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For most children who get diabetes a new situation emerge and both the individual and their family need to establish new practises in their everyday life. In Sweden, the public health service has a major responsibility to create learning environments, where the families can socialize into social and bodily practises that they need to cope with the long term illness. In the research project “Implementation of Hospital Based Home Care (HBHC) for Children Newly Diagnosed with Diabetes” a family-centred care is systematic implemented in two different Children's Hospital clinic settings to generate learning environments focusing on everyday life experiences of the families rather then the traditional medical knowledge setting the agenda. The new situation, we argue, creates a space for both the professionals and the families to negotiate between different social and bodily practises. In this paper we give a theoretical and ethnographical understanding of the different practises that are expressed, and how the negotiation can be analysed as a discussion about risk management in the families everyday life.

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