

# Diabetes Prevention Program Success Stories from Cow Creek

NW Tribal Special  
Diabetes Program  
for Indians Panel

- **Allyson Lecatsas**, Health Operations Officer, CCBUTI
- **Patricia Foster** (Hopi/Tewa), Certified Traditional Health Worker/Lifestyle Coach, Diabetes Treatment and Prevention Program, Native American Rehabilitation Association (NARA) NW
- **Alison Goerl, RD**, Director of the Chronic Disease and Public Health Modernization Programs, NARA NW
- **Kelle Little, RDN**, Chief Operations Officer, Coquille Indian Tribe
- **Jason Steiner, MS, JD**, Tribal Medicaid Policy Analyst, Oregon Health Authority

# History of the DPP

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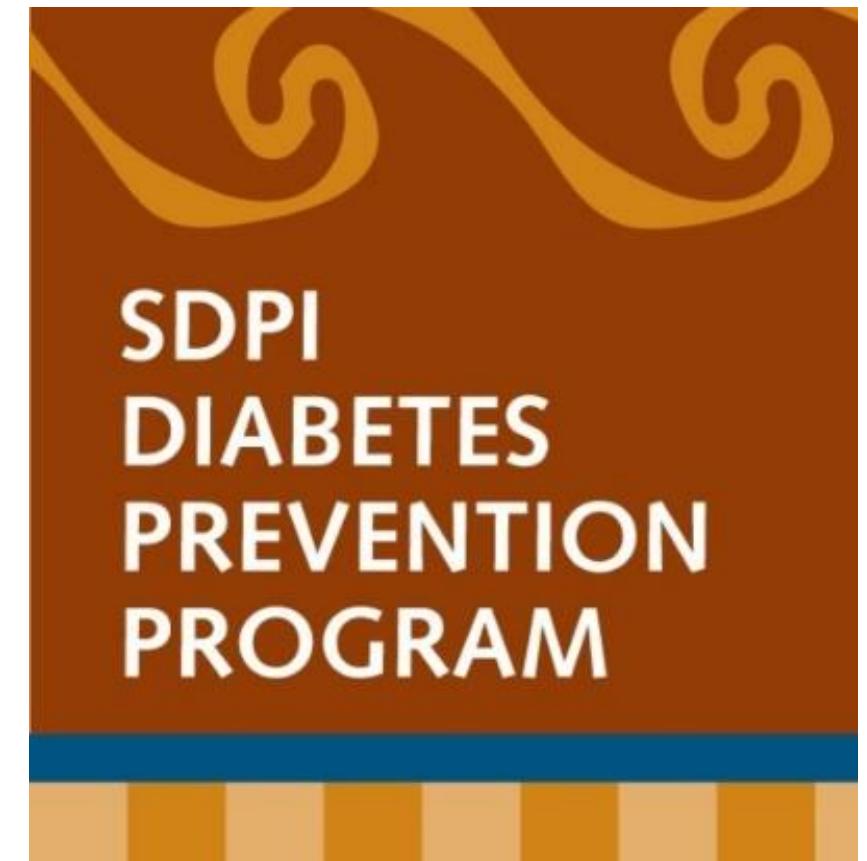
- AI/AN are twice as likely as non-Hispanic whites to have diabetes
- 38% of all adults have prediabetes
- Without intervention, 11% of people with prediabetes will convert to diabetes each year
- 1996 large NIDDK DPP study (5% AI) to see if we could prevent or delay the onset of diabetes in those at high risk for diabetes
- Results: we can prevent or delay the onset of diabetes with the DPP-intensive lifestyle intervention (7% weight loss and 150 minutes/week activity).
- This reduced the chance of developing diabetes by 58% (more than metformin- 31%)
- 2004 funding to Indian Country through SDPI to see if these results could be replicated in a real-life setting



# SDPI Diabetes Prevention Program

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- Initiated 2004
- 38 grant programs across the nation were funded to see if the lessons learned from the DPP could be translated to real life settings in Indian Country
- NARA NW, Cow Creek, Coquille were among the programs funded to help design, implement and build dissemination toolkits for Indian Country. All three will share today
- 2005-2010 SDPI DPP Demonstration Project- followed the guidelines of the original DPP study- were able to replicate results and prevent diabetes in AI/AN
- 2010-2016 SDPI Diabetes Prevention Initiative
- DPP Toolkit on IHS SDPI website <https://www.ihs.gov/sdpi/sdpi-toolkits/diabetes-prevention-program-toolkit/>



# Oregon Health Plan Coverage of DPP Services

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- In 2018, Oregon Tribal Health Directors submitted a letter to the Director of the Oregon Health Authority (OHA) requesting that SDPI services become a covered Medicaid benefit.
- On 1/1/2019, the Oregon Health Plan began Medicaid coverage of Diabetes Prevention Program services.
- OHA and Oregon Tribal Health Directors worked with CDC to ensure that the Native Lifestyle Balance SDPI curriculum is approved for use in DPP.
- DPP services are Medicaid reimbursable at the Tribal Health Program's Indian Health Service AIR encounter rate.

