

The Special Diabetes Program for Indians (SDPI) Providing a Strong Return on the Federal Investment

The growing epidemic of diabetes represents one of our greatest public health challenges. What may not be as widely known is that American Indians and Alaska Natives have the highest prevalence of diabetes amongst all U.S. racial and ethnic groups. In response to this epidemic, Congress established the Special Diabetes Program for Indians (SDPI) in 1997, and the results of this focused effort have been remarkable.

Examples of Clinical and Community Results

Improved blood sugar levels

The mean blood sugar level (A1c) has decreased 11% – from 9.0% in 1996 to 7.9% in 2009. Scientific research shows that a one unit decrease in the A1c translates into a 40% reduction in diabetes-related complications such as blindness, kidney failure, nerve disease, and amputations.

Reduction in risk of cardiovascular disease

The mean total cholesterol level has decreased by 16% from 1997–2009, and mean LDL (“bad” cholesterol) has been reduced 20%. Research has shown that lowering cholesterol levels may help reduce the chance of developing cardiovascular complications associated with diabetes such as heart attacks, stroke, or heart failure.

Slowed progression of diabetes-related kidney disease

The prevalence of protein in the urine (a sign of kidney dysfunction) was reduced by 32% between 1997–2009. New cases of diabetes-related dialysis in AIANs decreased 31% between 1999–2007, while remaining relatively unchanged in whites and blacks. Preventing kidney failure is critical to preventing people with diabetes from needing dialysis or kidney transplants.

Increased primary prevention and weight management programs for children and youth

More than 80% of SDPI grant programs now use recommended public health strategies to provide diabetes prevention activities and services for AIAN children and youth. This represents a 73% increase in primary prevention and a 56% increase in weight management activities targeting children and youth.

Increased emphasis on adopting healthy lifestyle behaviors

SDPI has resulted in a significant increase in the promotion of healthy lifestyle behaviors. Communities with SDPI-funded programs have seen a 57% increase in nutrition services, a 72% increase in community walking and running programs, and a 65% increase in adult weight management programs.

Enhanced focus on American Indian and Alaska Native traditions

SDPI has enabled tribal communities to demonstrate the effectiveness of the use of traditional beliefs and practices in the prevention and treatment of diabetes. Greater than 90% of grant programs report implementation of culturally appropriate diabetes education activities.

A multi-year renewal of the SDPI will provide the resources to American Indian and Alaska Native communities to continue to make clinical improvements and increase access to quality diabetes care.

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