

North Texas Community Health Collaborative

Diabetes Strategic Plan

2012 – 2015

Dallas Fort Worth Hospital Council Foundation

Population and Public Health Research

Community Health Collaborative

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Dear Partner:

The North Texas Community Health Collaborative recently completed the North Texas Diabetes Strategic Plan, 2012 – 2015. This document provides an outline of the strategies and actions being conducted to make change in the areas of diabetes prevention and treatment. Many local organizations and institutions have made a commitment to collaborate in this work and to impact the lives of our North Texas community.

This Strategic Plan will:

- Promote prevention, education, and collaboration to reduce diabetes related disparities
- Improve surveillance and monitoring in North Texas
- Facilitate partnership among systems and sectors engaged in the community
- Encourage healthy community development and healthy individual choices
- Provide ongoing education for providers and community on new research and resources

Please join us in spreading the message that addressing the challenges and complications of diabetes is a priority in North Texas.

Sincerely,

Larry Tubb
Senior VP, Cook Children's

Kristin Jenkins, JD
President, DFWHC Foundation

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Diabetes in North Texas

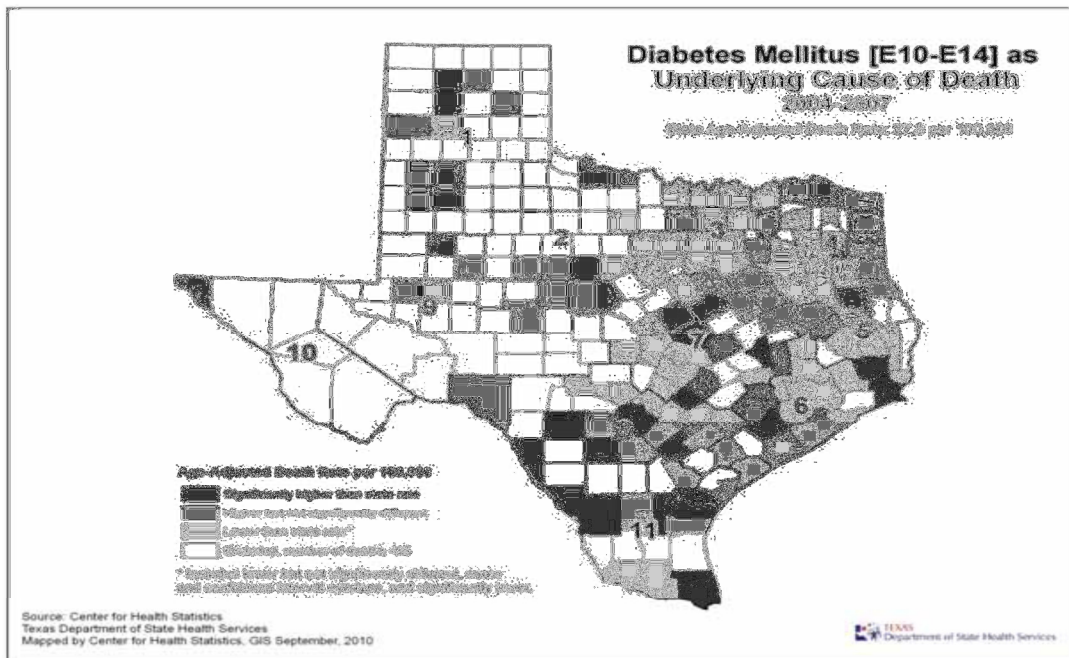
Background

Diabetes is a serious health condition with significant consequences for individuals, families, communities, and institutions. The two main types of diabetes are called type 1 and type 2. Additionally, there is another type of diabetes experienced by pregnant women called gestational diabetes, as well as pre-diabetic populations of individuals with higher than normal blood glucose levels. While type 1 cannot be prevented, type 2 diabetes can be prevented or delayed through lifestyle and environmental changes.

In the years 2002 - 2007, diabetes was the sixth leading cause of death in the state of Texas. Compounding that statistic is the issue of under-reporting on death certificates leading to a likely higher mortality rate. The 2009 Behavior Risk Factor Surveillance Survey (BRFSS) estimates that among adults in Texas, the prevalence of diabetes is higher among males, non-Hispanic blacks, 45-64 year olds, and those adults without a high school diploma (see Table 1). Overall, the prevalence rate for diabetes is slightly higher than that of the national average, 9.3% as compared to 9.1%.

