Diabetes In Arizona

Created by the Diabetes Program at Arizona Department of Health Services 2024



A Casual Conversation:

- The Diabetes Program at Arizona Department of Health Services (ADHS)
- Arizona Diabetes Leadership Council and Arizona Diabetes Coalition
- Collaboration Highlights
 - HB2258
 - Prediabetes and Diabetes Media Campaign
- How to Participate



DIABETES IN ARIZONA



1 in 3 estimated Arizonans have pre-diabetes



1 in 10 estimated Arizonans have diabetes



1 in 7 estimated Arizonans live in a food desert

31 CENTERS FOR DISEASE CONTROL AND PREVENTION-RECOGNIZED NATIONAL DIABETES PREVENTION PROGRAMS

45 ASSOCIATION OF DIABETES CARE AND EDUCATION SPECIALISTS/AMERICAN DIABETES ASSOCIATION-ACCREDITED DIABETES PROGRAMS

15 COUNTIES WITH FOOD DESERTS

DIABETES CREATES HIGHER RISKS FOR:







RISK OF DEATH FOR ADULTS WITH DIABETES IS 50% HIGHER THAN FOR ADULTS WITHOUT DIABETES

DIABETES COSTS IN ARIZONA

\$5.1 Direct Medical Costs (doctor visits, medications, supplies, hospital care)

+ \$1.7 Indirect Costs (absenteeism, lower work productivity, early disability)



\$6.8 BILLION DOLLARS IN DIABETES RELATED COSTS



Arizona Department of Health Services

- 2021-2025 Arizona Health Improvement Plan (AzHIP)
- Published in May 2021
- The priority areas of the AzHIP are:
 - Health Equity
 - Health in All Policies/Social Determinants of Health
 - Mental Well-being
 - Rural Health/Urban Underserved
 - azhip@azdhs.gov



Arizona Department of Health Services

- Bureau of Chronic Disease & Health Promotion
 - Office of Chronic Disease and Population Health

Bureau Chief: Teresa Aseret-Manygoats

Office Chief: Tenneh Turner-Warren

Population Health Program Administrator: Carin Watts Diabetes Program Manager: Daniel Rodriguez-Guzman Heart Disease and Stroke Program Manager: *VACANT*

Heart Innovation Program Manager: VACANT

Health Disparities Program Manager: Corina Ojeda

Chronic Disease Health Communicator: Eileen Sanchez

Cancer Program Administrator: Polar Akoi

Well Woman HealthCheck Program Operations Manager: Lesleigh Zerby

Comprehensive Cancer Control Program Manager: Cassie Webb

CDC-RFA-DP-23-0020 (CDC 2320 Grant)

A Strategic Approach to Advancing Health Equity for Priority Populations with or at Risk for Diabetes

- Component A
 - 6 Strategies and Activities were selected

- Strategy 1 Strengthen self-care practices by improving access, appropriateness, and feasibility of diabetes selfmanagement education and support (DSMES) services for priority populations
- Strategy 5 Increase enrollment and retention of priority populations in the National Diabetes Prevention Program (National DPP) lifestyle intervention and the MDPP by improving access, appropriateness, and feasibility of the programs
- Strategy 7 Improve sustainability of CDC-recognized National DPP delivery organizations serving priority populations by establishing or expanding National DPP Umbrella Hub Arrangements

- Strategy 9 Increase and sustain DSMES and National DPP delivery sites within pharmacy networks and chain pharmacies to improve reach to priority populations
- Strategy 10 Support the development of multi-directional e-referral systems that support electronic exchange of information between health care and CBOs, including:
 - A. CDC-recognized organizations offering the National DPP lifestyle intervention and/or
 - B. ADA-recognized/ADCES-accredited DSMES services and/or diabetes support programs or services in the community and
 - C. Community programs/services that address SDOH or meet social needs
- Strategy 12 Improve the sustainability of Community Health Workers (CHWs) by building or strengthening a supportive infrastructure to expand their involvement in evidence-based diabetes prevention and management programs and services

- Decrease the proportion of people with diabetes with A1C >9%.
- Increase the number of organizations implementing evidence-based community behavioral change programs
- Increased participation in evidence-based community behavioral change programs
- Increase the # of program completers (total # and # from priority populations) served by CDC-recognized National DPP delivery organizations who reduce their risk for type 2 diabetes.
- Increased multi-directional communication between clinical and community resources
- Increased # of patients screened and referred to community resources (i.e., health/mental health resources)

- New Projects for 2024/25:
 - NDPP/MDPP Professional Development Guided Sessions
 - Tribal Diabetes Health Equity Summit
 - DAP Expanded Support
 - Expanded media outreach
 - CHW support

The Arizona Diabetes Coalition and Leadership Council

(ADC) and (ADLC)

Arizona Diabetes Coalition

 The purpose of the Arizona Diabetes Coalition (ADC) is to reduce the burden of diabetes on individuals, families, communities, the health care system, and Arizona. This is done by increasing awareness of diabetes, advocating for and promoting policies and programs that improve access to care, treatment, and outcomes for people with diabetes and those at risk for developing diabetes.



