

Dr. Laura Rosella



PREVENTION | POPULATION HEALTH

Project: Developing a Population-Based Diabetes Risk Assessment to Address Inequities and Improve Health Outcomes for People with or at Risk of Developing Type 2 Diabetes

Thank you for your generosity. Diabetes Canada is grateful to our donors for supporting critical research that will improve the lives of people with diabetes.

The number of people diagnosed with diabetes continues to rise at an alarming rate in Canada; our existing diabetes prevention strategies are not enough, and further research into prevention strategies is necessary. Dr. Laura Rosella is working to change this, by developing prevention approaches that help tackle health inequities, address the social determinants of health, and support individual and community lived experiences.

Dr. Laura Rosella is the Principal Investigator and Scientific Director of the Population Health Analytics Lab and an Associate Professor in the Dalla Lana School of Public Health at the University of Toronto, where she holds the Canada Research Chair in Population Health Analytics. In 2020, she was also made the Inaugural Stephen Family Research Chair in Community Health at the Institute for Better Health, Trillium Health Partners.

Many communities in Canada are at a higher risk of developing diabetes because of racism, poverty, and isolation. These individuals and groups are at a disadvantage when it comes to healthcare, often experiencing structural and systemic barriers including discrimination, exclusion, and unequal access or treatment. This contributes to an increased risk of developing type 2 diabetes, and for those who do, an increased risk of developing diabetes complications.

Dr. Rosella and her team, alongside the communities they are working with, are co-developing a new modelling approach to better understand the differences in diabetes risk in different communities. They will examine how inequities in diabetes risk are influenced by interactions between socioeconomic, built environment, lifestyle, and healthcare access factors. Their research will be driven by a participatory approach, directly engaging with community partners and people with lived experience of diabetes, which is essential to addressing inequities and ensuring locally relevant interventions.

This project will ensure that community perspectives shape locally relevant prevention approaches that can benefit those who have historically not benefitted from past prevention interventions.