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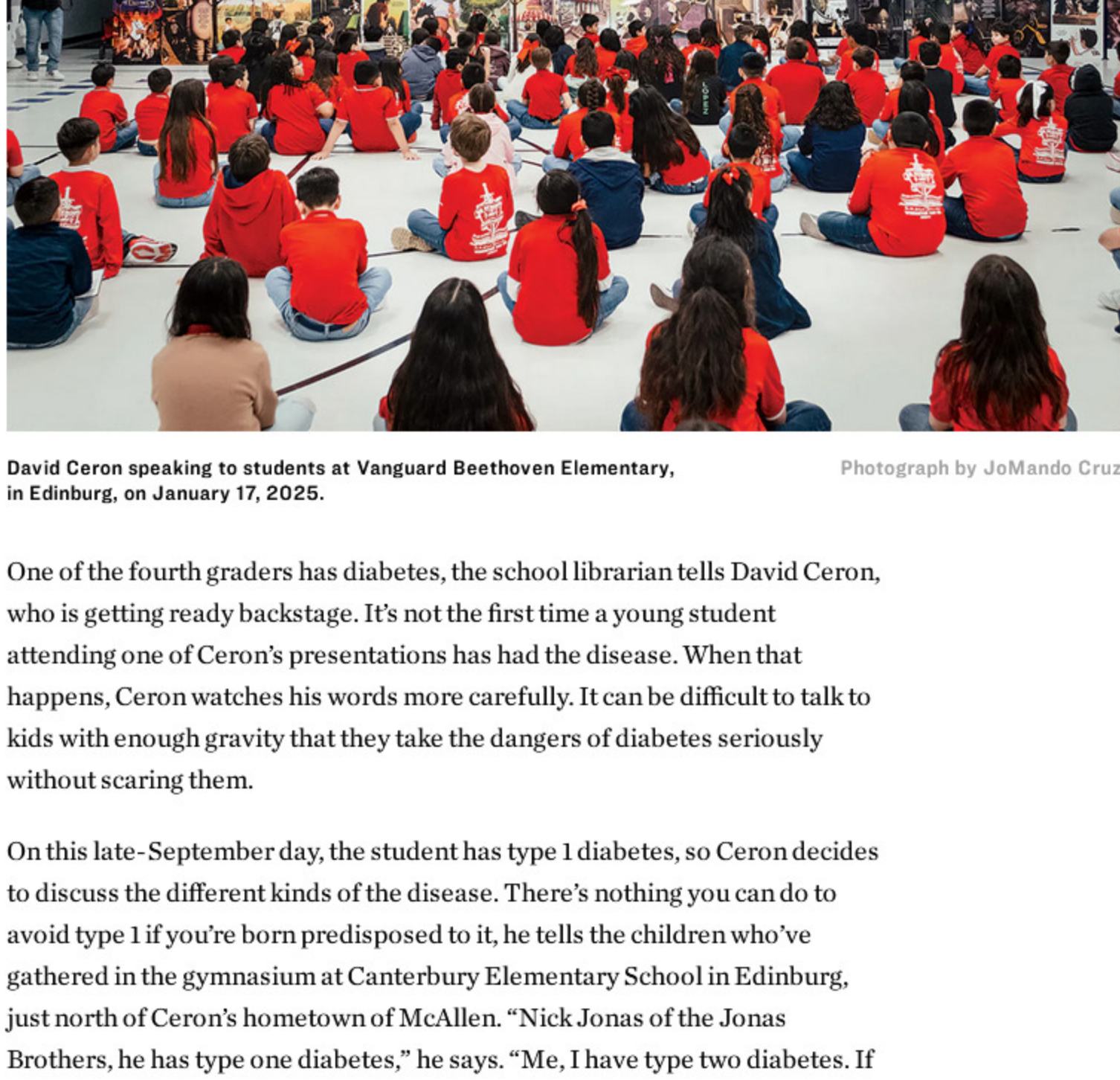
HEALTH & MEDICINE

Diabetes Ravaged His Family. Now He's Working to Spare Others in the Rio Grande Valley.

