

diabetes matters

A Diabetes WA Member Magazine **SUMMER 2025** | \$11.95

TRAVELLING with diabetes

Medicine, travel tips
& planning ahead



PLUS
Recipes,
health tips
& summer
entertainment

diabeteswa®

From the Editor

Welcome to the summer edition of your member magazine.

Travel is our theme for this issue, so we've gathered lots of information from our health team to help you get ready for your holiday and stay well while you're away. From sick day plans through to choosing the right food and organising your medication, we've got it covered.

Speaking of travelling – I am moving on as editor of Diabetes Matters. It's been a pleasure and privilege to steer this publication over the past four years, but it's time for someone else to take the mag on a brand-new journey.

I'm delighted to introduce Zoe Deleuil, a highly experienced editor and journalist, who has already begun working on this year's editions. Great things lie ahead!

Happy reading!

Myke

diabetes matters summer 2025

Editor Myke Bartlett

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Thanks to

Diabetic Living magazine.



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Glide Print

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A word from us

Welcome to the Bunuru edition of Diabetes Matters.

The start of a new year is always a time to think about new journeys. For some of us, this will be thinking about different ways of living our lives in the hope of feeling healthier and happier. For others, it will mean planning our adventures that will take us far from our comfort zones.

Reading university student Ella's story about her Vietnam trip (page 24), I could imagine the mix of joy and worry parents feel as their young adults embark on new adventures.

All parents will have experienced those mixed emotions, but parents of children with diabetes can face particular anxieties – even as they celebrate their children's increased independence. The positive I took from Ella's story was not only how resilient our kids can be, but how families and loved ones can work together to create support networks that can overcome challenges, even across oceans.

Our team at Diabetes WA can closely relate to this experience. Some of us have experienced these types of situations first hand, whether it be medication challenges while travelling or technology failures. Working together, we have helped solve many problems. Every day, we see the difference our free helpline makes to the lives of so many West Australians

affected by diabetes. (If that is you, we're here Monday to Friday and the number is 1300 001 880.)

We also know that for many people living with diabetes, especially those in regional areas, getting the support they need close to home is not always easy.

Late last year we launched Diabetes Connect for Country WA. Through Diabetes Connect, our endocrinologists can support local GPs to support their patients and help them to stay and receive care in their communities. One quick phone call can mean a patient in a regional area is spared long waiting times and, quite often, a long journey to a distant hospital.

We know this initiative will make a real difference to West Australians living with diabetes in rural and regional communities. Keep an eye out for more details about Diabetes Connect in our next issue.

Of course, a new year can also be a time to look back. This year we mark 60 years of working with the West Australian community. We're so proud of the work we've done in that time, but even more excited about the work that lies ahead.

As the peak body for diabetes in WA, we feel we have a unique



Melanie Gates

understanding of the needs of our state. Over six decades, we have built such strong relationships with individuals, families, health providers, governments and institutions based here and abroad.

The knowledge and relationships we have built in the past will allow us to plan and adapt for the future, to continue to provide new initiatives and services designed for West Australians affected by diabetes.

New adventures lie ahead and we look forward to sharing them with you.

Of course, we also want to hear from you. As you'll see on the pages of this magazine, no two journeys are the same and everyone has a story to share. Contact us at communitynetwork@diabeteswa.com.au to share yours or to get more involved with the important work that we do.

Melanie Gates

Diabetes WA CEO

WHAT'S new

What's been happening at Diabetes WA



Healthy competition

In January, our Aboriginal Health team headed south to Albany for the Binar Futures Basketball Carnival. Along with some 700 kids and teenagers competing across 100 registered teams, volunteer doctors and health educators came along, including from Diabetes WA's Kathryn Huet and Sarah Kickett.

An on-site Health Embassy offered kids and their families free health checks and information between matches, and those that visited all stalls and completed an Embassy 'passport' were rewarded with a new basketball and competition shirt – a brilliant way to connect health services and young people in a relaxed setting.

At our Diabetes WA stall, kids and teens had the opportunity to learn about healthy eating and how much glucose is found in various foods. "They were surprised at how much sugar there is in common foods such as pasta, and so were their parents. It was great to see families learning together," says Kathryn.

Connection across our vast state

Diabetes WA has launched groundbreaking new service Diabetes Connect for Country.

This service offers GPs and Aboriginal community-controlled health services in country WA direct access to a consultant endocrinologist for advice on all diabetes types, either over the phone or as part of a multi-disciplinary case conference with a credentialed diabetes educator or Aboriginal health practitioner.

Our endocrinologists Dr Greg Ong, Dr Seng Khee Gan and Dr Gerard Chow are always happy to talk through

patient care with their colleagues across regional WA, covering everything from what medications to use, reaching targets in pregnancy and available support options.

"Since I trained in the early 2000s there have been huge advances in scientific knowledge and treatment options available for diabetes," says Dr Ong.

"Patients are living longer and often have multiple medical conditions and social issues affecting their health. Individualising health care is now more complex than ever and sometimes it can help just to have the opinion of



a colleague to help you navigate the best options to prevent complications and get the best outcomes for your patients."

GPs can book through the Diabetes WA website.



World Diabetes Day

For World Diabetes Day on November 14 Diabetes WA headed to the Derbal Yerrigan Health Expo, alongside teams from East Metropolitan Health Services and Derbal Yerrigan Health Promotion, to raise awareness and support for diabetes care and prevention.

Connecting with seniors

The annual City of Mandurah Seniors Week Expo in November celebrated the vital contributions of seniors in our community. With a theme of 'looking after your mind, body and wellness,' our team attended and shared information about living well with diabetes, healthy living and ways that people can get in touch with us and access support. Have a Go Day in Burswood Park, hosted by the Seniors Recreation Council of WA, also saw us connecting with visitors and sharing tips on managing and preventing diabetes.



Type 1 Tech Night

On 28 November we hosted a Type 1 Tech Night, sharing advancements in type 1 diabetes technology at the Hillview Intercultural Community Centre in Bentley. The Diabetes WA clinic team were there along with our sponsors, Medtronic, Omnipod, Abbot, AMSL (Dexcom & Tandem,) and Ypsomed (MyLife YpsoPump) who showcased the latest innovations to support people living with type 1 diabetes. A wonderful evening connecting with our type 1 community. Our next tech night is scheduled for Wednesday 19 March.

Your voice matters

Do you have opinions about diabetes care in Western Australia? Do you want to meet others who are also living with diabetes? Join our community network and you'll have the opportunity to share your stories and meet some new faces. Together, we can build a community that truly reflects the voices of our valued members.

If you're interested in joining our community network or have any questions, contact Diabetes WA today to get involved. Join us and be part of the change!

Email communitynetwork@diabeteswa.com.au or call 1800 001 880

Smart insulin

Our resident dietitian
Dr CHARLOTTE ROWLEY
on what's new in diabetes
research.

In exciting news for people living with diabetes, a team of researchers, led by Professor Christoph Hagemeyer of Monash University, is developing a glucose responsive or "smart" insulin. Once in the body, the insulin will only be released when glucose levels rise above a certain point. And when glucose levels drop, insulin will stop being released, keeping blood glucose levels within a safe, stable range.

In people who don't have diabetes, the pancreas is the organ that produces insulin depending on what's going on in the body at any time. The pancreas usually delivers a small trickle of background insulin, but insulin production shoots up when we eat to help the body use the energy we have just consumed.

This is why you might take both a long-acting insulin, such as Solostar, Toujeo or Levemir, along with a short-acting insulin, such as Actrapid or Novorapid, with meals.

Estimating the correct levels of insulin to give yourself with a meal can be one of the most difficult aspects of daily diabetes management. Out of range blood glucose levels might mean feeling awful from levels being too high or experiencing a hypoglycaemic episode.

Making insulin smarter

When you inject insulin, it will stay in your body for anywhere between four

and 48 hours, depending on the type of insulin. There is no way to "turn it off" or remove it from the body once it has been delivered. If you have taken too much insulin you will need to eat more to keep your blood glucose levels stable and monitor your glucose levels.

While newer pumps on the market can adjust insulin delivery based on CGM data, thereby reducing the time spent outside of target range, not everyone is keen to wear a pump and a lot of people can't afford one. The good news is that smart insulins, with novel delivery methods, have the potential to revolutionise diabetes care. By responding more precisely to the body's changing glucose levels, they will make life easier for people living with diabetes.

Not only will smart insulin respond to the changing blood glucose levels, but it will also last for up to three days in the body – significantly cutting down on insulin injections. And, because it is glucose-responsive, there is no need to count carbohydrates. This has the potential to put a big dent in the mental burden of diabetes by reducing the number of decisions people need to make around their diet.

No more injections?

Along with smart insulin, scientists are currently investigating new methods of delivery, with oral

pills and skin patch options being researched.

These innovations have the potential to resolve one of the key challenges people have with insulin – injections. A 2016 study incorporated live beta cells (the cells that produce insulin) within a skin patch. Because the patch is external, there is no risk of the immune system rejecting it, as can occur with organ transplantation. Insulin capsules, which melt away to release insulin into the system when blood glucose levels are high, are also on the table.

When will smart insulin be available?

Before you rush out and ask your GP to set you up with a glucose responsive insulin, bear in mind that it is still in the early stages of development and the first opportunity to try it will be as part of a clinical trial. Additionally, as with any new scientific development, the first round of new medication will not be the answer to all your diabetes prayers. It is likely that the first release of new medications will assist only with mealtime insulin requirements, with a standard basal (long acting) insulin injection still required.

Over time, the aim is to develop a medication that only needs to be taken once a day at most, but it is thought that people will need to inject or consume the glucose responsive insulin multiple times to begin with. Lastly, while the goal is for no hypoglycaemic events at all, current studies suggest that fewer than five mild hypo events per week is a more reasonable expectation.

All that being said – this is exciting! When we think about how far diabetes management has come since the first person was treated with insulin just 102 years ago, this is set to be another amazing leap forward.

TRAVEL with diabetes

For those of us living with a chronic health condition, holidays require extra forward planning, and sometimes dealing with health issues that arise in unfamiliar places. Having said that, the benefits of travel far outweigh the risks, and there are ways to make a holiday healthy and active with a little preparation and research. In this issue, we share our tips for travelling around Australia and heading overseas.



Wide Open Road

Seeing our vast country by road is the dream of many Australians, but for those with health conditions such as diabetes, some forward planning is essential. MYKE BARTLETT finds out more about getting ready for the long haul.

It's a retirement dream of many to see Australia by road. But while any road trip requires a bit of planning, for those living with a chronic condition such as diabetes, preparing for a long voyage can be a complicated exercise.

This is something that travellers around our nation, where distances between towns can be vast, can overlook. Help isn't always close at hand when things go wrong. Essential medications and equipment, such as insulin pump consumables, can be difficult to access in regional areas. Likewise, when health issues arise, older road trippers and caravanners – sometimes dubbed "grey nomads" – can struggle to find the support they need.

Road trips with diabetes

Dr Anita De Bellis from Flinders' College of Nursing and Health Sciences, says that older Australians embarking on caravanning holidays need to be well prepared to manage their condition. In her research, she's found that expired prescriptions and referrals, alongside difficulties with sourcing specialised equipment, can pose challenges for both travellers and the health care providers in remote and regional communities who look after them. When GPs or hospitals aren't within easy distance, pharmacists often end up filling the gap.

"People hit the road without prescriptions for their diabetes medication, or they don't have spare batteries for their glucometers, or their insulin pen breaks down and they can't get a replacement," Anita says.

"This can sometimes mean people have to resort to travelling long distances to emergency departments."

Of course, just being behind the wheel for those long distances can be hazardous for people living with diabetes.

"If someone gets a complication such as hypoglycaemia while driving – and if you're travelling around Australia,

you spend a lot of time driving – it can be quite dangerous."

Another reason grey nomads – and other travellers – sometimes run into trouble on the road is that regular routines often go out the window when people go on holidays.

"People think, 'I'm on holiday, so I don't have to do all the usual things.' And, of course, they're not exercising in their cars and it's hard to eat well on the road, so there's a change in exercise, diet, all sorts of things."

While those who have lived for a long time with a condition such as type 1 diabetes tend to be better prepared, Anita says those with a relatively new diagnosis may be more likely to let management routines slip and might not realise the importance of being armed with an up-to-date care plan.

"Sometimes they don't have any written documentation or contact with a diabetes educator. They don't have a plan or a health record."

A pre-travel diabetes checklist can make travelling easier for people with diabetes. But doing the necessary planning is easier said than done, as there's no guidebook to caravanning around Australia with a chronic condition – and no easy way of finding out what supplies or support might be available.

"There isn't a whole lot of information available for travelling around Australia, which has such specific issues, just by virtue of the distances you're covering and how small some of these towns are," says Anita.

The Diabetes WA Helpline can help fill the gap, as it allows grey nomads travelling around our state to get free support from a credentialled diabetes educator.

Deborah Schofield, general manager of health for Diabetes WA, says the helpline service, which is available

On the road

- Stock up on fresh fruit and veg in larger centres.
- Remember to regularly monitor your glucose levels, particularly around driving or if you feel unwell.
- Aim for around 30 minutes of moderate physical activity a day, most days. Some campgrounds have swimming pools, and larger regional centres may have an aquatic centre you can visit. Also keep an eye out for scenic walking trails, often listed on local government websites or at tourist offices.
- Don't forget, you can always check in with Diabetes WA while on the road from anywhere in Australia for advice on 1300 001 880.

on weekdays, means West Australians on the road needn't feel alone.

"The reality is that diabetes is a complex condition to manage, and problems can arise, even when people are well-prepared," Deborah says.

"Our helpline means that people anywhere in Western Australia can speak to an educator about any issues they might have, and we'll be able to work with them to find the best option."

Diabetes WA also offer a Telehealth Service for Country WA, which provides free clinical appointments for people living in rural and remote regions of WA.

"Diabetes can be an unpredictable condition to manage. Travel adds to that complexity, especially when you need to purchase medications or diabetes technology consumables, some of which must be specially ordered in by the local pharmacy. Being able to talk to a diabetes educator or planning ahead with your GP before you travel can relieve some of the stress when you're on the road."

Anita says services such as telehealth are essential, but she would also like to see more investment from governments in regional health services and, ideally, a central register for prescriptions so that pharmacists in remote locations can dispense vital medications when a traveller has lost – or gone travelling without – their script.

At the end of the day though, Anita says the best way for people with diabetes to prepare for a long journey is to think carefully about their own unique needs.

"Know your diabetes, know your condition and how to manage yourself. Be prepared. Have contingency plans. Make sure you've got your prescriptions, your medications, your equipment spares, and try to keep your exercise and diet in check."

Your road trip checklist

Before you travel

- ✳ Check in with your GP and diabetes educator and have a care plan outlining your medications that you can show to any health care providers, if necessary. It can also be useful to take a sick day management plan with you, so you have something to follow if you are unwell or you are experiencing high glucose levels that are hard to manage.
- ✳ Discuss with your healthcare team about options for Telehealth appointments while you are on the road, should you need support.
- ✳ Stock up on diabetes supplies including NDSS items and spare meters and other devices and batteries, as well as other health-monitoring equipment.
- ✳ Stock up on medications before you go, just in case local pharmacists don't have supplies. Your doctor can provide you with a Regulation 24 prescription that allows you to fill all repeats at once to bring all your medications with you. Keep in mind, too, that prescriptions are only valid for 12 months, so check expiry dates on any unfilled prescriptions to avoid having to get new ones from a GP while away.
- ✳ Your pharmacist can also put your medication into a Webster-pak, which is a sealed and dated blister pack that makes it easier to keep track of different medications and ensure you're taking the correct dose at the right time and have enough with you for the whole trip. These aren't just for the elderly, they are also recommended for travellers, children on regular medication, those taking supplements along with medicine or anyone looking for a convenient storage solution.
- ✳ Ensure you have somewhere safe to store your medication, along with a letter from your GP outlining what you are taking. If you are using insulin or other injectable medications, you will need to ensure they are stored in the fridge.
- ✳ Consider registering with My Health Record, which allows health care providers to access your records online, anywhere in Australia.

See our *packing checklist for diabetes* (page 10)



UP UP AND AWAY

With a little planning, passengers with diabetes can fly with confidence, says NIAMH BARTLEY.

Navigating the airport can be a stressful experience for anyone, but for passengers living with diabetes, the need for medical devices, medications and security protocols can create additional challenges. Perth Airport, which accommodates more than 16 million passengers annually, recognises these challenges and offers tips to make the process run smoothly.

Kate Holsgrove, Perth Airport's chief commercial and aviation officer, emphasises the airport's commitment to inclusivity and customer care:

"Our top priority is the safety and security of all passengers and staff at the airport," Kate says.

"We are committed to delivering a world-class customer experience and providing an inclusive travel experience for our passengers."

She offers some guidelines for travelling safely and efficiently with diabetes, including insights that are specific to Perth Airport.

Before you go to the airport

Check with your healthcare professional or the manufacturer of your medical devices for advice on whether your equipment can safely pass through body scanners or x-ray machines. This is particularly important

for passengers using insulin pumps or continuous glucose monitors (CGMs).

At the security screening checkpoint

For safety and security reasons, passengers departing from major Australian airports are required to undergo security screening.

