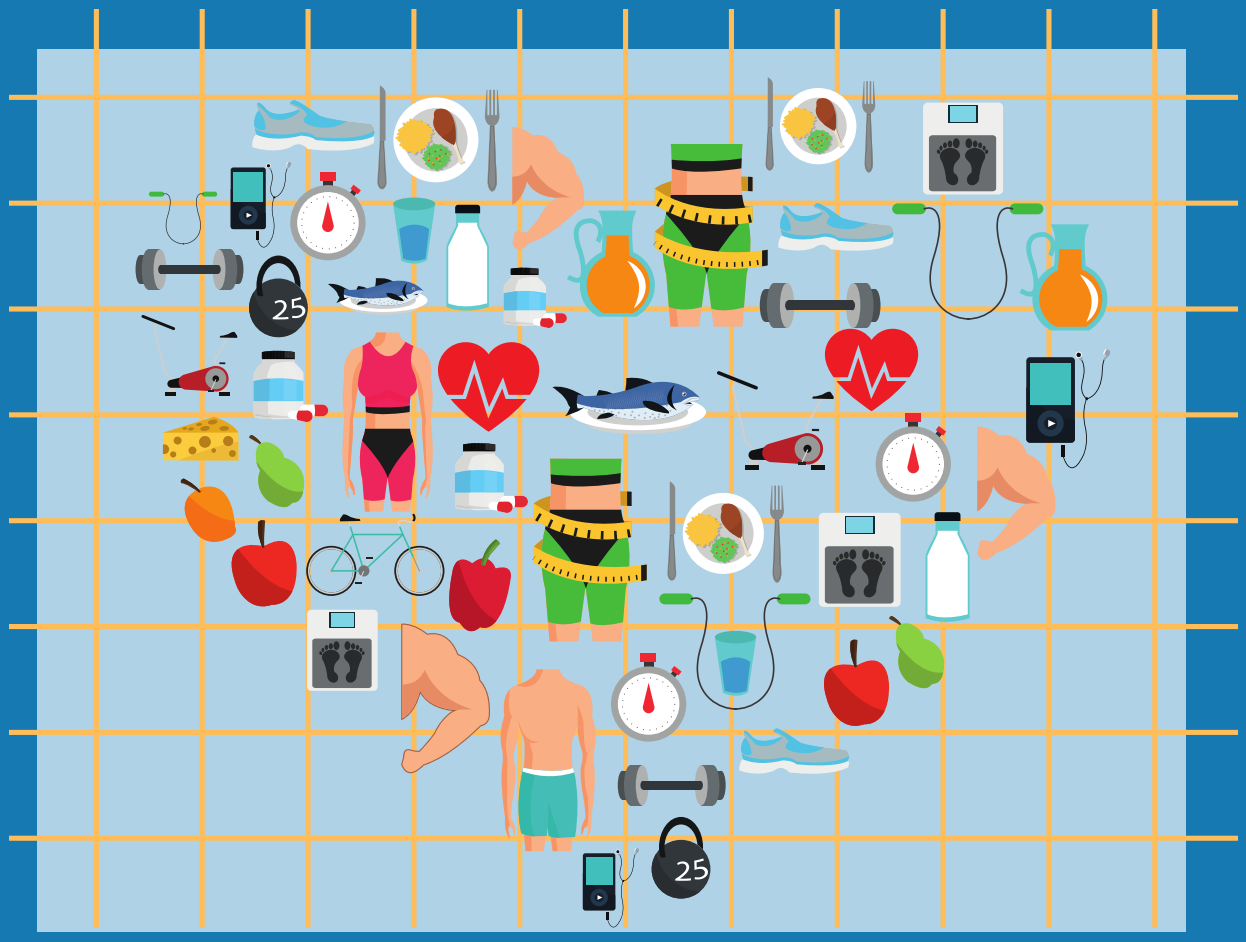
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INFOGRAPHICS BOOKLET

for teachers and sport coaches



Reference Number: 2025-1-BG01-KA210-VET-000349855

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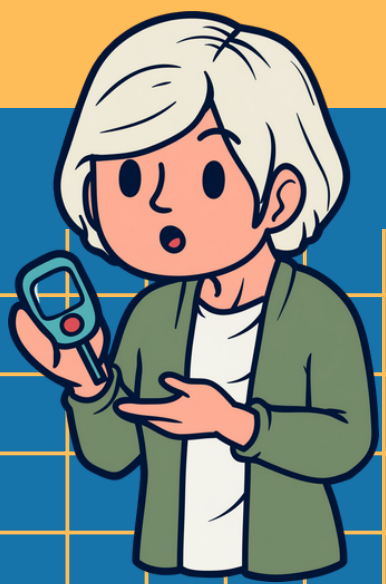
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INTRODUCTION

DiabetEASE is an Erasmus+ project co-funded by the European Union, developed through Vocational Education and Training (VET) cooperation between partners in Bulgaria, Spain, and Cyprus.

This infographic booklet is a practical visual resource for teachers, coaches, personal trainers, and non-formal educators. It supports safe, inclusive participation for children and young people with diabetes in education and sport.



MODULE 1: TREATMENT



INTRODUCTION
GENERAL ABOUT ALL COUNTRIES

This chapter explores how diabetes treatment in children and young people is organised and delivered in three different European contexts: Spain, Cyprus, and Bulgaria.

Although the basic principles of diabetes care are the same everywhere such as the use of insulin, blood glucose monitoring, healthy nutrition, and physical activity the way treatment is accessed, supported, and managed can vary from country to country.

