

# SOCIAL AND STRUCTURAL DETERMINANTS OF HEALTH IMPACTING TRANSITION TO ADULT CARE

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## BACKGROUND & AIM

- Youth with chronic health conditions often experience significant challenges during the transition from pediatric to adult care.
- Those with both chronic health conditions and marginalized identities, including racial, ethnic, and gender minorities, immigrants and refugees, and those experiencing poverty, are likely to experience further disparities as they navigate structural barriers during their transition.
- In collaboration with three young adults with lived experience, this scoping review aims to identify the social and structural determinants of health (SSDOH) impacting transition for youth with chronic health conditions, particularly youth who are structurally marginalized, including Black, Indigenous, and 2SLGBTQ+ youth.

## METHODS

### Search Strategy

- Electronic databases MEDLINE, Embase, CINAHL, and PsycINFO were searched from earliest available date to May 2022.
- Search strategy combined 1) transition from paediatric to adult care and 2) health equity.

### Study Eligibility

- Titles/abstracts were screened by two independent reviewers, followed by full text review.
- Disagreements were resolved by a third reviewer.
- Primary studies investigating the impact of SSDOH on transition outcomes were included.

Table 1. Inclusion and exclusion criteria used to determine study eligibility.

| Inclusion Criteria   | Exclusion Criteria   |
|--|--|
| Primary research studying the association between SSDOH and transition outcome.                            | Commentaries, conference abstracts.  |
| Study population including youth/young adults of any age, parents/caregivers, and/or healthcare providers. | Primary studies reporting demographic characteristics without further analyses related to transition outcomes. |
| Studies conducted in any country.  | Not reported in English.   |

### Data Abstraction and Synthesis

- Abstraction categories included study characteristics (e.g., year, country), population characteristics (e.g., percentage of participants self-identifying as Black, Indigenous, or 2SLGBTQ+, chronic health condition, age), and outcome data (transition outcome, SSDOH)
- Transition outcomes were organized into themes outlined by Bailey et al. (2022).
- Association between SSDOH and transition outcomes were categorized into:
  - (a) Significant association (i.e., all studies showed significant association between SSDOH and outcome;  $p < 0.05$ )
  - (b) No significant association (i.e., all studies showed association  $p > 0.05$ )
  - (c) Unclear association (i.e., some studies were significant and some non-significant)

## RESULTS

- In the **101 included articles**, 12 social determinants and 5 demographic characteristics were identified.
- **No studies** examined the structural determinants of health or the impact of discrimination on transition.
- Gender ( $n=60$  studies) was significantly associated with **communication, quality of life, satisfaction, transfer completion, and transfer timing**.
- Race and ethnicity ( $n=41$ ) were significantly associated with **appointment keeping and transfer completion**.

