

Book review:

Diabetes Education – Art, Science and Evidence

This appealing book is to be recommended as valuable reading for all healthcare professionals working in diabetes care. The book is divided into 13 separate, but related, areas of diabetes education, starting with an overview of the condition that includes diagnosis, the aims of management and possible complications. The importance of engaging the person with diabetes and regular assessment of educational needs are highlighted from the start. At the end of each chapter, there is a set of reflective questions encouraging the reader to think about what they have learnt from the chapter and challenge their own ways of thinking and working. This is a major strength of the book, as it enables the reader to acknowledge positive practice and identify areas in need of development.

There is a very good chapter (*Chapter 2*) on the journey of the person with diabetes emphasising how psychological factors (attitudes, beliefs and emotions) and social support can influence how an individual copes with a diagnosis of diabetes and the challenges of ongoing management. Another chapter (*Chapter 8*) considers turning points and transitions, in which Trisha Dunning points out that, over a lifetime, most people make 10–20 major transitions. These transitions are opportunities for healing, self-growth and development, and a number of strategies for helping people with diabetes manage life transitions are suggested. Such strategies include reflection, supportive relationships and building resilience.

There is a fascinating chapter (*Chapter 7*) on creative arts and diabetes, an area with which many of us are unfamiliar. In this chapter, the authors discuss alternative ways of sharing life experiences. Two methods are of particular interest: painting workshops and the “theatre of lived experience”. In the painting workshop, participants are encouraged, with the help of a professional painter,

to express their experiences through art. At the end of the workshop, the participants tell the story behind the painting, sharing experiences and emotions. In the theatre of lived experience, participants are encouraged to share life experiences through writing and directing short plays. Case studies to illustrate both methods are

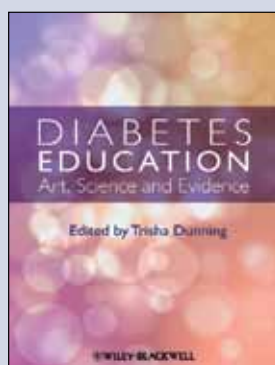
included. The benefits of using creativity in diabetes care include reinforcement of self-awareness, increased self-esteem and a reduced sense of isolation.

Another chapter (*Chapter 3*) focuses on the art and science of teaching and learning, and gives practical suggestions on how to help people learn. A focal point in this chapter is the importance of understanding (rather than being able to repeat information given) in enabling people with diabetes to achieve the skills and knowledge needed for self-management. The chapter challenges the reader to review their own teaching strategies and learning

environments, and to consider trying a different approach.

Throughout the text, there are several references to novels and poetry, from “Winnie the Pooh” to Shakespeare, and this is engaging for the reader. My personal favourite is the account of a conversation between “Winnie the Pooh” and “Owl” (*Chapter 6, page 94*). Winnie is observing how scholars always use “big words” and that the knowledge of scholars does not always match up with his own experience of things. Owl, in his wisdom, comments that knowledge arising from experience is more valuable than knowledge that does not. Winnie replies that “scholars need to go outside and sniff around, walk through the grass, talk to the animals.” I’m sure that will strike a chord with people with diabetes and healthcare professionals alike.

This book is useful for both beginners and experienced diabetes healthcare professionals. In addition, the messages it portrays are relevant to healthcare professionals working with people with other long-term conditions. ■



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