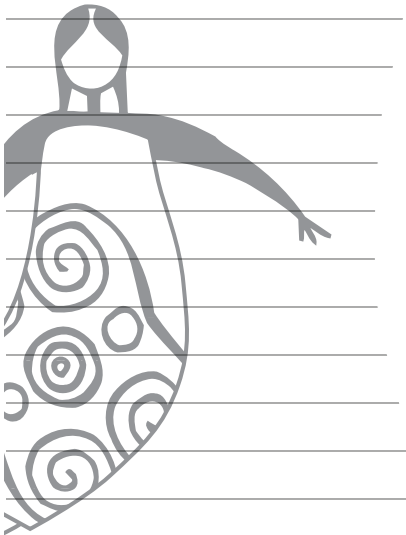


But I know that if I'm so afraid, it's maybe that I don't know enough about diabetes. Diabetes, that does not make me afraid, rather it makes me act and incites me to take precautions. But me, it's really the fear, I'm really afraid. Maybe it's because I'm getting older, but I would have to say that its amputations that me afraid. And if I loose limbs.

Some women explain their lack of control over their glycaemia by the fact that they “are not yet afraid enough.” They are astonished that they are not motivated by the horror stories, by the stump for a leg left on one diabetic uncle, by a certain other friend who is now blind, or by the time they changed the bandage of a parent who had a toe amputated, by the verdict of the last doctor visited... It's maybe because there are many ways of reigning in the fear. Ways that are more or less constructive. Some ways that paralyse and others that get us moving beyond. It could also be that we function definitely better when our goal is not “avoiding disastrous consequences,” but rather to feel better in one's own skin, to be happier. The response to fear is not universal, but for each woman, to make something of this fear, she must learn how to transform it. Like everyone everywhere, the diabetic woman needs, first of all, happiness—is the fear a long-term material in the construction of this happiness?

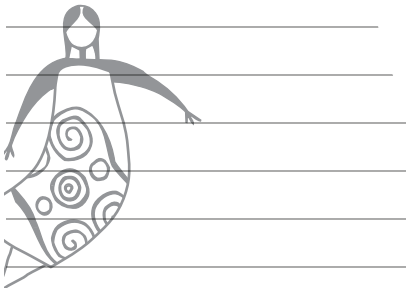


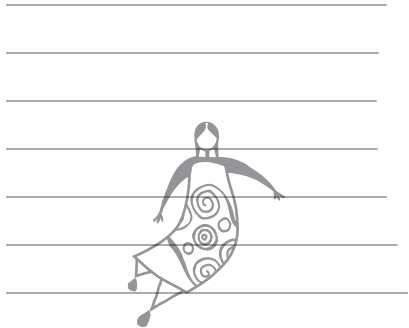
8. In the end, who wins or loses when I cheat?
9. How can we get the doctors and nurses to respect our choices? Is it possible?
10. Do we feel that the doctors and nurses respect us? Understand all of our needs?



Cheating assumes that there is an unequal relationship between two people, which the cheater is trying to restore. The doctor/nurse, for example, is sometimes seen (and this behaviour is sometimes true) as a guard, an authoritative person without any other dimension, who doesn't understand the daily grind, the immense difficulties that we must overcome to follow the famous diet and take a multitude of pills... when people are being watched, a reflex kicks in that makes them want to outsmart the guard. It is like when you were children and dreaded getting caught with your hand in the bag. What's the point of outsmarting the "guards" when, the bottom line is that it is not them but us that bears the consequences? As one woman said, "I cheat, but in the end I only cheat myself."

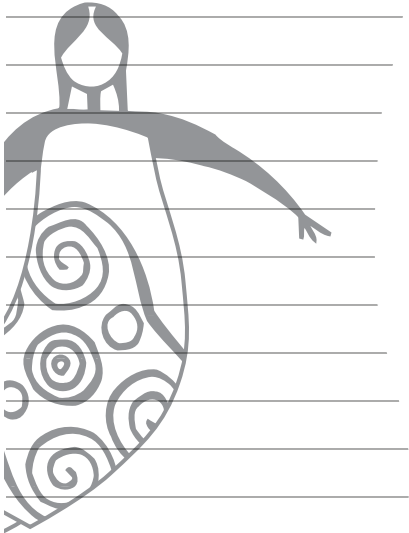
There are those who want to eat a lot, for sure, me too, I want to eat like that too... but I don't go to excess every-day. But there are those who eat and then take a second needle or another dose, because in doing that they say they can eat. But it doesn't work every time. Or else, there are some who will have a few beers and say, "Well, I won't take my needle or my pill 'cause I'll have a drink." Sometimes I'll have a drink, but I'll take my pill too.





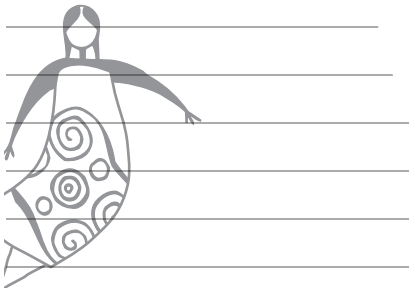
• I don't like needles, which is why I don't like going to the clinic to meet the doctor. And I don't like taking pills. I don't take my pills.

- He gave you a prescription?*
- Oh yeah, he gave me pills and I don't take them.*
- But he told you "take the pills"?"*
- Sometimes I take them.*
- But, what I want to say is that the doctor gives the pills, you take the jar, you go, and then you don't take them?*
- No.*



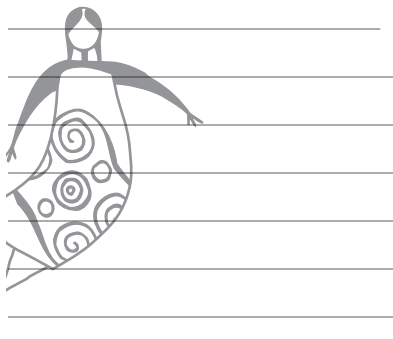
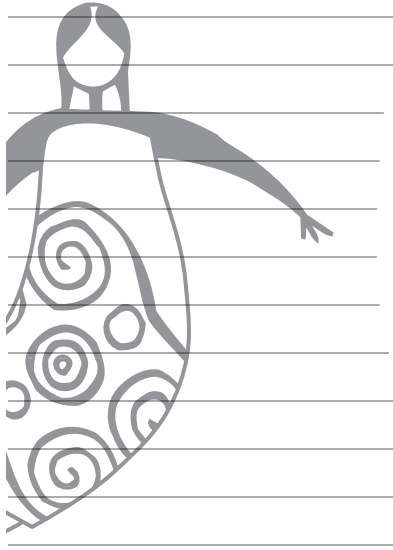
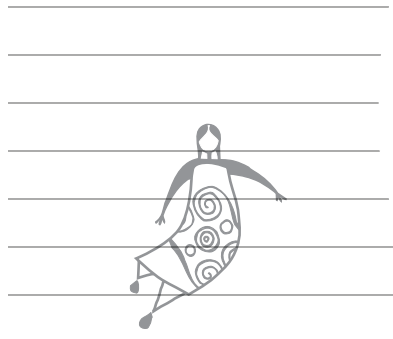
• And you, do you take it very seriously?

• I didn't at first, but now, since I got the blocked arteries, now I do. Now, I do. Because, I know the damage it can really do if you are not careful. When they first put me on my medication, some days I would take it, some days or a week I wouldn't take it, you know.



I lost fifteen pounds but not because I'm diabetic. For other reasons, I just decided to start losing weight. It'll probably help my diabetes. I have to check my sugars to control my insulin, at least I should be doing it. But if my doctor found out what I was doing, he'd hang me by my toes.





But the most frustrating thing, without a doubt is to undergo treatment as a cheater while you're being true to your goals and keeping your glycaemia relatively normal. The word "cheat" is not a defiance against authority, a means of making yourself feel guilty or of self-destruction... it becomes a weapon which is used against yourself.



