



Transition and health in young people with intellectual disabilities:
Secondary analysis of existing data

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Transition to adulthood for young people with intellectual disabilities

Research Questions

disabilities during transition?

1. How is the health of young people with intellectual disabilities compared to young people without intellectual

2. What is the impact of transition on health and wellbeing in young people with intellectual disabilities?

with intellectual disabilities

- Health in people with intellectual disabilities is poor relative to the general population
- Decrease in health surveillance and limited service input when young people leave school and enter adult services
- Discontinuous and chaotic experiences of transition
- Poor transition outcomes for people with intellectual disabilities compared to people without intellectual disabilities eg employment, community involvement



Risk of isolation, depression and anxiety Health problems may go unidentified

eg reliance on proxy reports

Systematic review

- · 17 articles included
- · Suggests presence of health and wellbeing issues during transition, including social conflict, obesity and sexual health
- · Considerable gaps in the literature
- Methodological limitations



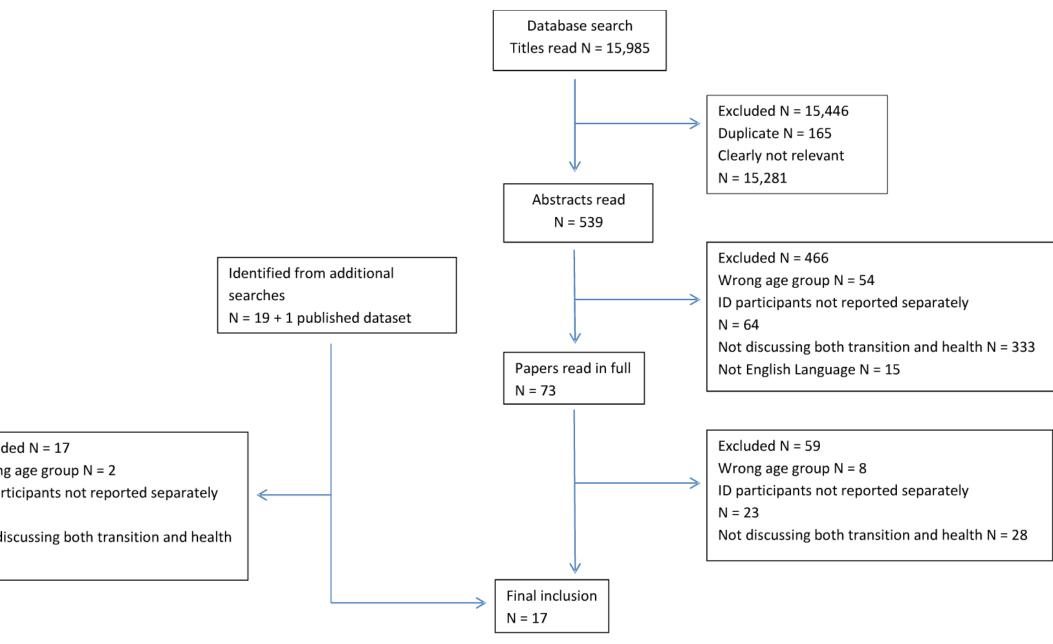
Current evidence on transition and health for people with intellectual disabilities

- Health in people with intellectual disabilities is poor relative to the general population
 and health inequalities start early
- Decrease in health surveillance and limited service input when young people leave school and enter adult services
- Discontinuous and chaotic experiences of transition
- Poor transition outcomes for people with intellectual disabilities compared to people without intellectual disabilities eg employment, community involvement



Risk of isolation, depression and anxiety Health problems may go unidentified

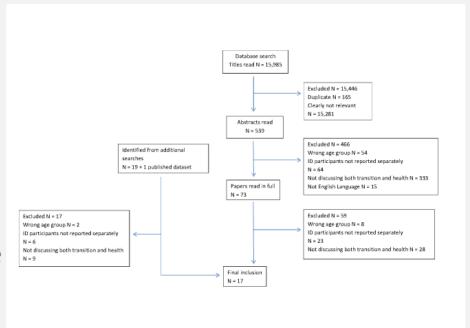






Systematic review

- 17 articles included
- Suggests presence of health and wellbeing issues during transition, including social conflict, obesity and sexual health
- Considerable gaps in the literature
- Methodological limitations eg reliance on proxy reports





Research Questions

- 1. How is the health of young people with intellectual disabilities compared to young people without intellectual disabilities during transition?
- 2. What is the impact of transition on health and wellbeing in young people with intellectual disabilities?



sults

Methods

Secondary analysis of Scotland's Census (2011)

Census questionnaire administered to population of Scotland Individuals with (n=5,556) and without intellectual disabilities (n=810,333) aged 13 - 24 years

Secondary analysis of National Longitudinal Transition Study-2 (NLTS2)

Longitudinal study of SEN students in the USA Individuals with intellectual disabilities aged 13 - 25 years (n at Wave 1 = 830)



Do you have any of the following conditions which have lasted, or are expected to last, at least 12 months?

