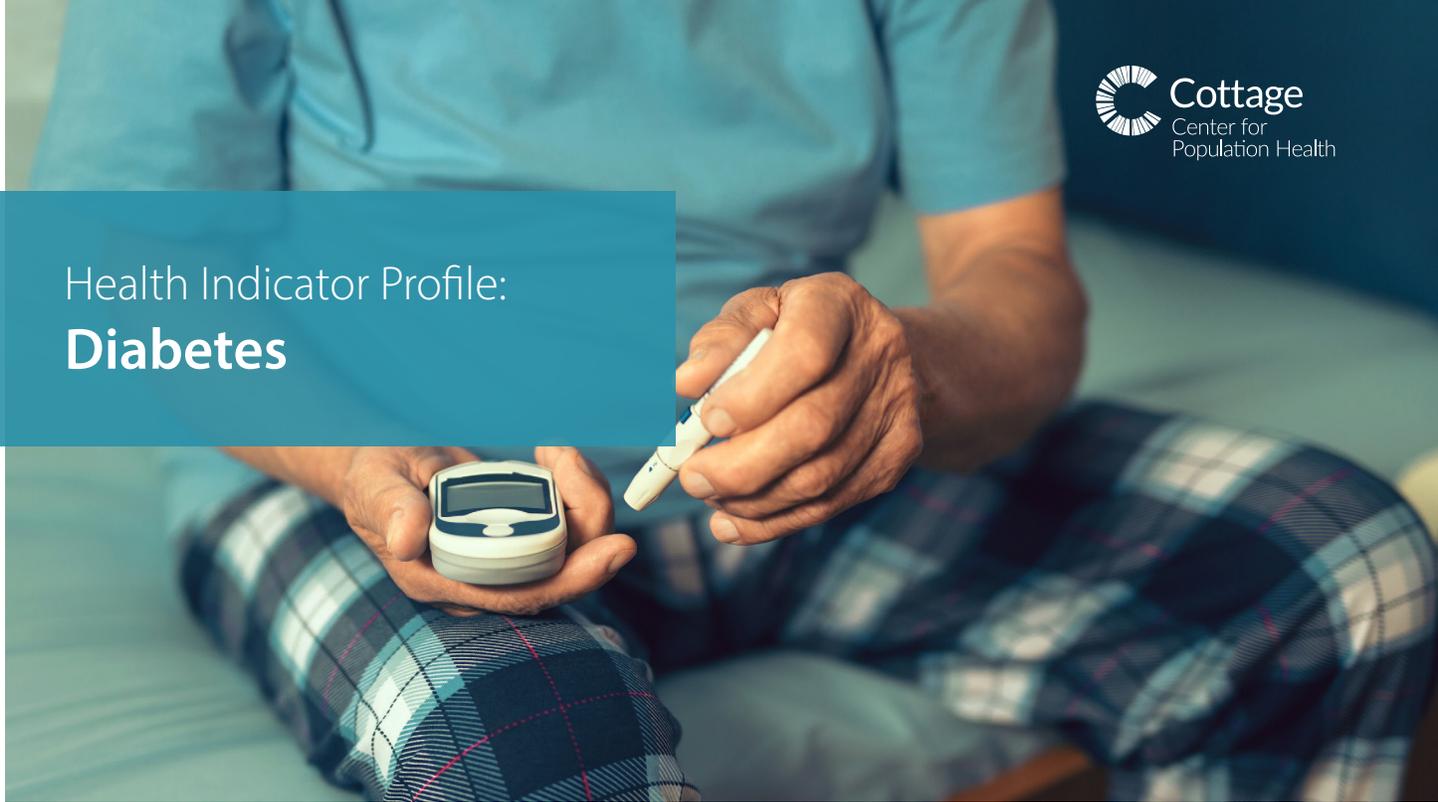


Health Indicator Profile: Diabetes



Diabetes occurs when the body does not produce enough insulin or cannot use its own insulin well enough to reduce sugar (glucose) levels in the blood. Adult, or type 2, diabetes occurs in adulthood, usually in people who are overweight or obese. Uncontrolled diabetes can lead to serious complications, such as blindness and other eye problems, kidney disease, neurological damage, hypertension, heart disease, stroke, and certain cancers. Diabetes is the seventh leading cause of death in the United States, and accounts for more than 20% of health care spending.¹

Findings from the 2019 Santa Barbara County CHNA

Measure

The prevalence of adult diabetes was measured by asking respondents if they had ever been told by a doctor or other health professional that they had diabetes (or “sugar diabetes;” female respondents were instructed to exclude pregnancy-related diabetes). Responses from persons who said they had “borderline” or “prediabetes” were excluded, so that valid comparisons could be made between 2019 Santa Barbara CHNA data and the State and HP 2020 target.

DIABETES QUESTION

Have you ever been told by a doctor or other health professional that you have diabetes?

