



T1D
Exchange

HEAL Advisory Committee Meeting

7/20/23



Welcome and Centering

Agenda:

Time	Item	Facilitator
1:00-1:10 pm 10'	Welcome <ul style="list-style-type: none">• Welcome• Centering	Dr. Osagie Ebekozen Nicole Rioles
1:10-1:40 pm 40'	ADEPT Brainstorm <ul style="list-style-type: none">• Conference dates• Keynote speakers (four total)• Potential corporate partners• Timelines	Dr. Osagie Ebekozen
1:40-2:00 pm 20'	Food Insecurity <ul style="list-style-type: none">• T1DX-QI results	Emma Ospelt
2:00-2:20 pm 20'	Best Practices in Health Equity example sharing – University of Miami	Dr. Janine Sanchez
2:20-2:30 pm 10'	Updates and Close Out <ul style="list-style-type: none">• HEAL Advisors term 2023-2025• Summary of next steps• Next meeting 10/19, 1 PM EST	T1DX staff



ADEPT 2024 Conference Brainstorming

Achieving Diabetes Equity in Practice Today

First annual ADEPT Conference to scale and amplify collaborations to reduce diabetes health inequities

- Stand-alone event dedicated to diabetes health equity
 - Multiple facets of health equity
 - All types of diabetes
- Focus on practical solutions, tools, and best practices to advance health equity
 - Preparing for change
 - Transparency
 - Institution-level changes
 - System-level advocacy
- 300+ researchers, providers, and leaders in a two-day event