This chapter helps educators and coaches understand these national differences, including healthcare structures, school practices, and the level of support available to students with diabetes. By gaining insight into how treatment works in each context, professionals can better support children from diverse backgrounds and collaborate more effectively with families and healthcare teams.

Prevention and early detection



Healthy habits help prevent type 2 diabetes and protect your future.

Build healthy habits

- Eat a balanced diet
- Stay active every day
- Drink water and limit sugary drinks

Know your risk factors

- Family history of diabetes
- Overweight or obesity
- Age 45 and above

Watch for warning signs

- Increased thirst
- Frequent urination
- Unusual tiredness
- Unexplained weight loss



Get your blood sugar checked regularly.

What should I know about low blood glucose levels?

Causes

- Too much Insulin
- Few Carbohydrates
- Unplanned exercise or activity
- Lack of food or snack

Symptoms


SWEATING AND PALPITATIONS

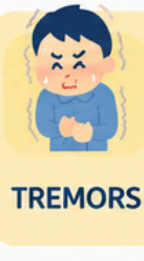

HEADACHE


MENTAL CONFUSION


WEAKNESS


IRRITABILITY


BLURRED VISION


TREMORS


HUNGER

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Hypoglycemia: management and action protocol

CONSCIOUS ← **How is the person?** → **UNCONSCIOUS**

Rule of 15:



15 g of sugar / 100 ml of juice



Wait **15** minutes


Repeat Blood Glucose

IMPROVEMENT

Give 10 g of slow-absorbing carbs: 3 crackers or 20 g of bread

NO IMPROVEMENT

If value is < 70 mg/dl repeat steps 1 to 3


Do not give anything by mouth


Place in recovery position


Administer injected or inhaled glucagon

REGAINS CONSCIOUSNESS

Administer carbs Rule of 15

DOES NOT REGAIN CONSCIOUSNESS

Call Emergency Services

Type 1 Diabetes

What is Type 1 Diabetes?

- An autoimmune condition in which the immune system destroys the beta cells in the pancreas that produce insulin.
- Without insulin, the body cannot properly use carbohydrates, fats and proteins for energy.
- It is mainly characterized by high levels of glucose in the blood (hyperglycaemia).
- It is not caused by lifestyle habits and it cannot be prevented through healthy habits alone.



Key Concepts

Insulin Sensitivity Factor

What is it?
The amount your blood glucose is expected to drop with 1 unit of insulin.

What is it used for?
It helps estimate how much insulin may be needed for
a correction.

How is it estimated?
A common guideline is the 1800 rule:
1800 ÷ total daily insulin dose.

Important:
correction doses should always follow the personalised plan agreed with the diabetes care team.





Insulin-to-Carbohydrate Ratio

What is it?
The amount of insulin needed for each carbohydrate portion or grams of carbohydrate eaten.

What is it used for?
It helps calculate mealtime insulin doses.

Why does it matter?
Different meals may contain different amounts of carbohydrate, so insulin doses may vary from meal to meal.

This ratio is individual and should be set up with the healthcare team



Carbohydrate Counting

What is a carbohydrate portion?

In this guide, 1 carbohydrate portion = 10 g of carbohydrate.

Why is it useful?

carbohydrate counting helps someone know how much carbohydrate they will eat and makes food management easier

Learn the usual carbohydrate content of common foods.



10 g

carbohydrate

1 carbohydrate portion

Examples of 1 carbohydrate portion (10 g carbohydrate)



1 small piece of fruit (depending on type and size)



A small serving of cooked rice or pasta



Milk or yogurt may also contain carbohydrate



This ratio is individual and should be set up with the healthcare team.

Myths and Misconceptions

Common nutrition and treatment myths in type 1 diabetes

Myth

Children develop diabetes because they eat too much sugar.



Reality

Type 1 diabetes is an autoimmune condition. It is not caused by sugar intake. Excess sugar may contribute to weight gain and raise risk for type 2 diabetes, but it does not directly cause type 1 diabetes.

Myth

If carbohydrates are counted, children can freely drink sugary beverages.



Reality

Sugary drinks can cause rapid, hard-to-manage blood glucose spikes. Carbohydrate counting alone does not fully offset the glycemic impact of liquid sugars.

Myth

Chocolate or biscuits are the best way to treat hypoglycaemia.



Reality

Chocolate and biscuits often contain fat, which slows carbohydrate absorption. Hypoglycaemia should be treated with a rapid-acting glucose such as fruit juice or glucose tablets.

Myth

Sour fruits contain fewer carbohydrates than sweet fruits.



Reality

Taste does not determine carbohydrate content. Sour or tart fruits do not necessarily contain fewer carbohydrates

Myth

Insulin cures diabetes, or children will outgrow it.



Reality

Insulin manages type 1 diabetes but does not cure it. Type 1 diabetes is a lifelong condition that requires ongoing treatment.

Myth

All sugar-free products are carbohydrate-free.



Reality

Sugar-free does not always mean no carbohydrates-free. Always read nutrition labels and check portion sizes.

Myth

Only carbohydrates affect blood glucose.



Reality

Carbohydrates have the biggest impact on the effect, but protein, fat, illness, exercise, stress and itao insulin timing can also affect blood glucose and insulin needs.

Myth

You can estimate carbohydrate portions just by looking.



Reality

Visual guessing is not always accurate. Labels, measuring tools, food scales and apps can help count carbohydrates more safely.

1. RECOGNISE THE SIGNS

Watch for any of these signs of hypoglycaemia (low blood glucose).



Shaking or trembling



Sweating



Pale skin



Sudden hunger



Irritability or mood changes



Difficity concentrating



Dizziness



Poor coordination



Unusual behaviour



Confusion



Sudden fatigue

2. WHAT TO DO

Follow these steps if you suspect hypoglycaemia.