¹ Centers for Disease Control and Prevention. (2019). Diabetes: Working to reverse the U.S. epidemic [Factsheet]. Retrieved from <http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm>

Table 1. Percentage of adults with diabetes

	2016 Santa Barbara CHNA	2019 Santa Barbara CHNA	2018 California BRFSS	2020 Healthy People Target
	% (95% CI)	% (95% CI)	% (95% CI)	
Overall	8.9 (7.3, 10.5)	7.8 (5.7, 9.9)	10.4 (9.6, 11.1) [^]	7.2*
Male	7.8 (5.5, 10.2)	8.1 (5.0, 11.2)	10.5 (9.5, 11.5) [^]	
Female	9.9 (7.7, 12.2) [^]	7.6 (4.8, 10.4)	10.3 (9.1, 11.4) [^]	
Hispanic	NA	9.4 (5.7, 13.2)	11.8 (10.6, 13.0) [^]	
Non-Hispanic White	NA	6.9 (4.3, 9.5)	9.6 (8.6, 10.6)	
Other	NA	5.8 (0.0, 12.9) †	NA	
Age 18-44	3.6 (1.7, 5.4) [^]	2.4 (0.6, 4.1) [^] †	2.6 (2.0, 3.1) [^]	
Age 45-64	13.8 (10.1, 17.5) [^]	10.9 (2.3, 15.6)	14.4 (12.9, 15.9) [^]	
Age 65+	16.0 (12.5, 19.5) [^]	18.5 (12.4, 24.7) [^]	23.8 (21.2, 26.3) [^]	
< High School	16.1 (10.4, 21.8) [^]	13.9 (6.6, 21.2)	17.2 (14.9, 19.5) [^]	
High School Grad	10.0 (5.5, 14.5)	8.1 (3.3, 12.9) †	8.1 (6.7, 9.5) [^]	
Some College	7.4 (5.2, 9.6)	8.2 (4.5, 11.9)	10.8 (9.3, 12.4) [^]	
College Grad	5.1 (3.5, 6.7)	4.0 (2.1, 5.9) [^]	7.6 (6.4, 8.7)	
<\$35,000	11.5 (8.4, 14.5) [^]	9.3 (5.4, 13.3)	14.3 (12.8, 15.8) [^]	
\$35,000-\$74,999	9.7 (5.7, 13.8)	10.5 (5.2, 15.7)	9.3 (7.7, 10.9) [^]	
\$75,000 or Greater	4.3 (2.6, 5.9)	4.9 (1.9, 7.9) †	7.0 (5.9, 8.1)	

[^] Significant difference between estimate and 2020 Healthy People 2020 target

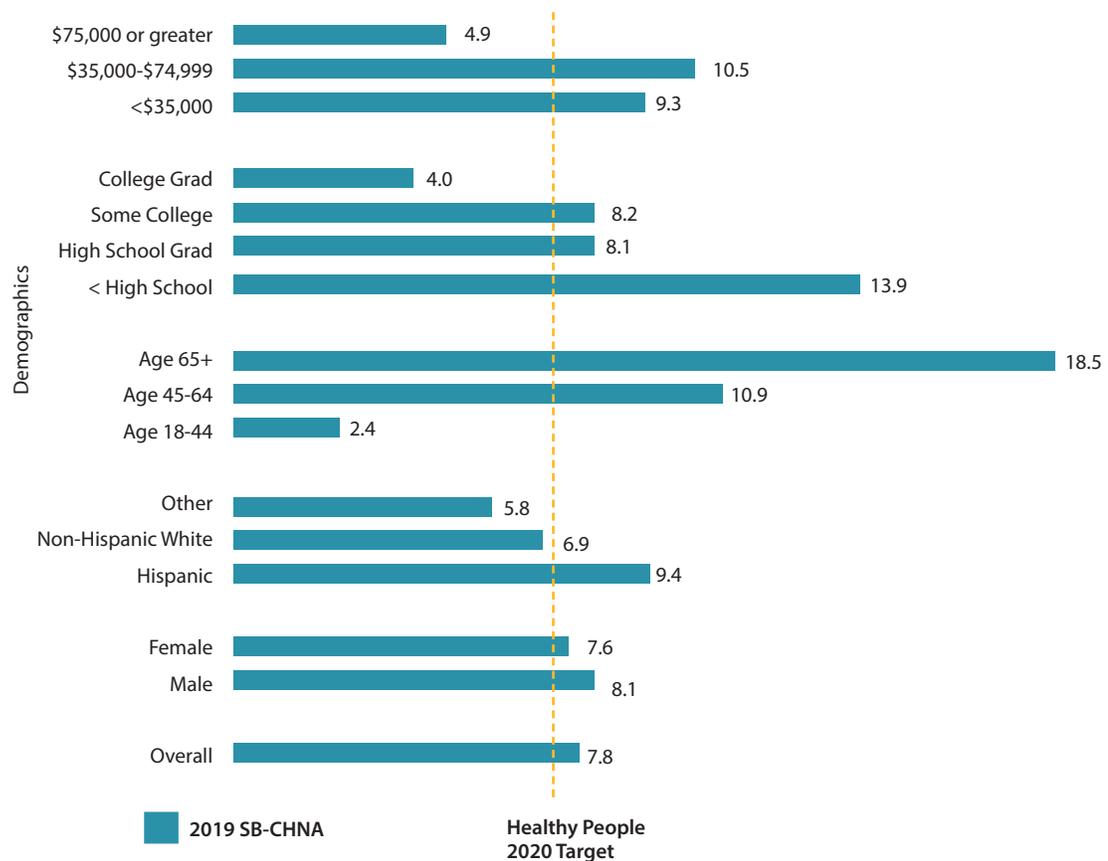
†Unreliable estimate (Relative Standard Error >0.3)

