

# Ways Your Family Can Cope With Your Child's Diabetes



If your child has just been diagnosed with diabetes, it's normal to feel overwhelmed.

Some parents say that they want to hear that everything will be okay, and your lives will return to a new normal.

This is all true, but before life reaches your “new normal,” many families experience a period of shock, disbelief, anger, sadness, fear, guilt, and confusion.

Coping with a diabetes diagnosis in the family is different for everyone. Whether your child was diagnosed after feeling sick for some time or it came out of nowhere, your feelings are normal.

It's important to allow yourself to experience whatever emotions you feel. Even though this may be uncomfortable, you will be able to move forward more if you work through your emotions.

It's also common to experience multiple feelings at the same time — and to go back and forth between these emotions. Though many of your fears will go away, sadness and anger may still come and go periodically, but they'll get better over time. You'll also feel

less anxious and overwhelmed as you practice the skills you have learned and they become part of your daily routine.

As you and your child live with diabetes, you will gain confidence each day that will lead to your “new normal.” And remember — the diabetes team at Children’s Hospital & Medical Center is always available for you.

## Coping With The Stress Of A Diabetes Diagnosis

Your child’s diabetes diagnosis can mean stressful changes that will feel like a strain on your bandwidth — on top of everything else on your plate.

Stress can affect you...:

- **Physically:** The body sends out stress hormones that can increase your heart rate and blood pressure, make your breathing rapid and shallow, raise or lower your blood sugar, make you feel tense and tired, and cause headaches.
- **Emotionally:** Stress can make it difficult to focus or sleep. It can also cause you to feel anxious, overwhelmed, angry, or hopeless.

Identify coping strategies that work for you. For example:

- Lean on your circle of loved ones to cry with, talk to, vent to, or take your mind off of things
- Exercise to offset those stress hormones with ones that can make you feel more relaxed and help you think more clearly
- Have some quiet time alone to process what is happening
- Connect with other parents who are dealing with their child’s diabetes

Do what works for you.

Be honest about your feelings with other adults in your family as well as all of your children. Make sure you don’t give your children more information than they can process at their age.

Give your children permission to express their feelings. Reassure them that you will get through this adjustment and you’ll always do whatever needs to be done to take care of

them. Remember to look at your “Living with Diabetes” worksheet from time to time and practice your own coping strategies to prevent your “burnout.”

## Setting Age-Appropriate Expectations

See chapter 18 in the Pink Panther book. Children can understand what is happening to them according to their current developmental level. Though this may vary from child to child, this is a guideline some of the ways children may deal with diabetes at different age levels.

### Under Age 3

When a child is this young, caregivers usually do all of the diabetes care. The child may not understand what diabetes is, why you need to poke their fingers, give them shots, and place restrictions on when and what they can eat.

They will come to accept diabetes care as part of normal life fairly quickly if you are consistent and loving. Don't apologize for shots and pokes. And try not to allow stalling tactics, manipulation, or tantrums to put off getting tasks done. You may also try giving them shots after seeing how they eat.

### Ages 3 To 7

At this age, caregivers typically still do all the diabetes care. Some kids in this age group can do their own finger poke, and some may even assist with an injection, but parents continue to have full responsibility to supervise and be fully aware of every blood test and injection. The child may accept that these things need to be done — but they may not fully understand what diabetes is.

Children at this age will gradually learn to cooperate. You may still need to give them a shot after a meal if their intake is inconsistent. You may also notice a “delayed reaction” — when your child adapts very quickly at first, but becomes sad or resistant weeks or months later when they realize it's permanent.

### Ages 7 To 12

Many children are able to perform finger-stick blood checks by themselves by now. By age 10 or 11, they may be able to draw up and give themselves an injection, or a pump

bolus — but they may still need adult supervision. It's also likely that they will be able to do basic carb counting.

At this age, your child may not have an understanding of the concept that doing something now helps prevent problems later, so parental involvement is usually still necessary. A “delayed reaction” to their diagnosis may also occur at this age. Encourage your child to express their feelings in healthy ways, such as writing or talking about them. Reassure them getting diabetes is not their fault, and it's not a punishment.

