Celebrating 35 Years of Diabetes Care and Education

In 1986, nearly three percent of the population in the United States, or approximately 6.5 million people, were living with diabetes. The 1980s brought important advancements in diabetes care, recognizably the first blood glucose monitors available for home use. It was also an important time to formalize and validate a specific body of knowledge for the multidisciplinary healthcare practitioners who specialized in providing diabetes care and education.

Marjorie Cypress, PhD, MSN, NP, CDCES, was building a career in diabetes education and care in 1984, but there was no clear path or course of study to guide her. While considering what that career might look like, she found a group of like-minded individuals blazing a pathway to solve a growing health problem and establishing their role on the healthcare team.

“We joked at the time that we learned this field ‘in the street,’ focusing our energy on finding ways to contribute to our community and defining our chosen specialty day by day,” Cypress recalls.

Two years later in 1986, when the National Certification Board for Diabetes Educators (NCBDE) was launched, Cypress and her colleagues joined nearly 1,250 health professionals from around the country to sit for the inaugural Certified Diabetes Educator® (CDE®) examination.

Joining her in the first cohort of test takers was Debra Sidewater, CD-N, LMSW, CDCES. Sidewater says she “fell” into her role as a diabetes educator while working as a dietitian at Mount Sinai hospital, although she had a personal connection to diabetes. “We have a strong family history of diabetes,” she said. “I felt that the more I knew, the more expertise and knowledge I had, the better I could protect my own family as well as so many others who were struggling.”

Both Cypress and Sidewater recall the same feelings of pride inspired by the diverse group of professionals from all different backgrounds, locations, and hospitals who came together to take the exam for the first time.

“We all had the same goals and there was no question we all wanted to take the exam,” Cypress explains. “For me, it was about recognition in a specialized body of knowledge beyond my primary practice. The CDE® was new at the time, and we didn’t necessarily know the future of it, but we hoped it would become a gold standard in education and care."

Cypress and her fellow test takers were right.

There are nearly 20,000 currently certified professionals representing nurses, dietitian nutritionists, pharmacists, physicians, and many other disciplines. They share the common goal of advancing the specialty and providing essential care and education to people living with diabetes or pre-diabetes.

“I’m very proud to have been there at the beginning and I’ve treasured my time with the organization and my friends and colleagues,” Cypress, who later served as Chair of the NCBDE Board of Directors and served in numerous other volunteer leadership roles after her service on the Board, said.
The Certification Evolves
The field has changed significantly since the first examination 35 years ago requiring both the certification process and the organization to adapt as well. In 2009, NCBDE first offered computer-based testing, transitioning away from paper-based testing to allow more individuals to test and enhance the security of the process. In 2011, the organization joined social media platforms including Facebook and LinkedIn to expand the community of certified professionals. The ability to use an online platform to submit applications for renewal of certification via continuing education was first offered in 2014.

In 2016, the CDE® program received third-party accreditation from the National Commission for Certifying Agencies (NCCA). Accreditation recognized the program’s alignment to best practices for the development and delivery of a quality certification program. The program joined an elite group of more than 120 organizations representing over 270 programs that have received and maintained NCCA accreditation.

One of the most significant shifts, however, occurred from 2019 - 2020 when NCBDE and CDE® transitioned the name of the organization and credential respectively to the Certification Board for Diabetes Care and Education (CBDCE) and Certified Diabetes Care and Education Specialist (CDCES). The transitions were made to align the organization and certified individuals with that of the specialty updating its identification of the role of ‘diabetes educator’ to ‘diabetes care and education specialist’.

“As an organization, our goal was to contribute to the future vision for the profession and ensure CBDCE and the credential moved forward with that vision,” Sheryl Traficano, MBA, CAE, Chief Executive Officer of CBDCE, said. “The leadership focused on maintaining the standards of a quality certification program, while staying open to how the specialty and professionals we serve in a multi-disciplinary field can grow and change.”

Traficano and volunteer leaders serving on the Board have continued to shepherd the core principles of administering a quality, rigorous program that is also accessible to health professionals working in a role of diabetes care and education during the organization’s history. “The need for expertise in providing care and education continues to grow,” she said. “Understanding the needs of the stakeholders we serve, including the public, and continuing to support the quality of the profession as it changes over time are foundational to our strategic discussions.”

For Traficano, there are several projects in which this goal of balancing the quality of the profession with accessibility to certification have come sharply into focus. First, is the creation of the mentorship program in 2011. The program relies on nearly 150 CDCESs serving as mentors for individuals wishing to become certified. The mentors guide their development and provide them with an opportunity to obtain practice hours required to become certified. Recognizing the need for cost-effective solutions is also top of mind for CBDCE as they implement new changes.

“This is truly a group of compassionate people who are dedicated to a mission and self-direct themselves into service of a larger goal,” Traficano said. “They are committed to doing their best as a member of the person with diabetes’ care team and as an organization we strive to embody that same approach.”
**Envisioning the Future**

As CBDCE reflects on the accomplishments of the past 35 years, the organizational leadership stays focused on the future.

“As a Board, we begin every conversation with a reminder of our mission and core values,” Ben Klein, Chair of the CBDCE Board of Directors and Associate Director – Life Sciences at Optum Analytics, said. “The quality of the CDCES certification is our top priority, but we are expanding the reach and impact CBDCE has within the broader field.”

Klein credits the ability to balance quality certification with broader strategic priorities to his peers on the Board and staff team for the CBDCE. “There is strong sense of trust and a commitment to transparency and respect that exists among the leadership,” Klein explains. “It allows us to have honest, sometimes difficult, discussions about hard topics such as race, diversity, and access to healthcare while still staying committed to our core purpose.”

The result of these important conversations are new programs focused on diversity, equity, and inclusion, such as CBDCE’s scholarship program. The scholarship program is designed to increase the number of certificants and reduce barriers to becoming certified. It provides financial support to candidates in five different categories including diversity and inclusion, profession expansion, veterans and active military service, young professionals, and individuals working with under-resourced populations. With the initial launch of the program this year, more than 85 health professionals were awarded scholarships to support their efforts to become CDCESs.

Klein has ambitious goals for the organization’s future that rely on creativity and partnership. “CDCES has an important role in the diabetes and larger healthcare community, and we have a responsibility to building the pool of qualified specialists available to serve the growing need,” he said. “Commitment to our core purpose is crucial while also being open to new partnerships and projects that help us to better serve certificants and the public.”

Connecting with a community of other diabetes care and education specialists ranks high among the most valuable benefits of certification and a foundational value of the organization. For David Cook, BSN, RN, CDCES, seeking out the sense of community is the best advice he can give the next generation. “I always recommend finding a variety of mentors for new educators,” he said. “Drawing from a variety of viewpoints on medications, treatment modalities, and education and support styles can truly contribute to an effective style of practice.”

From the beginning, the inaugural class of certificants felt like they were part of a bigger movement.

“We have expanded our role to capture not just the education but the support and care that we provide. Where we were 35 years ago as we took the first exam to where we are today is an incredible thing to think about,” Joan Bardsley, MBA, RN, CDCES, FAADE, former Chair of the CBDCE Board and inaugural test taker, said. “We all start as one professional sitting at our first conference or in our first committee meeting, but it quickly becomes clear that we are part of a much larger movement, a much larger community, that is making a difference in people’s lives.”