



Special Diabetes Program for Indians
Demonstration Projects Grantee Meeting
July 28, 2009

Addressing Diabetes in the American Indian and Alaska Native Population

by

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As all of you here today are aware of, diabetes has reached nearly epidemic proportions among American Indians and Alaska Natives, with diabetes rates that are nearly three times the U.S. All Races rates. Once exclusively a disease of adults, type 2 diabetes is becoming increasingly common among Indian youth.

Therefore, addressing diabetes in the American Indian and Alaska Native population is of paramount importance, and has long been one of my focus areas. Diabetes prevention efforts are an urgent priority, as well as diabetes management to prevent complications.

For three decades, the Indian Health Service (IHS) has served as a leader in the fight against the diabetes epidemic in American Indian and Alaska Native communities, earning national and international recognition for diabetes quality improvement. Major accomplishments have included developing monitoring systems of diabetes clinical care, such as the *Annual IHS Diabetes Care and Outcomes Audit*, and creating diabetes surveillance systems for tracking diabetes prevalence and complications.

The IHS Division of Diabetes Treatment and Prevention has also developed and mobilized an extensive network to conduct diabetes treatment and prevention programs and activities throughout the Indian health system. The IHS focuses on applying scientifically proven methods to prevent the onset of diabetes and costly diabetes-related complications such as cardiovascular, eye, nerve, and kidney disease.

The establishment in 1997 of the Special Diabetes Program for Indians (SDPI) has been crucial to our efforts to address the prevention and treatment of diabetes and its complications. The SDPI provided \$150 million over 5 years for “the prevention and treatment of diabetes in American Indians and Alaska Natives.” Funds were reauthorized for fiscal years (FY) 2004-2009 at \$150 million per year, with another \$150 million per year authorized through FY 2011.

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Currently, 333 community-directed diabetes programs in 35 states are implementing diabetes treatment and prevention programs that address local community priorities. Another 66 demonstration projects, awarded through a competitive grant program, are translating the science of diabetes prevention and cardiovascular risk reduction into real world applications.

In addition, the SDPI supports the design and implementation of health information systems to improve data collection and analysis.

Diabetes health outcomes have improved significantly in American Indian and Alaska Native communities since the inception of the SDPI. One of the most important improvements is a 13 percent decrease in the mean blood sugar level of American Indians and Alaska Natives with diagnosed diabetes, a major achievement over 12 years. Decreases of this magnitude translate to a 40 percent reduction in diabetes-related complications.

The IHS Division of Diabetes continues to strengthen the IHS diabetes infrastructure at the Headquarters and Area office levels to maintain and improve diabetes surveillance, technical assistance, provider networks, and clinical monitoring. In addition, the IHS Area Diabetes Consultants provide technical support to diabetes programs in their respective Areas by supporting culturally sensitive and focused prevention and treatment programs. A rigorous evaluation model for the SDPI also has been developed.

The Demonstration Projects have shown that they are doing a good job. They are showing that diabetes prevention and cardiovascular risk reduction for people with diabetes is attainable. The positive results of the SDPI Demonstration Projects can be used to share successes with Congress.

The plan for the Demonstration Projects is that these grant projects will continue to serve the American Indian and Alaska Native communities as programs. With the next 2 years of extended SDPI funding, it will be the role of the Demonstration Projects to begin to demonstrate what it takes to implement these types of programs in the “real world” setting.

The Demonstration Projects will be providing direction for other IHS, tribal, and urban Indian health care programs through the development of new best practices and lessons learned. Optimizing diabetes care and promoting healthy lifestyles will help us prevent many of the chronic conditions that plague Indian Country.

Thank you.