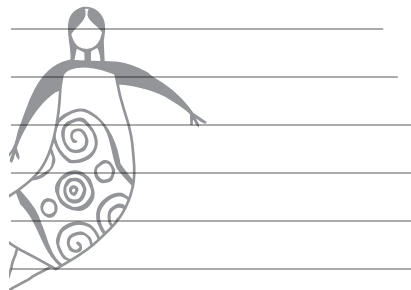
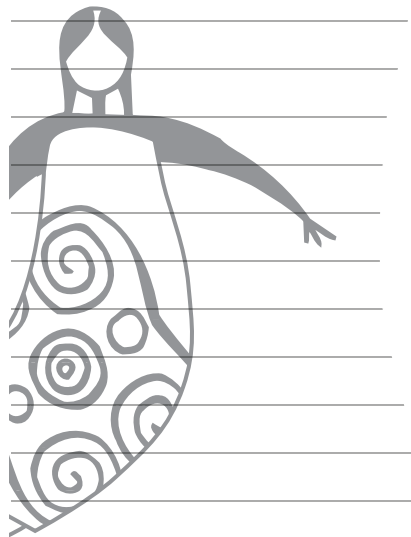
- *When I was pregnant with my last two children, it was twice as bad. Because they guarded me at the hospital 24 hours a day. Yet I was giving myself three needles a day, after having eaten. And everything was right. But they didn't want to believe the results of my test. They said, "it's not true, you're cheating a bit." But I wasn't cheating...*
- *Who wouldn't believe you?*
- *The doctor, the one at the clinic. He'd say to me, "you're definitely cheating. It's just so you won't take the pills." I would answer, "I don't cheat on my life, I don't cheat on my children, no. I don't cheat." But he didn't want to believe me. So I had to go to the hospital for 24 hours. They made me undergo blood tests.*

May we be allowed to keep those words "cheat," "cheater," within our own, internal speech? The meaning that we give to "cheater" sometimes belittles us, makes us feel less than nothing, a "child" facing an apparently insurmountable adult challenge. It's a heartbreaking position where you self-destruct while taking shelter from responsibility. It's a justification before even having gone off course. It's means of excusing ourselves while making ourselves feel guilty. Ultimately, like fear, it's the opposite extreme of happiness, an affirmation and value, being free to choose for yourself.



Fearing what you do not understand

11. Why do we feel afraid of diabetes? Can this fear lead us to change? (For example, can being afraid of developing lung cancer lead someone to quit smoking?)

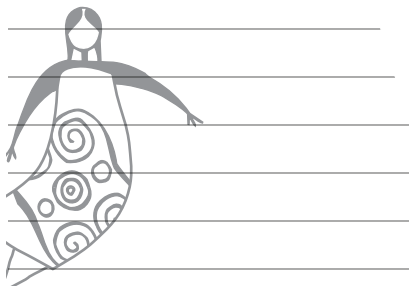
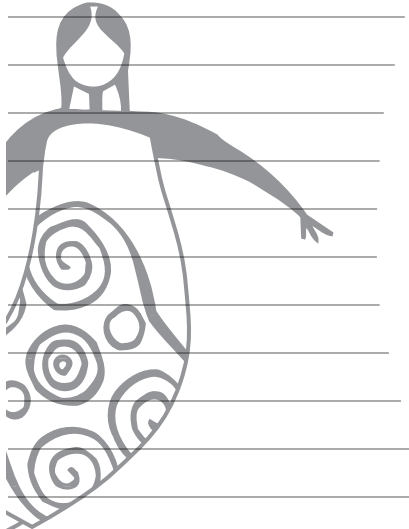
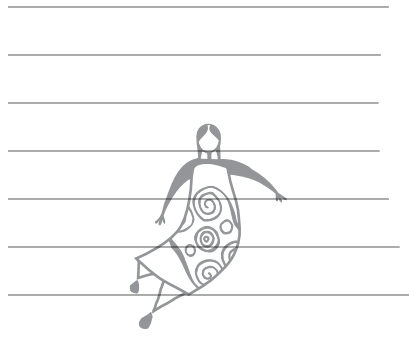


The words surrounding diabetes are sometimes complex—capillary glycaemia, insulin, diabeta, glycosylated hemoglobin test. If you have a diabetic parent or friend, you know from the outset the meaning of these words. Or else it's a world that we have to discover. These words that flow from the mouths of health care professionals, we have to tame them and appropriate them—they have become part of our life. However, it always remains up to us to learn new things about diabetes. Things that we don't want to learn, and things that we think we could never understand. But often, it's not exactly that we don't understand as much as it makes us more afraid. And conversely, we sometimes have to be afraid of something in order to be pushed into trying to understand it.



What they think, the diabetics, is don't go out, stay home shut up and inside. And the nurse, as soon as he knows you are diabetic he asks if you take your diabeta or insulin. He won't ask if there's anything else. And the diabetics don't demand what is it, the job of insulin. When your blood is too high or too low, what should you eat if you're following a diet, and if you take your three meals a day. And this insulin here, will it cure you one day? This, these answers, there aren't even any. They don't ask for the information. That is the toughest thing.





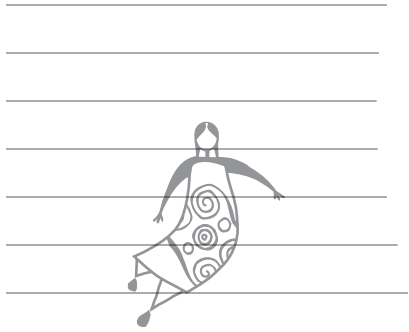
And you're wondering, and you try to require here and there... till I got hold of the doctor... And practising to take the needles with an orange, and crying at the same time. And juice was coming out on either end. It's really scary when you don't know nothing about diabetes and then all of a sudden it hits you. And then ... there are rules, and regulations. When you have this, your diet, everything, your whole life changes. Everything changes. Then you think about your family, how they're going to take it. And it's something that's so terrible, I don't want to scare them too, you know... So I said, "what I'm gonna do, I'm gonna learn more about it. In spite of it all." And I didn't like the idea, but I had to live with it and that's the hardest thing to do, to live with something that you don't know nothing about. But I went to see my doctor, and I asked him all kinds of questions and he showed me this film. And that helped out a lot, when you see something right in front of you. And this is gonna be my life from now on.



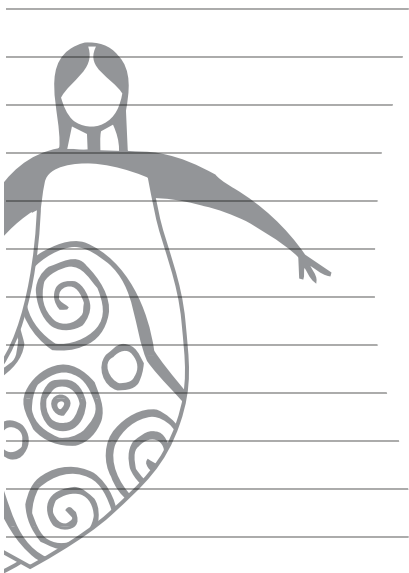
Because your blood is not strong enough to get over infections. A diabetic is very sensitive. This, everyone knows, but you have to go through a lot of things before you really understand it. Me, I needed to have an infection before understanding that I didn't have to cut my nails, cut them or they would scratch me like that. But now, I so love having them rubbed before seeing the person who treats feet, because I don't like touching them. And I don't get infections. I always check my toes and between my toes.

If we decide to ask agonising questions of good people, we'd be surprised to find that our fears were not justified.



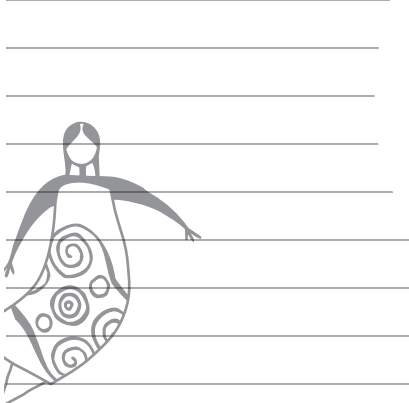


At the time then, I was not as well informed about the subject of that illness there. That's why I was afraid. The nurse helped me a lot. I talked to her and told her I was afraid. I saw it as cancer. It affected me a lot when I learned about it. Because I had young children, and I was afraid of dying young, with my children small... This, this worried me a lot. But I still had my husband who held me up, who helped me a lot.