"Perth Airport knows that some passengers may have specific needs, and we have provided for alternative screening methods to ensure all passengers are treated with respect and dignity," Kate says.

When you arrive at security screening, inform the screening officer about your medical device or equipment. Explain any restrictions, such as whether your device should avoid body scanning or x-ray technology. Providing this information will help officers choose the most appropriate screening method.

Keep your medications and documentation readily accessible. Screening officers have the final say on the quantity of medication allowed onboard, so it's best to carry only what you need for the journey, plus some extra in case of delays.

You can request a private room if you prefer not to discuss your medical needs publicly. While you have

the right to refuse any screening process, doing so means you will not be allowed to proceed through the checkpoint to board your flight.

How security scanners work

Body scanners, now standard at all major Australian airports, use non-ionising millimetre waves to detect potential threats. This low-radiation technology is safe for everyone, including pregnant women and people with pacemakers. The energy emitted is significantly lower than that of mobile phones, ensuring minimal interference with medical devices.

Travelling with insulin

Both prescription and non-prescription medications are allowed onboard domestic flights. However, international flights have powder, liquid, aerosol and gel restrictions.

Travellers can bring no more than 100ml of liquid onto international flights. However, insulin is exempt from this rule, provided you carry proof of your need for it.

Your GP can provide you with a letter detailing any prescription and non-prescription items, such as insulin, needles or gel packs, as well as your prescription showing your name, the name and type of medication, and your doctor's contact details. Ensure that the name on the prescription matches the name on your boarding pass. You may also wish to carry a translated letter in the language of your destination, particularly if travelling to more remote areas.

It's worth checking for any restrictions on prescription medication in your destination country. In Japan, for

example, you need to apply for a certificate if you are carrying more than a month's supply of prescription medication.

Consider splitting medication between two bags, so that you have a backup if a bag goes missing.

Inclusive programs at Perth Airport

Perth Airport has implemented the Hidden Disabilities Sunflower program, which was established at Gatwick Airport in the UK in 2016. This initiative allows passengers with hidden disabilities to wear a sunflower lanyard, discreetly signalling to airport staff that they may require extra support. Security officers and staff are trained to recognise the lanyard and help if needed.

Passengers interested in the Sunflower program can request a lanyard or wristband through Perth Airport's website. Apply a few weeks before you travel as they are posted out within ten business days.

Travel with confidence

Travelling with diabetes requires some extra preparation, but airports like Perth Airport are working to ensure that all passengers can travel safely and comfortably. By planning ahead and taking advantage of available programs, you can focus on enjoying your journey with confidence.

RESOURCES:

For more information about travelling from diabetes, including Perth Airport's initiatives, visit www.perthairport.com.au.

The Department of Home Affairs also has information on travelling with medicine at www.homeaffairs.gov.au.

Travelling with diabetes: you need to be able to trust the process

Perth man DAN LADLE, who has type 1 diabetes, as does his nine-year-old daughter, believes that what is most important in airports is a documented process that is known and followed by all.

Going through security did get harder after 11 September 2001 and since then, some airports have got their act together and others haven't.

I was told at Gatwick Airport in the UK that when you are going through customs your GP letter should state that if you are wearing a CGM you should be patted down, and your equipment should not go through the scanner, nor should insulin pumps. I also keep all equipment together in one bag, with a list, so that after it's inspected, I can quickly check it's all

been put back into the bag afterwards.

While travelling from Perth Airport recently, I took my daughter, along with the bags containing our diabetes equipment, to the right-hand lane – set up specifically for those with extra needs – and informed the staff that we would require a pat down rather than proceeding through the scanners, and our diabetes bags could not be passed through the x-ray with the other luggage.

The staff were incredibly polite, listened

to our request and moved us through with as much haste and integrity as is possible, when carrying out such a personal inspection. I was extremely impressed by their understanding and knowledge of our condition and needs. However, this isn't always the case. I've encountered 'strict' security staff who have insisted my equipment can go through a scanner, and I've had to be quite firm with them. I don't mind, but it's stressful for my daughter. If there are clearly documented processes, this won't happen."

PACKING ESSENTIALS

for travelling with diabetes



Travelling can be both thrilling and little overwhelming, especially when you're managing a medical condition such as diabetes. SALLY KWONG has put together a pre-travel checklist and packing essentials so you can set off with confidence.

Before you travel

Preparation and planning are key to a smooth and stress-free trip. Creating a checklist for packing and pre-travel tasks can alleviate last-minute stress and ensure you have everything covered.

A week or two before you depart, check in with your GP to renew any prescriptions, which you will need to take with you (more on this below.) He or she can also advise on any recommended vaccinations for your destination, along with boosters for flu or Covid.

Research and take out travel insurance before you set off. Canstar is a reliable financial website where you can compare the best-rated policies and find the right insurance provider for your needs.

Travelling with medication

Pack enough medication to cover your entire trip, plus a little extra in case of delays or lost luggage. Also consider packing it across two bags. Keep your medication in its original packaging and ensure that it is clearly labelled in case you need to show it to a customs officer or healthcare provider at your destination.

Additionally, carry a copy of your prescriptions and a letter from your doctor explaining your medical needs and dosages, particularly if you're traveling with any controlled substances or medications that require special handling.

Be aware that some medications may have different brand names outside of Australia. Have a chat to your pharmacist before you travel as they will be able to provide you with more information or point you in the right direction.

Packing checklist

Diabetes medication and equipment

- Put medication at the top of your packing list – it is far more of a hassle to get hold of the correct insulin in an unfamiliar place than a new pair of sunglasses or a beach towel.
- Rapid acting insulin, if you use insulin or have type 1 diabetes. Ensure you have the insulin pens and needles to go with the insulin.
- If your insulin requires refrigeration, take a cooler pack or an insulated bag designed for medication.
- Testing devices required for the entire trip and any extra NDSS items that you may require, including a blood glucose monitor and in date blood glucose monitoring strips. If you have type 1 diabetes, then include a monitor that can check blood ketones and make sure those strips are in date as well.
- Make sure you have enough blood glucose testing supplies like sensors, test strips and lancets. You may wish to pack a backup meter and extra batteries, just in case.
- If you use an insulin pump, ensure you have enough (plus a little extra) pump consumables, such as infusion sets, reservoirs and insulin cartridges. You might also like to ask your pump company if you can have a loan pump to take on holiday with you in case your own pump stops working.
- A small emergency hypo kit that includes glucagon for severe hypoglycaemia (if you are on insulin), glucose tablets or gels and packaged snacks for quick carb intake.
- A copy of your sick day plan, including emergency contact numbers (see page 16)

General first aid kit

Having a well-stocked first aid kit and emergency medications can make a huge difference in ensuring a safe and comfortable trip. Here is a rundown of some essential items to pack.

- Pain-relief medications such as paracetamol or ibuprofen for headaches and minor aches and pains.
- Antihistamines for allergies and mild allergic reactions and insect bite cream.
- Anti-diarrhoea medications (like loperamide), antacids for indigestion and anti-nausea medication.
- Over-the-counter cold and flu remedies for symptoms like cough, congestion and sore throat.
- Oral rehydration salts to treat dehydration from diarrhoea or heat.
- A basic first aid kit of band-aids, antiseptic wipes, adhesive tape, gauze pads and a digital thermometer.

It is always wise to consult your pharmacist or GP and tailor these suggestions to your specific needs and travel destination. This way, you will be well-prepared for any unexpected health issues that might come up.

Essential travel documents

Finally, don't forget to pack your credit card, insurance policy certificate and travel itinerary, and check that your passport is up to date (keeping in mind that some countries require you to have at least six months left on it.)

Bon voyage!

www.canstar.com.au

MAKE A CONNECTION

Diabetes WA

Helpline 1300 001 880

info@diabeteswa.com.au

Mon-Fri, office hours

Telehealth (for regional WA)

1300 001 880 or email

telehealth@diabeteswa.com.au

Diabetes WA Clinic

diabeteswa.com.au

NDSS

NDSS national helpline 1800 637 700

Email ndss@diabetesaustralia.com.au

peersupport.ndss.com.au

Disclosure: Any treatment recommendations made in this article are to be guided by your treating healthcare professionals.

Healthy HOLIDAY EATING

Travel is a wonderful opportunity to discover new foods, and with a bit of planning you can enjoy a few treats and come back inspired, says dietitian CHARLOTTE ROWLEY

Enjoying pizza from a family deli in Tuscany, visiting hawkers' markets in Singapore, ordering a Reuben sandwich from Katz Deli in New York – getting to eat like a local adds so much to our worldly adventures.

But when you have diabetes, there's a balance to be struck between eating well and enjoying delicious food. Here are some tips for eating out on holidays.

