POSITIVE CAREGIVING FOR PARENTS OF CHILDREN WITH DIABETES

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"Positive parenting is the continual relationship of a parent(s) and a child or children that includes **caring**, **teaching**, **leading**, **communicating**, and **providing for the needs** of a child consistently and unconditionally."

Seay, A., Freysteinson, W. M., & McFarlane, J. (2014). Positive Parenting. Nursing Forum, 49(3), 200–208. https://doi.org/10.1111/nuf.12093







POSITIVE PARENTING

- Strong parent-child relationship
 - Foundation for all other aspects of parenting
- Appropriate limit-setting
- Extends to diabetes:
 - More warmth is related to better diabetes management
 - More reactive parenting predicts worse glycemic outcomes

Davis, C. L., Delamater, A. M., Shaw, K. H., La Greca, A. M., Eidson, M. S., Perez-Rodriguez, J. E., & Nemery, R. (2001). Parenting styles, regimen adherence, and glycemic control in 4- to 10year-old children with diabetes. *Journal of Pediatric Psychology*, 26(2), 123–129. <u>https://doi.org/10.1093/jpepsy/26.2.123</u>

GENERAL PRINCIPLES FOR POSITIVE CAREGIVING:



- Connect with your child
- Express warmth, affection, and appreciation
- Consistent and age-appropriate expectations
- Use positive interactions to correct problem behaviors
- Balance parent and child needs

WHAT DOES POSITIVE PARENTING NOT LOOK LIKE:

- Harsh parenting practices
 - Yelling, threatening
 - Focusing on punishments rather than rewards
- Lecturing, nagging
- Being overly permissive
 - Letting child do whatever they want whenever they want
 - Avoiding setting limits
- Overindulging your child
 - Giving your child excessive gifts
 - Unlimited access to preferred foods, screen time, etc.
- Suppressing your emotions/pretending to be happy
- Positive parenting should be positive for both of you





BARRIERS TO POSITIVE CAREGIVING

- Lots of demands and stress related to diabetes management and parenting
- Parents tend to focus on the negative rather than the positive
 - "The squeaky wheel gets the grease"
- Hard to be strategic and intentional with parenting when constantly "putting out fires"
- However, all of these things can lead to diabetes and parenting burnout

DIABETES & CHILDREN'S EMOTIONS

- Diabetes has a huge emotional impact on children's emotions
 - Diagnosis
 - Diabetes disruptions, problems
- Most children struggle to express emotions
 - "Act out" or act rudely
 - Avoid diabetes or parents
- These responses can lead to more problems/stress for parents
- Positive caregiving can help children learn to regulate emotions



PARENT EMOTIONS

- Increased burden/stress
- Diabetes distress
- Guilt and grief
- Frustration and anger
- Struggling to meet expectations of diabetes providers, teachers, the world, and yourself
- Feeling like you are constantly forcing your child to do things that he/she/they don't want to do







POSITIVE CAREGIVING CAN HELP!

- Attuning to your own emotions enhance self-care and self-awareness
- Attuning to your child's emotions help them regulate emotions and finding solutions that work for them
- Positive caregiving can instill positivity into diabetes and other areas
- Sets a positive tone for the family





WHAT DOES POSITIVE PARENTING LOOK LIKE?







EXAMPLE: YOUNG CHILD



9-year-old is whining and delaying pump changes each time a pump change is due.

- Check-in with your own and your child's emotions (stress, tiredness, impatience?)
- Prioritize based on the situation, emotions, and ways to empower your child
- Propose a plan:
 - "It's getting late and I can see that you're frustrated and don't want to change your pump. I wish we could skip to change too. If you can calm down and let me change your pump right now, we will have time to play a game after. If you want to wait 15 minutes, that's ok too, but then we won't have a time for a game, just bed. What would you like to do?"

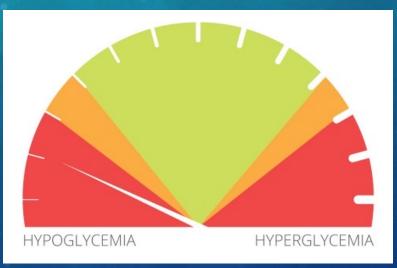
EXAMPLE: TEENAGER



15-year-old isn't giving corrections in the evening while play video games/on social media.

- Check-in with yourself and your teen about why corrections aren't happening
- Prioritize based on how high the highs are, how long until corrections happen, etc.
- Work together to make a plan:
 - "I know that you want some time to unwind in the evenings and probably want to forget about diabetes. I would love to find a way for you to do that. Would you be ok if I help you treat? Or if you prefer to treat, is there a way to take breaks between games that wouldn't be disruptive? If we can work together to find a way to manage your blood sugars AND give you a break, then maybe you can get extra video game time."

