

Just as the physiologic responses affect the child, the parents and other family members of the child with newly diagnosed DM experience various emotional responses to the crisis. Care in the acute setting is short but may create fears and frustrations. The prospect of a chronic illness in their child engenders all the feelings and concerns that are faced by parents of children with other chronic illnesses (see [Chapter 17](#)). The threat of complications and death is always present, as well as the continuing drain on emotional and financial resources.

Certain fears may develop as a result of past experiences with the disease. A severe insulin reaction with seizures can contribute to fear of repetition. If parents observe a seizure or the adolescent has one in a public place, the desire to maintain better control is reinforced. They must understand how to prevent problems and how to handle problems calmly and coolly if they occur, and they must understand the complexities of the body, the disease, and its complications. Young children usually adjust well to problems related to the disease. With toddlers and preschoolers, insulin injections and glucose testing may be difficult at first. However, they usually accept the procedures when the parents use a matter-of-fact approach, without calling attention to a “hurt,” and treat the procedure like any other routine part of the child's life. After the injection, time with some special and positive attention, such as reading or talking, or another pleasant activity, is one way to convert children who initially refuse injections to those who accept them.

In the years before adolescence, children probably accept their condition most easily. They are able to understand the basic concepts related to their disease and its treatment. They are able to test blood glucose and urine, recognize food groups, give injections, keep records, and distinguish fear or excitement from hypoglycemia. They understand how to recognize, prevent, and treat hypoglycemia. However, they still need considerable parental involvement.

Nursing Tip

Ongoing motivation to adhere to a regimen is difficult. An older child and parent (or another caregiver) may enjoy negotiating a