1



Stop the activity immediately.

2



Do not leave the student alone.

3



Provide fast-acting carbohydrates according to the student's care plan.

4



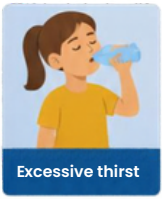
Monitor the student's condition.

5

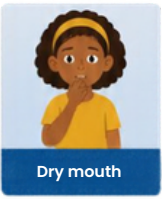


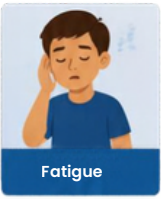
Allow participation to resume only when the student has recovered fully.

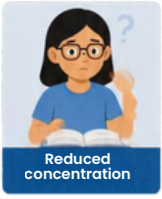
1 COMMON SIGNS OF HYPERGLYCAEMIA

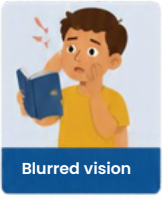

Excessive thirst

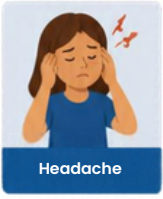

Frequent urination

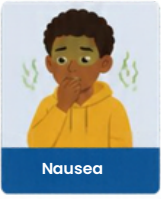

Dry mouth


Fatigue


Reduced concentration


Blurred vision


Headache


Nausea

2 WHAT TO DO

1


Allow the student to rest.

2


Onururing hydration.

3



Follow the student's individual diabetes care plan.

4


Contact parents or healthcare support when indicated.

3 EMERGENCY SITUATIONS

URGENT WARNING SIGNS

- Loss of consciousness
- Seizure
- Inability to swallow
- Severe confusion or disorientation
- No response to treatment according to the care plan

RESPONSE SEQUENCE

1. Call emergency services immediately.
2. Follow the student's emergency care plan.
3. Administer glucagon only if trained and authorized.
4. Contact parents or guardians.
5. Remain with the student until help arrives.

KEY MESSAGE FOR TEACHERS AND COACHES

Students with diabetes do not need special treatment; they need informed support.

**A severe episode may mean the student cannot eat or drink, cannot swallow safely, is confused or very disoriented,
does not respond normally, or is unconscious.**

Act quickly and safely.



HOW TO ACT IN CASE OF SEVERE HYPOGLYCEMIA

Although most low blood sugar episodes are mild and quickly resolved, schools must be prepared to respond to a severe hypoglycemia a situation in which the student may be unable to eat or drink, may not respond normally, or may even lose consciousness. Actuar rápido y con seguridad es fundamental.

Steps for school staff

- Stay calm and assess the situation: if the student cannot swallow safely, is confused, very disoriented, or unconscious, it is considered a severe episode.
- Do NOT give food or drink: this could cause choking.
- Administer emergency glucagon (nasal or injectable), only if it is available and the staff has been trained.
- Call emergency services immediately.
- Stay with the student until help arrives: place them on their side (recovery position) to maintain an open airway if they are unconscious.
- Inform the family as soon as possible once the situation is under control.

Why preparation matters

Ensuring that school personnel know where the student's emergency kit is stored, who is trained to use glucagon, and what steps to follow can make a life saving difference. Clear protocols reduce fear, prevent delays, and help everyone respond with confidence.

How to Act in Case of Severe Hypoglycemia

A severe episode may mean the student cannot eat or drink, cannot swallow safely, is confused or very disoriented, does not respond normally, or is unconscious.



Act quickly and safely.

Steps for school staff

1 

Stay calm and assess the situation.

2 

Do NOT give food or drink: this could cause choking.

3 

Administer emergency glucagon (nasal or Injectable), only if it is available and the staff has been trained.

4 

Call emergency services immediately.

5 

Stay with the student until help arrives. If the student is unconscious, place them on their side in the recovery position to maintain an open airway.

6 

Inform the family as soon as possible once the situation is under control.

Preparation is important



Emergency kit
Know where the emergency kit is stored.

