

- Community Engagement
- Communications

Conclusion Promoting collaboration and supporting relationships between early career professionals is key within the adolescent healthcare field. Facilitating mentorship between the IAAH Young Professionals Network and IAAH Council fosters knowledge dissemination and leadership opportunities. The IAAH Young Professionals Network encourages applicants from diverse backgrounds, including, but not limited to: students, trainees, early career professionals (including health care providers, researchers, public health practitioners, advocates, scientists, social workers, pharmacists, nutritionists, health allies) who have a strong interest and/or experience in the adolescent health field. To the best of the authors knowledge, the IAAH-YPN network is the first global, inter-disciplinary global adolescent health initiative of its kind.

P51 **NUTRITIONAL INTERVENTIONS FOR ADOLESCENTS USING E-HEALTH TECHNOLOGIES (ICTS): A SYSTEMATIC REVIEW**

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Aims To identify e-health technologies and their main characteristics used for nutritional interventions for adolescents and to evaluate the quality and effectiveness of the studies.

Methods The full protocol is available on the PROSPERO website (#CRD42016035882). A search was conducted across five databases (PubMed/MEDLINE, Scielo.ORG, Web of Science, PsycINFO, and Scopus) to identify papers describing nutritional interventions that used ICTs designed mainly for healthy adolescents. Full and original papers of randomized controlled trials, quasi-experimental or observational studies, published from 2005 to 2015, were included. The Effective Public Health Practice Project Quality Assessment Tool was used to assess study quality. Data was collected based on the guidance from the Centre for Reviews and Dissemination on undertaking reviews in healthcare

Results The search yielded 559 titles and abstracts. The number of studies which met the inclusion criteria was eleven. Recruitment of participants was mostly at schools. The follow-up of studies ranged from two weeks to two years. Interventional strategies included computer games, programs, text messages, and interactive CD-ROMs. More than 80% of studies (9 of 11) used computer-mediated Information and Communication Technologies. Five studies focused on multiple behaviours simultaneously. 6 interventions were developed based on a theoretical basis. Participants were exposed to interventions only once, daily, weekly, or according to a pre-determined number of lessons. Five studies had significant outcomes. All interventions that used games had significant outcomes. The quality assessment considered three studies as weak due to the non-representativeness of their samples and usage of non-validated questionnaires.

Conclusion Besides the heterogeneity and poor quality of the analyzed studies, it can be suggested that long-term interventions for adolescents that make use of frequent exposure to technological resources, and that have a theoretical component aimed at a single health behaviour change, tend to be more successful. Games showed to be a promising e-health platform for health education with adolescents.

P52 **MIGRANT YOUTH AND THE IMPACT OF CULTURAL VALUES, SOCIAL NETWORKS, ACCULTURATION AND CONDOM USE INTENTION AND BEHAVIOUR**

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Background Migrant health and adolescent well-being have become the focus point in current HIV intervention discourses as this particular cohort has an increased vulnerability to STIs such as HIV. As consistent use of condoms has a protective measure against STIs it is important to understand the key determinants that impact on their risky behaviours. In addition, it evaluates the extend that socio-cultural values and acculturation can predict condom use intentions among African youth residing in South Africa.

Methods Qualitative methodological approach was utilised with purposive and snowballing sampling techniques to explore migrant youth's intentions and behaviour towards condom use within their socio-cultural contexts. The study also measures their rate of acculturation and assimilation within the current youth culture in South Africa regarding sexual risky behaviour and their psychology around condom use intentions and behaviour. A sample were drawn from Sub-Saharan African descent who migrate to South Africa. The mean age of respondents were 23 years ranging from 20 years to 25 years, with an equal gender distribution.

Results The results indicated that young migrants have a good knowledge of condom use and dual protection against pregnancies and sexual transmitted infections. However, the use of condoms, even when freely available, is a contested issue as cultural values and traditional social networks have an impact on their intentions and behaviour towards condom use. Traditional gendered norms in sexual relationships and gendered expectations of condom use are current issues that migrant youth are grappling with. The nexus between cultural values and safer sexual choices places young migrants at risk as they are currently outside of the realms of socio-cultural contexts, with higher education expectations and delay of marriage customs.

Conclusion The study provide more insight into the current realities of transitioning young migrants who live outside of the boundaries of current socio-cultural paradigms.

P53 **SEX, BODY IMAGE AND RELATIONSHIPS: YOUNG PEOPLE WITH CANCER INFORMATION AND SUPPORT PREFERENCES**

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Aims Adolescents and young adults (AYA) diagnosed with cancer, broadly those aged 16-29, are known to have distinctive psychosocial and medical needs related to age and transitioning through significant life milestones at the time of diagnosis/

treatment. Forming a sexual identity is a key developmental task during this phase, thus understanding the factors that enable the information needs of AYA to be appropriately identified and met is critical. This study expands on previous findings that AYA exhibited significant unmet needs around information provision on sex, body image, and relationships and aims to explore information and support preferences regarding where, how, and from whom AYA want to receive this information.

