Age-Related Guidelines for Diabetes Responsibilities

Every child is different.
Age by itself does not tell you when a child is ready for more diabetes responsibility.
Most children will want to do tasks that they are ready to do.
It is important for them to have a sense of accomplishment.

How will my child do depending on how much I let him/her do his/her own diabetes care?

- If your child has been given the right amount of responsibility and also the right amount of adult supervision, his knowledge of diabetes should be good, his adherence* to his diabetes plan should be good, his blood sugar control should be good, and he should be hospitalized infrequently.
- If your child has been given too much responsibility and not enough adult supervision, his adherence to his diabetes plan may be poor, his blood sugar control may be poor, and he may be hospitalized frequently.
- If your child has not been given enough responsibility and also has too much adult supervision, his knowledge of diabetes may be poor.

*Doing what he/she is supposed to do

Why does my child need to have more responsibility?

- Develop self-confidence
- Learn his/her own limitations
- Be prepared for becoming an adult living on his/her own

What to think about when giving your child more responsibility:

- Your child’s understanding of diabetes
- Your child’s interest in having more responsibility
- Your child’s actual performance of diabetes tasks
- Your child’s overall maturity

Teamwork and Shared Responsibility lead to better diabetes control!

Developed by the Washington University/St. Louis Children’s Hospital Diabetes Team 2015
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#### Less than 5 years old:
- Parent does most tasks
- Child’s job is to cooperate
- Child can
  - Learn how to help check blood sugar (insert test strip, clean finger)
  - Learn to help with insulin (count to five before taking out syringe/pen)
  - Learn to recognize low blood sugar symptoms

#### 6-11 years old:
- Parent begins teaching child how to do more tasks
- Parent always supervises and is ready to step in
- Child can
  - Start making some independent food choices
  - Learning basic carb counting
  - If using an insulin pump, do boluses with supervision
- It is OK for the child to ask parent to do any diabetes tasks (give an insulin shot)
- Parents can begin teaching child about long and short term complications

#### 12-14 years old:
- Parents still watch all tasks and provide guidance in a calm and non-judgmental way and provide guidance as needed
- Parent works to limit conflict, helps teen to set goals and problem-solve
- Parents and teens work together to fill out and review the blood sugar log
- Young teens can
  - Begin doing most shots, insulin pump management, and blood sugar checks
  - Count carbs and make appropriate food choices
- Some teens may not be ready at this age
- Parents and teens work together to fill out and review the blood sugar log

#### 15-18 years old:
- Parents should continue to review the log book, meter, or insulin pump download with teen and provide feedback in a calm and non-judgmental way
- Parent can “fade out” monitoring over time, but should step back in if control worsens and ask teen “What can I do to help?”
- Older teens can
  - Begin doing most tasks independently
  - Be increasingly responsible for communicating with the health care team
  - Prepare with parent to transition to an adult healthcare provider
- Some teens may continue to need extra help – give them permission to ask for help

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