# NARA NW

## Portland, Oregon





## NARA NW Diabetes Prevention Program (DPP)

We can prevent or delay the onset of diabetes!

- Program started in 2004
- 20 cohorts over the course of 20 years
- 2019 applied/approved for the CDC Diabetes Prevention Recognition Program (DPRP)
- 2004-2020 groups were in-person
- 2020 to 2024 groups were virtual (ZOOM)
- Goals are 5-7% weight loss, 150 minutes of activity a week, A1C reduction of .2% or more
- One year curriculum, currently using culturally adapted Prevent T2 CDC curriculum





# Virtual DPP (2020-2024)



**665** pounds lost

**428,686** minutes exercised

**115** virtual classes offered



## Keys to Success

- Addressed technology barriers
- Individual patient ZOOM trainings
- Weekly curriculum mailing
- 30min pre-class time to connect, ask questions, tech help
- ZOOM funs (hats, sports, etc)





A composite image showing a video conference interface. The top half shows a man with a beard and short hair in a black polo shirt standing in a bright, modern gym with wooden floors and ceiling fans. The bottom half shows a cooking tutorial. On the left, a man with a beard and short hair, wearing a green t-shirt with a "RAINIER WA" graphic, stands in a kitchen. On the right, a close-up view of a kitchen counter shows various ingredients and cookware: a bottle of olive oil, a carton of Pacific Organic Vegetable Broth, a large black slow cooker containing a dish, a red mixing bowl filled with a grain or seed mixture, a white bowl with shredded carrots, and a bottle of water. The video conference interface includes a toolbar at the top with icons for "Main", "Next Video", "Security", "Participants", "Chat", "Breakout Rooms", and "Annotations". Below the toolbar is a grid of small video thumbnails for other participants in the call.



# CULTURAL ADAPTATIONS

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- Build relationships and trust with participants, families and community
- Encourage family and all generations to participate
- Gather and share a meal including healthy, seasonal and traditional foods
- Open meetings with a prayer/blessing
- Share and support each other
- Meet participants where they are at



# CULTURAL ADAPTATIONS

- Have fun and offer a variety of activities to address all learning styles- Diabetes Bingo, Farmers' Market trips, traditional cooking demos, fruit and veggie tastings
- Demonstration garden with traditional medicine- provide plant and herb starts
- Acknowledge important life events and achievements (bdy cards, graduation ceremonies, attend funerals, etc)
- Be present at cultural and community events
- Go above and beyond to address Social Determinants of Health and address barriers to self-care (take Rx to patients, deliver food boxes, AC units, help with cell phone service and completing paperwork)





## CULTURAL ADAPTATIONS

- Provide integrated care- address blood pressure, cancer screenings, etc.
- Provide trauma informed care- attend appointments with participants and bring services to them ie mobile mammography, mobile eye van
- Listen to the community- include participants in decision making
- Offer make-up classes
- Include individual coaching between sessions
- Maintain an open-door policy and be flexible- available by phone, social media, or in-person while maintaining professional boundaries.

# Cowlitz Indian Tribe Diabetes Prevention Program

Submitted by

Alyssa Fine, RN, MSN, CDCES, CNL





## PreventT2 at the Cowlitz Indian Tribe

- Offered regularly for the last 6+ years
- 2 trained lifestyle coaches
- Utilize newest CDC curriculum, with additions
- New cohorts start every 6 months
- Administered via Zoom since 2021
- 77 participants since 2018



# Program Modifications

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- Optional in-person and virtual gardening, traditional foods and healthy eating classes, with incentives for attendance
- Referrals to the produce distribution and doorstep garden programs
- Supply distribution:
  - Participant guide and logs
  - Fitbits
  - Body weight scales
  - Measuring cups and food scales
  - Other healthy living tools
- Monthly “Grad Group” providing ongoing support for program completers





# Cowlitz Success Story

*My father had diabetes, and I have struggled to control my weight. I learned of the Type 2 Diabetes Prevention program when I received a Covid vaccination in early 2021.*

