Diabetes Education and Prevention Program

Nutrition and Family Health Division

Keri Howard (she/her), RDN, CDCES

Program Coordinator

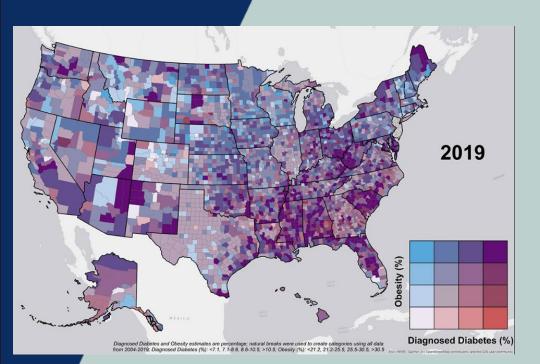




Maritza Orozco-Reyes, RDN
Spanish/English Bilingual
Diabetes Educator
NDPP Lifestyle Coach

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Spanish/English Bilingual
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National Statistics

Diabetes

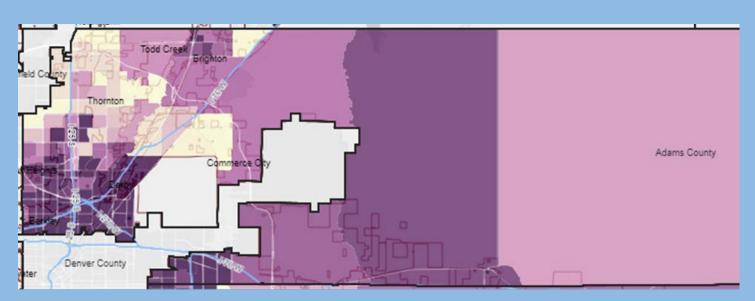
- Total: 37.3 million people have diabetes (11.3% of the US population)
- Native, non-Hispanic Black,
 Hispanic, and non-Hispanic Asian
 people are more likely to be
 diagnosed with diabetes than nonHispanic White people (14.5%,
 12.1%, 11.8%, 9.5%, and 7.4%,
 respectively).

Prediabetes

- Total: 96 million people aged 18 years or older have prediabetes (38.0% of the adult US population)
- ➤ 65 years or older: 26.4 million people aged 65 years or older (48.8%) have prediabetes

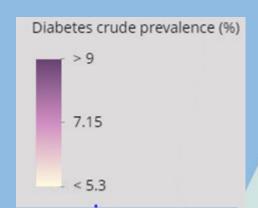
*Source: Centers for Disease Control and Prevention. Diabetes Repor Card 2021. US Dept of Health and Human Services; 2022

Diabetes Prevalence by census tract, Adams County, 2020



*Source: Places Data (2020), Centers for Disease Control and Prevention. Map created by Tri-County Health Department

Areas of higher prevalence include southwest Adams County, northwest Aurora, Brighton, and the communities along the I-70 corridor. In addition to high prevalence of diabetes, these areas also tend to have higher prevalence of heart disease and obesity than other areas in the county.



7.56% in Colorado, BRFSS 2020



Residents reported living with Diabetes	Adams County	Colorado
Adults 65+	23%	17%
Adults 18-64	7%	5%
who also report heart disease	37%	27%
who reported fair or poor general health	26%	22%
Persons that identified as Gay/Lesbian/Bisexual/Other	11%	
Persons that identified as Straight	9%	
With household income below \$50,00	12.5%	
With household income above \$50,000	7%	

BRFSS, 2019-2020 Reported Rates of Diabetes





Cancer, Cardiovascular and Pulmonary Disease (CCPD) Grant Program

Amendment 35: allocates revenue generated from an increase in the excise tax on tobacco products to fund a competitive grants program for the prevention, early detection, and treatment of cancer, cardiovascular disease, and chronic pulmonary disease in Colorado.

A primary focus is to implement strategies tailored to address the varying and complex causes of health disparities so that every Coloradan has equitable access to opportunities to thrive regardless of who they are or where they live.

CCPD grants are competitive grant awards and are typically funded on a three-year cycle. The current funding cycle is for state fiscal years 2024-2028 (July 1, 2023 - June 30, 2028).

Diabetes is a health equity issue.

By strategically focusing on communities at higher risk for diabetes, we believe we can reduce disparities in our communities.

Not only do these programs intend to reduce health disparities among the target populations but have the potential to reduce risk for diabetes among family members of participants.