Asia

Who doesn't love a good pad Thai? Or mapo tofu? Bánh mì? Sign me up! However, it's easy to eat too much rice or noodles.

Order extra veggies to balance out those carbs, and choose lean protein, such as fish, tofu and chicken, over meats that are high in saturated fat, such as Wagyu beef, which is associated with reduced insulin sensitivity. Fried foods, such as sweet and sour pork, are high in unhealthy fats and salt, increasing our risk of heart disease. Preserved foods such as salted eggs or fish are also high in salt, so should be treats rather than daily events.

Happily, though, there are many healthy dishes to try.

Sashimi – this raw Japanese seafood is a great source of protein and healthy fats.

Bibimbap – a Korean rice bowl of typically lean beef or chicken, veggies and a fried egg.

Pho – the go-to Vietnamese noodle soup is made with broth, herbs and meat. It can lack veggies, so order some on the side.

Yum Pla Duk Foo – a spicy salad with grilled catfish, green mango and peanuts.



Order extra veggies to balance out those carbs, and choose lean protein, such as fish, tofu and chicken, over meats that are high in saturated fat, such as Wagyu beef, which is associated with reduced insulin sensitivity.



India

Indian cuisine is so delicious it is easy to overeat – especially carbohydrates. There's rice, naan and roti, plus potatoes in curries, and lentils and legumes.

To avoid overdoing it, consider how many carbs are in your main dish. A lamb rogan josh, for example, isn't high in carbohydrates, but a chana masala is. Then choose between naan or rice, rather than having both and increasing your blood glucose levels. Another tip is to opt for tandoori or tikka dishes more often than creamy curries such as butter chicken.

Here are some options to try:

Dhal – this staple lentil soup is high in fibre, protein and slow-acting carbs.

Tandoori chicken – marinated in yoghurt and spices, this dish is high in protein and flavour. Add some veggies for a complete meal.

Baingan bharta – a high-fibre dish of smoked eggplant, onions and tomatoes. Pair it with some rice or bread and a protein source to get all your nutrients.



The Mediterranean

While the traditional Mediterranean diet is touted for its health benefits, the authentic eating pattern can look quite different to the carb-heavy pizza, pasta and paella route many of us follow on holidays. A traditional Med diet is high in vegetables, predominantly baked or grilled, with healthy fats from olive oil and seafood, and minimal red meat – two to three times per month.

Be mindful of portion sizes and balance out carbs with veggies or salad. And go easy on creamy pasta sauces, which are high in fat and energy. Here are some delicious, lighter options.

Grilled fish with herbs. Pair it with Greek salad or horta, which are boiled young greens with olive oil and lemon juice.

Minestrone soup – packed with veggies and beans, this is a great break from pasta and pizza.

Gazpacho – on a hot summer's day in Spain nothing hits the spot like this cold tomato soup – a wonderful way to get your veggies in.

Healthy dips – Hummus and baba ghanoush are fantastic snack options. Scoop them up with chopped veggies for extra goodness.

Tagine – a slow-cooked stew with lean meat, spices and veggies.

South America

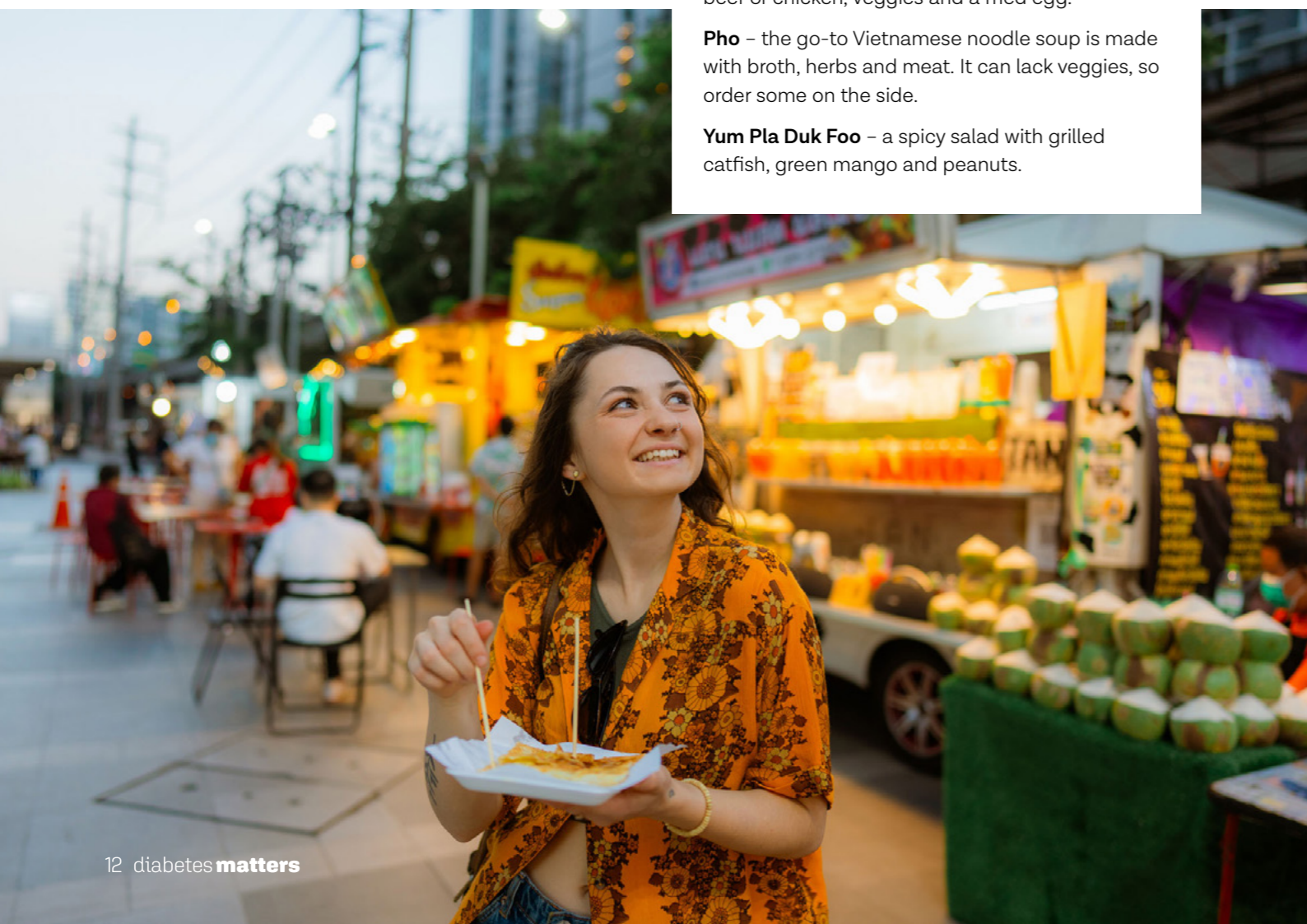
South America has many fried options, including empanadas, arepas and pastelitos, which are high in unhealthy fat. The food can also be carb-heavy, with rice, potatoes, corn, beans and wraps all adding up. Let's explore some healthier options:

Ceviche – raw fish marinated in citrus juice and served with onions, chilli and coriander – a balanced dish without the carbs.

Feijoada – this black bean and meat stew can be adapted to reduce the meat and increase the veggies.

Empanadas – savoury pastries with lots of filling options. Choose lean meats over fried meats and veggies over cheese filling.

If you have type 1 diabetes, or are taking insulin, it's a good idea to refresh your carbohydrate counting skills in preparation for eating new foods. Remember, though, that holidays are meant to be fun. A more flexible blood glucose target range and some "guestimation" will allow for more food experiences. Provided your levels are not dangerously high or low, it's OK to relax a little and get back to your usual glucose targets once you're home.





diabeteswa®

WORKSHOPS

FEBRUARY TO MARCH 2025

DESMOND

For people living with type 2 diabetes. The DESMOND (Diabetes Education and Self Management for Ongoing and Newly Diagnosed) program provides you with a welcoming and non-judgmental space where you can plan how you would like to manage your diabetes.

DATES	LOCATION
Tuesday 4 February	Burns Beach
Wednesday 12 February	Mandurah
Thursday 20 February	Melville
Wednesday 26 February	Heathridge
Friday 28 February	Baldivis
Friday 7 March	Bentley
Tuesday 11 March	Noranda
Friday 14 March	Cannington
Thursday 20 March	Cockburn Central
Friday 28 March	Midland
MIDWEST REGION	
Monday 24 February	Geraldton
WHEATBELT REGION	
Wednesday 12 March	Northam
SOUTH WEST REGION	
Tuesday 18 February	Busselton
Tuesday 18 March	Bunbury



Scan the QR code to book into a workshop

Can't make any of these dates or locations? Many of our workshops are also available online.

