



Coping with **Diabetes**



- When any **child, teenager or adult develops a long-term medical condition**, the diagnosis affects the whole family. **Adjusting to a new life poses challenges and takes time.**

This process can impact a person's confidence, self-esteem and sense of being in control. Some people feel as though their whole world is turned upside down.

INITIAL REACTIONS AND THOUGHTS

Parents/caregivers, their child with diabetes, and siblings usually have many thoughts and feelings when they first learn about a new diabetes diagnosis.

It is normal to feel surprised, shocked, numb, in disbelief, scared, sad, mad, jealous, overwhelmed, confused, worried, nervous, helpless, guilty or stressed. Everyone goes through this rollercoaster of emotions in his or her own way. You might have some or even all of these feelings.

Experiencing overwhelming emotions can make it hard to concentrate or remember things. It can also make people irritable and may cause problems with sleeping and eating.

Be aware that the impact of a new diagnosis may hit you immediately, or later once the storm has calmed and you have time to reflect.

ADJUSTING TO DIABETES

Sometimes parents or caregivers blame themselves for the diagnosis. Maybe they think they should have noticed the symptoms earlier, or should have called the doctor sooner. Or maybe they feel it is their fault because they, or someone else on their side of the family has diabetes. Although guilt is often a normal parent reaction, we want to reassure you that it is not your fault that your child has diabetes.

DEALING WITH STRESS

There are a lot of coping strategies you can use to manage stress.

It may be hard in the beginning because everything is new and you have not had a lot of practice. If you are already dealing with a lot of stress in your life, coping with a new diabetes diagnosis may be more complicated. Other life stressors may include financial problems, little or no social support, a recent move, job problems, mental illness (depression, anxiety, etc.), marital or relationship conflicts, or another family member's illness.

WHAT HELPS DURING HOSPITALIZATION

- Get support from family and friends.
- If people offer to help, you can delegate tasks such as errands, pet care, or school picks ups or request meal delivery.
- Take care of yourself (make sure you take frequent breaks, drink plenty of water, eat regularly and sleep).
- Practice relaxation techniques such as deep-breathing.
- Write down your questions for members of the medical team.
- Keep a folder with all of the information and handouts that are given to you.

ROLE OF SOCIAL WORK

A social worker is a member of the multidisciplinary team who serves as a support to you and your family. The social worker will help you and your child talk about your feelings, thoughts, and reactions to the diagnosis, as well as your worries and concerns.

You will be meeting with medical social workers at the hospital and in the outpatient clinic after your child is discharged from the hospital.

Medical social workers are there to connect you with resources in the hospital and community. They will help your child transition back to school, and assist with both financial and insurance resources. Your social worker may ask you questions about who lives at home, your work and financial situation, other stressors (including any other physical or mental illness in the family) and your support system.

Lastly, the social worker will teach relaxation or distraction techniques to help reduce stress or anxiety related to pokes or other fears associated with diabetes. The social worker will also provide emotional support, coping strategies, and support for you, your child and your family.

You can plan on seeing your social worker at most of your clinic visits.

HOW CAN YOU HELP YOUR CHILD COPE WITH STRESS?

- Continue your child's daily routine as much as possible.
- Talk with your child to provide information to help them understand diabetes.
- Provide ongoing opportunities for your child to ask questions.
- Remember your family rules and stand by them. It is important, now more than ever, that your child can rely on the consistency and security of rules and discipline. Without this, your child may feel a loss of parental support and control.
- Parents and children should work as a team to take care of diabetes. Communicate regularly about what is going on in everyone's life.
- Find a place for diabetes in your life, but do not let it rule your life. Your child has diabetes... he/she/they are not diabetes.
- Keep in contact with the school support systems and provide them with updated information.
- Remember that it is normal developmentally for school-age children to want to master skills, including diabetes-related tasks. Too much responsibility too early, however, can lead to "burnout" and noncompliance in later years. We recommend that you encourage your child to learn new skills in areas other than diabetes and very gradually help to eliminate power struggles and unwanted behaviors.

ESTABLISHING A ROUTINE

The need for consistency and routine in daily life is essential for children. This is even more apparent when a child is diagnosed with diabetes. The way that you talk with your child can help establish a routine with clear expectations. Clear expectations are crucial to help your child feel successful in maintaining diabetes.

Here are some phrases and words to help your child understand what you need from them.

1. Establish a daily five-minute meeting (for children and teens 10 years and older). Each day sit down with your child for five minutes to review blood sugar records, insulin doses and food intake. This ensures that everyone in the house is working as a team to care for the diabetes. This also minimizes missed insulin doses and blood sugar checks.

2. Give a “prompting phrase” to signal the time to start an activity.

“It’s time for your injection.”

3. Give your child direction of what you would like him/her/them to do. Including a choice can help eliminate power struggles and unwanted behaviors.

“Which finger should we use to check your blood sugar?”

“Find your teddy bear to hold. How many times do you want to squeeze the bear, four or five times?”

4. If your child “stalls,” make the choice for them.

“It looks like it is hard for you to decide today. I will help you choose this time. We will use this finger.”

“That is a good question. I will answer when we are done.”

“Yes, you can get a drink of water after we are done with your injection.”

5. Always acknowledge feelings. Praise your child for getting the task done.

"I know you don't want to have your poke, but your body needs insulin. You don't have to like it, but we still have to do it."

"I could see that today was really hard. I know you did the best you could. What do you think we can do next time to make it easier? How can we make it better next time?"

RESPONSIBILITY OF DIABETES CARE

- Diabetes is a family disease and requires the active involvement of parents and caregivers for many years.
- Sharing the diabetes care can help prevent the duties from becoming the responsibility of one person.
- The primary role of your child is to be a kid.
- Parents hold the primary responsibility for diabetes care at all times regardless of the child's age.

This is your medical social worker:

