

22nd

International Association
for Adolescent Health
(IAAH) European
Regional Conference



Joint Event:

15th STATE OF THE
ART Panhellenic
Adolescent Health /
Medicine Congress

Youth Development Challenges in the post-COVID-19 era

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Transition Services: challenges and gained experience

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Healthcare transition is defined as the purposeful, planned process that addresses the medical, psychosocial, educational and vocational needs of adolescents and young adults with chronic medical and physical conditions as they move from child-centered to adult-oriented healthcare systems. Transfer is the event when responsibility for healthcare is passed from a child health provider to an adult health provider.

The aim of transitional care is to increase disease knowledge and coping, self-management skills and empowerment and to prepare the young person and their parents for transfer to adult healthcare.

The three phases include:

- 1) *a longer preparation phase in paediatric care,*
- 2a) *a proper parting saying goodbye to the paediatric team,*
- 2b) *a welcome at adult department, securing onboarding, and*
- 3) *continued transitional care at adult care including addressing developmental milestones in young adulthood including sexuality and fertility, career planning and self-management skills.*

Healthcare transition is only one of many transitions during youth including individuation, education, and moving away from home.

Furthermore, many healthcare competences are only reached in young adulthood.

Thus, transitional care should be seen in a life-course perspective and many other sectors have worked on improving transitions e.g., educational services. Healthcare services may learn from these experiences and integrate elements regarding gradual empowerment, preparation for transfer and onboarding at the new department. Already, position papers as well as generic and disease specific guidelines for transitional care exist.

The main elements of transition being:

- *Multidisciplinary team approach and competences in developmentally appropriate care*
- *Early start of the transition program*
- *Developmentally appropriate approach, treatment, and communication including a strength-based approach focusing on youth life and mental health e.g. by using the HEEADSSS acronym (Home, Education, Eating, Activities, Drugs, Sexuality, Suicide/depression, and Safety)*
- *Split visits i.e. consultations with the adolescent alone for part of the consultation*
- *Support to young people with special healthcare or psychosocial needs including after transfer*
- *Cooperation between paediatrics and adult care*
- *Introduction to adult care and the new team*
- *Continued transition after transfer*

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There are increasing evidence on the effects of transitional care including:

- *Disease specific measures (e.g. HbA1C, BMI, level of medication e.g. tacrolimus)*
- *Adherence (both to treatment and outpatient clinic appointments)*
- *Self-management skills including transfer-readiness*
- *Quality of life and participation e.g. in education and relationships*
- *Customer satisfaction*
- *Use of healthcare services (e.g. first appointment at adult department, fewer acute admissions)*
- *Proces including more conversations on transition, documenting the transition proces, increased communication between departments.*

In a multi-center study, the following elements were found to be associated with positive outcomes:

- *Appropriate parental involvement*
- *Promotion of health self-efficacy encouraging young people to gradually take responsibility for their health, informing them about their condition and securing skills training.*
- *Meeting the adult team before transfer e.g. by joint clinics, visits by the adult team or introduction to the adult team by the paediatric team.*

However, we still need high-quality studies including randomized controlled studies to secure effective care and support universal implementation of structured transitional care. New trends in transitional care include transitional care for parents , e-health solutions ,

peer support including mentorships, and active youth participation in the planning of transition programs. However, the main challenges in most settings are insufficient staff competences as well as resources for implementation of transitional care in a busy clinical setting. Implementation of a hospital-based transitional program at a tertiary paediatric department including how young people are involved will be presented.

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