

This resource is intended to aid patient conversations and explore whether a low carbohydrate diet aligns with their health goals, preferences, and readiness for change. Motivational Interviewing (MI) leads with curiosity, empathy, and collaboration to strengthen patients' own motivation and confidence.

This resource includes a step-wise approach to guide these conversations including example language that can be used by clinicians.

- 1. Build rapport and partnership:** Use clear and supportive language to create a collaborative and non-judgemental space.

“Thanks so much for coming in today. I know that getting a diagnosis like type 2 diabetes can feel like a lot to take in. My role is to partner with you and support what matters most to you. Where would you like to start today?”

- 2. Elicit patient goals, values, and baseline understanding:** Explore what the patient already knows and what feels important to them.

“What have you been told (or know) about diabetes so far?”

“What concerns you most about your blood sugar or A1c?”

“When you think about improving your health, what feels most meaningful or motivating to you right now?”

- 3. Ask permission to share information:** Respect patient autonomy before offering education/information.

“You’ve shared important reasons for wanting to improve your A1c [reflect patient’s reasons]. Would it be okay if I shared one approach that has helped other people with similar goals?”

“Would you be interested in learning about how a low carbohydrate eating pattern can support blood sugar control?”

- 4. Connect food, blood sugar, and insulin:** Use plain language and invite curiosity in place of persuasion.

Step 1:

“What do you already know about how food affects blood sugar?”

Step 2:

“When we eat foods containing carbohydrates, they break down into sugar in the bloodstream. Insulin is a hormone that helps move sugar into cells for energy.”

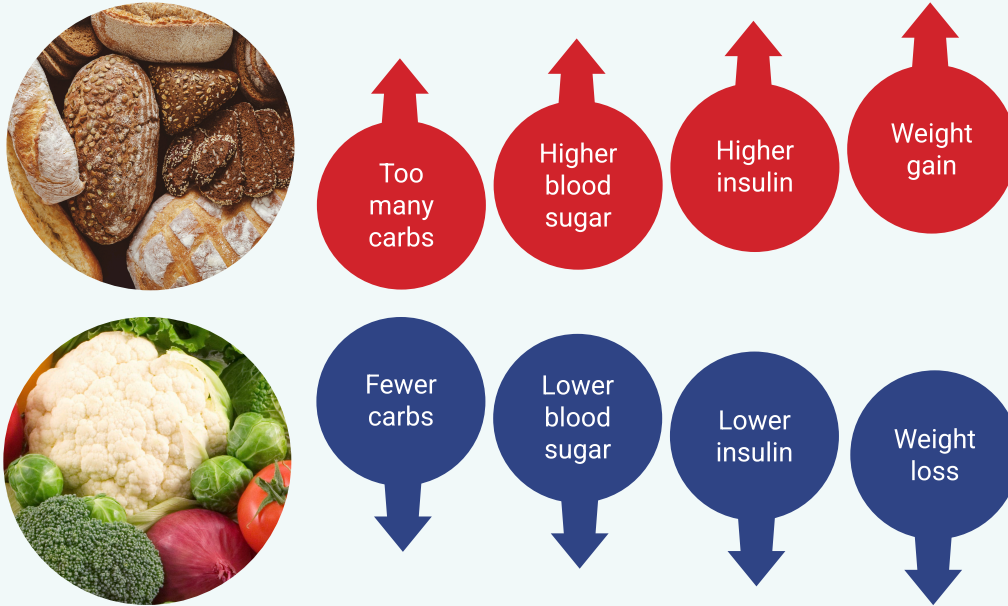
Step 3:

“For people living with type 2 diabetes, eating a lot of processed or refined carbohydrates can keep blood sugar and insulin levels high. This makes it hard to control blood sugar levels and manage weight.”

Step 4:

“What we eat and our food choices matter. Lowering your intake of carbohydrates can help stabilize blood sugar, reduce insulin levels, and support weight management.”

4. Connect food, blood sugar, and insulin continued



5. Emphasize the enjoyment of lower carb foods through individual preference. Rather than focusing on restriction, we focus on the abundance of foods this meal plan encourages

"A lower-carbohydrate approach isn't about deprivation, it's about emphasizing foods that keep blood sugar steady and are also delicious and satisfying to eat."

"Many people are surprised to learn they are already eating a lot of low-carb foods, like eggs, chicken, fish, meat, cheese, yogurt, vegetables like broccoli, green beans, zucchini, asparagus salads, nuts and avocado." [the list goes on!]

"Which of these foods do you already enjoy?"

6. Support autonomy and patient empowerment. Normalize gradual change, develop patient-centered goals, and determine next steps.

"There isn't one 'right' way to do this. Every small shift can make a big difference."

"What feels like a realistic first step for you?"

"Let's find the easiest change for you to try based on what you like to eat."

Visit the MCT2D Resource Library for more low carb tools and resources



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