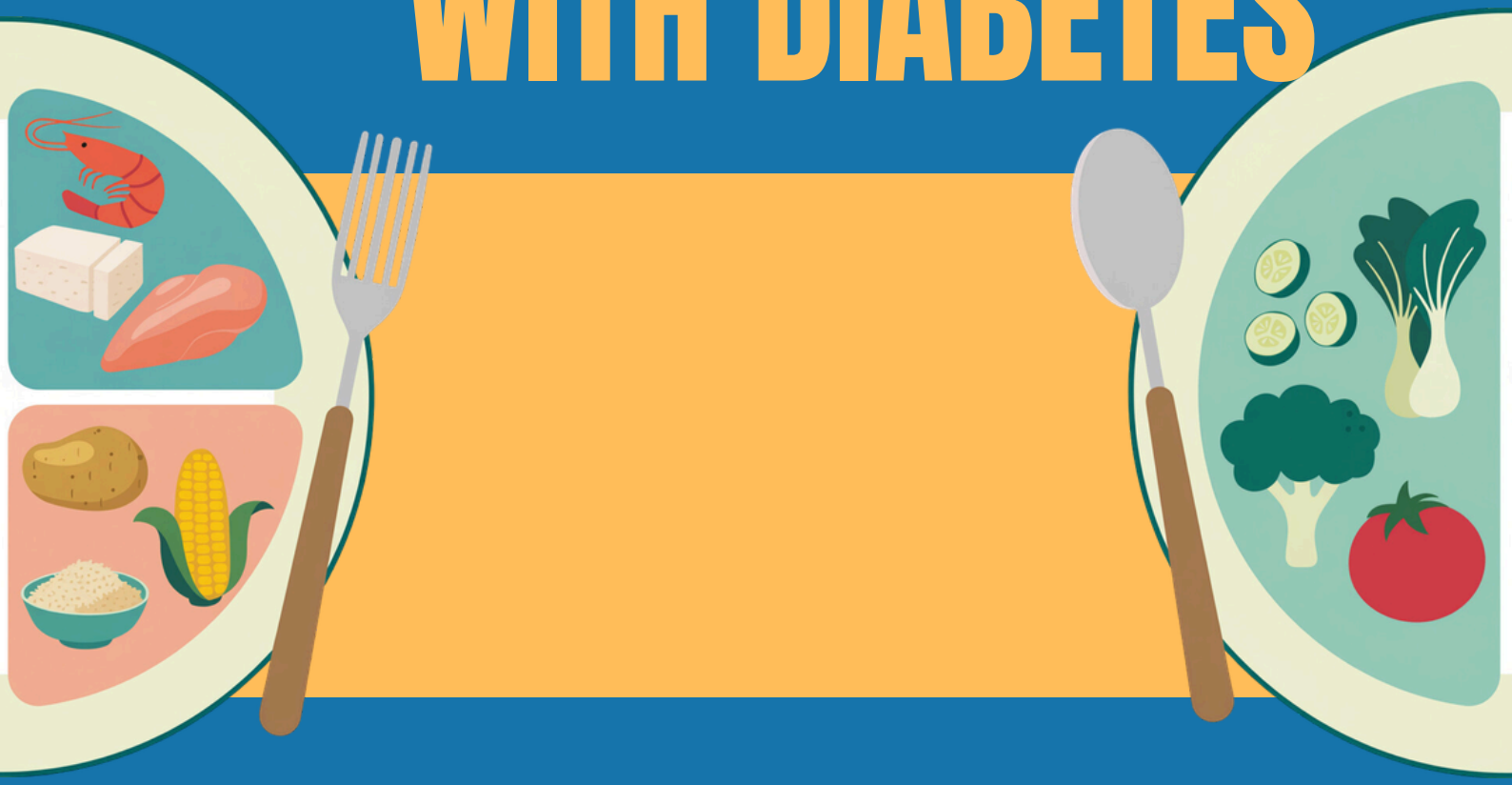


Trained staff
Know who is trained to use glucagon.



Clear protocol
Know what steps to follow.

MODULE 2: RIGHTS OF STUDENTS WITH DIABETES



Students with type 1 diabetes have the right to access education and participate safely in all school and extracurricular sports activities without discrimination. International standards such as those from ISPAD also emphasize that children with diabetes must receive appropriate care and support to remain safe and fully engaged in both classroom learning and physical or recreational activities.

The Decalogue of Rights for Students with Type 1 Diabetes in School and Extracurricular Sports Contexts presents the fundamental rights

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Rights of students with Diabetes

Students with Type 1 diabetes have the right to access education and participate safely in all school and extracurricular activities without discrimination

These rights are supported by the Constitution and the LOMLOE in Spain, as well as international standards such as ISPAD.



Schools play a key role in creating an environment where students can manage their condition confidently while participating fully in all activities

THE RIGHTS

1. **Right to non-discrimination**
   Students have the right to be treated fairly and without discrimination
2. **Right to inclusive participation on equal terms**
   Students have the right to participate in all activities equally with their peers
3. **Right to safety and adequate care in all settings**
   Students have the right to a safe environment and appropriate care at all times
4. **Right to trained and competent staff**
   Students have the right to be supported by trained and competend staff
5. **Right to individualised care plan**
   Students have the right to a diabetes management plam tailored to their needs
6. **Right to use necessary medical devices at all times**
   Students have the right to use their diabetes devices whenever needed
7. **Right to full participation in sports and physical activity**
   Students have the right to take part in PE, sports and all physical activities
8. **Right to access food and carbo-hydrates whenever needed**
   Students have the right to snacks, meals, water and carbohydrates whenever necessary
9. **Right to privacy and respectful treatment**
   Students have the right to privacy and to be treated with respect
10. **Right to family involvement and transparent communication**
    Students have the right to collaboration with their families and open communication

RECEIVE EMERGENCY SUPPORT

Students have the right to appropriate support in diabetes-related emergencies. School staff should recognize and respond to hypoglycaemia, hyperglyceamia and other urgent situations.

EQUAL PARTICIPATION

Diabetes should never be a reason for exclusion. Students have the right to participate in learning, school trips, social activities and extracurricular experiences on equal basis.