In the same way, learning more about that which can really help us is necessary to get all the weapons to face it. This can make you afraid at the time—but you can't avoid a bit of fear.

They need more information than, "sticking to you diet and taking your medication." They need a lot more. More information about that. They need to know the consequences if you don't and sometimes it happens even if you do everything you're supposed to. You could cut the end of your toe a little bit and it's not gonna heal, and then they will have to cut your leg off too because of gangrene. They have to cut your leg off also. You know diabetics need to be aware of these things. I know it's scary and everything but.... the possibilities are there.

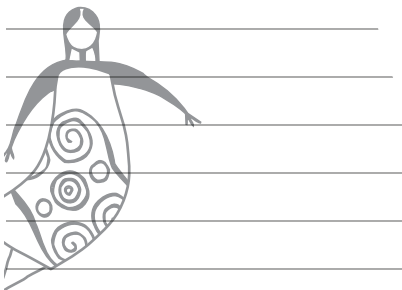
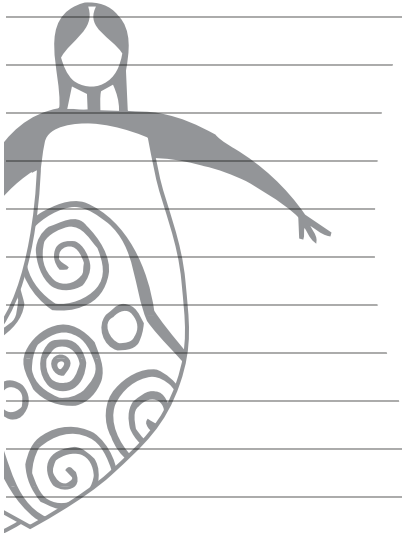
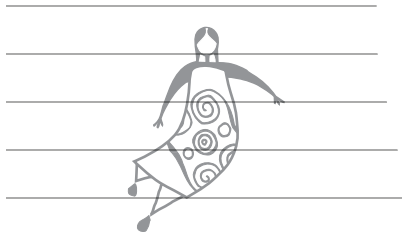


I knew that there were people suffering from diabetes who had lost limbs, I believe, that had their legs amputated. And I also knew that there were people who had gone blind because of diabetes. In fact, I often visited a lady who was blind because of her diabetes. But it was all these things, you know, that showed me to take myself in hand.



“Listen to the doctor,” or listen to yourself?

12. “Listen to the doctor”, “listen to the nurse”-is this part of staying healthy?



Is scrupulously listening to the doctor the best medicine, basically, to fight diabetes? In any case, many women share the opinion that it is dangerous to not take into account what the doctors advise.



- According to you, what would be the greatest danger regarding this illness?
- *Not following the doctor’s advice.*
- And what would be the consequences of that?
- *I would develop diseases. Kidneys, gangrene, heart, vision.*



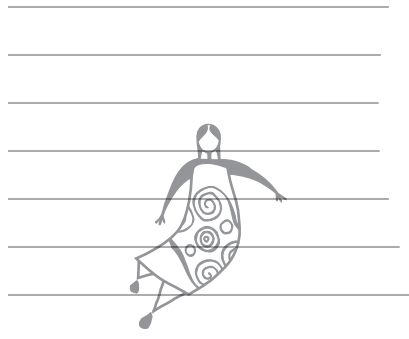
- And for you two, what would be the dangers of diabetes?
- *When you don’t follow the recommendations of the doctor, you can loose a leg, they’ll cut off your legs. There have been some who have not followed the recommendations. It is important to follow what the doctor tells us, to not get those handicaps. Among diabetics, there are those who have had amputations, and people who have become blind because of the illness.*
- *We have to watch our feet, and wash them everyday and put cream on them. The doctor wants us to see him at least every six months, to check our feet.*



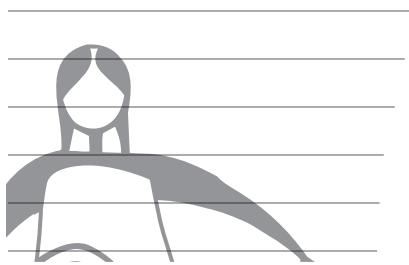
So I swim in the summertime. I swim and I try to be careful. If you’re having a big plate of food I will have just a little. Little bit. But it took me ten years. I didn’t listen right away to the doctors, and I refused to take insulin. I take seven pills a day. And I’ve been doing this for years and years.



Learning to have faith



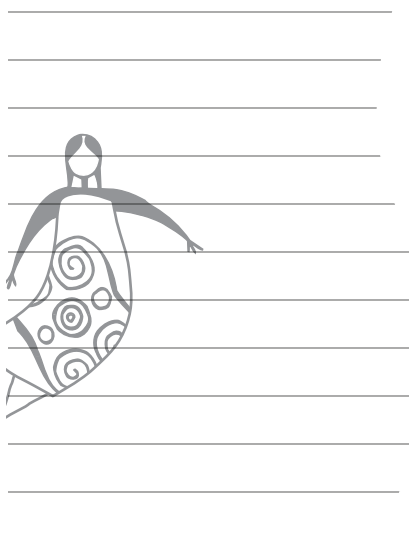
Many people have their own opinion on what causes diabetes and the means of treating it. Health care professionals, friends, elders, parents. Each of us is perhaps used to caring for ourselves in some way when sick. But when one is diabetic, who is one to believe? People who advise us generally appear powerless to help us. Others will say the opposite of what the health care professionals teach us. The choice belongs to us to put our faith in whom we want.



- And according to you, what is the danger of this sickness here?
- *The doctors tell me all sorts of business regarding my diabetes, and instead of understand, I don't believe what he tells me, I don't believe a single word that he tells me. He says, "this then that will happen to you, if you're not careful."*

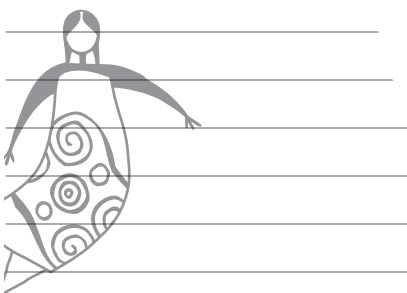
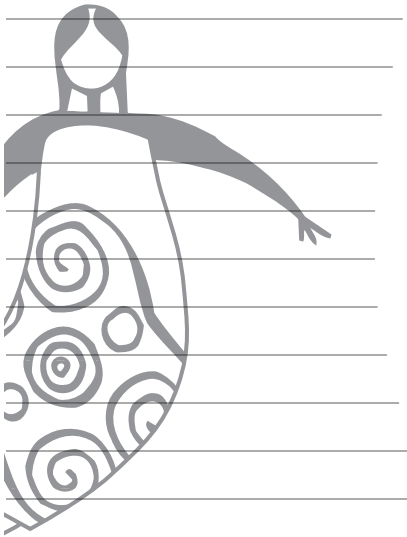
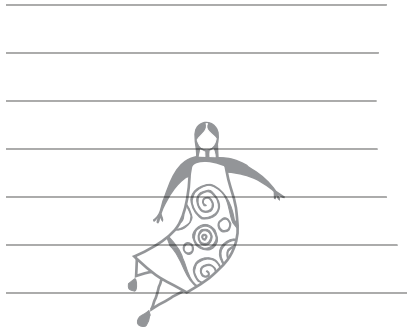
15. Do we trust the doctors and nurses? (Share experiences)

16. How can we establish a relationship based on trust with health care professionals?



If we don't believe what the health care professionals say to us, it's because we've not had very good experiences with them in the past. Or else, we've seen doctors or nurses make a mistake, or have seen them behave in a way that seems unacceptable to us. These could be stories with no foundation, or they could be true. Even if they are doing the best that they can, health care professionals could never be perfect in our eyes—as we risk never being perfect in theirs. We can be afraid, basically, of the medications that they prescribe for us. If we don't have faith in a doctor or a nurse, it's better to be in a position to explain yourself to them.





