

BDA holiday camps

The aim of BDA holiday camps is to give young people with diabetes the opportunity to come together and learn more about their diabetes in a safe, caring environment (BDA, 1999). If people learn more through an interactive experience then camps must provide one of the best opportunities for learning (Janes and Cooper, 1996; Gibson et al, 1998).

Preparation starts several months in advance to fulfil the above aim and to ensure that each camp is safe and successful. For example, all outdoor centres used are carefully selected to ensure that they afford the highest standard possible with fully trained staff and instructors, for example Castle Head (Field Studies Council, 1998). BDA volunteers are chosen so that each team has experienced medical, nursing and dietetic staff, as well as highly motivated leaders who bring a wealth of experience from different backgrounds and professions. Many of the leaders have diabetes themselves, and may have attended a camp as a child.

All members of staff attend a training day every year as well as a team meeting before the camp. Furthermore, all must provide at least two references for every year they are involved in camps.

Benefits to young people

The young people at camp come from all over the country. They may have been recently diagnosed or they may have long-standing diabetes. Regardless of their background, any feelings of isolation are immediately dispelled.

The emphasis is on having fun, building self-confidence and self-esteem through activities and joint experiences, which could be anything from abseiling to caving. Teaching, though informal, is an intrinsic part of the holiday.

The children quickly get to know one another through activities, which often contain a team-building element. Some of the camps for older teenagers are self-catering, which itself entails a

Publisher's note: This image is not available in the online version.

At the holiday camp, young people with diabetes are given the chance to make a splash.

huge amount to learn and new skills to acquire.

All meals are planned and supervised by dietitians who spend time with the youngsters to help them make sensible choices and understand the reasons why some foods should be limited while others can be eaten freely.

Adjusting insulin according to activity and diet is a major component of the teaching. As the camp progresses the children become much more independent in making decisions with regard to insulin doses but this is always supervised by medical and nursing staff. There are more formal teaching sessions, often in the form of a quiz or game, to pass on diabetes information.

Youngsters can gain different ideas and more knowledge merely by discussing different insulin regimens with peers, seeing and handling different injecting devices or looking at different meters. After watching others self-inject or use specific injection sites, many youngsters will feel less reluctant to do so themselves.

The camp staff do not set out to change children's diabetes management. Every child should go home on the insulin regimen and dose they were on when they arrived at camp. However, staff can introduce new activities and exercise.

Benefits to staff

Staff members gain a new perspective on diabetes management because:

- Diabetes is in context, not the artificial world of the clinic or ward.

- Camp is a unique opportunity to learn from more experienced staff, from different disciplines, as well as from the children

- Camp is 24-hour 'front-line' diabetes management.

By the end of camp, staff will have made many new friends, gained a lot of experience, learnt new skills, and increased their confidence in managing diabetes.

The camp can be a most humbling experience and health professionals should come away with a more empathic attitude to the young person with diabetes and his/her family.

How to get involved

If you would like to find out more about holiday camps, or volunteering, contact the BDA at the address given at the end of this article.

The BDA will give letters of support to staff who may be able to apply for study leave. By making camp one of your objectives, your managers may be more inclined to support a study leave application.

—Carol Carson, Diabetes Nurse Specialist for Adolescents, Royal Hospital for Sick Children, Edinburgh

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Janes B, Cooper J (1996) Simulations in nursing education. *Australian Journal of Advanced Nursing* 13(4): 35–39

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