SAFE, SUPPORTED AND INCLUDED

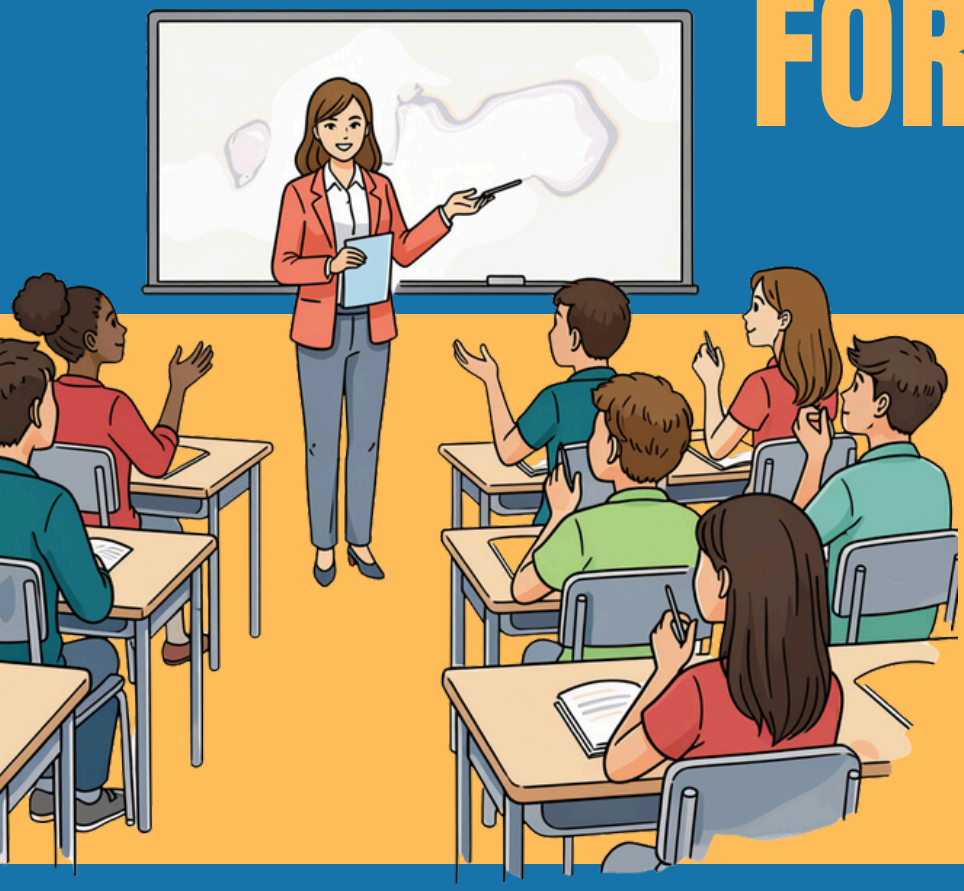
With the right support, understanding and accommodations, students with diabetes can learn, grow and succeed just like any other student.

Rights of students
with type 1 diabetes

Every student deserves safety, dignity and full participation.

1. **Right to non-discrimination.**
2. **Right to inclusive participation on equal terms.**
3. **Right to safety and adequate care in all settings.**
4. **Right to trained and competent staff.**
5. **Right to an individualized care plan.**
6. **Right to use necessary medical devices at all times.**
7. **Right to full participation in sports and physical activity.**
8. **Right to access food and carbohydrates whenever needed.**
9. **Right to privacy and respectful treatment.**
10. **Right to family involvement and transparent communication.**

KEY MESSAGES FOR SCHOOLS



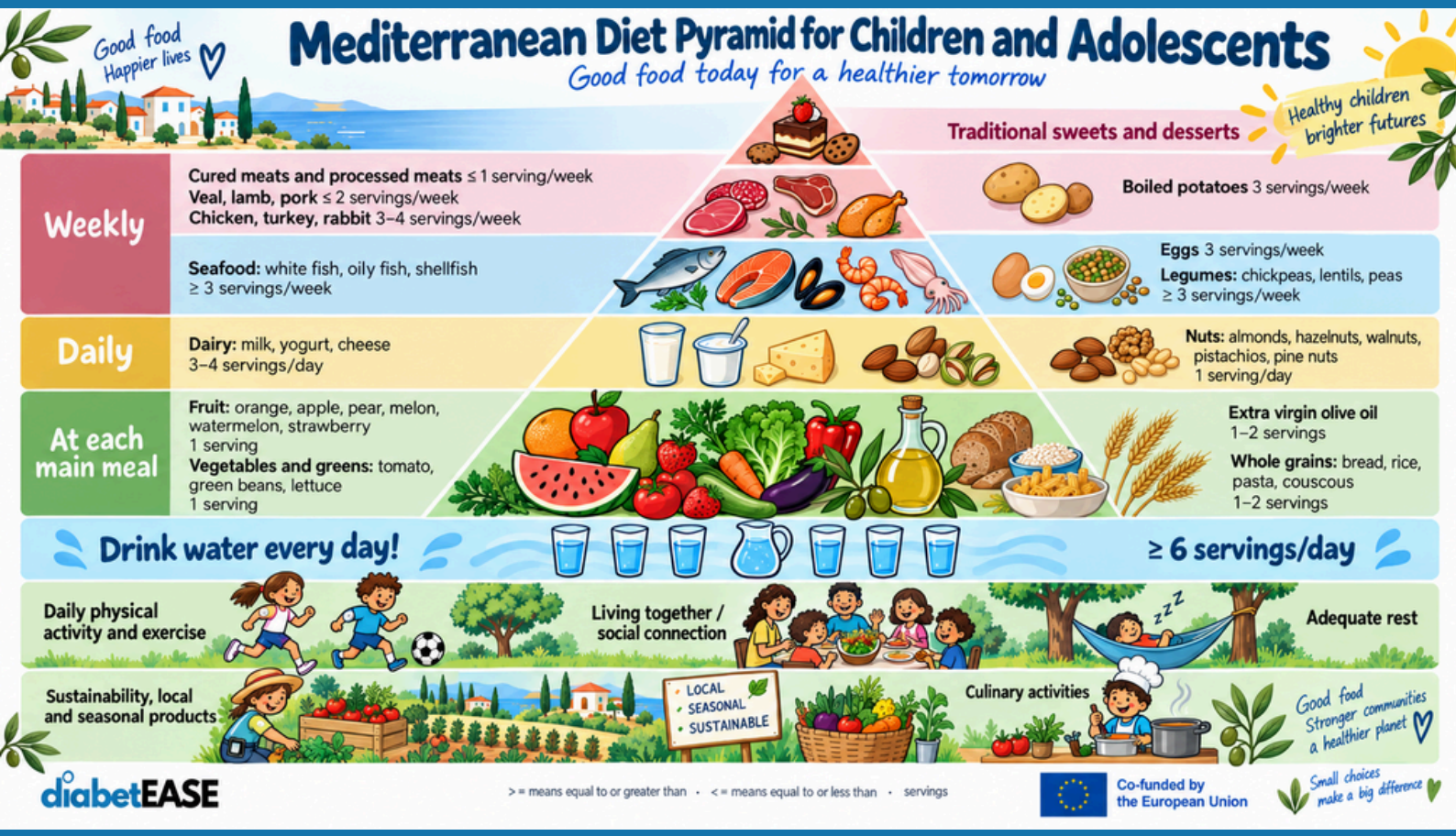
Schools should...	Why it matters
Allow glucose monitoring when needed	Prevent health risks and support self-management
Support participation in all activities	Promote inclusion and equal opportunities
Ensure staff awareness	Improve safety and confidence
Maintain communication with families	Ensure consistent support
Respect student autonomy	Foster independence and wellbeing

