

[Indian Health Service Accepting Applications for Funding of the Special Diabetes Program for Indians](#)

Category: Policy Blog

written by Alexandra Payan | August 23, 2022

On July 29, 2022, the Indian Health Service (IHS) issued a [notice](#) of funding opportunity for the Special Diabetes Program for Indians (SDPI). The total funding identified for fiscal year (FY) 2023 is approximately \$136 million. Individual award amounts for the first budget year are anticipated to be between \$12,500 and \$7.5 million. Current SDPI awardees should budget for the same amount as they received in FY 2022. However, funding amounts may change. New SDPI award applicants should apply for a \$12,500 base amount. Approximately 325-450 awards will be issued under this program announcement with a 5-year period of performance. The application deadline is October 7, 2022, with the earliest anticipated start date on January 1, 2023. NCUIH continues to [advocate](#) for an increase in SDPI funds and encourages urban Indian organizations (UIOs) not currently receiving SDPI funds to apply for the FY2023 funding opportunity.

Background

In 2004, Congress established the SDPI Demonstration Projects to translate research-based interventions for diabetes prevention and cardiovascular disease (CVD) risk reduction into American Indian/Alaska Native (AI/AN) community-based programs and health care settings. The SDPI Demonstration Projects successfully translated diabetes science and reduced the risk of diabetes in high risk individuals, and reduced CVD risk factors in people with diabetes. The SDPI Demonstration Projects consist of two initiatives: the SDPI Diabetes Prevention Program and the SDPI Healthy Heart Project. In fiscal year (FY) 2020, [there were 301 SDPI program sites](#) located in 35 states and collectively serving more than 780,000 AI/AN people.

Since the inception of SDPI, it has achieved real, demonstrable success, with [a 50% reduction in diabetic eye disease rates](#), drops in diabetic kidney failure, and a [54% decline in End Stage Renal Disease](#). Given the high rates of diabetes and diabetes-related illnesses AI/ANs face, it is imperative that SDPI is administered in a way that continues to reduce these rates – and in a manner that is inclusive of UIOs. AI/ANs have the highest diabetes prevalence rates of all racial and ethnic groups in the United States, [with AI/AN adults almost three times more likely than non-Hispanic white adults to be diagnosed with diabetes](#). According to 2018 data from the Centers for Disease Control and Prevention, [AI/ANs were 2.3 times](#) more likely than non-Hispanic whites to die from diabetes and twice as likely to be diagnosed with end stage renal disease than non-Hispanic whites. SDPI is therefore a critical program to address the disparate high rates of diabetes among AI/ANs.

SDPI has directly enabled UIOs to provide critical services to their AI/AN patients, in turn significantly reducing the incidence of diabetes and diabetes-related illnesses among urban Indian communities. As of 2022, 30 out of the 41 UIOs received SDPI funding. Facilities use these funds to offer a wide range of diabetes treatment and prevention services, including but not limited to exercise programs and physical activity, nutrition services, community gardens, culinary education, physical education, health and wellness fairs, culturally-relevant nutrition assistance, food sovereignty education, group exercise activities, green spaces, and youth and elder-focused activities.

NCUIH supports maintaining SDPI as mandatory spending to enable the program to continue to achieve success in reducing diabetes and diabetes-related illnesses in Indian Country.