In a region where the chronic disease is too often viewed as a normal part of life, one advocate is educating children to change that.

By Sophie Novack

March 2025



David Ceron speaking to students at Vanguard Beethoven Elementary, in Edinburg, on January 17, 2025.

Photograph by JoMando Cruz

One of the fourth graders has diabetes, the school librarian tells David Ceron, who is getting ready to speak. It's not the first time a young student attending one of Ceron's presentations has had the disease. When that happens, Ceron watches his words more carefully. It can be difficult to talk to kids with enough gravity that they take the dangers of diabetes seriously without scaring them.

On this late-September day, the student has type 1 diabetes, so Ceron decides to discuss the different kinds of the disease. There's nothing you can do to avoid type 1 if you're born predisposed to it, he tells the children who've gathered in the gymnasium at Canterbury Elementary School in Edinburg, just north of Ceron's hometown of McAllen. "Nick Jonas of the Jonas Brothers, he has type one diabetes," he says. "Me, I have type two diabetes. If you don't take care of yourself, if you eat unhealthy, if you don't exercise, you might get type two."

Between 90 and 95 percent of the more than 38 million Americans with diabetes have type 2, which is often linked to obesity, as well as to poor diet and physical inactivity. Both types can lead to amputations, blindness, and heart and kidney failure. The disease is particularly prevalent among Hispanic people, who constitute more than 90 percent of the population of the Rio Grande Valley, where Ceron lives.

As rates of the disease have risen across the country and the world in recent decades, the impact of diabetes has been especially felt in this region. The Centers for Disease Control and Prevention estimates that about one in five Valley residents has diabetes, compared with roughly one in nine nationally. Another 30 percent of the area's population is thought to have prediabetes—high blood sugar levels that can presage the onset of type 2.

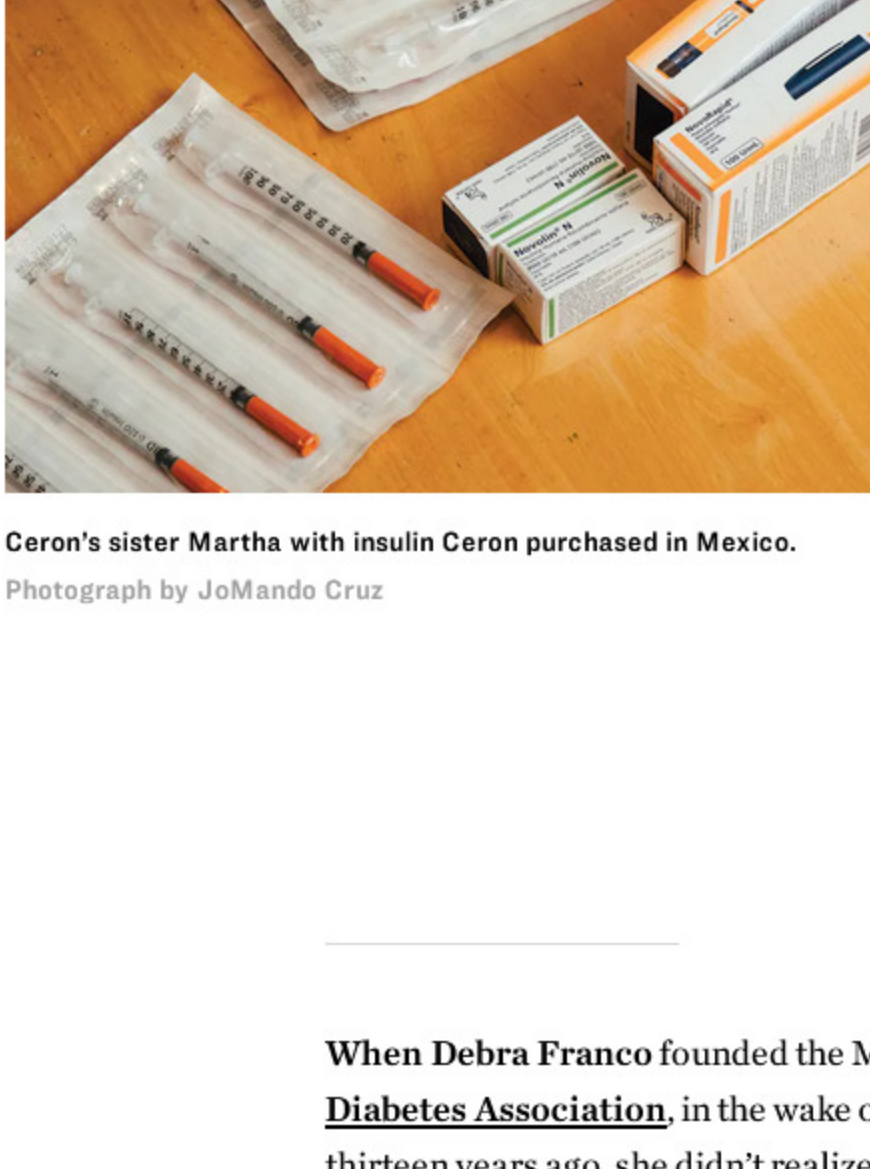
Kids in the Valley often inherit both genes and adult-onset diabetes, in recent years more and more children in the United States have been diagnosed. In November, a study published in the prestigious medical journal *The Lancet* projected that in the next quarter century, 45 percent of U.S. children ages five through fourteen will be overweight or obese if current trends continue. A 2022 study funded by the CDC estimated that the number of young kids and teens with type 2 diabetes could surge by nearly 700 percent by 2060.

