

Women in the Middle Years, Diabetes, Obesity, and Physical Activity

Detecting diabetes at its earliest stages to prevent complications is the emphasis for women in the middle years from 45-64. Assisting women with meeting the social, physiological and psychological challenges of the middle years can impact their quality of life.



Prevalence (%) of diabetes, inadequate physical activity, overweight, and obesity among US women aged 45-64, BRFSS 2003.

	Diabetes ¹	No Physical Activity in Past Month	Insufficient Physical Activity ²	Overweight (BMI=25-29.99)	Obese (BMI ≥30)
Race					
White	8.1	23.0	39.8	28.5	23.6
Black	19.5	37.1	39.5	29.2	42.7
Asian	7.6	26.7	43.2	29.2	4.0
American Indian	15.7	37.0	30.6	30.7	33.0
Multiracial	15.3	31.9	39.3	28.2	30.6
Hispanic	13.8	42.3	37.2	34.9	29.3
Education					
Less than HS	20.2	53.1	33.8	31.3	35.3
HS grad	11.5	33.9	40.4	30.0	29.5
Some college	9.6	22.8	41.5	29.4	26.5
Technical					
4 or more years college	5.7	14.6	38.4	28.0	18.3
Income					
<\$15,000	22.1	48.3	33.5	27.4	39.0
\$15-24,999	14.3	39.5	40.9	30.3	33.7
\$25-34,999	11.7	32.0	43.2	30.4	30.5
\$35-49,999	10.1	23.8	43.2	29.2	27.5
\$50,000+	5.1	16.2	39.4	30.4	19.7

¹ Not including gestational diabetes

² Moderate physical activity for 30 minutes or more per day for five or more days per week or vigorous physical activity for 20 minutes or more per day for three or more days per week

Issues affecting Women in Their Middle Years

Women in their middle years may face major psychological and social challenges in priority setting for themselves such as menopause, the appearance of chronic disease, the death of a significant other, parent or child, divorce, or retirement. Women tend to multi-task and their gender role may present barriers in establishing preventive health practices and healthy lifestyles. One in four women in their middle years has a low level of formal education, therefore health literacy may be effecting their self-efficacy and confidence in health care decision making. This age group of women tend to report barriers to leisure time physical activity but this age group is frequently caught in the

sandwich generation either caring for grandchildren or older adult parents.

Women in their middle years tend to work in small companies that provide fewer benefits and lower pay than larger companies and face being underinsured or uninsured. One in seven women lacks health insurance.

Women in their middle years experience a greater burden of obesity and diabetes than women 18-44 years of age. Some 3.8 million women 45-64 years of age have diabetes and diabetes is a leading cause of death for women in this age group. For women with diabetes, coronary heart disease is an important complication of diabetes.

The National Public Health Initiative on Diabetes and Women's Health recommends the following public health actions:

Diabetes Awareness:

Educate women and providers to increase their awareness about diabetes, its risk factors, its preventability, where applicable, through lifestyle choices, and its association with other chronic diseases (for example, cardiovascular disease).

- Assess and evaluate existing messages, programs, and campaigns.
- Increase the awareness of women and providers about the positive impact on both the quality and length of life for women with diabetes through preventing and delaying heart disease.
- Develop an effective social marketing campaign, using focus groups or other qualitative methods.
- Design and test messages and determine dissemination strategies for specific population subgroups.

Preventive Health Measures:

Promote expansion of routine physical exams to include risk assessment and appropriate follow-up for diabetes among women in their middle years.