- *Your mother had had two legs amputated and then she was afraid for herself too.*
- *A little like you?*
- *Yes, that's it. And I've had the chance to talk with her..*
- *What did you say to her to help her?*
- *I told her about my story, my experience with life. That early on, I was like her, then what I had to do to change. How to have confidence in a doctor. Because she didn't have confidence either, she was afraid. She was afraid that she would aggravate her illness with medications.*
- *Are there some people who think that?*
- *Oh yes. Me too, that was how I felt at the beginning. Then I went to an information session, I often went to information sessions, during weekends, and that was where I learned a lot . To become confident in myself, to become confident in others. One day I went to a session in Quebec, a training session. It was there that I heard the trainer saying that we had to have confidence. And that, that spoke to me a lot because, me, I really distrusted doctors.*

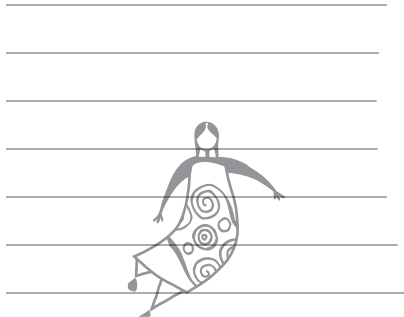
If you don't have confidence in health care professions, you do without resources that can help support us, within limits, of course, of our abilities As resources, they offer a means that aims at helping us better control our diabetes. These means, bring us back to making the most of our own goals for our health.



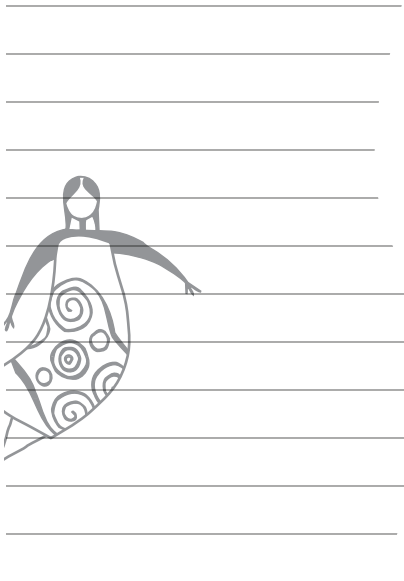
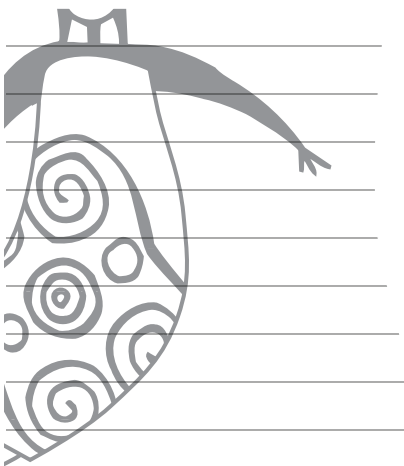
- *Where can you go to get support?*
- *With the medications that I take, then you have to have confidence in your doctor. If you don't have confidence in the doctor, well, then it's not going to work.*



Telling your life story



17. Is it always easy to answer the questions asked by the doctors and nurses? Why?



We don't say everything, every time, to everyone. A lot of people attach a great importance to choosing friends in whom they can confide their concerns and with who they can share their happiness. Women are maybe more concerned that others about the choice of their friends. In a small community, the choice of potential friends is not large, and it can sometimes even be impossible to find one with whom one fits. One can also be afraid of placotage...

Health care professionals seem to be waiting for us to tell them our whole life story, to be delivered easily, in their consulting room, the most unbelievably intimate details of our lives.

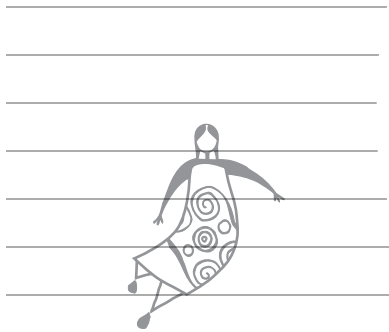


- According to you, how can one treat this illness?
- *By having more information.*
- This would help?
- *Those who want to hear.*
- *Because I don't yet understand, you will never understand. (General laughter)*
- *I don't know.*
- *Not everyone wants to go to the dietician to tell their life story... not their life but... what they eat.*

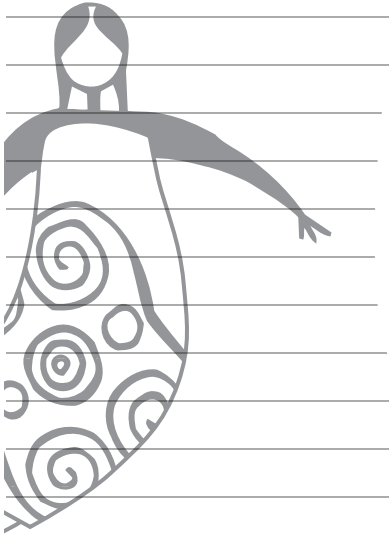
These details of our life, what we eat, what we do and don't do during a day. This brings into question our choice, it makes it that we feel judged, weighed, evaluated... When the date for a fateful appointment approaches our life seems frozen. On top of that there is the blood test, a true lie detector, there to confront us.



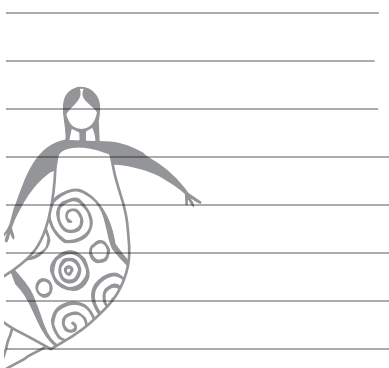
What would happen if we felt the confidence to talk to a health care professional?



- *She used to talk to us.*
- *I know, that's what I mean, nobody's there to talk to us now.*
- *No, but her, she used to talk to us.*
- *Yeah. But there's nobody there now.*
- *No, not now and she... I used to be so, you know, I'd say: «I'm going to walk, I'm not going to eat that much», I used to lose and gain and lose and gain weight. She asked me questions: «you had cake?». I didn't lie to her, I told her the truth.*



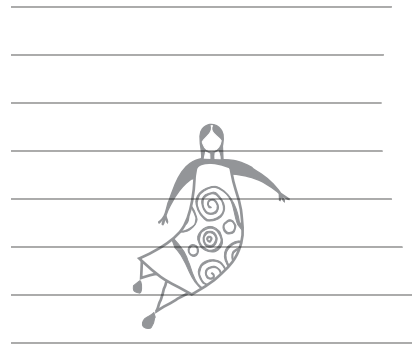
- *They said at social Services, you can tell them anything that's going on in your head. I went. She listened to me, she listened to me she listened to me, she listened to me... At the end of it, I felt like she was there just to get to know my story.*
- *Then you didn't feel good?*
- *I wasn't a at ease with her.*
- *Was it someone from the community?*
- *Yes. That was when I felt, "I'm going to have to help myself."*



- *Apart from your family, are there other people in whom you can confide?*
- *Oh yes, I talk to nurses when it is not going well. Or else my friends whom I can trust..*

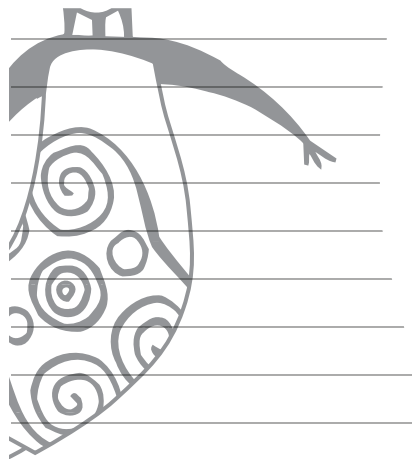


Choosing your medicine



Western medicine, that is medicine from clinics, doctors and nurses, is this what we have to resort to? Even if they call us to set up our appointments, if they prescribe for us our pills, we have to be hospitalised, we learn how to give ourselves a needle... do we have to believe it, always respect their information, completely recover here? The answer, as all diabetic women knows, is no. As important as it is what they tell us, in the final account, it's up to us to make our own decisions regarding our treatment.