Deafness or partial hearing loss

Blindness or partial sight loss

Learning disability (for example, Down's syndrome)

Learning difficulty (for example, Dyslexia)

Developmental disorder (for example, Autism Spectrum Disorder or Asberger's syndrome)

Physical disability

Mental health condition

Long-term illness, disease or condition

Other condition

How is your health in general?

Very good

Good

Fair

Bad

Very bad

Are your day-to-day activities limited because of a health

problem or disability which has lasted, or is expected to

last, at least 12 months?

Yes, limited a little

Yes, limited a lot

No



sults

Methods

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Results

How is the health of young people with intellectual disabilities during transition compared to those without intellectual disabilities?











What is the impact of transition on health and wellbeing in young people with intellectual disabilities?









Strengths

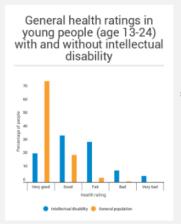
- Large scale data from two different countries
- Census provides data from the whole population of Scotland and NLTS2 sampled students from whole of USA

Limitations

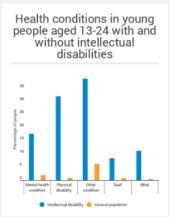
- X Subjective rather than objective measures of health
- Census data doesn't differentiate between self-reports and proxy reports
- Can't establish severity of intellectual disability in either dataset
- Health in the population with intellectual disabilities is poor compared to the general population and may remain poor throughout transition



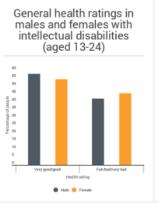
How is the health of young people with intellectual disabilities during transition compared to those without intellectual disabilities?



21.5% of young people with intellectual disabilities aged 13-24 rate their health as 'very good' compared to 75.6% of those without intellectual disabilities (Scotland's Census, 2011)



Young people with intellectual disabilities were significantly more likely to have a mental health condition, physical disability, blindness, deafness, or other long-term disease, illness or condition than young people without intellectual disabilities (Scotland's Census, 2011)



Females reported significantly worse health than males

(Scotland's Census, 2011)

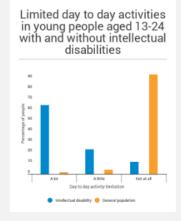
Females were significantly more likely than males to have a physical disability or long-term illness, and to be blind or deaf (Scotland's Census, 2011)

Health conditions in males

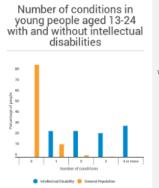
and females with

intellectual disabilities

(aged 13-24)



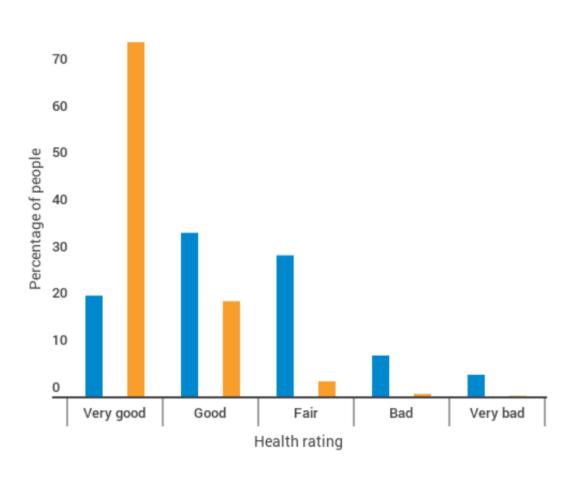
Young people with intellectual disabilities experienced significantly more limitations to their day to day activities than young people without intellectual disabilities (Scotland's Census, 2011)



Young people with intellectual disabilities had significantly more conditions than young people without intellectual disabilities (Scotland's Census, 2011)



General health ratings in young people (age 13-24) with and without intellectual disability