For more information or to book into any of these workshops, visit diabeteswa.com.au, call 1300 001 880 or email bookings@diabeteswa.com.au

CarbSmart

For people living with type 1 diabetes, type 2 diabetes or gestational diabetes. CarbSmart will help you enjoy quality carbohydrates in a way that suits you and your diabetes.

DATES	LOCATION
Thursday 6 February	Cockburn Central
Monday 10 February	Leederville
Tuesday 11 February	Bentley
Tuesday 18 February	Midland
Monday 17 March	Mandurah
Thursday 27 March	Heathridge
MIDWEST REGION	
Monday 17 March	Geraldton
SOUTH WEST REGION	
Tuesday 4 February	Bunbury
Tuesday 11 March	Busselton
GREAT SOUTHERN REGION	
Monday 3 February	Albany

Beat It!

For people living with type 1 diabetes or type 2 diabetes. Beat It! is an 8-week group exercise and lifestyle program to help you better manage your diabetes and improve your general health.

DATES	Location
Monday 24 March	O'Connor

Diabetes WA Online Workshops

Diabetes WA's series of online educational webinars offers a convenient way to hear about a variety of hot topics on diabetes from our credentialed diabetes educators from the comfort of your living room. Free for Western Australians who are registered on the NDSS, the webinars are held via Teams, with new sessions added regularly.

Ready set go - let's move

For people living with type 1 diabetes or type 2 diabetes. Get support and be empowered to take the first step in making exercise a part of your routine, or perhaps increasing the amount you are already doing.

DATES	LOCATION
Friday 21 March	Leederville

FootSmart

For people living with type 1 diabetes or type 2 diabetes. Living with diabetes means living with an increased risk of foot problems. FootSmart gives you the skills and knowledge to create a care routine that will help avoid future foot problems.

DATES	LOCATION
Tuesday 18 March	Thornlie

GREAT SOUTHERN REGION	
Monday 24 February	Albany

Living Well

For people living with type 2 diabetes. This free event will showcase the latest information on diabetes with a focus on living well with diabetes, delivered to you by experts in the field.

DATES	LOCATION
Thursday 13 February	Belmont
Monday 24 March	Alkimos

WHEATBELT REGION	
Wednesday 26 March	Jurien Bay

MedSmart

For people living with type 2 diabetes. Making sense of your medications can be difficult but it doesn't have to be. MedSmart will give you information about your medications, how they work, how to take them and how they help manage your diabetes.

DATES	LOCATION
Monday 17 February	Leederville
Tuesday 18 March	Thornlie

GREAT SOUTHERN REGION	
Monday 24 February	Albany

Living with insulin

For people living with type 1 diabetes, type 2 diabetes - and who are using insulin. This program will help you understand insulin, the different products and equipment available, and the importance of looking after your blood glucose levels.

DATES	LOCATION
Tuesday 25 March	Melville

WHEATBELT REGION	
Wednesday 26 March	Jurien Bay

ShopSmart

For people living with type 1 diabetes, type 2 diabetes or gestational diabetes. ShopSmart will help you to understand how to read food labels, and what to look for when choosing healthy options for yourself and your family.

DATES	LOCATION
Thursday 23 January	Noranda
Thursday 6 February	Cockburn Central
Monday 10 February	Leederville
Tuesday 11 February	Bentley
Tuesday 18 February	Midland
Monday 17 March	Mandurah
Thursday 27 March	Heathridge

MIDWEST REGION	
Monday 17 March	Geraldton

SOUTH WEST REGION	
Tuesday 4 February	Bunbury
Tuesday 11 March	Busselton

GREAT SOUTHERN REGION	
Monday 17 February	Albany



What is a sick day plan?

Holidays can often feature a surprise sick day or two. Here are some tips from diabetes educators NARELLE LAMPARD and NYAREE LAWLER about preparing a personalised plan for any illness while travelling.

No one wants to get sick while on holiday, but it does happen. Eating new foods and drinking different water, being in confined places with lots of people, exposure to new viruses and diseases, as well as the added stress and excitement of being somewhere unfamiliar can all contribute to becoming rundown and unwell.

Avoiding illness while on holiday

Fortunately, there are easy ways to look after yourself and avoid illness while on holiday.

Wash your hands regularly, particularly after going to the toilet and before preparing or eating food. Consider carrying a small bottle of hand sanitiser in case clean water isn't available.

Look for unopened, factory-sealed bottled water or other drinks. While this may add to the expense of the holiday, contaminated water (even if it looks clean), can cause severe illness. This doesn't just apply for international travel either, as there are also some parts of Australia where drinking the tap water is not recommended.

Ensure your vaccines are up-to-date and, if you are travelling overseas, find out if any particular vaccinations are recommended for the countries you are visiting. More information can be found on the Smart Traveller website.

Creating a sick day plan for your holiday

As well as packing the right medicine and other equipment (see page 10), we advise creating a sick day plan. This is a written document that gives you instructions about what to do if you become unwell or your glucose levels stay elevated (15.0mmol/L or higher) or if you have type 1 diabetes and your blood ketone levels are 0.6mmol/L or higher.

Your sick day plan will give you instructions that include:

- how often to check your glucose levels and ketones (if you have type 1 diabetes.)
- what adjustments to make to your diabetes medications (some diabetes medications need to be stopped when you are unwell.)
- what adjustments to make to your insulin doses (being sick is a stress to the body and means you often need more insulin.)

Being unwell with diabetes can cause severe dehydration and in type 1 diabetes can cause diabetes ketoacidosis (DKA). Your sick day plan aims to prevent severe dehydration, illness or DKA but also, importantly, will give you an idea of when to seek urgent medical help.

The NDSS website has several sick day plans, each specific for the type of diabetes you have and tailored to how you are managing your diabetes (with a pump, for example.)

As part of preparing for your holiday, ask your credentialed diabetes educator to write up and discuss with you a sick day plan that is specific for your circumstances. Keep a copy of it on your phone so you don't lose it.

Planning a holiday? Call us

The Diabetes WA Helpline often gets calls from people who are about to go on holiday and wondering what they need to pack and what else they should consider. Some people are understandably worried about what to do if things go wrong and they get sick, because the health care systems in other countries can be quite different to Australia. Even within Australia, access to health care can be limited in some regional and remote areas.

We often advise callers to put together a sick day plan to help reduce anxiety and prevent serious illness if you do become unwell. Feel free to call us to talk about your travel plans and to ask us any questions – we're happy to help.

RESOURCES

www.ndss.com.au/living-with-diabetes/health-management/sick-days

www.smarttraveller.gov.au

As part of preparing for your holiday, ask your credentialed diabetes educator to write up and discuss with you a sick day plan that is specific for your circumstances. Keep a copy of it on your phone so you don't lose it.



2025

EXERCISE

for people with diabetes

(who think they hate exercise)

The new year is a good time to think about starting an exercise plan, but it can be hard to know where to start. Especially if you don't really want to, says diabetes educator **GEORGINA KEOGH FISHER.**

Making a resolution to get more active is easy, but actually getting started is more of a challenge. While some people seem to enjoy exercise, for many of us, the couch is a far more appealing option, particularly after a long, hot day.

The good news — even if you don't believe it — is that starting is often the hard part. Once you've made the effort to get moving, you'll feel glad you did.

The benefits to exercise include:

- Improved mental wellbeing, including reduced stress, anxiety and depression
- Improved glucose levels
- Improved blood pressure
- Improved cholesterol
- Increased muscular and bone strength
- Increased cardiorespiratory fitness
- Improved balance
- Weight maintenance or loss (if that is your goal)

These benefits are particularly important if you are living with diabetes. Exercise can be a key part of your diabetes treatment plan to help you manage your blood glucose levels.

When you exercise, your body requires more glucose to provide energy. To get this energy, your body increases its sensitivity to insulin to allow glucose into your cells.

Additionally, once you start using your muscles during exercise, "magic doors" (also known as GLUT 4 receptors) appear on the muscle cells, which further enhance glucose uptake.

The benefits don't stop the moment you do. Increased insulin sensitivity can last for up to 48 hours after exercise. You can make the most of this, and help manage your blood glucose levels, by exercising at least every second day. Exercising regularly can also increase your lean muscle mass, which means more "magic doors" that open during exercise.

Finding the right exercise

But what sort of exercise will work for you? For people living with diabetes, the guidelines recommend 30 minutes of moderate intensity exercise on most days of the week, without going for more than two days without exercise (remember the insulin sensitivity lasting 48 hours.)

Let's break the guidelines down further. Moderate intensity exercise is any form of exercise that increases your heart and breathing rate. You may start sweating, but you can still hold a conversation. The type of exercise you

do is entirely up to you! What do you enjoy? What can you see yourself doing? Do you have any injuries or pain to consider?

