

Benefits of Credentialled Diabetes Educators to people with diabetes and Australia

Q & A - Benefits of Diabetes Education

For many years policy makers have accepted that diabetes education had some value, but there has not been a comprehensive independent evaluation of the value of diabetes education available. To resolve this problem, the Australian Diabetes Educators Association (ADEA) commissioned an independent company, Deloitte Access Economics, to develop a report on the topic.

The report, *Benefits of Credentialled Diabetes Educators to people with diabetes and Australia,* provides a comprehensive insight into the value of diabetes education programs today. CEO of the ADEA, Dr Joanne Ramadge, answers some key questions about the report and the value of diabetes education.

Q: What is the value of Diabetes education?

More than \$3.9 billion could be saved in health costs each year if diabetes education programs were made available to all 1.37 million Australians with diabetes according to the *Benefits of Credentialled Diabetes Educators to people with diabetes and Australia* report.

Q: How much would it cost to deliver diabetes education to every person with diabetes in Australia?

The report found that in 2014 it cost on average \$173 to provide a comprehensive diabetes education program for each person with diabetes. That amounts to a cost of \$237 million to provide diabetes education to every Australian with diabetes. That might sound like a lot of money, until you consider that for every dollar spent on diabetes education, you can save \$16 in healthcare costs. This is because diabetes education helps people with diabetes to manage their condition, meaning that fewer people are likely to develop complications that can result from poorly managed diabetes.

Diabetes education can deliver \$2,827 in annual healthcare savings per person. Once you take the \$173 cost of delivering the education program into account, that means net savings of \$2,654 on average for every Australian with diabetes who gets access to a diabetes education program.

Even more importantly, diabetes education can improve thousands of lives. More than half of Australians with diabetes don't get access to diabetes education. When diabetes is inadequately managed, people with diabetes can experience a wide range of health complications, and some die as a result.



Q: How can you prove that diabetes education works?

The report demonstrates the effectiveness of diabetes education. A number of studies conducted around the world have demonstrated that people are able to manage their condition better if they receive diabetes education. In contrast, people with poorly managed diabetes frequently experience a range of health issues such as kidney disease, eye disease and heart disease.

The World Health Organisation has endorsed diabetes education as a cost effective way to improve quality of life and reduce healthcare costs.

Q: Who should pay for diabetes education?

Out of pocket costs for patients are one of the main barriers to accessing diabetes education. Many private insurance companies do not cover diabetes education and Medicare funding is generally inadequate to cover all the needs of people diagnosed with diabetes – meaning many Australians must pay for their own diabetes education or do without.

The question should not be who should pay for diabetes education, but rather who is paying for the lack of diabetes education. The answer is that Australians are paying billions of dollars in taxes and private health premiums to pay for the treatment of conditions that arise because of the poor management of diabetes. That money could be saved if just a fraction of it was invested in diabetes education.

Governments and private health care providers all stand to substantially benefit from the savings that will result from expanded diabetes education programs. Hundreds of thousands of Australians will also enjoy improved health through better management of their diabetes. Expansion of diabetes education across Australia is a classic win-win for all concerned.

Q: Why increase funding for diabetes education when there is a shortage of diabetes educators?

There is a shortage of Credentialled Diabetes Educators in Australia, with the current workforce catering for only 57% of Australians with diabetes. This is because there is currently inadequate funding for diabetes education and it is not a priority in our health system.

Diabetes education is recommended as a cost-effective medical intervention by the World Health Organisation.

Credentialled Diabetes Educators are health professionals who have completed an undergraduate degree in a relevant discipline, a graduate certificate in diabetes education, 1,800 hours of practice in diabetes education and a six month mentoring relationship with an experienced educator.

This report demonstrates the effectiveness of these Educators and also the importance in expanding the number of jobs available, so that they can reach out to every Australian with diabetes.

Q: Whose responsibility is it to solve these problems?

Billions of dollars could be saved and thousands of lives improved if diabetes education was made available to every Australian with diabetes.

Virtually every Australian will know someone with diabetes or will have the condition themselves and it is therefore in the interests of every Australian to develop effective solutions so that people with diabetes have the knowledge to improve the management of their condition.

The Australian Government, as the custodian of Medicare, should work with private health insurers to examine the effectiveness of diabetes education for themselves. Once they do their sums, in the light of this new independent report, it would be hard to see an argument against making diabetes education universal for every Australian with diabetes.

In the meantime, Australians should ask their local MPs and their health insurance companies why they are wasting money treating conditions related to diabetes which could have been prevented through diabetes education. Even if you could set aside the human cost of struggling to manage a complex condition without access to certified educators, it is impossible to justify the financial waste. Lack of access to diabetes education is translating into higher taxes and higher health insurance premiums for every Australian.

Q: Why was the report commissioned?

There are 1.37 million Australians with diabetes but just over half have access to diabetes education programs. Credentialled Diabetes Educators are highly trained, but their effectiveness is limited by current funding arrangements. We wanted an independent snapshot of the effectiveness of diabetes education programs so that we could show policy makers in both the public and private sectors just how effective diabetes education could be if it was better funded.