



A Message from the Director

Kelly Acton, MD, MPH, FACP
Director, IHS Division of Diabetes Treatment and Prevention

We Have Lots of Reasons to Celebrate Our Success

Welcome to the fifth edition of SDPI E-Update. I recently returned from the Demonstration Projects meeting in Denver where the grantees had the opportunity to show off the data they have collected over the past 2 years of implementation. I left the meeting feeling overjoyed. We have lots of reasons to celebrate our success during SDPI's 10th anniversary year.

It was a wonderful opportunity for the grantees – both Diabetes Prevention and Healthy Heart projects – to show each other, and Tribal Leaders who were able to attend, the great results they have collected so far. The good news is that overall, the program is in line with the results achieved by the DPP!

If you would like to share information with your community and policy makers about SDPI's decade of success in diabetes treatment and prevention, visit http://www.ihs.gov/MedicalPrograms/Diabetes/FactSheets/fs_index.asp to access a series of SDPI fact sheets. These brief documents are intended to provide an overview of each issue in an easy-to-read and understand format. Feel free to download and distribute them at meetings or in your clinics, place them in program packets, create a link to them from your website, or send them to policy makers and tribal leaders.

We also are working on producing state-specific fact sheets to highlight the programs and data for each state. If you have positive and specific highlights of how your program uses SDPI funds, please submit them to us. You may get to see your program

highlighted on a widely-distributed fact sheet!

In this edition, we feature news about the launch of the new Nike Air Native N7 shoe at the National Indian Health Board's Consumer Conference. There is also an interesting story about the Navajo Nation's diabetes monitoring.

Our SDPI Success Story, written by Cecilia Kayano, is about the Te-Moak Wellness Program's SDPI Kid Fit Program. I'm sure it will make you want to get up and dance! If you have a success story you'd like to place in the next E-Update, please send a message to diabetesprogram@ihs.gov.

IHS is in the final stages of developing the WebAudit, a set of new Internet-based tools for working with data from the Diabetes Care and Outcomes Audit that will be easier to use and that address some of the limitations of the software used in the past. Check out this article about the WebAudit that will be ready in 2008.

Many people have dedicated time and hard work to help to make the SDPI such a successful program. I hope you will enjoy reading about Julia Davis, a member of the Tribal Leaders Diabetes Committee and Tammy Brown, a key member of the Division of Diabetes staff.

Finally, I want to call your attention to more great opportunities for you to be recognized and celebrated for your work. In this issue we feature several awards competitions sponsored by the American Public Health Association, the American Medical Association, and the American Association

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of Diabetes Educators. Many community-based SDPI grantees qualify for these awards and I encourage you to GO FOR IT! Check out the Upcoming Events section for more information.

I hope you will continue to spread the word about the SDPI's success by forwarding the E-Update to your colleagues. And, please continue to send us your feedback.

Kelly Acton, MD, MPH, FACP

SDPI Success Stories

The Nike Air Native N7 and Notah Begay III Inspire 1,000 People

By Cecilia Kayano



Lola Hernandez tries on the Air Native N7 fitness shoe at the Nike Launch.

Over 1,000 people gathered with anticipation on September 26, 2007 at the National Indian Health Board Consumer Conference in Portland, Oregon, when Nike unveiled the Air Native N7 fitness shoe. Of course, we also were excited to hear pro golfer Notah Begay III speak, to have a chance to try on the new shoe, and to go for a group walk along the Portland streets.

The Nike Air Native N7 was designed to fit Native American feet. Over 200 feet from 70 tribes were measured as part of the design process. This research showed that Native American feet often require shoes that are wider and taller than other shoes. The new shoes will fit people with wider feet, but not those with average-width feet.

The shoes, which come in black, white, and pink, sport a sunset and sunrise pattern along with

feather and star designs. They will be sold at the wholesale price of \$42.90 to tribal entities.

After the shoe was introduced by Sam McCracken, Manager of Nike's Native American Business Program, Notah Begay III took the microphone and praised Nike for stepping up to the plate. "How many major corporations are doing what Nike is doing?" he asked rhetorically. With each word, Mr. Begay captured our attention and inspired us. "We are forming a confederacy of Indian nations," he said. He called for more unity, for us to keep our eye on the task, and to save the seven generations from obesity, disease, and premature death.

