

Access restricted, rationing prevalent:

Conclusions from T1International's Out-of-Pocket Expense Survey of people living with type 1 diabetes globally 2024

PRESENTER:
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BACKGROUND:

- Despite promises of affordable and accessible insulin globally, high costs and rationing persist.
- This survey is conducted every two years after the first survey in 2018.

METHODS:

- A cross-sectional, web-based survey was distributed globally via email, social media, and partner networks between Nov–Dec 2024. The survey, translated into Arabic, French, Spanish, and Swahili, adhered to T1International's Ethical Patient Engagement principles. Respondents (n=1,063 from 55 countries) provided data on household income, out-of-pocket expenses, rationing frequency, and access difficulties.
- After exclusions, 748 records remained. Responses were analyzed by country income classification (World Bank), with subgroup analyses for countries with ≥11 respondents.
- Findings from the 2024 survey will be compared to previous years studies.

RESULTS:

- On average, respondents spent 12% of their income on insulin and glucose monitoring supplies, far exceeding T1International's 5% affordability benchmark.
- Affordability varied widely by country income level, with respondents in low- and lower-middle income countries spending >60% of their income.
- Rationing was prevalent, with 37% reporting rationing insulin and 55% glucose monitoring supplies, with rates nearly doubling between 2018-2024.
- Importantly, 79% reported access challenges, including supply shortages and long travel distances—even in high-income countries.



Rationing is rising, and access is increasingly fragile across income settings.

Structural reforms—beyond affordability—are urgently needed.

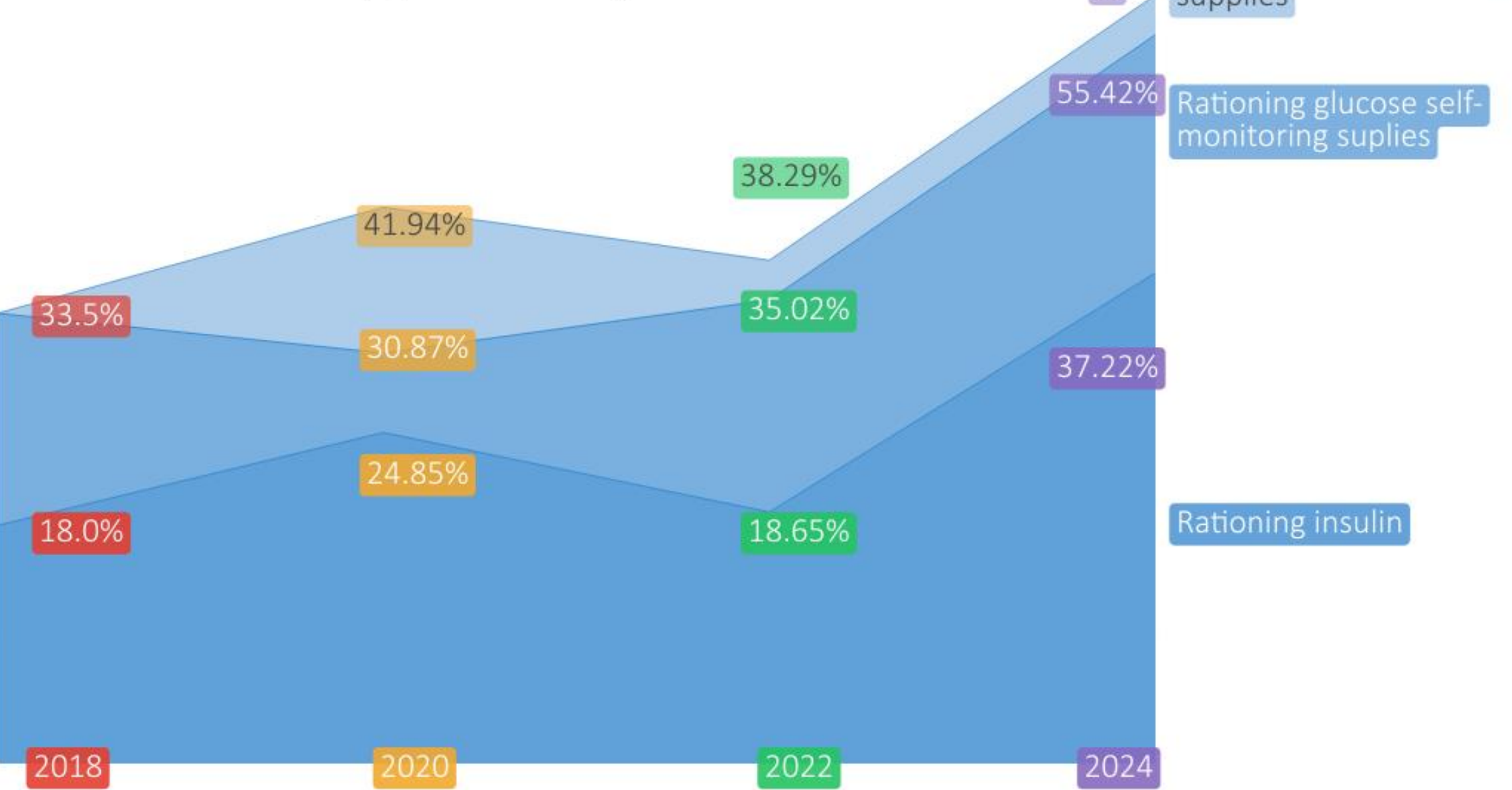
Average monthly out-of-pocket expenses percentage of income spent per person living with type 1 diabetes in certain countries