## Ages 13 To 18

As children get older, they usually have the intellectual and physical ability to do the majority of tasks — such as blood sugar checks, injections, pushing pump buttons, count carbs — but they may lack the maturity or responsibility of an adult to make sure every task gets done on time, every day.

Children at this age are trying to become their own person. Adolescents may show this by being highly focused on peers, social activities, school activities, and sports — anything else but diabetes management. Because of this, you may need to stay involved with their diabetes management.

Transitioning responsibility for diabetes management is a process, not an event. They should gradually begin to understand the concept that doing something now will prevent problems later.

## Helping Siblings Cope With A Diabetes Diagnosis

Diabetes is a condition that affects all members of your family — not just the person who does blood tests and takes shots. When a child first develops diabetes, it can be difficult for the whole family. Sometimes, brothers and sisters feel left out because so much attention is given to the child with diabetes.

Some common concerns with siblings include:

- trouble understanding what diabetes is
- fearing that their brother or sister will die (some children may hear “diabetes” as “die-of-betes”)

- thinking they caused the diabetes by having an angry thought against the child with diabetes
- fearing that they will be the next one to be diagnosed

Ways that you can help siblings cope include:

- Allow them to be a part of the process and educate them in ways that are appropriate for their own developmental level.
- Encourage contact if your child is in the hospital — or bring them with you to the clinic so they can see where you (and their brother or sister) go when you leave them. Be sure to bring along another caretaker or use Children’s “Kids Camp” for the siblings, so you can concentrate on the primary reason for your visit.
- Ask them what they think and understand, even if you think you know — you might be surprised. Reassure them that chances are very, very small they will develop diabetes, but if they do, you will take care of them just like you are taking care of their sibling.
- Keep discipline consistent among all children — it should not be different for their brother or sister with diabetes than it is for them.
- Plan individual time with each child in the family.

## Concerns With Extended Family

Because diabetes is prevalent in our country, many people know someone with diabetes. Knowing someone — even casually — who has or had diabetes often leads a person to believe that they know how to treat diabetes.

However, 90% of all people with diabetes have Type 2 diabetes, and only 10% have Type 1. So their knowledge most likely pertains to someone with Type 2, not a child with Type 1 diabetes. Remember that the people in your child’s life have good intentions — but they may not know everything you know.

When your child is in the care of an extended family member, remember to:

- Discuss the ways you take care of your child, such as how to give the injection, how to do the blood tests and how to treat a low blood sugar
- Write down your child’s current doses and meal instructions
- Remind them not to treat your child differently than how they did before their diabetes diagnosis

## Support From The Children's Hospital & Medical Diabetes Team

Besides your child's siblings and extended family members, our staff here at Children's is also a part of your diabetes team. Many of our staff are certified diabetes educators.

Here is a general description of how each of our staff members can help you and your family:

- **Physicians, Physician's Assistants, and Nurse Practitioners:** These medical care providers make recommendations for treatment of your child's blood sugars and oversee all teaching.
- **Nurse Educator:** A nurse teacher who explains everything to you and your child about diabetes and how to manage it.
- **Dietician Educator:** A nutrition expert who teaches you and your child how to use a meal planning system and helps you develop a personalized meal plan for your child.
- **Social Worker:** A counselor who offers guidance and support to you as you make your way through this adjustment, and helps with any areas of concern you have (such as school or daycare issues). The social worker is also here to provide you with information about community resources and financial assistance programs.
- **Child Life Specialist:** A fun person who helps your child understand diabetes at their own developmental level and informs you about our school re-entry program.
- **Psychologist:** A listener who has experience working with children who live with chronic diseases and can work with your child cope with their diabetes. Appointments are available on an as-needed basis.

---

Do you still have questions about coping with your child's diabetes diagnosis? Contact the diabetes team at [Children's Diabetes Center](#), Children's Hospital & Medical Center at [402-955-3871](tel:402-955-3871) to find out more about how to safely manage your child's diabetes with these medications.

Visit us online at [www.childrensomaha.org/diabetes](http://www.childrensomaha.org/diabetes)