



American
Diabetes
Association®

Health Equity Impact Report 2023



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Our health care system is complex and sometimes fragmented, leaving some with challenges accessing needed health care. 136 million Americans are living with diabetes or prediabetes, and those living in under-resourced communities are more likely to develop diabetes and experience associated complications. This is why the American Diabetes Association® (ADA) has embarked on a journey of transformative change. We believe everyone deserves equitable access to diabetes prevention, care, and treatment, so addressing health equity is woven into everything we do.

We envision a world where health isn't dictated by race, income, ZIP Code, age, education, or gender. This vision is the cornerstone of the ADA's Health Equity Bill of Rights. It affirms the fundamental human right to health, and through our initiatives, we strive to bring this right to every individual. This report for 2023 is a narrative of hope, determination, and unwavering commitment.

In our ongoing fight to end diabetes, we will continue to work every day to ensure everyone has access to the best possible diabetes care, and most importantly, work to prevent diabetes.



Charles Henderson
Chief Executive Officer



Charles Henderson
Chief Executive Officer

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The right to access insulin and other drugs affordably.

The right to healthy food.

The right to insurance that covers diabetes management and future cures.

The right not to face stigma or discrimination.

The right to avoid preventable amputations.

The right to participate in clinical trials without fear.

The right to stop prediabetes from becoming diabetes.

The right to a built environment that does not put you at greater risk for getting diabetes.

The right to the latest medical advances.

The right to have your voice heard.



Food Access and Nutrition Insecurity

Context

Food and nutrition access are important parts of preventing and living well with diabetes. Yet 20% of Americans with diabetes don't have regular access to healthy foods. On Chicago's South Side, over 500,000 people grapple with limited access to nutritious food. The prevalence of diabetes looms larger here, with some neighborhoods reflecting a staggering 20% of residents living with the condition, compared to the city average of 11%.

Action

In this backdrop, a partnership blossomed between the ADA and Dion's Chicago Dream (DCD), with vital support from the Baxter International Foundation. Through this collaboration, we provide weekly deliveries of fresh fruits and vegetables to the residents of Chicago's South Side along with diabetes education and diabetes-friendly recipes. We are also advocating to maintain access to and funding for critical federal programs, SNAP, WIC, and school meals to ensure families and children that rely on these services continue to receive them.

Impact

In 2023, DCD's weekly deliveries were provided for 1,000 households—impacting over 5,000 individuals—transforming the narrative from food scarcity to security. The program has been more than a provider of meals, it's been a catalyst for community empowerment. Over half a million pounds of fresh produce have found their way into the homes and hearts of Chicago families for over two and a half years.



500K
Residents of South Side of
Chicago have limited access
to nutritious food



1,000
Households provided for by
DCD weekly deliveries

Context

Technology to help people manage diabetes, such as continuous glucose monitors (CGMs) and automated insulin delivery systems, can improve the lives and health of people with diabetes. For millions of people living with diabetes, CGMs provide significant, potentially life-changing benefits for day-to-day diabetes management and, in turn, may delay or prevent serious comorbidities, hospitalizations, and even death. The ADA's research shows that those from under-resourced communities consistently lack access to lifesaving CGMs.

In Ohio, 12% of adults live with diabetes, well above the national average of 9.3%. In Franklin County, the challenge deepens, with adult diabetes prevalence tipping over 20% in some ZIP Codes. Here, the narrative intertwines with economic hardship—nearly 62% of residents live below 200% of the federal poverty line and life expectancy lingers at 65 years, a stark contrast to the broader Columbus area.

Action

The U Got This! program embodies the ADA's ninth principle in the Health Equity Bill of Rights. Its mission? To dismantle barriers to cutting-edge CGM technology and provide comprehensive diabetes self-management education and support (DSMES) with a focus on the Medicaid population. In partnership with Abbott and the National Center for Urban Solutions, the ADA launched the U Got This! pilot in Franklin County. The program equipped 116 individuals living with diabetes with CGMs and six months of wraparound wellness coaching.

Impact

Participants reported significant improvements in their A1C and glycemic levels, attributable to consistent monitoring with a CGM and supportive programming that encouraged physical activity and healthy eating. Beyond the metrics, there was a tangible shift in their quality of life, including improved eating habits, increased physical activity, and overall feeling more in control of their diabetes.



116

people received a CGM
and wellness coaching



Eye Health Access

Context

In a world blurred by the shadows of diabetes-related eye disease, racial and ethnic minorities are disproportionately affected by diabetes-related retinopathy and diabetes-related macular edema and are 2.3 times more likely to develop significant visual complications from diabetes. Early detection and treatment of diabetes-related eye disease can dramatically reduce severe vision loss.

