

How to talk about diabetes



AVOID:

WHY?



USE INSTEAD

“She’s a diabetic”
“Are you diabetic?”

These phrases suggest that a person’s identity is determined by diabetes, which is incorrect.

“This person lives with diabetes.”
“Do you have diabetes?”

“This person is/isn’t compliant or adherent.”
“This person listens/doesn’t listen.”
“This person is in denial.”

These words imply that caring for one’s diabetes requires following somebody else’s directives.

“Right now, with everything going on in this person’s life, diabetes is not a priority for they”.

“blood sugar control”
“glycemic control”
“This person is well controlled/uncontrolled.”
“This person has good/bad control.”

When the body no longer does what it’s suppose to do, it’s virtually impossible to achieve control.

“blood sugar management”
“This person frequently checks their blood sugar.”
“This person’s insulin doses aren’t adjusted to manage their blood sugar.”

“This person can/can’t... should/shouldn’t... does/doesn’t... must/mustn’t...”
“I want you to...”

These phrases sound like directives or orders one would give a child. They can be a source of judgment, guilt, shame and blame.

“Have you tried...?”
“What if...?”
“May I suggest something?”
“May I tell you what has worked for other people?”
“What are you planning to do about...?”
“Would you like to consider...”

“This person is not motivated/not willing.”

Only a few people are not motivated to live a long and healthy life. The person you’re talking about may find that certain changes aren’t worth it or feasible, depending on the obstacles they face.

“This person doesn’t want to increase their insulin doses because they’re afraid of hypoglycemia.”

“You’ll end up blind or on dialysis.”

People with diabetes are usually aware that they’re at risk of complications. The use of fear or threat tactics is rarely effective.

“A growing number of people live a long and healthy life with diabetes. How can I help you reach your goals?”