Psychology Support

The diabetes team has two Clinical Psychologists: Dr Sarah Ross, covering paediatrics (0-14 years), and Dr Andy Gentil, covering adolescents (14-18 years). Each of us has one day per week dedicated to this work. We each try to be available at clinics so that we can either join clinic appointments where appropriate or catch up with people while they are already at the hospital. We also sometimes see children/young people in our base at 3 Rillbank Terrace for ongoing appointments.

As Clinical Psychologists we have training in child development and understanding how people think, feel and behave. We specialise in working with children, young people and their families around coping, adjustment and living with diabetes and/or its treatment. We can talk with you individually or with your parents to help with the following kind of issues:

- Managing diabetes within everyday life and any problems that may arise (e.g. at school, with friends or family).
- Coping with any aspect of treatment (e.g. injections, finger pricks, set changes, annual blood tests etc).
- Offering support and ways to cope with how you are feeling about your diabetes.
- Meeting if you are worried about your mood (ranging from feeling fed up to feeling depressed or severly anxious) especially if this is impacting on your diabetes management and school/college/work attendence. We can offer assessment and discussion of options for help.
- We also see children/young people as part of an admission for review of glycaemic control or following an episode of DKA.

What we discuss is confidential or private. However it can often be useful for the team to be aware of some of the issues we talk about so we would usually ask your permission to share relevant information, where appropriate.

Please speak to anyone in the diabetes team if you have any questions about Clinical Psychology or would like to meet us.

Adjustment to diagnosis for children (0-14yrs)

Following a diagnosis of diabetes, most children and their parents go through a period of adjustment during which they can experience a wide range of emotions. This is very normal. Everyone experiences this process of adjustment in an individual way and it can take varying amounts of time for different children/families.

Early days

When your child is first given their diagnosis they, you and your other children may feel shocked. Your child may have been unwell before their diagnosis and that could have been quite scary for them and you. You may have feelings of guilt or anger if it took some time for the diagnosis to be made, or it might feel as though it came out of the blue. As well as coping with being in hospital and coming to terms with the diagnosis itself, there is also a lot of practical information to take in around managing your child's diabetes (insulin, blood testing and diet). This can sometimes feel overwhelming. Remember at this stage you are just starting to learn about how to manage diabetes and no-one expects you to get everything right! You can ask for help and support from the diabetes team.

Over the coming weeks and months

As the reality of living with and managing a chronic, lifelong condition sinks in you and your child may start to notice feeling more upset, angry or worried. This is perfectly normal. Over time most people find that these unpleasant feelings reduce and they start to accept their diagnosis. They realise that diabetes doesn't change who they are and see that they can live their life alongside their condition. Often at times of change (e.g. moving to high school) or times of higher than usual stress (exams, family or friendship difficulties) negative feelings about diabetes can reappear and be a focus for feeling upset, even if it's not the real problem. This is also very normal. The below suggestions may help your child cope with these difficult feelings.

If you feel your child is continuing to experience high levels of worry or upset that are stopping them from getting on with their life please get in touch with a member of the diabetes team to seek some advice or support.

What can help?

Although we have described that "adjustment" is a process that takes time and that everyone needs to go through, there are things you can do to help:

- Try to talk openly with your child about their feelings about diabetes. You can also
 encourage them to talk to their friends if they would feel able to do this.
- It can be helpful to let your child know it's OK to feel upset or annoyed. You can model this
 for them by talking about how you cope with these normal feelings. It is tempting to try to
 protect family members from feeling upset but you can give them permission to cry and
 express upset or angry feelings in a safe place.



- Recognise that upsets might not always be about the thing that triggered them! Your child
 may appear more fed up with their diabetes when they are also feeling upset or worried
 about something at school or a fall out with friends.
- Try to keep as many normal routines as possible e.g. bedtimes, mealtimes and activities after school. This can help children feel safe and secure and gives them places where diabetes is the not the centre of attention.
- It is also helpful to keep your child's diabetes management routine consistent. It is
 common for children to refuse to cooperate with their treatment at times. It can be difficult
 to remain firm when your child is upset and when you have seen them being unwell.
 However, maintaining the diabetes routine from the very start will show your child that it is
 not negotiable and can actually help them feel secure (as well as reduce arguments about
 injections/testing etc).
- Make sure you provide lots of praise and encouragement to reinforce your child's efforts. If your child's control is not great, rather than blame your child or yourself (which can result in feelings of guilt and shame), instead focus on solving the problem and working together to make an improvement.
- Involve your child in decisions about their diabetes care and self management as soon as
 they are emotionally ready. Many parents initially feel very protective and want to shield
 their child from their diabetes management but it is important to try and help support their
 independence in order for them to increase their self esteem.
- Seek support from voluntary organisations, parent groups, forums or other parents of children with diabetes. It can be helpful to know you are not alone in the way you or your child is feeling.

Remember there is no right or wrong way to cope. You need to find what suits and helps you and your child in your unique situation. The diabetes team are always happy to speak to you if you have any questions or would like advice.