Diabetes is pervasive in Ceron's family. His mother and all seven of his siblings were diagnosed. Three of his siblings had amputations, and two went blind because of the disease. Two siblings and his mother were on dialysis before they died. Diabetes killed one of his brothers, at age 57, and two of his sisters, at ages 60 and 66. Other family members, including his deceased brother's son, who's losing his vision and may soon need dialysis, have struggled to manage the disease's effects.

Ceron, now 47, was diagnosed about a decade ago, not long after the deaths of two of his siblings. At the time, he was a fourth-grade teacher, and he decided to write an interactive children's book called *The Adventures of Ezo and Cy* to help teach kids about the importance of healthy eating and physical activity in preventing diabetes. He eventually turned the book into a program he calls Fit-Lit, and he has worked with local diabetes organizations to host community events. He also gives readings at schools throughout the Valley, guiding students through air punches, jump squats, and stretches as Ezo and his dog, Cy, encounter obstacles in the book.

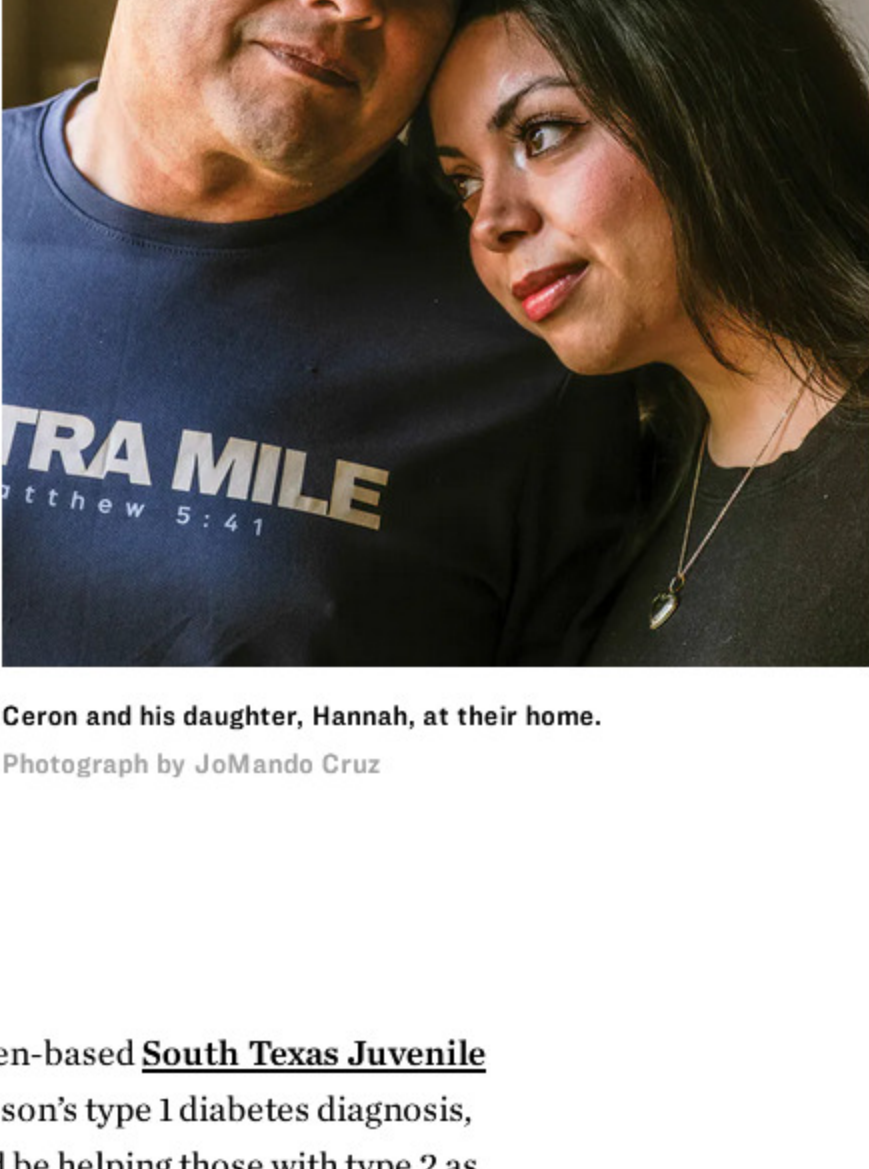
At Canterbury Elementary, he tells the students that he's planning to walk 250 miles, from McAllen to San Antonio, to further shine a spotlight on the crisis in his hometown. "What?!" the kids exclaim.

