**Barriers and facilitators for receiving Medical Nutrition Therapy and Podiatry care: A survey among adults with Diabetes Mellitus**

**Aim/s:** To understand the perceived barriers and facilitators (factors) of adults with Diabetes Mellitus in receiving Medical Nutrition Therapy (MNT) and Podiatry care.

**Methods:** Adults with self-reported Diabetes Mellitus (any type), living in the Hunter New England Local Health District, New South Wales, Australia, completed an online survey in February to August 2024. Adults were asked to report factors for receiving MNT and Podiatry care by responding to closed and open-ended questions. The survey data were reported descriptively for the closed-ended questions or thematically grouped for the open-ended questions.

**Results:** Survey data from 397 adults (68% with Type 2 Diabetes Mellitus) identified the main barrier for MNT as cost of attending an appointment with a Dietitian (n=206, 52%). A barrier theme identified from open-ended responses were time delays for making an appointment with a Dietitian, and lack of tailored advice provided.Perceived facilitators included being referred to Dietetic Services from their General Practitioner (n=247, 62%), and multiple options for appointment attendance with a Dietitian (n=243, n=61%), and having a positive relationship with their Dietitian. The main barrier for Podiatry care was also cost of attending an appointment (n=158, 40%), waiting times for an appointment (n=101, 25%), and availability of Podiatrists locally (n=55, 14%), while the main facilitators were education received from the podiatrist (n=105, 26%) and affordable appointments.

**Conclusion:** Survey findings indicate that strategies are needed to reduce delays in accessing Dietetic services and Podiatry services. Improving affordability of these services will also contribute to improved uptake of these services. National policy changes are needed to fully address these barriers. However, strategies such as utilising technology for delivering appointments (e.g. telehealth, online) and patient group sessions could potentially address barriers and facilitators.