

**Seeks support:** Talks with adults, children, physicians, and nurses; develops plans to handle problems as they occur; uses downward comparison (i.e., realizes that others have it worse)

Modified from Austin J, Patterson J, Huberty T: Development of the coping health inventory for children, *J Pediatr Nurs* 6(3):166-174, 1991.

Well-adapted children gradually learn to accept their physical limitations and find achievement in a variety of compensatory motor and intellectual pursuits. They function well at home, at school, and with peers. They have an understanding of their disorder that allows them to accept their limitations, assume responsibility for their care, and assist in treatment and rehabilitation regimens. They express appropriate emotions, such as sadness, anxiety, and anger, at times of exacerbations but confidence and guarded optimism during periods of clinical stability (Fig. 17-2). They are able to identify with other similarly affected individuals, promoting positive self-images and displaying pride and self-confidence in their ability to master a productive, successful life despite their illnesses.



**FIG 17-2** Periods of sadness and anger are appropriate in the child's adjustment to a chronic illness or disability, especially during exacerbations of the disorder.

## Hopefulness