

Addressing the impact of structural racism on disparities in children with type 1 diabetes

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Advancements in diabetes technology have improved quality of life and glycemic control in children with type 1 diabetes. However, data show that a subset of children is being left behind. Those from low-income

families and non-Hispanic Black (NHB) children are not experiencing benefits associated with technological advances, and are at higher risk for diabetes complications and adverse outcomes through ongoing poor glycemic control.

In an invited commentary to be published in the journal *Diabetes Care*, researchers describe how socioeconomic disparities and structural racism impact health care for children with diabetes. They illustrate the importance of screening for and addressing social determinants of health and providing community-based interventions. The highest priority is to examine how the diabetes healthcare team is complicit in the process that causes health inequities. They stress the need to align diabetes care with the American Academy of Pediatrics' [policy statement](#) that advocates for innovative cross-sector partnerships designed to improve medical, economic, environmental, housing, judicial, and educational equity.

"Aligning diabetes care with this mission is our only hope of eradicating disparities in treatment and outcomes of children with type 1 diabetes," says the article's lead author, Terri H. Lipman, Ph.D., CRNP, FAAN, the Miriam Stirl Endowed Term Professor of Nutrition, Professor of Nursing of Children, and Assistant Dean for Community Engagement at the University of Pennsylvania School of Nursing.

More information: Terri H. Lipman et al. Racial and Socioeconomic Disparities in Pediatric Type 1 Diabetes: Time for a Paradigm Shift in Approach, *Diabetes Care* (2020). [DOI: 10.2337/dci20-0048](https://doi.org/10.2337/dci20-0048)

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