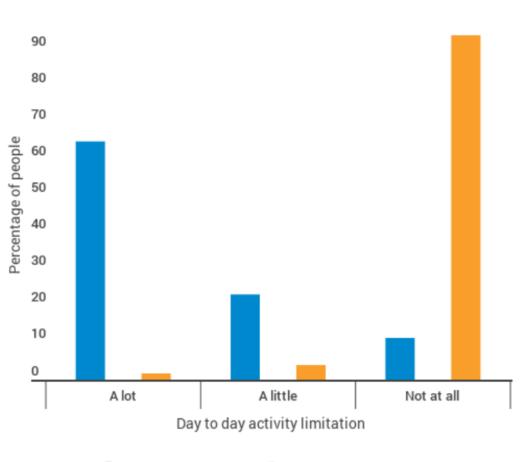
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Intellectual disability



Limited day to day activities in young people aged 13-24 with and without intellectual disabilities



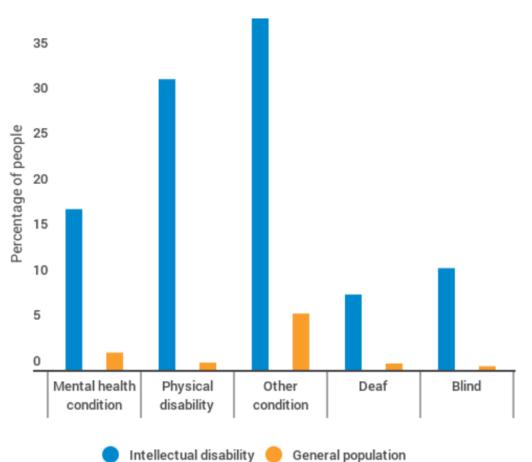
General population

Intellectual disability

Young people with intellectual disabilities experienced significantly more limitations to their day to day activities than young people without intellectual disabilities (Scotland's Census, 2011)



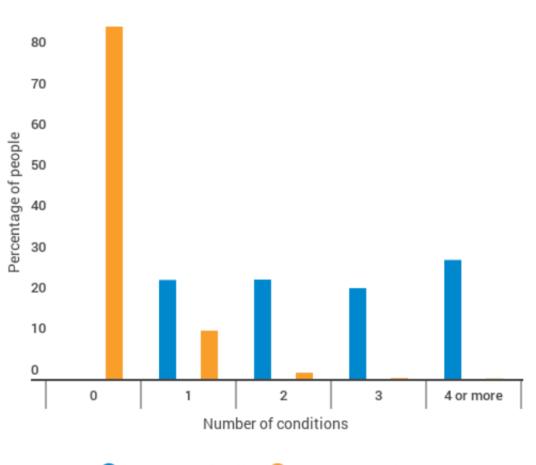
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Number of conditions in young people aged 13-24 with and without intellectual disabilities

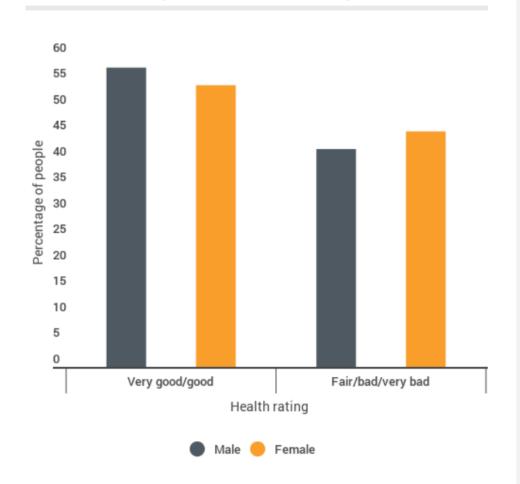


Young people with intellectual disabilities has significantly more conditions than young people without intellectual disabilities (Scotland's Census, 2011)

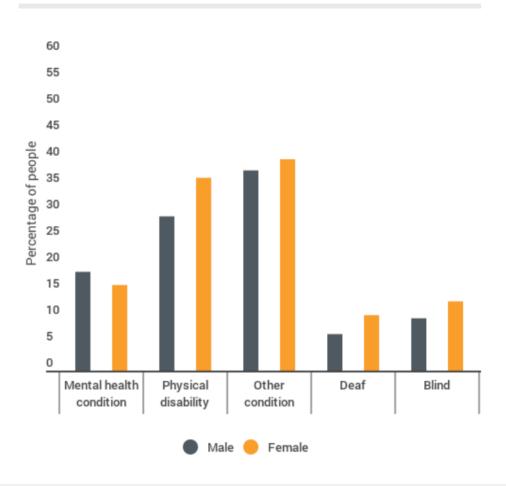


Intellectual Disability
 General Population

General health ratings in males and females with intellectual disabilities (aged 13-24)



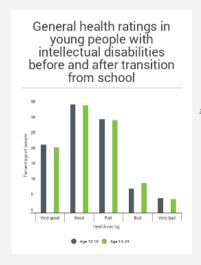
Health conditions in males and females with intellectual disabilities (aged 13-24)



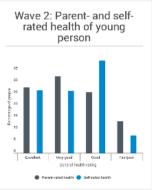
Females reported significantly worse health than males (Scotland's Census, 2011)

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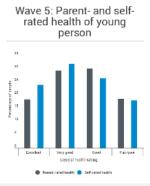
What is the impact of transition on health and wellbeing in young people with intellectual disabilities?



