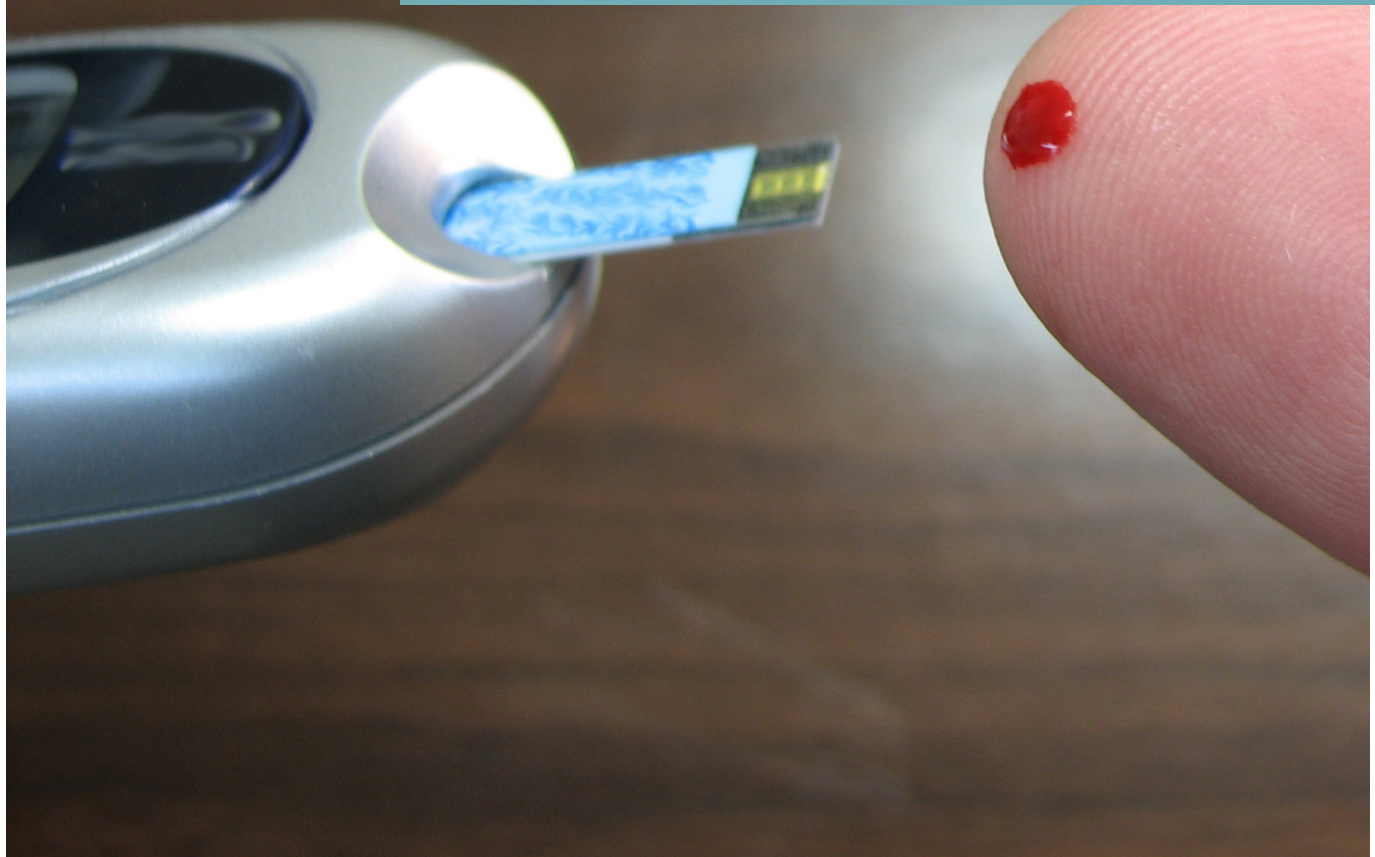


Manitoba Centre for Health Policy

# Type 2 Diabetes in Manitoba

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Summary Written By: Jennifer Pepneck



**A summary of the report *Type 2 Diabetes in Manitoba***

Report by Chelsea Ruth, Elizabeth Sellers, Caroline Chartrand, Lorraine McLeod, Heather Prior, Monica Sirski, Roxana Dragan, Hui Chen, Chelsey McDougall and Jennifer Schultz.



