

Special Diabetes Program for Indians

Saving lives in South Dakota 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) communities. This program has grown and become the nation's most strategic and effective federal initiative to combat diabetes. SDPI is currently authorized through fiscal year 2017.

SDPI Outcomes

SDPI funding supports over 300 diabetes treatment and prevention programs in 35 states, and the results have been extraordinary. 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. For example, according to the United States Renal Data System, there has been a remarkable decline in diabetes incidence rates among AI/ANs since 1998 that has resulted in **a 29% decline, more than any other race**, in prevalence rates of end-stage renal disease (ESRD) – a costly complication often linked with diabetes. ESRD requires expensive treatments and is the single largest driver of Medicare costs. The Medicare cost per year for hemodialysis (a common ESRD treatment) exceeded \$84,000 per patient in 2013.



"My blood sugars are now in normal range, my blood pressure is good and I feel good. It's been the high point in my life – being diabetes free."

**-Pete Fills the Pipe,
Pine Ridge IHS Diabetes Prevention Program**

Diabetes in South Dakota

According to the Centers for Disease Control and Prevention (CDC), in 2014, approximately 70,394 people in South Dakota – **8.2% of the population** – had diagnosed diabetes, and many suffered from serious diabetes related conditions. In addition to the human toll diabetes places on the people of South Dakota, it also places a large financial burden on the state's healthcare system. In 2013, the staggering estimate of direct and indirect cost of diabetes in South Dakota was approximately \$56 million.

FY 2016 SDPI funding in South Dakota totaled \$6,014,743. This funded 9 Community Directed Grant programs in:

- Cheyenne River Sioux Tribe
- Fort Thompson Health Care Center
- Lower Brule Sioux Tribe
- Oglala Sioux Tribe
- Rapid City IHS
- Rosebud Sioux Tribe
- Sisseton Wahpeton Oyate
- South Dakota Urban Indian Health, Inc.
- Wagner IHS

Renewal is Vital

SDPI provides a strong return on federal investment and is saving lives in South Dakota. **Congress must renew this critical program** to ensure that the SDPI funded programs can continue their important work and that lessons learned from these programs can be shared and replicated to keep Indian Country on the path to a diabetes-free future.

National Indian
Health Board



For more information, visit www.nihb.org/SDPI