

Disengagement and Engagement Affects on Transition Readiness in College Students with Chronic Illnesses

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Introduction

- Adolescents and young adults (AYA) with chronic illnesses transitioning from pediatric to adult care is an understudied subject. There is very little research on what factors play a role in helping a patient become ready and have a smooth transition.
- While there are "more than 500,000 youth with chronic conditions" that must transition to adult care when entering college, little is known about ideal transitions. (Herts & Maslow 2014).
- Research has shown that in populations that have chronic heart conditions (Siu, Webb, Reid, Irvine, Mccrindle, et al., 2004) and diabetes (Peters & Laffel, 2011), interventions of some sort have been helpful especially when starting at a younger age.
- One study alluded to the fact that without proper transition, patients may face more health problems down the road (Fegran, Hall, Uhrenfeldt, Aagaard, Ludvigsen, 2014).
- There is no known research on the effects of coping strategies on transition readiness.

Purpose

• To examine the effects of two different coping strategies, namely disengagement and engagement, on transition readiness in college students with chronic illnesses.

Method

Procedure

• Participants were 120 college students at Oklahoma State University who responded to a series of online self-report questionnaires through the SONA systems. Participants received credit for classes as compensation.

Measures

- The *Transition Readiness Assessment Questionnaire* (TRAQ; Sawicki et al., 2009) is a 33-item self-report measure of developmental stage of readiness to transition. TRAQ can be split in two domains: "Self-Advocacy" and "Self-Management". Items are measured on a Likert scale. Higher scores reflect either better self-advocacy or better self-management, depending on question presented.
- The *Coping Strategies Inventory Short Form 32* (CSI-S; Tobin, 1995) is a 32 item self-report measure aimed to identify situation in which people struggle with in their daily lives and how people handle these struggles. The tertiary subscale (which consists of primary and secondary subscales) was used in order to gain data on disengagement and engagement. Higher scores indicated more engagement or more disengagement depending on questions answered.

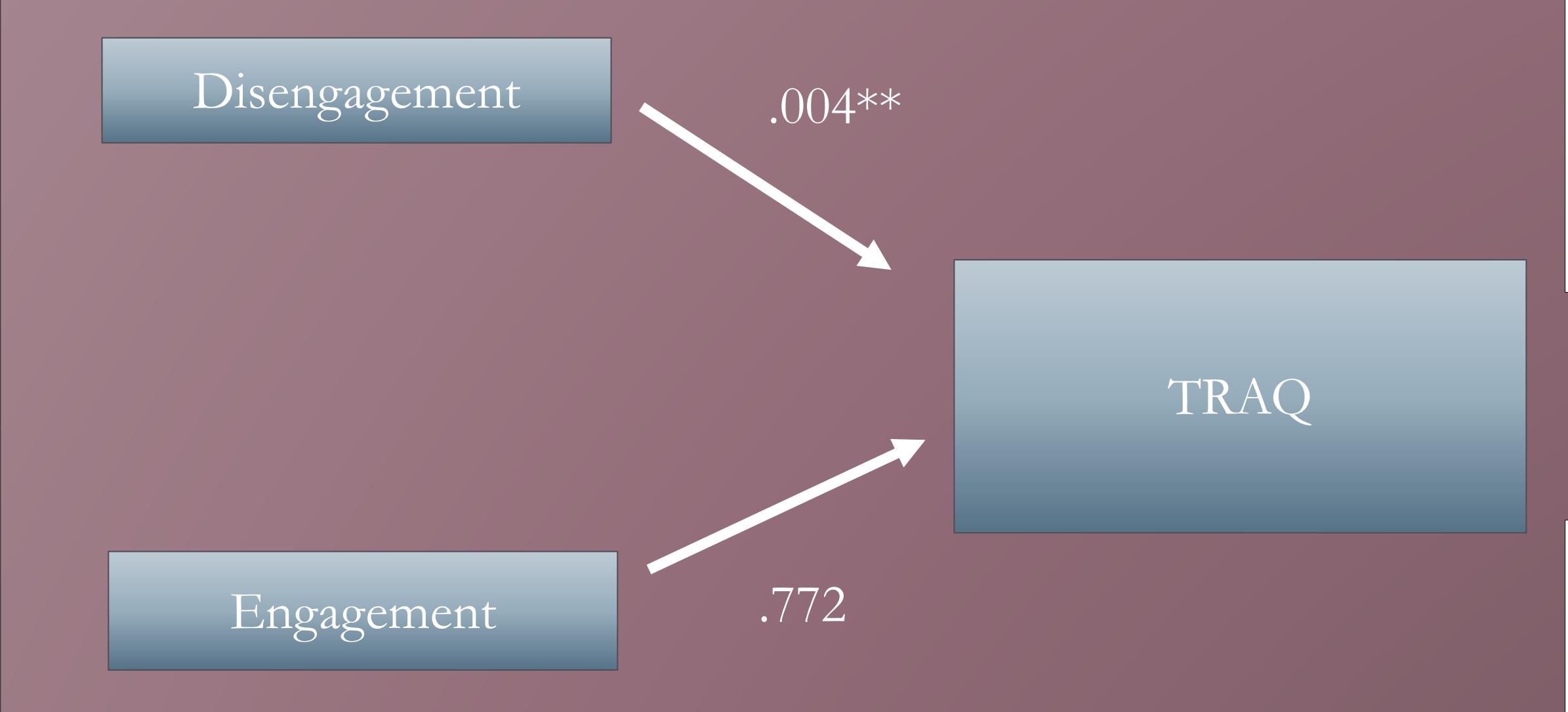


	Table 1 demographics	
ı		$N(^{0}/_{0})$
	Ethnicity	
7	Caucasian	94 (79.0%)
	African American	4 (3.4%)
	Hispanic	4 (3.4%)
ı	Native American	7 (5.9%)
	Asian	3(2.5%)
	Multi-Racial	7 (5.9%)
	Age – Mean (SD)	21.16 (5.47)
	Sex	
ı	Female	87 (73.1%)
	Grade Level	
	Freshman	50 (42.0%)
	Sophomore	30 (25.2%)
	Junior	18 (15.1%)
	Senior	21 (17.6%)
	Chronic Illness	
	Asthma and Allergies	67 (56.3%)
	GI Disorders	23 (19.3%)
	Type 1 Diabetes	8 (6.7%)

Results

- Linear regression was used to analyze the effects of disengagement and engagement on transition readiness.
- There was a significant relationship between disengagement and TRAQ (F(1,118) = 8.66, p < 01, $R^2 = .068$), such that higher disengagement resulted in lower transition readiness.
- There was not a significant relationship between engagement and TRAQ. (F(1,118) = .085, p > .05, $R^2 = .001$)

Conclusion

- A significant negative relationship between disengagement and TRAQ, suggests that patients who disengage by using coping strategies such as problem avoidance, will experience a negative effect in their readiness to transition.
- It is interesting that there was no relationship between engagement and TRAQ. More research should be done on this topic in order to understand what positive coping strategies would result in a positive transition readiness.
- Motivational interviewing is sometimes used as a technique in a medical setting to increase engagement by actively asking patients questions and having them learn self-management skills as well as change any negative behaviors. (Coleman & Newton, 2005).
- Most studies on motivational interviewing have to do with behaviors that can be prevented, such as obesity and smoking habits, with little focus on a population who is already diagnosed with a chronic illness.
- More research is needed in order to develop a proper intervention, or possible motivational interviewing technique, to help those with chronic illnesses transition from pediatric to adult care.