FIRST NATIONS HEALTH AND SOCIAL  
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About 109,000 Manitobans have type 2 diabetes. More people are diagnosed with the disease each year. The number of Manitobans with type 2 diabetes is growing.

This study looks at rates of type 2 diabetes in the province and if people with the illness get the services they need. It also finds areas for improvement. Studies like this can help health care providers and policymakers to put supports in place to keep Manitobans healthy.

The study used data from the Manitoba Population Research Data Repository at the Manitoba Centre for Health Policy (MCHP). Data is created each time a person sees their doctor, receives social services or goes to school. These data are in this Repository. The data can help us better understand the patterns of health and illness. The data in the Repository are de-identified. This means the data do not contain any personal information like names and addresses. Researchers at MCHP can link the data using numbered codes. But they cannot tell who the individuals in the study are.

## What is type 2 diabetes?

Type 2 diabetes is an illness that develops when the insulin your body produces is not working well or when your body does not make enough insulin. The sugar in your blood is not taken up by the cells that need it for energy. This results in higher than usual amounts of sugar in the blood.

People with type 2 diabetes can use medical treatment and lifestyle changes to keep their sugar levels in the normal range. But when blood sugar levels rise, they can lead to many health issues, including damage to the kidneys, blood vessels and eyes.

## No longer your grandma's disease

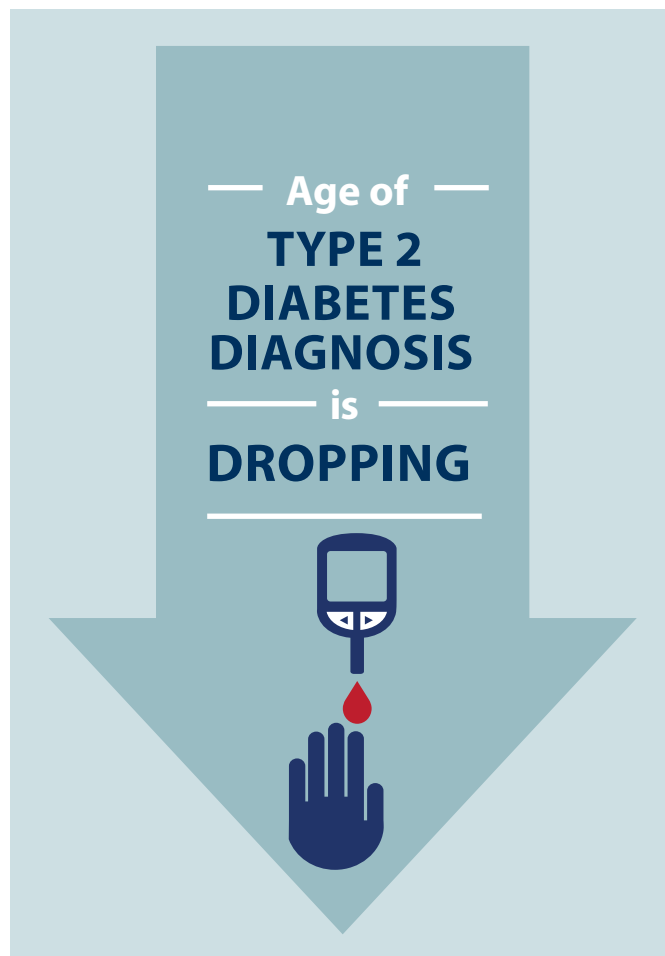
Type 2 diabetes was once thought to be a disease mainly affecting older adults. But since the early 80s, type 2 diabetes in Manitoba has been on the rise in younger people. In the last decade, the number of Manitoba children diagnosed with type 2 diabetes has risen by more than 50%. This increase comes with many health concerns. Children with type 2 diabetes are more likely to be admitted to hospital than children without diabetes. They are also more likely to be diagnosed with a mood or anxiety disorder than children without diabetes.