POSITIVE PARENTING AND HIGHS/LOWS



HYPERGLYCEMIA 💿 HYPOGLYCEMIA

BLOOD GLUCOSE (SUGAR) LEVEL

HIGH BLOOD SUGAR There is too much sugar in the blood. LOW BLOOD SUGAR There is too little sugar to keep the cells working well.

COMMON SYMPTOMS



(excessive urination)

polydipsia

(increased thirst)

















headache



dizziness

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IRRITABIILTY



MANAGING EMOTIONS WITH HIGHS & LOWS



Child's emotions

- Irritability (symptom)
- Stress/anxiety
- Frustration
- Shame/guilt
- Parent/caregiver's emotions
 - Worry/concern
 - Shame/guilt
 - Stress/anxiety
 - Frustration/anger



POSITIVE PARENTING WITH HIGHS/LOWS

• Remember:

- Diabetes deserves the blame for highs/lows, not your or your child
- You are on the same team: Neither of you wants highs/lows
- Take breath and take a moment to assess emotions and the situation
- Give your child a pass
- Focus on what needs to happen in the moment
 - Postpone worrying about diet or patterns that caused the high/low
 - Not the time to "learn a lesson"
- Lead with kindness and empathy
- Offer support that you child is receptive to





CREATING POSITIVE HABITS AND ROUTINES



ONE-ON-ONE TIME

 Dedicated time (20 minutes) for just you and your child to be together

- You are 100% focused on your child
- Minimize distractions/disruptions
- Child chooses the activity
- Free from discussing "hot topics"
- No demands, instructions, or advice
- Limit the questions you ask
- Weekly, consistent, and scheduled
- Creates an opportunity to connect free from the stress of everyday life (and diabetes!)









"CATCH 'EM BEING GOOD"

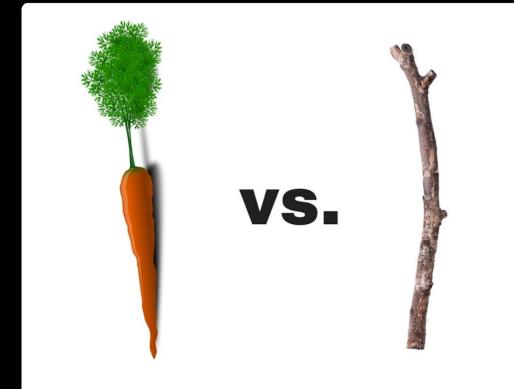
- It is so easy to overlook the positive things your child is already doing
- "Catch 'em Being Good" is when parents actively keep an eye out for things the child is doing well that may have been overlooked
 - Keeping track of sensor changes
 - Checking-in about complicated carb counts
 - Pre-blousing
- Just noticing and acknowledging these things changes parents perspectives and parent-child dynamics
- Helps balance out the trouble-shooting and demands



EFFECTIVE PRAISE

- Less than effective praise:
 - "Good job"
 - "Thank you"
- Be specific about what you are praising
 - "You came right over when I called you, that was awesome!"
 - "Great job sitting calmly during that pump change."
- Have the enthusiasm in your voice match how much appreciate the action and/or how hard it was for the child to do





REWARDS ARE MORE EFFECTIVE THAN PUNISHMENT

REWARDS

- Diabetes management is a huge burden and not inherently rewarding
- Rewards are not bribes, but helpful tools to promote positive parenting and behavior change
- Reward the child's cooperation or behavior
 - Do <u>not</u> reward numbers, A1c, or events
- Rewards should be:
 - Free/inexpensive
 - Something of interest to your child
 - Given immediately (or as soon after the behavior as possible)
 - Salient (of interest to the child)
 - Food/low snacks should not be used as a reward





EXAMPLES OF REWARDS FOR YOUNG CHILDREN

- Picking out clothes
- Watching a music video
- Access to a coveted toy/activity
- Choosing a song to listen in the car

EXAMPLES OF REWARDS FOR TEENS

- Extra screen time
- Staying up late
- Extended curfew
- Break from a chore







I DON'T THINK I SHOULD HAVE TO GIVE A REWARD...

- You don't have to! It's optional!
- Diabetes management is no inherently rewarding or positive
- Rewards are a powerful tool for behavior change
- Different than bribes
- Can be temporary
- Is a reward worth the change you want to see?

GENERAL TIPS FOR LIMIT SETTING



- Go into situations with confidence and optimism
- Always give ONE warning before giving a consequence
 - "If you..., then..."
- Always remember the three C's of limit setting:
 - 1. Calm
 - 2. Clear
 - 3. Consistent

PUTTING THINGS IN PERSPECTIVE

- Balancing diabetes, parenting, and all other life demands can feel impossible
- Parenting a child with diabetes is challenging in many ways that most people do not understand
- But you are not alone
- If you are struggling with parenting your child related to diabetes or otherwise, it can be good to reach out to your diabetes team, a mental health provider, and other support systems



TAKE-AWAYS



- Strong parent-child relationship and appropriate limit-setting
- Emotions and blood sugars play important roles
- Choose parenting practices that will promote positive parent-child interactions

Q & A DISCUSSION

THANK YOU!

