

### **How can you empower women to manage their epilepsy?**

For most aspects of our lives, we have control through choice and decision making. But when it comes to health, our choices can be limited by demographics, lack of expertise in specialist areas, health cultures and behaviours. This can be difficult to navigate, especially when diagnosed with a condition like epilepsy. If present since childhood, the parents and doctors have historically been central to decision making. This can leave young women with no 'toolkit' for self management. A further group of women with epilepsy may still be experiencing a grief cycle which can be self-perpetuating with 'fear of' or 'recurrence of', unpredictable seizures. Another cohort of woman may have experienced disempowerment and lack of control due to the way their epilepsy has dominated every aspect of their lives. The only control they may have is whether or not they take their medication.

Placing women and their families at the centre of care, puts emphasis on individual holistic management. Treating the woman and not the condition starts the empowerment process through understanding and interpreting their cues. By listening and showing empathy and compassion you intuitively acknowledge women's individual journeys. The impact of this journey should never be minimised but with sensitive navigation, an equal professional partnership can be formed. Care providers like me then become the toolkit and navigation aid to impart best available evidence, information and experience, to help women with their informed decision making.

To reduce fears, false beliefs and myths that surround epilepsy and its treatment, it is important for women to learn more about their health condition. For this purpose, the epilepsy support groups have a wealth of support devices to enable women to understand what epilepsy is, how their treatment works, options available and support mechanisms and opportunities. This includes aids to help them to remember to take their AEDs; forgotten tablets are one of the leading causes of seizure recurrence.

The practitioner can provide sign posts for self management, by forming plans that are moulded to meet the needs of a health condition that can be unpredictable. Putting the woman in charge of this plan takes away the risks associated with delay accessing professional advice. Encouraging the woman to share the knowledge of her epilepsy and management of seizures helps her wider support network in the event she were to experience a seizure. It also reduces fear and stigma and encourages an inclusive culture. This can be facilitated by using the comprehensive, user friendly Apps from the epilepsy support groups. They can be downloaded onto electronic devices and shared with families, friends and employers. It is important to acknowledge the risks associated with epilepsy. Putting women in charge of risk assessment, including when they are admitted to hospital, optimises their personal safety.

### **Conclusion**

Treating the woman, not the condition reduces health inequalities, encourages a transparent health culture and promotes people to become knowledgeable, inquisitive, self managing and central to all decision making about their care.

Reference: Morley K (2016) **How can you empower women to manage their epilepsy? Available from: [www.womenwithpilepsy.co.uk](http://www.womenwithpilepsy.co.uk)**