DIABETES

and the Métis Nation of Alberta in 2020





71% of Métis Albertans had Type 2 diabetes.

According to Diabetes Canada, lifestyle, age (40+), ethnic background, and having a sibling/parent with diabetes, contribute to a higher risk of developing Type 2 diabetes.

64% of Métis Albertans were between of 31–60 years old when they were diagnosed.



76% of Métis Albertans did not have an endocrinologist and relied on their family physician for diabetes care.



50% of Métis Albertans had a chronic condition in addition to diabetes.

The most common chronic condition was hypertension. A majority of Métis Albertans had more than one chronic condition in addition to diabetes.

26% of Métis Albertans could not check their blood glucose regularly due to financial barriers and lack of insurance coverage.

"[I] can't afford the test strips or lancets as they are very expensive, and I don't have medical insurance coverage." —Region 5 MNA Citizen





17% of Métis Albertans did not feel supported by their health care provider.

"My endocrinologist and her nurse oftentimes feel judgemental, which makes me feel unsupported and unsafe attending appointments and sharing my challenges and questions." – Region 4 MNA Citizen.

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59% of Métis Albertans with diabetes reported they took medication for **high blood pressure**.

45% of Métis Albertans with diabetes reported they took medication for **high cholesterol**.

A majority of Métis Albertans with diabetes took medications for conditions other than diabetes.

17% of Métis Albertans reported they did not have access to foods needed to maintain their health.

The main barriers to accessing healthy and nutritious food were high cost of food and financial constraints.

17% of Métis Albertans reported their main diabetic care provider suggested a low-carb diet.

64% of Métis Albertans did not have a meal plan suggested for them as a part of their treatment plan.

A low-carb diet is modelled after Western diets and may not be culturally appropriate for Métis Albertans.

47% of Métis Albertans stated that they experienced barriers to engaging in physical activity.

The main barriers identified were other medical issues including arthritis, joint replacements, and heart issues and pain.

39% of Métis Albertans reported diabetes affected their day-to-day activities.

The primary ways that diabetes affected Métis Albertans was lack of energy, eating patterns, in every facet of life, nerve pain in extremities, and walking/physical activity.

Métis Albertans reported

38% had consulted their

main diabetes care provider one to two times in the past year.

27%

had consulted with their health care providers **three to four times in the past year**. 16%

reported they had consulted with their health care providers more than five times in the past year.

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of Métis Albertans reported travelling to their appointments was not convenient.

The main barrier for Métis Albertans to travel to their main diabetes provider was that they lived in remote areas away from their providers.



31%

of Métis

Albertans
with diabetes
reported that
their main
diabetes care
provider was
in Edmonton.

12% of Métis Albertans were admitted to the hospital because of their diabetes.

20% of Métis Albertans were admitted because of diabetes and another condition.



21% of Métis Albertans with diabetes reported they wanted culture to play a role in their diabetes treatment.

Métis Albertans wanted to learn more about how to use Métis knowledge on traditional medicines and diet to manage diabetes.

90% of Métis Albertans with diabetes reported they do not use traditional medicines.

10% of Métis Albertans reported they use traditional medicines to help manage their diabetes. Of these people, 38% reported they used Chaga mushrooms and 14% reported they used cedar or mint tea.

50% of Métis Albertans with diabetes reported their main diabetes care provider was supportive of the use of traditional medicines in managing diabetes.

50% of respondents reported they did not know if their main diabetes care provider was supportive.

Summaries & Acknowledgements:

GAPS IN TRANSITIONAL CARE FOR MÉTIS ALBERTANS WITH DIABETES

Health surveillance data provides evidence of how health concerns impact unique populations. The unique health needs and experiences of Métis people have been underrepresented in most widely available Indigenous health surveillance research, which often combines the experiences of Métis, First Nations, and Inuit peoples. The health outcomes and lived experiences of Métis Albertans accessing care for diabetes must be better understood and recognized as distinct from other Indigenous peoples. This research helps to better understand the health outcomes and lived experiences of Métis Albertans living with diabetes.

The research from this project provided a deeper understanding of barriers and facilitators of diabetes management for Métis Albertans with diabetes while experiencing transitional care and provides a strong foundation to advocate for equitable diabetes care for Métis Albertans. Understanding the individual and community-level factors that Métis Albertans experience on their journey with diabetes can bridge the gaps in care during transitions and help eliminate barriers associated with factors that contribute to poor health outcomes for Métis Albertans.

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