Health disparities

In 2019 Santa Barbara County was slightly above the HP 2020 target for diabetes at 7.8% vs 7.2%. Only two subgroups are significantly below the target, those aged 18-44 and those with a college education. Those aged 65 and over were the only subgroup with a diabetes estimate significantly higher than 2020 target at 18.5%. Santa Barbara County in 2019 is lower than Californians in 2018 in nearly every sub-population except for high school graduates and those in the middle household category (\$35,000-\$74,999). Santa Barbara college graduates and those in the highest income category were significantly lower in terms of diabetes when compared to the same groups in California 2018.

Most impacted demographic subgroups include Hispanics, those aged 65 years or older, those with less than high school education, and those with household incomes below \$75,000 (see figures below).

Figure 1. 2019 Percentage of adults who have diabetes by demographic group



Factors and health outcomes associated with diabetes

Figure 2 below depicts the three health indicators that were most significantly related to diabetes and includes binge drinking, chronic heart disease (CHD), and fair/poor self-reported health. Those reporting binge drinking reported less diabetes than adults on average in Santa Barbara County. This may be partly due to people changing their drinking behaviors as a result of a diagnosis of diabetes. Those reporting chronic heart disease also reported diabetes at a prevalence much higher than the county estimate 44.4% vs. 7.8%. Similarly, 18.8% of those self-reporting fair/poor health reported diabetes.

While controlling for demographics, the odds of reporting diabetes are reduced by 99% when reporting binge drinking. For those reporting chronic heart disease the odds of reporting diabetes are 5.2 times greater than those without chronic heart disease and 3 times greater for those self-reporting fair/poor health compared to those reporting good or better health.

Figure 2. Percentage of adults who have diabetes by significant related risk factors

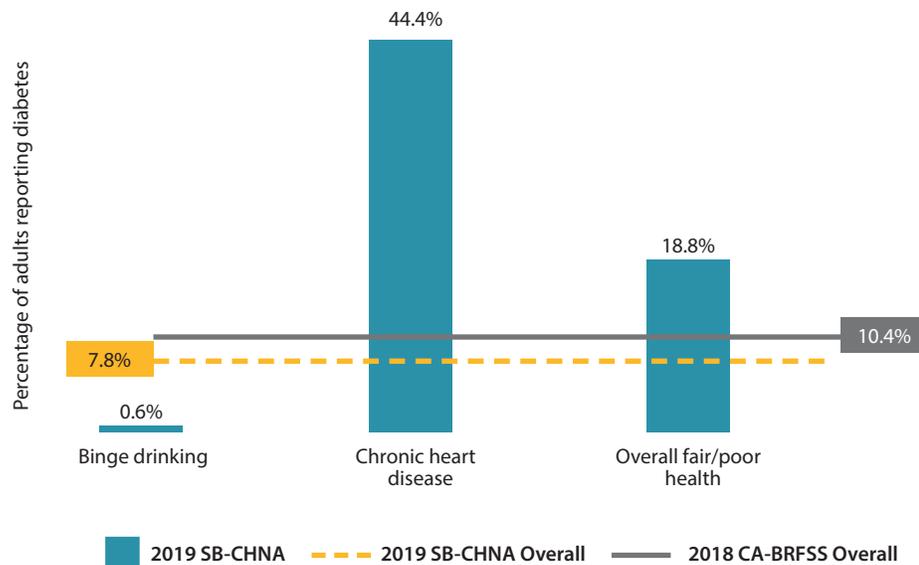


Table 2. Odds ratio estimates for diabetes by significant related risk factors

Significant related risk factor	Point estimate	95% confidence limits	
Chronic heart disease	5.2	1.6	16.2
Overall fair/poor health	3.0	1.4	6.4
Binge drinking	0.0	0.0	0.4

Note: The degrees of freedom in computing the confidence limits is 819.