Louisiana

Providing Diabetes Self-Management Education and Support Through a Health Care Clinic Serving Homeless People

Public Health Problem

In Louisiana, an estimated 230,691 adults — 7.1% of the state's adult population — had diagnosed diabetes in 2002. Diabetes was the fifth leading cause of death for Louisiana residents in 2001, and diabetes-related medical care in Louisiana exceeded $2 billion in 2000. Diabetes is of special concern for homeless people, who often are transient and lack financial resources and social supports. Because homeless people with diagnosed diabetes often lack access to routine health care and diabetes prevention and control programs, they usually end up in hospital emergency rooms in a crisis that could have been prevented. Education is direly needed for homeless people who have diabetes or prediabetes. Recent research shows that for people with prediabetes, who are at high risk for developing the disease, the onset of diabetes can be prevented or significantly delayed through modest changes in diet, weight, and exercise levels.

Program Example

The Louisiana Diabetes Prevention and Control Program partnered with the City of New Orleans Health Department's Healthcare for the Homeless Clinic to improve the clinic's ability to provide diabetes education to patients. This facility is the only full-service clinic in the area that serves homeless people, free of charge. Project Assist is a diabetes education program developed at the clinic to help patients manage their diabetes and improve their health status and quality of life. To be eligible to attend the sessions, individuals must be enrolled in a diabetes registry that monitors the health of homeless people. They can attend an individual or group session on glycemic control and complications of diabetes, self-monitoring, weight loss and exercise instruction, review of medications, diet instruction, or self-care questions. The program uses audiovisual aids (i.e., instructional pamphlets, personal care cards with a protective pouch, and a place mat with nutrition tips) and referrals to identified community resources. These interventions seek to improve patient compliance with treatment regimens, empower patients to take charge of their diabetes, and promote lifestyle changes. To determine how effective the sessions have been, patients' A1c levels are compared before entering the diabetes registry and after they complete the sessions.

Implications and Impact

By March 2003, the average A1c level for 153 project participants was 8.8%; this represents a 1% decrease for half of the homeless patients on the diabetes registry. In addition, 32% of these patients had at least one A1c check, and 38.6% had at least two A1c checks in the past year, compared with 15.75% and 25.5% in September 2001. Also in March 2003, more participants had had a foot examination and more had had an oral examination in the past year compared with the number in September 2001. By May 2003, 99% of participants had met diabetes management goals compared with 94.1% in September 2001. Project Assist is a successful example of how a state program can promote healthy behaviors and reduce needless disease and economic burden for homeless people with, or at risk for, diabetes.

Contact Information

Louisiana Department of Health and Hospitals • Office of Public Health • Diabetes Control Program
325 Loyola Avenue, Room 213 • New Orleans, Louisiana 70112 • Phone: (504) 568-7210 • Fax: (504) 568-7005
Web site: http://www.oph.dhh.state.la.us/chronicdisease/diabetes/index.html