

## Diabetes prevention model is less effective for non-college graduates, study finds

August 19 2015, by George Diepenbrock

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Key prescriptions to prevent and manage diabetes—physical activity and a healthy diet—don't appear to be working as well for Americans who didn't graduate college, according to University of Kansas researcher's new study.

"Essentially those with a college degree or more education are benefiting more from the positive health behavior of physical activity than other groups," said Kyle Chapman, doctoral candidate in sociology. "That's going to create more inequality in the future."

The key finding of the study is after controlling for diet, body-mass index and social factors, adults with a college degree who are physically active were 6 percent less likely to have pre-diabetic symptoms or elevated levels of blood glucose than college-educated adults in the U.S. who are considered physically inactive. For adults with some college, a [high school](#) diploma or who never graduated high school, at best physical activity only accounted for a 1 percent less chance they would have pre-diabetic symptoms.

"What we see here are these big differences in those at risk for [diabetes](#)," Chapman said. "This means in the future we're going to keep seeing these numbers increase and not increase at the same pace depending on people's levels of education."

Generally being active reduced the likelihood that individuals would have full-blown diabetes as well. However, the probability of having

diabetes was lowest among people with a [college degree](#) at 2.5 percent for those physically active and 4.4 percent for those inactive. By contrast, a person with no [high school diploma](#) had a 5 percent probability of having diabetes if they are [physically active](#) and 7.2 percent if inactive.

The study analyzed data from the National Health and Nutrition Examination Survey 2007-2012 that combined interviews, physical exams and laboratory tests. Chapman will present his study, "Diabetes Disparities by Education and Activity Level", at 8:30 a.m. Monday, Aug. 24, at the American Sociological Association Annual Meeting in Chicago.

"It does raise questions on whether or not we want to suggest to practitioners and to [public health officials](#) for initiatives on things we can do to alleviate some of the problems, especially in the lives of those with less than a [high school education](#)," Chapman said. "What can we do to make [physical activity](#) more beneficial?"

He said the findings seem to support past research that has shown that people of higher levels of education tend to have access to environments that are more conducive to exercise and healthier lifestyles, such as gym memberships or living in nicer neighborhoods that encourage walking.

Also, he said college graduates likely can work in jobs that give them more financial stability and flexibility that will allow them to live with fewer social stressors than people living paycheck to paycheck or those in blue-collar jobs that are more physically demanding but not necessarily physically healthy.

"Education has been shown to affect people's behavior on multiple levels. Not only does it give you the capacity to think critically, but once you're in a different education level, there's sort of a different culture

around the people that you associate with," he said. "There are different standards of doing things and things are encouraged or discouraged."

The study doesn't recommend steps to correct the disparities, but it should serve as a starting point for discussions on how to address preventing and managing diabetes, especially among individuals for which the current practices are less effective, Chapman said.

"This is real, and if we continue down this road, we're going to be helping the college-educated more than we're helping the less educated," he said. "The less educated are the people who actually need it more. They have higher rates of diabetes and pre-diabetes than other groups to begin with. So if our positive interventions are helping everyone but helping the most educated group more, then we need to adjust our strategy to hopefully improve everyone's health no matter your social status."

Provided by University of Kansas

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