Mr. Begay quoted Mahatma Ghandi: "Be the change you want to see." Then, he became quotable himself. "Change starts with the individual, then it goes to the family, and then to the community." He asked the audience to do nothing less than make an oath—an oath to become fit role models. He asked us to pledge to take care of ourselves, to get fit, and to stay fit.

After Mr. Begay's talk, the crowd was invited to try on the shoes. Lola Hernandez (Shoshone- Bannock) laced up a pair of white shoes and said, "They feel like someone has already worn them and stretched them out."

Putting Mr. Begay's words into action, everyone had a chance to make their own fitness pledge. People wrote down a fitness promise, posed for instant photos, and both pledges and photos were tacked onto a board.



Sam McCracken, Manager of Nike's Native American Business Program, presents the Nike Air Native N7.

Raymond Parker's (Chippewa Cree) pledge was to start exercising. He explained, "I've been promising my sons that I will become more active. I'm hoping this public pledge will make me more honest."

The event ended with nearly a thousand people walking for about two miles along the streets of Portland. Fueled by the realization that a major corporation had developed a fitness product specifically for Native Americans, by inspirational words from speakers such as Notah Begay III, and by personal commitments to become fit, we were doing what Mr. Begay had encouraged us to do: We were "walking the talk."

Returning Children to Wellness: The SDPI Kid Fit Program - Te-Moak Wellness Program

By Cecilia Kayano



Western Shoshone participants dance as a part of the SDPI Kid Fit Program.

If you had visited the Wellness Building at the Te-Moak Bands of Western Shoshones in mid-October, you would have seen a crowd of little children, teens, parents, and grandparents dancing, sewing, sweating, and laughing. The children were part of an SDPI Kid Fit program that started last year with just two children. But this past October, the building was filled with nearly 30 dancers. Moms, dads, and grandparents sat along the sidelines of the dance floor. In a nearby room, another dozen family members were sewing powwow outfits. It was a huge, happy, pre-powwow scene.

The Elko Band Powwow was just three days away. For all of the dancers, it would be their first powwow. They would be dressed in brand new, sparkling regalia and they would be in shape to dance, dance, dance.

"At the first gatherings, the children could dance for a half hour. Then, we started increasing it to an hour, then an hour and a half," explains Special Diabetes Program Coordinator Phaline Conklin. "Now, the children dance for two hours, three times a week."

Success Stories continues on page 5

Spotlight on... **Julia Davis****Julia Davis Remembers Early Days of the TLDC**

By Cecilia Kayano



Julia Davis (Nez Perce)

Julia Davis (Nez Perce) was a member of the National Indian Health Board in 1997 when Congress appropriated money through the Balanced Budget Act of 1997 for diabetes treatment and prevention in American Indian and Alaska Native populations. The amount of money was unprecedented: \$150 million for five years (\$30 million each year).

At the 1997 NIHB Consumer Conference held in Spokane, Washington, a special meeting was hosted for tribal leaders to discuss and recommend how to distribute the new diabetes funding. Participants recommended that tribal governments, IHS and urban Indian health programs provide their views through Area consultation. After 11 weeks of consultation, 11 IHS Areas, 542 tribal governments and 34 urban Indian health programs submitted their views to the IHS Director.

Julia remembers that meeting in Spokane, and the subsequent discussions, as though they took place yesterday. Not only was the amount of money huge, but the need was enormous. "It was so emotional. It was like getting a great big Christmas present," she says.

According to the legislation, the special diabetes money was to go through the Indian Health Service (IHS) and be distributed through a grants process. In November 1997, the IHS Director convened a small diabetes workgroup to review and recommend options identified from the Area consultations. This workgroup became the Tribal Leaders Diabetes Committee (TLDC), which continues to this day to make recommendations and provide advice on policy and legislative issues related to diabetes.

Julia was a member of the TLDC during its initial meetings. "I remember the IHS staff coming to the TLDC meetings and giving reports on amputations, dialysis, blindness, and death rates. These meetings were intense. There were a lot of tears," says Julia.

Members of the TLDC were not just reacting to the numbers. Like Julia, all members had experienced diabetes first hand. "I have diabetes on both sides of my family. We've lost several family members from complications," she says.