Action

In the face of this challenge, the ADA, with support from Genentech, formed an eye health equity program. This alliance was a shared vision to elevate the importance of tackling diabetes-related eye disease. We kicked off a pilot in Birmingham, Alabama, in the heart of the Diabetes Belt. Together, we worked alongside community partners to identify and remove barriers to eye care. Once barriers were identified, they were confronted with innovative solutions. The local community's deep involvement was pivotal, igniting a movement of change and setting a precedent for what can be achieved when collective effort and passion unite.

Impact

The first year of this initiative has been a story of triumph and transformation. Over 400 eye exams were conducted within the community. Anecdotally, we heard emotional stories from people who never had an eye exam before and experienced improved vision after treatment. Impressively, over 800 individuals completed eye health pledges, and a vast reservoir of educational resources was disseminated to 2,000 health care professionals, spreading knowledge and empowerment.



400

eye exams conducted
in community



800

people completed
the Eye Pledge

Mapping Health Equity: Local Stories, National Change

Context

Those in Black and Hispanic/Latino communities are over 75% more likely to be diagnosed with diabetes compared to non-Hispanic white people, and American Indians/Alaskan Natives are almost twice as likely. Not only do these communities face a disproportionately higher risk of diabetes, but they also have a higher risk of diabetes-related complications. Thus, the need to fight diabetes in these communities is urgent. Grounded in the seventh Health Equity Bill of Rights, the ADA seeks to halt the progression from prediabetes to diabetes.

Action

Enter the Collaboration for Equitable Health, powered by Bank of America, a four-year initiative in 11 cities which brings together the ADA, the American Cancer Society®, the American Heart Association®, and the University of Michigan School of Public Health. It aims to improve health outcomes in communities of color, specifically focusing on heart disease, cancer, stroke, and diabetes. The ADA has taken the lead on programming in Washington, DC; Denver, CO; and Albuquerque, NM to battle health disparities related to these conditions.

Project Power, a no-cost lifestyle program, has been a catalyst for empowering adults and children in these locations to take control of their health, reduce diabetes risk, and thrive. The ADA also developed free training for community health workers (CHWs) to gain knowledge and mastery over diabetes management. The training includes four 15-minute modules, each a trove of interactive learning through videos, readings, and knowledge checks.

We are also equipping community members to be advocates with policymakers. Through advocacy training, we are empowering people to advocate for policies that improve community health.

Impact

This collaboration has built a robust team across partner organizations, adding 20 new dedicated professionals to its ranks. Through community listening sessions and strategic partnerships, the collaboration has amplified the voices of those it serves, ensuring community insights are at the heart of its approach. More than 90 grassroots organizations and health clinics have received grants, fueling interventions that directly address the health challenges of these communities.

Each city tells a unique story, but the theme is universal—community impact. The Collaboration for Equitable Health is more than a series of programs, it's a movement toward a future where health is a right, not a privilege, irrespective of ZIP Code or background. Here is the impact we made in a few cities in the first year:





Mapping Health Equity: **Albuquerque, New Mexico**

Albuquerque, New Mexico

In Albuquerque, where a significant Native American population resides, the ADA encounters a unique blend of cultural and health challenges. With many people living far from supermarkets and lacking basic access to healthy food and health care, the city's health landscape is a complex mosaic. The ADA's initiatives delve deep into these communities, addressing diabetes in an area where it's not just a health issue, but a social one that's deeply rooted in economic and cultural factors. In 2023, the ADA partnered with the Boys & Girls Club of Central New Mexico to implement Project Power during the club's summer programs in Albuquerque's South Valley, Edgewood, Moriarty, the town of Bernalillo, and Santo Domingo Pueblo.

Adult Diagnosed Diabetes Prevalence Estimates

9.5%
CITYWIDE

12.6%
ZIP CODE 87108

13.9%
ZIP CODE 87105

Life Expectancy

LOW OF
67.9 years

in or near the International District and La Mesa areas (ZIP Code 87108)

HIGH OF
89.2 years

in or near the Antelope Run area (ZIP Code 87111)

Approximately nine miles separate these areas with the lowest and highest life expectancies.

Denver, Colorado

Denver's story is one of vibrant diversity, with its Latino community making up 30% of the population. Yet, beneath this cultural richness lies a health disparity—diabetes rates and economic challenges are significantly higher in certain ZIP Codes. Vuela for Health, which focuses on the Latino community, is breaking down barriers in access, from language to socioeconomic hurdles. The launch of Project Power with Vuela for Health targets both youth and adults, embracing a future where childhood obesity and type 2 diabetes are no longer the norm.

