

Learning Collaborative to Address Diabetes Prevention: Approaches to Adapting the National DPP Program for Priority Populations

April 29, 2021



Disclosure

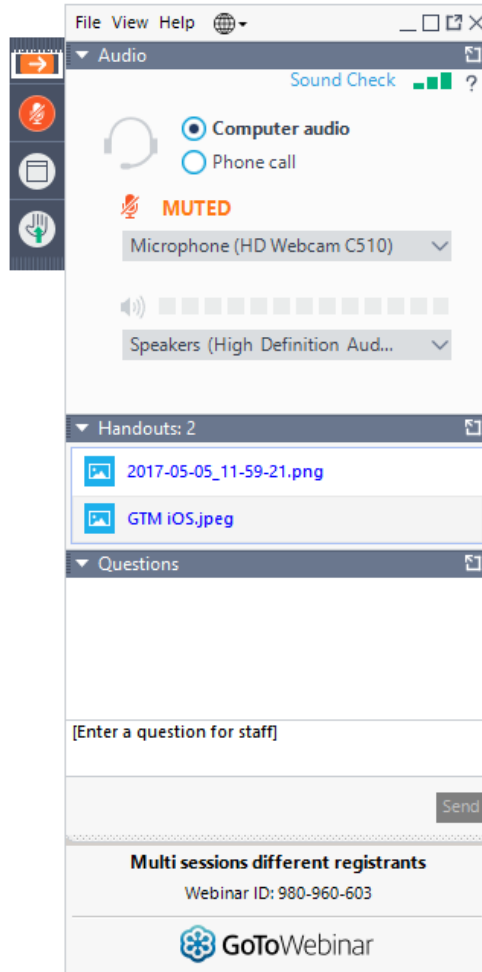
- No Disclosures or conflicts of interest from any of the speakers

Disclaimer

This presentation is supported by cooperative agreement DP-18-1802, funded by the Centers for Disease Control and Prevention (CDC).

Its contents are solely the responsibility of the authors, and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of the Health and Human Services

Housekeeping



- All attendees are in listen-only mode. Please do not put us on hold.
- The webinar is being recorded.
- If you have any questions please type them in the Q and A box and we will address them during the Q/A session.
- ACPM will email attendees the slides, recording of this webinar.

About the Project

- ACPM has received funding from the **Division of Diabetes Translation** within the National Center for Chronic Disease Prevention and Health Promotion at the Centers for Disease Control and Prevention (CDC) to address prediabetes in vulnerable populations.
- ACPM is collaborating with the American Medical Association (AMA) and the Black Women's Health Imperative (BWHI) to:
 - Enhance support for health care organizations to screen, test, and refer high-risk Black and Hispanic women within communities to a CDC-recognized type 2 diabetes prevention program and
 - Strengthen community support to improve enrollment and retention in this lifestyle change program.
 - The Learning Collaborative was started to keep health systems, community-based organizations, and stakeholder engaged in diabetes prevention

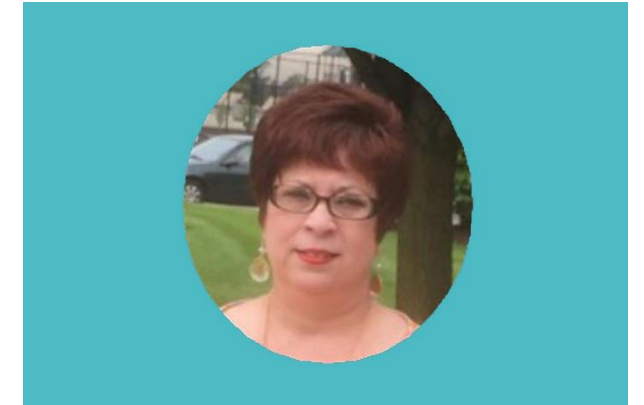
Poll Question



Miriam Bell
Team Lead
National Diabetes
Prevention Program
Center for Disease
Control



Virna Diaz
Master Trainer
Black Women's
Health Imperative



Rosana De Jesus
Master Trainer
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Approaches to Adapting the National DPP Program and Curriculum for Priority Populations

Division of Diabetes Translation

National Center for Chronic Disease Prevention and Health Promotion

Centers for Disease Control and Prevention

Miriam T. Bell, MPH, Team Lead, National DPP

April 29, 2021



PREDIABETES

COULD IT BE YOU?

