

CO-DESIGNING AN INTERVENTION FRAMEWORK TO SUPPORT YOUNG PEOPLE WITH TYPE 1 DIABETES IN TRANSITION TO SECONDARY SCHOOL IN THE UK

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Background

In the UK, most young people move from primary to secondary school at 11 years old. This major life event corresponds with the onset of puberty, requiring negotiation of concurrent situational, physiological and psychosocial transitions. In this context, young people with Type 1 diabetes (T1DM) also need to develop greater autonomy managing a complex health condition. Therefore, this school transition may have important implications for their glycaemic levels, school career, and ongoing biopsychosocial wellbeing. However, scarce literature exists addressing the school transition for this population.

Aim

To model strategies for promoting a successful school transition for young people with T1DM through an experience-based, collaborative approach with key stakeholders.

Method

An adapted model of experience-based co-design (EBCD), involving young people with T1DM (11-13yrs, n=11), parents (n=16), school staff (n=10) and HCPs (n=10). Analysis of data from focus groups and interviews with participants was guided by the Framework approach. An animated film produced by participating young people acted as a springboard for the co-design process.

Findings

Representatives of all participant groups co-designed a framework for a complex, multi-modal, multi-contextual intervention. This addresses the following key areas for intervention identified in the focus groups and interviews with young people: the T1DM knowledge and understanding of others; fitting T1DM into secondary school life; access to support with diabetes in secondary school; and planning and preparation for the school transition.

Conclusion

The co-designed intervention framework and findings from data analysis were concordant with self-determination theory. Timely preparation involving strategies to promote young people's experienced competence, relatedness and autonomy in secondary school were key to successful transition, increasing the likelihood of ongoing self-motivated (diabetes-related) behaviours in school and biopsychosocial wellbeing.