

# National Indian Health Board



## Special Diabetes Program for Indians:

*Saving lives in Louisiana 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

**301**  
AI/AN DIABETES PROGRAMS IN 35 STATES

**5.5%**  
DECREASE IN PREVALENCE OF DIABETES  
Between 2013 and 2017

**15.4%**  
↓  
**14.6%**

**END STAGE RENAL DISEASE REDUCED BY 54%**  
Between 1999 and 2013- the greatest decline of any racial or ethnic group.

**\$88,000 IN SAVINGS FOR MEDICARE FOR EACH PATIENT KEPT OFF CHEMOTHERAPY**

**TRIBES COLLECT DATA AND HAVE DOCUMENTED THAT THIS INVESTMENT IS BOTH SAVING LIVES AND THE FEDERAL HEALTHCARE SYSTEM MONEY!**

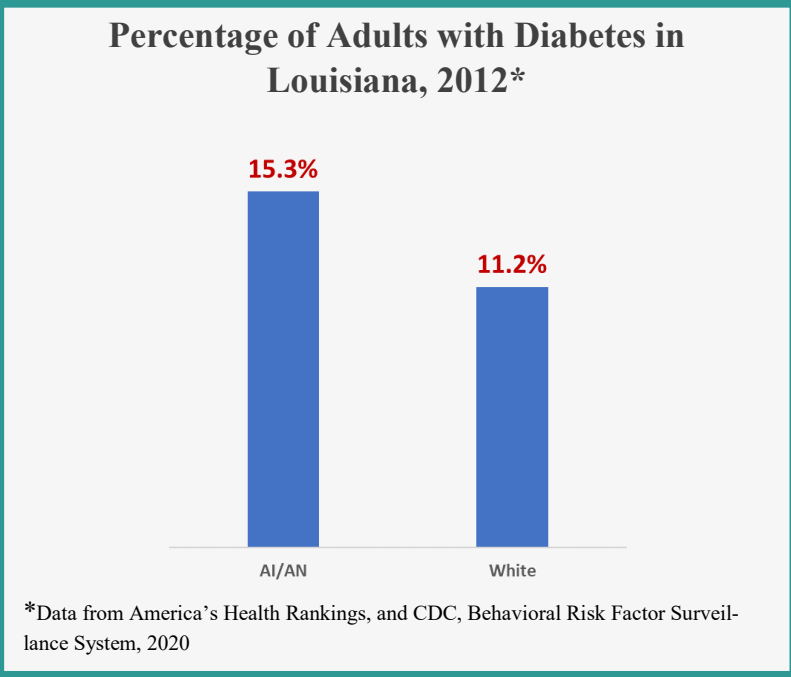
### Diabetes in Louisiana

**FY 2023 SDPI funding in Louisiana totaled \$364,530 for 4 Community Directed Grant Programs**

According to the American Diabetes Association, approximately 505,468 people in Louisiana – 14.2 % of the population – have diagnosed diabetes, and many suffer from serious diabetes-related conditions such as heart disease, neuropathy, and eye, foot and skin complications. An additional 1.2 million—34.4% of adults— have prediabetes. In addition to the human toll diabetes places on the people of Louisiana, it also places a large financial burden on the state’s healthcare system. The staggering estimate of cost of diabetes in Louisiana was approximately \$5.7 billion.

### SDPI Impact

SDPI provides a strong return on federal investment and is saving lives in Louisiana. Since the beginning of SDPI, blood sugar levels have decreased, risk factors of cardiovascular disease have been reduced, diabetes-related kidney disease has been cut by more than half, and primary prevention and weight management programs for Native youth have increased. Nationwide 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.



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

\*Data from America’s Health Rankings, and CDC, Behavioral Risk Factor Surveillance System, 2020