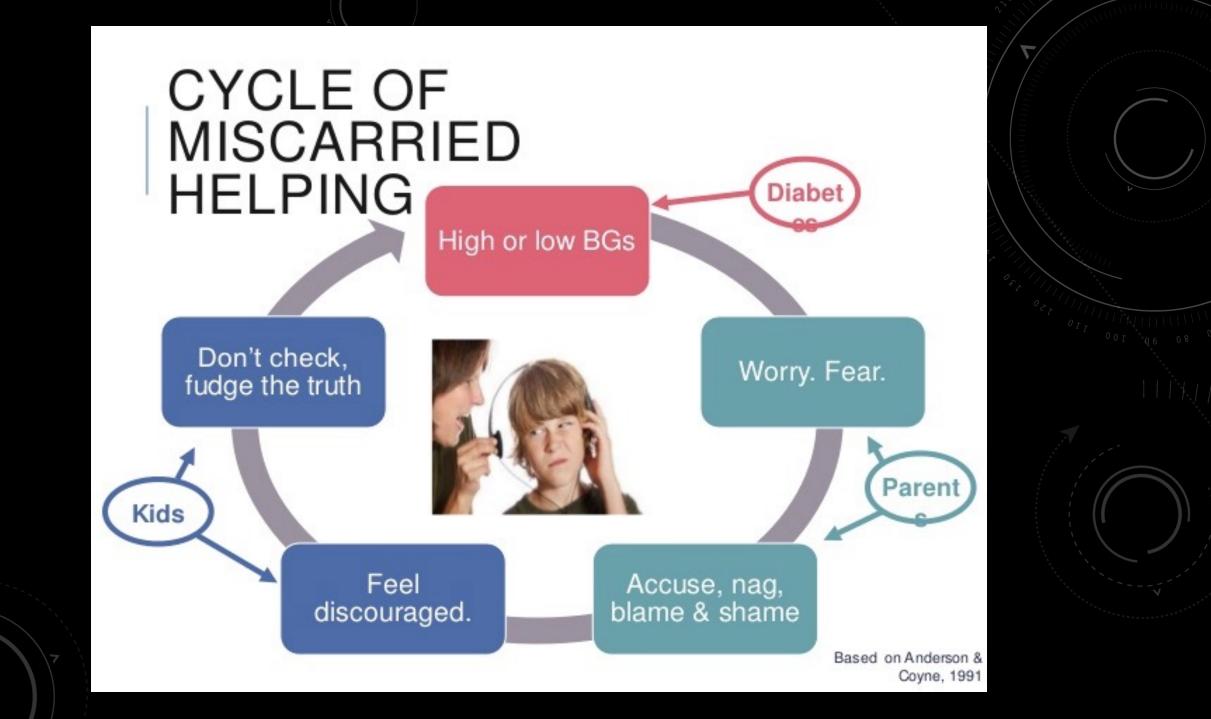
Please feel free to contact me at: wongjj@stanford.edu wongjj



PARENTING STYLES

- Authoritative: high control, high warmth/responsiveness
- Authoritarian: high control, low warmth/responsiveness
- Permissive: low control, high warmth/responsiveness
- **Uninvolved**: low control, low warmth/responsiveness

Baumrind, D. (1991). The Influence of Parenting Style on Adolescent Competence and Substance Use. *The Journal of Early Adolescence*, 11(1), 56–95. https://doi.org/10.1177/0272431691111004



GOTTMAN'S FIVE STEPS FOR PARENTS INCLUDE:

Awareness of emotions
Connecting with your child
Listening to your child
Naming emotions
Finding solutions

Gottman, J. (2019). The Gottman Institute: A research-based approach to relationships. Retrieved from <u>https://www.gottman.com/parents/</u>

CORPORAL PUNISHMENT

- Research consistently shows that corporal punishment is not effective
- Does more harm than good
 - Teaches children to use aggression/force to solve problems
 - Parents often feel guilt, and can become more lenient to compensate
 - Risk for substantial physical harm
 - Leads to worsening of behavioral issues and mental health issues
 - Negatively impacts parent-child relationship
 - Loss of sense of safety in home and with parents

Gershoff, E. T. (2010). MORE HARM THAN GOOD: A SUMMARY OF SCIENTIFIC RESEARCH ON THE INTENDED AND UNINTENDED EFFECTS OF CORPORAL PUNISHMENT ON CHILDREN. *Law and Contemporary Problems*, 73(2), 31–56.

PARENT-CHILD MATCH

- Some parents and children are naturally well-matched
 - Similar personalities
 - Enjoy the same activities
- Some parents and children are less well-matched
 - Loud child + parent with migraines
 - Active child + less active parent
 - Reserved child + boisterous parent
- Relationships come easily when there is a natural match
- A mismatch presents a challenge, but it's not insurmountable





