



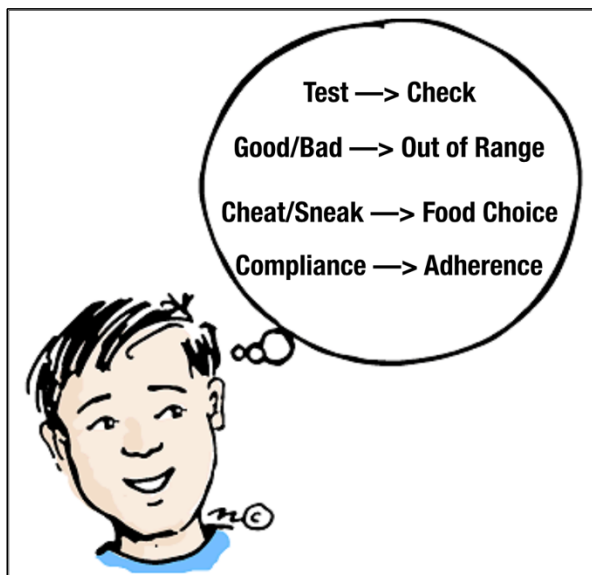
PSYCH HACKS

Talking the Talk: How to Make Conversations about Diabetes Easier

Childhood diabetes brings with it many challenges not just for the child, but for the entire family. It is not uncommon, and even normal for these challenges to result in conflict among family members, especially between child and parents. Research has shown time and time again that the manner in which diabetes conflict is managed and how family members communicate about diabetes are two of the strongest predictors of childhood diabetes control. Below are five keys to communicating effectively on diabetes related issues.

#1: Purposeful Problem-Solving

Conflict is inevitable for all families. Given this, it is surprising how many families do not have a structured approach when it comes to solving conflict. When raising a child with a chronic medical condition such as diabetes, having a structured problem-solving approach is essential for effective communication. One such approach that has been shown to be helpful involves four steps: 1.) agreeing a problem definition that does not involve assigning blame, 2.) brainstorming all possible solutions (yes, even the seemingly ridiculous ideas), 3.) choosing a solution to try, and 4.) evaluating the outcome of that solution after a defined period of time. Whether your approach involves these four steps or not, having some type of consistent structure in the way diabetes problems are solved is key.



#2: Language Matters

We often take for granted just how powerful words can be. In diabetes, and almost all chronic medical conditions, once innocuous words can slowly take on a very negative connotation. It is recommended that parents of children with diabetes continually examine the words they use when communicating with their child on diabetes related topics. For example, saying "within range" vs. "out of range" when describing blood sugar levels (as opposed to "good" or "bad") conveys an important message to your child that the only "bad" blood sugar value is one that is not known. The graphic to the left includes other examples of subtly harmful words and appropriate alternatives.

#3: The Hidden Power of Praise

Our schedules can get so busy. This makes it easy for us to fall into the trap of only providing corrective feedback regarding diabetes management (e.g., “you forgot to check your blood sugar!”). We often forget the importance of acknowledging our child for all the things they are doing well with regard to diabetes. It is recommended that for every neutral or negative interaction surrounding diabetes, parents strive to give their child three to four positive praises around diabetes. Finally, it is more powerful to praise controllable behaviors (e.g., checking blood sugar) versus outcomes (e.g., having an in-range blood sugar level).



#4: Schedule Conflict

For many families, any diabetes related topic becomes such a potent trigger for a child, that it can be difficult to bring up. It is often helpful for both parents and the child to set aside a consistent time of 10-15 minutes every day to talk about diabetes and solve related conflicts. Scheduling diabetes conflict in advance helps bring cooler heads to the table as opposed to trying to tackle a conflict in an emotionally heated moment. Setting aside time to talk about diabetes also serves the important function of setting limits on how much diabetes is talked about during other parts of the day.

#5: Crystal Clarity

As children become adolescents and the responsibilities of managing diabetes slowly shift over to the teen, it is not uncommon for glycemic control to take a bit of a dip. One of many reasons for this is the fact that the breakdown of responsibilities often becomes unclear. In other words, it's unclear who is responsible for what when it comes to diabetes. It is recommended that parents and their teen have a meeting to examine and clarify roles and responsibilities. It is even more important that there is *agreement* between parent and adolescent on who is responsible for what.



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