Table 1. Texas 2009 BRFSS Diabetes Breakdown

		95% Confidence Interval
Diagnosed Diabetes Prevalence by Gender		
Male	10%	(8.6 – 11.5)
Female	8.6%	(7.8 – 9.6)
Diagnosed Diabetes Prevalence by Race and Ethnicity		
White, non-Hispanic	8.0%	(7.2 – 8.9)
Black, non-Hispanic	14.4%	(11.0 – 18.7)
Hispanic	9.7%	(8.1 – 11.5)
Other	9.2%	(5.7 – 14.5)
Diagnosed Diabetes Prevalence by Age		
18-29 Years	0.7%	(0.2 – 2.6)
30-44 Years	5.2%	(3.8 – 7.1)
45-64 Years	13.7%	(12.2 – 15.3)
65+ Years	20.7%	(18.7 – 22.9)
Diagnosed Diabetes Prevalence by Educational Attainment		
No High School Diploma	11.2%	(9.2 – 13.7)
High School Graduate	10.2%	(8.7 – 11.9)
Some College	10.3%	(8.4 – 12.5)
College +	7.1%	(6.0 – 8.4)



Complications

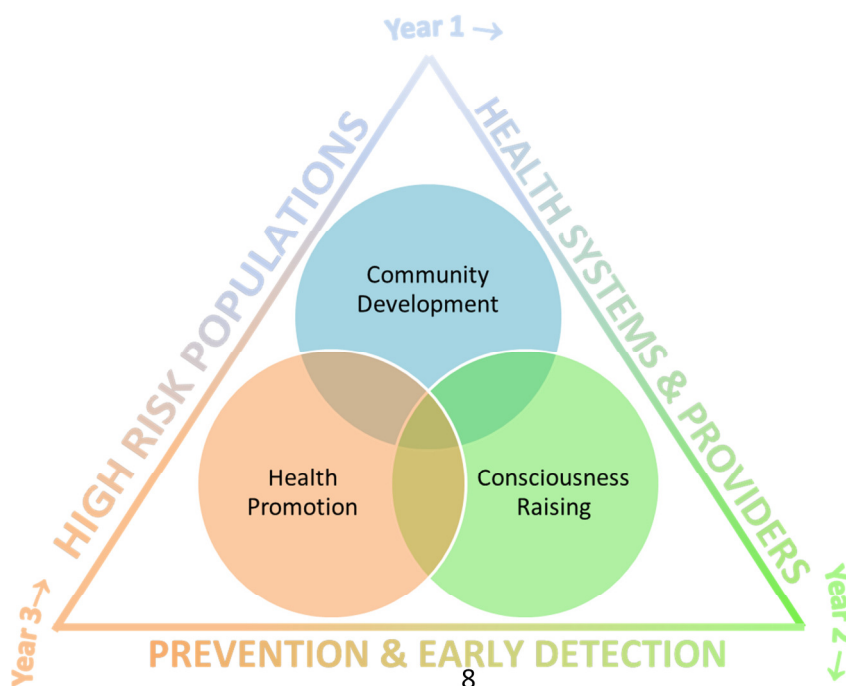
Diabetes also results in serious health consequences. The most common associated health problems include eye complications (glaucoma, cataracts), foot and leg complications (neuropathy, ulcers), heart disease, hypertension, hearing loss, and mental health issues.

There is a substantial cost associated with diabetes as well. In Texas, it is estimated that while the direct medical cost of diabetes is \$216,500,000, the total direct and indirect costs are approximated at \$341,900,000. In congressional districts 32 and 26 of Dallas and Tarrant Counties, the total costs are \$341,900,000 and \$328,300,000, respectively. Indirect costs include such factors as absenteeism, reduced productivity, and loss of productive capacity due to mortality.

Strategic Plan – Model and Framework

Creating interventions to address the improved diabetes care and prevention will be most successful when incorporating a wide variety of approaches to the social determinants of health. Based on the strengths of our Collaborative, the selected approaches were selected because they are evidenced based, align with a change approach that is complimentary to the strengths of the Community Health Collaborative. In this way, we feel that the following approaches best fit the needs of the partnership.

- Environments
 - Epidemiology and Surveillance
 - Advocacy and Policy
 - Early Detection and Prevention
 - Health Communication and Public Awareness
 - Health Systems and Providers
 - Population-Based Community Interventions
 - Populations with Increased Risk of Diabetes and Related Complications
- Strategies:
 - Consciousness Raising
 - Social Action
 - Community Development
 - Metabolic Screening
 - Health Promotion
 - Media Advocacy
 - Environmental Change



OVERALL GOAL: To reduce the impact of diabetes in North Texas by coordinating resources and engaging partnerships through a comprehensive involvement of stakeholders to increase opportunities for healthier choices with sustainable results.