Muscle strengthening or resistance exercise is recommended on at least two days per week. Some people may experience a short-term rise in blood glucose levels after resistance exercise or higher intensity exercise. This is due to hormones in the body responding to increased energy requirements and the "stress" that is being placed on the body.

Many people enjoy walking, cycling, swimming, aerobics, gym, group fitness classes such as HIIT (High Intensity Intermittent Training) and yoga, online fitness programs or personal training sessions. The key is to find an activity that you enjoy because you are more likely to keep doing it.

Muscle strengthening exercise or resistance training is any form of exercise that puts a load on your muscles. That load might be your own body weight, gym equipment or good old-fashioned physical labour.

If you are still unsure, speak to an exercise physiologist who will be able to give you ideas or prescribe you an exercise program, particularly if you have other conditions, injury or pain. It's always a good idea to speak to your GP if you are starting a new exercise program.

Reasons to be careful

There are some extra considerations if you're planning to get active, particularly if you are on insulin or a sulfonylurea (such as Glipizide, Gliclazide, Diamicon or Minidiab). Due to the blood glucose lowering effect of exercise, hypoglycaemia can occur.

You can still exercise and reduce your risk of hypos by:

- Ensuring you have adequate energy prior to exercise (consume carbohydrates)
- Adjusting your insulin dose (speak to your health care professional or come along to our Type 1 Tactics for Exercise program if you are living with type 1 diabetes and use insulin pens)
- Consume carbohydrate snacks during exercise (particularly if exercise lasts more than 30 minutes)
- Check your blood glucose levels before and during exercise
- Have a bedtime carbohydrate snack and check blood glucose overnight

For more information on how to adjust your medication for your exercise activity, speak to your diabetes educator who will be able to assist you.

West Australians can call our Diabetes WA Helpline for free. If you're living in regional WA, you also have free access to our Diabetes WA Telehealth Service.

TERIYAKI BEEF NOODLES

Prep: 10 minutes **Cook:** 10 minutes
Serves: 1 (as a main meal)

- 1 nest medium dried egg noodles or gluten-free noodles
- 1 tsp olive oil
- 1 x 100g beef sirloin steak, trimmed of fat, diagonally sliced
- 1 clove garlic, crushed
- 1½ tsp grated ginger
- 1 small brown onion, finely sliced
- ½ x 225g can bamboo shoots, rinsed and drained
- 1 tbsp teriyaki sauce or gluten-free teriyaki sauce
- 1 spring onion, diagonally sliced
- Sesame oil, for drizzling



Nutritional info

PER SERVE 2360kJ (565Cal), protein 35g, total fat 18g (sat. fat 4g), carbs 61g, fibre 7g, sodium 855mg

- Carb exchanges 4
- GI estimate low
- Gluten-free option

- 1 Cook** the noodles following pack instructions, then drain and rinse under cold water, then drain again.
- 2 Heat** a wok until very hot over high heat. Add the oil and heat. Add the beef and stir-fry for 1-2 minutes or until tender. Remove the beef from the wok. Reduce heat to medium and add the garlic and ginger. Stir-fry for 1 minute.
- 3 Add** the onion and bamboo shoots and stir-fry for 3 minutes. Add the noodles and toss until hot. Return the beef to the wok with the teriyaki sauce. Toss to combine.
- 4 Transfer** the beef noodles to a large serving bowl. Scatter with the spring onion and a drizzle of sesame oil.

A low-salt teriyaki sauce is a good idea if you're watching your sodium intake. Adding an extra serve of veggies to this would also be a great idea.



For more great recipes and articles check out the latest issue of Diabetic Living.

ZUCCHINI & CAULIFLOWER YELLOW CURRY

Prep: 10 minutes **Cook:** 30 minutes

Serves: 4 (as a main meal)

- 2 tbsp olive oil
- 2 small brown onions, finely chopped
- 2 cloves garlic, crushed
- 2 tbsp yellow curry paste or gluten-free curry powder
- 400ml can Carnation Light & Creamy Evaporated Milk
- 1 tsp coconut essence
- 450g cauliflower florets
- 2 large zucchinis, halved lengthways, sliced
- 190g (1 cup) basmati rice
- 1 red chilli, deseeded, sliced
- 1 bunch coriander, leaves picked



Nutritional info

PER SERVE 1910kJ (457Cal), protein 17g, total fat 14g (sat. fat 3g), carbs 62g, fibre 8g, sodium 513mg • Carb exchanges 4 • GI estimate medium • Gluten-free option

- 1 Heat** the oil in a large, deep non-stick frying pan over medium heat. Add the onions and cook, stirring occasionally, for 5-7 minutes or until softened. Add the garlic and curry paste and cook, stirring, for 2 minutes.
- 2 Pour** the milk, coconut essence and half a can of water into the onion mixture. Bring to a gentle simmer. Add the cauliflower and zucchini. Cover and reduce heat to low. Simmer for 10 minutes. Remove the lid and increase heat to medium. Continue cooking until the sauce reduces and thickens a little. Season well with pepper.
- 3 Meanwhile**, cook the rice following pack instructions.
- 4 Divide** the rice between four bowls. Top with the curry, chilli and a scattering of coriander.

Lower-carb option

Replace the basmati rice with 3½ cups (440g) of cauliflower and broccoli rice, prepared following packet instructions.



THE SPIRIT OF ADVENTURE

University student ELLA SAMSON shares her story of finding insulin at short notice in Vietnam, along with some sage advice for fellow travellers.

Last year I travelled to Vietnam with my boyfriend and some friends. This was my first time travelling overseas without my parents, but I have been with them before so knew what to expect. I probably find airports the most stressful part – Perth Airport is great as they understand diabetes and know that I can't go through the older scanners; they have a new one that I can go through and gave me an information sheet to read explaining why it was OK.

We started off in Ho Chi Minh in the south before travelling up to Hoi An and then Hanoi. We had no issues, as I was well prepared with my insulin and all my equipment, along with a letter from my GP explaining my type 1 diabetes. I carry everything with me in my carry-on luggage, including my transmitter, which the airport staff know can't go through the scanner.

I'm pretty good at looking after my insulin and always keep it with me in my backpack. My Frio pack keeps my insulin cold for up to 30 hours, so if I have a travel day, I'll take it with me, just in case we end up staying out for longer.

Towards the end of the trip, we had planned a two-night cruise around Ha Long Bay. I knew my insulin would not stay cold for 50 hours, so I asked the crew to store it in the fridge in its pack with my name on it. I'd just changed my pump before we got on the boat, so I knew I'd be fine for the journey, and they were happy to help.

As we were preparing to disembark, I asked for my insulin back, but when they handed it to me, I could see that it was literally coated in ice. When I opened it up, every bottle was frozen solid. After some quick internet research, I learned that even if I did manage to defrost it, it would no longer be effective. We had another night in Hanoi, and around 44 hours left of the trip in total, so I knew that as soon as we got off the boat, I needed to get hold of more insulin.

I called my mum back in Perth on WhatsApp and together we started looking for places that might be able to help. Mum found a medical centre geared towards tourists in Hanoi that was only twenty minutes away by taxi, so we headed there. As a precaution, I'd had a Vietnamese friend translate my GP letter outlining my health needs into Vietnamese for me, but fortunately all the staff spoke English.

