

Diabetes Awareness Month

Diabetes is a chronic (long-lasting) health condition that affects how your body turns food into energy.

Your body breaks down most of the food you eat into sugar (glucose) and releases it into your bloodstream. When your blood sugar goes up, it signals your pancreas to release insulin. Insulin acts like a key to let the blood sugar into your body's cells for use as energy.

With diabetes, your body doesn't make enough insulin or can't use it as well as it should. When there isn't enough insulin or cells stop responding to insulin, too much blood sugar stays in your bloodstream. Over time, that can cause serious health problems, such as heart disease, vision loss, and kidney disease.

There isn't a cure yet for diabetes, but losing weight, eating healthy food, and being active can really help. Other things you can do to help:

- Take medicine as prescribed.
- Get diabetes self-management education and support.
- Make and keep health care appointments.

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Types of Diabetes

There are three main types of diabetes: type 1, type 2, and gestational diabetes (diabetes while pregnant).

Type 1 Diabetes

Type 1 diabetes is thought to be caused by an autoimmune reaction (the body attacks itself by mistake). This reaction stops your body from making insulin. Approximately 5-10% of the people who have diabetes have type 1. Type 1 diabetes can be diagnosed at any age, and symptoms often develop quickly. If you have type 1 diabetes, you'll need to take insulin every day to survive. Currently, no one knows how to prevent type 1 diabetes.

Type 2 Diabetes

With type 2 diabetes, your body doesn't use insulin well and can't keep blood sugar at normal levels. About 90-95% of people with diabetes have type 2. It develops over many years and is usually diagnosed in adults (but more and more in children, teens, and young adults). You may not notice any symptoms, so it's important to get your blood sugar tested if you're at risk. Type 2 diabetes can be prevented or delayed with healthy lifestyle changes, such as:

- · Losing weight.
- Eating healthy food.
- Being active.

Gestational Diabetes

Gestational diabetes develops in pregnant women who have never had diabetes. If you have gestational diabetes, your baby could be at higher risk for health problems. Gestational diabetes usually goes away after your baby is born. However, it increases your risk for type 2 diabetes later in life. Your baby is more likely to have obesity as a child or teen and develop type 2 diabetes later in life.

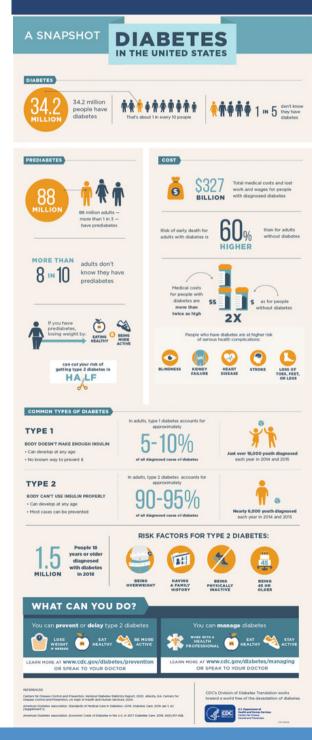
Prediabetes

In the United States, about 98 million adults—more than 1 in 3—have prediabetes. More than 8 in 10 of them don't know they have it. With prediabetes, blood sugar levels are higher than normal, but not high enough for a type 2 diabetes diagnosis. Prediabetes raises your risk for type 2 diabetes, heart disease, and stroke. But there's good news. If you have prediabetes, a CDC-recognized lifestyle change program can help you take healthy steps to reverse it.

DID YOU KNOW

About 38 million people in the United States have diabetes, and 1 in 5 of them don't know they have it.

About 98 million US adults—over a third—have <u>prediabetes</u>, and more than 8 in 10 of them don't know they have it.



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Advancing Health Equity

There are more than 34 million Americans living with diabetes, a disease that costs the U.S. more than \$327 billion per year. However, the disease does not affect all segments of the population equally.

"We have long known that health disparities exist among different populations based on social determinants of health (SDoH), such as demographics, race, ethnicity and other factors," explained Sree Chaguturu, Chief Medical Officer, CVS Caremark. "In recent years, it has become clearer that significant disparities also exist in access to health care and outcomes for diabetes."

Diabetes disease burden varies by community

Diabetes prevalence varies and research has shown that it affects minority communities disproportionately. American Indian or Alaska Native adults have the highest rate of diagnosed diabetes. The risk of being diagnosed with diabetes is 77 percent higher among African Americans and 66 percent higher among Latinos/Hispanics, according to the Centers for Disease Control and Prevention. Non-White Hispanics tend to be diagnosed with diabetes at younger ages and exhibit higher fasting glucose levels, decreased insulin sensitivity, increased insulin response, and more severe forms of diabetes complications.

Social factors such as education, employment insecurity, poverty, and access to nutritious food also all have a profound impact. Poverty has been shown to be a leading cause of type 2 diabetes. In fact, living in poverty can double or even triple the risk of developing diabetes and many minority groups are disproportionately affected by poverty. Among African Americans, the poverty rate is 21.2 percent and 17.2 percent among Hispanics, compared to 9 percent among non-Hispanic Whites.

Drivers of disparities in diabetes care

For people with diabetes, improving outcomes requires effective management. Here too, racial and ethnic disparities can be barriers to effective disease management.

- Affordability: ability for members to pay for their medications
- Awareness: knowledge of treatment options, healthcare system, and value of adherence
- Accessibility: proximity to and convenience of care and treatment through available channels.
- Trust: level of comfort and confidence patients have in healthcare channels available to them

Approaches to addressing disparities in diabetes care

It is difficult to overemphasize the importance of addressing the social determinants of diabetes given their profound impact on morbidity and mortality. What's more concerning is that many of these disparities appear to only get worse year after year. Clearly, addressing these disparities will help control rising health care costs.



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DEI Observances in November 2023

Native American Heritage Month, observed every November in the United States, has its roots in both grassroots advocacy and governmental recognition.

The journey toward a month-long celebration started with Dr. Arthur C. Parker, who was one of the first proponents for what was then termed "American Indian Day" and which was initially observed on the second Saturday in May 1916.

Several states adopted this day, but it wasn't until 1986 that President Ronald Reagan proclaimed a week in November then updated to "American Indian Week."

After concerted efforts from various Native American leaders, organizations, and Congressional allies, further recognition was established. In 1990, President George H. W. Bush took the initiative a step further by designating November with the title of "National American Indian Heritage Month". The name has varied over the years, with terms like "Native American" and "Alaska Native" being added as the term "Indian" is no longer appropriate usage.

Every year, the sitting U.S. President issues a proclamation, and events ranging from educational forums, museum exhibits, to cultural celebrations take place across the country.

This observance serves to honor the diverse cultures, traditions, and histories of Native Americans and to educate the public about the challenges they have faced both historically and in the present.

Links for more resources:

- Library of Congress: Native American Heritage Month
- National Park Service: Native American Heritage

Important Dates in November

- National Native American Heritage Month
- November 1-2 Día de los Muertos
- November 11 Veterans Day
- November 12 Diwali
- November 13-19 Transgender Awareness Week
- November 16 International Day for Tolerance
- November 17 International ERG Day
- November 20 Transgender Day of Remembrance
- November 30 Native Women's Equal Pay Day



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