

Conflict and Collaboration in Diabetes Management

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Research has consistently show that diabetes family conflict is associated with poorer physiological and psychosocial outcomes in children and adolescents with T1DM





Diabetes Family Conflict

 Worse regimen adherence and glycaemic control are associated with family conflict

 Adolescents with good adherence have interactions with their parents that are characterized as open and empathetic

 Adolescents with poor adherence have interactions characterized as emotionally charged and confrontational

(ISPAD Clinical Practice Consensus Guidelines 2018)

Diabetes Conflict – The Two Perspectives



Parents Perspective



Parents Perspective

Parents Perspective

What triggers parents' Jaws music?





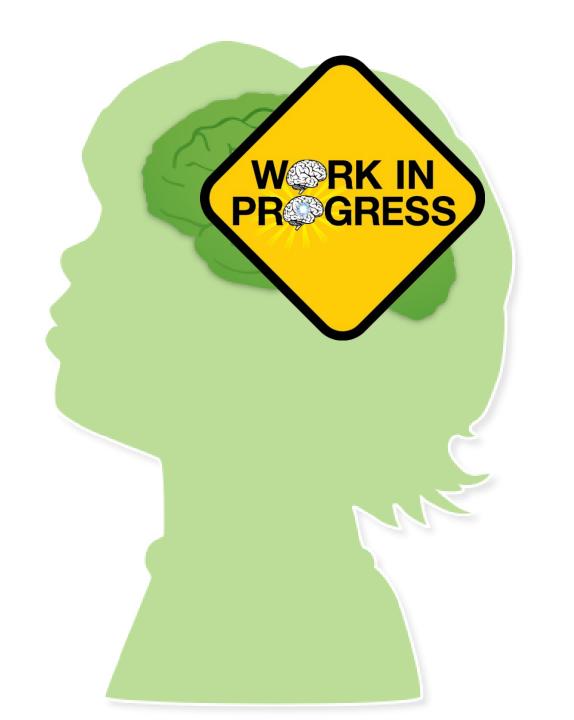


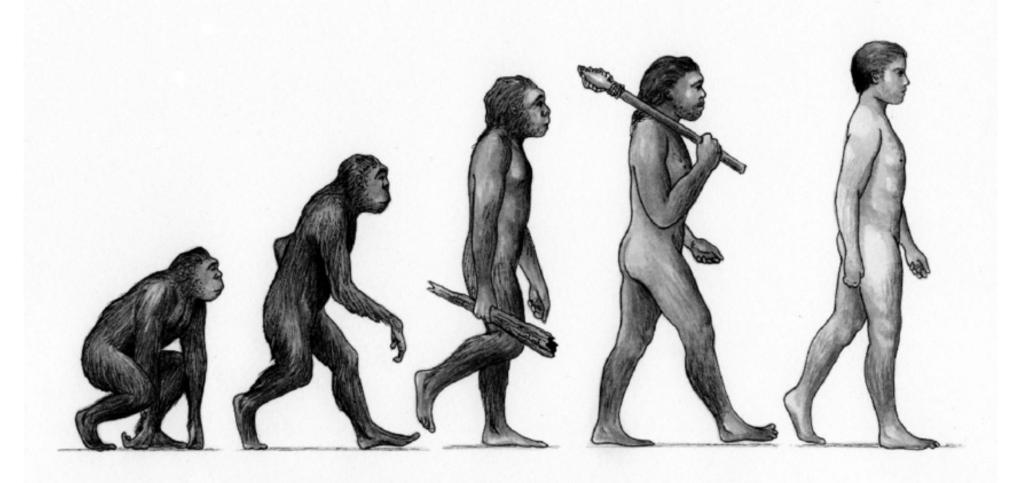




The Child's Perspective











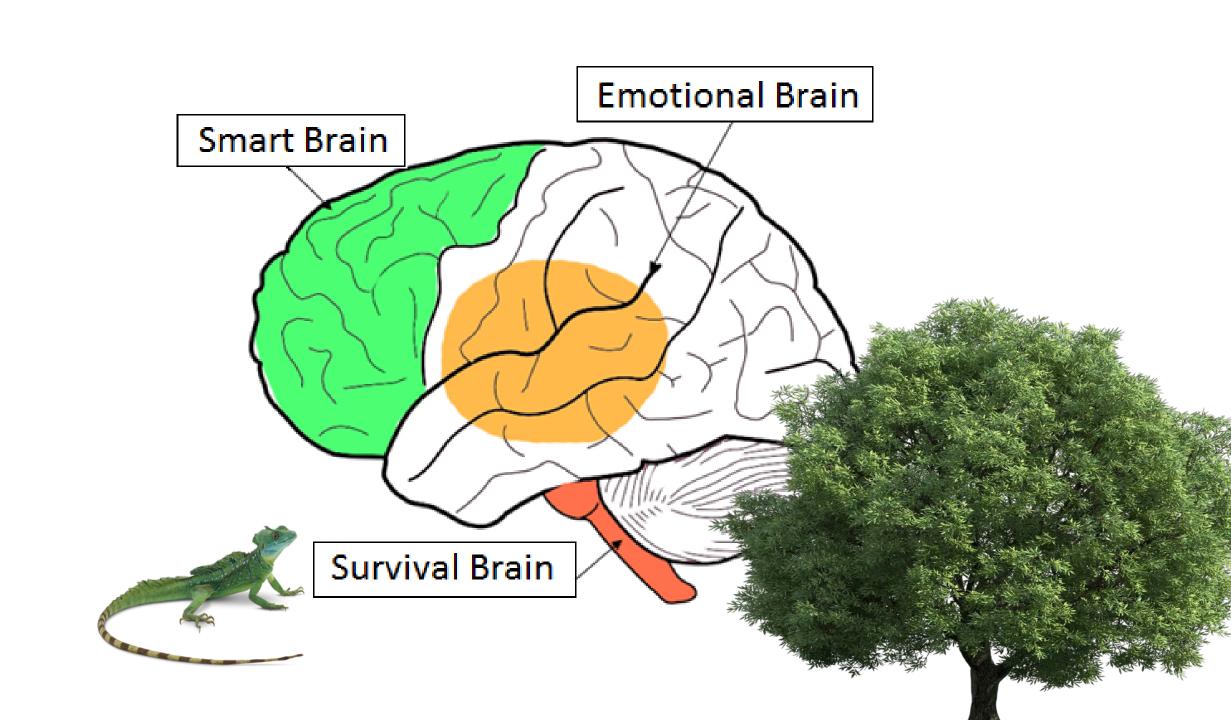


KATE SILVERTON

'The most helpful book for parents' PROFESSOR PETER FONAGY, CEO ANNA FREUD CENTRE

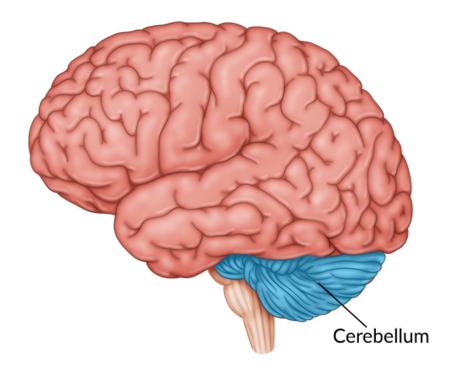
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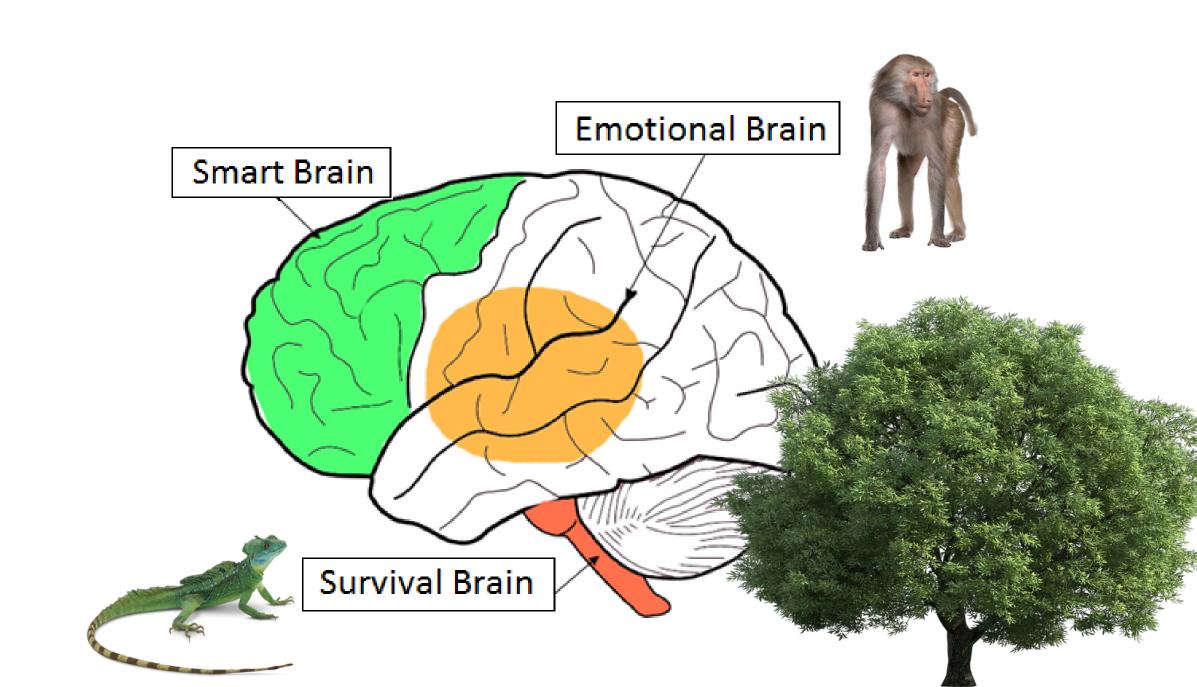


