Awareness Survey Questionnaire
'Diabetes as CVD risk factor'

Report by Dirk De Bacquer, November 2019

Background : The European Association of Preventive Cardiology (EAPC) initiated a survey conducted in 2019 in the framework of the ESC/EAPC Diabetes & CVD educational programme, with the aim to assess awareness and implementation of preventive strategies for diabetes among healthcare professionals across a selection of European countries (France, Germany, Italy, Poland, Russia, Spain, Sweden, Turkey, United Kingdom) as well as Brazil.

The ESC/EAPC Diabetes and CVD Educational Programme is a collaborative project that aims to raise awareness and education on Diabetes and cardiovascular risk, addressing new therapeutic strategies in the field. The Programme includes an awareness component, scientific resources and educational activities. This Programme is supported by the Boehringer Ingelheim and Lilly Diabetes Alliance and Novo Nordisk A/S in the form of educational grants. The programme has not been influenced in any way by its sponsors.

Related publications : Hansen, D., Mellbin, L., Cosentino, F., De Bacquer, D., Grobbee, D., Van Ryckeghem, L., … Beulens, J. W. (2020). **High awareness of diabetes as a key cardiovascular risk factor among healthcare professionals but suboptimal treatment: Results from a survey of the European Association of Preventive Cardiology**. *European Journal of Preventive Cardiology*. https://doi.org/10.1177/2047487320911845

Aim: Survey of knowledge regarding amongst healthcare professionals to describe awareness and implementation of prevention strategies for diabetes as a cardiovascular risk factor in different European countries.

Target Audience: EAPC members, ESC contacts with an interest in topic 28.7 'Diabetes and the Heart'

Overall, there are eligible* records from **N=508** responders.
*valid answer to the key question: '*How important is a focus on patients with diabetes in YOUR everyday practice for prevention of cardiovascular disease?*'

Table 1. Number of responders

WHO region	N responders
European Region	**368**
FRANCE	22
GERMANY	20
ITALY	63
POLAND	25
RUSSIA	42
SPAIN	29
TURKEY	29
UNITED KINGDOM	29
Region of the Americas	**66**
BRAZIL	32
Western Pacific Region	**26**
CHINA	19
Eastern Mediterranean Region	**28**
South-East Asia Region	**12**
African Region	**8**

Table 2. Distribution of responders' gender and age

	% Female	Age (years)		
		< 35	36-55	>55
European Region	**42.9% (158)**	**16.6% (61)**	**51.6% (190)**	**31.8% (117)**
FRANCE	40.9% (9)	4.5% (1)	45.5% (10)	50.0% (11)
GERMANY	30.0% (6)	15.0% (3)	35.0% (7)	50.0% (10)
ITALY	27.0% (17)	22.2% (14)	34.9% (22)	42.9% (27)
POLAND	44.0% (11)	0.0% (0)	80.0% (20)	20.0% (5)
RUSSIA	50.0% (21)	33.3% (14)	47.6% (20)	19.0% (8)
SPAIN	37.9% (11)	13.8% (4)	69.0% (20)	17.2% (5)
TURKEY	37.9% (11)	17.2% (5)	62.1% (18)	20.7% (6)
UNITED KINGDOM	41.4% (12)	10.3% (3)	58.6% (17)	31.0% (9)
Other regions	**22.9% (32)**	**14.3% (20)**	**44.3% (62)**	**41.4% (58)**
BRAZIL	21.9% (7)	0.0% (0)	56.3% (18)	43.7% (14)
CHINA	31.6% (6)	52.6% (10)	31.6% (6)	15.8% (3)

Table 3. Responders' area of specialism

	N
Preventive Cardiology	99
Coronary Artery Disease - Acute Coronary Syndromes - Acute Cardiac Care	69
Heart Failure	52
Hypertension	50
Imaging	39
General cardiology	29
Cardiovascular Disease in Special Populations	28
Interventional Cardiology and Cardiovascular Surgery	22
Arrhythmias and Device Therapy	21
General Practice	20
Diabetology	13
Cardiovascular Nursing	11
Cardiovascular Pharmacology	11
Valvular - Myocardial - Pericardial - Pulmonary - Congenital Heart Disease	10
Aortic Disease, Peripheral Vascular Disease, Stroke	9
Internal Medicine	8
Cardiovascular Rehabilitation	7
Other	10

