

Media Guide:

The Power of Language in Reporting on Diabetes



Healthcare professionals, writers, researchers and the general public are invited to join a language movement by considering and adopting the following recommendations:

Use language that...

- *Is neutral, non-judgmental and based on facts, actions or physiology/biology.*
- *Is free from stigma.*
- *Is strengths-based, respectful, inclusive and imparts hope.*
- *Fosters collaboration between patients and providers.*
- *Is person-centered*

For additional resources, including the full list of word suggestions, visit DiabetesEducator.org/language

More than 30 million people have diabetes and one in three U.S. adults has prediabetes. It is therefore highly likely that during their career, a journalist will write about people with the disease.

Learning you have diabetes can be overwhelming, not only because its potential effects are serious - from heart disease to blindness - but also because managing it is challenging. Making healthy food choices, being active, managing stress, monitoring blood glucose (sugar) levels and using medications as directed are key to staying healthy. Juggling all of those things every day is tough.

Ensuring people are as successful as possible in doing those things requires support, compassion and understanding. That begins with using helpful, rather than harmful or judgmental language. For people with diabetes, language can directly impact their motivation, behaviors and outcomes.

The Association of Diabetes Care & Education Specialists (ADCES) and the American Diabetes Association (ADA) formed a task force and developed a joint paper providing recommendations for enhanced communication about and with people who have diabetes.

Here are a few easy tips to ensure use of the most positive and descriptive language when writing about diabetes or a person with the disease.

SAY THIS

Person with diabetes...
Manage.....
Engaged.....
Participate.....
or medication-taking

NOT THAT

Diabetic
Control
Compliant
Adherent/ence



Say “person with diabetes” instead of “diabetic.”

WHY?

This puts the person first, instead of the disease. It also avoids defining someone as their disease. There is much more to a person than having diabetes.

FOR EXAMPLE:

Say person living with diabetes and “how long have you had diabetes?” instead of diabetic and “how long have you been a diabetic?”

ALSO:

Don't use diabetic as an adjective. Say foot ulcer or infection instead of diabetic infection or diabetic foot.

Use “manage” instead of “control” when talking about the disease.

WHY?

It is virtually impossible to control diabetes. People manage the disease the best they can. Describe what the person is doing to manage the disease, whether that is checking blood glucose levels several times a week, or taking medication regularly, instead of saying diabetes is controlled, uncontrolled or poorly controlled.

FOR EXAMPLE:

Say “She is checking her blood glucose levels a few times per week” or “He is taking sulfonylureas, and they are not bringing his blood glucose down enough” instead of “She has good diabetes control” or “He is not doing enough to control his diabetes.”

ALSO:

Don't use control as a noun. Say A1C levels, blood glucose levels or targets, glycemic target or goal, or glycemic variability or stability instead of glycemic or glucose control, poor control or good control.

Use words such as “participation” or “involvement” instead of “compliance” or “adherence.”

WHY?

Compliance and adherence imply a person is behaving and doing what someone else wants. Saying a person with diabetes isn't compliant or adherent in taking insulin or medication implies they are being willful or acting like a child. People with diabetes make choices about their diabetes self-care. It's preferable to emphasize a person's strengths, to acknowledge what they are doing well and build on that. In other words, focus on facts, not judgment. Therefore, using words such as engagement, participation, involvement and medication-taking are preferred.

FOR EXAMPLE:

Say “she takes insulin whenever she can afford it,” instead of “she is not compliant in taking her insulin” or “she doesn't adhere to her insulin schedule.” Pay attention to the images used to represent people with diabetes.

Avoid using “obese” or “overweight” as adjectives and descriptors like “preferred” or “desired” weight.

WHY?

Medical terms like obesity pathologizes the body. Use factual, non-stigmatizing weight descriptors such as higher weight, larger body, plus size or if required BMI>X. Terms like overweight or ideal weight are judgmental and convey a false belief that there is a single, universal weight that prevents illness. When speaking in general or when someone's preference is unknown, higher weight or larger person/people is preferred language.

FOR EXAMPLE:

Say “the higher-weight man on the bus” or the “larger weight man on the bus” instead of “the obese man on the bus.”