MODULE 3: NUTRITION



FOOD IMPORTANCE IN DIABETES MANAGEMENT

While diabetes management could include certain types of medication treatment, nutrition plays a core role in taking care of a person's overall health. There is plenty of on-going research on optimizing the guidelines for food recommendations in order to make them accessible, sustainable and enjoyable. Majority of people may still believe that the proper diet for a person dealing with diabetes is very restrictive and difficult to maintain while this toolkit will focus on explaining some misconceptions about the restrictiveness of the diet recommendations, present some practical useful guidelines to include more types of food in a way that doesn't interfere with diabetes treatment and offer an overall healthy outlook on making food choices in a way that it truly becomes a lifestyle and not an everyday burden.


Good food
Happier lives
Mediterranean Diet Pyramid for Children and Adolescents
Good food today for a healthier tomorrow
Healthy children
brighter futures
Traditional sweets and desserts
Weekly
Cured meats and processed meats ≤ 1 serving/week
Veal, lamb, pork ≤ 2 servings/week
Chicken, turkey, rabbit 3–4 servings/week
Boiled potatoes 3 servings/week
Seafood: white fish, oily fish, shellfish
≥ 3 servings/week
Eggs 3 servings/week
Legumes: chickpeas, lentils, peas
≥ 3 servings/week
Daily
Dairy: milk, yogurt, cheese
3–4 servings/day
Nuts: almonds, hazelnuts, walnuts, pistachios, pine nuts
1 serving/day
At each main meal
Fruit: orange, apple, pear, melon, watermelon, strawberry
1 serving
Vegetables and greens: tomato, green beans, lettuce
1 serving
Extra virgin olive oil
1–2 servings
Whole grains: bread, rice, pasta, couscous
1–2 servings
Drink water every day!
≥ 6 servings/day
Daily physical activity and exercise
Living together / social connection
Adequate rest
Sustainability, local and seasonal products
LOCAL
SEASONAL
SUSTAINABLE
Culinary activities
Good food
Stronger communities
a healthier planet
diabetEASE
> = means equal to or greater than · < = means equal to or less than · servings
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Small choices make a big difference

Mediterranean Diet Pyramid

for Children and Adolescents



Weekly



Traditional sweets and desserts



Cured meats and processed meats < 1 serving/week
1 serving
Chicken, turkey, rabbit 3-4 servings/week



Boiled potatoes
3 servings/ week



Seafood: white fish, oily fish, shellfish
< 3 servings/week

Daily



Dairy:
3-4 servings/day



Nuts:
1 serving/day

At each main meal



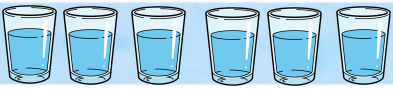
Fruit:
1 serving
Vegetables and greens:
1 serving



Extra virgin olive oil
1-2 servings

Whole grains: bread, rice, pasta, couscous
1-2 servings

Drink water every day!



> 6 servings/day

Daily physical activity and exercise



Living together / social connection



Adequate rest



Nutrition and everyday wellbeing



Build a balanced plate



Vegetables
Fill half your plate.

Legumes
Choose often for energy and fibre.

Fruit
Enjoy a variety every day.

Whole grains
Give you lasting energy.

Choose water
Drink water throughout the day.

Stay active
Move your body in ways you enjoy.

Know your numbers
Monitor, learn and act with confidence.

MODULE 4: DIABETES IN SPORT



PHYSICAL ACTIVITY BENEFITS

Maintaining a healthy lifestyle including sport activities and daily exercise is crucial for managing diabetes. The movement of the body is very important for the regulation of insulin as well as keeping our whole body healthy such as our heart, lungs, muscle mass and joint and bone health. Feeling good being active while managing blood sugar requires certain key points to keep in mind - prior to being active, while being active and post-exercise. Proper nutrition and sport go hand in hand when managing symptoms of diabetes.

SPORTS TRAINING SESSIONS WITH DIABETES

Education on the specific use of insulin when performing sports activities for someone with diabetes is important when it comes to optimizing their overall health and ability to perform.

How the body normally uses the hormone insulin when training is that it allows glucose to enter the cells - especially the muscle cells and to also store glucose in the liver (glycogen) for longer periods of activity. So when being active, the muscles need glucose from the blood more rapidly and sometimes pull from the preserved glycogen in the liver. During and after exercise the body becomes more sensitive to insulin.