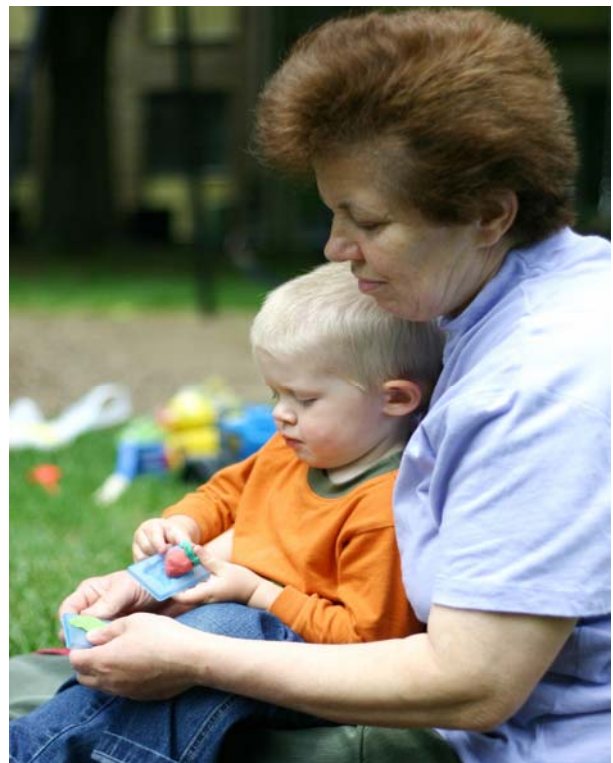
- Develop practical and useful screening tools, such as assessment questions, appropriate physical activity, diet, hip and waist measurement, and body mass index, and incorporate them into standard health assessments.
- Train health personnel to conduct and use these assessments.
- Increase provider awareness of the need for and value of integrated testing such as mammograms, pap or colo-rectal tests.
- Promote the use of preventive measure tools among various health associations in clinical settings.
- Market the need for expanding routine exams to purchasers, health plans, and payers.
- Train future health professionals about women's health and diabetes to ensure that they are able to communicate with women and address their unique concerns.

Expand intergenerational programs and activities:

- Encourage relationships among women across the life span.
- Define the optimal parameters of intergenerational programs and activities.
- Identify barriers and enabling factors to participation in intergenerational programs.
- Identify existing successful programs and activities in urban/rural areas and different ethnic/cultural groups through qualitative and quantitative public health research.
- Use schools, churches, and other key venues within communities to create activities and occasions for women of all generations to congregate.

Research Agenda:

- What are the developmental characteristics of women in their middle years that affect or influence the risk for diabetes diagnosis, complications, and/or treatment?
- What interventions will have the best effect on long-term outcomes and improved quality of life?
- How can the delivery of preventive services, building on existing systems, be improved for women in their middle years?



Success Story for Woman in Her Middle Years

Veronica is a 51 year old registered nurse and diabetes educator, who was diagnosed with type 2 diabetes in her mid 20's. She admits how challenging it was to accept the diagnosis of diabetes and to actually begin changing her lifestyle. Veronica says that she found it difficult to manage her diabetes while focusing on her career and starting a family. As a diabetes educator, she knew all of the things she should have been doing—exercising several times a week, changing her diet—but it took her some time to figure out how to fit it all into her busy schedule. This is very common for women in the middle years, who find themselves balancing careers with the needs of dependent children and aging parents. What turned Veronica around and on a healthy path was that she had a strong support system that included her family and friends, especially her friends with diabetes. They all work together to keep each other motivated. Veronica now runs a support group of her own and she also visits local churches and neighborhoods to offer information about diabetes.



The Call to Action:

- Inform professionals working with older women about diabetes and the relationship of being overweight, or obese, and the need for increased physical activity.
- Utilize the Guide to Community Preventive Services and Physical Activity to guide interventions.
- Spread the message of the CDC Women's Health and Diabetes Initiative.



This is a product of the National Association of Chronic Disease Directors, Women's Health Council and the Women, Physical Activity, Obesity, and Diabetes Steering Committee

Women, Physical Activity, Obesity, Diabetes Steering Committee

Jessica Hardy
Women's Health Council, NACDD

Barbara Larsen
NACDD Consultant

Paula Marmet
Physical Activity Work Group, NACDD

Michelle Owens
CDC Division of Diabetes Translation, Diabetes and Women's Initiative

Laura Shea
Diabetes Council, NACDD

Dennis Shepard
NACDD Consultant and PRC representative

Joan Ware
Cardiovascular & School Health Councils, NACDD

Adeline Yerkes
Women's Health Council and Chair of Steering Committee

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