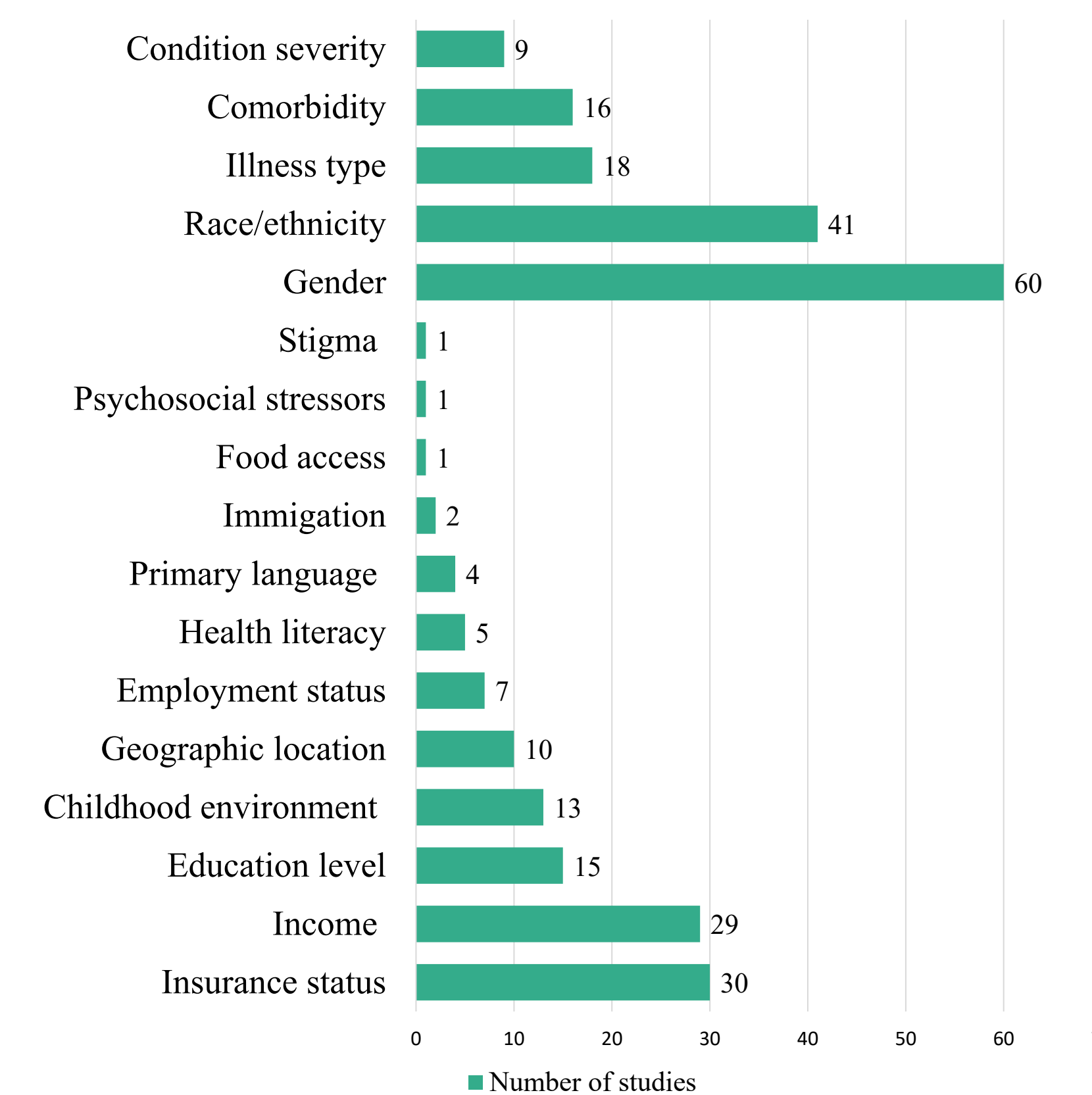


Figure 2. SSDOH identified by scoping review.