Adult Diagnosed Diabetes Prevalence Estimates

6.9%

CITYWIDE

10.9%

ZIP CODE 80219

10.2%

ZIP CODE 80216

Life Expectancy

LOW OF
72.2 years

in the Valverde neighborhood

HIGH OF
85.9 years

in the Hilltop neighborhood

Approximately six miles separate these areas with the lowest and highest life expectancies.





Mapping Health Equity: **Washington, DC**

Washington, DC

In the heart of the nation's capital, life expectancy varies drastically. A mere nine miles apart, it ranges from 62.2 to 90.7 years. In Wards 7 and 8 as well as the eastern parts of Ward 5, diabetes rates soar above the city average. Many neighborhoods in these wards are food deserts and have the highest obesity prevalence in the district. Here, the ADA is partnering with the Leadership Council for Healthy Communities (LCHC), DC Greens, and Exodus Treatment Center. The LCHC has trained multiple CHWs to increase their knowledge of diabetes and diabetes management to best support the communities they serve. They have also helped train and support people in the area to become long-term champions for change through advocacy 101 training and the DC-area Project Power for adults program.

Adult Diagnosed Diabetes Prevalence Estimates

7.7%
CITYWIDE

11.8%
EASTERN PART
OF WARD 5

(ZIP Code 20018 only)

12.7 to 13.5%

WARDS 7 AND 8

(ZIP Code 20019, 20020,
and 20032 only)

Life Expectancy

LOW OF
62.2 years

in areas of southwest DC

HIGH OF
90.7 years

in areas in northwest DC

Approximately nine miles separate these areas with the lowest and highest life expectancies.

Professional Education

When it comes to health care access, people in under-resourced populations may not always have access to a consistent point of care or care team. Thus, it is important to educate a variety of health care professionals on the treatment options available. Here are some of the health equity topics we educated health care professionals on in 2023.

HEALTH CARE TOPICS	PARTNER/SUPPORTER
Clinical Trial Diversity	Walmart
Gestational Diabetes and Maternal Health Disparities	Blue Cross Blue Shield
Diabetes-Related Eye Diseases	Genentech



The ADA's fight for health equity includes tremendous advocacy work at federal and state levels that positively impacts people affected by diabetes and prediabetes. Our nearly half a million Diabetes Advocates from across the country raise their voices in support of ADA policy efforts. And we won't back down until everyone affected by diabetes has the care they need to live and until health equity is the standard in health policy and in every health care provider's office. In 2023, the ADA was a driving force behind several policy wins for health equity:

- **Insulin affordability:** We saw tremendous progress in our quest to make insulin affordable for the 7.7 million Americans who rely on it to survive. The ADA has been the leading voice advocating for insulin affordability and is working to ensure all people with diabetes have access to the care they need. The ADA led the charge to enact cost-sharing limits on insulin in half of all states and DC, and the first-ever federal copay cap in Medicare. The three major insulin manufacturers also followed suit by announcing programs to limit costs for insulin.

While we have made great progress, there is still more to do to ensure everyone has access to affordable insulin and that recently implemented policies and programs become permanent.

- **Technology access:** As mentioned earlier in this report, CGMs provide significant, potentially life-changing benefits for diabetes management and, in turn, avoid or delay serious comorbidities, hospitalizations, and even death. Yet we know under-resourced communities have less access to CGMs. The ADA led advocacy efforts that resulted in greater access to CGMs for those in Medicare, Veteran's Affairs, and in more than 10 state Medicaid programs, including the most populous states in the U.S.

- **Amputation prevention:** Every three and half minutes, someone in America undergoes a diabetes-related amputation, and Black Americans with diabetes are 50% more likely to experience a lower limb amputation compared to their non-Hispanic white counterparts. Approximately 85% of these amputations are preventable. In response, the ADA formed the Amputation Prevention Alliance (APA) with leading health organizations, professional groups, clinical experts, policymakers, and leaders in the diabetes community aimed at preventing diabetes-related amputations.

In 2023, the APA held its first summit, Preventing Diabetes-Related Amputations in America: A Solutions Summit, bringing together a diverse group of stakeholders, including policymakers, leading clinicians, patients, those representing clinical organizations, and patient advocacy groups to highlight challenges that have led to an increase in the number of diabetes-related amputations and opportunities for action.