Table 4. Estimated percentage of patients with diabetes in the responders' practices

	Estimated percentage of patients with diabetes (Type 1 and Type 2)	
	Type 1	Type 2
0%	33.2% (122)	3.0% (11)
5%	47.8% (176)	2.4% (9)
10%	5.7% (21)	3.8% (14)
15%	4.9% (18)	11.4% (42)
20%	3.0% (11)	9.5% (35)
25%	0.8% (3)	16.6% (61)
30%	0.8% (3)	21.2% (78)
35%	0.3% (1)	14.1% (52)
40%	0.5% (2)	14.9% (55)
Average	**5.1%**	**25.5%**

Note: data from European responders only and excluding the 13 responders focusing on diabetes only in their practice. Prevalences of DM Type 1 and Type 2 reported by non-European respondents, were 2.5% and 11.1% respectively.

BRAZIL	Estimated percentage of patients with diabetes (Type 1 and Type 2)	
	Type 1	Type 2
0%	32.3% (10)	0.0% (0)
5%	51.6% (16)	0.0% (0)
10%	9.7% (3)	0.0% (0)
15%	0.0% (0)	12.9% (4)
20%	3.2% (1)	25.8% (8)
25%	0.0% (0)	12.9% (4)
30%	6.5% (2)	25.8% (8)
35%	0.0% (0)	6.5% (2)
40%	0.0% (0)	19.4% (6)
Average	**5.9%**	**27.2%**

CHINA	Estimated percentage of patients with diabetes (Type 1 and Type 2)	
	Type 1	Type 2
0%	15.8% (3)	0.0% (0)
5%	68.4% (13)	5.3% (1)
10%	5.3% (1)	21.1% (4)
15%	5.3% (1)	10.5% (2)
20%	0.0% (0)	36.8% (7)
25%	0.0% (0)	5.3% (1)
30%	0.0% (0)	0.0% (0)
35%	5.3% (1)	10.5% (2)
40%	0.0% (0)	10.5% (2)
Average	**6.6%**	**20.5%**

RESPONDERS FROM EUROPE

Table 5. Importance of a focus on patients with diabetes in everyday practice

How important is a focus on patients with diabetes in YOUR everyday practice for prevention of cardiovascular disease?	
Not important at all	0.6% (2)
Of little importance	0.8% (3)
Moderately important	6.4% (23)
Important	**30.0% (107)**
Very important	**62.2% (222)**

Note: excluding the 13 responders focusing on diabetes only in their practice

Table 6. Engagement in prevention of cardiovascular diseases in patients with diabetes

How motivated are you to engage in prevention of cardiovascular diseases in patients with diabetes in YOUR everyday practice?	
Not motivated at all	0.6% (2)
A little motivated	2.2% (8)
Moderately motivated	5.9% (21)
Motivated	**31.4% (112)**
Very motivated	**59.9% (214)**

Note: excluding the 13 responders focusing on diabetes only in their practice

Table 7. Guidelines used for prevention of cardiovascular disease in people with diabetes

Which guidelines do you currently use for prevention of cardiovascular disease in people with diabetes?	
ESC alone	36.1% (133)
ESC + National	18.8% (69)
ESC + EASD	11.4% (42)
ESC + National + EASD	10.3% (38)
ESC + Other	2.4% (9)
ESC + EASD + Other	1.9% (7)
ESC + National + EASD + Other	0.8% (3)
ESC + National + Other	0.5% (2)
National alone	9.2% (34)
National + EASD	2.2% (8)
National + EASD + Other	0.5% (2)
National + Other	0.3% (1)
EASD alone	3.8% (14)
EASD + Other	0.8% (3)
Other	0.8% (3)
European Society of Cardiology	**82.3% (303)**
National guidelines	**42.7% (157)**
European Association for the Study of Diabetes	**34.5% (127)**

National = 'National guidelines'; ESC = 'European Society of Cardiology'; EASD = 'European Association for the Study of Diabetes'; Other = 'American Diabetes Association' in > 90% of cases.

Table 8. Areas considered important to provide better educational tools to achieve goals?