Adjustment to diagnosis for young people

After a diagnosis of diabetes, most young people and their parents go through a period of adjustment during which they can experience a wide range of emotions. This is normal. Everyone adjusts in an individual way and it can take varying amounts of time. Families can become more stressed than usual as everyone tries to cope with the new demands of diabetes.

Early days

When you are first given your diagnosis, you, your parents and family members may feel shocked. You might have been unwell before your diagnosis and sometimes that might have been scary for everyone. Parents sometimes feel guilty or angry about things that happened before your diagnosis, even if everyone actually did all they could. As well as coping with being in hospital and coming to terms with what the diagnosis means for your life, there is a lot of practical information to take in about how to manage your diabetes. This can be stressful, as it's like having to sit exams in a subject you've only just started to learn. Try not to panic, the diabetes team are there to help, and no one can expect to get everything right!

Over the coming weeks and months

Later, once you've settled into your new routine, and as the reality of living your life with diabetes sinks in, you and your family may feel different kinds of emotions. Sleep, going out, hobbies and holidays might be affected as everyone works out how to plan around your diabetes tasks. Over time though, most people find that these unpleasant feelings reduce. This is sometimes called "accepting" diabetes, but it doesn't mean anyone expects you to "like" it. Young people who settle-in well, start to see that diabetes doesn't change who you are and see that you can live your life alongside diabetes.

At times of change (e.g. moving to high school) or times of higher than usual stress (e.g. exams, family or friendship difficulties) negative feelings about diabetes can reappear and it can be a focus for feeling upset, even if it's not the real or the only problem. Some people find that talking to someone outside the family helps at these times, as they might help you figure out what's happening with your feelings.

If you continue to feel high levels of upset or worry that stop you getting on with what you want to do in your life then please get in touch with a member of the diabetes team to seek some advice or support. Your diabetes team is made up of different professionals who can talk to you or help you, your family or school in different technical, practical and emotional ways.

What can help?

Although we have described that "adjustment" is a process that takes time and that everyone needs to go through in their own way, there are some things that often seem to help:

Try to talk openly with your family and trusted friends about your feelings about diabetes.
 Being open with family and friends means they can be on your side when you're stressed or trying to figure out how to manage. Cutting them out might mean they won't be as able to help when needed.



- Being open and asking for help might feel a bit odd, as you may have been enjoying being more independent and having more privacy. However, it is possible to be open, at the same time as being independent and having some privacy. This is something we can talk to families about if you get stuck with it.
- Some people find they bottle up their feelings to protect their parents, brothers or sisters. This is sometimes something we learn from our parents! If you find yourself doing this, it can be good to find someone else who can help you when you're upset. There are lots of people who can help, they don't have to be professionals, and being part of a social media group of other young people with diabetes can also help (see the links in the Handbook or ask in clinic).
- Sometimes it can be hard to figure out why we are upset or why we can't seem to do
 readings, injections or diaries as well as before. If you find yourself getting more stressed
 about this or frustrated with yourself, make sure you let the people close to you know.
 Family or friends might be able to help you figure it out, or help you with the tasks for a bit.
- Try to keep as many of your normal routines as possible, like sensible bedtimes, regular
 mealtimes, going-out with friends, sports and hobbies. Try to make diabetes management
 fit with these, and not the other way round (even though that can sometimes feel simpler).
 You can always ask the diabetes team how to manage changes in exercise/hobbies/
 holidays if you're not sure.
- People sometimes feel guilty or annoyed at themselves if a BG reading is high. If this happens a lot, it can lead some people to avoid testing, in order to avoid the bad news and their bad feelings. If you start to do this, please talk to the team. Try not to think of BG readings as being good or bad, or that they mean success or failure. They don't. It might help to think of BG readings as just being readings from an experiment in school/college. Don't judge them, but do act on them.
- Likewise, if parents or other people are "judging your readings" or criticising you for out
 of range readings and this is making you feel bad, please do tell someone on the team.
 Sometimes the team can help families do things in a better way.
- Remember that from the professional team's point of view, a full diary or full meter with high readings in it at clinic is better than an non-existent or nearly empty meter with just a couple of carefully selected in-range readings on it. The team can give you better feedback and advice if they know what's really been happening, even if things haven't been going too well.
- Similarly for pump downloads, these make more sense to the team if you are honest about your lifestyle and daily routines (or lack of them!) when they ask, as they can then give you better advice.
- There are lots of decisions to make when managing diabetes, and these can lead to family arguments about big things and little things (from being allowed to go out, to which type of monitor to use). Arguments about diabetes choices can be a way that normal moves toward independence play-out between parents and young people.
- Try to have a look at websites, apps, forums or other diabetes supports. It can be helpful to know you are not alone in the way you feel, think, or the annoying or unhelpful things that happen around diabetes. There are some inspiring people out there, and there may be someone who has the perfect advice or ideas for you. You won't know unless you look!
- There is no right or wrong way to cope. You and the people around you can figure out what suits and helps you better over time. The diabetes team are always happy to speak to you if you have any questions, want help figuring something out, or would like some advice.