Lizard = Survival Brain

- Brain stem
- Cerebellum

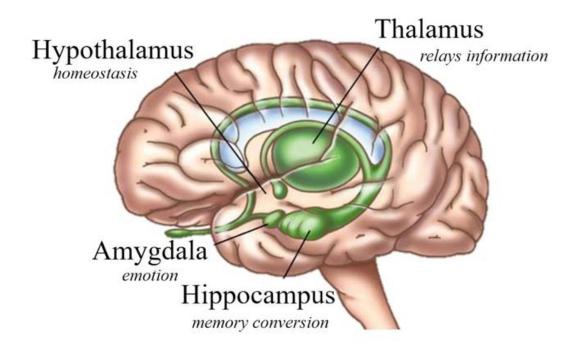




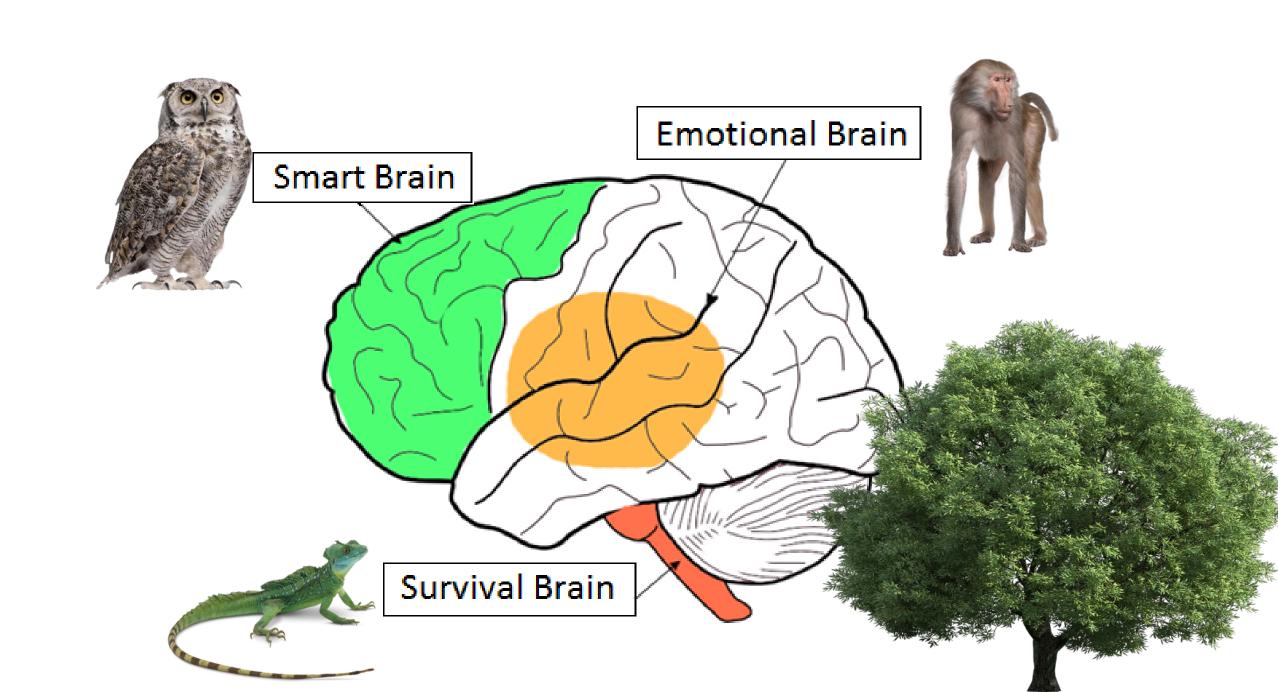


Baboon = Emotional Brain

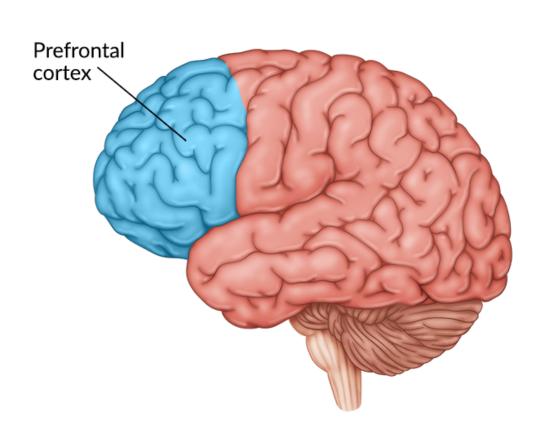
The Limbic System



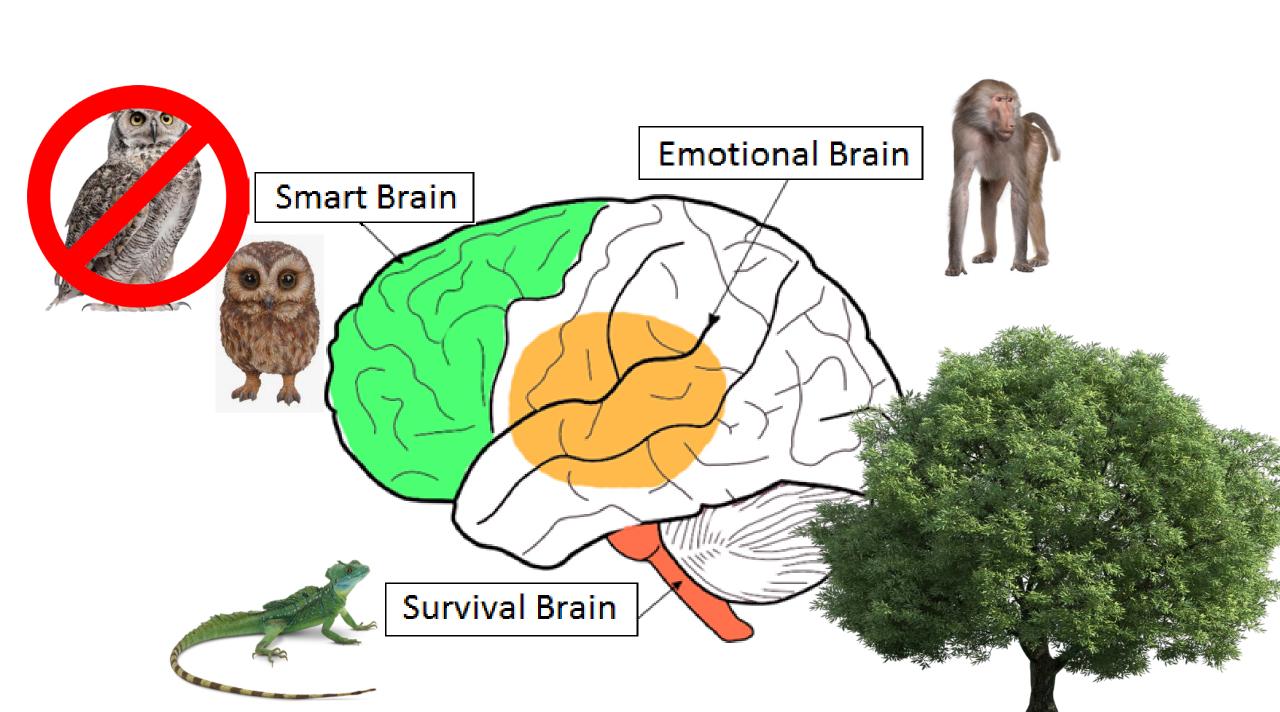




Wise Owl = Thinking Brain











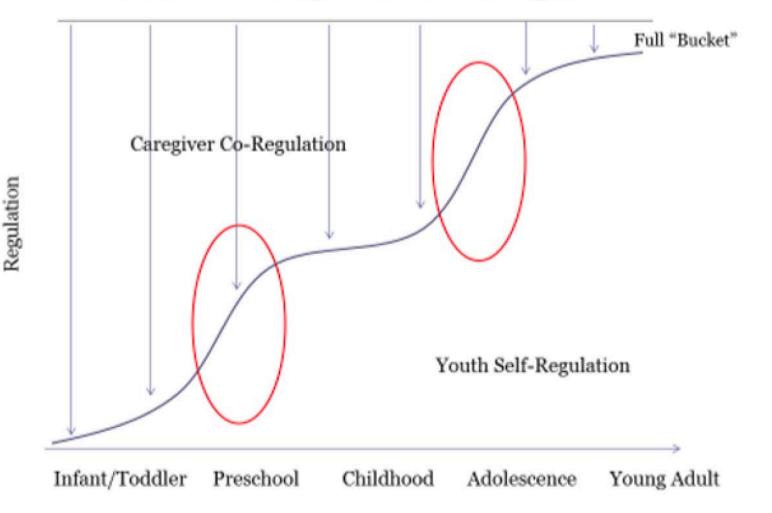
Self-Regulation

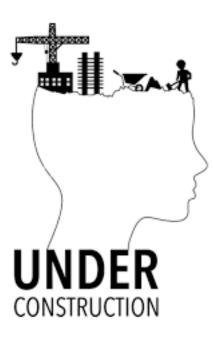




How does self-regulation develop?

Balance of Self-Regulation and Co-Regulation

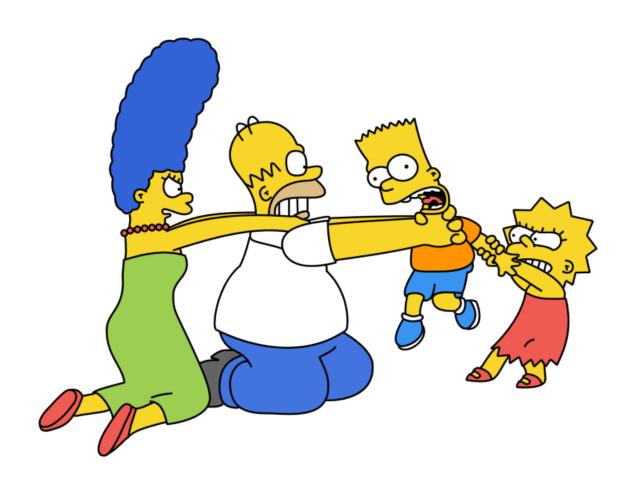




What does this mean?

- Children and adolescents get overwhelmed easily
- Children and adolescents are very sensitive to even minor criticism
- Conflicts can escalate quickly
- Children and adolescents are unable to diffuse conflict by themselves
- Addressing diabetes family conflict must focus on parents.

How do we address diabetes family conflict?



We need to ask parents about diabetes family conflict?