Adams County Diabetes Education and Prevention Program (ACDEPP)

Diabetes Self-Management Education and Support (DSMES)

National Diabetes Prevention Program (NDPP)

All participants are screened for SDoH barriers and referrals are provided for Food Insecurity, Housing Insecurity, and Behavioral Health





Diabetes Self-Management Education and Support (DSMES)



- > DSMES provides an evidence-based foundation to empower people living with diabetes to navigate self-management decisions and activities.
- > DSMES is a cost-effective tool proven to help improve health behaviors and health outcomes for people with diabetes.
- ➤ Our program has held DSMES recognition from the American Diabetes Association since October 2016





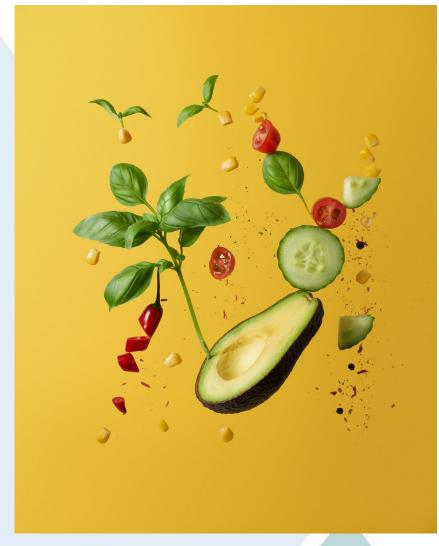
Benefits of DSMES

► Considerable evidence exists linking DSMES participation to positive changes in health behaviors and improved diabetes-related outcomes.

- ► Benefits of DSMES participation can include:
 - ► Improved hemoglobin AIc levels
 - Improved control of blood pressure and cholesterol levels
 - ► Higher rates of medication adherence, Enhanced self-efficacy
 - ► Fewer or less severe diabetes-related complications
 - ► Healthier lifestyle behaviors, such as better nutrition, increased physical activity, and use of primary care and preventive services
 - Decreased health care costs, including fewer hospital admissions and readmissions







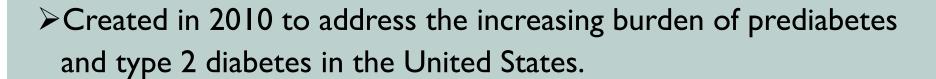


I am so happy. One of my Clinica participants has made significant improvement in managing her diabetes with the sample CGM's we received. Knowing she can see her BG #'s makes her continue to make the right food choices. Earlier in the month she went from being 28% time in range (TIR- this means her BG was between 70-180mg/dl) to 72% TIR!!!! Her goal is to come off insulin. When she started DSMES programming her AIc was 10.9%. As of 2/14/24 her AIC is 6.7% and her provider is discussing decreasing her insulin and in another 3 months taking her off insulin! Maritza – RDN, Diabetes Educator



National Diabetes Prevention Program (NDPP)





- Research-based lifestyle change program focusing on healthy eating and physical activity
- ➤ People with prediabetes who take part in a structured lifestyle change program can cut their risk of developing type 2 diabetes by 58% (71% for people over 60 years old).

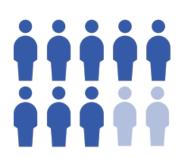




The Growing Threat of Prediabetes

96 Million

96 million American adults—**more than 1 in 3** —have prediabetes



More than 8 in 10

adults with prediabetes don't know they have it

Lifestyle Change Program

A key part of the National DPP is a **lifestyle change program** that provides:



A trained lifestyle coach



CDC-approved curriculum



Group support over the course of a year



Our NDPP Journey to Wellness

26 one-hour sessions spread throughout a calendar year

Follow-up and support by coach between session

Build a supportive environment and community amongst class participants

CDC Diabetes Prevention Recognition Program -NDPP recognition from the CDC since October 2017





"I have a great update. I had my AIC checked again last Friday. It is now down to 5.6%. Yay! This is an encouragement to keep moving forward with my smart goals. This is down from the 6.3% back in May. Also, I have had a weight drop of II lbs. since starting the program. Thank you for all your support and encouragement! What you do matters greatly!"

Michelle – NDPP Participant





Reducing Barriers to Program Participation

Accommodations for folks living with disabilities

Programming Offered:

Virtual and In-Person

English and Spanish

Varied class times, including lunch hour and evenings

Locations accessible by public transportation

Neighborhoods where priority populations live.

Provided culturally appropriate services that retain the fidelity to the NDPP and DSMES models

Individualized education opportunities

Partner with organizations that serve high priority populations

Screen for social determinants of health and provide resources and support for identified needs

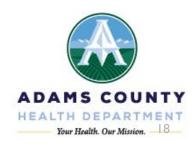


FY23 (7.2023-6.2024) Key Community Partners

Hosted or Partnered for Programming Sites and Program Promotion

Adams County Worksite Wellness Program
Adelante
Clinica Colorado
Clinica Family Health
Center for African American Health
Peak Vista Community Health Center, Strasburg

Park and Recreation Districts:
Bennett
Commerce City
Hyland Hills
Northglenn
Thornton



Promotion and Recruitment

Goals

- Build program sustainability.
- ➤ Growth of current and new vibrant partnerships with Community Based Organizations.
- >Develop referring relationships with PCP's that serve priority populations.
- Enhance collaboration with AdCo Communications for improved promotional activities.
- Continue to partner with CO State efforts to build Awareness, Availability, and Sustainability of Diabetes and Diabetes Prevention Programming.





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