18. Do we use traditional medicine?



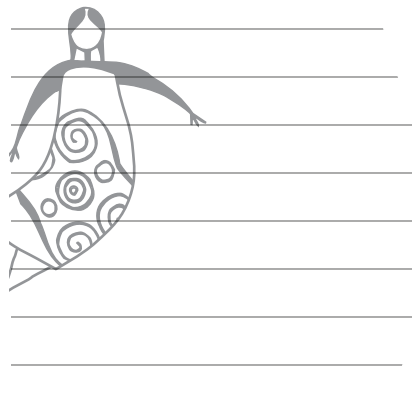
In First Nations communities, diabetics have an additional option: traditional medicine. There are several ways of exercising this freedom of trying something else.



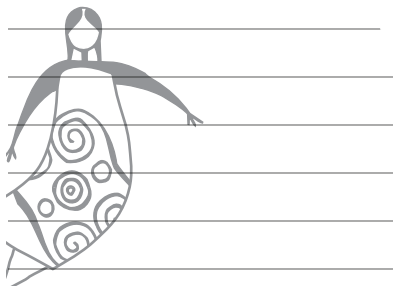
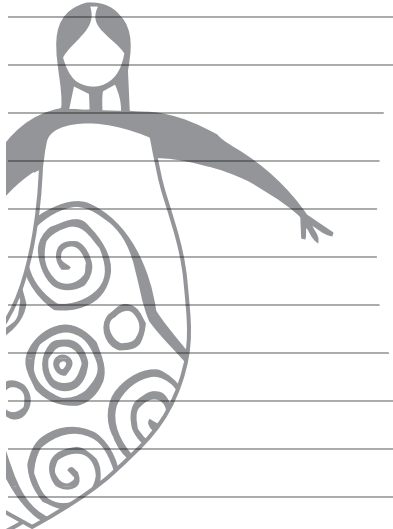
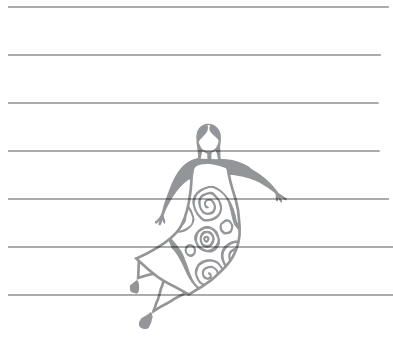
I'm going to see, I'm going to try for one week, then if it works with the traditional medicine, well I'm gonna stay with the traditional medicine. And if I find that it has no effect, I can go back to my Western pills.



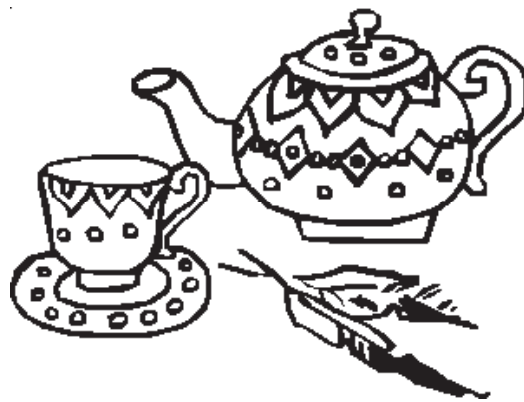
Yesterday, my mother prepared a medication cocktail for me... I didn't know what to do. Was I to take it and take my pills too? What would happen if I took both? Maybe my sugar levels would drop too low. Well, today I didn't take my pills, I used traditional medicine. I started yesterday, because someone told me that they were good for cholesterol as well as for diabetes. Given that I have cholesterol as well as diabetes, I thought to myself, I won't take the pills for cholesterol, I'll just take that medication there. If it works without take the glucophage pills, I'll continue with my medication cocktail.

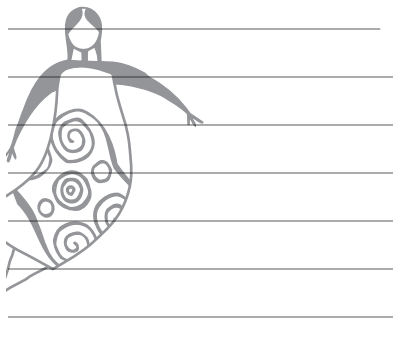
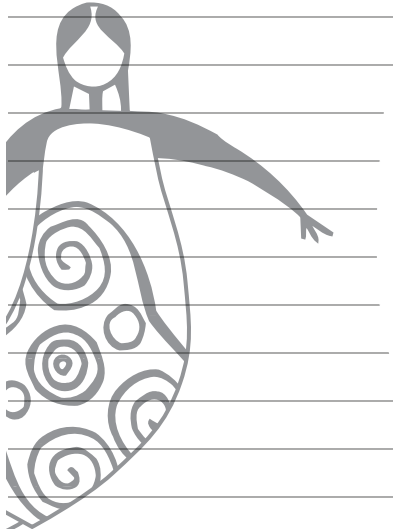
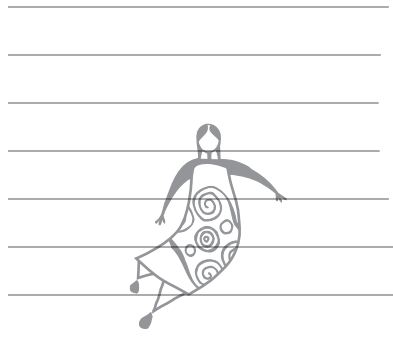


Often, diabetic women judge, however, that it is wiser to not stop taking their clinical pills and treatments even if they try traditional medicine. It seems then that traditional medicine, especially herbal teas, is something taken in addition to the treatment prescribed by the doctor.



I take herbal teas, then my medicine. It works. I know other people who take herbal teas then their medicine as well. The tea is like a supplement. It treats your blood, not your diabetes. You don't have to stop your medication. You take them anyway, then you take the tea. I know someone there, that took it and he was fine. But it depends on the person. I have always had control over my blood sugar. I thought that I could by taking the tea and not taking my pills. It didn't work. Even if I had control over it all the time. Because I don't eat sugar, I don't eat chocolate, except before doing my housework. But usually I don't eat chocolate, nor cake, anything that's sweet, I don't eat. I use whole wheat bread. But I thought that it would work there, that it would be a miracle, taking herbal tea.





What ever they are, herbal teas, it seems that they are no more of a miracle than Western pills. Unfortunately, it doesn't remove the diabetes. Some women only believe in the positive things concerning traditional medicine, and that is their right.