Years ago, Ceron tells them, a doctor warned him he was on the verge of developing diabetes and urged him to exercise and change his diet. "Did I listen? I did not," he says. He wants to move these kids to action before it's too late. "I don't want anybody here to have to go through all the stuff that my family's had to go through."



Ceron's sister Martha with insulin Ceron purchased in Mexico.

Photograph by JoMando Cruz



Ceron and his daughter, Hannah, at their home.

Photograph by JoMando Cruz

When Debra Franco founded the McAllen-based *South Texas Juvenile Diabetes Association*, in the wake of her son's type 1 diabetes diagnosis, thirteen years ago, she didn't realize she'd be helping those with type 2 as well. She wasn't aware that children were developing that form of the disease at all.

Now Franco's organization, which works to support families of children with diabetes in managing the disease, hears about a new child diagnosed nearly every day. In kids, the impact of diabetes can be especially devastating. "We've already seen children that have required open-heart surgery due to severe obesity and heart disease," Franco says. "We've already seen children who struggle with retinopathy and neuropathy and nephropathy, and we've already had a child that needed an amputation."

While the state health department doesn't track the number of children with the disease, survey data it provided to *Texas Monthly* indicate that diabetes among adults increased statewide between 2013 and 2022. In Hidalgo County, home to McAllen, the rate of adults saying they'd been diagnosed rose from roughly 13 percent to 21 percent.

