

# Practical Teaching Strategies for Diabetes Educators

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**P**articipant learning in diabetes education is enhanced by dynamic and enriching experiences. Three key teaching strategies to facilitate meaningful patient-centred learning experiences are responding to immediate needs, incorporating group work and offering a variety of instructional methods. Effective teaching strategies bridge the gap between knowledge and practice, and guide patients through the lifestyle change process (1).

## Respond to immediate needs

Effective teaching occurs when diabetes educators meet patients' immediate needs and accept their learning needs and goals (2). To this end, they should:

- Assess learning needs and preferred learning methods to create an individual plan.
- Capture teachable moments. Motivation is highest during these moments, which are likely to occur when the patient perceives the need to learn new skills or change existing habits.
- Address 'burning' questions. Providing telephone communication shortly after diagnosis is an effective means of addressing important questions and capturing teachable moments (3).

## Incorporate group work

Adults want control over what and how they learn (4). Diabetes educators can facilitate adult learning through the structure of group classes with the following:

- Give the responsibility of learning to the learner (2).
- Create stimulating learning environments. Small-group teaching is generally well accepted by learners; group discussions can also foster the discussion of realistic solutions by those with similar experiences (4,5).
- Appropriate scheduling will improve attendance. Shorter classes focusing on 1 topic are more effective than those that incorporate many topics over several days (6). Short sessions with mini-topics offered at various times provide the option of attending

classes when the need for knowledge has been identified by the patient.

- Encourage lifelong continuing education by providing interesting and fun events. Those that offer hot topics or a form of entertainment will encourage attendance. Ongoing education reinforces knowledge and enhances lifestyle change efforts (7).
- Develop strategies that promote the participation of all and reduce the dominance of a few, e.g. invite participants to construct group rules at the beginning of the session and encourage reluctant participants to interject comments by requesting round robin responses.
- Limit presentations to 20 minutes, with a recap every 7 to 10 minutes followed by a discussion with strategies for behaviour change (8).

## Offer a variety of instructional methods

Not all adults learn the same way, so it is important to provide a variety of teaching tools (4,5):

- Educational videos are helpful for low-literacy individuals (4,5).
- Case studies integrate knowledge and enhance problem-solving skills (9).
- Have fun! Well designed games are effective for promoting praxis, reinforcing complex facts and assessing knowledge and skills (4). Crossword puzzles can introduce new vocabulary in a comfortable, non-threatening way and can be created with software programs (10).
- Humour enhances the learning environment by increasing the comfort level of participants. It also enhances the development of problem-solving skills and encourages experimentation with new thoughts and ideas (11).
- Establish opportunities for self-directed learning that extend beyond formal sessions. A lending library of videos and books is an effective, efficient and economical strategy for alternative learning.

## Conclusion

The current literature suggests that adult education should respond to patients' immediate needs, incorporate group work and offer a variety of instructional methods, all of which clearly enhance learning experiences. Interaction with and involvement from participants in personally meaningful ways enhances the learning environment.

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