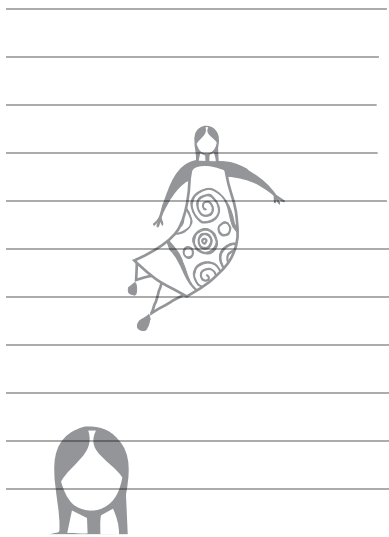


- *I try to better understand about my sickness and everything. But a lot of people over here, not everybody, but a lot of them, they believe in their traditional way of treating their sickness. You can't do that. I don't listen to that. Because you cannot cure diabetes that way, you know.*
- *And what's the traditional way?*
- *Traditional medication! I don't know. Their own. Their own, you know. And I don't believe in that. I believe in going to a doctor. Getting the proper medication, if there's something wrong with me.*
- *Are there a lot of people who take that?*
- *Some of them do. Some of them do. They believe in it. They boil a kind of juice. If they drink that they say they'll be all right. They won't need no medication. It helps everything, they say. I don't believe in that.*
- *Have you ever tried it?*
- *No! I'm scared, so I don't try it.*



There are those who say that a lady took a certain plant, she took it and her diabetes disappear. I think, "poor her, you can't make diabetes disappear, it just doesn't go away from one day to the next. It's there for life." Once I heard a woman say, "there is a plant that is very good for diabetes." I responded, "you are poisoning yourself with that. Are you sure it's good against diabetes? Instead of taking control over yourself?" That's what I told her. This person there said that the plant was good, without knowing whether the person who took it was maybe doing exercises, maybe she walked, or she move more about the house. Her diabetes, she is going to have it, one day and the next, the diabetes will be there anyway. Because she will always have it. You don't play with this, it's fatal if you play with it.



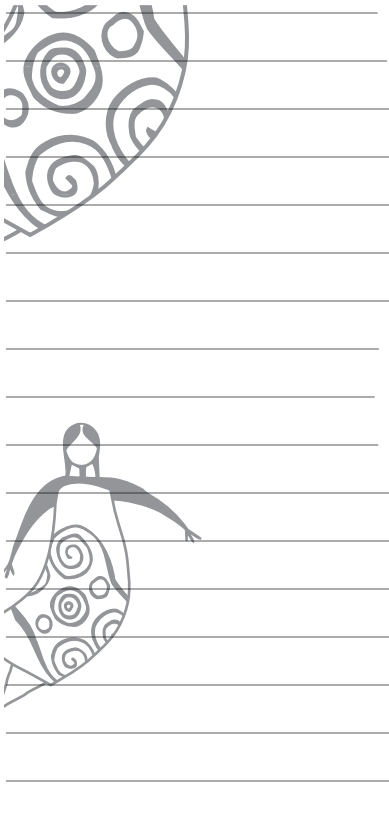


Is it important to believe it or not to believe it? Whether it has an effect or not. Maybe not. The important thing is that we be aware of what we are doing and that our welfare is first, before everything. Being healthy in our body and our head when we take traditional medicine. For this, we must assure ourselves that we agree, above all that our diabetes stays under control.



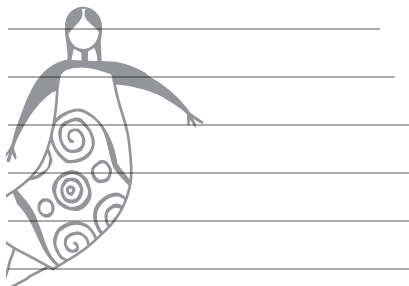
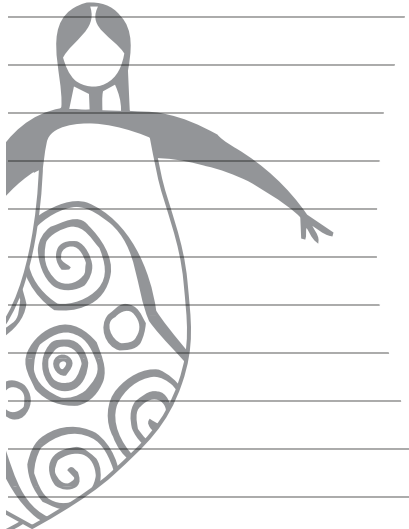
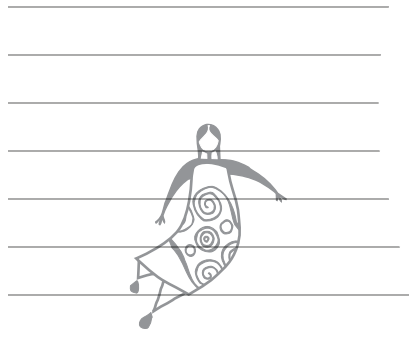
- *What the doctors prescribe for me, I could never put aside. But I also take traditional medicines that I know.*
- *Plants?*
- *Medicinal plants. And... I find that I'm well using that.*

19. Does traditional medicine bring us something that we cannot obtain anywhere else?



In fact, it could even be that traditional medicine doesn't have effects in the sense that doctors and nurses understand. If we feel that we are helped by traditional medicine, it could be for other reasons that are just as valuable. An example in case is the link traditional medicine has with Aboriginal culture, with tradition, a link that we are missing. If we found the spiritual side of healing; the welfare of the spirit; if traditional medicine involves the feeling of belong to a community and satisfying the need to create these links, these would cause one to feel supported and loved.





- *She takes the whole root, washes it, then boils it, and then that is what I take.*
- *Does it help you?*
- *Yes, yes, it helps me a lot..*
- *What are its effects?*
- *Nothing! It doesn't do anything to me. The taste is not bad but, I don't know, it seems to make me feel better.*
- *You have to really care for both your physical and mental sides. And also I think, in may case anyway, you have to care for your spiritual side too.*
- *Is that very important for you?*
- *Yes, it's very important for me. This, I think that it keeps me more in harmony with myself, with others, and with my environment too. Then when I go in the woods, its like I appreciate life more, I appreciate being a woman more, being a grandmother. I need to take care of myself too, before anything else.*

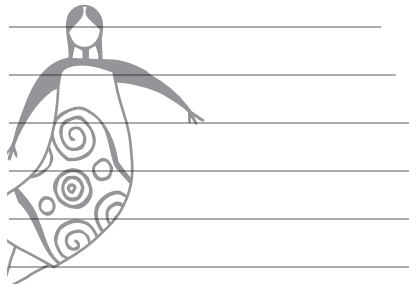
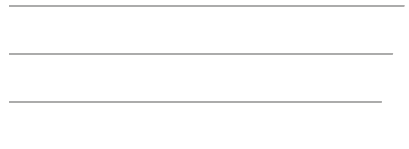
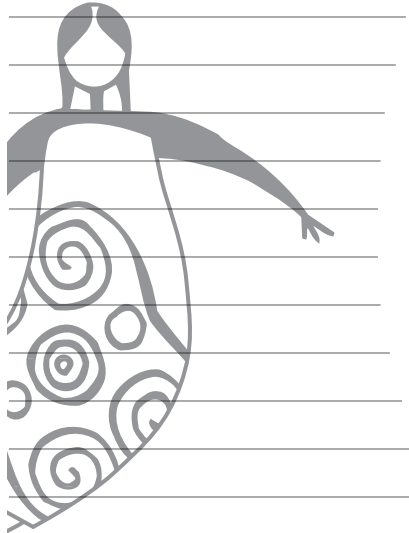
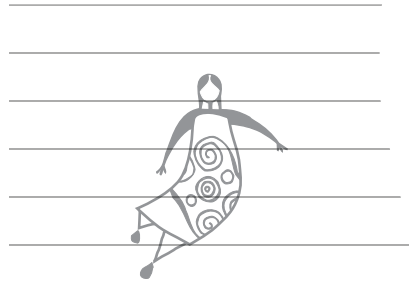


When I don't feel well, I say to my husband, "I don't feel well, I would like you to go and get me something." Because I believe a lot in several medicinal plants. I don't prepare them. Because there are many spiritual aspects that are involved. Someone makes it for you, they make it, then there, you know it's made with love. You know that you go... you feel better. And this, it's what helps me psychologically. It's... it's enough to help me. You don't make it, you ask someone to make it for you. I always ask my husband, "could you make it for me?"



Helping yourself... by using all the resources

20. Who is our strongest ally?
The doctor, our families, the
community or ourselves?



What we feel is placed on the bench of those accused by or helped by the health care professional is resources, and many among them are also those who are good, in whom we have confidence. In spite of everything, they alone can't do it all. They are part of the means that we have at our disposal to help ourselves. If, however, their approach doesn't suit us, we can decide to reject it all. Or, we can decide to consult them anyway, with the realisation that as long as there are professionals in the sphere, they will remain better place to guide and inform us.



