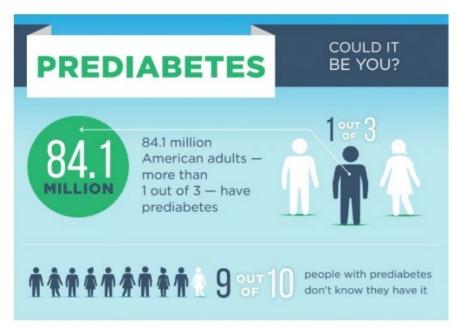
Extension Programming to Enhance Urban Well-Being

Case Study Series



University of Idaho Extension Diabetes Prevention Program Southwest and Central Idaho

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This case study series is a supplement to program snapshots featured in the Extension Programming to Enhance Urban Well-Being chapter of *Extension Education and the Social Sciences*Maria Rosario T. de Guzman and Holly Hatton, University of Nebraska-Lincoln

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Program Overview – University of Idaho Extension Diabetes Prevention Program (UI DPP)

National, state, and county data from the Centers for Disease Control and Prevention (CDC) and Idaho Department of Health data on diabetes and pre-diabetes demonstrate that one in three United States adults are prediabetic. The University of Idaho Extension Diabetes Prevention Program (UI DPP) is offered in southwest and central Idaho to urban and rural adults with pre-diabetes. This type of program has been provided nationally since 2010 and began in Idaho in 2017. The program is nationally recognized by CDC. It is delivered locally in-person and statewide via distance learning.

Urban Context

Idaho has a large land mass but relatively small population and has a strong agriculture history. Idaho is considered primarily rural and many of the urban areas border if not encompass rural areas. During the past 10 years the state has experienced unprecedented growth that has brought many opportunities and challenges. Over half the state's population is now located in more urban areas and the needs of residents are shifting to include urban issues and priorities.

Primarily urban populations in southwest Idaho including Ada and Canyon counties; Ada with the largest state population of 469,966 residents, followed by Canyon County at 223,499. The areas the program serves includes multiple cities, towns, universities and colleges, schools, and health districts. Working with many partner agencies and organizations adds more opportunity and complexity. This has also been compounded with an almost 20% growth in population from 2010-2020, with a continued forecast of 10% increase in population every five years.

The population in Idaho is estimated to be 93% white according to the United States census, however, with almost 20% in population growth the past 10 years, it is becoming more racially and ethnically diverse. The most diverse Idaho populations are in the more urban cities of Boise, Meridian, and Nampa which are within counties reached by the program.

Strategic Approach to Urban Engagement

Programming

The UI DPP is delivered in several modalities, including in-person, online via distance learning, and a hybrid of both. The UI faculty and staff work with community partners to offer the program at worksites, health clinics, recreation facilities, libraries, and other sites. The faculty and staff who deliver the program participated in a CDC National Diabetes Prevention Program (NDPP) training to become certified DPP Healthy Lifestyle Coaches. As certified coaches, the faculty and staff deliver the NDPP Prevent T2 curriculum, a total of 26 lessons, in a year-long series. The UI DPP follows the CDC program model and evaluation methods. The NDPP program is research- and evidenced-based. A multi-center research study of the program showed that people at risk for developing diabetes can prevent or delay the onset of diabetes by 58 percent if they lose 5-7 percent of their starting body weight and achieve 150 minutes of physical activity each week.

Positioning

The NDPP is marketed nationwide and locally in each state by departments of health and/or organizations delivering the program. The CDC and state agencies use a variety of methods to promote and market the program including television, social media, print, and radio. The Idaho

State Department of Health and Welfare (IDHW) uses television, social media, print, and partners with organizations to provide resource and referrals to the program. The UI DPP has received many referrals from health care providers and employee wellness program via the IDHW. The UI DPP is marketed in various ways that include social media, print, and word of mouth from participants, health care providers and employee wellness managers.

Personnel

In Idaho, an Extension educator, has provided statewide leadership and coordination of the UI DPP, including coach training, grant writing, collecting, and reporting all the data to the CDC. This educator, along with four other educators and four staff who are certified DPP health lifestyle coaches deliver the program in south and central Idaho.

County support staff in the Extension offices provide program support with advertisement, registration, and payment. Partner agencies also provide support with advertisement, recruitment, and assistance with program registration. The grant funding received for the program is managed through the University of Idaho Office of Sponsored Program and Extension office budget support personnel.

Partnerships (external)

The UI DPP started in partnership with IDHW, who reached out to UI Extension to inquire about the possibility of UI becoming a NDPP provider. In 2017, the IDHW DPP manager met with the UI Extension educator to discuss the fact that Southern Idaho was lacking providers of the NDPP, despite having the largest population in the state. Based on this the UI educator partnered with IDHW to train 12 new DPP healthy lifestyle coaches, eight of which were UI Extension faculty and staff. The IDHW has provided statewide leadership and coordination, bring both training and grant funding to providers of NDPP throughout the state. Through this partnership the UI DPP faculty and staff have received both support and funding to develop and grow the program. In addition to the IDHW, UI Extension has partnered with over 20 state agencies, employers, schools, health organizations and individuals to market, recruit, and offer the program at their sites or via distance learning.

