Proving our point: the need for valid and reliable measures of diabetes education

As the global epidemic of diabetes continues to rise, the need for effective diabetes self-management education also continues to increase. Self-management education is a necessary component of diabetes prevention and care because outcomes are highly dependent on the daily efforts and decisions made by people with diabetes and those at risk.

There is a growing number of studies demonstrating both the effectiveness of education for improving outcomes and its cost-effective nature.8 However, with the current emphasis on cost-efficiencies, the resources to provide diabetes education are threatened in many places around the world. We cannot assume that other health professionals, insurance providers and health ministries will continue to provide the necessary support for diabetes education unless we are able to document its effectiveness at a local and national level.

Standards for diabetes self-management education9 are calling for better documentation about the effects of diabetes education on the knowledge, behavioural and psychosocial domains. A variety of valid and reliable instruments for measuring these outcomes are available,10 particularly in European and other developed countries. Although it is tempting to create a programme-specific instrument or to simply translate standardised instruments, this approach will not provide the level of evidence needed to ensure financial and other support for education in many countries. Standardised instruments cannot be reliably used in different countries until they are validated among the target population. Validation is necessary to ensure consistency of understanding, language, culture and literacy.

In this issue of Practical Diabetes International (p 238), Al-Qazzaz et al. report on the translation and validation of one standardised instrument, the Diabetes Knowledge Test (DKT).11 Although the DKT evaluates only one of the domains that needs to be measured, this paper by Al-Qazzaz et al. provides an excellent model for the type 2 diabetes: A systematic review of randomized controlled trials. Diabetes Care 2001; 24: 561–567.