88
MILLION

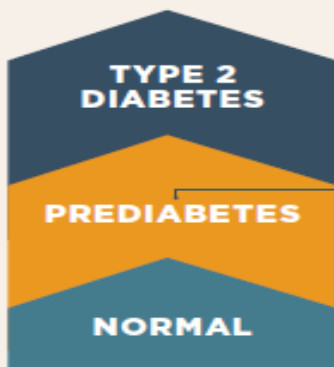
88 million American adults — more than 1 in 3 — have prediabetes

1 IN 3



MORE THAN **8 IN 10**

adults with prediabetes don't know they have it



With prediabetes, your blood sugar levels are higher than normal but not high enough yet to be diagnosed as type 2 diabetes

Prediabetes increases your risk of:



TYPE 2 DIABETES

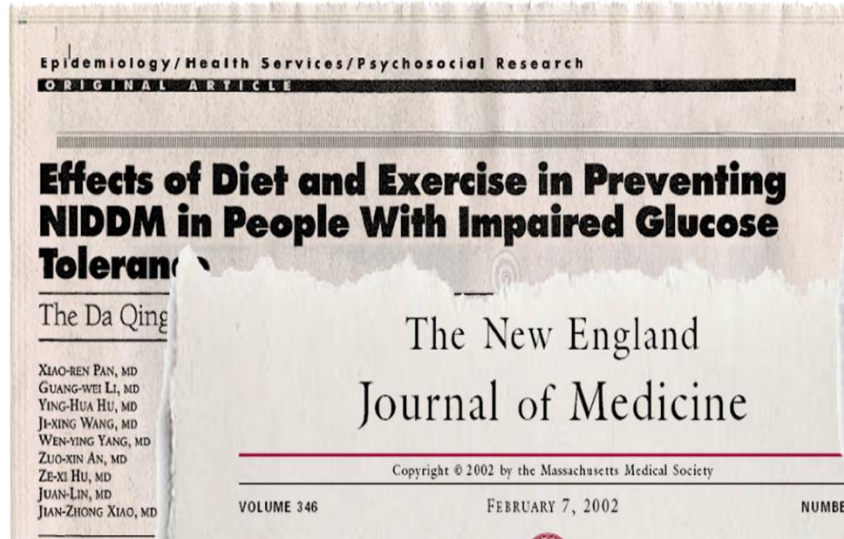


HEART DISEASE



STROKE

Evidence-based Intervention



Review article

Behavioral strategies in diabetes prevention programs: A systematic review of randomized controlled trials

Michael K. Baker^{a,*}, Kylie Simpson^b, Bradley Lloyd^b,
Adrian

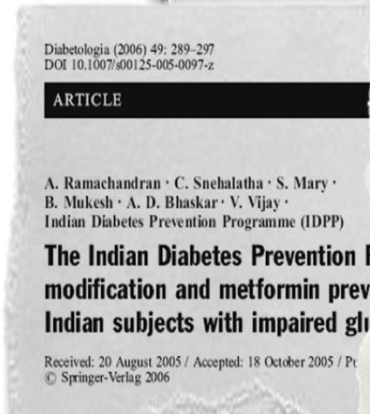
The New England Journal of Medicine

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VOLUME 344 MAY 3, 2001 NUMBER

REDUCTION IN THE INCIDENCE OF TYPE 2 DIABETES WITH LIFESTYLE INTERVENTION OR METFORMIN

PREVENTION OF TYPE 2 DIABETES MELLITUS BY CHANGES IN LIFESTYLE AMONG SUBJECTS WITH IMPAIRED GLUCOSE TOLERANCE



Translating the Diabetes Prevention Program into the Community The DEPLOY Program

LINDSTRÖM, M.S., JOHAN G. ERIKSSON, M.D., PH.D., TIMO T. VALLI
ILANNE-PARIKKA, M.D., SIRKKA KEINÄNEN-KIUKAANNIEMI, M.D., P
HERANTA, M.S., MERJA RASTAS, M.S., VIRPI SALMINEN, M.S.,
PH.D., FOR THE FINNISH DIABETES PREVENTION STUDY GROUP

The long-term effect of lifestyle interventions to prevent diabetes in the China Da Qing Diabetes Prevention Study: a 20-year follow-up study

Guangwei Li, Ping Zhang, Jinying Wang, Edward W Gregg, Wenyang Yang, Qihong Gong, Hui Li, Hongliang Li, Yajun Jiang, Yali An, Ying Shui, Bo Zhang, Jingling Zhang, Theodore J Thompson, Robert B Gerzoff, Gajja Roglic, Yinghua Hu, Peter H Bennett

Summary

Background Intensive lifestyle interventions can reduce the incidence of type 2 diabetes in people with impaired glucose tolerance, but how long these benefits extend beyond the period of active intervention, and whether such interventions reduce the risk of cardiovascular disease (CVD) and mortality, is unclear. We aimed to assess whether intensive lifestyle interventions have a long-term effect on the risk of diabetes, diabetes-related macrovascular and microvascular complications, and mortality.