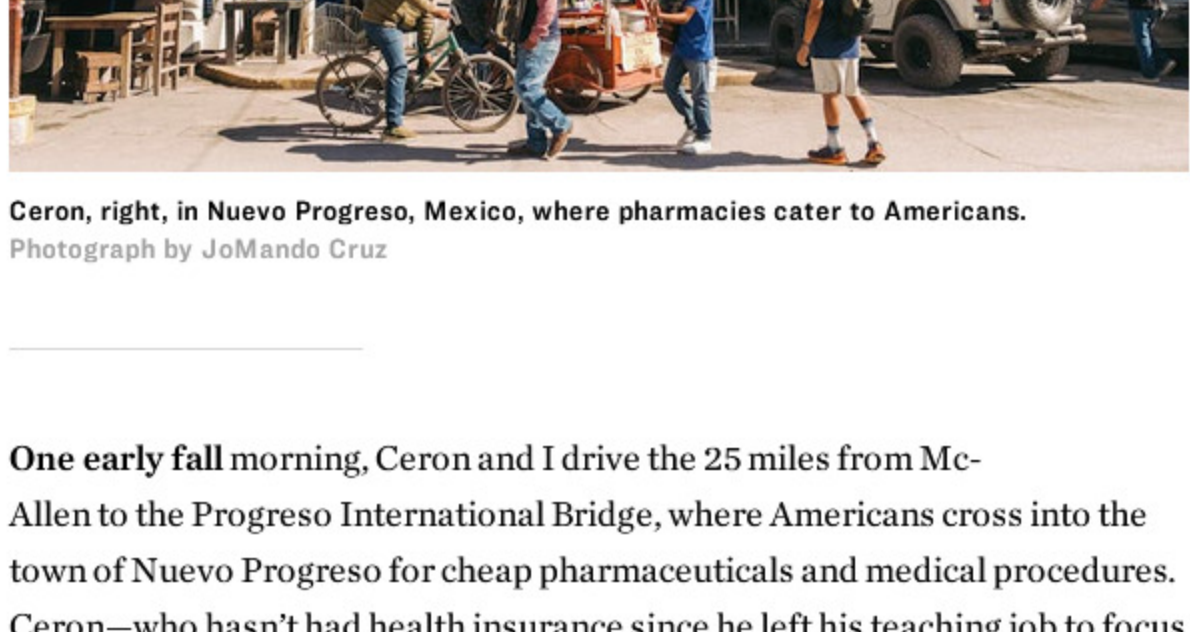
The multilayered reasons for the prevalence of diabetes in the Rio Grande Valley make it difficult for doctors and advocates to break the cycle of the disease's recurrence within families. In the U.S., Hispanic adults are diagnosed with diabetes at a rate about 60 percent higher than non-Hispanic white adults—and are more likely to suffer serious complications—because of both genetic and behavioral factors. Meanwhile, a recent study published in *Diabetes Care*, a medical journal from the American Diabetes Association, involving Mexican American residents in Starr County, just west of Hidalgo, found that exposure to arsenic and other toxic metals in the environment may have accelerated the progression of type 2 diabetes in the already high-risk population.

With high poverty and uninsured rates in the Valley, many residents can't afford to get regular checkups or miss work to see a doctor when they are, let alone pay for expensive new breakthrough drugs, such as *Mounjaro* and *Ozempic*, that can help control obesity and diabetes. Another significant barrier to care is a shortage of medical providers, particularly specialists.

Among Valley residents, developing diabetes is often considered inevitable, Franco tells me. "They feel like it's just natural—everybody in the family gets it; it's not a big deal," she says. "Not truly understanding that this disease wreaks havoc on a growing and developing body." Longtime habits can be exceedingly hard for adults to break. Changing diets can be difficult financially as well as culturally, says Moises Arjona, head of the Weslaco-based nonprofit Unidos Contra la Diabetes, because food often both provides comfort and is a means of showing love.