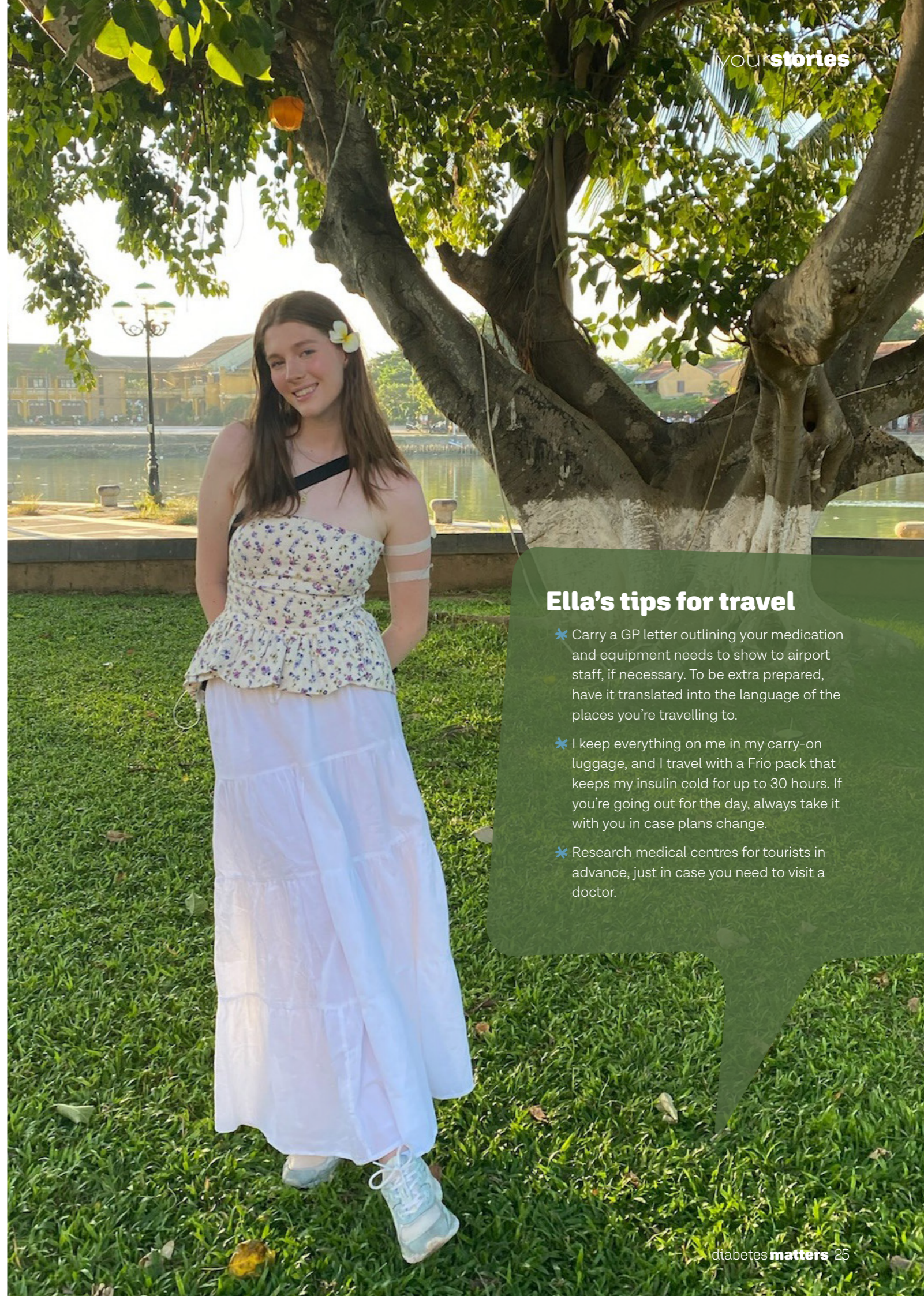
The doctor saw me within five minutes. He gave me two options, Novorapid disposable pens or another insulin that I hadn't used before, which could go into my pump.

However, my mum, who was doing research for me back in Australia, said it wasn't an option as it was a completely different insulin. Luckily, though, I realised I could inject the Novorapid pens directly into my pump. The doctor gave me a script and I picked up the insulin at the chemist attached to the centre. It cost me around \$50USD for five pens.

All in all, it worked out fine, but I did make me more aware of what I need to research in advance when planning a holiday. I'm going to South Korea this year and I'll locate medical centres for tourists and investigate where I can get insulin in the larger centres. I know Novorapid is pretty widely available, but I'll research what other insulins are available overseas and where I can find them if I travel for longer and need to access local brands.

One small issue I had in Vietnam was with the humidity, which made glucose monitoring harder. I had to find some adhesive tape to keep the patches on, and I also worked out that spraying on deodorant first made the adhesive work better.

The most important thing, though, is to be prepared. I always have everything on me, plus extras. And I always travel with people I trust, so I know that if anything happens, they will be able to help me.



Ella's tips for travel

- ✦ Carry a GP letter outlining your medication and equipment needs to show to airport staff, if necessary. To be extra prepared, have it translated into the language of the places you're travelling to.
- ✦ I keep everything on me in my carry-on luggage, and I travel with a Frio pack that keeps my insulin cold for up to 30 hours. If you're going out for the day, always take it with you in case plans change.
- ✦ Research medical centres for tourists in advance, just in case you need to visit a doctor.

TEACHING THE TEACHERS on the land

Diabetes WA Aboriginal Health Coordinator **KATHY HUET** was part of a bold new initiative to train diabetes educators out on the Ngaanyatjarra Lands – one of the most remote parts of Australia, where diabetes care can be extremely difficult to access.

Running training out in the Ngaanyatjarra Lands was a completely new experience for me. We'd done the DESY training plenty of times before, but always in metro areas, never in such a remote setting. This was a whole different world, which made it exciting and challenging in equal measure.

One of the biggest hurdles for us was the language barrier. Many of the participants don't speak English as their first language. We had to rethink how to get the content across. Our content has been carefully designed in consultation to be culturally safe, but when it came to actually running the sessions, we had to rethink some of our assumptions around simple things like timekeeping.

While we had planned to start and stop at particular times, we found

that schedules had to bend and flex to fit the reality on the ground. Interruptions were constant—cars pulling up outside, people calling out, children running in and out. It wasn't the structured environment I was used to, but we adapted.

Each night, we'd go back, regroup and plan for the next day. But no matter how carefully we planned, the day rarely went as expected. You couldn't just show up and deliver training. One thing we hadn't planned for was this unspoken responsibility to take care of the community Elders first—to make them a cup of tea in the mornings, fix them some toast and make sure they were comfortable. It's just how things are done out there; the mob looks after their Elders and we had to

step into that role when we were on their land.

What really stuck with me was how eager the participants were. They soaked up everything we taught, even though some of it was completely new to them. You don't always know how the content is connecting with the participants, particularly when there's a bit of a culture gap. One woman had been so quiet that we thought she was just doodling in her notebook, but it turned out she was meticulously writing down every word we said. It was incredible to see that level of dedication.

The training itself focused on equipping people to take what they'd learned back to their own communities—things like teaching kids in schools about healthy eating and better choices. But thinking

"What really stuck with me was how eager the participants were. They soaked up everything we taught, even though some of it was completely new to them."

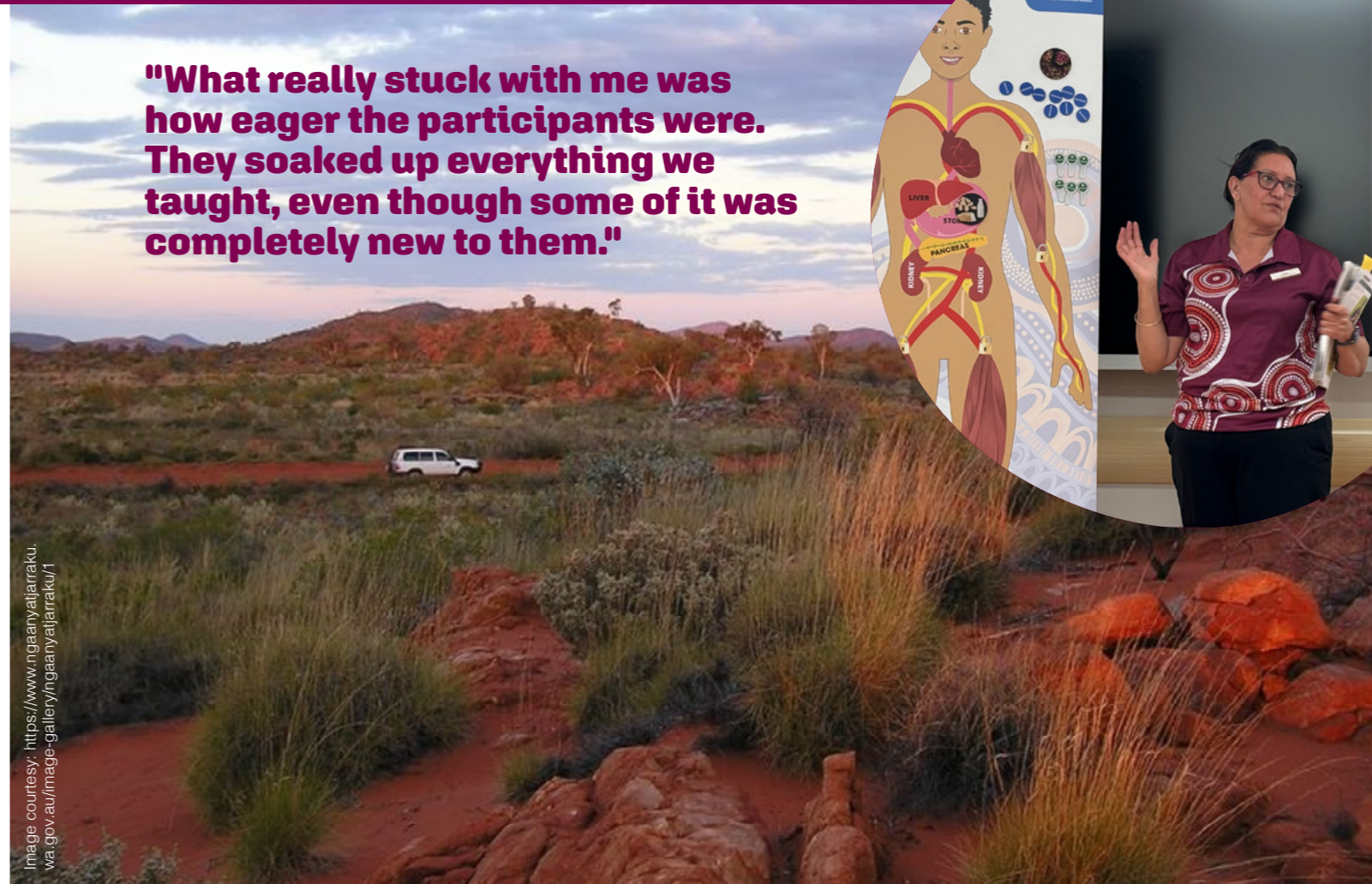


Image courtesy: <https://www.ngaanyatjarra.wa.gov.au/image-gallery/ngaanyatjarra/1>