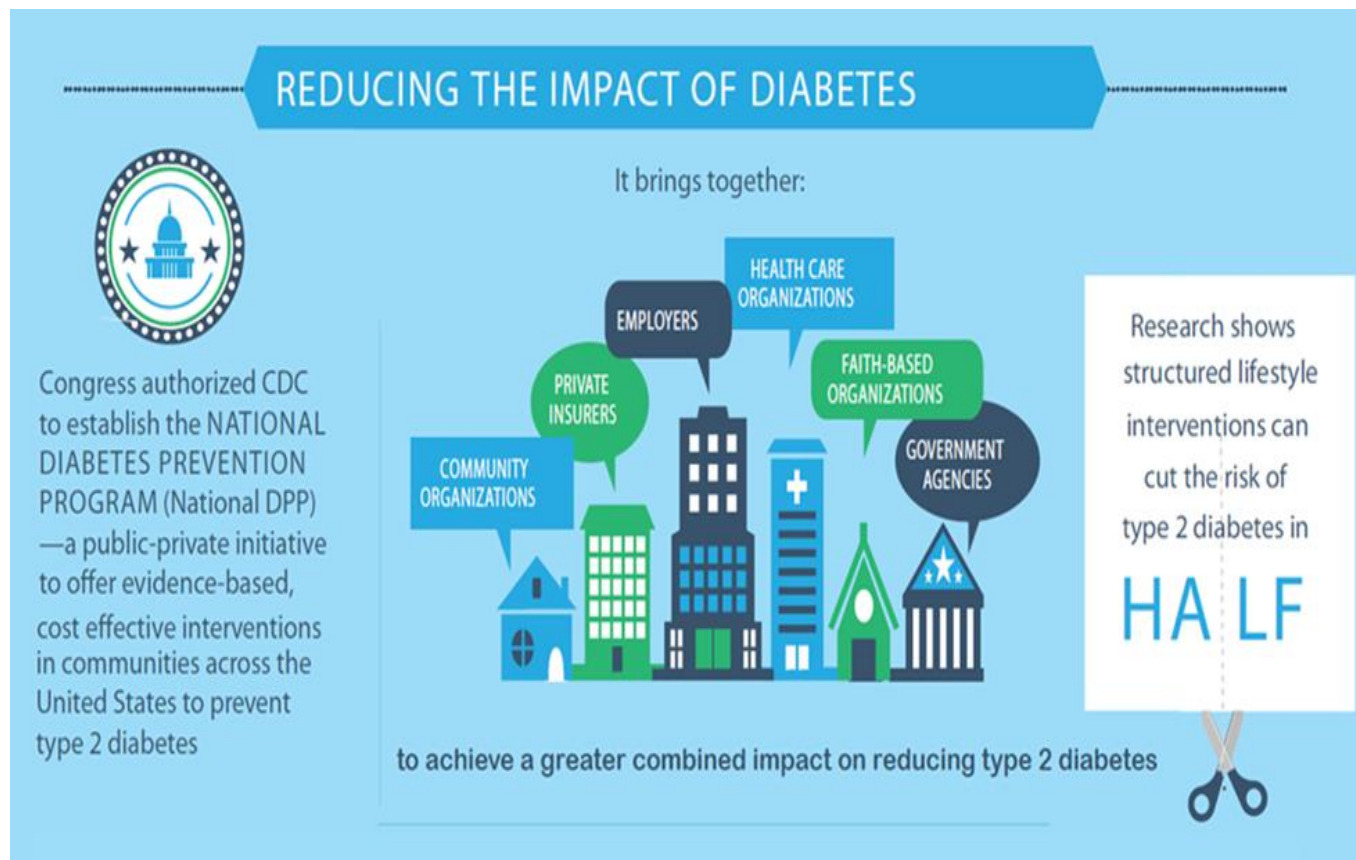
Lancet 2008; 371: 1783–89
See Comment page 1731
Department of Endocrinology,
China Japan Friendship
Hospital, Beijing, China

Prevention of type 2 diabetes by lifestyle intervention: a Japanese trial in IGT males

Kinori Kosaka^a, Mitsuhiro Noda^{a,*}, Takeshi Kuzuya^b

National Diabetes Prevention Program

Largest national effort to mobilize and bring an evidence-based lifestyle change program to communities across the country!



Overview of the National Diabetes Prevention Program

The National DPP relies upon a variety of public-private partnerships with community organizations, private and public insurers, employers, health care organizations, faith-based organizations, government agencies, and others working together to:



Build a workforce that can implement the lifestyle change program effectively



Ensure quality and standardized reporting



Deliver the lifestyle change program through organizations nationwide



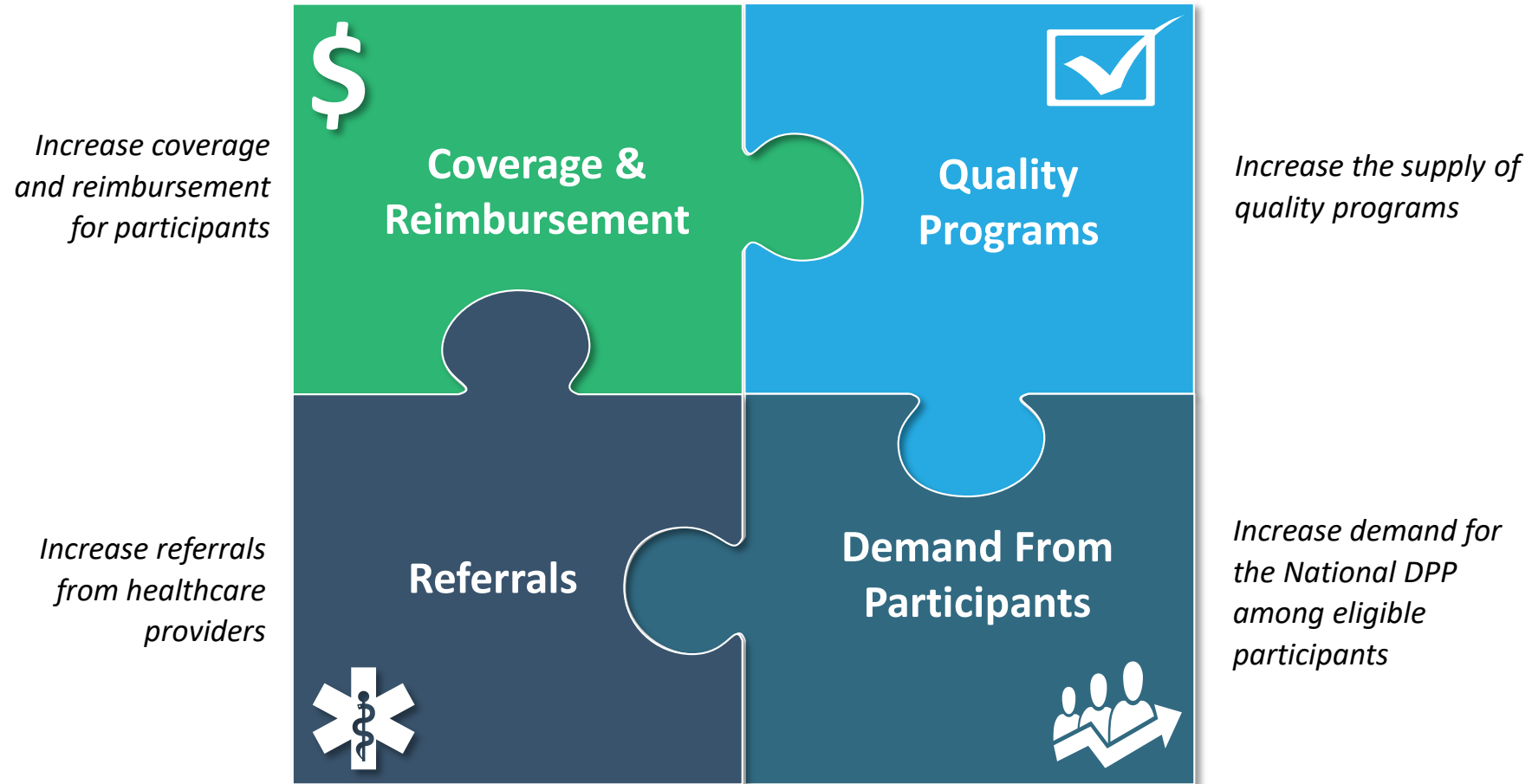
Increase referrals to and participation in the lifestyle change program