Seeking to break the cycle, Franco's and Arjona's organizations employ tactics similar to Ceron's. They take their messages of prevention straight to the Valley's children. "They do absorb it, because they haven't really fully understood that there is a cultural component to everything," Arjona says. "Our whole goal is to implant this into them: Eat healthy, eat better, read food labels. And take that home and work with Mom and Dad, so they can change it."

Ceron hopes the youngest members of his family succeed in making such changes, including his daughter, Hannah. Growing up, she and her schoolmates viewed diabetes as a normal part of life. They all knew someone with the disease. The butter box in her family's fridge was used to store insulin, Hannah told me. She would help Ceron's oldest sister clean the diabetic wounds on her feet and wrap them in gauze. For Hannah, the childhood chore was no more unusual than being asked to unload groceries. "It was just something you did at the house," she says.



Ceron, right, in Nuevo Progreso, Mexico, where pharmacies cater to Americans.

Photograph by JoMando Cruz

One early fall morning, Ceron and I drive the 25 miles from McAllen to the Progreso International Bridge, where Americans cross into the town of Nuevo Progreso for cheap pharmaceuticals and medical procedures. Ceron—who hasn't had health insurance since he left his teaching job to focus on advocacy work, about eight years ago—gets free eye checkups from a friend at his church. He visits Mexico for affordable dental care. He also crosses the border monthly to buy insulin for his sister Martha, who lost her insurance after a prolonged illness forced her to leave her nursing job three years ago.

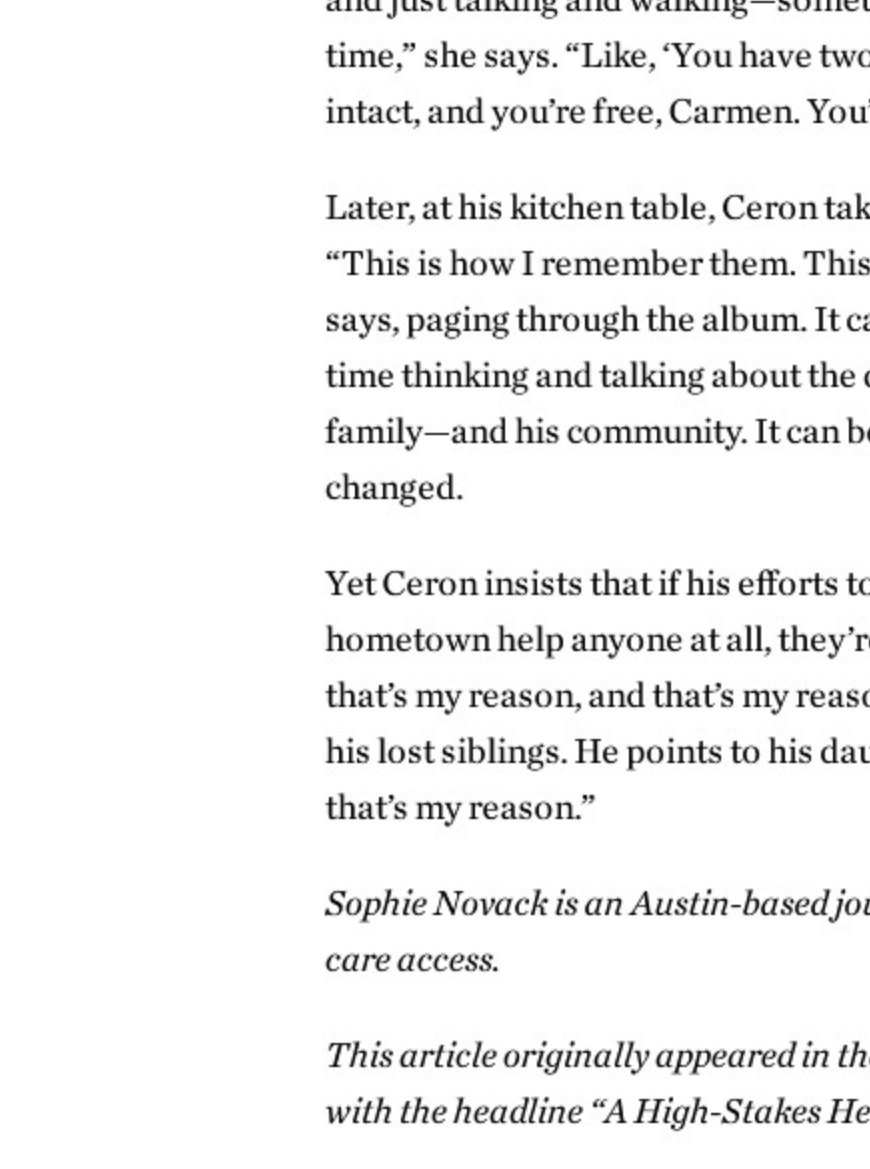
Just across the bridge, the street ahead is lined with shops targeting medical tourists. One large white sign with red-and-blue lettering reads, in English, "American Pharmacy." Another storefront is covered with a big yellow banner that advertises, "Almost Free Pharmacy." Ceron knows that some Nuevo Progreso pharmacies have sold counterfeit pills, so he visits the same one every time—a small, bright shop on the main strip. It's the only place he's found that offers both kinds of insulin Martha needs. Here, the medications don't require a doctor visit and cost just \$60 in total for a month's supply—a fraction of their cost in the U.S. for those without insurance.

