SPEAKING THE LANGUAGE OF DIABETES:

Language Guidance for Diabetes-Related Research, Education, and Publications

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:

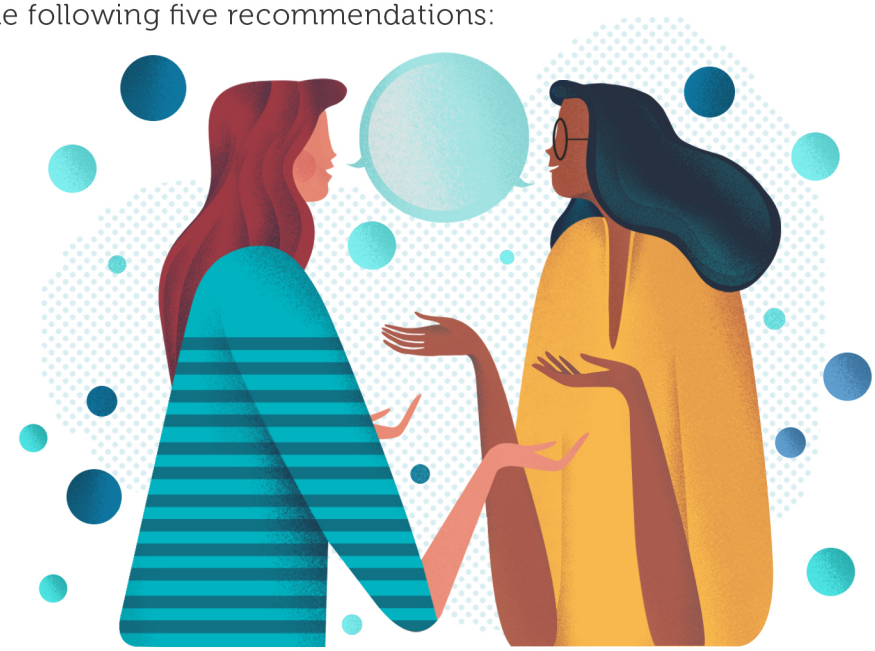
- Diabetes is a complex and challenging disease involving many factors and variables
- Every member of the health care team can serve people with diabetes more effectively through a respectful, inclusive, and person-centered approach
- Stigma that has historically been attached to a diagnosis of diabetes can contribute to stress and feelings of shame and judgment
- 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 or visit diabeteseducator.org/language



Problematic	Preferred	Rationale
Diabetic *(as an adjective)* diabetic foot diabetic education diabetic person *"How long have you been diabetic?"*	Foot ulcer; infection on the foot Diabetes education Person with diabetes *"How long have you had diabetes?"*	• 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.
Diabetic *(as a noun)* *"Are you a diabetic?"*	Person living with diabetes Person with diabetes Person who has diabetes *"Do you have diabetes?"*	• Person-first language puts the person first. • Avoid labeling someone as a disease. There is much more to a person than diabetes.
Non-diabetic; normal	Person who doesn't have diabetes Person without diabetes	• See above. • The opposite of **"normal"** is **"abnormal"**; people with diabetes are not abnormal.
Compliant/compliance/ non-compliant/ non-compliance Adherent/non-adherent/ adherence/non-adherence	Engagement Participation Involvement Medication taking *"She takes insulin whenever she can afford it."*	• 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.
Control *(as a verb or an adjective)* controlled/uncontrolled, well controlled/poorly controlled	Manage *"She is checking blood glucose levels a few times per week."* *"He is taking sulfonylureas, and they are not bringing his blood glucose levels down enough."*	• 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.
Control *(as a noun)* glycemic control; glucose control; poor control; good control; bad control; tight control	A1C Blood glucose levels/targets Glycemic target/goal Glycemic stability/variability	• Focus on neutral words and physiology/biology. • Define what **"good control"** means in factual terms and use that instead.