Impact

Program Impacts

According to the National Institutes of Health, more than one in five health care dollars and one in three Medicare dollars are spent on diabetes and estimates show that diabetes costs the United States' economy \$322 billion annually. In Idaho, diabetes is a common, growing disease, and approximately 8.4 percent of the state's population have diabetes. In addition, the financial burden on Idaho's health care system in 2012, both direct and indirect, was approximately \$1.32 billion.

In response to this growing healthcare crisis, the CDC developed the NDPP, a year-long evidence based healthy lifestyle program. In 2016, the Centers for Medicare and Medicaid Services certified research that the NDPP reduced medical spending and utilization in the Medicare population. The researchers found an average savings of \$278 per year for three years in the intervention group, and significant decreases in inpatient admissions and emergency department visits.

The specific outcomes and impact of the UI DPP are:

- Certified seven Extension educators, two program coordinators, and two staff as DPP Healthy Lifestyle Coaches
- Enrolled 200 participants in 18 cohorts, in five counties, 10 towns and cities
- Estimated health care savings of \$278 per participant a year for three years = \$166,800

Recognition

In 2019, the UI DPP received full recognition from the CDC and is now listed on the national registry. The Cooperative Extension National Diabetes Prevention Program (CENDPP) Workgroup received the National Extension Association of Family and Consumer Sciences, multi-state team 1st place national award. The program has been presented at four national and one international conference.

Closing Comments and Looking to the Future

Unique Aspects

Extension nationwide is pivoting to focus on health, and at a national level it has been stated that Extension may be in a position to do for "health" in the 21st century, what it did for "agriculture" in the 20th century; in other words, Extension as an organization can innovate, develop, and deliver new health outreach initiatives and programs.

Challenges

In starting this program, there were colleagues and leaders that stated that a year-long program may not be successful or sustainable. Extension programming is traditionally short term; a one-time class or presentation, a 1- to 8-week series, and some volunteer programs that have monthly trainings throughout the year. There has also been some reluctance to deliver DPP due to past experiences delivering diabetes education in competition with healthcare providers. In addition to this initial hesitancy, the current challenge is sustaining the program and developing a way to process health insurance reimbursement for it.

Related Programs

In 2017 when the UI DPP began, there were several other states offering the program, as well as a few local providers in Idaho. Other state Extension programs and local providers delivering the NDPP were contacted to get more information. The other states and providers shared great information on what work and how to get started.

Future

UI Extension is currently in its fifth year of the program and have enrolled over 200 participants in 18 cohorts, in 5 counties, 10 towns and cities. UI Extension applied to be a distance learning provider in early 2020, pre-COVID-19, and delivered two series of the program completely online, and four in a hybrid model. The hybrid model allows participants to be online or inperson dependent on space and required social distancing. Two online programs and two hybrid programs started in 2021. The process to pilot an online NDPP program "HabitNu" has begun. The team is hopeful this online platform will allow for an integrated DPP database, delivery, and payment method.

Recommendations

When starting a new program or approach that is not traditional to Extension, listen to and acknowledge the hesitancy and concerns from colleagues and leaders, but do not give up. Look for supportive leaders, colleagues, and stakeholders to champion any program or approach that fits your community needs, especially in urban programming. The Extension system and programs have historically been agricultural- and rural-based, but this is changing. As the population has shifted to living and working in urban areas, Extension professionals have begun to develop research, tools, and programs for the urban audiences they serve.

Multimedia Documentation/References

Impact Statement – https://www.uidaho.edu/extension/about/impacts

<u>National Diabetes Prevention Program</u> website with infographics, curriculum, data, participant, and provider information.

Contributor

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Extension

Bridget Morrisroe-Aman is an extension professional, dedicated to working with individuals, families, and communities to build healthy homes and environments. She has worked with children,

youth, and families in Extension programs for 20 years. Her work includes coordinating the Children, Youth, and Families At-risk program for five years and the Eat Smart Idaho program in the southern district for 11 years. Her current role in Extension is in the most urban area in Idaho, Ada County, as the Family and Consumer Sciences (FCS) Educator, Assistant Professor, focused on nutrition, health, and food safety.

Morrisroe-Aman leads the UI Extension Diabetes Prevention Program statewide and a multicounty Master Food Safety Advisor volunteer program. She also serves as an advisory board member for the Western Center for Metropolitan Extension and Research and is the Idaho representative for the National Urban Extension Leaders. She is dedicated to using her knowledge, experience, and training to develop and innovative existing and new programs to serve urban audiences in Idaho. The University of Idaho Extension is a department within the College of Agriculture and Life Sciences. Through a "statewide network of faculty and staff in 42 counties, three federally recognized tribes and nine College of Agricultural and Life Sciences research and extension centers, we work to transform knowledge into solutions that work."

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