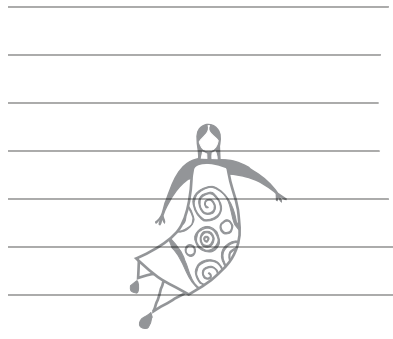
I said, "why are you crying?" She said, "I'm a diabetic." I said, "if I cry with you, it'll be better?" She says, "No." "Well, stop crying and start helping yourself. Get off of your butt and start helping yourself. Ask things, go at the nurses station and ask them and there's all kinds of information. There's nothing that they don't know. And they'll help you." So, she's been coming at the health centre off and on. They're better equipped there, they're knowledgeable and everything about the disease. Now, she's learning to control it. I said, "do you feel better now?" She said "yes," she said, "I feel lighter."



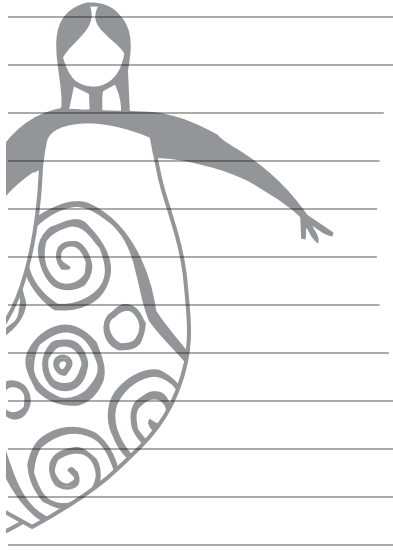
- What helps you the most in the treatment, control of this illness?
- *The doctor.*

Many people have the opinion that the doctor is the person who can help us the most with the treatment of diabetes. But often, if we are asked to rethink our ideas, we add a nuance: we have to control the diabetes ourselves, taking the advice of the doctor, following the diet and exercising. Underneath it all, from the beginning we have to really decide to help ourselves. Then, to help ourselves, we begin to see that we also need the help and advice of others, and understand that it is a strength of character to get help where it can be found.

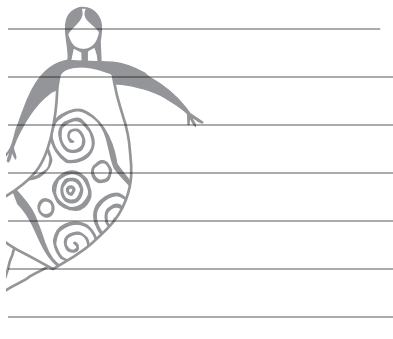




- What would you say to a woman, who just learned she has diabetes.? What would be your advice to her?
- *I advised a woman, that was at the office yesterday, that she has to control it herself. She has to follow what the doctor tells her, and follow her diet.*



- What has helped you the most in the treatment of your diabetes? Who helps you the most in controlling your illness?
- *It would have to be me.*
- *Yourself?*
- *Yes. Follow the advice of the doctor and that of the dietician. And don't eat too much.*

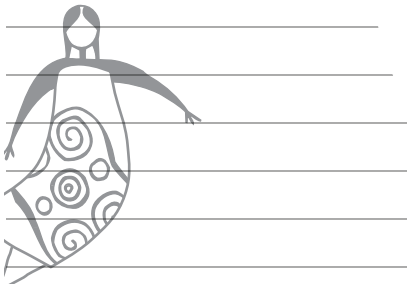
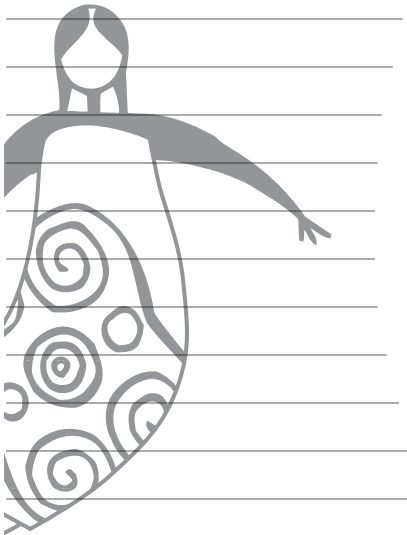
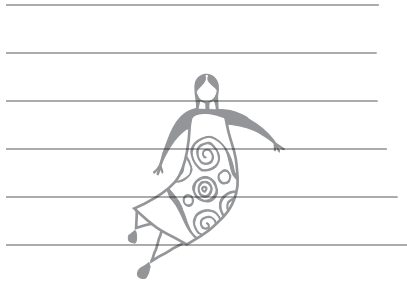


That was where I began to look for help. When a nurse that worked here asked me if I would like to go outside the community to get help. She gave me an appointment. I was talking about what I was going through with that nurse there, that I was sad, that I was discouraged, that I wanted more. I picked up the telephone and I called and she said to me, "we can help you, come to the clinic, we are going to find a way to get you out of this space." Then I understood that I had help in Sept-Îles. There, I'd go sometimes for one week, sometimes for two weeks.

Since that time there, when I've had problems with my family or else with other people, I always go to the clinic and get help. There are resource people who are there for you. That's where I go.



- 21. Does having knowledge empower us?
- 22. What can we do to acquire knowledge?

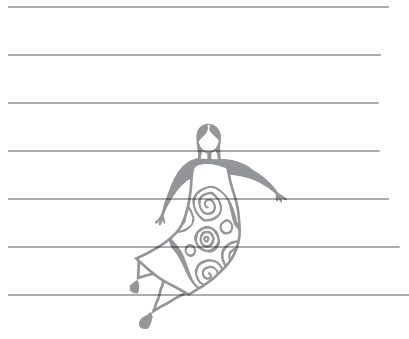


The advice of health care professionals, as well as all the information that one can gather from brochures, books, televisions, is knowledge that from here on concerns us. Knowing something, understanding why such and such a reaction results and how it can be avoided, this allows us to make choices for ourselves. It gives us the ability to act. It brings real decisions to our own door, allowing us to assess them. It's true for many things in our daily life, and among others that make up the richness of our lives everyday, this is what gives us a feeling of security, competence and well-being, and being in control. For example, to know that a child laughs when he is tickled or that he has to cover up or he'll catch cold.

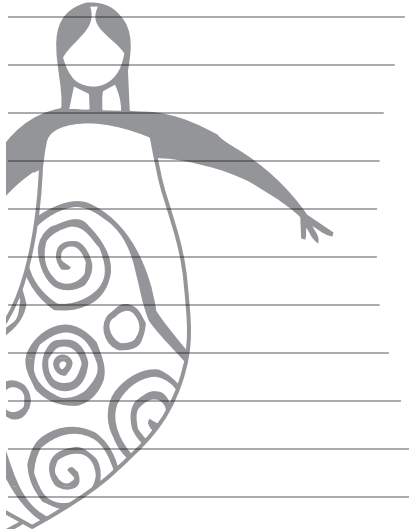


I said, "what in the world is diabetes? Why did it have to be me? What do I have to do?" And then I would sit there. A lot of things goes through your mind. "Why, why, why?" And there is no answers for them. And I'm sitting here, trying to punch this orange with the needle on the forty-five degree angle, and crying, and I have to do that to my body, punch it all the time, you know, take needles. Oh, you feel so awful. You just feel you're all alone at the time. You know, wondering about yourself. Because this is you, you're thinking about. Wondering what's going to become of you on account of that diabetes? And the more you learn about diabetes, the better stable you're going to be. And you'll be more alert to other things that come along.



