Diabetes

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California

Diabetes Prevention and Control Program

Public Health Problem

California is a large and diverse state with more than 2 million people with diabetes. There are more than 350,000 diabetes-related hospitalizations each year at a cost of $4 billion annually. Between 1994 and 1997, there was an average of 21,025 deaths each year directly or indirectly attributable to diabetes. In 2000, diabetes contributed to 24,520 deaths in the state. The direct and indirect cost of diabetes in California per year is more than $17.9 billion. Diabetes disproportionately burdens Latinos, African Americans, Native Americans, and Asian/Pacific Islanders.

Taking Action

The capital of California is Sacramento, home of many of the state's government agencies as well as home to about 2 million residents. The California Department of Health Services employs approximately 5,000 individuals with the majority of them located at the newly constructed east end complex in Sacramento.

The custodial staff at the east end complex is large, ethnically diverse, and includes mostly African American, Latino, and Asian men and women. In response to numerous individual requests for diabetes information, a diabetes forum was hosted specifically for the custodial staff. The event was planned between the day and evening shifts to maximize attendance. Prior to the diabetes presentation, custodians picked up health education literature, enjoyed a fresh fruit snack, and spun the Five-a-Day PowerPlay wheel for prizes that promoted eating fruits and vegetables. Custodians purchased raffle tickets to benefit the ADA and also were recruited to be on walking teams for America's Walk for Diabetes. A health educator gave an interactive talk about diabetes prevention and control and underscored the important roles that physical activity and nutrition play in preventing diabetes and its complications. Participants were encouraged to make a personal game plan using material from the NDEP. At the end of the event, raffle prizes were awarded, and each participant was given a pedometer and shown how to use it. Now, custodians regularly wear their pedometers at work to measure their steps, and they also serve as motivational models for all employees.

Implications and Impact

This program demonstrates the simple approach of reaching out to colleagues. Now, representatives from other government agencies have requested that the team make the same presentation to their custodial and security staffs. A series of presentations to government personnel have been planned and will involve other programs at DHS for events on numerous health topics such as cardiovascular disease, asthma, cancer, and arthritis. In Sacramento alone, there is the ability to reach more than 100,000 state employees who can serve as “healthy” civil servants in their own neighborhoods.

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Kentucky

Diabetes Prevention and Control Program

Public Health Problem

Daviess and Henderson counties are two adjacent counties of the Green River District in western Kentucky with populations of 91,545 and 44,829, respectively. The estimated number of adult Kentuckians diagnosed with diabetes in 2002 was 7.8 percent with an additional 3.9 percent having undiagnosed diabetes. Based on this data, estimations of adults with diabetes in Daviess and Henderson counties were 7,969 and 3,955, respectively (11.7 percent).

Taking Action

The Daviess and Henderson County Diabetes Coalitions were formed in 1995 and 1996, respectively, utilizing the "Diabetes Today" model as a CDC project with the Kentucky DPCP. Both coalitions were formed to examine issues and problems related to diabetes within their communities and formulate ongoing plans to decrease the diabetes burden.

The Daviess County Diabetes Today Coalition's accomplishments include: holding a diabetes expo and panel of experts for the eighth consecutive year with 200 to 300 in attendance annually; initiating a diabetes speakers bureau that gave 16 presentations to more than 350 persons in 2003; and developing and distributing a regional diabetes resource directory that is serving as a model for other regional and state directories.

The Henderson County Diabetes Today Coalition's accomplishments include: holding a "Diabetes Bash" for six consecutive years, netting anywhere from $12,000 to $16,000; receiving a listing as one of 31 "Models that Work" by the Healthy Kentucky Foundation in 2003; and conducting the Diabetes Panel of Experts Forum with 88 in attendance for three consecutive years.

Implications and Impact

A small group of passionate, committed partners for diabetes, formed as a CDC "Diabetes Today" project, truly have impacted diabetes in Kentucky. The coalitions were instrumental in local and statewide diabetes efforts to educate policymakers regarding diabetes control and prevention issues. Outcomes included: diabetes state funding being maintained and the passing of a law that mandated that specific diabetes questions be added to Kentucky death certificates. The coalitions also completed nearly 50 diabetes screenings and preventive education events with local hospital, health department, pharmacies, and others, with approximately 1,500 people being tested (more than 80 referrals).

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Diabetes Prevention and Control Program

Public Health Problem

There is an epidemic of diabetes in Minnesota. One in 10 Minnesotans currently has diabetes or is at risk for developing the disease. Diabetes is a leading cause of death and disability, and its prevalence and related complications are increasing dramatically. Although Minnesota is a recognized leader in diabetes activities, state activities were largely fragmented and uncoordinated.

