



## *Development of the Diabetes Prevention Community Education Program for School Children in Delhi and Its Impact*

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Abstract- Diabetes is one of the most prevalent chronic infantile disorders. In children worldwide, both type 1 and type 2 diabetes are growing. Against this backdrop, the school offers children with diabetes a supportive atmosphere in Delhi. A systematic analysis of school-based diabetes programs and its outcome indicates that more attempts are being made to improve the treatment of diabetes and to create a healthy atmosphere for students of Delhi.

In addition to better health and quality of life for students, the findings showed improvements in school staff's awareness and trust. Although the evaluation methods used were not effective, appropriate approaches could not be decided to improve children with diabetes' health, life quality and academic performance. This article is to assess the role of school nurse for the diabetes children managements in Delhi. It also identifies and studies the school program for screening students at risk diabetes in Delhi

**Keywords: Diabetes, Delhi, programs, school nurse, management.**

### 1. Introduction

The child obesity and rising type 2 diabetes and other health effects severely endanger our nation's children's safety and future. This research explores a curriculum designed to inform students about their role in the School-based screening and referral system, established by the National Association of School Nurses (NASN). This program helps recognize students at risk for type 2 diabetes and provides students, their families and the school community support that encourage healthy living. A comprehensive analysis of the issues of childhood obesity and its health consequences is offered by the one-day full-life educational program. This analysis examines main software components.

The NASN-developed Nurse Childhood Obesity Prevention Education (S.C.O.P.E.) initiative has provided resources for school nurses in four large urban school districts throughout the United States as part of the national Diabetes and Weight Gain and Preventive Initiative (MAP) focusing on both diasynndrome and diabetes prevention (DGP) and the National Diabetes Education Program (NDEP).



The S.C.O.P.E. program provides educators with evidence-based information, expertise and tools for screening, intervention, and referral of at-risk children to health care providers; educates families, students and school employees about the benefits of healthier lifestyles; School-based diabetes programs and solid assessments can help to improve school policy on diabetes and to ensure children with diabetes are as trained as all children. In its 27-centre, randomized trial, Diabetes Prevention Programme (DPP) assessed whether lifestyle intervention or pharmacology (metformin) can prevent or postpone diabetes development in individuals with a high risk of GTD. Recently, both lifestyle intervention and metformin have been reported to be effective in reducing diabetes incidence [1].

## **2. THE ROLE OF A SCHOOL NURSE IN THE CARE OF A CHILD WITH DIABETES MELLITUS**

Type 1 mellitus diabetes is one of India's most common chronic development-age incurable diseases. T1DM care requires individually controlled insulin therapy, self-control, good diet, physical activity and awareness in the health field. Public educational institutions will attend children and adolescents with T1DM. For the proper social and behavioral development of the child, properly organized diabetes is therefore highly necessary in school or preschool treatment for a child with T1DM. One of the schoolchildren active in the treatment of T1DM children and increases the health of T1DM children in school.

Psychological and physical safety should be ensured by school nurses, other children should be prepared to handle T1DM with their schoolmate. They should be instructed how they could support and support a child with T1DM when the condition is hypoglycaemia or hyperglycaemia. Good coordination between children, parents and nurses is an integral part of good treatment [2].

## **3. School Program for Screening Students at Risk for Diabetes**

The child obesity and rising type 2 diabetes and other health effects severely endanger our nation's children's safety and future. This research explores a curriculum designed to inform students about their role in the School-based screening and referral system, established by the National Association of School Nurses (NASN). This program helps recognize students at risk for type 2 diabetes and provides students, their families and the school community support that encourage healthy living. A comprehensive analysis of the issues of childhood obesity and its health consequences is offered by the one-day full-life educational program. This analysis examines main software components.

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### **Student screening**

Clinical monitoring and follow-up assessment of the overweight child are given to the school nurse by the S.C.O.P.E programme. This allows school nurses to identify students at risk of developing Type 2 diabetes and other health concerns related to obesity in children and to accurately estimate their height and weight and determine the percentile of body mass index (BMI) for age and gender.

In or above the 95th percentile population, the S.C.O.P.E plan provides a comprehensive evaluation, including blood pressure, acanthosenigricans, family and infant evaluation and lifestyle assessment, for expertise, resources, instruction and forms to the nursing school nurse for an extra overweight / obese boy or adolescent assessment.

### **Family communication**

During, after and during a school-based BMI screening program, the effects of childhood obesity are illustrated. Information sent to schoolchildren's parents and caretakers is an important step towards gaining the support of the family and cooperation in taking action to reduce the health risks of their children. Reference materials are provided by the S.C.O.P.E. program for promoting meaningful families contact. The Introductory Letter sample in the S.C.O.P.E. program allows families to have their children choose, if desired. The school offers services to all families participating in the screening system – not just students who have been reported as overweight or obese.

For students at or above the 95<sup>th</sup> percentile, this letter reminds family members of the importance of obtaining more advice from their health care providers and advises them that they may ask additional questions to decide whether their children could be susceptible to certain health issues. The included sample letters were checked by regional experts for cultural awareness and understanding.



## Health care provider referral

After the initial screening and telephone follow-up assessments have been completed, children who are found to be vulnerable are strongly encouraged to meet with their healthcare providers. The S.C.O.P.E. curriculum materials contain a questionnaire to be completed by the patient, which parents are asked to submit to the healthcare provider. The research provides professional recommendations from the American Diabetes Association, the American Medical Association and the American Heart Association to help the care provider in the coming steps. The NDEP tool website is also open.