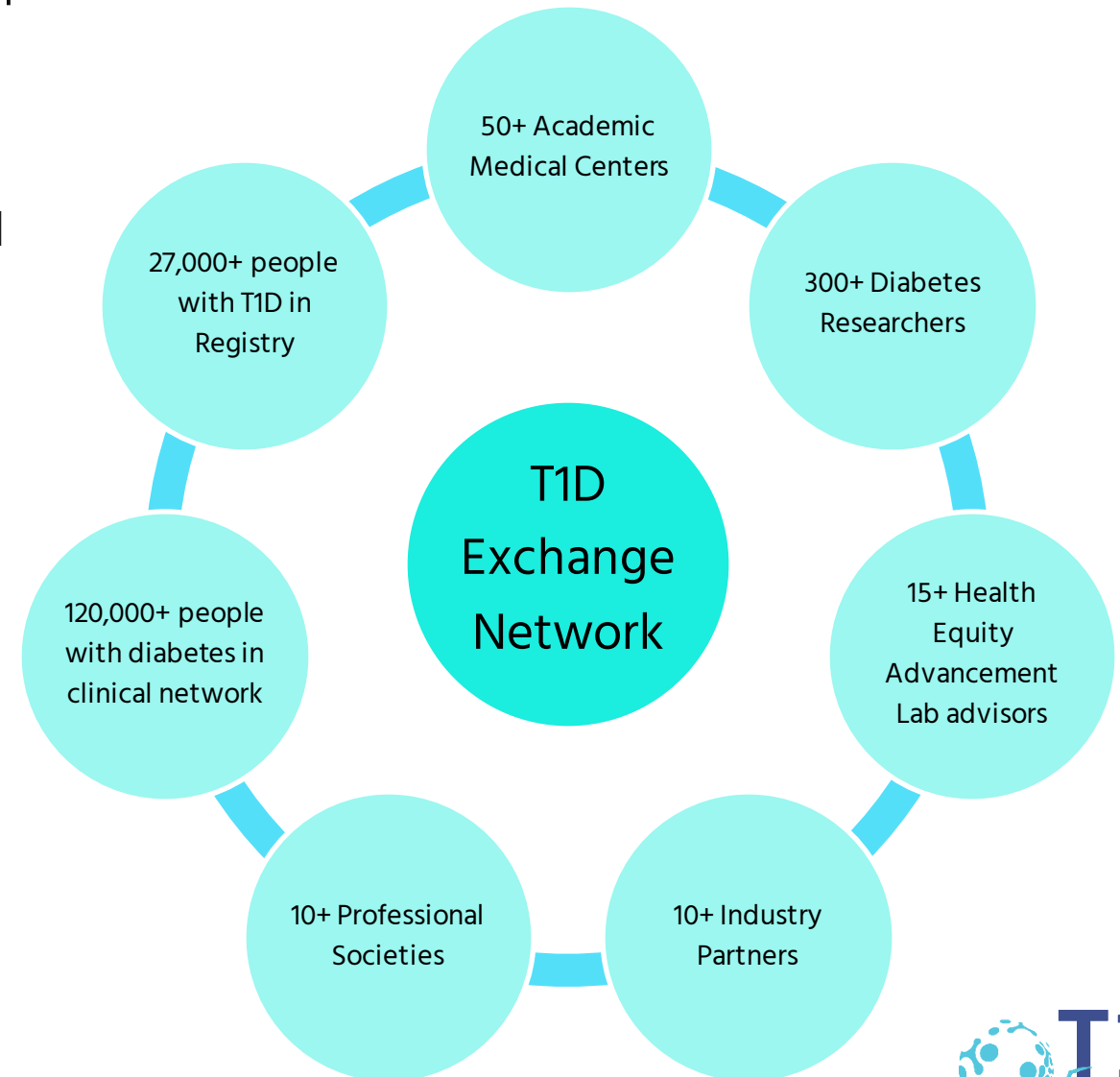
ADEPT Rationale

- In the US, over 11% of the population are living with diabetes, and an additional 96 million are living with prediabetes; the incidence is increasing
- Minoritized populations experience additional burden of disease due to health inequities, for example:
 - Compared to NHW PWD, Hispanic and NHB people with T1D have higher A1c levels¹, are 2.5 times more likely to have one or more DKA episodes and 2.5 times more likely to have had one or more SH events in the past 12 months²; and have twice the mortality rate³
 - American Indian and Alaska Native people are more likely to have T2D than any other racial group⁴, and Black and Hispanic patients are less likely to receive SGLT2is and GLP1as⁵
 - Lesbian/gay and bisexual men and women and transgender people may have a higher prevalence of T2D⁶
 - Refugee and immigrant populations have a higher rate of diabetes and are less likely to meet diabetes and blood pressure management goals than the general US population^{7,8}
 - Residents in distressed Appalachian counties are more likely to have diabetes⁹
 - Inequities exist in prevalence, screening, and complications from gestational diabetes¹⁰ and prediabetes¹¹

ADEPT Conference Convener: T1D Exchange (T1DX)

The T1D Exchange is well-suited to hold an event of this nature:

- T1DX has an extensive network of collaborating academic medical centers, industry partners, diabetes researchers, and PWD
- T1DX has demonstrated practical improvement to advancing health equity
- T1DX regularly convenes large learning sessions with hundreds of stakeholders



ADEPT – a stand-alone event

Diabetes health equity requires intentional, focused effort best achieved in a stand-alone event dedicated to tangible solutions and innovations

Existing conferences	T1D Exchange ADEPT Conference
Health equity is a theme or sub-theme in diabetes conferences	✓ Health equity is the focus
Health equity is presented as a broad topic across disease areas and is not diabetes-specific	✓ Diabetes health equity is the focus
Research-focused	✓ Practical solutions-focused based on research
General product demos	✓ Prioritize newest technology and innovations for equity

ADEPT Planning

ADEPT Conference Committee -T1DX-QI Health Equity Advancement Lab advisors

- Determine scope, objectives, target audience
- Planning, marketing, logistics
- Spearhead review of abstract submissions and CME content



ADEPT details

Learning Objectives:

- A. Share practical solutions to advancing diabetes health equity
- B. Demonstrate new product innovations to address health equity
- C. Build a collaborative network to advance health equity

Conference themes will be determined based on target population or solution type:

Marginalized Populations	Diabetes Types	Solutions Focus
Racial/ethnic diversity	Patients with type 1 diabetes	Preparing for change
LGBTQ+ patients	Patients with type 2 diabetes	Transparency
Immigrants	Patients with gestational diabetes	Institution-level changes
Patients living in rural areas	Patients with prediabetes	Systems-level advocacy

Two-day event will convene ~300 leaders from academic medical centers, insurance companies, pharmaceutical and technology companies, foundations, and national groups committed to impacting diabetes health equity

Why your sponsorship?

