This poster will provide evidence related to the etiological factors associated with diabetes in American Indians/Alaska Natives (AI/ANs) based on the tenants and framework of the BioPsychoSocial (BPS) model (Engel, 1977). The prevalence of diabetes among AI/ANs is 16.1%, which is the largest percentage of all the racial and ethnic groups in the US (American Diabetes Association, 2013). AI/ANs are 2.2 times more likely to have diabetes compared to White individuals (US Department of Health and Human Services, 2013). Furthermore, of the AI/ANs with diabetes, 95% of them have type two diabetes.

Within the last 30 years, there has been a shift toward a model of physical disease and mental illness that captures the interconnectedness of psychological, social, and biological factors. Cannon, Selye, and Engel, among others, contributed to the BPS model that integrated physiological, cultural, and interpersonal factors into the understanding and treatment of disease (Friedman & Silver, 2007). The BPS model is especially appropriate when considering diabetes in AI/ANs because it allows for the conceptualization of how systematic discrimination can lead to poor health outcomes.

From a biological perspective, evidence suggests that there is an inherited predisposition to both type one and type two diabetes (Gondor-Frederick et al., 2002). However, it also is important to note that 80% of individuals with type two diabetes are obese, and it has been demonstrated that the onset of type two diabetes is heavily related to diets with an abundance of sugar.

For AI/ANs, social barriers are intertwined with the biological factors, preventing the development of healthy habits that could prevent and treat diabetes (Shaw, Brown, Khan, Mau, Dillard, 2013). One study utilized focus groups to identify perceived barriers to managing diabetes among AI/ANs which included: inadequate knowledge and education regarding diabetes, struggles with their social life and relationships as a result of dietary restrictions, and comorbid medical conditions which may result in emotional distress such as depression (Shaw et al., 2013).

Moreover, depression is a major risk factor for diabetic patients. Depression occurs in 15-20% of those who suffer from either type of diabetes (Gonder-Frederick et al., 2002). This is especially problematic for the AI/AN population because higher rates for frequent distress are reported in comparison to the general population (NAMI, 2013). Depression rates are difficult to obtain because in some American Indian and Alaskan Native languages the word “depressed” does not exist (NAMI, 2013). However, in comparison to other racial and ethnic groups, AI/ANs have more severe problems with mental health disorders related to suicide, anxiety, substance abuse, and depression (Olson & Wahab, 2006).

The purpose of this poster is to utilize the BPS model to highlight the prevalence of type two diabetes among the AI/AN population and to address the complexity of psychosocial factors that contribute to this health epidemic among this historically marginalized population. Also, this poster will propose community resources for psycho-educational purposes along with clinical implications for mental health practitioners when working with AI/ANs who have comorbid issues such as diabetes and depression.