

Special Diabetes Program for Indians



Saving lives in Alaska 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 2019.

Diabetes in Alaska

According to the Centers for Disease Control and Prevention (CDC), in 2015, approximately 41,180 adults in Alaska – **7.8 % 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 Alaska, 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 Alaska was approximately \$570 million.

Estimated Diabetes Prevalence Disparities in Alaska based on BRFSS*

8.2%



AI/AN

7.5%



All Alaskans

*Data from Alaska BRFSS and US National Center for Chronic Disease Prevention and Health Promotion BRFSS, 2016

SDPI Outcomes

SDPI funding supports over 300 Tribal diabetes treatment and prevention programs in 35 states, and the results have been extraordinary. Diabetes incidence rates in AI/ANs are no longer increasing, resulting in **a 54% decline in end-stage-renal-disease (ESRD) since 1998, more than any other race**, according to the United States Renal Data System. ESRD requires expensive treatments and is the single largest driver of Medicare costs. In fact, for every patient SDPI kept off of hemodialysis in 2014, Medicare saved \$88,000! The structure of the grant program has allowed Tribes to collect data and document that this investment is both saving lives and saving the federal healthcare system money.

FY 2017 SDPI funding in Alaska totaled \$10,191,326 to support Community-Directed Grant Programs at 19 locations:

- AK Native Tribal Health
- Arctic Slope Native Corp
- Chugachmiut
- Council of Athabascan Tribal Governments
- Kenaitze Indian Tribe
- Kodiak Area Native Assn
- Eastern Aleutian Tribes
- Seldovia Village Tribe
- SE AK Regional Health Consortium
- Tanana Chiefs Conference
- Aleutian Pribilof Islands Assn
- Bristol Bay Area Health
- Copper River Native Assn
- Mt. Sanford Tribal Consortium
- Ketchikan Indian Corp
- Maniilaq Association
- Norton Sound Health Corp
- Southcentral Foundation
- Yukon-Kuskowim Health Corp

SDPI Impact

SDPI provides a strong return on federal investment and is saving lives in Alaska. SDPI has allowed the reduction of kidney disease in Alaska Natives with diabetes by 65%, and reduced foot and leg amputations by 69% since 1989.

Nationally, 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. National data reflect the excellent outcomes in Native Nations resulting from innovative local level programs.

For more information, visit www.nihb.org/SDPI

National Indian Health Board



Alaska Tribal Case Study

Yukon-Kuskokwim Health Corporation

Background

The goal of the Yukon-Kuskokwim Health Corporation (YKHC) diabetes prevention program is to prevent diabetes and other co-morbidities through education, clinical access, and case management. By focusing on Tobacco Use Screening the Diabetes Department is able to contribute to a key strategy of YKHC's corporate mission and provide care to not only customers with diabetes, but those at high risk of developing diabetes.

Overview of YKHC:

Communities Served: 58 Federally Recognized Tribes
Population Served: 27,000
Clinics Operated: 41
Current SDPI Funding Level: \$1,872,028
Best Practice: Tobacco Use Screening

Programs

YKHC has the largest diabetes prevention program in Alaska. The department serves their communities based on needs identified through Diabetes audit data, best practices, and a focus on prevention and partnerships.

• Diabetes Specialty Clinics and Case Management

YKHC's DP&C Department offers a multidisciplinary approach in each village clinic, increasing access to healthcare services including foot exams, screenings, nutrition education, medication review and case management.

• Group Medical Appointments (GMAs)

Since July, 2016 more than 200 participants with diabetes have been seen via approximately 30 group visits that were offered throughout the region. GMAs include annual medical and foot exams, and group nutrition and stress management education in a group environment. Participants realize they are not alone with their diagnosis.

• Diabetes Outreach and Education

DP&C hosts diabetes support group for patients, airs a radio show to reach rural patients, and hosts a variety of community events to encourage diabetes prevention. The Outreach Specialists support various community partnerships to raise awareness about the importance of diabetes prevention. One of the most notable outreach



endeavors is the partnership with Camp Fire Alaska Rural Program, a summer camp program that focuses on the importance of healthy life choices, reducing high-risk behaviors, and encouraging youth and community involvement through a wellness curriculum that promotes a holistic, healthy, and balanced life by encouraging traditional values. Based on physical, emotional, spiritual and mental well-being, this curriculum implicitly focuses on chronic disease prevention with a special emphasis on tobacco and diabetes prevention.

Impact

Since 2014, Camp Fire has been able to increase the number of communities visited and the duration of camp. Over 40 statewide and regional partners support the delivery of this program and in 2018 (19) communities received a total of 76 weeks of programming with over 3200 youth, families, and elders served.

According to the 2017 Diabetes Audit, blood sugar control in diabetes patients in the YKHC was better than the overall IHS percentage, with 55% of patients having well controlled blood sugar compared to 33% IHS-wide.

YKHC's 2017 Diabetes Care and Outcomes Audit included 532 patients. Of these patients, 91% were screened for tobacco use, 72% were prescribed cholesterol lowering medication to reduce a person's risk of heart attack or stroke, and 74% received Diabetes-Related Education.

