

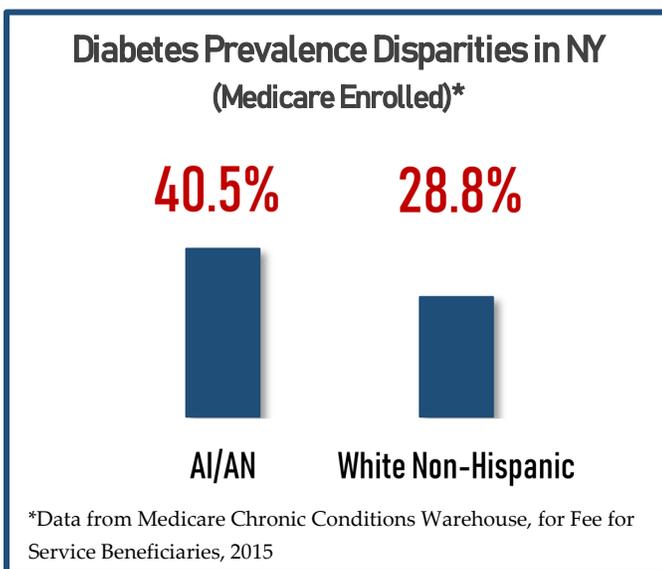
Special Diabetes Program for Indians

Saving lives in New York 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.



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.

Diabetes in New York

According to the Centers for Disease Control and Prevention (CDC), in 2015, approximately 1,529,719 adults in New York – **8.9 % 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 York, 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 York was approximately \$21.23 billion.

FY 2017 SDPI funding in New York totaled \$1,310,560 to support 3 Community-Directed Grant Programs at Tribal locations in New York:

- Oneida Indian Nation
- Saint Regis Mohawk Tribe
- Seneca Nation of Indians

SDPI Impact

SDPI provides a strong return on federal investment and is saving lives in New York. 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

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New York Tribal Case Study

Saint Regis Mohawk Tribe

Background

Tsitewatakari:tat – The Let's Get Healthy Program (LGHP) pursues the goal of providing diabetes care, offering case management, and preventing diabetes and diabetes and related complications in the community.

Overview of the Saint Regis Mohawk Tribe:

Enrolled Members: 15,949

Health Services User Population: 5,345

Current SDPI Funding Level: \$433,374

Best Practice: Diabetes-Related Education



Programs

• Case Management

The Registered Nurse (RN) delivers clinical case management care, and provides diabetes prevention and self-management education.

• Nutrition

The Registered Dietitian (RD) provides medical nutrition therapy, community-based initiatives and nutrition education for weight management/ reduction, as well as supermarket tours and healthy cooking demonstrations.

• Fitness Programs

- ❖ Move for Health: Participants can witness the effect physical activity has on clinical measurements by recording blood pressure, heart rate, and blood glucose before and after exercise.
- ❖ Youth Fitness: The goal is to prevent diabetes, while encouraging physical activity, and making exercise fun for the students so they learn to love and implement activity into their daily life. The program also provides nutrition education and healthy snacks.
- ❖ Community fitness classes and pool fitness.

• Mind/Body Wellness:

LGHP hosts a meditation lounge with 1 on 1 or group appointments, and a weekly guided meditation class. Yoga classes are offered twice weekly.

• Outreach and Education

LGHP hosts various events, and provides educational activities at local schools, the Boys and Girls club, and the Akwesasne Coalition for Community Empowerment.

Impact

The Diabetes Center for Excellence, established in 2013 includes a classroom, a treatment room, a teaching kitchen, a relaxation/meditation lounge, a 2,500 square foot fitness room, locker rooms, an exercise pool, offices, and a conference room. This 15,000 square foot state of the art building allows our program to offer comprehensive diabetes treatment and care.



Since 2013, according to the IHS Diabetes Care and Outcomes Audit, exercise instruction increased from **36% to 80%**. The number of patients with an A1C less than 8 increased from **43% to 58%**. The number of foot and eye exams have increased significantly, from **20% to 38%** and **30% to 51%**, respectively. Nutrition education by any provider has also improved from **38% to 81%**.

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