

Title of Paper: Transition from child-centered to adult-centered care in patients with renal transplant or diabetes: Feelings towards transfer and evolution of self-determination and adherence across the transition process.

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Abstract: Please type in Times New Roman 11 point font

Purpose: Transition from child-centered care (CCC) to adult-centered care (ACC) can be a challenging process because of the differences that exist between these two healthcare environments. Researchers have observed a decline in young patients' attendance to medical follow-ups and in self-reported adherence to treatment following transfer from CCC to ACC. The self-determination theory (SDT) has established that patients who perceive their health care environment as autonomy supportive will feel motivated and competent in managing their condition and show increased adherence to their treatment. Guided by the SDT, we followed patients with a renal transplant or Type 1 diabetes across their transition experience from CCC to ACC.

Methods: Patients (renal transplant M age= 19.48, SD = 1.02; diabetes M age= 18.03, SD = .26) were recruited from three university-affiliated hospitals in Canada and were followed six months before their transfer to CCC (Time 1: N = 85), and six months and one year following their transfer (Time 2: N = 49 and Time 3: N = 36, respectively). Patients were asked to complete a questionnaire assessing their feelings, concerns, and readiness regarding transition. Furthermore, we assessed patients' quality of life, self-reported adherence to treatment, and self-determination variables across time.

Results: Results revealed patients generally felt ready to transfer to ACC but reported feelings of uncertainty and concerns about leaving behind long known healthcare providers. Following transfer, there was a decline in patients' perception of autonomy support (Time 1: M = 5.72, SD = 1.01; Time 2: M = 5.23, SD = 1.12; t (46)= 2.69, p = .03) but a significant increase in their sense of choice (Time 1: M = 3.53, SD = 0.88 and Time 3: M = 4.02, SD = 0.74; t (35) = 1.89, p = .01) and their adaptation to ACC (Time 2: M = 7.29, SD = 1.76; Time 3: M = 8.50, SD = 1.72; t (23)= 5.02, p = <.01). Higher levels of autonomy support were associated with feelings of satisfaction, motivation, competence, and self-reported adherence to treatment.

Conclusion: The feelings and concerns reported by patients both before and following transfer are consistent with results from previous studies. Our study corroborates that patients consider their relationship with their healthcare provider significant and important to them. The results also illustrate the positive impact a strong and trustful relationship can have on patients' satisfaction and adherence to treatment.

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