- "Do you are argue much about diabetes?"
- "How much easier would it be if all arguments about diabetes suddenly disappeared?"
- "Did your child ask to have diabetes?"
- "Is it fair to give out to them for something they didn't ask to have and none of their friends have to worry about?"
- "Are you working together or against each other?".

Collaborative Approach

 An increasingly large body of research supports the importance of family teamwork and shared regimen responsibility for metabolic and psychosocial outcomes

 Collaborative parent-child relationship with shared responsibilities for diabetes management is associated not only with better regimen adherence but also with improved emotional functioning

(ISPAD Clinical Practice Consensus Guidelines 2018)

Parents see their critical approach as constructive

- "If I don't criticise, they won't adhere"
- A critical approach to diabetes management is associated with poorer physiological and psychosocial outcomes
- Parents aren't always aware that they are being perceived as critical
- If we don't shift parents' mindsets from a critical to a collaborative approach to diabetes management, we can't eliminate diabetes family conflict
- Parents often don't understand the difference between a critical and a collaborative approach.

How do we communicate the difference between a critical and a collaborative approach?



Summary

- Parents' Jaws music can lead to negative interactions around diabetes
- 2. Children and adolescents have difficult regulating emotions
- 3. 1 & 2 above lead to diabetes family conflict
- 4. Family conflict must be addressed through parents
- 5. Parents need to move from a critical to a collaborative approach to diabetes management
- 6. Before this can happen, parents need to understand the difference between a critical and collaborative approach.

