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National Indian Health Board

NEW MEXICO

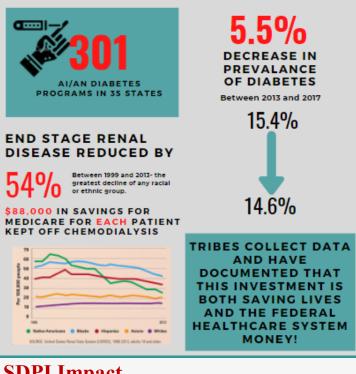
Special Diabetes Program for Indians:

Saving lives in New Mexico 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



SDPI Impact

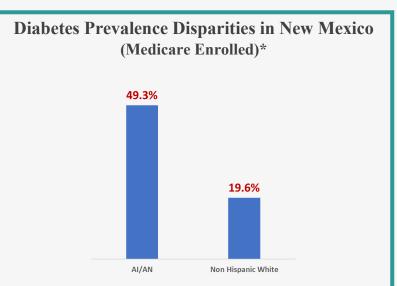
SDPI provides a strong return on federal investment and is saving lives in New Mexico. Since the beginning of SDPI, blood sugar levels have decreased, risk factors of cardiovascular disease have been reduced, diabetes-related kidney disease has been cut by more than half, and primary prevention and weight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

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

Diabetes in New Mexico

FY 2023 SDPI funding in New Mexico totaled \$7,693,403 for 24 Community Directed Grant Programs

According to the American Diabetes Association, in 2017, approximately 184,000 people in New Mexico – 11.6% 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 New Mexico, it also places a large financial burden on the state's healthcare system. According to the American Diabetes Association, in 2017, the staggering estimate of cost of diabetes and prediabetes in New Mexico was approximately \$2 billion.



*Data from Medicare Chronic Conditions Warehouse, for Fee for Service Beneficiaries, 2018