Who is working to reduce diabetes in older adults in rural communities?

Through the Vulnerable Populations program, the Kentuckiana Regional Planning and Development Agency (KIPDA) aims to reduce diabetes-related complications by improving care among older adults and people of lower socioeconomic status in rural Kentucky with diabetes. KIPDA’s goals are to effect positive change in the health of older people with type 2 diabetes living in targeted communities and improve their access to health care services using community-based interventions to address risk factors associated with type 2 diabetes and related complications.

Why is KIPDA working to reduce diabetes in older adults in rural communities?

Rural residents in the United States face some specific barriers to quality health care. Barriers include, but are not limited to, longer distances many have to travel from home to the nearest doctor’s office, clinic, or hospital and the limited number of health care providers to residents. These factors prevent many rural residents from receiving recommended preventive or disease management services for diabetes. In 79 of Kentucky’s 120 counties, the percentage of older adults is higher than the national average. In the three rural counties profiled here—Bullitt, Shelby, and Henry—the older adults have higher rates of diabetes than other counties.

- Henry County has a slightly higher percentage of individuals aged 65 years or older (14.1%) than the US average of 13.1%, while Shelby at 12.2% and Bullitt at 11.2% have slightly below average proportions of older persons.
• In the United States, approximately 9% of the population has diabetes but in Kentucky the rate is 9.9%. These three counties are higher than both the national and state average, with Henry County being the highest at 11.4% and Shelby and Bullitt County at 10.9%.

• The combination of higher rates of diabetes and other chronic diseases in older people, significant numbers of older people, and the challenges of limited health care access in these and other rural counties, heightens the need to both reduce chronic disease rates and improve access to care. These are important issues for the public health and clinical care systems in Kentucky.

How is KIPDA working to reduce diabetes in older adults in rural communities?

Community Mobilization to Action Process

KIPDA spearheads a tri-county regional group (KIPDA Rural Diabetes Coalition [KRDC]) working to improve the health of people with type 2 diabetes in Bullitt, Shelby, and Henry counties. KRDC consists of groups from each of the three counties functioning as a unified coalition, in which each county group carries out the coalition’s strategic plan. The county groups include various representatives from health care providers, state and local agencies, hospitals, pharmaceutical companies, food banks, churches, the Kentucky Diabetes Network and local residents with diabetes. Each of three county-specific groups is led by a community organizer hired by KIPDA.

Sharing Resources and Building Skills to Address Health Challenges

• KRDC provides consultation to food banks and pantries in the three counties to help them create a section with diabetes–friendly foods for individuals who may have diabetes. Food bank and pantry volunteers were provided with training on which food alternatives (e.g., green beans over corn) would be healthier choices for people with diabetes.

• KIPDA provides training for coalition members on recruiting volunteers, basic diabetes education, leadership principles and actions, developing communication strategies, and collaborating with partners in the community, evaluation, and advocacy.

• KIPDA uses community coordinators to facilitate diabetes self-management education classes. All community organizers are trained annually using the Stanford Diabetes Self-management Program (DSMP) curriculum.

Community Interventions

Diabetes Self-Management Education and Related Activities

More than 400 Kentucky residents have participated in programs addressing diabetes and its related risk factors hosted by KRDC. KRDC collaborated with various partners on interventions including:

• Stanford DSMP and other diabetes education programs hosted by KRDC.

• Live Empowered a program of the American Diabetes Association, designed to increase diabetes awareness in African American communities.

• Cooper Clayton smoking cessation classes.

• Nutrition education courses offered by the Kentucky Cooperative Extension Service.

• No-cost diabetes support groups in the three counties with coalition members who are diabetes educators or health educators facilitating the groups.
Health Care Provider Education and Outreach

KRDC members worked together to create the Physician Resource and Education Toolkit for physicians to give to patients with diabetes. The toolkit includes patient packets and resource prescription pads. The Patient Packets provide basic information on diabetes, self-management and local resources and are compiled by KIPDA and coalition partners. They are used in physicians’ offices, pharmacies, podiatrist, dentist offices, EMS and public health departments.

KIPDA Resource Prescription Pads

The Resource Prescription Pads list KIPDA and KRDC resources so that health care providers can quickly refer patients to services or a contact person for more information. KRDC has distributed more than 1,100 patient packets to various local health care professionals and primary care physicians.

KIPDA’s lessons learned for implementing diabetes programs for older adults in rural communities.

• Training delivered through KRDC helped engage people with diabetes in a setting in which they could both learn and take action.

• Through collaborative partnerships, duplication of efforts has been reduced and health care provider networks, hospitals, and community organizations have been much more effective.

• Although geographically close, culture, history, and attitude differences between counties matter greatly, it is important to get to know each county and address its own strengths and weaknesses.

• Finding and engaging gate-keepers within local communities is very important.

• Understanding local politics is essential for engaging partners and participants.

TO LEARN MORE ABOUT THE KENTUCKIANA REGIONAL PLANNING AND DEVELOPMENT AGENCY (KIPDA) AND THE VULNERABLE POPULATIONS DIABETES PROGRAM, PLEASE CONTACT:

Kentuckiana Regional Planning and Development Agency (KIPDA)
Barbara Gordon, Project Director
11520 Commonwealth Drive
Louisville, Kentucky 40299
Phone: 502-266-5571
E-mail: barbara.gordon@ky.gov
Website: www.kipda.org, www.krdcoalition.com