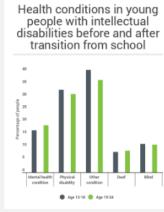
22% of young people with intellectual disabilities aged 13-18 rate their health as 'very good' compared with 21.1% of young people with intellectual disabilities aged 19-24 (Scotland's Census, 2011)



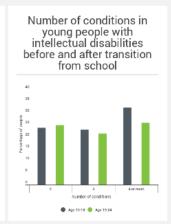
27.9% of parents rate their child's health as 'excellent' at Wave 2 compared to 26.7% of young people (NLTS2)



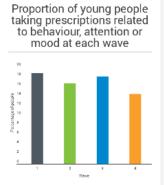
18.4% of parents rated their child's health as 'excellent' at Wave 5 compared to 23.9% of young people (NLTS2)



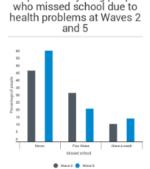
There was no significant difference in the presence of health conditions between young people aged 13-18 and aged 19-24 (Scotland's Census, 2011)



Young people with intellectual disabilities aged 13-18 had significantly more conditions than young people aged 19-24 (Scotland's Census, 2011)



At Wave 1, 18.7% of young people were taking a prescription related to their behaviour, attention or mood, compared to 14.4% at Wave 4 (NLTS2)

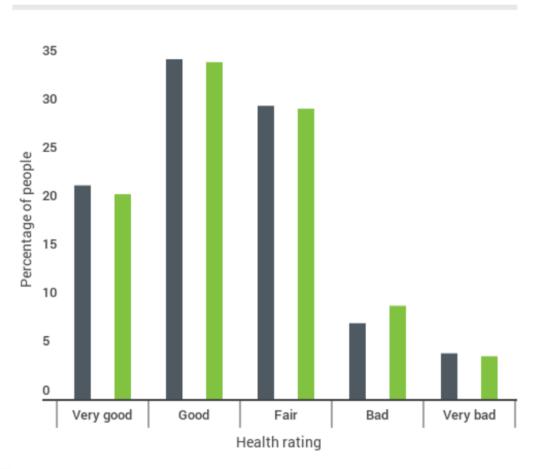


Proportion of young people

At Wave 2, 33.1% of young people reported missing school due to health problems a few times a week compared to 22.4% at Wave 5 (NLTS2)



General health ratings in young people with intellectual disabilities before and after transition from school

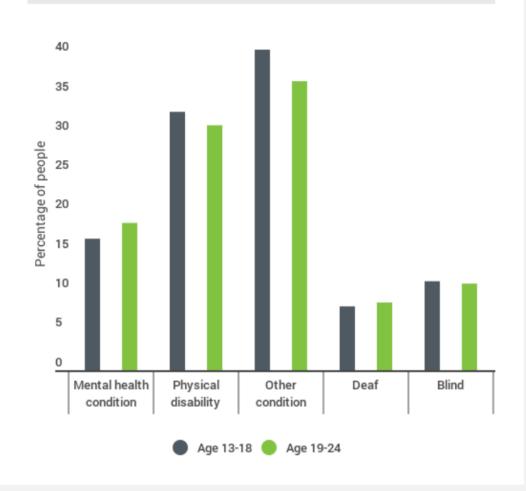


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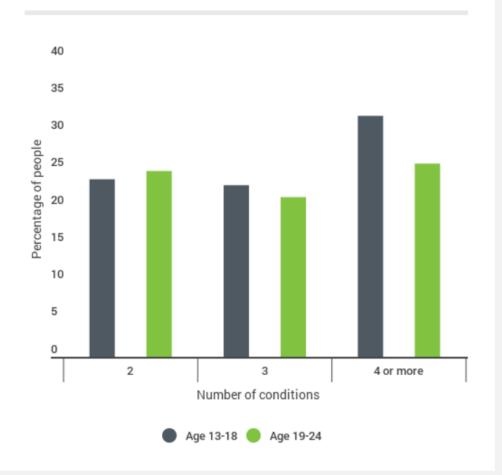
Age 13-18 Age 19-24

