

The diabetes diagnosis: A complete family adjustment

An interview with Dr. Dan Weinstein, Licensed Psychologist



KC: Dr. Dan, what is one of the most important factors in determining the outcome or success of a child with diabetes?

Dr. Dan: A family's adjustment to the diagnosis required by a youth with a chronic or serious illness is one of the strongest predictors of outcome for the child. If a family can successfully adapt early in the process there is an increased chance for fewer family problems and disease complications. In the case of type 1, or juvenile diabetes, the disease must be managed aggressively and can be a complex daily undertaking.

KC: What does it mean for a family to “adapt” to a child having diabetes?

Dr. Dan: Successful adaptation to the illness includes how old the child is when diagnosed, symptoms, family dynamics, stage level of acceptance by family members, and how the disease is managed. Overall stress level may be increased because of these demands and the risks posed by poor medical management.

Parents may grieve a sense of loss, feel guilty, or experience intense emotional responses. Caregivers also may feel remorseful of the time that medication management pulls them from their non-affected child(ren) and remiss in their parenting because of the daily demands required for medical management. For example, one parent expressed that despite feeling a source of joy and pride of having their child as the “poster boy” for JDRF, this honor also can be a drain on their family emotional resources.

KC: What impact do you believe “well” siblings see when a sibling of theirs is diagnosed with diabetes?

Dr. Dan: The impact on a “well” sibling can range from mild to a great deal of distress, including emotional or behavioral difficulties. Older siblings may feel responsible for or worry about their younger brother or sister's well being or condition. They may experience sadness that their sibling has diabetes or has to endure routine painful procedures. Siblings may resent the attention provided to their brother or sister. Siblings of a child with diabetes may feel scared about the injections and finger pricks their brother or sister has to endure. On the more positive side, siblings often report a closer relationship with their affected brother or sister as a result of their illness. Their tendency to provide care and nurturance

can build a bond between the children. Many “well” siblings are not provided the crucial, adequate, direct, and developmentally appropriate education by their sibling’s physician or health provider.

KC: Can you tell me of a specific instance in which you have seen the impact of a diabetes diagnosis in the “well” sibling?

Dr. Dan: In discussing the impact on one particular older brother, two significant challenges were described. He found his brother’s mood changes very taxing. Low blood sugars meant he was irritable and argumentative, and high readings found him overly excited and annoying. A second challenge was the periodic inconvenience of time taken away from events or activities when his brother’s blood sugar needed to be checked. Although these issues are commonly experienced by siblings of a child with diabetes, age appropriate education will improve their preparedness for these and other challenges and reduce the emotional intensity.

Dr. Dan Weinstein is a licensed psychologist in private practice specializing in psychotherapy and evaluations with children, adolescents, and young adults. More information can be found on his website: www.doctordanw.com.