

# Special Diabetes Program for Indians

*Saving lives in California 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) communities. This program has grown and become the nation's most strategic and effective federal initiative to combat diabetes. SDPI is currently authorized through fiscal year 2017.

## SDPI Outcomes

SDPI funding supports over 300 diabetes treatment and prevention programs in 35 states, and the results have been extraordinary. 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. For example, according to the United States Renal Data System, there has been a remarkable decline in diabetes incidence rates among AI/ANs since 1998 that has resulted in **a 54% decline, more than any other race**, in prevalence rates of end-stage renal disease (ESRD) – a costly complication often linked with diabetes. ESRD requires expensive treatments and is the single largest driver of Medicare costs. The Medicare cost per year for hemodialysis (a common ESRD treatment) exceeded \$84,000 per patient in 2013.

According to the Centers for Disease Control and Prevention (CDC), in 2015, approximately 3.8 million people in California – **9.6% 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 California, it also places a large financial burden on the state's healthcare system. In 2013, the staggering estimate of direct and indirect cost of diabetes in California was approximately \$27.55 billion.

## FY 2017 SDPI funding in California totaled \$9.7 million for 39 Community-Directed Grant Programs in:

- Santa Barbara Indian Health
- Central Valley
- Colusa Indian Community
- Feather River Tribal Health
- Greenville Rancheria
- Hopland Band of Pomo
- Valley Center Indian Health
- Lake County Tribal Health
- Oakland Native Health
- Pit River Health
- Redding Rancheria
- Round Valley Indian Health
- San Diego AI Health
- Sonoma County Health
- Strong Family Health Center
- Toiyabe Indian Health
- Tuolumne Mewuk
- Warner Mountain
- Chemehuevi Indian Tribe
- Fort Mojave Tribe
- Bakersfield Indian Health
- Chapa-De Indian Health
- Consolidated Tribal Health
- Fresno AI Health Project
- Hoopa Valley Tribal Council
- Santa Clara Valley
- Karuk Tribe
- MACT Health Board
- Northern Valley
- Quartz Valley
- Riverside San Bernardino
- Sacramento Native Health
- Santa Ynez Tribal Health
- Southern Indian Health
- Susanville Indian Rancheria
- Tule River Indian Health
- Los Angeles Indian Health
- Wilton Rancheria
- Arcata United Indian Health

## Renewal is Vital

**Congress must renew this critical program** to ensure that the SDPI funded programs can continue their important work and that lessons learned from these programs can be shared and replicated to keep Indian Country on the path to a diabetes-free future.

National Indian Health Board



For more information, visit [www.nihb.org/SDPI](http://www.nihb.org/SDPI)



*"I truly believe that diabetes is robbing us as a community of our elders' wisdom, as they die too young. The SDPI Healthy Traditions program, by concentrating on prevention, not only gives people hope of a healthier future for all our Nations, but it also gives us the tools to fulfill that future."*

-Amy Lemmer,  
Sonoma County Indian Health Project