

dStigmatize

(mmol/L)

Coaches and trainers can help people with diabetes thrive

Diabetes is a **chronic condition that impacts how the body uses blood sugar (also called blood glucose) for energy.** There are two common types: type 1 diabetes (T1D), where the body cannot make insulin, a hormone required to use blood sugar for energy, and type 2 diabetes (T2D), where the body does not make enough insulin or respond to it effectively.

Diabetes management tools:



Manual and continuous glucose monitoring systems (CGMs)



Insulin injections Insulin pumps



Emergency glucagon & low snacks

Managing diabetes looks different for everyone but may include a combination of medications, medical devices or technology, and adjustments to eating and exercise patterns. Regularly **monitoring blood sugar levels to avoid dangerous blood sugar highs (hyperglycemia) or lows (hypoglycemia) is key, especially during exercise.**¹³

People with diabetes can participate and perform competitively in all of the same sports others might enjoy.¹⁻³ People with diabetes will develop their management plans and preferences with their healthcare team, but **you can support by ensuring they receive necessary accommodations to manage their diabetes during practices and matches**, and by keeping extra supplies, like their preferred snacks for treating low blood sugars, on hand.

Blood Sugar Ranges:

Above range (high):
10 mmol/L at rest

Target range:

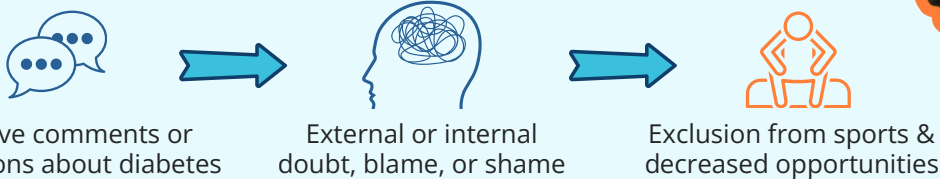
5.0-13.9 mmol/L prior to initiating exercise

3.9-10 mmol/L at rest

Below range (low):
3.9 mmol/L & below

Support and inclusion change the game

Supporting athletes with diabetes doesn't just mean allowing accommodations for medical treatment or self-management. **People often experience negative attitudes, judgment, assumptions, and prejudice simply for having diabetes, known as diabetes stigma.**⁴ This is rooted in people being incorrectly blamed for "causing their diabetes" or being viewed as "weak, lazy, or incapable" for having a chronic condition.



These negative beliefs **often lead to exclusion or self-exclusion from sports.**⁵ We can all do our part to help ensure people with diabetes feel safe and included in all activities.



Know the signs of low ⬇️ and high ⬆️ blood sugar

Blood sugar changes may impact athletic performance. Low blood sugar may cause **difficulty concentrating, irritability, dizziness, light-headedness, trembling, sweating, hunger, behavior changes, and more.** If blood sugar drops too low, emergency glucagon (available as nasal sprays or injections) may need to be administered.

High blood sugar can look similar, including symptoms like **difficulty concentrating and irritability**. High blood sugar may also cause **lethargy, blurred vision, thirst, or excessive urination**.

You can help:

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Cultivating diabetes stigma-free spaces for sport

Consider the best ways to communicate.⁴

Bringing up a topic like diabetes can be difficult. Help ease discussions by using **supportive language** (such as “person with diabetes” instead of “diabetic”). **Be mindful of non-verbal communication** (such as not staring at people’s medical devices or gasping and pointing during an emergency). Be prepared with helpful follow-up questions, such as “Is there anything I can do to support you? I’m here to help.”

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Set up a game plan with the athlete or person with diabetes in advance.

Collaborate with the athlete(s) with diabetes to create a plan about how to best support them, including a game plan to manage blood sugar checks during practice, how to help during emergency scenarios (like administering glucagon if needed), and how public they want conversations about their diabetes to be. Designate a place to keep their supplies, like low snacks and glucagon, during training and events so they can be easily reached. Provide **information in advance about the type of exercise and intensity that will be on the schedule** each day and consider learning more about how **your sport** may impact blood sugar levels:

2


Aerobic activities: ↓


Mixed activities: ↑ ↓


Anaerobic activities: ↑ ↓

Get educated, but don’t give unsolicited management advice.

Diabetes is complicated! **Consider taking time to learn more about diabetes**, such as understanding management tools in case of emergencies. People with diabetes often spend a lot of time educating others and correcting misconceptions. Instead, make learning a team sport. Consider teaching the team about diabetes (if the player is open to it) and helping to correct misconceptions about diabetes. Being an informed support system is empowering, but remember to **let people with diabetes steer the ship on decisions about how they manage their condition and what help they need**.

3

Citations:

1. Adolfsson et al. ISPAD Clinical Practice Consensus Guidelines 2022: Exercise in children and adolescents with diabetes. *Pediatr Diabetes*. 2022;23(8):1341-1372.
2. Riddell et al. Exercise management in type 1 diabetes: a consensus statement. *Lancet Diabetes Endocrinol*. 2017;5(5):377-390.
3. Riddell, Peters. Exercise in adults with type 1 diabetes mellitus. *Nat Rev Endocrinol*. 2023;19(2):98-111.
4. Speight et al. Bringing an end to diabetes stigma and discrimination: an international consensus statement on evidence and recommendations. *Lancet Diabetes Endocrinol*. 2024;12(1):61-82.
5. Fried et al. The Challenges of Being Physically Active: A Qualitative Study of Young People With Type 1 Diabetes and Their Parents. *Can J Diabetes*. 2021;45(5):421-427.

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