Determined to help her people, and all Native people, Julia traveled to the TLDC quarterly meetings and listened to the IHS reports, other diabetes-related agencies, and tribal leaders. The TLDC continued discussions on how to distribute the diabetes funding and how tribes would access the funding.

Each meeting started with prayer. Each meeting saw TLDC members give testimony on how diabetes was devastating families and communities. Although TLDC members had different ideas on how best to spend the money, they all shared the same desire to stop the diabetes epidemic.

That was ten years ago. Since then, Julia has worked to help build two clinics at the Nez Perce Tribe. She has witnessed walking programs,

nutrition programs, and wellness centers flourishing at the Nez Perce and other tribes.

"It feels really good to see the fruits of our labor," she says. Julia has experienced personal change as well. For two years, she was not voted onto the tribal council and so did not serve on the TLDC. During that time, she held a variety of jobs at the Nez Perce Tribe, including one in which she transported patients to a dialysis center.

"Those two years were eye-opening for me. I witnessed people's everyday struggles. I realized that many people are living day-to-day. They worry about what they will eat for their next meal, how they will pay their electric bills, how they will afford to go to the doctor. I started to understand and live the people's hardships."

Julia says these jobs and being in touch with people were very satisfying. But, she was repeatedly asked to run for the tribal council. In May of 2006, she decided to run and was elected for a three-year term. She is a strong advocate for diabetes health education and prevention. Diabetes prevention is high on her priority list.

Julia is again part of the TLDC, this time as an Alternate for the IHS Portland Area Member Linda Holt (Suquamish). She says her two years working for the Nez Perce Tribe changed her. "I'm much more people-oriented. I want to make things better for the everyday person."

And how do we do that? "We need to go back to the basics—traditional foods, traditional beliefs. We need to know who we are, and express ourselves, through singing, dancing, artwork, and bead work. Let's not get so busy that we forget the things that are most important, our heritage, our culture."

Meet the Staff... **Tammy Brown**



Captain Tammy L. Brown, MPH,
RD, BC-ADM, CDE

Captain Tammy L. Brown has been involved with IHS diabetes programs for over 15 years. Throughout her 27-year career, she has devoted herself to improving the health and well-being of others.

After graduating with a degree in Dietetics from Mount Mary College in 1980, Tammy went on to work as a clinical dietician for 11 years. She worked directly with patients and families, providing health education and instruction through individual and group teaching in various areas of St. Luke's Hospital in Milwaukee. After leaving St. Luke's in 1991, Tammy began working with IHS and has been committed to American Indian/

Alaska Native (AI/AN) diabetes management and education ever since.

Currently, as Principle Nutrition Consultant to the Division of Diabetes, Tammy advises the Division Director on various diabetes nutritional care and education issues affecting the AI/AN population in areas such as legislation, research, nutrition and education guidelines, policies, procedures, diabetes program plans, and diabetes contracts for nutrition and dietetic services.

By designing strategies and policies that address the nutritional aspects of diabetes in AI/AN communities, Tammy has consistently demonstrated strong leadership qualities as well as her commitment to improving the health of people with diabetes. She finds her work developing and improving policies and programs related to diabetes prevention, treatment, and education extremely gratifying.

In addition to advising the Division Director, Tammy collaborates with IHS professionals, other IHS programs, nutrition professionals, and nutrition organizations to identify needs and issues related to diabetes prevention and treatment. Tammy

also applies her expertise in nutrition by providing consultation, coordination, and direct technical supervision to 17 IHS Area consultants and advisors, 20 model programs in 23 IHS and Tribal sites, and the 399 Special Diabetes Program for Indians grant programs.

Tammy has not only developed effective programs and policies at the national level, but she also has reached out to people—working directly with individuals to help them overcome obstacles associated with various health issues. She has made presentations to patients, families, and communities, lay health workers, and professionals on a variety of topics related to diabetes management and nutrition.

In 2000, Tammy earned her M.A. in Public Health from Loma Linda University. She has received numerous awards and has published articles in *Diabetes Spectrum*, *Diabetes Care*, and the *IHS Provider*. In 2005, she published a chapter on "Meal Planning Strategies for Ethnic Populations" in the ADA Diabetes Care and Education Practice Group's handbook on *Medical Nutrition Therapy*.