At a store a few doors down from the pharmacy, Ceron wants to show me what he calls the "black stop signs"—food warning labels that Mexico requires. "Can you imagine if it was like this in the U.S.?" *Exceso calorías, exceso azúcares, exceso sodio, exceso grasas saturadas—excess calories, sugar, sodium, saturated fat*, he reads off the sticker on the front of a package of Oreos. "At the very least, it makes you think twice. At the very least."

In 2019, Mexico passed a law modeled on some enacted in Chile and other Latin American countries that mandated such labels on foods and banned the companies that make those foods from targeting children with their packaging. At the store in Nuevo Progreso, Ceron finds the cereal aisle and points to the bright boxes showcasing familiar brands without their signature cartoon characters. "There's no tiger. There's no rabbit on the Nesquik, on the Titi, Look, Frost Loops without the toucan," he says. "Little things, but I think they can make a huge difference."

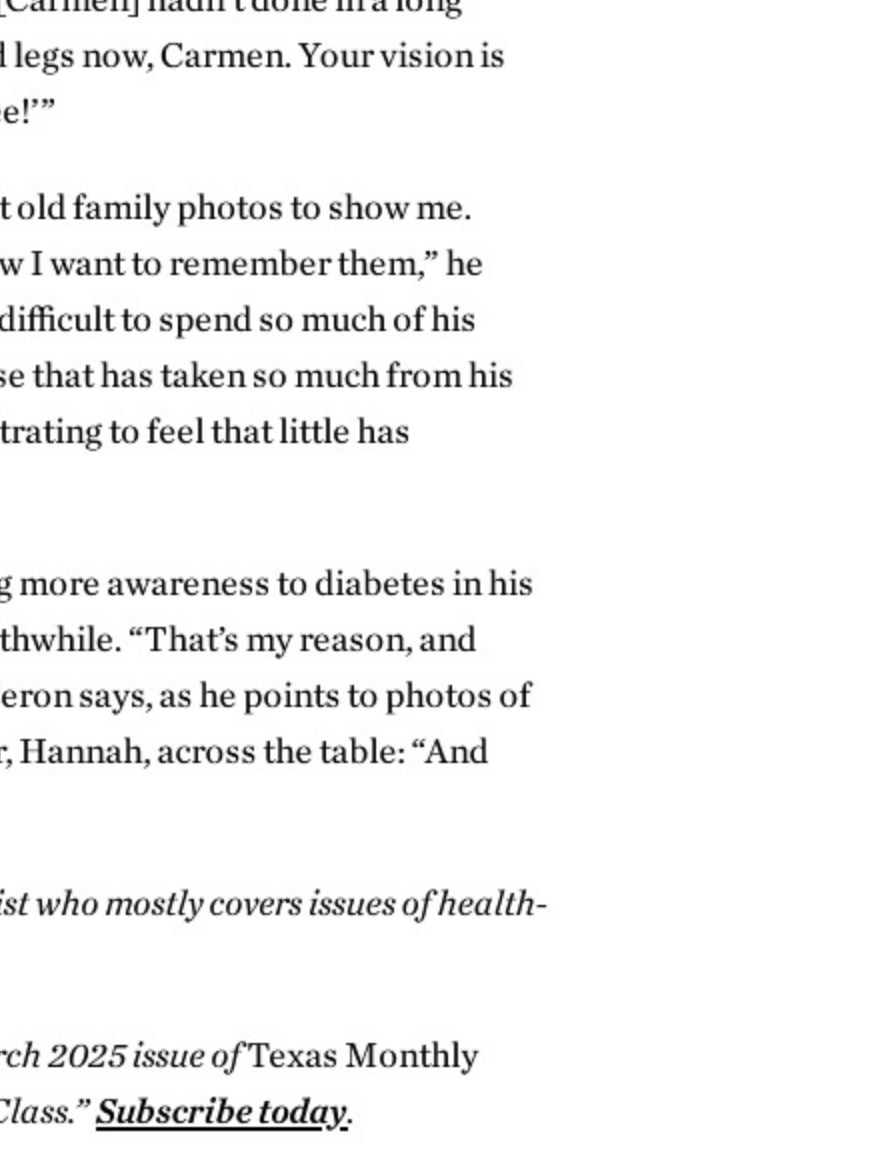
Ceron brings a bag of chips and a bottle of soda that he bought in Nuevo Progreso to his school presentations, to show kids the labels. In some Mexican states, he tells them, they wouldn't even be allowed to walk into a store and buy these themselves. Their parents would have to.

After we drop the insulin off at her home, Martha joins us for Ceron's daily laps around the air-conditioned mall—for exercise and training for his long walk to San Antonio, which is scheduled for November, to coincide with National Diabetes Month. Martha and I stroll behind and talk about Carmen, Martha's sister and best friend, who died just weeks earlier.



Ceron purchasing insulin for his sister at Linda Pharmacy, in Nuevo Progreso, Mexico.

Photograph by JoMando Cruz