Advocating for Health Equity

The ADA's advocacy efforts helped to reintroduce the Amputation Reduction and Compassion Act in 2023. The legislation:

- Creates a peripheral artery disease (PAD) education program aimed at primary care professionals
- Establishes coverage for PAD screening services for at-risk beneficiaries of Medicare and Medicaid
- Requires the development of quality metrics to prevent amputations
- Develops a pilot program to support major amputation prevention, including through patient risk modification and management, early screening and detection, surveillance, testing, and treatment for PAD and other conditions that can lead to an amputation

- **Nutrition and weight management:** There is a strong link between type 2 diabetes and obesity with up to 53% of new cases of diabetes related to obesity each year. Unfortunately, as with diabetes, communities of color face greater disparities in both the prevalence of obesity and access to needed treatment. The Centers for Disease Control and Prevention (CDC) estimates that over 49% of Black and over 45% of Hispanic/Latino adults have obesity. These alarming trends continue in children with over 24% of Black and 26% of Hispanic/Latino youth having obesity. Obesity rates are the highest amongst families with the lowest income and levels of education.

The ADA has long been an advocate for addressing the social determinants of health that make healthy living a challenge. In 2023, the ADA continued to advocate for safe, walkable communities and access to programs and services that support local food access. We also increased our advocacy to have obesity recognized as a medical condition and the corresponding need to have access to science-based treatment and services.

The medical treatment for obesity is reviewed in the ADA's *Standards of Care in Diabetes* and includes recommendations for:

- Lifestyle change services or programs which include nutrition counseling and physical activity, like the National Diabetes Prevention Program (National DPP)
- Medications and metabolic surgery, if recommended

Unfortunately, most individuals lack health insurance coverage for these science-based interventions.

The ADA is working to address these access challenges by focusing on state and federal health care programs including Medicare and Medicaid. In 2023, the ADA achieved obesity treatment coverage in four state programs and is actively advocating for increased access in state programs across the U.S. The ADA is also working to advance legislation in Congress through the Treat and Reduce Obesity Act that would improve Medicare beneficiaries' access to obesity treatment.



Achieving health equity will take all of us raising our voices, providing resources, and educating others. The ADA identified opportunities to foster current and future leaders in raising awareness about diabetes and our fight to ensure everyone has access to the best possible diabetes care.

- **Collegiate Ambassador Program:** The ADA introduced this program as part of our national partnership with Delta Sigma Theta Sorority, Inc., which has approximately 350,000 members worldwide. Six spirited collegiate ambassadors were selected from North Carolina Agricultural and Technical State University, Hampton University, Davidson College, Xavier University, Alabama Agriculture and Mechanical University, and Florida Agricultural and Mechanical University.

These undergraduate students, hailing from diverse STEAM backgrounds, pledged to ignite a spark of diabetes prevention and awareness on their campuses. They each organized at least two diabetes-focused events last fall, weaving together education, the ADA's 60-Second Type 2 Diabetes Risk Test (risk test), and a network of resources.

In a few short months from the program's launch, the ambassadors have already inspired hundreds of people to take the ADA's risk test. Their efforts rippled out, touching hundreds more, elevating their awareness of diabetes and positioning the ADA as an expert resource of reliable information. The ADA's Collegiate Ambassadors are not just students, they're torchbearers leading the way for young adults' fight against diabetes across the nation.



- **Health Disparities Committee:** The ADA's Health Disparities Committee consists of over 20 dedicated volunteers who focus on addressing type 2 diabetes in high-risk and under-resourced populations. They are on the ground in communities providing education and training in the fight against diabetes. In 2023, these volunteers convened a work group to award and designate the Top 10 Health Disparities Related Abstracts that were accepted into the 83rd Scientific Sessions and they provided mentorship to the members of the Emerging Leaders in Health Care Program.
- **Emerging Leaders in Health Care Program:** Launched at the ADA's 83rd annual Scientific Sessions, a group of bright, aspiring students of color from Minority Serving Institutions, each with a desire to make a difference in the world of health care, gathered as the initial class of the ADA's Emerging Leaders Program. Through this program, they are provided with mentorship and comprehensive training to help them strive toward their goals of delivering health equity. They are welcomed into the ADA's Scientific Sessions, not just as attendees, but as active participants bringing fresh perspectives and innovative ideas to the forefront.

These students have embarked on a remarkable journey with Project ECHO™ Diabetes, a collaborative endeavor led by the University of Florida and Stanford University. This program reaches across over 40 Federally Qualified Healthcare Centers, each a haven for communities often left on the fringes of health care.

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FEDERALLY QUALIFIED
HEALTHCARE CENTERS WERE
REACHED BY PROJECT ECHO™

Strategic Alliances

While the ADA has a sharp focus on fighting health disparities, we can't do it alone. It takes partners across the health care ecosystem to strive for health equity. We have formed strategic alliances with health equity organizations to move our shared mission forward.





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