Upcoming Events

IHS Integrated Diabetes Education Recognition Program Deadlines Approaching

The IHS Integrated Diabetes Education Recognition Program (IDERP) recognizes quality diabetes education and care services offered within your community. The deadline for the letter of intent to apply for recognition is February 15, 2008; the application deadline is March 15, 2008. To learn more about the IDERP and to download applications, go to http://www.ihs.gov/MedicalPrograms/Diabetes/recognition/recog_index.asp.

Advances in Diabetes Treatment and Prevention

Navajo Nation To Use Space Technology To Fight Diabetes

The Navajo Nation Special Diabetes Project will use electronic glucose monitors, weather balloons and global positioning system (GPS) technology to monitor blood sugar levels in people with diabetes who live in remote areas. The Navajo Nation is working with the Space Data Corporation and the U.S. Department of Agriculture's Distance Learning and Telemedicine Grant program on this first-ever use of Skysite satellites to fight diabetes.

Members of the Navajo Nation, many of whom do not have telephones, will be given glucose monitors that can transmit data to balloons flying at about 65,000 feet, near space altitudes. This innovative use of space technology will enable health care practitioners to monitor patients' glucose levels and provide advice as well as emergency services.

(Source: *InformationWeek*, November 19, 2007)

Empowering Clinicians to Deliver Quality Diabetes Care

WebAudit: New IHS Internet-Based Audit Tools to Be Ready for 2008 Audit Cycle

By Karen Sheff and Ray Shields

The IHS Diabetes Care and Outcomes Audit is a process for assessing diabetes care and health outcomes for American Indians and Alaska Natives diagnosed with diabetes. To use the audit data effectively, they must be entered into a database that is designed for processing the information, including data checking and cleaning, and for generating reports.

A new set of internet-based tools called the WebAudit has been developed to streamline and centralize IHS Diabetes Audit data entry, processing, and reporting. In the past, the Epi Info™ software package was used for these tasks along with the IHS RPMS system, which can generate electronic audit data files. The new WebAudit tools were designed to be easier to use and to address limitations of the software used in the past.

There are several advantages to the new WebAudit:

- Users can access the WebAudit via the internet with only an internet connection and browser (they do not need to install any software).
- The WebAudit uses an easy-to-use “point-and-click” interface.
- Basic instructions are included on the screens seen by users.
- A built-in data security system ensures confidentiality and allows users to have access to data for only the necessary facility(ies).
- Data files and reports for local use and distribution can be downloaded easily.
- There is one central location for audit data from multiple facilities and for multiple years.

To use the WebAudit, facilities conducting an audit *initially* will proceed as they have in previous years by generating paper audit forms (for a manual audit) or an electronic data file using RPMS (for an electronic audit). For a manual audit, the data on the paper forms will then be entered using the WebAudit’s data entry tool. For an electronic audit, the electronic data file will be uploaded into the WebAudit using the data upload tool.

Once the data are in the WebAudit database (whether entered for a manual audit or uploaded for an electronic audit), users can perform the following tasks using the WebAudit:

1. View, edit, and delete individual records.
2. Check for potential data errors.
3. Generate reports from the data.
4. Download data to a local computer.

The WebAudit is in the final stages of development and testing and will be available to users for the 2008 audit cycle. Facilities that helped test the WebAudit found it user-friendly and required little or no training to use it. Support and documentation for the WebAudit will include email and phone support by WebAudit staff, on-screen instructions, and a Quick Start guide.

Look for more information about the WebAudit on the IHS Division of Diabetes Treatment and Prevention website (<http://www.ihs.gov/medical-programs/diabetes/>) in 2008.

SDPI Success Stories (continued)

SDPI Kid Fit Program (continued)

If Phaline had put together a two-hour jumping jack exercise program, a few children may have shown up. But now nearly 30 youngsters take part in the program, doing grass dances, jingle dances, fancy dances, crow hops. (Try crow hopping for 10 minutes. Compared to that, jumping jacks are a cake walk!)

Phaline had a hunch that children would be interested in powwow dancing. But, she also knew that even good ideas take time to catch on. “I believe in being persistent. When you start something, you have to continue it. You have to be there, time after time, whether there is one person or 30,” she says. The first year started with two children and grew to six. This second year, there are nearly 30 dancers, and the numbers increase weekly.

Phaline’s good idea took on a life of its own, and got even better. As the day of the powwow grew closer, parents started showing up to help sew the outfits. “One girl’s stepdad works a 12-hour shift at the mine,” says Phaline. “After work, he comes here to sew her outfit, and stays until 10 PM.”