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Diabetese in Sports

Diabetes is not an obstacle when it comes to participating in sports. Many great athletes are managing this condition while staying physically very active. While a person with diabetes might have certain specific needs while training, it doesn't mean that sport is not an option for them – on the contrary,



Teachers play an important role in supporting students' emotional wellbeing, social inclusion and confidence while helping them participate fully in everyday

Main Principles

1 Sport is for all

Any school or sport club should open the discussion about diabetes and sport and bring understanding for the stigma around it is a part of the health management of the condition.

2 Inclusion and understanding

Children and adolescents with diabetes can and should participate in various kinds of sport activities given the coaches and teachers are aware of the specific needs that might rise.

3 Plan to play

Before training, plan ahead for what you'll eat and drink, how you'll monitor your blood glucose, and to manage it during exercise. Being prepared helps you feel more confident and ready to enjoy your sport safely.

4 Make Sure Your Coach/Teacher Knows

Being curious and open about treating diabetes will help you adapt it to your everyday routine and not feel it as a hurdle

5 Build self-awareness

Learning about how you experience different emotions will help you understand them better and choose the right actions for them

6 Improve communication

Understanding your personal feeling and needs will guide you in understanding other's. Being able to openly communicate how you feel towards others will make you feel safe, seen and understood better.

7 Boost your decision-making

Taking care of your health will need you to prioritize some things than others. Being both rational and brave with your choices will make you feel empowered and confident.

8 Align your actions with your goals

Diabetes should not be an obstacle toward your wishes and dreams. Proper planning and adjustments will help you feel fulfilled with yourself while staying healthy and lively.

9 Get in tune with yourself

Staying intuitive about your body's signals and needs - both physica and emotional - will allow you to reduce anxiety or worry about how to react in different situations.

10 Equip yourself with tools

Having an arsenal of ideas for various situations will make you feel secure and confident - breathing techniques, cognitive exercises or practical plans will guide your way!

MODULE 5: DIABETES IN SCHOOL



SUPPORTING STUDENTS WITH DIABETES DURING EXAMS

Creating a school environment where students with type 1 diabetes feel safe, included, and understood is essential for their well being and learning. Beyond knowing the basics of diabetes, schools play a key role in offering stability and ensuring that no student feels limited or singled out because of their condition. With simple measures clear communication, small accommodations, and a supportive attitude schools can help students participate fully in classroom life and develop confidence in managing their diabetes while learning and growing alongside their peers.

What schools should keep in mind

• Know the student's individual plan: understanding their needs helps the school respond calmly and effectively.

•Keep communication open: regular contact with families builds trust and prevents misunderstandings.

• Allow simple adjustments: letting the student check glucose, use devices, or eat when needed supports their safety.

• Promote inclusion: treating diabetes naturally, without dramatizing or minimising it, helps students feel accepted and confident.

Teacher training



What should teachers learn



Recognise signs

Support daily routines

Respond and communicate

Practical skills



- Blood glucose checks
- Hypo treatment
- Insulin basics
- Emergency plan

School ready



- Care plans in place
- Clear communication
- Whole-school support

A supportive school community

Working together for a healthy, confident future.



Communicate

Share information clearly and listen to what matters.

Include

Create a welcoming environment where everyone belongs.

Support

Help with glucose monitoring and daily diabetes management.

Respect

Encourage independence and celebrate each student's strengths.

Supporting students at school





Know the basics

Understand type 1 diabetes and how it's managed.



Communicate

Work together with students, families and the diabetes management plan.



Create a safe space

Encourage independence, respect and inclusion.

When we work together, students can thrive.

1 BLOOD GLUCOSE CAN AFFECT LEARNING



Concentration · Attention · Memory · Behaviour · Participation

2 POSSIBLE SIGNS

A HYPOGLYCAEMIA MAY CAUSE:

- Headaches.
- Tiredness.
- Difficulty concentrating.
- Restlessness or irritability.
- Reduced participation in classroom activities.

B HYPERGLYCAEMIA MAY CAUSE:

- Difficulty concentrating.
- Confusion.
- Slower thinking and information processing.
- Irritability or unusual behaviour.
- Fatigue.
- Decreased academic performance.

3 HOW TEACHERS CAN SUPPORT LEARNING

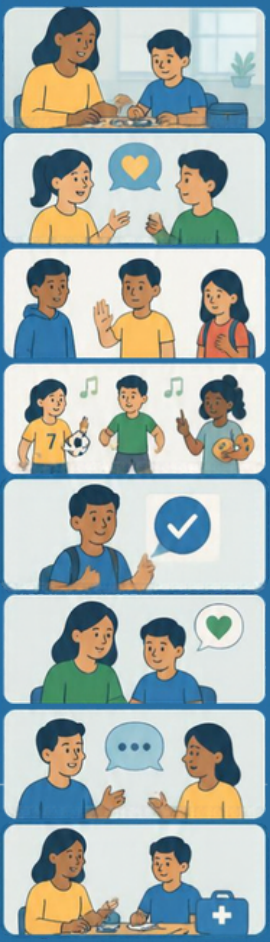
1. Notice changes without blame.
2. Allow the student to manage their diabetes promptly according to their individual care plan.
3. Understand that temporary changes may relate to blood glucose fluctuations rather than motivation, effort, or discipline.



INFORMED SUPPORT HELPS STUDENTS RETURN TO LEARNING.

A PRACTICAL CHECKLIST FOR TEACHERS

- [x] Allowing diabetes management without drawing unnecessary attention.
- [x] Promoting respective language.
- [x] Preventing teasing or bullying.
- [x] Encouraging participation in all school activities.
- [x] Supporting student autonomy.
- [x] Recognising emotional as well as medical needs.
- [x] Maintaining communication with families.
- [x] Responding calmly during diabetes-related situations.