Methods Four young people aged 24-26 years, with a previous cancer diagnosis at age 14-23 years attended an in-depth four-hour workshop. Participatory activities were employed to identify the questions young people had; their support/information preferences; and, their definition of intimacy. The framework approach was used to analyse workshop transcripts.

Results Young people's preferences of information/support provision varied. They wanted trusted sources of information and while some preferred to have face-to-face discussions with healthcare professionals, others felt embarrassed and would prefer an online platform. All acknowledged that listening to peers with cancer talk about sexuality and relationships would 'normalise' their questions. Feeling embarrassed (professionals and young people) was a barrier to an open discussion about their needs. Triggers for information and support included: partners (pressures/expectations); lack of sexual drive (managing side effects); body image concerns (weight gain/loss); physical constraints; and fertility concerns. Young people wanted access to information tailored to their needs.

Conclusion Findings from this study show cancer-specific sex, relationship and body image issues faced by AYA and provide important direction to the development of interventions – a balance between professional and peer support is needed. Sexual health is a key element of wellbeing and a failure to address it may place AYA at risk for long-term consequences related to sexual, identity and relationships development. This study highlights the importance of conversations relating to sexual consequences of illness and age-appropriate assessment and interventions in other contexts where disease may disrupt young people's development.

P54

RISK BEHAVIOR AND PSYCHOLOGICAL WELL-BEING OF LEFT-BEHIND ADOLESCENTS IN TWO PROVINCES OF CHINA

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Aims In China around 40 million children and adolescents are left behind in rural areas by parents who migrate to cities to work. This study aimed to investigate the effects of prolonged separation from parents, and different guardianship models, on engagement in risk behaviors and psychological well-being.

Methods A cross-sectional study was conducted in migrant-sending areas of three counties in Zhejiang province and two in Guizhou in 2015. A self-completion questionnaire was administered among adolescents age 6 to 16 from 56 primary

and middle schools, selected through random stratified sampling. Children's demographic characteristics, family and social support, risk behaviors, and psychological wellbeing (using the Strengths and Difficulty Scale) were measured. Logistic regression was used to measure the effect of guardianship types on behavioral and psychological problems.

Results There were 1447 respondents in Zhejiang, and 1773 in Guizhou. The mean age was 12 (SD 2.2). 1238 children were living with both parents, and 1977 were left behind children (LBC). Of these 1025 lived with grandparents, 838 with one-parent and 114 with 'others' (relatives, siblings, alone). After controlling for economic status, age and gender, LBC living with others reported higher prevalence of smoking (aOR=2.01, 95%CI:1.15-3.51), skipping class (2.28, 1.28-4.06) and cheating (2.23, 1.55-3.50) than non-LBC, but there were no significant differences in drinking, going to internet cafés, stealing, bullying and fighting. Among three types of LBC guardianship, adolescents living with one parent reported lowest level of risk behaviors, and those living with 'others' highest. In addition, LBC living with grandparents reported more emotional problems (1.25, 1.02-1.53), LBC living with others more hyperactivity (2.15, 1.41-3.26) and fewer peer problems (0.65, 0.43-0.98), but there were no significant differences in conduct problems. Risk factors for LBC's behavioral and psychological problems were: living in Guizhou, poor study performance, having friends involved in risky behaviors and low social support.

Conclusion Living with parents or one parent led to more favorable behavioral and psychological outcomes. Migrant parents should try to ensure that one of them stays at home to give care and guidance on a daily basis.

P55

MOVING ON: FROM POND TO SEA – PROVISION OF TRANSITION SERVICES FOR YOUNG PEOPLE WITH NEURO-DEVELOPMENTAL CONDITIONS

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Introduction 'Transition' is the purposeful, planned process that addresses medical, psychosocial and educational needs of Young people with long-term conditions as they move from child-centred to adult-oriented healthcare systems. The importance and challenges of healthcare transition are recognised in UK National Institute for Health and Clinical Excellence (NICE) Guideline and Quality Standard (2016). A new dedicated transition clinic for Young people with neuro-developmental problems was initiated in Carmarthenshire in September 2016

Aims To demonstrate the provision of transition services for children with neuro-developmental conditions; benchmark services against NICE standards and illustrate areas for improvement.

Methods Young people aged 16-19 years who were seen in a transition clinic with diagnosis of neuro-developmental problems in Carmarthenshire. 50 Young people from September 2016 to July 2018 were reviewed.

Results 38 were male and 12 were female. Diagnosis were ADHD 40%, Learning difficulties 34%, ASD 24%, Developmental coordination disorder 16%, Physical disability 14%.