In which areas do you think it is important to provide better educational tools to achieve guidelines goals? (please choose the 3 most important)	
Recommendations on lifestyle modifications in prediabetes and diabetes	**51.4% (189)**
Cardiovascular risk assessment in patients with prediabetes and diabetes	**47.3% (174)**
Multifactorial treatment recommendations for patients with DM and CVD	**47.0% (173)**
Identifying patients with diabetes and those at risk for developing prediabetes or diabetes	**34.2% (126)**
Choice of type of glucose-lowering medication and treatment targets	**31.3% (115)**
Prevention of diabetes in patients with impaired glucose tolerance	**27.4% (101)**
Recommendations for patient-centered care in diabetes and CVD	**24.7% (91)**
Different manifestations of CVD (e.g CAD, HF, arrhythmias, PAD)	**21.5% (79)**
Microvascular complications	**14.4% (53)**
Other	0.8% (3)

Table 9. Proportion of patients with diabetes estimated to reach the treatment targets

	Proportion of your patients with diabetes estimated to reach the treatment targets for		
	HbA1c	LDL	Blood pressure
0%	0.5% (2)	0.5% (2)	0.3% (1)
10%	3.8% (14)	2.4% (9)	0.8% (3)
20%	4.3% (16)	6.5% (24)	2.4% (9)
30%	11.7% (43)	10.6% (39)	6.5% (24)
40%	13.9% (51)	10.9% (40)	7.9% (29)
50%	18.2% (67)	13.9% (51)	12.2% (45)
60%	16.6% (61)	11.7% (43)	14.9% (55)
70%	14.1% (52)	12.5% (46)	15.8% (58)
80%	9.0% (33)	16.0% (59)	20.4% (75)
90%	3.3% (12)	8.4% (31)	12.0% (44)
100%	4.6% (17)	6.5% (24)	6.8% (25)
Average	**54.0%**	**58.7%**	**65.7%**

Table 10. Barriers to prevention of cardiovascular diseases in patients with diabetes

What are the barriers to prevention of cardiovascular diseases in patients with diabetes that you perceive in your practice?	
Limited time during the patient appointment	63.9% (235)
Patients with diabetes are only focused on lowering glucose	62.8% (231)
Limited knowledge of the cardiovascular benefits of the different diabetes drugs	57.6% (212)
Limited knowledge of how to instruct patients to administer the diabetes drugs	30.4% (112)
Patients are not interested in diabetes, they want to focus on CVD	27.4% (101)
I believe patients with diabetes should be taken care of by their GPs	20.4% (75)
Diabetologists at my hospital do not want cardiologists to take care of diabetes treatment	19.6% (72)

Table 11. Tools to improve prevention of cardiovascular diseases in patients with diabetes

How important are these tools to improve prevention of CV diseases in patients with diabetes?	
Accreditation scheme	
Unimportant	3.8% (13)
Of little Importance	15.3% (53)
Moderately important	34.1% (118)
Important	35.8% (124)
Very important	11.0% (38)
Tele-medicine tools	
Unimportant	3.2% (11)
Of little Importance	15.0% (52)
Moderately important	34.4% (119)
Important	33.8% (117)
Very important	13.6% (47)
Adapted educational activities for HCPs	
Unimportant	0.9% (3)
Of little Importance	2.9% (10)
Moderately important	22.5% (78)
Important	46.5% (161)
Very important	27.2% (94)
Monitoring of performance measures	
Unimportant	0.6% (2)
Of little Importance	6.4% (22)
Moderately important	22.0% (76)
Important	46.8% (162)
Very important	24.3% (84)
Awareness and educational resources for patients	
Unimportant	0.3% (1)
Of little Importance	2.0% (7)
Moderately important	11.3% (39)
Important	42.2% (146)
Very important	44.2% (153)
Multidisciplinary strategies programmes	
Unimportant	0.3% (1)
Of little Importance	0.3% (1)
Moderately important	11.0% (38)
Important	37.0% (128)
Very important	51.4% (178)
Educational tools for guideline implementation	
Unimportant	0.9% (3)
Of little Importance	2.0% (7)
Moderately important	14.7% (51)
Important	43.4% (150)
Very important	39.0% (135)

Table 12. Knowledge of nationally recommended diabetes and cardiovascular disease guidelines

How much do you think professionals, working with diabetes patients in your country, know the nationally recommended diabetes and cardiovascular disease guidelines?	
No knowledge of	0.6% (2/346)
Somewhat knowledgeable	37.9% (131/346)
Knowledgeable	**50.9% (176/346)**
Very knowledgeable	**10.7% (37/346)**