Arizona Diabetes Coalition Timeline

- Arizona Diabetes Control Program and Arizona Advisory Council were established in 1994.
 - In 2002 the Arizona Diabetes Control Program became the Arizona Diabetes Prevention and Control Program (DPCP). The word Prevention was added as a result of the Diabetes Prevention Program Study.
- In 2005, Arizona Advisory Council became the Arizona Diabetes Coalition (ADC).





Arizona Diabetes Coalition Timeline

- In 2006, DPCP became the Arizona Diabetes Program (ADP).
- In 2006, Arizona Diabetes Leadership Council (ADLC) is established
- Arizona Diabetes Leadership Council (ADLC)
 members serve as advisors to the ADP and are
 instrumental in developing the Arizona
 Diabetes Strategic Plan.





Arizona Diabetes Coalition Structure

- Led by the Leadership Council
- Executive Committee lead Council
 - Chair-Elect, Current, and Past-Chair
- Nomination Committee
- Workgroups led by Co-Chairs
- Workgroups are open!





ADC Workgroups

Diabetes Prevention, Pre-Diabetes and Diabetes Self-Management Education (DPP-DSME)

- Co-Chairs: Vanessa da Silva and Nicki Scovis
 - vdasilva@arizona.edu
 - nicole.scovis@gmail.com

Tribal Workgroup

- Co-Chairs: ptaggarse@hsag.com Padma Taggarse
- Co-Chairs: Vacant

Advocacy, Polices and Practices

- Co-Chairs: Julie Hoffman and Suzanne Miller
 - jhoff9797@gmail.com
 - 60smiller@gmail.com

Health Equity

- Co-Chairs: VacantCo-Chairs: Vacant
- DAP Data Team (ad hoc)



HB2258

Diabetes Action Plan

HB2258; Diabetes Action Plan

- Governor Ducey signed the Arizona Diabetes
 Action Plan on March 29, 2018:
 - requiring the Arizona Department of Health Services to jointly submit a report to the Legislature describing the burden of Diabetes on Arizona residents, efforts currently underway to address the burden, and suggestions for action to reduce the burden of diabetes in Arizona.

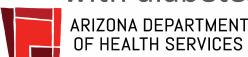
HB2258; Diabetes Action Plan

- Coordinated efforts with Arizona Department of Health Services, the Arizona Health Care Cost Containment System, the Arizona State Retirement System, the Department Of Administration Benefits Division, Vitalyst Health Foundation, the American Diabetes Association and the Arizona Diabetes Coalition and Leadership Council.
- A "team" must be formed including entities above. (ADHS, AHCCCS, PSPRS, ASRS, ADOA, ADA, insurers, stakeholders, etc.)



HB2258; Diabetes Action Plan

- Team is mandated to compile report every (2) years
- The prevalence of diabetes in Arizona by;
 - type
 - age, race and gender
 - complications associated with diabetes
 - prediabetes
- The costs of diabetes in the State of Arizona;
- The Arizona Diabetes Programs' plan for reducing the incidence of diabetes in the State of Arizona.
- Proposed actionable steps for reducing diabetes related health disparities and improving care for those with diabetes.



CDC2320-funded Prediabetes and Diabetes Media

- Historically: outdoor billboards, print publication
- Posters and Flyers with Prediabetes messaging available
 - Diabetes messaging under development
- Digital and Print ads



Prediabetes Media

- NDPP
- ADHS Prediabetes media
- Mission Possible defunct
- Agents of Change

Prediabetes = Pre-kidney disease

Click here to find out if you have prediabetes

TAKE THE TEST



Prediabetes



Pre-stroke
Pre-heart attack
Pre-kidney disease
Pre-amputation
Pre-nerve damage

Find out if you have prediabetes

TAKE THE TEST

Prediabetes = Pre-stroke

Click here to find out if you have prediabetes

TAKE THE TEST

Prediabetes



Pre-embolia

Uno de cada tres adultos estadounidenses tiene prediabetes, una condición acompañada por una serie de riesgos para la salud, incluyendo embolias. Pero la buena noticia es que frecuentemente se puede revertir con cambios al estilo de vida, como haciendo más ejercicio y comiendo más saludablemente. Para averiguar si usted tiene prediabetes, tome la prueba en azdhs.gov/mission-possible.