Single dad Cody Couchum works with horses all day, but he came in to help make his daughter’s outfit. He had never sewn anything in his life. Before anyone knew it, he had completed not only his daughter’s outfit, but also powwow dresses and regalia for seven children!

With the help of family members, children are doing much more than getting exercise. They are returning to wellness. “The children are seeing how much mom and dad care,” says Phaline. “And everyone is receiving a healing. And that is the beginning of having healthy lifestyles.”

2008 Awards Competitions

Upcoming American Public Health Association (APHA) Awards Competitions

The nomination information for the 2008 American Public Health Association (APHA) Awards will soon be posted to their website. Solicitation of nominations will occur during the spring of 2008, approximately from late March - April.

Each year APHA recognizes individuals who have made a significant contribution to research, health care, and education.

The following awards will be presented by APHA in 2008:

- The **David P. Rall Award for Advocacy** is awarded to an individual who has made an outstanding contribution to public health through science-based advocacy. Priority shall be given to recognize individuals at mid-career whose accomplishments have advanced prevention through policy change.
- The **Jay S. Drotman Memorial Award** was established to recognize the career of a promising young public health professional or student.
- The **Martha May Eliot Award** honors extraordinary health service to mothers and children; to bring such achievement to the eyes of related professional people and the public; to stimulate young people in the field to emulate efforts resulting in such recognition; and to add within the profession and in the eyes of the public to the stature of professional workers in the field of maternal and child health.
- The **Milton and Ruth Roemer Prize for Creative Public Health Work**, is awarded to a local health officer of a county, city or other unit of local government, in recognition for out-standing creative and innovative public health work.

This is an excellent opportunity to gain recognition for those individuals you believe have significantly

contributed to improving diabetes health care. More detailed nomination information will soon be posted at <http://www.apha.org/programs/awards/>.

You may also contact Deborah Dillard, award staff liaison, at (202) 777-2442 or deborah.dillard@apha.org.

Directors of Health Promotion and Education (DHPE)

Nominations due approximately April 1, 2008
Check DHPE websites for updates - Nomination information to be posted February 2008
For more information, please contact:

Mariela Alarcon-Yohe
Phone: 202-659-2230
Fax: 202-659-2339
malarcon@dhpe.org

For full award descriptions and details, go to http://www.dhpe.org/awards_desc.asp.

Evans/Muneoka Award:

This award honors a State, Territorial or Indian Health Service Area Director of Health Education/Health Promotion or an DHPE Associate Member who has demonstrated consistent and extraordinary mentoring and professional support to health promotion and health education staff; state, local and national colleagues and/or other members.

Hod Ogden Medal:

This award honors a person whose creative efforts have positively influenced the advancement of health education and health promotion in his/her state or the nation.

Leadership Award:

This award honors the State, Territorial or Indian Health Service Area Director of Health Education/Health Promotion or an DHPE Associate Member whose leadership has resulted in a demonstrable

coalescence of state and local level constituencies toward the goal of expanding health promotion/health education activities in the state.

Health Promotion Medal of Excellence:

This award honors the achievement of a "state-level" health education/health promotion director or health educator whose work has made a contribution to the state's capacity to apply science to the field of health education and health promotion.

National/Regional Collaboration Award:

This award honors national or regional group efforts that have resulted in evidence of coalescence between state or community level constituents in demonstrating innovative health education and health promotion practices at the national level.

State/Community Collaboration Award:

This award honors statewide or community group efforts that have resulted in evidence of coalescence between state or community level constituents in demonstrating innovative health education and health promotion practices at the state or community level.

Health Promotion and Education Advocacy Award:

This award honors a person for his/her support to further health education as a profession and/or who has promoted the science of health promotion and disease prevention at the state or national level. Nominations are also being accepted for policy makers who promote prevention efforts in public health.

David Satcher Award:

The recipient of this award is a person whose leadership in reducing health disparities has resulted in the improvement of health promotion and health education programs at the state or local level.

Awards Competitions continues on page 7

2008 Awards Competitions (continued)

American Medical Association (AMA)

Nominations due March 3, 2008

For more information, please contact:

Roger Brown

Phone: 312-464-4344

Fax: 312-464-4505

hod@ama-assn.org

For full award descriptions and details, go to

<http://www.ama-assn.org/ama/pub/category/7311.html#instructions>.