Food warning labels, which Ceron calls "black stop signs," that read "excessive calories" and "excessive sodium."

Photograph by JoMando Cruz

Carmen was legally blind and had several toes amputated because of type 2 diabetes. Martha would bring food to Carmen's house, across the street, when her sister felt weak after the dialysis treatments she had to endure for twelve hours each week. Now Martha is losing her own vision to diabetes, and she admits to sometimes feeling jealous that Carmen is somewhere better, with their deceased mother, sister, and brother. "I picture them sitting down and just talking and walking—something [Carmen] hadn't done in a long time," she says. "Like, 'You have two good legs now, Carmen. Your vision is intact, and you're free, Carmen. You're free!'"

Later, at his kitchen table, Ceron takes out old family photos to show me. "This is how I remember them. This is how I want to remember them," he says, paging through the album. It can be difficult to spend so much of his time thinking and talking about the disease that has taken so much from his family—and his community. It can be frustrating to feel that little has changed.

Yet Ceron insists that it's his efforts to bring more awareness to diabetes in his hometown help anyone at all, they're worthwhile. "That's my reason, and that's my reason, and that's my reason," Ceron says, as he points to photos of his lost siblings. He points to his daughter, Hannah, across the table: "And that's my reason."

Sophie Novack is an Austin-based journalist who mostly covers issues of health-care access.

This article originally appeared in the March 2025 issue of *Texas Monthly* with the headline "A High-Stakes Health Class." *Subscribe today.*

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