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Nez-Lizer applaud three-year reauthorization of the Special Diabetes Program for Indians to help address health issues on the Navajo Nation

WINDOW ROCK, Ariz. – Navajo Nation President Jonathan Nez and Vice President Myron Lizer commend the three-year reauthorization of the Special Diabetes Program for Indians, which was established in 1997 to help combat the growing epidemic of diabetes among Native Americans by providing funding for treatment and prevention. The reauthorization was included in the $2.3 trillion omnibus appropriations package passed by Congress on Dec. 21 and signed into law by President Trump on Sunday.

“The Navajo Nation and many other tribal nations have benefited greatly from the success of the Special Diabetes Program for Indians over the years. The funds and program are critical tools in the fight against diabetes for the Navajo people, especially when we are fighting COVID-19, which has proven to be especially devastating for many people with underlying health conditions such as diabetes. The program has improved the quality of life for many and saved many lives. The three-year reauthorization also provides long-term stability for the program, which is important for long-term planning and strategizing. We thank the members of Congress, Navajo Department of Health, Indian Health Service, National Indian Health Board, and many other advocates who continue to support the program,” said President Nez.

The Special Diabetes Program for Indians supports over 300 Indian Health Service, tribal, and urban Indian programs in 35 states, which has led to significant advances in diabetes education, prevention, and treatment on the Navajo Nation. Tribal leaders across the nation have identified the program’s flexibility to be a strong element of SDPI’s success because it enables grantees to adapt each program for their community. President Nez stated that the program empowers tribal nations to make decisions at the local level, to choose best practices, and adapt the program to be culturally appropriate.

“Over the last few years, the Special Diabetes Program for Indians has received short-term extensions, so it’s very uplifting and great to see that the program will continue for the next three years with the support of the Trump Administration and Congress. SDPI is one of the most successful public health programs for tribes and continues to make a positive difference in the
lives of our Navajo people. Every time President Nez and I met with our congressional leaders and our federal partners, we made it a priority to advocate for the Special Diabetes Program for Indians,” said Vice President Lizer.

American Indian and Alaska Native adults are three times more likely to get diabetes compared to others. The death rate due to diabetes for American Indian and Alaska Native is 2.5 times higher than the general U.S. population.

“Continued federal investment in the Special Diabetes Program for Indians is essential for saving lives and improving diabetes health care outcomes for this country’s first people. The national and regional support for this program provides tools and trainings that help build a strong workforce under the Navajo Department of Health. The program’s employees are skillful in providing culturally appropriate services and care,” added President Nez.

As a direct result of SDPI, a recent study found that the prevalence of diabetes in American Indian and Alaska Native adults decreased from 15.4% in 2013 to 14.6% in 2017. A lower rate of diabetes means more American Indian and Alaska Native can live healthy lives, free of diabetes and the diseases that are worsened by diabetes, including kidney failure, eye disease, and amputations. Fewer cases of diabetes also conserves federal spending by the Indian health system. In 2017, it was estimated that medical costs attributable to diabetes was approximately $9,601 in excess medical cost due to diabetes per person.

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