SPECIAL DIABETES PROGRAM FOR INDIANS

ISSUE Native Americans have the highest rates of Type 2 diabetes in the United States. Diabetes prevention and treatment efforts are important priorities to decrease the onset of diabetes and its complications.

BACKGROUND For three decades, the IHS has served as a leader in the fight against the diabetes epidemic in American Indian and Alaska Native (AI/AN) communities, earning national recognition for diabetes quality improvement. Major accomplishments include 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 (DDTP) has also developed and mobilized an extensive network to conduct diabetes treatment and prevention programs and activities throughout the Indian health system. Given the limited resources available for diabetes care, 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 diseases.

STATUS In the Balanced Budget Act of 1997, Congress established the Special Diabetes Program for Indians (SDPI) and provided $30 million per year for “the prevention and treatment of diabetes in American Indians and Alaska Natives.” The most recent authorizations have been for $150 million per year. SDPI is currently authorized through fiscal year 2017.

The major components of the SDPI are administered by the IHS DDTP. There are 301 community-directed diabetes grant programs in 35 states that implement diabetes treatment and prevention programs based on scientifically proven Best Practices. These programs are designed to address local community priorities. Another 66 SDPI Demonstration Projects successfully completed a six-year program translating the results of diabetes prevention and cardiovascular disease risk reduction research into diverse, real world Indian health settings. Toolkits have been developed in partnership with these sites which will help disseminate their positive results, best practices, and lessons learned throughout Indian Country.

Diabetes health outcomes have improved significantly in AI/AN communities since the inception of the SDPI. One of the most important improvements has been an eight percent reduction in the average blood sugar level (A1C) of AI/ANs with diagnosed diabetes between 1997 and 2015 (see chart). Improved blood sugar control contributes to reductions in complications from diabetes.

OPTIONS/PLANS The IHS continues to strengthen its diabetes infrastructure at the Headquarters and Area office levels to maintain and improve diabetes surveillance, technical assistance, provider networks, and clinical monitoring, as well as promoting culturally sensitive prevention and treatment programs.

ADDITIONAL INFORMATION For referral to the appropriate spokesperson, contact the IHS Public Affairs Staff at 301-443-3593.