





Policy Brief Diabetes in Sport

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Summary

This policy brief is grounded in a comprehensive programme of original research — The Improving Support for Physical Activity in Type 1 Diabetes (ISPA-T1D) programme — conducted by the University of Exeter in collaboration with national partners.

Our work includes a national surveys of adults and children with type 1 diabetes, healthcare professionals, and sports coaches; in-depth interviews with young people, parents and healthcare professionals; and the first UK-wide review of sport governing body policies for diabetes.

Collectively, this research provides the most detailed evidence to date on the barriers, enablers, and policy gaps affecting safe and inclusive sport for people with type 1 diabetes in the UK.

Key messages

Our research has shown that:

- Managing type 1 diabetes in sport requires significant mental, emotional, and practical effort from people with type 1 diabetes. Key barriers include parental anxiety, stigma, unpredictable glucose responses, and lack of tailored guidance.
- Barriers and stigma are widespread: In a national survey (n=311), major barriers included fear of hypo-/hyperglycaemia, complex management, and poor coach knowledge. 73% reported experiencing ignorance or stigma
- Policy gaps in sport governance: Only 4 of 185
 National Governing bodies for sport (2%) have dedicated diabetes policies.
- Providers want to help but lack training: Fewer than one-third of physical activity providers has specific training; only 12% knew of relevant policies. Support is currently reactive and family-led

Recommendations

There is an opportunity for Parliament to support and champion the following actions to ensure safe, inclusive, and equitable access to sport for people with Type 1 diabetes — and others with long-term health conditions:

- 1. **Update national guidance to reflect inclusion needs:** Strengthen the *Department for Education's non-statutory guidance* on PE and sport to include specific requirements for supporting pupils with long-term conditions like Type 1 diabetes
- 2. **Require health inclusion standards in sports governance:** Embed long-term condition inclusion requirements into the *Sport England Code for Sports Governance*, ensuring National Governing Bodies (NGBs) have clear, measurable policies.
- 3. **Ministerial engagement with NGBs:** The Minister for Sport and Equalities to write to all NGBs requesting updates on their provision for athletes with long-term conditions and a plan to address identified gaps.
- 4. **Fund research to co-develop solutions:** Invest in research that brings together people with lived experience, healthcare professionals, educators, and the sport sector to design, test, and roll out evidence-based interventions and training resources.

Evidence summary: opportunities for multi-level support

From our research we have identified clear opportunities for action at multiple levels. Without action, thousands of children and adults with type 1 diabetes will continue to face unnecessary barriers and stigma— despite these being preventable.

With action, we can unlock safe, inclusive opportunities that improve health, reduce NHS costs, and deliver a visible win on equality in sport.

National survey of people with type 1 diabetes

- UK wide survey of 311 adults and children with type 1 diabetes
- Stigma and negative comments were reported by nearly three quarters of both groups.
- 42% of participants reported that coaches, PE teachers, or gym instructors had never demonstrated any knowledge of type 1 diabetes in the context of physical activity

Article under review.

Preprint available here

National survey and interviews with PE teachers and sports coaches

- A mixed-methods study, including an online survey and semistructured interviews. Thirty-four participants completed the survey and nine participated in semistructured interviews
- Less than a third has received any training relating to type 1 diabetes
- Only 12% were aware of relevant policies at their institution for supporting people with type 1 diabetes
- Lack of policy of guidance shifts support responsibility to child or parents

Full text available here

Review of national governing body policies

- Scoping review systematically examined the availability and content of healthrelated policies across national governing bodies of sport
- Of 185 NGBs, 20 (11%) had policy documents that mentioned diabetes, 14 (7.7%) asthma, 12 (6.6%) epilepsy, 4 (2.2%) allergies
- Of the 20 NGBs with documents mentioning diabetes only 4 had dedicated diabetes policies.

Article under review. Preprint available here

What is diabetes?

Diabetes is a condition where blood glucose (sugar) levels become too high because the body cannot produce enough insulin or use it effectively.

Type 2 diabetes is more common, often linked to lifestyle and genetic factors, and may be managed with lifestyle changes, medication, or insulin. **Type 1 diabetes** is an autoimmune condition, usually diagnosed in childhood, where the body stops producing insulin. Daily insulin via injections or a pump is essential for survival.

Living with T1D means balancing blood glucose 24/7, with decisions every meal, every school day, every training session. This constant burden often leads to exclusion from sport without the right support.

In type 1 diabetes, insulin use can lead to dangerously low blood sugar (hypoglycaemia), especially during exercise — making tailored planning, training, and support vital.

"If something goes wrong, I feel like I have to deal with it myself because no one else knows what to do." "We have had occasions where they've felt...where people have been, yeah, a little bit, well, 'I'm not playing him because of his diabetes."

Real voices

'Comments about me being a recreational drug user because I've had to do injections in front of teammates"

"We've never had proper support from coaches; they often don't even know the basics of diabetes management."

Quotes from our qualitative research exploring the experiences of participating in sport and physical activity for young people with diabetes and their parents.

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