RESPONDERS FROM BRAZIL

Table 5a. Importance of a focus on patients with diabetes in everyday practice

How important is a focus on patients with diabetes in YOUR everyday practice for prevention of cardiovascular disease?	
Not important at all	3.1% (1)
Of little importance	0.0% (0)
Moderately important	0.0% (0)
Important	**6.3% (2)**
Very important	**90.6% (29)**

Table 6a. Engagement in prevention of cardiovascular diseases in patients with diabetes

How motivated are you to engage in prevention of cardiovascular diseases in patients with diabetes in YOUR everyday practice?	
Not motivated at all	5.3% (1)
A little motivated	26.3% (5)
Moderately motivated	5.3% (1)
Motivated	**15.8% (3)**
Very motivated	**47.4% (9)**

Table 7a. Guidelines used for prevention of cardiovascular disease in people with diabetes

Which guidelines do you currently use for prevention of cardiovascular disease in people with diabetes?	
ESC alone	18.8% (6)
ESC + National	37.5% (12)
ESC + EASD	0.0% (0)
ESC + National + EASD	9.4% (3)
ESC + Other	6.3% (2)
ESC + EASD + Other	0.0% (0)
ESC + National + EASD + Other	3.1% (1)
ESC + National + Other	9.4% (3)
National alone	12.5% (4)
National + EASD	0.0% (0)
National + EASD + Other	0.0% (0)
National + Other	0.0% (0)
EASD alone	3.1% (1)
EASD + Other	0.0% (0)
Other	3.1% (1)
European Society of Cardiology	**81.3% (26)**
National guidelines	**71.9% (23)**
European Association for the Study of Diabetes	**15.6% (5)**

National = 'National guidelines'; ESC = 'European Society of Cardiology'; EASD = 'European Association for the Study of Diabetes'; Other = 'American Diabetes Association' in > 90% of cases.

Table 8a. Areas considered important to provide better educational tools to achieve goals?

In which areas do you think it is important to provide better educational tools to achieve guidelines goals? (please choose the 3 most important)	
Recommendations on lifestyle modifications in prediabetes and diabetes	31.3% (10)
Cardiovascular risk assessment in patients with prediabetes and diabetes	62.5% (20)
Multifactorial treatment recommendations for patients with DM and CVD	53.1% (17)
Identifying patients with diabetes and those at risk for developing prediabetes or diabetes	21.9% (7)
Choice of type of glucose-lowering medication and treatment targets	56.3% (18)
Prevention of diabetes in patients with impaired glucose tolerance	12.5% (4)
Recommendations for patient-centered care in diabetes and CVD	15.6% (5)
Different manifestations of CVD (e.g CAD, HF, arrhythmias, PAD)	21.9% (7)
Microvascular complications	25.0% (8)
Other	0.0% (0)

Table 9a. Proportion of patients with diabetes estimated to reach the treatment targets

	Proportion of your patients with diabetes estimated to reach the treatment targets for		
	HbA1c	LDL	Blood pressure
0%	3.1% (1)	0.0% (0)	0.0% (0)
10%	6.3% (2)	6.3% (2)	0.0% (0)
20%	0.0% (0)	3.1% (1)	6.3% (2)
30%	12.5% (4)	3.1% (1)	3.1% (1)
40%	9.4% (3)	3.1% (1)	6.3% (2)
50%	15.6% (5)	12.5% (4)	9.4% (3)
60%	9.4% (3)	9.4% (3)	6.3% (2)
70%	12.5% (4)	25.0% (8)	6.3% (2)
80%	28.1% (9)	18.8% (6)	31.3% (10)
90%	3.1% (1)	18.8% (6)	31.3% (10)
100%	0.0% (0)	0.0% (0)	0.0% (0)
Average	55.6%	64.7%	70.6%

Table 10a. Barriers to prevention of cardiovascular diseases in patients with diabetes

What are the barriers to prevention of cardiovascular diseases in patients with diabetes that you perceive in your practice?	
Limited time during the patient appointment	53.1% (17)
Patients with diabetes are only focused on lowering glucose	25.0% (8)
Limited knowledge of the cardiovascular benefits of the different diabetes drugs	53.1% (17)
Limited knowledge of how to instruct patients to administer the diabetes drugs	31.3% (10)
Patients are not interested in diabetes, they want to focus on CVD	62.5% (20)
I believe patients with diabetes should be taken care of by their GPs	21.9% (7)
Diabetologists at my hospital do not want cardiologists to take care of diabetes treatment	25.0% (8)