Foundation Award for Health Education

(American Medical Association Awards Program)

This award was created to recognize the professional or public health education activities of practicing physicians. Special consideration will be given to those physicians working in the areas of alcohol, tobacco, and other drugs.

Medal of Valor

(American Medical Association Awards Program)

The AMA Medal of Valor is awarded to an AMA member or members who demonstrate courage under extraordinary circumstances in non-wartime situations.

Benjamin Rush Award for Citizenship and Community Service

(American Medical Association Awards Program)

This award was established to recognize someone who has made an outstanding contribution to the community for citizenship and public service above and beyond the call of duty as a practicing physician. The recipient must be a U.S. citizen, must possess an MD degree or its equivalent.

Citation for Distinguished Service

(American Medical Association Awards Program)

This award recognizes a state medical association, county medical society, or national specialty society for significant contributions to the public good by fostering the involvement of physicians in community activities.

Distinguished Service Award

(American Medical Association Awards Program)

The Distinguished Service Award may be made to a member of the Association for meritorious service in the science and art of medicine.

Dr. William Beaumont Award in Medicine

(American Medical Association Awards Program)

The Doctor William Beaumont Award in Medicine was established as an encouragement to younger physicians. Eligible for the Award are physicians 50 years of age or under who are U.S. citizens, and who have distinguished themselves in medical science.

Isaac Hays, MD and John Bell, MD Award for Leadership in Medical Ethics and Professionalism

(American Medical Association Awards Program)

This award was established to promote and underscore the AMA's continuing dedication to the principles of medical ethics and the highest standards of medical practice.

Joseph B. Goldberger Award in Clinical Nutrition

(American Medical Association Awards Program)

This Award was created to serve as a stimulus to medical investigators in advancing the frontiers of public and personal health, and to honor physicians who have made personal contributions to the knowledge of nutrition.

Medical Executive Lifetime Achievement Award

(American Medical Association Awards Program)

The Medical Executive Lifetime Achievement Award may be made to a medical executive of a county medical society, state medical association, or national medical specialty society, who has contributed substantially to the goals and ideals of the medical profession.

Medical Executive Meritorious Achievement Award

(American Medical Association Awards Program)

The Medical Executive Meritorious Achievement Award may be made to a medical executive of a county medical society, state medical association, or national medical specialty society, who has provided exemplary and exceptional service that benefits and supports physicians in caring for their patients.

President's Citation for Service to the Public

(American Medical Association Awards Program)

The President's Citation for Service to the Public may be made to a state medical association, county medical society, or national specialty society for significant contributions to the public good by fostering the involvement of physicians in community activities.

American Association of Diabetes Educators (AADE)

Nominations due March 1, 2008

For more information, please contact:

Margie Lechowicz

Phone: 800-338-3633

For full award descriptions and details, go to

<http://www.diabeteseducator.org/ProfessionalResources/index3.html>.

Allene Von Son Diabetes -

Sponsored by Bayer Corporation.

This award recognizes diabetes educators who have developed original, outstanding and effective patient education tools.

Diabetes Camp Educator Award

The Diabetes Camp Educator Award was established to recognize a diabetes camp educator who has made special contributions to diabetes camp(s) through dedicated and innovative support and participation.

Awards Competitions continues on page 8

2008 Awards Competitions (continued)

Diabetes Educator of the Year Award -

Sponsored by LifeScan, Inc.

This award recognizes a diabetes educator who has made a special contribution to the field through dedication, innovation and sensitivity in patient care.

Distinguished Service Award

The Distinguished Service Award recognizes outstanding contributions and service to AADE.

Legislative Leadership Award -

Sponsored by Novo Nordisk Pharmaceuticals, Inc.

This award recognizes an active member of AADE who has made special contributions to the political process by participating, promoting and developing legislative advocacy to benefit diabetes education.

Send Us Your Feedback

The SDPI E-Update is designed to help you succeed in your work in diabetes treatment and prevention. We want to hear from you. Please let us know what you like – or don't like – about the E-Update and what information you want us to include. Also, please share your ideas and success stories with us and we will share them with our readers.

Email diabetesprogram@ihs.gov with your suggestions.