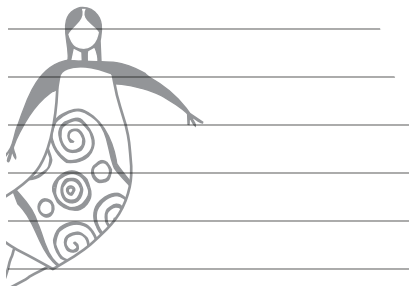


Way back, before I really started to think about my diet and stuff like that, I made a decision one day and I went to a doctor. I told him, "I'm ready for the needles." He says, "no, you're not!" He says, "no, you are not going on needles. You're staying the way you are, you just do this, and just do that and that, and you'll see, everything's gonna be fine." And I did what he told me and it's true. My sugars are not high all the time. I have control on that, I have very good control.



Knowing the truth, knowing what is happening to you, this can be your main source of support, following the example of numerous diabetic women.

They wanted me to absorb what I had just found out, in case I had any bad feelings about it. But I didn't. At the time I can remember I wasn't upset. I just thought, "I have diabetes." I accepted it right away. When I was admitted to the hospital, I met with a diabetic nurse. They thought me everything they could. They didn't want to tell me everything for fear that I would be afraid of it. But I wanted to know more and more. I said, "you tell me what diabetes is, explain it to me." Because I wanted to know. And I asked, "how can I combat this?" And they taught me how.



The doctor, when I go to see him, he talks to be about the consequences of diabetes. He gives me information in the form of a book to look at. This is what helps me, just like a magazine that talks about diabetes.

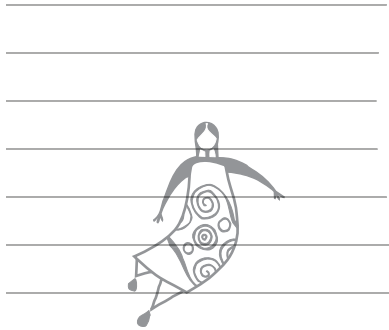


There was a nurse here. She used to help me every week, I used to come at three o'clock, she would take my sugar, my blood pressure and put me up on the scale. I used to do better, because I knew I had to go every week. She used to do that with diabetics.

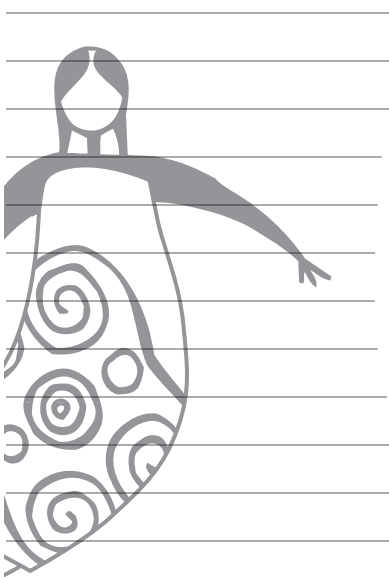


No one can force us... in the end we come back to ourselves

No one can force a diabetic woman to do what she needs to do, basically, when she is facing herself.



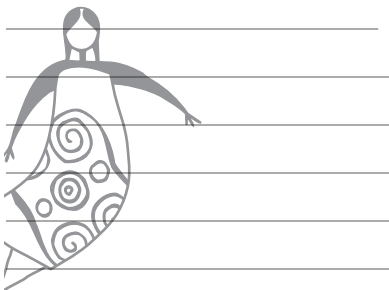
At times, for a little while, I don't take my glycaemia. It happens that if I get sick, I'm going to get really sick.



I can't, I'd better go see a nutritionist... It's going to go well, she is going to talk to me verbally, then she is going to tell me, "this is what you are going to eat." This is not to say that once home I can't do what I want. It is just me to decide about controlling my sugar. No one else. It's just my own glucometer that can tell me.



- *I don't, know, I think that it is also up to people to know what diabetes does. But you can't force them... If someone would say to me, "don't eat this or that," I wouldn't listen to them, I would start eating.*
- *You wouldn't listen to them?*
- *No.*



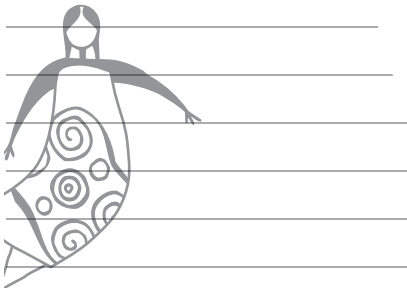
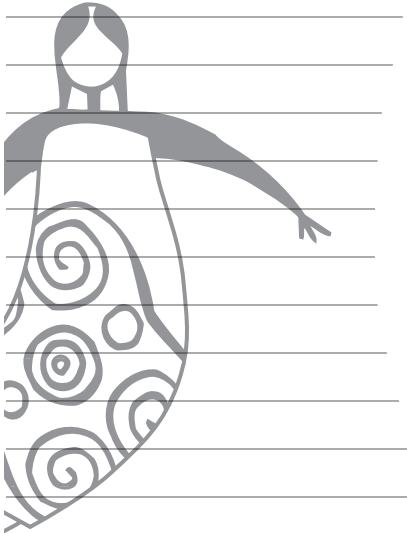
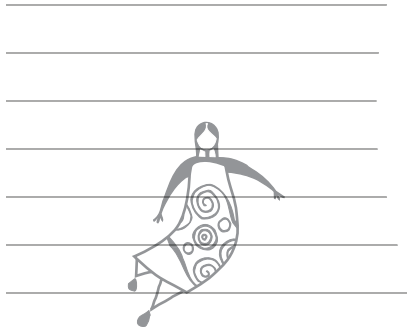
I'll tell you one thing, when people say to me, "You have to do that," they drive me mad. I say to them, "it's my illness, I'll do just what I want." I've been told so much, "you have to do this." Well then, at a certain point I think to myself, "listen up, this illness here, I'm the one whose got it. If I'm not hungry for salad, I won't eat any. I don't like salad."

The power that you have to say no, you have to channel it so that it can provide benefits to you, to your family, to your children.





But there, I say to myself, I'm the one who has decided and I'm going to do it. You know, it's like if there was a force pushing me, saying to me, "don't take your pills, don't take your insulin. You can do it, you can get there." I was afraid for my children, especially because of the pills, then the insulin. I was afraid of this, but I was not afraid for me, it was for the children, in case I would forget the medication on the table or else in the washroom behind the counter. My priority was my children.



Suggested questions for facilitators

1. How did we react when our doctor or nurse told us we had diabetes?
2. How do we feel about someone telling us that from now on we must exercise, watch what we eat and often take pills or give ourselves injections?
3. Are we confident enough to speak to the nurses or doctors as equals?
4. How do we feel about being called by the health care professionals on a regular basis so that we go to the health centre?
5. Do we feel fear when dealing with our doctors and nurses? Do we express this fear? To whom?
6. Is the fear a stimulus for change? A source of motivation?
7. If I cheat with my prescription or on my diet. It is for personal gain. But what do I gain?
8. In the end, who wins or loses when I cheat?
9. How can we get the doctors and nurses to respect our choices? Is it possible?
10. Do we feel that the doctors and nurses respect us? Understand all of our needs?
11. Why do we feel afraid of diabetes? Can this fear lead us to change? (For example, can being afraid of developing lung cancer lead someone to quit smoking?)
12. "Listen to the doctor", "listen to the nurse"-is this part of staying healthy?
13. Who should we listen to? The doctors, nurses or ourselves?
14. Where can we get the strength to listen to ourselves, to respect our own decisions and choices?
15. Do we trust the doctors and nurses? (Share experiences)
16. How can we establish a relationship based on trust with health care professionals?
17. Is it always easy to answer the questions asked by the doctors and nurses? Why?
18. Do we use traditional medicine?
19. Does traditional medicine bring us something that we cannot obtain anywhere else?
20. Who is our strongest ally? The doctor, our families, the community or ourselves?
21. Does having knowledge empower us?
22. What can we do to acquire knowledge?
23. What can we do to ensure that each choice, either a "yes" or a "no", is respected?





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