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## Diabetes Education

Introduction session




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### Who are the people you are working with?

- Diabetes can affect people of all ages. This includes children, adults and the elderly.
- However generally the people who may have a foot wounds are adults and the elderly.
- The life roles of people in this age group will vary. They may be:
  - Husbands / wives
  - Parents
  - Grand-parents
  - A paid worker
  - A worker or contributor in their family, and/or community.




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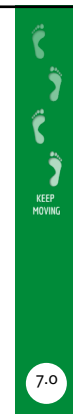
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### Practice points

- All people with Type 2 diabetes should receive structured diabetes education either in groups or individually
- Efforts to improve cost-effectiveness of diabetes care should include diabetes education
- Diabetes Education should be culturally sensitive and tailored to individual needs




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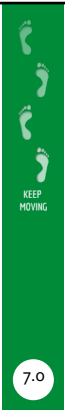
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**Practice Points**

- Diabetes Education programs should ideally focus on physical activity
- People with diabetes should be involved in their own goal setting
- Goals should be sustainable to optimise participation
- Small steps

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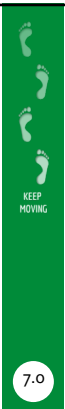
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**Diabetes Education Goals**

- Optimise adjustment to living with diabetes
- Optimise physical health and well-being
- Optimise public health impact /cost effectiveness
- Knowledge and understanding leads to capacity to actively self-manage
  - Confidence, empowerment & decision making
- Psychological adjustment including Quality of Life

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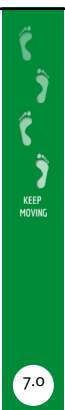
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**Diabetes Education – topics**

- What is diabetes
  - Causes, signs and symptoms
- Healthy Eating
- Importance of active management
- BG checking –
  - Why this is important and targets to aim for
- Progressive condition
- Foot care

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### Diabetes Education

- Education should be interactive and enjoyable for participants
- Peer support can be very useful to minimise isolation.
- Diabetes care & education should be evidence based
- Answer questions honestly if possible

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### Sustainable change

- Very important to set goals which are achievable
  - Risk of feeling a failure
  - Too hard
  - Poor quality of life
  - Lose of desire to engage
- No judgement

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### Active interventions

- Regular review for support and checking BG levels/results
- Add medications early if required to facilitate BG to target
- Add lipid & BP lowering medication if needed
  - Reduce Cardio-vascular risk
- Reassure and support

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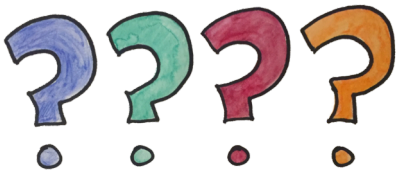
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Questions?



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Thank you for listening!

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Acknowledgements

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**Editor:** Tom Fitzpatrick

**Pilot location:** Honiara Hospital, Solomon Islands

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