

ASK EXPERT: Parent counselling - A must in the management of type 1 diabetes in children



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Type 1 diabetes is an autoimmune disorder which mostly happens in children and adolescents. It is a life-long condition where beta cells of pancreas responsible for producing insulin (the hormone required to convert food into energy stop producing insulin).

Parenting a child with type 1 diabetes

People with type 1 diabetes require a strict daily regimen of insulin injections, finger-prick blood tests and dietary monitoring. For parents, diagnosis of type 1 diabetes in their child comes as a very big shock. Parenting a child with type 1 diabetes can be quite challenging, since it affects almost every aspect of the family. There is denial, anger, confusion and sometimes acute depression before parents accept that their child has diabetes. Adjustment to a diagnosis of diabetes can take almost 6–9 months for children and 9–12 months for parents.¹ Dealing with complications of diabetes, concerns about sticking with diabetes care plan of the child and financial liability often leads to frequent anxiety and burn-out for parents

Challenges faced by parents

Diagnosis of diabetes has a huge impact on family dynamics and can pose a lot of challenges for parents of these children, namely:

- For most parents managing diabetes is a very new thing, as giving insulin, monitoring blood

glucose levels and providing balanced nutrition adds to their complex role of being parents.

- Blood glucose levels of the child are affected not only by insulin dose, diet and exercise but by multiple day to day activities. These fluctuations in blood glucose levels add to their confusion and bring feelings of failure.
- It can cause emotional turmoil when parents try to find cause of it and begin to self-blame or blame each other.
- It is not only emotional and physical liability but also is a huge financial responsibility.
- Along with their own anger and frustration, anger and frustration of a child also needs to be handled
- There are many social comments and unsolicited advices which need to be faced.
- Diabetes touches almost every aspect of the child as well as family life. Striking a balance between diabetes management, growth and development of child and other life factors is quite a task for parents.
- These efforts need to be on a continuous basis in every life stage transitions of child.

Different situations – Different needs

Family environment also affects the impact of diagnosis. Impact is not only because of financial costs but also because of perceptions, knowledge, background, structure, and functioning of the family as a whole. The confusions and problems faced by parents differ because of their different situations. Parents with low educational background, both parents working, parents living in a nuclear or joint families, individual bias and conflicts require different types of solutions according to situation.

Ultimate goal for treatment

The ultimate goal of treatment is that diabetes is well controlled in child with type 1 diabetes and

the child grows into an independent adult. Family interactions and parental support play an important role in this.² The fact is that if parents do not feel comfortable and safe, children will feel comfortable and safe. Strong, cheerful and responsible parents results in strong, cheerful and responsible children which is ultimate goal of treatment.

Current Indian Scenario

When diabetes is diagnosed in a child, maintaining positive dynamics in family functioning is not an easy task. This is reflected in a study conducted in north India of parents of adolescents with type 1 diabetes.³ Scores on the General Health Questionnaire (GHQ) showed 17 out of the 50 parents had a diagnosable psychiatric disorder, and nearly two-thirds showed tendencies toward psychological dysfunction. The scenario seems to be similar in other parts of country also. The authors report that these effects are likely to be weaker in cultures where diabetes is less stigmatized. Parents without the requisite information and ongoing support can find themselves overwhelmed with fears and worries about their child, which in turn can have negative impact on both the child and the family.

Changing Diabetes in Children (CDiC) program

Novo Nordisk Education Foundation along with 21 specialized centres across India has tried to address the critical gap in the management of type1 Diabetes through its CDiC program. More than 4000 children registered in the program are provided with comprehensive care which includes free human insulin and glucose monitoring. Apart from the primary objectives of improving access to essential care, the program incorporates education and counselling about diabetes and its management. For imparting self-management education Diabetes education camps are conducted. More than 250 diabetes education camps have been held so far in partnership with the CDiC centres. Family support plays a vital role in diabetes management, so CDiC encourages the participation of family members, the parent and sibling in these camps. The camp setting is an ideal place for providing diabetes education, parent counselling, providing peer support and thus empowering children and families to manage diabetes.

If you would like to have more information on type 1 diabetes you can write to us at -

Diabetes Educator

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1. Kovacs M, Kass RE, Schnell TM, Goldston D, Marsh J: Family functioning and metabolic control of school-aged children with IDDM. *Diabetes Care* 12:409–415, 1989 Abstract/FREE Full Text. 2. Williams LB, Laffelt LMB, Hood KK: Diabetes-specific family conflict and psychological distress in paediatric Type 1 diabetes. *Diabetic Med* 2009, 26:908–914. Pub Med Abstract | Publisher Full Text. 3. Bhadada S, Grover S, Kumar S, Bhansali AS, Jaggi S: Psychological impact of type 1 diabetes mellitus on parents: An exploratory study from North India. *Int J Diabetes DevCries* 2011, 31:174–179. Publisher Full Text