

Concordance Between Youth and Parents' Scores and Responses on the *Am I ON TRAC for Adult Care* Questionnaire

¹Melissa Moynihan, MSN, RN; ^{1,2}Elizabeth Saewyc, PhD, RN, FSAHM, FCAHS; ^{2,3}Sandy Whitehouse, MD; ^{1,3}Mary Paone, MN, RN; & ¹Gladys McPherson, PhD, RN



¹School of Nursing, University of British Columbia (UBC), Vancouver, BC, Canada; ²Division of Adolescent Health and Medicine, Department of Pediatrics, UBC; ³BC Children's Hospital, Vancouver, BC, Canada

1 Purpose

The *Am I ON TRAC for Adult Care* questionnaire, a measure of readiness for transition from paediatric to adult care for youth with special health care needs, has both youth and parent versions. The purpose of this study was to examine the concordance between youth and parent *ON TRAC* questionnaire scores and responses.

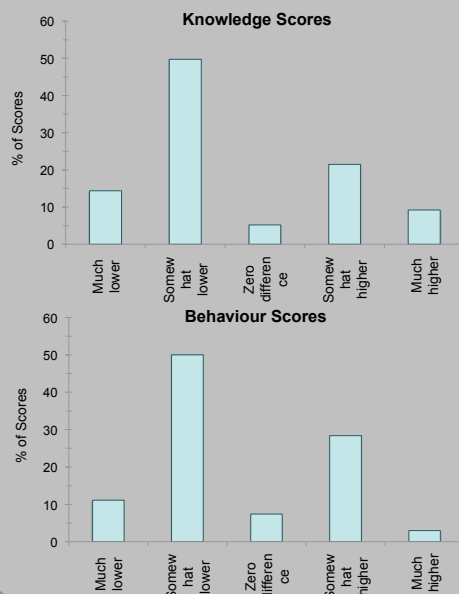
2 Methods

- 200 adolescents ages 12-19 and their parents/guardian (n=191) were recruited from waiting rooms of 4 outpatient at BC Children's Hospital, Vancouver
- During routine clinic appointments youth and their parents/guardian completed a study package which included demographic information and the *Am I ON TRAC for Adult Care* questionnaire
- The *ON TRAC* questionnaires consist of a knowledge scale and behaviour index that ask youth and parents respectively to report on the youth's health and self-care related knowledge and behaviour
- Each youth-parent dyad was treated as a matched pair and dependent *t*-Tests were performed to examine the concordance between youth and parent *ON TRAC* scores and item responses

3 Participant Demographic Characteristics

Youth gender (n=200)	
Male	57.5%
Female	42.5%
Parent/guardian gender (n=191)	
Male	23%
Female	77%
Parent/guardian relationship with youth	
Son	54.5%
Daughter	41.4%
Other	3.7%
Clinic	
Diabetes	36%
Cardiology	27%
Gastroenterology	27%
Neurology	10%
Youth age reported by parent/guardian [Mean (SD), Range]	15.2 (1.9), 12-19

4 Parents' ON TRAC Scores Compared with Youths'



5 Results

- Youth scores were significantly higher than parent scores, i.e., youth reported they possessed more health and self-care knowledge ($t(152)=3.32, p=.001, r=.26$) and consistently engaged in health care behaviours more frequently ($t(161)=4.66, p<.001, r=.34$) than their parents reported
- 8 of the 22 items had significantly different mean scores
- 7 of the 8 significantly different items had higher youth mean scores with youth reporting greater knowledge about their medications and consistently taking medications on their own, getting to appointments as well as contacting clinics when symptoms worsen, asking health care providers health related questions more frequently, and thinking beyond high school
- There was a wide range in youth-parent difference scores
- Extreme differences between youth and parent scores (>2 SD) were identified for 5.2%, 5.5%, and 3.1% of the knowledge, behaviour and cut-off scores respectively

6 Items with Significantly Different Youth and Parent Mean Scores

ON TRAC Item	Youth Mean (SE)	Parent Mean (SE)	t	df	p-value (2-tailed)
I know the names of my medications	3.45 (.05)	3.25 (.05)	3.76	174	<.001
I know what each of my medications are for	3.42 (.05)	3.28 (.04)	2.67	176	.008
I can get to my clinic appointments on my own	2.26 (.07)	2.04 (.07)	3.23	187	.001
I talk to my friend(s) about my problems or worries	3.15 (.09)	3.44 (.09)	-2.46	187	.015
I take my medications on my own	4.53 (.06)	4.14 (.08)	5.06	170	<.001
When my symptoms get worse I contact the clinic for help	2.94 (.10)	1.83 (.10)	9.56	182	<.001
I think about what I would like to do after high school	4.08 (.07)	3.70 (.08)	4.79	4.79	<.001
I ask health care professionals questions about my health at my visits	.37 (.04)	.29 (.03)	2.08	188	.039

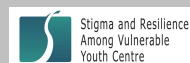
7 Conclusions

Youth with chronic conditions and their parents appear to have different assessments of adolescents' health-related knowledge, self-management skills and consistency of self-care behaviours.

Using both youth and parent versions of the *ON TRAC* questionnaire could help clinicians initiate important conversations between adolescents and their parents about the youth's level of health-related knowledge, self-management skills and behaviours, and where large discrepancies exist between them, clarify potential differences in perspective. Such conversations could be pertinent to preparing adolescents and their families for the transition to adult medical care.



a place of mind
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Funded by the Canadian Institutes of Health Research, #CPP86374.

Contact: Elizabeth.Saewyc@ubc.ca