

National Indian Health Board



WISCONSIN



Special Diabetes Program for Indians:

Saving lives in Wisconsin 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.

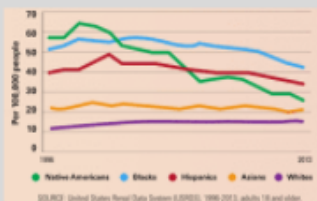
SDPI Outcomes



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 CHEMODIALYSIS



5.5%

DECREASE IN PREVALENCE OF DIABETES

Between 2013 and 2017

15.4%



14.6%

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

Diabetes in Wisconsin

FY 2023 SDPI funding in Wisconsin totaled \$3,421,213 to support 12 Community Directed Grant Programs

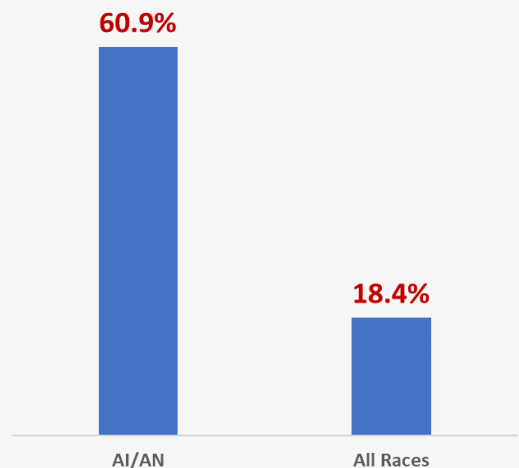
According to the American Diabetes Association, in 2017, approximately 439,000 people in Wisconsin – 9.8% of the population – had diagnosed diabetes, and many suffered from serious diabetes-related conditions such as heart disease, neuropathy, and eye, foot and skin complications. In addition to the human toll diabetes places on the people of Wisconsin, 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 Wisconsin was approximately \$5.5 billion.

SDPI Impact

SDPI provides a strong return on federal investment and is saving lives in Wisconsin. 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/>

Diabetes Mortality Rate Disparities in Wisconsin



**Data from Great Lakes Inter-Tribal Council, American Indian and Alaska Native Health in MI, MN, WI, 2016

Wisconsin Tribal Case Study

Forest County Potawatomi

Background

The goal of the Forest County Potawatomi (FCP) diabetes prevention program is to prevent diabetes and other co-morbidities through education, programming, and case management. PLPT embraces best practices for diabetes prevention, focusing on promoting foot care for patients with diabetes.

Overview of Forest County Potawatomi:

Enrolled Members: 1,400
Reservation Population: 531
Size of Reservation: 12,000 acres
Economic Activity: Gaming
Current SDPI Funding Level: \$132,418
Best Practice: Foot Exam



Programs

FCP's diabetes prevention program (DPP) engages the community in multiple ways based on gaps in services, needs identified through diabetes audit data and incorporating evidence-based strategies.

Foot Care and Foot Exams: Diabetes audit data identified foot care as a major need. DPP provides patients with fitted shoes, trained all medical staff to perform foot exams during checkups, and conduct regular programs and outreach to encourage foot exams, including spa-themed events.

Diabetes Education and Self-Management: DPP teaches patients to manage their own care in between checkups. Regular lunch and learns and home visits allow DPP to teach patients how to manage their blood sugar and maintain healthy feet.

Case Management: DPP staff visit patients and provide case management to help them engage in healthy behavior. Nutrition: Nutrition staff teach classes on healthy eating for all ages, and share recipes, encouraging community members to try new foods while incorporating traditional and healthy foods into their diet.

Impact

The program has made some major changes in the FCP community. Using SDPI best practices, the DPP increased the percent of current tobacco users counseled from 70% to 94% from 2016 to 2018. The percent of patients with blood pressure less than 140/90 increased from 82% to 92%. The percentage of patients meeting multiple diabetes health criteria, including an A1C level below 8, statin prescription, and a mean blood pressure less than 140/90, increased from 28% to 50%.

Attendance at educational events has increased too. The number of patients attending diabetes education luncheons increased from 86 in 2016 to 105 in 2018.

“SDPI has been wonderful to learn from ... it was integral to our programs and departments.”

Anne Chrisman,
Diabetes Coordinator

Established by the Tribes to advocate as the united voice of federally recognized American Indian and Alaska Native Tribes, NIHB seeks to reinforce Tribal sovereignty, strengthen Tribal health systems, secure resources, and build capacity to achieve the highest level of health and well-being for our People.

Contact:
Sarah Price, Public Health Project Coordinator
sprice@nihb.org, 202-507-4078
www.nihb.org

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