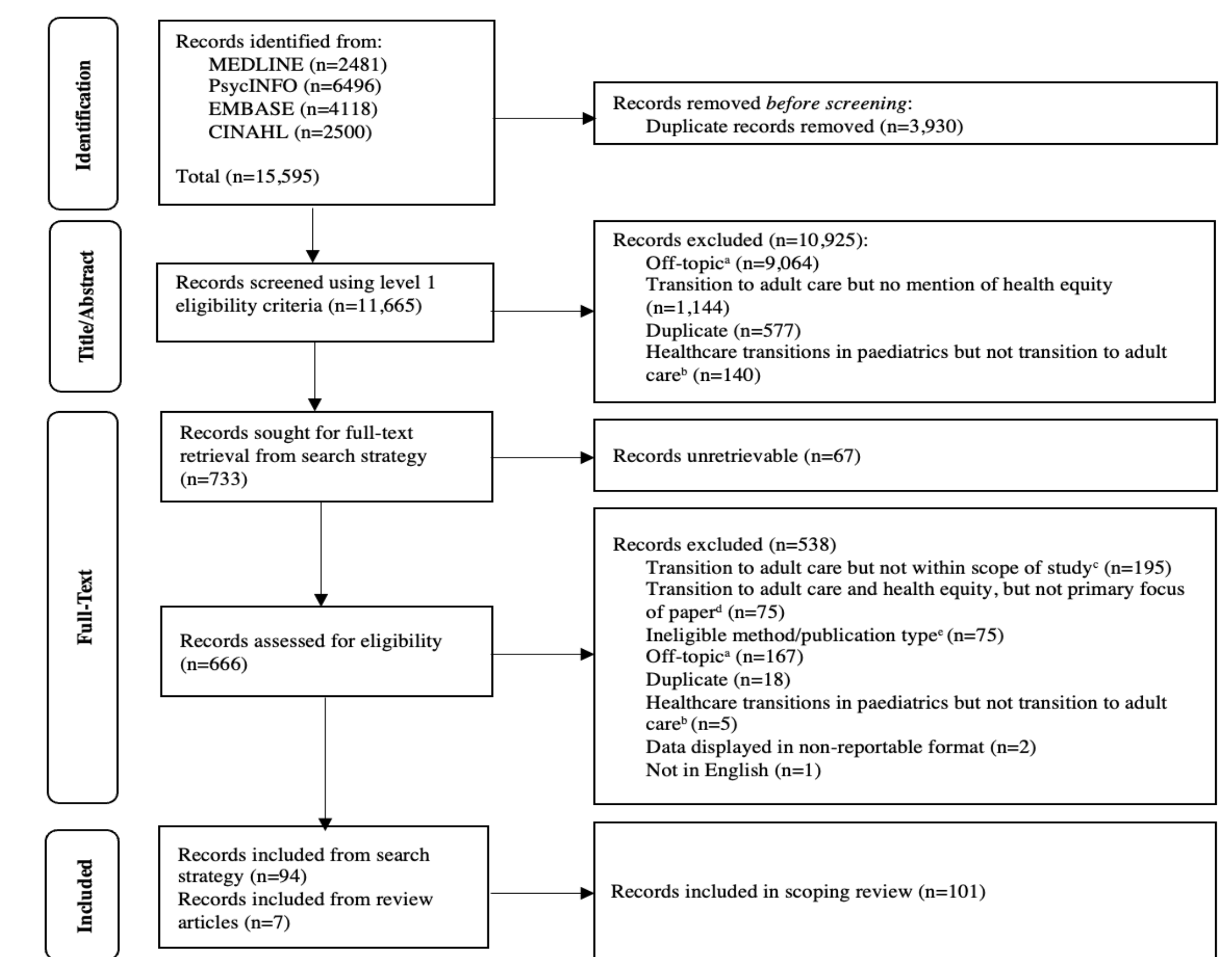


Figure 1. PRISMA flow diagram.

Table 2. Associations between transition outcome themes and SSDOH.

| SSDOH            | Gender   | Race/Ethnicity                                   |
|------------------|--|--|
| Transition Theme | <b>Communication</b><br>( $n=1$ showed SA)       | <b>Appointment Keeping</b><br>( $n=1$ showed SA) |
|                  | <b>Quality of life</b><br>( $n=5$ showed SA)     | <b>Transfer Completion</b><br>( $n=3$ showed SA) |
|                  | <b>Satisfaction</b><br>( $n=1$ showed SA)        |  |
|                  | <b>Transfer Completion</b><br>( $n=2$ showed SA) |  |
|                  | <b>Transfer Timing</b><br>( $n=2$ showed SA)     |  |

Note. SA = significant association (defined as  $p < 0.05$ ).

## CONCLUSIONS

- Evidence suggests gender and race/ethnicity are associated with inequities in transition.
- Understanding these associations are needed to inform effective transition policies and practices and mitigate health inequities for youth who are structurally marginalized.
- Future research should use an intersectional health equity lens to identify practices and policies that promote equity in transition.

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