Taking Action

Unified statewide action, involving all aspects of diabetes and the entire diabetes community, was recognized as essential. To begin building the infrastructure to support unification, a state strategic plan for diabetes was developed. Using a grassroots planning process, key members of the diabetes community were convened to identify key diabetes issues and needs, facilitated by the Minnesota Diabetes Program (MDP) and its advisory group, the Minnesota Diabetes Steering Committee. The result was the creation of the Minnesota Diabetes Plan 2010, released in October 2003. The plan is a call to action, urging everyone to get involved in achieving its vision by taking action on its far-reaching goals and recommendations. It provides the framework and baseline for coordinated population-based activities to prevent diabetes and its complications more effectively and to achieve Healthy People 2010 objectives.

Implications and Impact

The Minnesota Diabetes Plan 2010 provides a more cohesive and cost-effective approach to addressing diabetes by unifying direction and stimulating collaboration. Between October 2003 and April 2004, the plan mobilized hundreds of stakeholders around common issues, leveraging their collective expertise and resources. The MDP is now working to facilitate the plan's implementation by tracking and evaluating diabetes activities and improvements relating to the plan and reporting back to Minnesota stakeholders on this progress. The MDP also is identifying gaps and promoting targeted activities to ensure optimal population-based coordination and impact. Some of the early accomplishments related to the plan include: 1) creation by the MDP of a unique Web-based database (www.health.state.mn.us/diabetes/ plancentral) to facilitate plan evaluation and the sharing of tools, resources, interventions, and lessons learned for all those working to achieve plan goals statewide; 2) publication of an online quarterly newsletter, the Diabetes Plan Dialog, to facilitate ongoing discussion of the plan. As of April 2004, the newsletter has more than 200 subscribers; 3) television, radio, print, and Web coverage about the plan reached more than 400,000 Minnesotans in October 2003, 146,000 in January 2004, and another 255,000 in March 2004; and 4) health professional publications have highlighted the plan, including Minnesota Medicine (8,500 readers), Minnesota Physician (14,000 readers), the Center for Cross Cultural Health's Crosswinds (500 readers), and the local diabetes educators' newsletter (200 readers).

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Utah

Diabetes Prevention and Control Program

Public Health Problem

The Utah DPCP has continued its emphasis on increasing awareness of diabetes and diabetes control among Utahans, particularly among higher risk populations. Many Utahans diagnosed with diabetes are not aware of the recommended tests to prevent complications, what their diabetes test numbers mean, and how meeting recommended management targets can affect their overall health and delay or prevent complications.

Some populations are hard to reach, especially those who are isolated geographically or culturally, and traditional methods of disseminating information are not effective. Research has demonstrated that innovative approaches for delivering messages are needed to reach certain subgroups.

Taking Action

The Utah program created a bus wrap with a message in both Spanish and English. The messages from the NDEP, "You Are the Heart of Your Family" and "Control Your Diabetes. For Life," were used as the basis for the bus wrap message on two Utah transit authority buses. The buses traveled through four urban Utah counties between March 2004 and August 2004. A survey sampling 500 Utah adults was conducted when the bus wrap activity terminated. One of five respondents (20 percent) reported they had seen the bus wrap. Of those, 20 percent had seen it once, 46 percent had seen it two to three times, and 20 percent had seen it four or five times. Over half of the respondents saw the bus in Salt Lake City followed by Orem (16 percent) and Provo (11 percent). Almost half (47 percent) of the respondents reported that their first impression was that they liked the bus wrap. In addition to measuring awareness of the bus and message, respondents were asked if they had taken action: 1 percent of those who saw it called the Health Resource phone number posted on the bus wrap, 1 percent looked up the Utah DPCP Web site, 2 percent called their doctor, 3 percent got a screening, 9 percent started to exercise, 6 percent started to eat better, 3 percent tried to find additional information on diabetes, and 6 percent talked to other people about diabetes.

Implications and Impact

Diabetes messages increase knowledge of risk factors, symptoms, control methods, and prevention methods of diabetes. A large proportion of the Utah population in urban areas was reached by using innovative bus wraps to deliver a message. While increased knowledge does not lead necessarily to behavioral changes, the bus wrap message did appear to have an impact, albeit small, on motivating people to be screened for diabetes, to talk to their doctors, to learn more about diabetes, and to adopt healthier lifestyles.and 2002, network patients had declines in their absolute glycosylated hemoglobin values of 1.15% (13% relative reduction). Network patients also have significantly improved their physical activity and nutrition planning.

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