Table 11. Tools to improve prevention of cardiovascular diseases in patients with diabetes

How important are these tools to improve prevention of CV diseases in patients with diabetes?	
Accreditation scheme	
Unimportant	0.0% (0)
Of little Importance	20.7% (6)
Moderately important	17.2% (5)
Important	37.9% (11)
Very important	24.1% (7)
Tele-medicine tools	
Unimportant	6.9% (2)
Of little Importance	13.8% (4)
Moderately important	20.7% (6)
Important	34.5% (10)
Very important	24.1% (7)
Adapted educational activities for HCPs	
Unimportant	0.0% (0)
Of little Importance	3.4% (1)
Moderately important	27.6% (8)
Important	34.5% (10)
Very important	34.5% (10)
Monitoring of performance measures	
Unimportant	0.0% (0)
Of little Importance	6.9% (2)
Moderately important	6.9% (2)
Important	37.9% (11)
Very important	48.3% (14)
Awareness and educational resources for patients	
Unimportant	3.4% (1)
Of little Importance	0.0% (0)
Moderately important	10.3% (3)
Important	31.0% (9)
Very important	55.2% (16)
Multidisciplinary strategies programmes	
Unimportant	0.0% (0)
Of little Importance	3.4% (1)
Moderately important	3.4% (1)
Important	24.1% (7)
Very important	69.0% (20)
Educational tools for guideline implementation	
Unimportant	0.0% (0)
Of little Importance	6.9% (2)
Moderately important	3.4% (1)
Important	27.6% (8)
Very important	62.1% (18)

Table 12. Knowledge of nationally recommended diabetes and cardiovascular disease guidelines

How much do you think professionals, working with diabetes patients in your country, know the nationally recommended diabetes and cardiovascular disease guidelines?	
No knowledge of	3.4% (1)
Somewhat knowledgeable	27.6% (8)
Knowledgeable	48.3% (14)
Very knowledgeable	20.7% (6)

RESPONDERS FROM CHINA

Table 5b. Importance of a focus on patients with diabetes in everyday practice

How important is a focus on patients with diabetes in YOUR everyday practice for prevention of cardiovascular disease?	
Not important at all	0.0% (0)
Of little importance	0.0% (0)
Moderately important	0.0% (0)
Important	**28.1% (9)**
Very important	**71.9% (23)**

Table 6b. Engagement in prevention of cardiovascular diseases in patients with diabetes

How motivated are you to engage in prevention of cardiovascular diseases in patients with diabetes in YOUR everyday practice?	
Not motivated at all	0.0% (0)
A little motivated	5.3% (1)
Moderately motivated	31.6% (6)
Motivated	**26.3% (5)**
Very motivated	**36.8% (7)**

Table 7b. Guidelines used for prevention of cardiovascular disease in people with diabetes

Which guidelines do you currently use for prevention of cardiovascular disease in people with diabetes?	
ESC alone	15.8% (3)
ESC + National	5.3% (1)
ESC + EASD	0.0% (0)
ESC + National + EASD	10.5% (2)
ESC + Other	0.0% (0)
ESC + EASD + Other	0.0% (0)
ESC + National + EASD + Other	5.3% (1)
ESC + National + Other	0.0% (0)
National alone	57.9% (11)
National + EASD	5.3% (1)
National + EASD + Other	0.0% (0)
National + Other	0.0% (0)
EASD alone	0.0% (0)
EASD + Other	0.0% (0)
Other	0.0% (0)
European Society of Cardiology	**36.8% (7)**
National guidelines	**84.2% (16)**
European Association for the Study of Diabetes	**21.1% (4)**

National = 'National guidelines'; ESC = 'European Society of Cardiology'; EASD = 'European Association for the Study of Diabetes'; Other = 'American Diabetes Association' in > 90% of cases.

Table 8b. Areas considered important to provide better educational tools to achieve goals?