MODULE 6: PSYCHO-SOCIAL MANAGEMENT



EMOTIONAL MANAGEMENT

While children diagnosed with diabetes and their families are provided with some guidelines on how to manage the condition including normalizing their condition, explaining any uncertainties to prevent confusion and supporting a healthy atmosphere at home, it is very important that educators and coaches are also prepared with knowledge about the condition and how to talk to children. Most diagnosed children and adolescents are very aware of their bodies and different symptoms and do not feel anxious about them, but still there are also many who don't want to talk about it, feel insecure or simply ""different"". Educators and coaches should be open to talking to the kids if they recognize a problem, keep the specifics of their condition in mind and manage the positive climate within the micro-group (class at school or sports).

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diabetEASE

Psychosocial management

Students with diabetes need a supportive and inclusive school environment where they can manage their condition confidently while maintaining their wellbeing, independence and participation.



Teachers play an important role in supporting students' emotional wellbeing, social inclusion and confidence while helping them participate fully in everyday

Main Principles

1 Normalise diabetes management

Allow students to check glucose, eat, drink or take necessary breaks without drawing unnecessary attention to them.

2 Watch for emotional overload

Pay attention to signs of frustration, anxiety, embarrassment or diabetes-related burnout and provide a safe opportunity to talk.

3 Prevent stigma and peer pressure

Challenge teasing, misconceptions or unwanted attention and help classmates understand diabetes in an age-appropriate way.

4 Build confidence, not dependence

Being curious and open about treating diabetes will help you adapt it to your everyday routine and not feel it as a hurdle

5 Build self-awareness

Learning about how you experience different emotions will help you understand them better and choose the right actions for them

6 Improve communication

Understanding your personal feeling and needs will guide you in understanding other's. Being able to openly communicate how you feel towards others will make you feel safe, seen and understood better.

7 Boost your decision-making

Taking care of your health will need you to prioritize some things than others. Being both rational and brave with your choices will make you feel empowered and confident.

8 Align your actions with your goals

Diabetes should not be an obstacle toward your wishes and dreams. Proper planning and adjustments will help you feel fulfilled with yourself while staying healthy and lively.

9 Get in tune with yourself

Staying intuitive about your body's signals and needs - both physica and emotional - will allow you to reduce anxiety or worry about how to react in different situations.

10 Equip yourself with tools

Having an arsenal of ideas for various situations will make you feel secure and confident - breathing techniques, cognitive exercises or practical plans will guide your way!

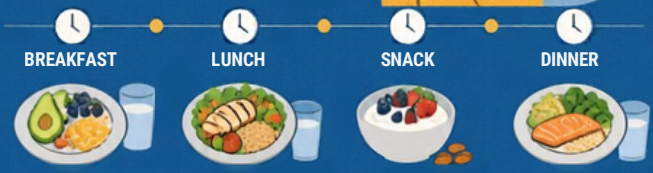
DIABETEASE

USING STRUCTURE TO SUPPORT SELF-AWARENESS AND A GENTLER APPROACH TO NUTRITION

INTUITIVE EATING IS NOT CHAOTIC

A calm daily rhythm with regular meal timing and planning balanced meals or snacks helps support hunger cues and stable glucose levels.





Regular timing + balanced choices = more reliable hunger cues and steadier glucose.

2 FIND WHAT WORKS FOR YOU



1. What keeps my blood sugar levels steady and also satisfies me?
2. How can I enjoy this food/meal in a way that will allow me to feel good?



Some people with diabetes need or prefer stricter nutrition plans. That's okay. You know what works for you.

3 USE INTUITION ALONGSIDE MEDICAL GUIDANCE



YOUR INTUITION

Listens to your body, feelings and needs.



MEDICAL GUIDANCE

Provides safety, structure and support.



WORKING TOGETHER

Helps you feel safer, more confident and more at ease with food.

Intuition alone may not be suitable in high-risk situations such as hypoglycemia.

Self-management and wellbeing



Monitor

Check your blood glucose as advised and keep track of your results.



Healthy choices

Eat balanced meals, stay active, and drink plenty of water.



Look after your mind

Manage stress, get good sleep, and take time for you.



You have support

Talk to your healthcare team, family, or friends. We're here for you.



7.4. Supportive Communication

What Adults Should Avoid Saying

Certain comments may unintentionally increase feelings of stigma, shame or frustration. Adults should try to avoid statements such as:

Avoid saying

- "You can't eat that."
- "Should you really be eating that?"
- "Your diabetes is badly controlled."
- "That's because of your diabetes."
- "You are different from the other children."



Try supportive language instead

- "How can I help?"
- "Do you need a moment to check your glucose?"
- "Would you like some privacy?"
- "Let me know if you need support."



This approach promotes autonomy, confidence and self-esteem.

PARTNERSHIP

ALIBIS

Coordinator

Alibis Training & Education is an organization based in Sofia, Bulgaria that is dedicated to supporting mental and physical well-being through an integrative approach to mental health, nutrition, and personal development. With expertise in food counseling and nutrition, the organization helps individuals build a healthier relationship with food and their bodies, including work with eating disorders through an intuitive eating approach.

VIMODO

partner

A research and education organization dedicated to fostering innovation, advancing knowledge, and driving social change. Through a cross-sectoral approach, we collaborate with diverse stakeholders to develop forward-thinking solutions and contribute to sustainable development.

ANADI

partner

The Asociación Navarra de Diabetes (ANADI), based in Pamplona, Spain, is a non-profit non-governmental organization established in 1983 with a mission to improve the quality of life for individuals with diabetes and their families. With 42 years of experience in the field, ANADI provides a multidisciplinary approach to diabetes management, offering services such as psychological support, individualized care programs, and health education workshops.

THANK YOU