<https://www.cdc.gov/diabetes/prevention/index.html>

**National DPP
Strategic Goals**

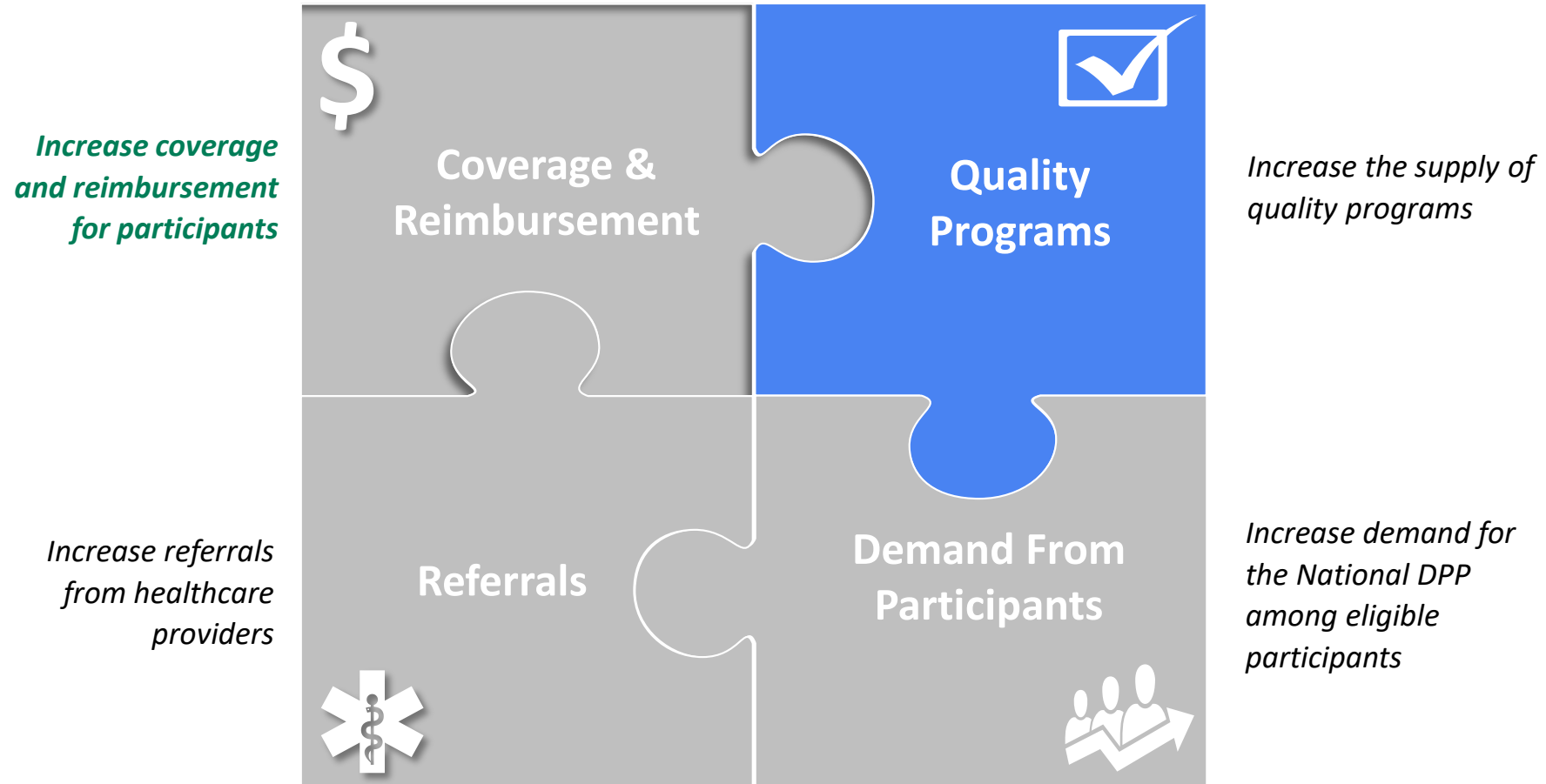
National DPP Strategic Goals

There are four strategic goals around scaling and sustaining the National DPP



National DPP Strategic Goals

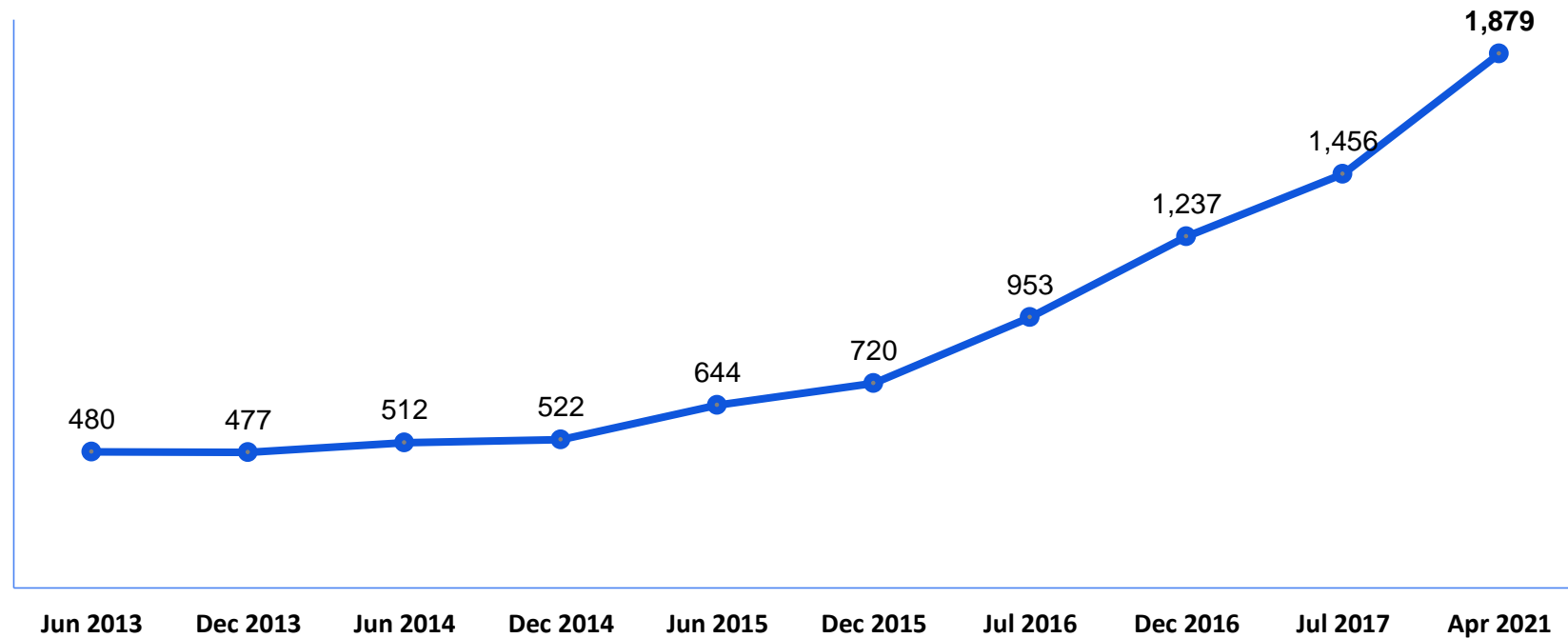
Increasing the number of people who receive the National DPP lifestyle change program as a covered benefit is a pivotal part of scaling the program



