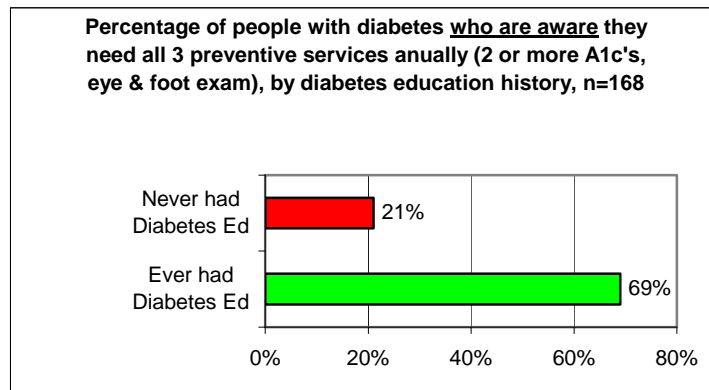


Community Diabetes Survey: Findings related to Diabetes Education

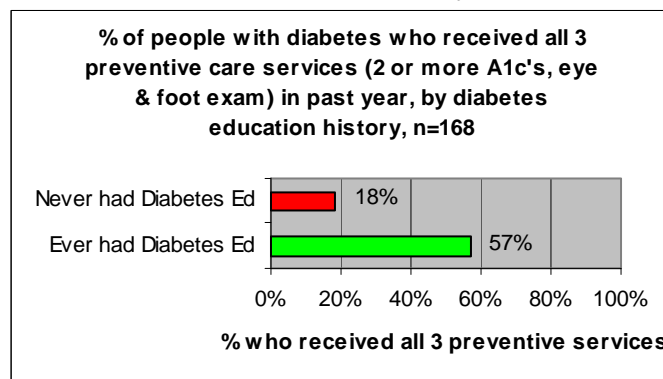
In November of 2007, the Northern Michigan Diabetes Initiative conducted a telephone survey of 1,000 adults (including 168 people with diabetes) living in the 11-county Grand Traverse region of Northwest Michigan. The purpose of the study was to gain a better understanding of the significance of diabetes in the local area, and to identify priorities for educational efforts. (Results presented are age-adjusted and weighted to account for sampling design)

- Overall, 67.4% (95% CI: 58.1%-75.6%) of adults in the 11 counties who have been diagnosed with diabetes report having received diabetes education, which is statistically higher than the State rate of 54.6% (95% CI: 51.2%-57.9%).
- Women and men were equally likely to have received education; people between the ages of 45 and 59 were more likely than those younger than 45 years and older than 60 years to have received education.
- Respondents who reported having received diabetes education were no different from those who have not received diabetes education with respect to years of formal school completed.
- 16% of respondents who reported not having received diabetes education had no health care coverage, while only 4% of people who did receive education were uninsured.

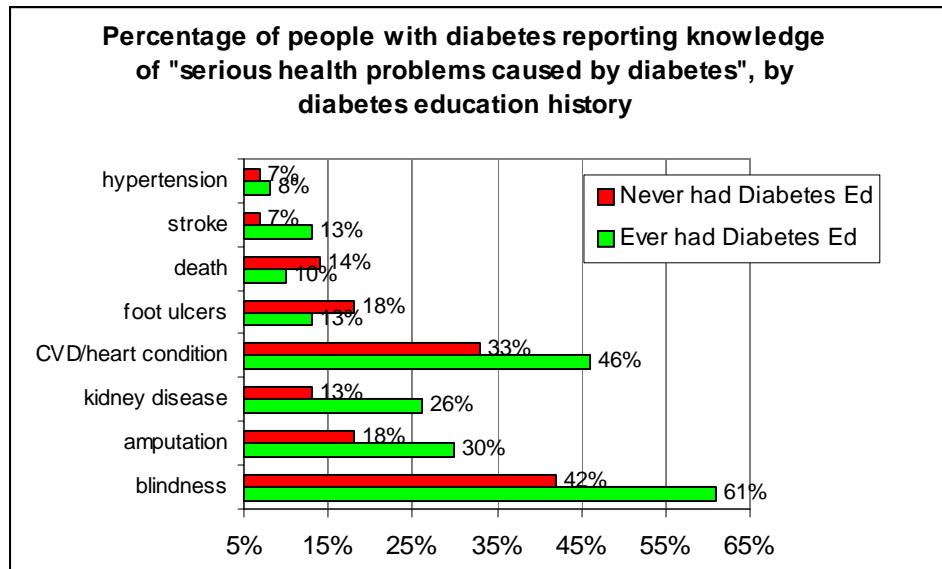
Diabetes Education is Highly Associated with Greater Awareness of Needed ADA-Recommended Preventive Care Services: People with diabetes who reported ever receiving diabetes education were more than three times more likely to report that they were aware that they needed all three primary ADA-recommended preventive care services ($p < .01$)



Diabetes Education is Highly Associated with Obtaining ADA-Recommended Preventive Care Services: In addition to having significantly higher levels of awareness of the need for services, people with diabetes who reported ever receiving diabetes education were three times more likely to actually obtain all three primary ADA-recommended preventive care services ($p < .01$). This result is consistent with State and national studies. The top reasons people gave for not having received services were: don't feel they need it, concern about insurance coverage, and unaware of the need. Diabetes education is an effective way to address at least two of these issues.



Greater Awareness Needed of Serious Health Problems Caused by Diabetes: People who had received diabetes education were more likely than people without a history of diabetes education to cite cardio vascular disease, kidney disease, amputation and blindness as serious diabetes complications. However for both groups, knowledge of hypertension, one of the most common complications, was very low.



Diabetes Education is Highly Associated with belief in effective strategies for controlling blood sugar: There was high recognition of effective strategies for controlling blood sugar among all people with diabetes. People with a history of diabetes education were more likely to agree that losing weight and taking medication would definitely help lower blood sugar than people who have never received diabetes education, however, this difference was small.

