

SDPI

SPECIAL DIABETES PROGRAM FOR INDIANS

CONGRESS ESTABLISHED THE SPECIAL DIABETES PROGRAM FOR INDIANS (SDPI) IN 1997 AS PART OF THE BALANCED BUDGET ACT TO ADDRESS THE GROWING EPIDEMIC OF DIABETES IN AMERICAN INDIAN AND ALASKA NATIVE (AI/AN) COMMUNITIES.

The Special Diabetes Program for type 1 Diabetes (SDP) was established at the same time to address the opportunities in type 1 diabetes research.

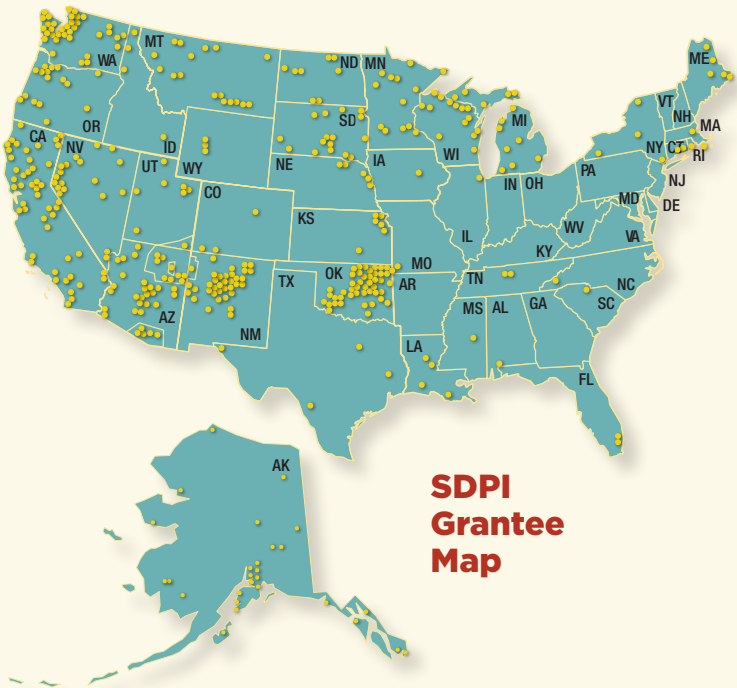
Together, SDP and SDPI have become the nation's most strategic, comprehensive and effective effort to combat diabetes and its complications.

At a rate of 2 times of non-Hispanic whites, AI/ANs have the highest prevalence of diabetes. But 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. This success is because communities design and implement diabetes interventions that address locally identified community needs.

SDPI CURRENTLY PROVIDES GRANTS FOR
310 PROGRAMS
IN **35** STATES
AND SERVES
780,000
PEOPLE
EACH YEAR

SDPI programs are successful because they fuse community-based cultural practices with evidence-based diabetes intervention strategies. By empowering patients to take control of their health by providing resources and guidance for diabetes management and prevention SDPI has been able to change the course of type 2 diabetes in Indian Country.

In the last two decades prevalence of End Stage Renal Disease (ESRD) (a complication of type 2 diabetes) has decreased by 54% among AI/ANs — a greater decline than any other ethnic group. ESRD is one of the largest drivers of Medicare costs.



**SDPI
Grantee
Map**

(LOCATIONS ARE APPROXIMATE)



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