*I appreciate the time and personnel the Clinic and the Cowlitz Nation invest in this program. Over the past year I lost 46 pounds and maintained that weight loss through the winter. I'm grateful to be able to continue in the program for another year: I have more weight to lose, and I'm working hard to hold onto these healthy habits and working to cement life-long practices.*

*The program as administered by the Cowlitz Health clinic carries a generosity and gentleness of spirit that fits with Native cultural and life ways. Receiving the scale, Fitbit, and food scale as gifts to start the program, surrounded me with what I needed to jump right in. I knew the concepts, but the group support gave a focus to my effort. The most helpful part of the program is hearing others' challenges in light of the lessons in the text. The gentle problem-solving that we did with and for each other showed me how to be kind to myself. It's something I carry forward with health and in other areas.*



# Preventing Diabetes in Southern Oregon

Allyson Nicolas, Health Operations Officer  
Cow Creek Band of Umpqua Tribe of Indians

# Lifestyle Intervention Goals

- **$\geq 7\%$  loss of body weight**
  - Dietary fat goal -- <25% of calories from fat
  - Calorie intake goal -- 1200-1800 kcal/day
- **$\geq 150$  minutes per week of physical activity**

# The Cow Creek Diabetes Prevention Program

- ❖ A 16-week diabetes prevention curriculum (over 6 months)
- ❖ Daily-weekly lifestyle coaching and behavior change activities
- ❖ Healthy eating practices (nutrition cards)
- ❖ Physical activity
- ❖ Less-intensive activities for family involvement
- ❖ Self monitoring techniques
- ❖ Problem solving
- ❖ Individualizing programs
- ❖ Empowerment and social support

# Nutrition Card

- \$25 Nutrition Card/Voucher (correlate with weekly sessions e.g. stocking pantry, eating whole foods, 1 Turkey = 5 meals)
- Contract signed to comply with guidelines
- Evaluation completed each session per topic
- Short nutrition topics incorporated into each session of 16-week curriculum

# Cow Creek Health & Wellness Center



**Healthy Teaching Kitchen,  
North Campus**



**Classroom, South Campus**



# The Results Are In

- Start up a new Class every 2 Months (Goal 2024)
- Last Full Year of Program 2022
  - 68 total participants (94% retention)
  - Average of 15 lb lost each over 16 weeks (6 months)
  - Average of 21 lb lost each at the end of the first year
  - Blood Sugars decreased an average of 14 mg/dl
  - Cholesterol decreased an average of 23 mg/dl
  - HDL increased an average of 10 mg/dl

A photograph of a sunset over a body of water. In the foreground, the dark silhouette of a plant with long, thin, light-colored leaves or reeds is visible against the bright sky. The sky is filled with horizontal bands of color, transitioning from deep orange and red on the left to a lighter yellow and pink on the right. The water reflects these colors. A small, dark, irregular shape, possibly a leaf or a piece of debris, is visible in the lower right corner.

Lessons  
Learned

## Coquille Indian Tribe Diabetes Prevention Program

- Coquille Indian Tribe 2005-2016
  - Intensive
  - After Care
  - Participants
- 2016 incorporated DPP into SDPI Diabetes Grant
  - Prevent T2 Curriculum
- 2017 Program Paused
  - Insufficient funding through SDPI Grant for personnel
  - Staff Turnover



# Coquille Indian Tribe Diabetes Prevention Program

- 2023 Launch DPP in Coquille Tribal Community
  - Funding Opportunities
    - Supplemental Sources
    - Medicaid revenue
  - Timeline:
    - January – October 2023
      - Program Certification
      - Training
    - November 2023 - Present
      - Program Paused due to Staff Turnover
    - January 2024 –
      - Launch Next Session of DPP





# Karen I. Fryberg Tulalip Health Clinic

Submitted by

Veronica (Roni) Leahy

Diabetes Care and Prevention Program

# Prevention Programs at the Tulalip Health Clinic

- Used Wisdom Warriors in past
  - Stopped using when curriculum changed from Stanford University Model
- Adopted Eat Healthy Be Active curriculum with the help from Holly McPeak, M.S. Dept of HHS/OASH Can be contacted at 240-453-8267
  - Changed curriculum graphics to better fit Tribal needs
  - Branded as 'Family Workshops'
  - Curriculum given after games and dinner
  - Games focused on Prevention Programs for youth while still involving Elders
    - Fitness class
    - Cooking class related to curriculum and teaching
    - Herbal remedies class
    - Incentives: all groceries related to the dinner and cooking class
    - Surveys completed and submitted to Dept of OASH.
    - Nominated by HHS/OASH for National CDC award