DISCUSSION

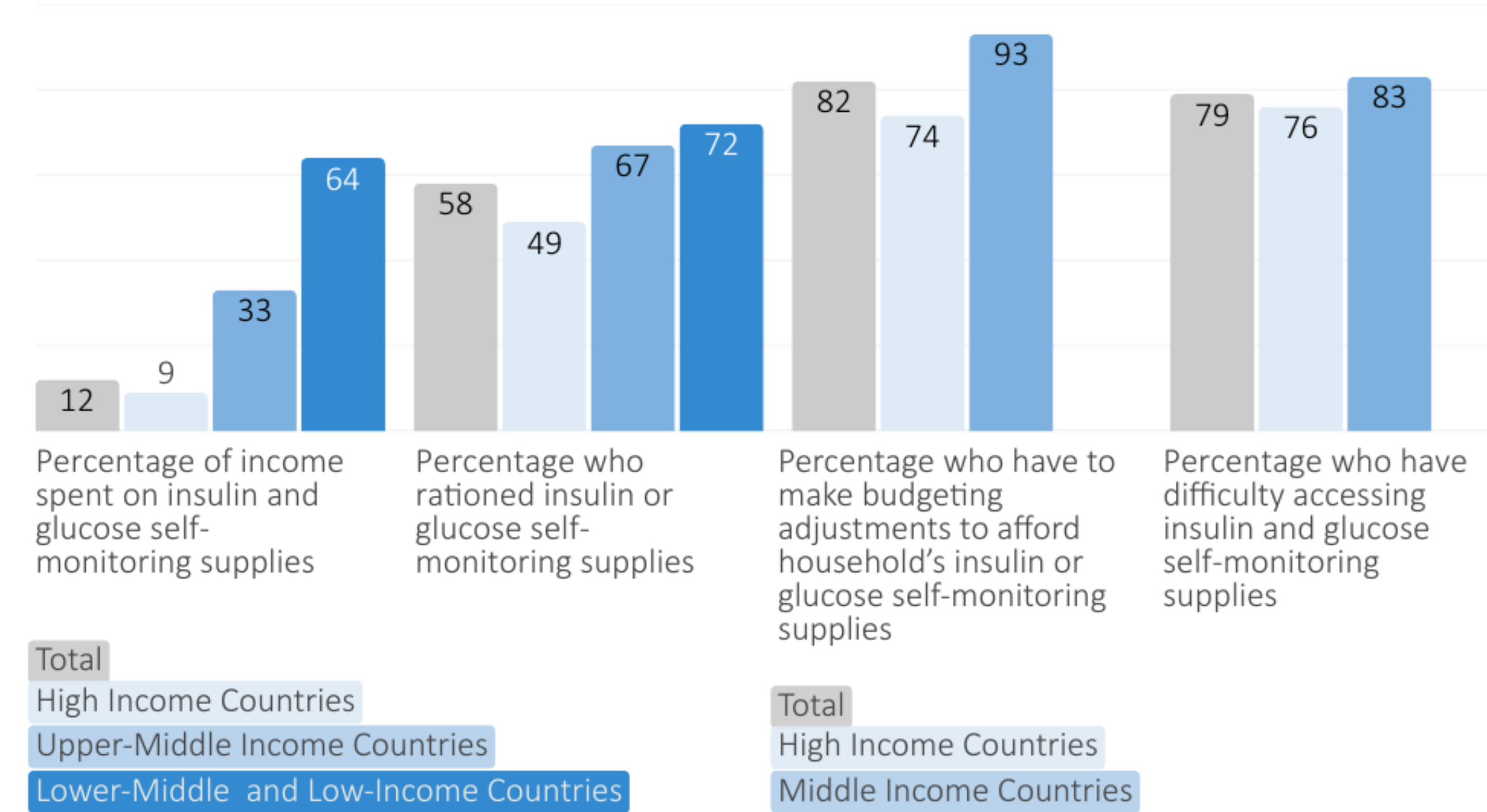
- These findings underscore persistent inequalities and inequities in diabetes care and a growing affordability crisis globally.
- This calls for an urgent need for local, national, and global policies to address the root causes of high out-of-pocket expenses for insulin and glucose self-monitoring.
- This global patient-led survey reveals severe financial and access barriers to diabetes care. Rationing is rising, and access is increasingly fragile across income settings. Structural reforms—beyond affordability—are urgently needed.

Rationing of insulin and glucose self-monitoring supplies over years



Previous years info derives from earlier iterations of the T1International Out-of-Pocket Expenses and Rationing Surveys and Reports.

Average access and affordability burden for people living with type 1 diabetes by country economic grouping in 2024



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