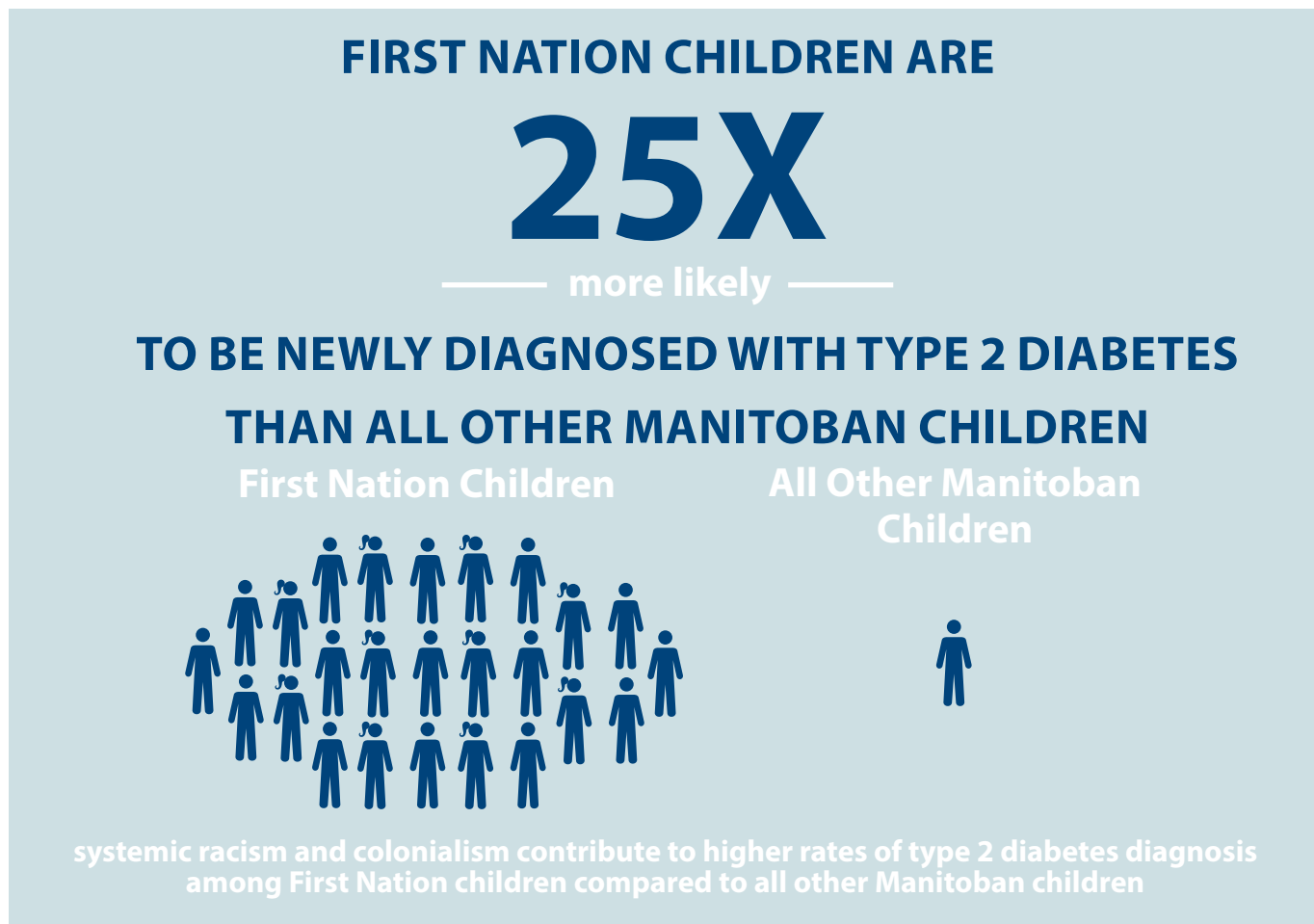
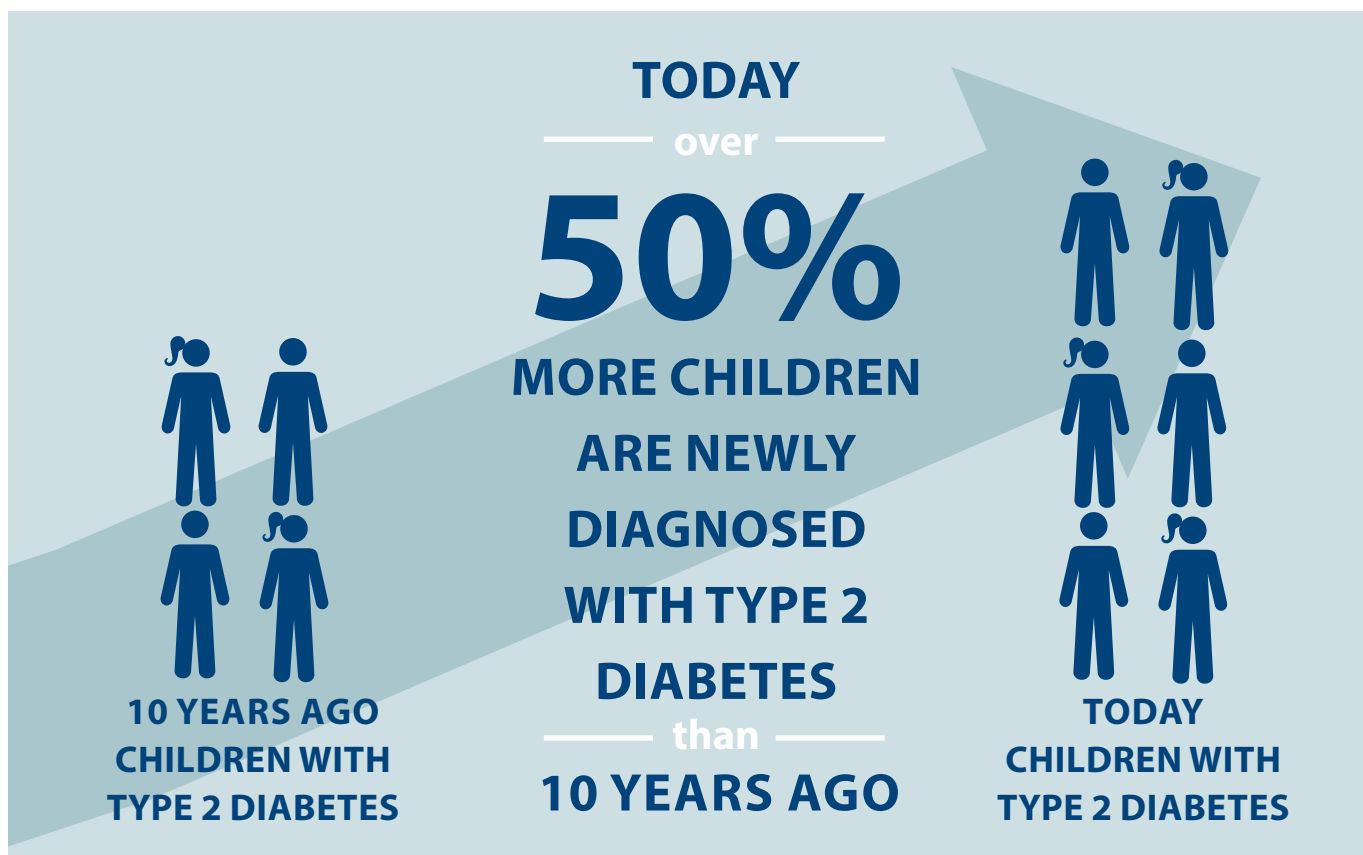
Rates of type 2 diabetes among First Nation children are increasing. Currently, First Nation children are about 25 times more likely to be diagnosed with type 2 diabetes than other children in Manitoba.

