

Why Language Matters especially in Diabetes Care

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A person's a person,
no matter how
small.

-Dr. Seuss

What words negatively affect you?

Six Themes

- **Judgment** (non-compliant, uncontrolled, don't care, should, failure)
- **Fear/Anxiety** (complications, blindness, death, DKA)
- **Labels/Assumptions** (diabetic, all people with diabetes are fat, suffer)
- **Oversimplifications/Directives** (lose weight, you should, you'll get used to it, at least it's not...)
- **Misunderstanding/Misinformation/Disconnected** (cure, reverse, bad kind, you're fine)
- **Body Language and Tone** (no eye contact, accusatory tone)

(Dickinson, 2018)

Look around....



<https://www.diabetesaustralia.com.au/position-statements>

<http://jaime-dulceguerrero.com/wp-content/uploads/2015/03/IDF-LANGPHI-2.pdf>

The next step!



American Association
of Diabetes Educators



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Guiding principles

- Diabetes is a complex and challenging disease involving many factors and variables
- Stigma that has historically been attached to a diagnosis of diabetes can contribute to stress and feelings of shame and judgment
- Every member of the healthcare team can serve people with diabetes more effectively through a respectful, inclusive, and person-centered approach
- Person-first, strengths-based, empowering language can improve communication and enhance motivation, health and well-being of people with diabetes.

Recommendations

- Use language that
 - Is neutral, nonjudgmental, 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
 - Empowers people with diabetes to self-care

Becoming aware of and changing our words

Problematic	Preferred
Diabetic	Person living with diabetes
Test (blood glucose)	Check / monitor
Control (verb)	Manage; describe what the person is doing
Control (noun)	Define what you mean by control and use that instead (blood glucose level, A1C)
Good/Bad/Poor	Safe/unsafe levels; target levels; use numbers and focus on facts instead of judgmental terms
Compliant / Adherent	Takes medicine about half the time; Eats vegetables a few times a week; engagement; participation

The message about messages

- Words are powerful
- Words create meaning
- Meaning can be positive or negative
- We can choose positive, strengths-based language to send messages that empower
- When our mindset changes to putting the person first, the language will follow
 - Remove labels, remove blame/shame/guilt



How we talk to and about people with diabetes plays an important role in engagement, conceptualization of diabetes and its management, treatment outcomes, and psychosocial well-being. For people with diabetes, language has an impact on motivation, behaviors, and outcomes.

A task force, consisting of representatives from the American Association of Diabetes Educators (AADE) and the American Diabetes Association (ADA), convened to discuss language in diabetes care and education and developed a joint paper, which provides recommendations for enhancing communication about and with people who have diabetes.

Four principles guided this work and served as a core set of beliefs for the paper:

- ▶ Diabetes is a complex and challenging disease involving many factors and variables
- ▶ Stigma that has historically been attached to a diagnosis of diabetes can contribute to stress and feelings of shame and judgment
- ▶ Every member of the health care team can serve people with diabetes more effectively through a respectful, inclusive, and person-centered approach
- ▶ Person-first, strengths-based, empowering language can improve communication and enhance motivation, health and well-being of people with diabetes

Health care professionals, writers, researchers, and the general public are invited to join a language movement by considering and adopting the following five 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, [click here](https://diabeteseducator.org/language) or visit diabeteseducator.org/language



Problematic	Preferred	Rationale
<p>Diabetic (<i>as an adjective</i>) diabetic foot diabetic education diabetic person</p> <p><i>"How long have you been diabetic?"</i></p>	<p>Foot ulcer; infection on the foot Diabetes education Person with diabetes</p> <p><i>"How long have you had diabetes?"</i></p>	<ul style="list-style-type: none"> • Focus on the physiology or pathophysiology. • "Diabetic education" is incorrect (education doesn't have diabetes). • Put the person first. • Avoid using a disease to describe a person.
<p>Diabetic (<i>as a noun</i>)</p> <p><i>"Are you a diabetic?"</i></p>	<p>Person living with diabetes Person with diabetes Person who has diabetes</p> <p><i>"Do you have diabetes?"</i></p>	<ul style="list-style-type: none"> • Person-first language puts the person first. • Avoid labeling someone as a disease. There is much more to a person than diabetes.
<p>Non-diabetic; normal</p>	<p>Person who doesn't have diabetes Person without diabetes</p>	<ul style="list-style-type: none"> • See above. • The opposite of "normal" is "abnormal"; people with diabetes are not abnormal.
<p>Compliant/compliance/ non-compliant/ non-compliance</p> <p>Adherent/non-adherent/ adherence/non-adherence</p>	<p>Engagement Participation Involvement Medication taking</p> <p><i>"She takes insulin whenever she can afford it."</i></p>	<ul style="list-style-type: none"> • Compliance and adherence imply doing what someone else wants, i.e., taking orders about personal care as if a child. In diabetes care and education, people make choices and perform self-care/self-management. • Focus on people's strengths – what are they doing or doing well and how can we build on that? • Focus on facts rather than judgments.
<p>Control (<i>as a verb or an adjective</i>) controlled/uncontrolled, well controlled/poorly controlled</p>	<p>Manage</p> <p><i>"She is checking blood glucose levels a few times per week."</i></p> <p><i>"He is taking sulfonylureas, and they are not bringing his blood glucose levels down enough."</i></p>	<ul style="list-style-type: none"> • Control is virtually impossible to achieve in a disease where the body no longer does what it's supposed to do. • Use words/phrases that focus on what the person is doing or doing well. • Focus on physiology/biology and use neutral words that don't judge, shame, or blame.

What's next?

- Call to action
 - When you hear it, speak up!
 - Share the tip sheet:
<https://www.diabeteseducator.org/docs/default-source/practice/educator-tools/HCP-diabetes-language-guidance.pdf?sfvrsn=8>
 - Encourage media in your area:
<https://www.diabeteseducator.org/docs/default-source/practice/educator-tools/diabetes-language-media-guide.pdf?sfvrsn=0>

Reference

- Dickinson, J.K. (2018). The experience of diabetes-related language in diabetes care. *Diabetes Spectrum*, 31(1), 58-64.
- Dickinson, J.K., Guzman, S.J., Maryniuk, M.D., O'Brian, C.A., Kadohiro, J.K., Jackson, R.A., et al. (2017). The Use of Language in Diabetes Care and Education. *The Diabetes Educator*, 43(6); 551-564.