# Full Meal Deal: Stir-Fry Takeout I A I A CASE O

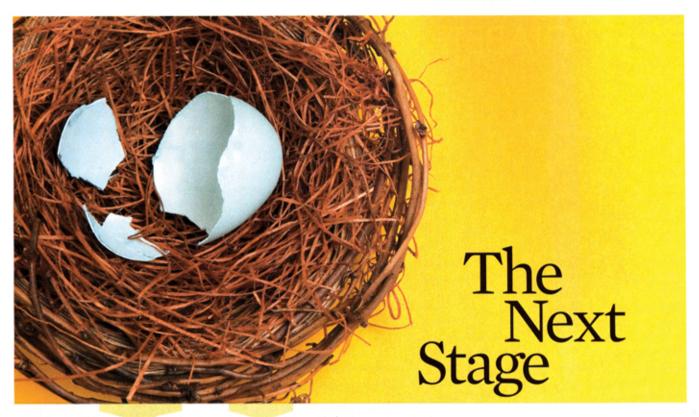
The Healthy Living Magazine

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Camp director Becky Barnett and camper Jenna Kladar of ADA Camp Daypoint in Hudson, Wis. Both live with type 1 diabetes.

American Diabetes Association.

# Caregiver Confidential | PARENTING



How to cope when your young adult leaves home

| By Lindsey Wahowiak

YOU DID EVERYTHING RIGHT. You learned all the techniques for managing blood glucose. You got up in the middle of the night to test for lows. You drove to countless endocrinologist, dietitian, and diabetes educator appointments. And now, your child with diabetes is an adult, starting a first job or preparing for college.

If you're feeling a little nervous about this new life stage, take some steps to ensure both you and your child feel comfortable and ready to navigate new adventures.

#### **Transition Time**

Experts such as Liana Abascal, PhD, MPH, director of adolescent and family services at the Behavioral Diabetes Institute in San Diego, recommend planning for independent living months, if not years, before your child leaves home for good. American Diabetes Association guidelines suggest using the full year before pediatric patients graduate to adult care to gradually increase their self-management. Just like learning to drive, diabetes care takes practice, including sometimes benefiting from mistakes.

Abascal says there's a danger of two extremes: expecting the child to take full responsibility for diabetes "way too soon" or exclusively controlling care as a parent without establishing self-management expectations for the young adult. An in-between approach is the solution, she says, in order to make sure an adult child is ready to take full responsibility for his or her diabetes at an appropriate time, but still feels supported.

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"The last year or two before the person leaves home [can be used] to kind of transfer that responsibility," Abascal suggests. "It helps parents feel so much more secure. They're still going to worry, of course, but they can see and know that their child has successfully managed his or her diabetes."

# **Establish Roles**

Once a child does leave home—even temporarily, such as for college—there can be confusion about how much control he or she has over diabetes care. Who orders supplies? Who will make appointments with doctors? You don't want to nag; you just want to make sure all aspects of care are covered. Abascal says people may use nagging as a way of getting information. But there's an easier way.

Eliot LeBow, LCSW, a New York psychotherapist, suggests sitting down with your adult child before he or she leaves the nest to hash out which parts of care will be covered by whom. "Parents can . . . express their concerns, let their child know that they are worried, and have a frank discussion on how they feel," he says. LeBow suggests asking, "'What are you comfortable with as far as my involvement in your health?" Don't even say 'diabetes'; make it more general."

### Learn to Let Go

It may feel natural to ask about your adult child's diabetes every time you talk, but it's likely your child won't find that helpful. In fact, it may even drive a wedge between you, says LeBow. "If a parent asks, 'How's your diabetes?' every time they call up, they're going to push their child away," he says. "A lot of

times, a parent will want to hold on too tight and kind of nag the child to death because they want to still be connected. It's actually healthy if they call less."

New boundaries will form—and that's OK. Parents can still keep lines of communication open by asking, "How are things going? Is there anything I can do?" Keeping questions open-ended and positive, Abascal says, "invites conversation without the assumption that they've done anything wrong."

## Rediscover "You" Time

Like any new empty-nester, parents of adult children with diabetes may not know what to do with themselves once their child is out of their care. Abascal says empty-nest syndrome can be even more pronounced in parents who are used to being "super in charge" of their child's care. So if parents feel restless or have an urge to call their child every day, both Abascal and LeBow suggest turning inward and focusing on this new stage of life as a parent.

Now is the time to reexplore the things you did before you had a child and to reexamine relationships that may have been neglected while you were focused on your child's care, "It takes a lot to maintain the health of the couple relationship and the parent relationship," LeBow says. "Once you throw diabetes into the mix, everything is 10 times harder than it was before." So plan a dinner with a dear friend. Pick up the hobbies that may have fallen by the wayside, or engage in new ones. Start a new tradition, like taking after-dinner strolls or exploring a new neighborhood every weekend. And take comfort in the fact that you've "graduated" to the next stage of parenthood. That's a lot to be proud of.