## Type 2 diabetes in pregnancy

With more young people diagnosed with type 2 diabetes, there are now more pregnant women with the disease. Type 2 diabetes adds health risks to pregnancy. Pregnant women with type 2 diabetes are three times more likely to be hospitalized than those without diabetes, and their babies are four times more likely to be admitted to intensive care. For women living in rural or remote communities, this might mean that they must transfer to hospitals far away from where they live.

As type 2 diabetes rates continue to increase, health care services must meet the needs of pregnant women with the disease. A pregnant woman with type 2 diabetes may need additional health care services during pregnancy, when giving birth, and after delivery. These services might be easier to access in Winnipeg. But services also need to be available to women living outside of Winnipeg or in First Nation communities. One way to make sure that this care is accessible to all Manitoba women is to have more home-based care for common problems. This would reduce the need for hospital stays and time spent away from home, and would be better for families who live in rural or remote parts of Manitoba.





## Health risks of type 2 diabetes

People with type 2 diabetes are at higher risk for many physical and mental illnesses than people without the disease. For example, adults and children with type 2 diabetes are more likely to be diagnosed with a mood or anxiety disorder than those without diabetes.

Having a mental illness can make managing diabetes more difficult. Type 2 diabetes increases the risk of kidney disease. This can lead to kidney failure. A yearly test for early signs of kidney disease reduces this risk of kidney failure. Currently, only about half of Manitobans with type 2 diabetes get this test yearly. Less than half of younger Manitobans with type 2 diabetes get this test every year.

## Medical care for type 2 diabetes

Having a regular primary care provider is linked to better health care for people with type 2 diabetes. People who see their family doctor regularly have better screening rates and fewer hospital visits. Young adults with type 2 diabetes are not seeing their doctors often enough. Young men are less likely than young women to visit health care providers. New strategies are needed to help young adults with type 2 diabetes connect with health care providers more often.

All Manitobans may not receive the same quality of care. Even though First Nation adults with type 2 diabetes see their family doctors as often as other Manitobans with the disease, they do not see specialists as often. This may be one reason for the higher rates of complications and deaths among First Nation adults with type 2 diabetes.

Systemic racism and colonial laws have had a devastating impact on many aspects of First Nation people's lives by limiting their access to health services, the quality of

education, and their prospects for employment. All of these factors are associated with poorer outcomes for First Nation people with type 2 diabetes compared to other Manitobans.

## Reducing the Impact of Type 2 Diabetes in Manitoba

The study, led by researchers at MCHP in partnership with the First Nations Health and Social Secretariat of Manitoba, makes some key recommendations to reduce the impact of type 2 diabetes in Manitoba. It is important that people with type 2 diabetes are diagnosed early and receive high-quality care. Screening for type 2 diabetes should happen at a younger age. Young adults with the disease need to be better supported to access health care services.

Type 2 diabetes care cannot have a one-size-fits-all approach. There is a need to support community-led initiatives, especially in First Nation communities, so that they can focus on the strategies that work best for them. Since type 2 diabetes affects people across a wide age span and living in diverse settings, care should change depending on where and to whom it is provided. Taken together, these types of creative strategies can improve outcomes for all Manitobans.



### Manitoba Centre for Health Policy

Data | Insight | Informing Solutions

Tel: (204) 789-3819

Fax: (204) 789-3910

Email: [reports@cpe.umanitoba.ca](mailto:reports@cpe.umanitoba.ca)

[www.mchp.ca](http://www.mchp.ca)

The Manitoba Centre for Health Policy is a research unit in the Department of Community Health Sciences at the University of Manitoba's Max Rady College of Medicine, Rady Faculty of Health Sciences.

MCHP conducts population-based research on health services, population and public health, and the social determinants of health.

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