The S.C.O.P.E. program emphasizes the importance of follow-up by a school kindergarten, including a follow-up with parents / guardian to inquire if the child has seen his medical professional and follow-up with the health provider. The following plan is introduced by a school kindergarten.

School nurses participating in S.C.O.P.E. education leave with a range of resources in order for the students, the family, the school and wider community to be able to promote healthy living. The S.C.O.P.E. program materials contain examples of educational resources from NDEP; the website of NDEP is being promoted with students and adults alike.

School caregivers are encouraged to promote healthy lifestyles, help establish school policies that regulate healthy sales outlet choices, become members of national and local health coalitions and play an active role in the wellness committee of their districts [3, 4]

### 4. Education, prevention and the role of the nursing team

Self-management skills are an important component of diabetes treatment and can help people stay healthy and avoid complications by supporting and helping nursing staff. Diabetes provides health practitioners with tools to enhance the delivery and implementation of self-management instruction in diabetes. Three of the major awareness services for people with diabetes are available:

- DAFNE is a joint network of 75 NHS Trusts and Health Boards providing diabetes services in the United Kingdom and Ireland. The standardized training curriculum for adults with type 1 diabetes includes the requisite skills to assess their meals' carbohydrate contents and to administer the appropriate dose of insulin into the intensive insulin therapy.
- ESMOND is a collection of self-care resources for the wellbeing of people with type 2 diabetes or who are at risk for it. This curriculum provides health care practitioners and



lay educators with instruction and quality control in delivering each of the modules to local citizens.

- X-PERT diabetes Program seeks to improve the awareness and ability of diabetes and lifestyle decisions for people living with diabetes in order to better control their blood glucose levels.

Type 2 Diabetes and I am an online step-by - step guide that offers information on the disease, choices and support for people with Type 2 diabetes. Diabetes basics have been developed by RCN, an on-line learning tool for CPD covering the basic concepts of diabetes, diagnosis and current care, and the role of the diabetes-related nursing team[5].

## 5. Conclusion

Research indicates that providing food producers with incentives is an effective way of improving dietary habits, particularly where the cost of healthy foods is a problem. The food industry will collaborate with the Ministry of Health to enforce a national nutrition policy by creating foods that comply with the standards for diet and labeling, and are thus more marketable as healthier choices. The key to supplying affordable fruit and vegetables to hard-to - reach communities is expertise in distribution networks. Non-governmental organizations (NGOs) play a part in both recovery and prevention. In India, NGOs hold tremendous influence, much is happening at grassroots level, backed by funding from NGOs. NGOs can also assist in the creation of international multi-sectoral networks and alliances to advocate policy change, knowledge generation and translation of research findings for policymakers. Academics and academics will participate in addressing these complex problems by developing analysis and monitoring programs and educating young professionals.

Priorities include community-based primary prevention studies and the identification of safer and cheaper drugs to prevent diabetes when lifestyle intervention is not feasible or fails; epidemiological and economic research; and health and operational research systems. India has taken steps towards an integrated approach to diabetes prevention and control but, partially because of inadequate resources, these ideas are not completely implemented.

Public-private collaborations are essential at all policy rates. A good example of this is the Public Health Foundation of India (PHFI), a collaboration to tackle the limited institutional ability in India to improve public health awareness, research , and policy growth. Funding comes mainly from the private sector, and they expect the government to balance it. Although India accounts for about 15 percent of the world 's diabetes burden, its spending on diabetes-related healthcare is only 6.4 percent of global spending; health capital allocations should reflect the disease burden.



Additional resources dedicated to diabetes care should be directed towards stronger preventive initiatives, testing facilities (especially in rural areas), quality and affordability of treatment, and professional health-care staff, as recommended by the WHO Global Strategy. Screening is important for people with diabetes or pre-diabetes, which can help avoid or delay diabetes progression.

It needs cost-effective, affordable, and quality treatment for those with diabetes. Throughout healthcare environments, patient awareness and empowerment is essential to maintaining effective management and control, combined with recommendations for standardizing management and control procedures.

Doordarshan, India's main television broadcaster, could be interested, and should learn from India, where a national television channel produced videos targeted at school children, with an emphasis on healthy food and culture. Financing may come from the private sector and from funding bodies involved in developing telecommunications capability. India is a loosely federated country posing difficulties in the implementation of a uniform national policy. The big political hurdle is an economic growth-focused policy and its role in transforming India into a developed nation by 2030. While optimistic, these expectations have resulted in ignorance of the associated health implications and have led to a diabetes epidemic in tandem with the economic development policies mentioned above. Another approach to solve this is to switch from health policy to "Health in all Policy," as suggested by the Finnish National Public Health Institute's Director General, among others. Health impact evaluations, which ensure national and regional policies take health into account, are becoming more common and may be one way of integrating the above recommendations into the development of India's policies.

When the burden of transmissible disease is high, a strong burden of non-communicable diseases does not need to replace it. With the passage of the United Nations Resolution on Diabetes in 2006 and the launch of a pilot phase of the National Programme on Prevention and Control of Diabetes, Cardiovascular diseases and Stroke (NPCDS), a national diabetes policy for India is justified and timely. Recent studies highlight rising global action on diabetes and related NCDs.

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