National Indian Health Board



Arizona

Special Diabetes Program for Indians:

Saving lives in Arizona and providing a strong return on federal investment

History

Congress established the Special Diabetes Program for Indians (SDPI) in 1997 to address the growing epidemic of diabetes in American Indian and Alaska Native (AI/AN) Nations. By allowing Tribes to determine their own approach, the program has become the nation's most effective federal initiative to combat diabetes and serves as a useful model both for diabetes programs nationwide and public health programs in Indian Country. SDPI is currently authorized through Fiscal Year 2023.

SDPI Outcomes

OF DIABETES PROGRAMS IN 35 STATES Between 2013 and 2017 15.4% END STAGE RENAL DISEASE REDUCED BY Between 1999 and 2013- the greatest decline of any racial or ethnic group. 14.6% \$88,000 IN SAVINGS FOR MEDICARE FOR EACH PATIENT KEPT OFF CHEMODIALYSIS TRIBES COLLECT DATA AND HAVE **DOCUMENTED THAT** THIS INVESTMENT IS **BOTH SAVING LIVES** AND THE FEDERAL

Diabetes in Arizona

FY 2023 SDPI funding in Arizona totaled \$35,522,502 for 28 Community Directed Grant **Programs**

According to the American Diabetes Association, in 2017, approximately 572,000 people in Arizona – 10.8 % of the population – had diagnosed diabetes, and many suffered from serious diabetes-related conditions such as heart disease, neuropathy, and eye, foot and skin complications. In addition to the human toll diabetes places on the people of Arizona, it also places a large financial burden on the state's healthcare system. According to the Arizona Department of Health Services, in 2019, the staggering estimate of cost of diabetes and prediabetes in Arizona was approximately \$6.8 billion.

In Arizona, the age adjusted mortality rate for diabetes in 2016 demonstrates a disproportionate burden on AI/AN populations – 81.6 AI/AN deaths per 100,000 compared to 18.1 White deaths.

SDPI Impact

SDPI provides a strong return on federal investment and is saving lives in Arizona. Since the beginning of SDPI, blood sugar levels have decreased, risk factors of cardiovascular disease have been reduced, diabetesrelated kidney disease has been cut by more than half, and primary prevention and weight management programs for Native youth have increased. Nation-wide AI/AN diabetes prevalence decreased from 15.4% to 14.6% between 2013 and 2017. National data reflect the excellent outcomes in Native Nations resulting from innovative local level programs.

HEALTHCARE SYSTEM

MONEY!

For more information, visit https://www.nihb.org/sdpi/