about how they would share the knowledge they'd gained during training was really hard for some of them, especially if they had to do it in English. They could demonstrate concepts like how glucose works in the body, but translating that into teaching someone else? That was a challenge.

Still, we had a great mix of participants—from strong women in the community to health workers and educators—and that created a powerful dynamic. These people are the glue that holds their communities together, and now they have tools to create real change.

It wasn't easy. The days were long and draining and by midweek, everyone—trainers and participants alike—was feeling the exhaustion. But we kept going, and by the end, there was a real sense of achievement.

For me, the most rewarding part was building connections with participants from such a remote part of Australia – an area where this sort of training hasn't been run before. It was great listening to their stories and knowing that the information I was passing on could ripple through their communities. They've got the knowledge now and it's just the beginning. We'll check in, mentor them and hopefully secure funding to do more.

At the end of the day, it wasn't just training—it was about meeting them where they are, respecting their ways and finding ways to make a lasting impact.

Best of the rest of summer

Heading out or staying in? ZOE DELEUIL has you covered with some late summer festival happenings, TV and books.

HIGHLIGHTS FROM THE PERTH FESTIVAL

Big Name, No Blankets *The Regal Theatre, 28 February – 1 March, perthfestival.com.au*

For three nights, the Regal Theatre in Subiaco will be home to a rock show celebrating the journey of Sammy Tjapanangka Butcher, one of the founders of the iconic Warumpi Band and named after its debut album, Big Name, No Blankets. Commissioned by the Perth Festival, this a show where the audience is invited to get up and sing along to the songs that took Aboriginal culture to the world.

The Great Kimberley Wilderness *WA Museum Boola Bardip, until 28 April*

Journey into the heart of an ancient and awe-inspiring landscape from the comfort of your chair thanks to this riveting virtual reality documentary by White Spark Pictures.

Casa Musica, *East Perth Power Station, 7 February – 1 March*

Inspired by long summer nights in southern Europe, the East Perth riverbank will be transformed into an open-air concert with music from both homegrown and overseas artists. Free entry, every Wednesday to Sunday from 5-8pm.



Big Name, No Blankets



STAYING IN

Apple Cider Vinegar (Netflix)

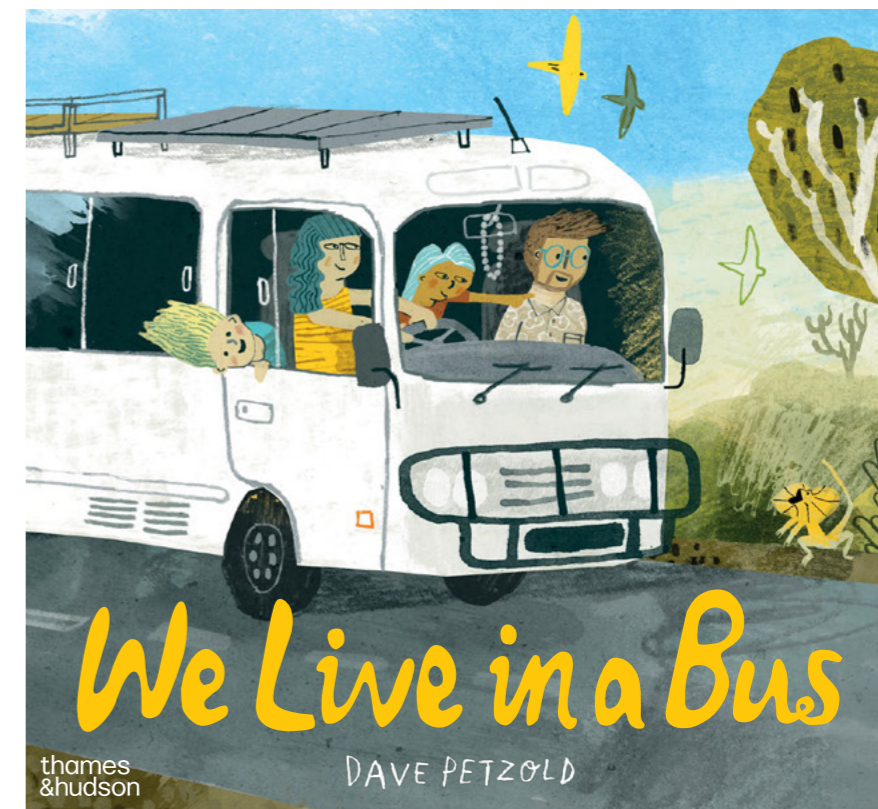
Back in the early days of social media, wellness guru Belle Gibson convinced her thousands of followers that she'd cured her malignant brain cancer with a healthy diet. A 2017 non-fiction book, *The Woman Who Fooled the World*, co-written by investigative journalists Beau Donnelly and Nick Toscano, detailed her extensive fraud, and their work has now inspired a Netflix series, *Apple Cider Vinegar*, which will be released on 6 February. A fascinating look at the role of social media in allowing unqualified people to spread health misinformation for personal gain.

We have one copy of the book to give away to our readers – email us at media@diabetes.wa.com.au with your name and address to enter.

BOOKS

ADULT FICTION AND NON-FICTION

Fans of AFL, grandchildren and community sport will all find something to love in Helen Garner's latest offering, *The Season*, which follows her grandson's footy season in wintry Melbourne. Here in WA, Tim Winton has released his first novel in six years, *Juice*, which imagines a heat-ravaged Western Australia in a few hundred years if we fail to address climate change. And fans of Hilary Mantel and Maggie O'Farrell's historical fiction will appreciate *Rapture* by Sydney author Emily Maguire, a beautifully written novel that recreates the life of a priest's daughter who disguises herself as a man to study, travel and rise through the church hierarchy in ninth-century Europe.



KIDS AND YOUNG ADULT

The Moon Story

This bedtime picture book follows a family from Fitzroy Crossing as they camp under the moon and stars. Written in both Kimberley Kriol and English, it has a QR code that allows readers to listen along as they read. Written and illustrated by Marshia Cook, with some illustrations by Tamua Nuggett.

We Live in a Bus

Travel across Australia with a family in their bus, Gracie Joy Rufus Bee, swimming in waterholes, making new friends at campsites and gazing up at the night sky. A charming picture book about the joy of travel, boldly illustrated by Dave Petzold.

The Sweetness Between Us (Young Adult)

On top of the usual teen struggles, young vampire Amadine is struggling to adjust after a near-fatal car accident. While taking make-up classes she meets Perley, who has his own struggles with diabetes. A cosy graphic novel with a twist by Sarah Winifred Searle.





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clinic

**NEW
LOCATION:
PORT KENNEDY**

Appointments available in Subiaco and Port Kennedy

**Compassionate diabetes care with ongoing support
tailored to your needs**



The Diabetes WA Clinic staff can assist you with:

- ♥ Blood glucose monitoring,
- ♥ Starting and adjusting insulin,
- ♥ Starting new medication,
- ♥ Dietary adjustments,
- ♥ Physical activity support,
- ♥ Diabetes prevention,
- ♥ Body weight management,
- ♥ Continuous glucose monitor (CGM) start-ups and problem solving,
- ♥ Insulin pump start-ups and support.

Diabetes educator, dietitian and exercise physiologist appointments

Face to face or telehealth

Discounts for members

Empowering you to live well with diabetes

Bring a friend or support person to your appointment. You may be eligible for a Medicare rebate, please discuss with your GP prior to your appointment.

Department of Veterans Affairs subsidy available for Gold and eligible White Card Holders with a GP referral.



08 9436 6290
www.diabeteswa.com.au/diabetes-wa-clinic/