Community Diabetes Project

San Antonio, Texas is struggling with an unprecedented diabetes epidemic – one which touches the lives of almost everyone who lives in or works in our community. In 2014, the Behavioral Risk Factor Surveillance System (BRFSS) estimates put the adult diabetes prevalence rate at 14.2% in Bexar County compared to 10.6% in Texas and 9.0% in the United States. An additional 12.6% of the Bexar County adult population has been diagnosed with pre-diabetes, putting them at increased risk for developing full blown diabetes. These studies undercount the true number of diabetics because many people do not know they have the disease. Unofficial estimates have put the prevalence rate at closer to 20%. People who have diabetes are at increased risk of serious health complications including blindness, kidney failure, heart disease, stroke and loss of toes, feet, or legs. Obesity and physical inactivity are two factors involved in increasing diabetes rates that we can change to lower our risk. Unfortunately, the rate of overweight (39%) and obesity (32%), which are also extremely high in San Antonio (BRFSS 2014) put our residents at increased risk for diabetes and many other health problems.

In October 2013, in response to this costly and challenging issue, the City of San Antonio's public health department (Metro Health) responded by implementing a comprehensive three pronged initiative. This initiative called the *Community Diabetes Project* included the implementation of the Stanford Chronic Disease/Diabetes Self-Management Program by Metro Health staff, the implementation of the YMCA's Diabetes Prevention Program in partnership with the YMCA of Greater San Antonio, and finally the establishment of the San Antonio Diabetes Collaborative. The cornerstone of the Community Diabetes Project is the formal partnership that has been established with the YMCA of Greater San Antonio. This has allowed San Antonio the ability to tackle both the prevention of diabetes for those at risk, and the self-management of diabetes for those already diagnosed.

Within the *Community Diabetes Project*, Metro Health is responsible for implementing the Stanford Chronic Disease/Diabetes Self-Management Program for individuals living with diabetes and their family members/caregivers. The Stanford Disease Self-Management Programs are staff intensive six –week long, two and a half hours per week process driven workshops that are meant to build patients' self-efficacy in managing their chronic conditions. Metro Health has a team of five staff that co-facilitates the weekly workshops thus building a network of peer support for the participants. The project aims to improve disease management outcomes by always expanding the number of locations and courses offered as well as to increase the number of certified lay-leaders and trainers throughout the community. The ultimate goal of the workshops is to improve the physical and emotional health of participants through increased self-efficacy while reducing health care costs in targeted neighborhoods with the highest incidence of chronic disease.

Metro Health established a sub-contract with the YMCA of Greater San Antonio to implement the National YMCA Diabetes Prevention Program (YDPP). With support and training from YMCA of the USA, the YMCA of Greater San Antonio has been able to replicate the YDPP in order to help those at high risk of developing type-2 diabetes adopt and maintain healthy lifestyles by eating healthier, increasing physical activity, and losing a modest amount of weight. The YDPP has a 12-month duration, which begins with an intensive 16 weekly core sessions and is followed by 8 months of monthly maintenance sessions. Together, these weekly and then monthly sessions help reduce the participants chances of developing diabetes.

The *Community Diabetes Project* is provided free of charge throughout the city of San Antonio, with an emphasis on neighborhoods within the central urban core which experience a high burden of diabetes and pre diabetes within geographic disparity areas. These areas correspond with those sectors of the city with higher percentages of minorities (Hispanic and African American), low educational attainment and household income, along with high rates of uninsured or underinsured.

The *Community Diabetes Project* is funded by the Texas 1115 Medicaid Waiver. Since launching the program in October 2013 the project has maintained an annual operating budget of \$952,700, providing \$500,000 to the YMCA of Greater San Antonio each year. Both the Stanford Disease Self-Management Programs and the YDPP are offered free to the community through this funding. During the first year of the project 1,500 individuals were enrolled and participated in either the Stanford Disease Self-Management program or YDPP. During the second year of implementation the number increased to over 1,700 participants.

All enrollment metrics during our first two years of program implementation were met. Most importantly, the programs were successful in reaching the intended target population for the Texas 1115 Medicaid Waiver which included the Medicaid, low-income, uninsured population (30% of all participants reported having Medicaid; 76% were at or below 200% of the federal poverty level; and 23% of all participants reported not having health insurance).In terms of program completion/retention, over 60% of participants completed theStanford Self-Management Program workshops, and over 80% were retained in the YDPP. Metro Health also reported an increase in self-efficacy among participants of the Stanford Self-Management Programs, and the YDPP showed an increase in average weekly physical activity minutes to 108 minutes, and 3.3% weight loss for participants.

There have been a number of lessons learned over the course of the *Community Diabetes Project*. One of the first challenges was branding. Metro Health and the YMCA collaborated on branding the Diabetes Prevention and Control initiative, however marketing all three programs together posed some challenges. For example the YDPP program participants were eligible for a YMCA membership incentive. When multiple programs were presented together, individuals often confused the details and participants expected a YMCA membership for participation in the Stanford Self-Management programs as was available to YDPP program participants. One lesson learned was to offer similar incentives for program participants when promoting the programs together. Thus, towards the end of the first year of implementation, individuals who completed a Self-Management Program workshop were eligible for a 2-month YMCA membership.

Another lesson was learned regarding marketing. Metro Health began implementation with marketing the diabetes workshops as the Diabetes Self-Management Program. This title did not work well to engage the general public. Instead, Metro Health began advertising the Diabetes Self-Management Program workshops through street banners and commercials with a simple message, "Living with Diabetes? Get it in Control". This worked well to generate interest in the Diabetes Self-Management Program workshops.

Additional lessons learned to increase participant enrollment include scheduling workshops at locations where potential participants are already meeting or where they reside,

such as senior nutrition sites and apartment complexes, including San Antonio Housing Authority and Section 8 properties. Also when recruitment activities coincide with a high volume event, such as a health fair or food pantry day and staff provide reminder phone calls to individuals who express interest in attending a workshop, recruitment increased considerably. What's more, Metro Health staff was given both individual and team goals for monthly and annual enrollment metrics. Progress towards meeting these ambitious goals was provided to staff on an ongoing basis through graphs and other visual aids. This motivated staff to increase the number of workshops scheduled and participants enrolled in the Self-Management Programs significantly with enrollment increasing from about 360 to over 1,200 participants in six months, from April to September 2015.

With two years of successful implementation achieved, the *Community Diabetes Project* is poised to expand its reach within the community. Looking forward, the YMCA of Greater San Antonio has already committed to increasing its reach to 5,000 annually in response to the tremendous number of adults with pre-diabetes in San Antonio. In addition, Metro Health has taken the lead in creating the Diabetes Collaborative, a partnership of hospitals, health institutions, medical providers, and community based organizations utilizing the "Collective Impact" model to address the problem of pre-diabetes in San Antonio. As the convener, Metro Health hopes to increase local resources addressing pre-diabetes, leverage change within the healthcare systems to better diagnose and treat pre-diabetes, and create a community that supports healthy lifestyles including healthy eating and increased physical activity to reduce the burden of diabetes in San Antonio.