		Key Approaches		
		Community Development	Consciousness Raising	Health Promotion
Strategy 1: Increase awareness and capacity of health systems and providers to understand and act on the social, behavioral, and environmental determinants of diabetes				
Action Steps	1. Provide continuing education and/or discussions about barriers to diabetes prevention and management, how to reach high risk populations, how to work in different settings, and how to integrate effective practice strategies into different practice styles	X	X	
	2. Increase number of local health providers that apply for recognition from CDC's National Diabetes Prevention Program		X	
	3. Convene potentially competing groups of diabetes stakeholders to identify and address common goals for diabetes care and education	X		
Strategy 2: Create opportunities for communities affected by diabetes, as well as local institutions, to develop understanding of the social and structural factors influencing diabetes				
Action Steps	1. Coordinate training sessions on social determinants of health, race, culture, and socioeconomic status to further understand regional health disparities	X	X	
	2. Develop collaborative relationships between service providers and community members	X		X
	3. Develop a urban neighborhood map, including food access and future community planning/zoning information	X		
Strategy 3: Improve data availability, coordination, and utilization of pre-diabetes and diabetes metrics				
Action Steps	1. Collect and monitor information on regional diabetes prevalence and incidence	X	X	
	2. Develop and disseminate sector based economic impact assessments of regional diabetes trends that highlight the long-term economic, workforce, and societal costs of diabetes		X	
Strategy 4: Coordinate and support culturally appropriate and evidenced based interventions that encourage prevention and early detection				
Action Steps	1. Educate partners about cultural competencies and resources available through other stakeholders (promotoras, faith based, multi-lingual)	X		X
	2. Dissect and quantify the interpretations, experiences, and perceptions of community members and health providers around diabetes prevention and management information		X	

Initiative Planning Model and Timeline

This plan will be annually re-evaluated annually by the Community Health Collaborative to determine if modifications to the priorities are needed. Consequently, this strategic plan will be refined as necessary with appendices to reflect updates and to inform all partners of the plan revisions. Ongoing evaluations will be conducted throughout the strategic planning period. The results of these assessments will be published for review.

Year 1	Jan	<ul style="list-style-type: none"> • Complete Strategic Plan and publish • Obtain endorsements • Create Strategic Plan committee infrastructure
	Feb	<ul style="list-style-type: none"> • Identify two zip code geographies (Dallas and Tarrant County) • Coordinate meeting with local officials • Assessment of active community partners
	Mar	<ul style="list-style-type: none"> • Identify potential continuing education trainers and experts • Identify surveillance dataset and indicators (3.1) • Publish online information
	Apr	<ul style="list-style-type: none"> • Contact health providers about CDC recognition (1.2)
	May	<ul style="list-style-type: none"> • Conduct training (community focused) (1.1)
	June	<ul style="list-style-type: none"> • Begin design of community/provider perception surveys (4.2) • Publish online information
	July	<ul style="list-style-type: none"> • Begin modeling of urban neighborhood diabetes map (2.3)
	Aug	
	Sept	<ul style="list-style-type: none"> • Conduct training (regional) (1.3) • Publish online information
	Oct	<ul style="list-style-type: none"> • Convene community and provider training on social determinants of health (2.1)
	Nov	<ul style="list-style-type: none"> • Conduct community/provider assessment surveys (2.2)
	Dec	<ul style="list-style-type: none"> • End year evaluation • Publish online information

Get Involved

The success of this Diabetes Strategic Plan will be most successful in partnership with individuals, organizations, and community groups that have a strong interest in working to tackle the epidemic of diabetes in North Texas. By building on the innovative strategies and tools of our partners, we can collectively maintain the investment needed to improve the quality of life for those with diabetes and prevent others from developing the disease. The Community Health Collaborative encourages anyone with new ideas, current programs, or just an energy and enthusiasm for becoming involved to join this important initiative. There are many ways that you can become involved:

- Email or mail your completed endorsement form included in this report
- Contact us at communityhealth@dfwhcfoundation.org with your interest
- Visit the North Texas Diabetes Initiative section of the Healthy North Texas Website (www.healthyntexas.org) to learn more about diabetes

Your involvement is so important and will help make a difference in the North Texas community!

North Texas Diabetes Strategic Plan Endorsement Form

Instructions: To endorse the North Texas Diabetes Strategic Plan, complete the form and send to the Dallas Fort Worth Hospital Council Foundation via email (communityhealth@dfwhcfoundation.org), fax (972-791-0284), or mail, (DFWHC Foundation, Attn: Summer Collins, 250 Decker Drive, Irving, TX 75062). Additionally, this form can be accessed online at (www.healthyntexas.org). Your endorsement may be publicly acknowledged on the Healthy North Texas website and in plan related materials.

1. I am endorsing the North Texas Diabetes Strategic Plan as an:

- Individual (Go to Question 6) Organization

2. Please provide your full name or full name of your organization or group.

3. What type of organization do you represent? (Select all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Coalition | <input type="checkbox"/> Public Health Department |
| <input type="checkbox"/> Health Plan/Insurer | <input type="checkbox"/> Healthcare Delivery |
| <input type="checkbox"/> Retail/Business | <input type="checkbox"/> Government Agency |
| <input type="checkbox"/> Work Site/Employer | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Communication/Media | <input type="checkbox"/> School/College/University |
| <input type="checkbox"/> Faith Community | <input type="checkbox"/> Other: _____ |

4. I will provide a link from my organization's website to the North Texas Diabetes Strategic Plan.

- Yes No

5. What activities can you and/or your organization help with to accomplish our goals?

Contact Information (the following will be kept confidential)

Name: _____

Organization: _____

Position/Title: _____

Mailing Address: _____

Phone: _____ Email: _____

Website: _____

References

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