Patients' perspective on factors that facilitate transition from child-centered to adult-centered health care: a theory integrated metasummary of quantitative and qualitative studies

Lugasi T, Achille M, Stevenson M

CRD summary
This review described patients' experiences of transitioning from child- to adult-centred care, and presented five ways that seemed to ease the process (present it as normal, assess expectations, prepare skills early, plan steps, and provide resources). The poor quality of the review process and opaque reporting, mean that these conclusions cannot be considered to be reliable.

Authors' objectives
To describe patient perspectives on the transition from child- to adult-centred care, and to identify the factors that facilitate this transition.

Searching
MEDLINE, PsycINFO and CINAHL were searched, for papers published in English or French, in peer-reviewed journals, within the 15 years up to April 2009. Some search terms were reported, and article references were checked for eligible papers.

Study selection
Qualitative and quantitative studies that focused on adolescents or young adults, with chronic physical illness, and that explored their experience of the transition from child- to adult-centred care, were eligible for inclusion.

In the included studies, the participants were living with a range of chronic conditions, such as cystic fibrosis, heart disease, organ transplant, type 1 diabetes, sickle cell anaemia, juvenile idiopathic arthritis, or HIV. Their ages (where reported) ranged from eight to 43 years. Most studies were retrospective, or collected data before and after transition. Qualitative studies used interviews, open-ended questionnaires, or focus groups; while quantitative studies used chart and medical record reviews, or postal or telephone surveys.

It was unclear how many reviewers selected the studies.

Assessment of study quality
The studies do not appear to have been assessed for methodological quality.

Data extraction
One reviewer extracted the data from each study. Basic study details were reported in tables.

Methods of synthesis
An approach described as meta-summary was used to synthesise the qualitative and quantitative data. Two reviewers discussed the extracted findings from each study and grouped them into similar topics. The same two reviewers then developed a theme, which preserved the detail and complexity of each group, while removing redundant information. The synthesis was verified by checking that each original study was included in the overall results, and by all three reviewers assessing the groups and themes to reach a consensus.

Results of the review
In total, 46 studies were included, with 3,324 participants (ranging from six to 360 people per study). There were 24 studies that reported quantitative data, 19 that reported qualitative data, and three that reported both. None of the studies was randomised.

Four broad categories were developed: patients' feelings and concerns, patients' recommendations about transition, outcomes after transfer, and mode of transfer. Patients' feelings and concerns were that those who felt attached to child-
centred care were more reluctant to transition to adult-centred care. Patients' recommendations about transition were
that there was a need to balance independence with continued care and education, to prepare for transition. Outcomes
after transfer were that both positive and negative comments about satisfaction with care in the adult-centred model
were reported, and adherence to treatment often declined after transition. Mode of transfer was that early preparation
and continuity, within the same hospital, seemed to be associated with more satisfaction and treatment adherence.

Five conditions likely to influence transition were presented in a table, alongside related clinical recommendations and
potential research questions. The conditions that seemed to ease transition were: presenting transition as a normal event;
clarifying and discussing the patient's expectations about the process; preparing early to ensure that the patient has the
necessary knowledge and skills for autonomous behaviour at the time of transition and after; planning with the patient
of the specific steps involved in transition; and providing the patient with an optimal transition environment and
resources.

**Authors' conclusions**
The authors concluded that five key conditions seemed to ease the transition from child- to adult-centred care.

**CRD commentary**
The review addressed a broad question and a limited selection of databases was searched, as acknowledged by the
authors. Unpublished and grey literature were not sought nor eligible for inclusion, which may have introduced
publication bias. The review processes were only partly described, making it difficult to rule out reviewer error and
bias. The included studies were not assessed for methodological quality, and the limited study details that were
presented made it difficult to gauge their reliability.

The qualitative and quantitative studies were synthesised using meta-summary, with the data described in tables and the
text. It was unclear which studies contributed to each of the four themes and the five influencing conditions, and how
the qualitative and quantitative data were integrated.

The lack of detailed study characteristics and assessment of quality, in addition to the opaque synthesis and absence of
supporting data, mean that the authors' conclusions cannot be considered to be reliable.

**Implications of the review for practice and research**
The authors outlined five areas, for which they made extensive recommendations for clinical practice and research,
please see table 2 in the paper for details.

**Funding**
Support received from Fonds de recherche du Quebec, Canada.

**Bibliographic details**
Lugasi T, Achille M, Stevenson M. Patients' perspective on factors that facilitate transition from child-centered to adult-
centered health care: a theory integrated metasummary of quantitative and qualitative studies. Journal of Adolescent
Health 2011; 48(5): 429-440

**PubMedID**
21501800

**DOI**
10.1016/j.jadohealth.2010.10.016

**Original Paper URL**
http://www.jahonline.org/article/S1054-139X(10)00524-0/abstract

**Indexing Status**
Subject indexing assigned by NLM
Adolescent; Adolescent Development; Continuity of Patient Care; Humans; Patient Satisfaction; Patients /psychology

AccessionNumber
12011003966

Date bibliographic record published
14/09/2011

Date abstract record published
01/10/2013

Record Status
This is a critical abstract of a systematic review that meets the criteria for inclusion on DARE. Each critical abstract contains a brief summary of the review methods, results and conclusions followed by a detailed critical assessment on the reliability of the review and the conclusions drawn.