Health conditions in young people with intellectual disabilities before and after transition from school



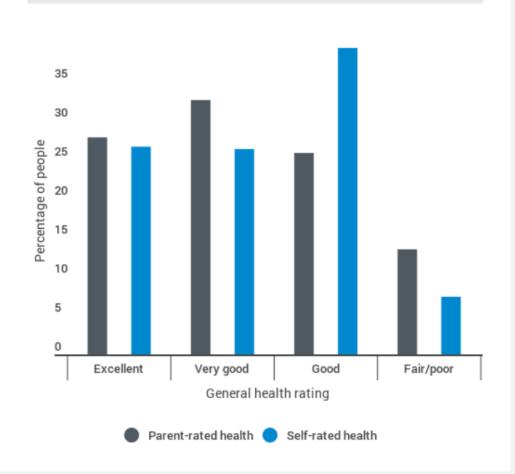
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Number of conditions in young people with intellectual disabilities before and after transition from school



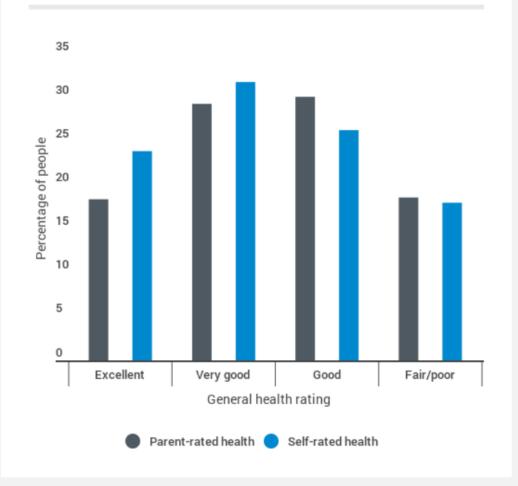
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Wave 2: Parent- and selfrated health of young person



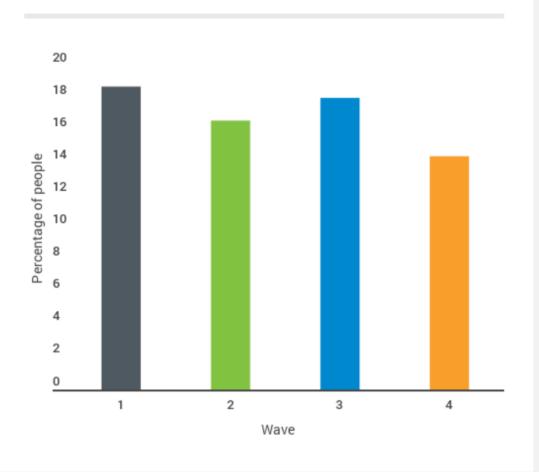
27.9% of parents rate their child's health as 'excellent' at Wave 2 compared to 26.7% of young people (NLTS2)

Wave 5: Parent- and selfrated health of young person

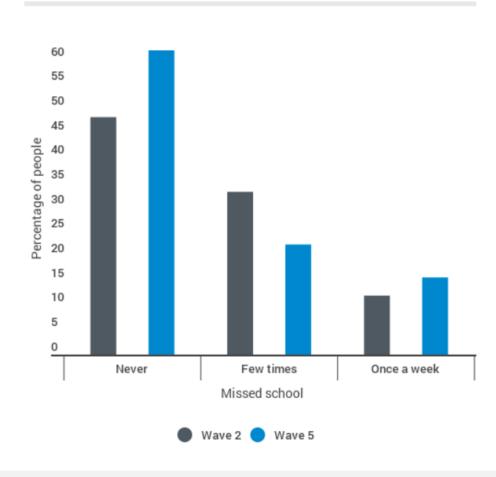


18.4% of parents rated their child's health as 'excellent' at Wave 5 compared to 23.9% of young people (NLTS2)

Proportion of young people taking prescriptions related to behaviour, attention or mood at each wave



Proportion of young people who missed school due to health problems at Waves 2 and 5



At Wave 1, 18.7% of young people were taking a prescription related to their behaviour, attention or mood, Prescription at the second of the s

At Wave 2, 33.1% of young people reported missing school due to health problems a few times a week compared to 22.4% at Wave 5 (NLTS2)

Strengths



Large scale data from two different countries



Census provides data from the whole population of Scotland and NLTS2 sampled students from whole of USA

Limitations



Subjective rather than objective measures of health



Census data doesn't differentiate between self-reports and proxy reports



Can't establish severity of intellectual disability in either dataset

Implications