# Prevention Programs at the Tulalip Health Clinic

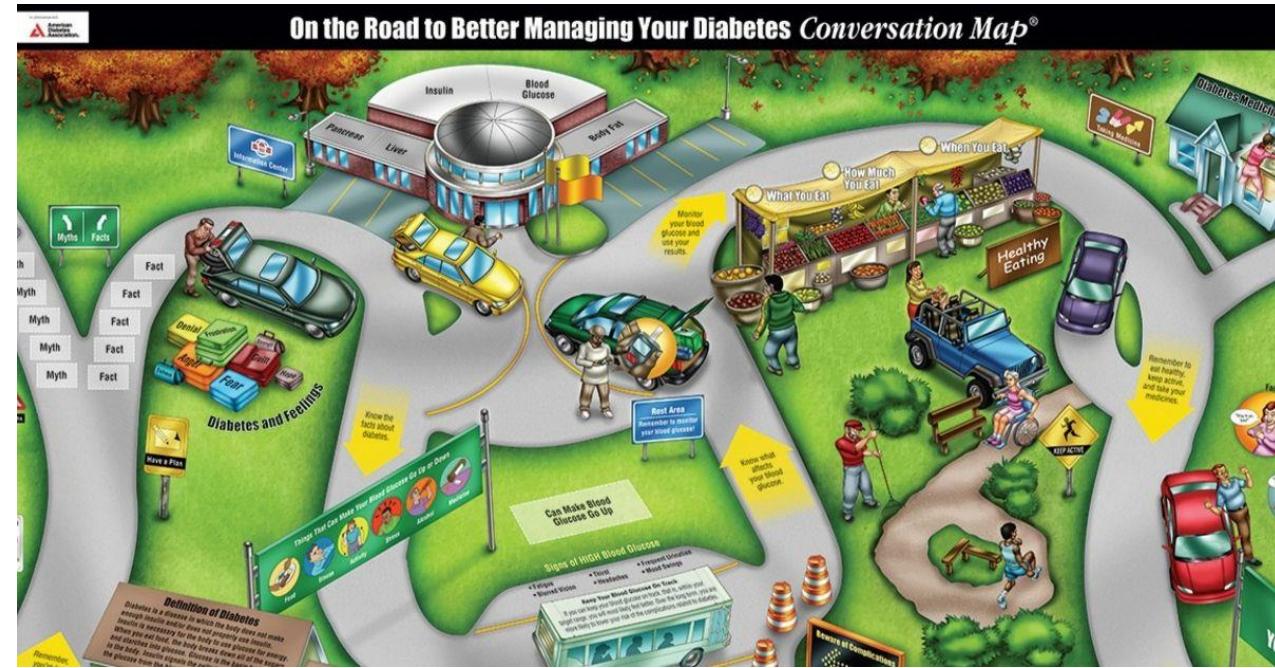
2023 brings new goals

- Centered on 18wk curriculum, similar to DPP
- Multi-generational, young family centered and youth focused
- Priority given to those with pre-diabetes.
- If financial opportunities arise, we will offer to entire tribal community and presented as education for chronic conditions while maintaining a focus on diabetes prevention.
- Diabetes Day camps offered to adults
  - Outings to the Old Forest and local beach to re-establish connection with traditional foods, environment, native plant identification, seaweed identification and their uses.
  - Maintain cultural customs within the programming by tribal members for participants.

# Prevention Programs at the Tulalip Health Clinic

Thoughts to better serve our Tribal communities:

- Utilizing the tool, *Conversation Map* by Healthy Interactions
  - Design a new map utilizing the DPP curriculum for small group interaction
  - Started using in 2014 for patients with T2- highly successful and well supported by our patient population.
  - Maps were tailored to fit Tribal lands
  - Healthy Interactions first collaborated with Navajo Nation
- Reframing the word 'Fidelity'
  - Some find it hard to stay committed to a 16wk program due to family related concerns and having to make choices within the community for other events related to sports, school and church related activities





# **SDPI DIABETES PREVENTION PROGRAM**

## **SDPI Diabetes Prevention Program**

### **Next Steps:**

- The DPP should be shared with all Tribes via the DPP Toolkit regardless of whether they have a SDPI grant
- Create a Centers of Excellence style training as this program is exceptional and has proven best practices!
- CDC should support the Grandfathering of the Tribal SDPI's DPP with the Recognition Program so all participating Tribal Nations are “Fully Recognized” and hence their States could follow Oregon’s Medicaid payment method.