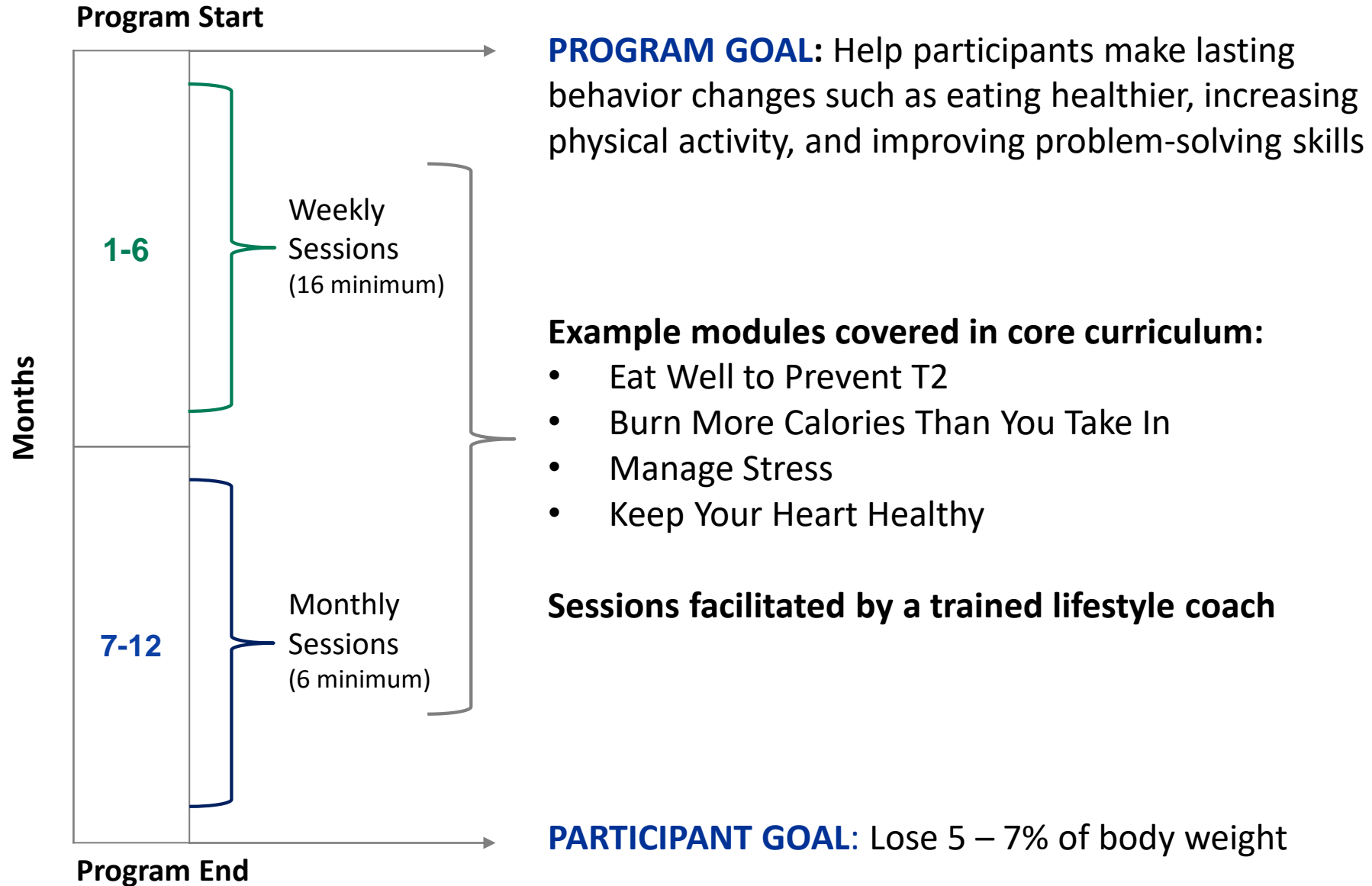


Increase the Supply of Quality Programs

CDC-Recognized Organizations Across the U.S.



