

PRE-TEEN AND TEEN COPING STRATEGIES OF LIVING WITH IBD

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As we all know IBD is a chronic disease, which, at this time, there is no cure for.

IBD is not only chronic but, unpredictable as well, and children thrive on predictability

Living with IBD adds an incredible level of complexity to life physically, socially, and psychologically.

Living life with an unpredictable disease where one goes through times of wellness, remission, to times of illness, flair, and back again makes it very difficult to cope with such a disease in a manner that promotes optimal health.

Being a teen or pre-teen and having to live with IBD adds yet another layer of COMPLEXITY

DEVELOPMENT ages 11-18

Adolescence is a period of transition from childhood to adulthood. It has been said that it is probably the most challenging and complicated period of life to describe, to study, or to experience.

During this time of development conflict is generally part of the parent child relationship. In addition, however, communication, support, connectiveness, and control are also important aspects of the relationship at this time.

Adolescent thought can deal with the possible as well as the actual, thanks to a newly emerging ability to think hypothetically, to reason deductively, and to explain theoretically. At the same time, egocentrism, along with feelings of uniqueness and invincibility, can cloud teenager's judgment.

Parents and young adolescent are usually at odds over issues centering on the child's increased assertiveness or lack of self-discipline. The

difficulties usually diminish as teenagers become more mature and parents allow more autonomy.

Teens have an interesting way of responding to their parent's concern for them. Ambivalence is usually the first response.

Teens vacillate between seeking close contact with one's parents, and, sometimes pushing away. At one moment feeling anxiously dependent upon them or turning to them for protection and support and next trying to achieve a dialogue.

SO WHAT DOES ALL OF THIS MEAN?

It is important to keep where your child is developmentally in the back of your mind as it impacts how you relate to them and impacts how they relate to you.

This is important as you are their parent and want to support them and relate to them, and vice versa, in the best way possible.

CHALLENGES OF IBD DURING PRE TEEN AND TEEN YEARS

1. Disruption of development - height, weight, onset of puberty
2. Physical symptoms: Abdominal pain, diarrhea, bleeding, fever, weight loss, fatigue
3. Psychological issues: Trauma, sense of loss, fear, anxiety, depression, shame, guilt, embarrassment, denial
4. Isolation from friends - different thought process, different expectations, worries and fears.
5. Loss of autonomy - possibility for autonomy derailed. The process of separation and individuation disrupted at a crucial time
6. Decision making ability may be impacted as well as the ability to know

and to trust oneself

7. Medication

8. Body image

9. Self esteem

10. General disruption of life from having to go to the doctor every few months, to blood draws, infusion medication, simply going to the bathroom and disruption if school is missed or if home schooling becomes the best solution at the time

COPING STRATEGIES

1. KNOW YOUR TRIGGERS

It's important to know what works for you and what doesn't in response to IBD and to know your limitations.

It is important for everyone, those impacted by IBD or not, to live as stress free as possible. Knowing one's triggers can greatly reduce stress.

2. HAVE A SUPPORT SYSTEM

Friends, family, organized support groups, doctors and other medical professionals, therapist...Individuals around who you can be yourself around and who you feel listen to you. People you can trust.

It's important to look at our feelings around having a chronic illness Shame, pain, guilt, sadness, embarrassment, loss.

3. BE COMPLIANT REGARDING MEDICATION

Medication compliance is often an issue because there can be a lack of cause and effect. Some individuals still have symptoms even on medication. In addition, we are all desperate to be normal. Nobody wants to take medication everyday. Especially when it has side effects or the medication is administered through a needle or infusion. This is where I can't say enough about peer support. Hearing you need to take your meds from a peer goes much further than from a parent.

4. GIVE TEENS A CONTEXT TO APPROACH THEIR DISEASE

It is a fact that children with IBD tend to deny their problems both in terms of symptoms and coexisting psychological issues. It is also a fact that families impacted by IBD often isolate feelings and keep them a secret. Instead of sheltering them, give them information. They are already thinking about all of the scary things you are trying to shelter them from. Talk about it. Provide the space, support and time and open mind...they can do the rest. Emotions are difficult - empathy is required.

5. CONTROL

We can't control our disease but we can control how we respond to our disease (taking meds., eating well, sleeping well, getting support etc.) Control needs to be given to teens as much as possible in terms of decision making, medical process, eating. Teens need to know how IBD impacts their body and they need to understand it (where it is, what they take for it, when and how often, what procedures they have had etc.)

6. COPING TECHNIQUES

Relaxation techniques

Positive imagery

Drawing or keeping a journal

Plan ahead - when traveling for example as much as possible

Make your bathroom a palace!