In which areas do you think it is important to provide better educational tools to achieve guidelines goals? (please choose the 3 most important)	
Recommendations on lifestyle modifications in prediabetes and diabetes	42.1% (8)
Cardiovascular risk assessment in patients with prediabetes and diabetes	15.8% (3)
Multifactorial treatment recommendations for patients with DM and CVD	63.2% (12)
Identifying patients with diabetes and those at risk for developing prediabetes or diabetes	42.1% (8)
Choice of type of glucose-lowering medication and treatment targets	31.6% (6)
Prevention of diabetes in patients with impaired glucose tolerance	15.8% (3)
Recommendations for patient-centered care in diabetes and CVD	47.4% (9)
Different manifestations of CVD (e.g CAD, HF, arrhythmias, PAD)	21.1% (4)
Microvascular complications	21.1% (4)
Other	0.0% (0)

Table 9b. Proportion of patients with diabetes estimated to reach the treatment targets

	Proportion of your patients with diabetes estimated to reach the treatment targets for		
	HbA1c	LDL	Blood pressure
0%	0.0% (0)	0.0% (0)	0.0% (0)
10%	15.8% (3)	0.0% (0)	0.0% (0)
20%	26.3% (5)	31.6% (6)	10.5% (2)
30%	10.5% (2)	15.8% (3)	26.3% (5)
40%	0.0% (0)	0.0% (0)	5.3% (1)
50%	15.8% (3)	21.1% (4)	5.3% (1)
60%	5.3% (1)	5.3% (1)	10.5% (2)
70%	10.5% (2)	5.3% (1)	10.5% (2)
80%	15.8% (3)	10.5% (2)	15.8% (3)
90%	0.0% (0)	10.5% (2)	10.5% (2)
100%	0.0% (0)	0.0% (0)	5.3% (1)
Average	24.4%	27.5%	33.1%

Table 10b. Barriers to prevention of cardiovascular diseases in patients with diabetes

What are the barriers to prevention of cardiovascular diseases in patients with diabetes that you perceive in your practice?	
Limited time during the patient appointment	21.9% (7)
Patients with diabetes are only focused on lowering glucose	28.1% (9)
Limited knowledge of the cardiovascular benefits of the different diabetes drugs	18.8% (6)
Limited knowledge of how to instruct patients to administer the diabetes drugs	15.6% (5)
Patients are not interested in diabetes, they want to focus on CVD	21.9% (7)
I believe patients with diabetes should be taken care of by their GPs	12.5% (4)
Diabetologists at my hospital do not want cardiologists to take care of diabetes treatment	21.9% (7)

Table 11b. Tools to improve prevention of cardiovascular diseases in patients with diabetes

How important are these tools to improve prevention of CV diseases in patients with diabetes?	
Accreditation scheme	
Unimportant	0.0% (0)
Of little Importance	6.7% (1)
Moderately important	33.3% (5)
Important	40.0% (6)
Very important	20.0% (3)
Tele-medicine tools	
Unimportant	0.0% (0)
Of little Importance	13.3% (2)
Moderately important	33.3% (5)
Important	26.7% (4)
Very important	26.7% (4)
Adapted educational activities for HCPs	
Unimportant	0.0% (0)
Of little Importance	6.7% (1)
Moderately important	20.0% (3)
Important	53.3% (8)
Very important	20.0% (3)
Monitoring of performance measures	
Unimportant	0.0% (0)
Of little Importance	0.0% (0)
Moderately important	13.3% (2)
Important	73.3% (11)
Very important	13.3% (2)
Awareness and educational resources for patients	
Unimportant	0.0% (0)
Of little Importance	0.0% (0)
Moderately important	0.0% (0)
Important	53.3% (8)
Very important	46.7% (7)
Multidisciplinary strategies programmes	
Unimportant	0.0% (0)
Of little Importance	0.0% (0)
Moderately important	6.7% (1)
Important	46.7% (7)
Very important	46.7% (7)
Educational tools for guideline implementation	
Unimportant	0.0% (0)
Of little Importance	0.0% (0)
Moderately important	13.3% (2)
Important	60.0% (9)
Very important	26.7% (4)

Table 12b. Knowledge of nationally recommended diabetes and cardiovascular disease guidelines

How much do you think professionals, working with diabetes patients in your country, know the nationally recommended diabetes and cardiovascular disease guidelines?	
No knowledge of	0.0% (0)
Somewhat knowledgeable	26.7% (4)
Knowledgeable	66.7% (10)
Very knowledgeable	6.7% (1)