Elements of the National DPP Lifestyle Change Program

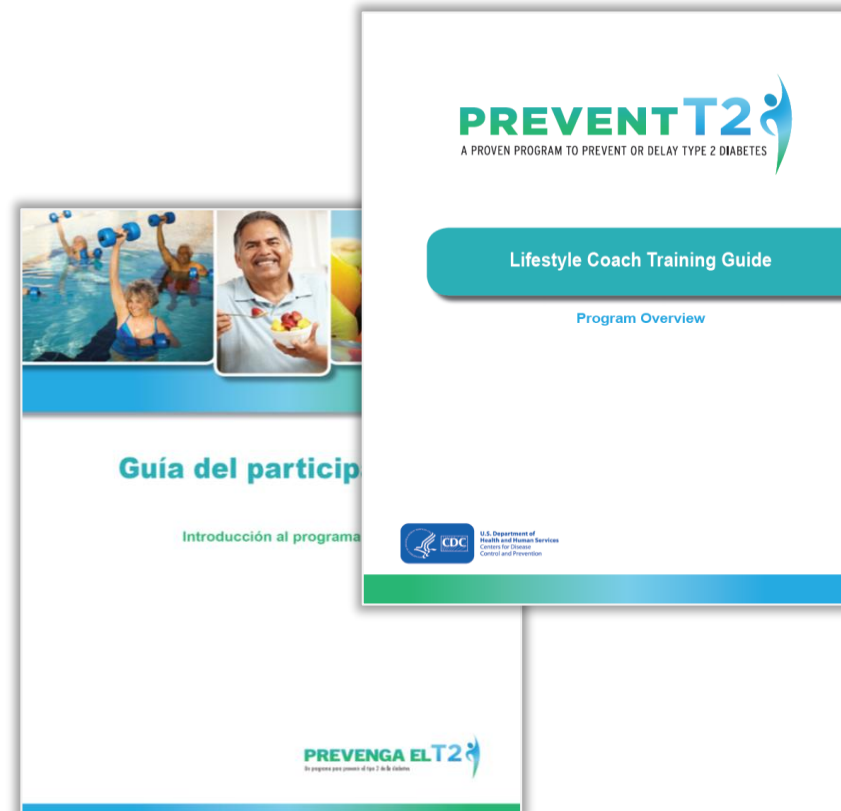


PreventT2 Curriculum

CDC released the new *PreventT2* curriculum in March 2016 (in both English & Spanish).

Curriculum Features

- **Designed for Success:** Designed based on lessons learned from the previous curriculum (lower literacy level, more graphics)
- **Flexibility:** Recommended sequence of modules for the first 6 months, and then a variable structure for the next 6 months depending on participant needs
- **Spanish Translation:** A “culturally relevant” translation of the English version



Creating an Alternate Curricula: A Few Tips

- Have a good understanding of the DPRP Standards and Operating Procedures
 - Intensity
 - Duration
- Align with the goals of the National DPP
- Provide the evidence
- Provide Participant and Facilitator Materials

National DPP Customer Service Center

NationalDPPCSC.cdc.gov

Purpose: Provide a hub for resources, training, and technical assistance for CDC-recognized program delivery organizations and other National DPP stakeholder groups

Find Resources and Info



- Quickly and easily find resources and events relevant to your needs (FAQs, toolkits, training videos, webinars, etc.)
- Discuss opportunities and challenges with the National DPP community

Receive Technical Assistance



- Engage with technical assistance coordinators and subject matter experts via the web-based platform or email
- View the status of and update existing technical assistance requests

Provide Feedback and Input



- Submit feedback on your satisfaction with the technical assistance, resources, and web-based platform
- Share success stories and suggest additional resources

What You Can Do...

01/

RAISE AWARENESS of prediabetes and the National DPP

- www.cdc.gov/diabetes/prevention/prediabetes-type2

02/

REFER PEOPLE at risk to a CDC-recognized lifestyle change program

- www.cdc.gov/DDT_DPRP/Programs.aspx

03/

OFFER THE PROGRAM by becoming a CDC-recognized organization

- www.cdc.gov/diabetes/prevention/lifestyle-program

Thank You!

Division of Diabetes Translation
National Center for Chronic Disease Prevention and
Health Promotion
Centers for Disease Control and Prevention
www.cdc.gov/diabetes

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Poll Question

Effectively Adapting the National DPP Curriculum to prevent diabetes in the Hispanic/Latinx Community



Virna Diaz & Rosana De Jesus

**IMHC Spanish Speaking
Master Trainers and Lifestyle Coaches**

WHO IS THE HISPANIC/LATINX COMMUNITY?



UNDERSTANDING HISPANIC/LATINX COMMUNITY IN USA

SPANISH SPEAKING COUNTRIES ON A MAP



GEOGRAPHIC DISTRIBUTION OF HISPANIC/LATINX IN USA

- Cultural
- Food habits
- Vocabulary

65 of every 100 Hispanic/Latinx individuals are Mexican

Largest Hispanic/Latinx Populations living in US
Number of People



FUENTE: PEW RESEARCH CENTER. GRÁFICO EE: STAFF.

**STRATEGIES USED TO ENGAGE AND ENROLL PARTICIPANTS IN
*CHANGE YOUR LIFESTYLE. CHANGE YOUR LIFE PROGRAM (CYL²)***

1. Presentations to the leaders of community sites
2. Presentations to the community leading to interviews with participants to complete intake forms
3. Promotions in Spanish
4. Follow Up Calls and Invitations to Health Fairs
5. Health Fair
6. Partnerships, On-going Collaboration and Community Resources

IMPORTANCE OF HEALTH FAIRS

- Identify future participants
- Educate potential participants about importance of preventing diabetes
- Determine best days and times for them to attend the program
- Introduce lifestyle coaches
- Inform them the program is free of charge to them

