

The *Special Diabetes Program for Indians (SDPI)* is a \$150 million per year grant program that is funded through Congressional legislation and administered by the Indian Health Service (IHS) Division of Diabetes Treatment and Prevention (DDTP). In the Balanced Budget Act of 1997, Congress passed legislation to create the SDPI to treat and prevent diabetes in American Indians and Alaska Natives (AI/AN).

SDPI provides this funding to 404 IHS, Tribal, and Urban Indian health programs, serving nearly all Federally-recognized tribes. The SDPI grant programs use evidence-based and community-driven strategies to address diabetes treatment and prevention across the lifespan. The IHS DDTP and the Tribally-appointed Tribal Leaders Diabetes Committee (TLDC) provide leadership and guidance for SDPI implementation.

Challenges Addressed by SDPI

- Diabetes is one of the most serious and devastating health problems in the United States, especially for AI/AN people, who suffer from among the highest rates of diabetes in the world.
- In some AI/AN communities, diabetes prevalence among adults is as high as 60%.
- The diabetes rate in AI/AN adults is 16.1%, which is almost twice the rate of the total U.S. adult population (8.3%).
- Once found mainly in older adults, diabetes increasingly affects younger AI/AN people, threatening the health, well-being, and quality of life of future generations.
- From 1994 to 2009, prevalence rates of diagnosed diabetes increased by 110% in AI/AN youth ages 15-19 years and 161% in AI/AN young adults ages 25-34 years.

Key Components of SDPI

As directed by Congress, the IHS established the following major components of the SDPI. Together, these components form the foundation of the IHS's response to the diabetes epidemic in AI/AN communities.

Community-Directed Diabetes Programs – 1998 to present

- Established in 1998 to begin or enhance diabetes treatment and prevention services at IHS, Tribal, and Urban Indian health settings.
- Funding is \$111.6 million/year.
- Currently includes 363 grant and sub-grant programs in IHS, Tribal and Urban Indian health programs in all 12 IHS Areas, representing 35 states.
- Allows grant programs to design and implement interventions that address local community priorities using diabetes best practices.
- Implemented diabetes interventions that significantly improved clinical outcomes for AI/AN people.

As Congress envisioned, SDPI funding has enabled the Indian health system to make tremendous changes in the diabetes landscape in AI/AN communities.

Demonstration Projects – 2004 - 2009

- Established to translate research findings on diabetes prevention in high risk individuals (SDPI Diabetes Prevention Program) and cardiovascular disease risk reduction in individuals who already have diabetes (SDPI Health Heart Project) in AI/AN community-based programs and health care settings.
- Funding was \$27.4 million/year.
- Included 66 grant programs in IHS, Tribal and Urban Indian health programs in all 12 IHS Area, representing 19 states.
- The results clearly show that these projects successfully prevented diabetes in people at high risk and reduced cardiovascular disease risk in people with diabetes.

Initiatives - 2010 to present

- Demonstration Projects were transitioned to Initiatives to document activities and outcomes and disseminate information and best practices throughout the Indian health system.
- Funding is \$27.4 million/year.
- Includes 38 Diabetes Prevention and 30 Healthy Heart Initiatives in all 12 IHS Areas, representing 16 states.

Administrative and Diabetes Data Infrastructure and Support

- The IHS Division of Diabetes oversees the SDPI, providing leadership, direction, and administrative and technical support.
- Administrative funding also:
 - » Supports national and Area level efforts to strengthen the capacity of grant program staff and to improve diabetes outcomes.
 - » Provides resources to build and strengthen the diabetes data infrastructure of the Indian health system, including development of IHS's Electronic Health Record.
 - » Enhances the capacity for diabetes surveillance and ongoing monitoring of diabetes care and diabetes-related health outcomes.
- The IHS Division of Diabetes coordinates data collection for the annual IHS Diabetes Care and Outcomes Audit (the Audit) and analyzes the data collected. The Audit is the cornerstone of the Indian health diabetes care surveillance system and tracks annual performance on 59 diabetes care measures based on the IHS Standards of Care for People with Diabetes. The resulting analysis provides essential feedback to help facilities improve their treatment services.

SDPI has successfully implemented innovative interventions in AI/AN communities across the nation to address the epidemic of diabetes. Guided by both the scientific literature and community-driven priorities, SDPI has helped the grant programs, Tribal leaders, and IHS, collectively build one of the most strategic and comprehensive diabetes treatment and prevention programs in the United States.