Sponsoring this event gives your organization:

- Brand exposure as a partner commitment to diabetes health equity
- Direct exposure to diabetes leaders and providers
- Opportunities to demo your products to a diverse healthcare audience

	Platinum	Gold	Silver
Speaking engagement opportunity to all participants	✓		
Sponsorship acknowledgment on the ADEPT website	✓	✓	
Exhibit hall access to lead product demonstrations during ADEPT conference meals	✓	✓	
Name badges	✓	✓	✓
Sponsorship acknowledgment in the ADEPT abstract booklet	✓	✓	✓
Number of ADEPT attendees	5	3	1
Cost	\$100,000	\$75,000	\$50,000

ADEPT brainstorming questions

Conference Dates

- March? April?

Keynote speakers

- Four speakers total

Corporate sponsors

- Proposed contacts
- Existing relationships

Timelines

References

1. Kirk JK, D'Agostino RB, Jr., Bell RA, Passmore LV, Bonds DE, Karter AJ, et al. Disparities in HbA1c levels between African-American and non-Hispanic white adults with diabetes: a meta-analysis. *Diabetes Care*. 2006;29(9):2130-6.
2. Majidi S, Ebekozi O, Noor N, Lyons SK, McDonough R, Gandhi K, et al. Inequities in Health Outcomes in Children and Adults With Type 1 Diabetes: Data From the T1D Exchange Quality Improvement Collaborative. *Clinical Diabetes*. 2021;39(3):278-83.
3. Health OoM. Diabetes and African Americans 2023 [Available from: <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=18>].
4. Prevention CfDCa. Advancing Health Equity 2022 [updated 4/6/2022. Available from: <https://www.cdc.gov/diabetes/health-equity/index.html#:~:text=American%20Indian%20and%20Alaska%20Native,cultural%20practices%20and%20Western%20science>].
5. Cai C, Woolhandler S, McCormick D, Himmelstein DU, Himmelstein J, Schrier E, et al. Racial and Ethnic Inequities in Diabetes Pharmacotherapy: Black and Hispanic Patients Are Less Likely to Receive SGLT2is and GLP1as. *Journal of General Internal Medicine*. 2022;37(13):3501-3.
6. Center NLHE. Diabetes Prevention and Management for LGBTQ People. 2019.
7. Integrated Care Management to Improve Diabetes Outcomes in Refugee and Immigrant Patients (I-Care). *Health Equity*. 2021;5(1):781-8.
8. Martinez-Cardoso A, Jang W, Baig AA. Moving Diabetes Upstream: the Social Determinants of Diabetes Management and Control Among Immigrants in the US. *Curr Diab Rep*. 2020;20(10):48.
9. Prevention CfDCa. Appalachian Diabetes Control and Translation Project 2022 [Available from: <https://www.cdc.gov/diabetes/health-equity/appalachian.html>].
10. Bower JKB, B.N.; Bose-Brill, S.; Kue, J.; Wassel, C.L. Racial/Ethnic Differences in Diabetes Screening and Hyperglycemia Among US Women After Gestational Diabetes. *Prev Chronic Dis*. 2019;16.
11. Fisher-Hoch SP, Vatcheva KP, Rahbar MH, McCormick JB. Undiagnosed Diabetes and Pre-Diabetes in Health Disparities. *PLoS One*. 2015;10(7):e0133135.



Food Insecurity

Emma Ospelt



Best Practice in Health Equity

Dr. Janine Sanchez

Updates and Close Out

HEAL Advisory Terms

Two-year terms:

- Oct 2021 – Oct 2023
- Oct 2023 – Oct 2025

Applications

- Current member can continue with a second term
- Application will be released in late summer
- Oct 2023 meeting be a 'handoff' between cohorts

Updates

- Next steps
- Operationalizing Racial Equity manuscript

Thank you

Next HEAL Advisory Committee meeting

- Thursday 10/19/23 1-2:30 pm EST