

Media Guide:

The Power of Language - in Reporting on 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

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

More than 30 million people have diabetes and one in three U.S. adults has prediabetes.² It is therefore highly likely that during his or her career, a journalist will write about people with the disease.

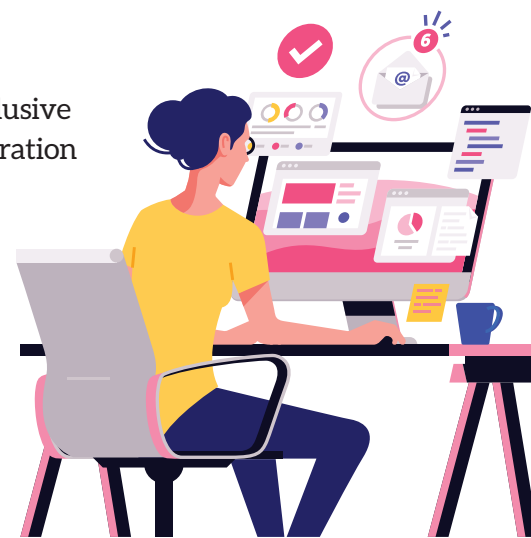
Learning you have diabetes can be overwhelming, not only because its potential effects are serious - from heart disease to blindness - but also because managing it is challenging. Making healthy food choices, being active, managing stress, monitoring blood glucose (sugar) levels, and using medications 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. And 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 paper¹ providing recommendations for enhanced communication about and with people who have diabetes.

The task force is asking everyone - from healthcare professionals and researchers, to writers, editors and the public - to join this movement by using 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.



Here are a few easy tips to follow 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
Engagement
Participation
Involvement
Medication-taking

NOT THAT

Diabetic
Control
Compliant
Adherent



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

WHY?

This puts the person first, instead of the disease. It also avoids defining someone as his or her 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 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 he or she is being willful or acting like a child. In fact, people with diabetes make choices about their self-care and management of diabetes. It’s preferable to emphasize a person’s strengths, to acknowledge what he or she is 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 words describing weight that are negative.

WHY?

When talking about weight, it’s important to use terminology that does not alienate or stigmatize. A metanalysis found that preferred terms by individuals are weight, healthy/unhealthy weight, above a healthy weight range, too much weight for their health, weight may be damaging your health. Negative terms as reported by people surveyed are obese, fat, overweight, curvy, heavy, large size, big-boned, chubby and plus size.