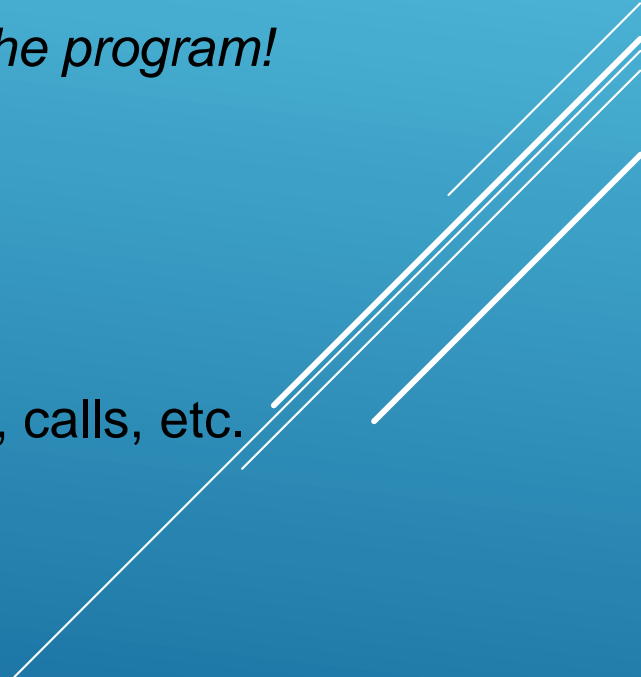
BARRIERS FOR THE COMMUNITY

- Transportation
- Language (e.g., Food Labels, etc.)
- Lack of health insurance
- Safe place for physical activity
- Healthy food expense
- Insecure neighborhoods
- Weather
- Low literacy
- Measurement system

HEALTH IMPACT

- Work is a Priority
- Lack of Insurance
- Misunderstanding of the health system in USA
- Immigration Status
- Food Habits
- Cultural Beliefs
- Poverty

ESSENTIALS TO SUCCESSFULLY KEEPING PARTICIPANTS ENGAGED

- Great customer *service-Participants are the most important part of the program!*
 - Adapt the space to reflect their culture and protect their comfort.
 - Always show and make them know the lifestyle coach cares via text, calls, etc.
- 
- A decorative graphic consisting of several parallel white lines of varying lengths, slanted diagonally from the bottom right towards the top right, located in the lower right quadrant of the slide.

CULTURALLY ADAPTED ACTIVITIES

PICNIC



PHYSICAL ACTIVITY



COOKING CLASS



HEALTH FAIRS



OTHER ACTIVITIES



STRESS RELIEF & SELF CARE



COMMUNITY GARDENING



PANDEMIC EFFECTS

Factors

- Fear
- Lack of Internet
- Low/No Tech Skills
- Lost jobs
- Financial Burdens
- Not allow to go out
- Infected by Covid-19
- Zoom

Solutions

- Individual Calls
 - Face Time
 - Videos Recorders
 - Send or Drop off Materials
 - WhatsApp
 - Zoom
- 
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PARTICIPANTS REVIEWS AND TESTIMONIES

- *“The most important thing I noticed was I was aware how I ate and made good choices. I feel more energized when I lost weight. My family also had benefit of me doing this program. We all are eating healthier and feeling much better.”* Cristy
- *“When I joined the program in December 2019, I did it because I had to bring my husband to do it. In the week # 12, I made my goal and lost 14 pounds by April 2020. I lost 46 pounds by March 2021 because I continued doing all the tools that I learned during the program. I feel healthy and I can not begin my day without physical activity.”* Maria
- *“I decided to take the program because my A1C was 6.3. When I finished the program, I went to the doctor to have my annual check. I got my results and my A1C was 5.9 and I immediately sent a text message to my Lifestyle coach to share the result. I was so happy and thanks to this program I feel healthy now.”* Jose
- *“I made my goals during the program but the most important things in the program are the Lifestyle coaches. They became my health friends.”* Martin

BWHI CYL² Lifestyle Change Program Goes Virtual

- Virtual Lifestyle Change Program
 - BWHI became an approved CDC-recognized distance learning provider
 - Our curriculum—culturally tailored for Black women—was also approved by CDC
 - Developed the new BWHI app:
 - Virtual classes
 - Public health communities
 - Private support communities
 - Partnered with AARP to test virtual program in 4 cities
 - Search “BWHI” to download



CYL²
IS NOW
VIRTUAL
Stay connected
no matter
where
you are.

CYL²
CHANGE YOUR LIFESTYLE.
CHANGE YOUR LIFE.
POWERED BY
THE BLACK WOMEN'S HEALTH INITIATIVE

Available on the
App Store

GET IT ON
Google Play

BWHI CYL² Lifestyle Change Program Goes Virtual

All About The BWHI App

- Virtual CYL² Classes
- Public Communities
- Live Events
- Health and Wellness Content

Want to connect to our lifestyle change program from your phone?

WE NOW HAVE AN APP FOR YOU!

CYL²
CHANGE YOUR LIFESTYLE.
CHANGE YOUR LIFE.
POWERED BY THE BLACK WOMEN'S HEALTH OPERATIVE

Available on the App Store

GET IT ON Google Play



BLACK WOMEN'S
HEALTH IMPERATIVE

Questions?
Thank you!



Virna Diaz & Rosana De Jesus





Additional Resources:

1. **ACPM:** <https://www.acpm.org/initiatives/diabetes-prevention/>
2. **BWHI:** <https://bwhi.org/change-your-lifestyle-cyl2/>
3. **AMA:** <https://amapreventdiabetes.org/>