

EMBARGOED UNTIL: Saturday, June 14, 2014, 10am PDT/1pm EDT

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***Cities for Life* Increased Community Support and Showed Improved Clinical Measures for People Living With or At Risk for Type 2 Diabetes**

- *During the 1-year program, patients showed statistically significant reductions in blood glucose levels, increased belief in their ability to self-manage their diabetes and improved perceptions of support, while the community showed statistically significant increases in diabetes awareness*
- *Toolkit now available can help other cities replicate model*

SAN FRANCISCO — The American Academy of Family Physicians Foundation announced today that the [Cities for Life](#) program, supported by Sanofi US, helped decrease blood glucose (HbA1c) levels and systolic blood pressure, increase patient belief in their ability to self-manage their disease and improve community awareness of diabetes and support for the disease by linking people living with diabetes from the physician's office to community-based diabetes management resources through patient navigators. The final program results were presented at the American Diabetes Association's 74th Scientific Sessions.

With nearly 26 million people living with diabetes in the U.S., new models for diabetes management are needed.^{i,ii} Launched on April 24, 2012 in Birmingham, *Cities for Life* tested a new model of diabetes management that incorporated key elements such as primary care, community leadership and resources, patient navigator and peer support, and diabetes self-management education. An online toolkit of best practices from the program is now available for other cities to implement the *Cities for Life* model.

"*Cities for Life* helps provide people living with diabetes a supportive environment that encourages healthy lifestyles and diabetes management," said Jane Weida, MD, president, AAFP Foundation. "We are proud of the successful *Cities for Life* model and our collaboration with Sanofi US, and we encourage other communities to use the toolkit to help with their diabetes management efforts."

"Outside of the few hours spent with their health care providers each year, people living with or at risk for diabetes are often on their own to manage the 24/7 disease," said Robert E. Ratner, MD, chief scientific and medical officer, American Diabetes Association. "The results from the *Cities for Life* program underscore the importance of providing patients support and resources within their daily lives. The program shows promise as an important model for helping people manage their diabetes."

The program integrated clinical and community components. The clinical component of the program included six local family medicine practices that referred 179 patients living with or at risk for type 2 diabetes to patient navigators. With special training and knowledge of resources within the Birmingham community, the patient navigators worked with patients to find appropriate community resources to help them manage their disease or reduce their risk of developing diabetes. Additionally, patient navigators helped encourage and assist patients in putting their self-management plans into daily practice, which emerging research is showing to be of great benefit.^{iii,iv,v}

The community component was driven by a Community Action Team of 80 local primary care, health, civic, business, faith and media organizations and mydiabetesconnect.com, a free searchable database of diabetes management resources. The Community Action Team worked together to help drive awareness of *Cities for Life* while also providing information for the website on community resources and local events that people living with or at risk for diabetes could utilize to manage their disease.

"We are truly encouraged by the positive impact that the *Cities for Life* program model has had on the Birmingham community," said Anne Whitaker, President, North America Pharmaceuticals, Sanofi. "This collaboration with the AAFP Foundation has helped us with our mission to provide people living with and at risk for diabetes the support they need to manage their disease every day."

Final results from *Cities for Life* are highlighted at the American Diabetes Association's Scientific Sessions in three separate abstracts:

- ***Cities for Life: Outcomes of Integrating Navigators in Diabetes Self-Management:*** This analysis shows outcomes of the patient navigation model. As part of the program, two patient navigators worked with six local primary care practices to contact patients over the phone and offer community programs that may help them manage or reduce their risk for diabetes. These linkages resulted in a clinically meaningful reduction in hemoglobin A1c and a trend in reduction in systolic blood pressure. Additionally, patients reported improved self-efficacy levels on a 1-5 scale.
 - Presenter: Natalia Loskutova, MD, PhD, AAFP National Research Network
 - Authors: Natalia Loskutova, Adam G. Tsai, Edwin B. Fisher, Debby M. LaCruz, Janet P. Turman, Andrea Cherrington, Sharon Hunt, T. Michael Harrington, Tamela J. Turner, Wilson D. Pace
 - Guided Audio Poster Tour
 - Poster presentation # 671-P, category Diabetes Education, Saturday, June 14, 2014 12:30 - 1:20 PM, Poster Hall D
- ***Cities for Life: Comprehensive Community Organization for Diabetes in Birmingham, Alabama:*** This analysis examines the results of the program at a community level, which included support from local government officials, primary care providers, patient navigators and voluntary health organizations, all coordinated through a broadly representative Community Action Team and a Steering Committee. Community survey results showed the program increased community awareness of diabetes and increased patients' perceptions of support.
 - Presenter: Edwin Fisher, PhD, Peers for Progress, American Academy of Family Physicians Foundation
 - Authors: Tamela Turner, Lisa Jones, Joanice Thompson, Andrea Cherrington, T. Michael Harrington, Wilson Pace, Natalia Loskutova, Edwin B. Fisher
 - Poster presentation # 707-P, category Diabetes Education, Monday, June 16, 2014 12:00 - 2:00 PM, Poster Hall D
- ***Cities for Life: Changing Discordant Perspectives Regarding Diabetes Management between Primary Care Providers and Patients:*** Data collected from patient and provider surveys conducted at program launch and conclusion revealed that patients, primary care

providers and community members in Birmingham do not share the same views regarding diabetes management. This analysis explores some of the discrepancies. For example, while primary care providers reported patients lack family support in managing their diabetes, patients and community members believe that knowledge about disease management and levels of family support are adequate.

- Presenter: Wilson Pace, MD, AAFP National Research Network
- Authors: Natalia Loskutova, Adam G. Tsai, Edwin B. Fisher, , Sharon Hunt, T. Michael Harrington, Tamela J. Turner, Wilson D. Pace
- Poster presentation # 708-P, category Diabetes Education, Monday, June 16, 2014 12:00 - 2:00 PM, Poster Hall D

For more information on implementing *Cities for Life* in your local community, visit www.aafpfoundation.org/citiesforlife/toolkit/ to download the *Cities for Life* toolkit. For more information about the *Cities for Life* program, visit www.aafpfoundation.org/citiesforlife.

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About the American Academy of Family Physicians Foundation

The AAFP Foundation serves as the philanthropic arm of the American Academy of Family Physicians. Its mission is to advance the values of Family Medicine by promoting humanitarian, educational and scientific initiatives that improve the health of all people. For more information, please visit www.aafpfoundation.org.

ⁱ Centers for Disease Control and Prevention. National Diabetes Fact Sheet, 2011. Atlanta, GA: U.S. Department of Health and Human Services; 2011. http://www.cdc.gov/diabetes/pubs/pdf/ndfs_2011.pdf. Accessed June 17, 2011. p.1,1,2,7.

ⁱⁱ American Diabetes Association. Factors Affecting Benefit/Harm of Intensive Glucose Control in Type 2 Diabetes Reported [press release]. June 16, 2009. P. 2, 1.42-44.

ⁱⁱⁱ Fisher, E. B., Boothroyd, R. I. et al. (2012). Peer support for self-management of diabetes improved outcomes in international settings. *Health Affairs*, 31(1), 130-139.

^{iv} Tang, T. S., Funnell, M. et al. (2014). Comparative Effectiveness of Peer Leaders and Community Health Workers in Diabetes Self-management Support: Results of a Randomized Controlled Trial. *Diabetes Care*, 37(6),1525-1534.

^v Thom, D. H., Ghorob, A. et al. (2013). Impact of peer health coaching on glycemic control in low-income patients with diabetes: a randomized controlled trial. *Annals of Family Medicine*, 11(2), 137-144.