Mission Possible

ACCEPT YOUR MISSION:

Accept YOUR mission: to find out if you have prediabetes and then become an Agent of Change to reverse it. Take this short risk test below to find out if you may have prediabetes, and make sure to ask your doctor for a prediabetes screening, too.



I AM AN AGENT OF CHANGE.

I know that 1 in 9 Arizonans has diabetes, so my mission is to live a healthy lifestyle (and get screened for prediabetes, just in case).



What is prediabetes?

People are diagnosed with prediabetes when their blood glucose levels are higher than normal, but not high enough to be diagnosed with type 2 diabetes. The good news is that prediabetes can often be reversed through lifestyle changes, such as increasing physical activity and losing weight. In fact, losing just 5-7% of your body weight can slow or even reverse prediabetes. For a person who weighs 200 pounds, that's only 10-14 pounds.

Your mission: healthy living

You've seen the number: 1 in 9 Arizonans has prediabetes. But some changes to your lifestyle can slow or even reverse a prediabetes diagnosis. Following these four steps can help you lower your risk for type 2 diabetes and get on your way to a long and healthy life.



BE ACTIVE: Mow the lawn, take a dance class, bike to the store — this all counts toward the recommended 2.5 hours of weekly aerobic activity for adults, as long as it's done at a moderate or vigorous intensity for at least 10 minutes at a time.



VISIT YOUR DOCTOR: Regular exams can identify problems before they start. By getting the right health services, screenings, and treatments, you also improve your chances for better outcomes if you do have any health issues.



KNOW YOUR NUMBERS: Improve your health and wellness in just five minutes by keeping track of your blood sugar, blood pressure and cholesterol. These numbers provide a glimpse of your health status and risk for certain diseases, including diabetes.





EAT WELL: A healthy diet emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products. You can enjoy your favorite comfort foods, too — just eat them less often, eat smaller amounts or try a lower-calorie version.

Mission Possible

- Taking/sharing/using Risk Test
 - Paper or electronic (Screening)
 - https://doihaveprediabetes.org/



Agents of Change: Diabetes Prevention Toolkit

- Agents of Change
 - https://www.azdhs.gov/prevention/tobacco-chronic-disease/diabetes/agents-of-change/index.php



PHYSICIAN TEAMS

Register Now

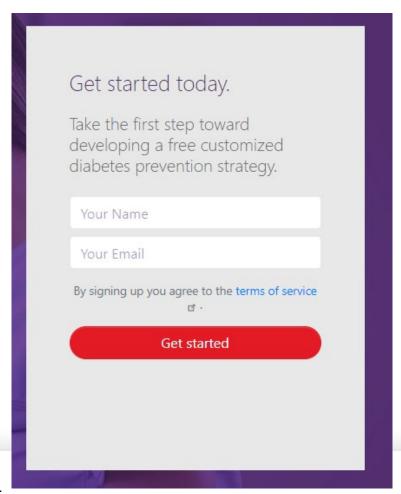
Getting started is easy!

Diabetes Prevention Toolkit





Agents of Change: Diabetes Prevention Toolkit





Links

- https://doihaveprediabetes.org/
- https://www.azdhs.gov/prevention/chronicdisease/diabetes/agents-of-change/index.php
- https://amapreventdiabetes.org/
- ADHS Diabetes Program Webpage

Where can I find this?

Diabetes Program

ADHS Home / Public Health Prevention / Tobacco & Chronic Disease / Diabetes Program - Home

Home

Are You at Risk?

Arizona Diabetes Coalition

Information for Healthcare Providers (Agents of Change)

Mission Possible

Self-Management Education

Reports & Data

Fact Sheets

Additional Resources

Contact Us

Home



2021 Diabetes Action Plan and Report



Simple tests can help determine a person's risk for diabetes.



Any individual or organization with an interest in diabetes is invited to join.



Resources to help healthcare providers prevent and treat diabetes.



Self-management education is a critical component of care.



How can I engage?

- Referrals!
- Share the Links!
- Take and share Risk Test
- Join a Workgroup
 - Contact Co-chairs
- Contact the Diabetes Inbox [DIABETES@azdhs.gov]

Thank you!

Arizona Department of Health Services and Arizona Diabetes Coalition

<u>DIABETES@azdhs.gov</u>

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