

Stages of Childhood Development

Parenting a child with epilepsy is not so different from parenting any child. Children still need the same love, attention and encouragement from their parents in order to grow up. There is no specific 'one way' of parenting a child with epilepsy; however, there are some extra things to take into consideration.

Infants (to 18 months)

All children in this stage of development need their parents to promote:

- ∂ crawling
- ∂ feeding
- ∂ walking
- ∂ talking.

When a child has seizures, parents may be more worried about their child having a seizure while trying to do any of the above. Sometimes, in an effort to be a good parent or to be loving and helpful, parents try to do too much for their child. This can thwart a child's natural desire and ability to achieve these milestones successfully. Parents should naturally promote their child's effort to reach these milestones.

If you are finding this difficult, consider discussing your thoughts and feelings with a professional who understands mother/child interaction and development.

Toddlers (18 months to 3 years)

Children in this age group need their parents to promote:

- ∂ walking
- ∂ exploring & playing
- ∂ climbing
- ∂ talking
- ∂ feeding themselves.

Parents may be concerned about the bumps and bruises which any toddler encounters. When a child has seizures, parents may become nervous about their child's efforts to attempt these things. They may find it difficult to allow their child the increased independence which is so important at this stage. By doing so, they send the message "I know that you cannot do this by yourself and that you are not all right without me."

All children need increased amounts of independence as they grow up. Parents strive to find a balance between nurturing and protection, and independence. Too much of either is not good. Each parent must decide where that balance lies for them, based on their own comfort level.

Not only do parents struggle with finding their own balance, others who care for their child (siblings, day care providers, baby sitters, extended family members) will also do the same. Parents can help these care givers by educating them about promoting independence and safety, and by providing information about seizures and medication.

If you find that things are out of balance in this area, you may want to find someone - another parent or a professional who is familiar with this experience - to talk with.

Pre-Schoolers (3 years to 5 years)

Children in this age group need their parents to promote:

- ∂ child's play, creativity and imagination
- ∂ child's exploration of his/her environment
- ∂ socializing in various environments
- ∂ setting limits and rules.

The concerns and worries of parents whose child has seizures may push them to parent differently than they would if their child did not have seizures. Some parents view their child as being constantly at risk. They may feel so worried that they become excessively protective. Other parents view their child as special or sick and feel so sorry for their child that they become excessively permissive. We know that the parenting 'style' affects a child's behaviour. Parents whose style is excessively protective may find that their child becomes inhibited and frightened of trying new things. Parents whose style is excessively permissive may find that their child becomes disinhibited or not able to manage feelings or behaviour.

At this stage, it is extremely important to set rules and expectations, exposing your child to various social situations with appropriate supervision in which the child can learn about and practice new skills with others. Again, the balance between what a child needs in order to grow up, and what is reasonably safe for your child is one that each parent struggles with and finds on their own.

Latency Age (7 years to 11 years)

Children in this age group need their parents to promote:

- ∂ success
- ∂ mastery.

A child's sense of self-esteem springs from feeling good about his or her accomplishments and successes, and realizing that s/he can make things happen. When a child has seizures, s/he may be held back from activities and from experimenting with social situations for fear of lack of safety. If the message heard is "You can't do that," s/he may learn to not even try because s/he may fail. Growing up means taking calculated risks and achieving benefits from those risks. Your child, like any child, needs to be given that opportunity.

At this stage it is also important for children to be able to know about their seizures, what happens to them during a seizure and to be able to explain this to their friends. Some children who have seizures also have learning challenges or behaviour difficulties. These children need to have their seizures explained to them in a way they can understand and, in turn, explain to others.

Parents who are able to show their acceptance of the seizures send the message to their child that the seizures are not to be feared. They set up a model for that child to accept his or her seizures. In this way, parents' attitudes toward their child and the seizures will affect the child's attitudes.

Adolescence (12 years to 18 years)

Adolescents need promotion in areas of:

- ∂ independence from their family
- ∂ membership in a peer group
- ∂ sexual identity and sexual roles
- ∂ thinking about career options.

Adolescence is a challenging and exciting phase of life for both adolescents and their parents. Most adolescents argue with their parents, test limits, spend increasing amounts of time away from home with their peers and begin to think about life after high school. Parents worry about whether their adolescent is making good choices, getting into trouble and not being responsible enough. This is entirely normal.

The level of worry for parents of an adolescent with seizures can be exacerbated. Some adolescents may go overboard to prove that they are just like their peers and pay no attention to their safety. At the other extreme, others may become inhibited and never find a peer group to belong to because they feel so different.

Parents can help their adolescent through this phase with only a minimal amount of turmoil. They can encourage their young adult to become involved in safe peer group activities. Issues of independence and safety can be negotiated through ongoing dialogue rather than by polarized arguments: this allows the possibility that both parties will get what they want. By promoting from an early stage the idea that the adolescent develops a peer support group which becomes familiar with seizure management, issues of safety may become less problematic and worrisome.

Your adolescent will not remain an adolescent. S/he will move into adulthood and will need to learn to function in adult social and economic systems. As parents, you help to prepare your offspring for that, providing the equipment and skills necessary to survive in an adult world.