

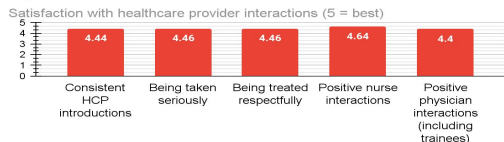
BACKGROUND & METHODS

- **Adolescents admitted to hospital face unique challenges**, including feelings of social isolation, lack of privacy, sleep loss, and poor communication with health professionals.
- This single-centre study explores the experiences and perspectives of both **adolescent patients** (age 10-19) and their **healthcare providers** within a general pediatrics setting. Data were gathered via **anonymous surveys**, designed with input from youth and family advisory groups.

RESULTS & DISCUSSION: ADOLESCENT PATIENTS

- **Demographics:** n =25; 6 males, 9 females, 2 non-binary, and 8 who identified as 'other' or did not specify. Mean age 14.6 (11-17).
- For **76%** of participants, this was their first CHEO admission; **82%** reported feeling well-supported during their hospitalization
- Self-reported recollection shows that **key areas of adolescent health may go unassessed** in hospital settings, especially around gender, sexuality, body image, and safety issues (see **Figure A3**).
- **Positive** aspects of hospitalization identified included interactions with care providers; time spent with loved ones; as well as structure and routine. **Challenges** identified included noise levels; lack of privacy; and leisure activities that were felt to be childish. **Key recommendations** included correct use of pronouns; increased privacy and quiet space; as well as continuity of care and clarity about team members' roles.

Figure A1



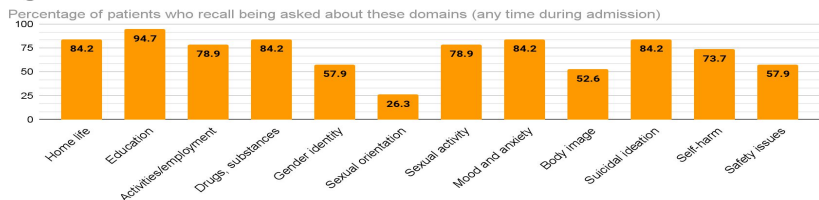
"Although being admitted under unpleasant circumstances the workers here made the experience at the hospital much more pleasant than I could have expected. I was always met with professionalism and compassion."

Figure A2:



"Being able to be myself without judgement. I could ask a question without being looked at weird."

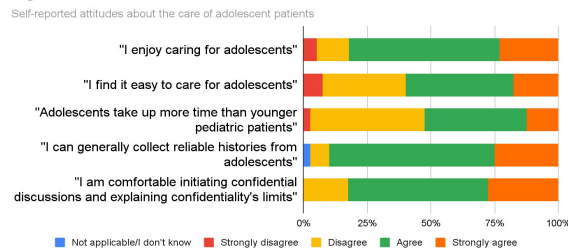
Figure A3



RESULTS: HEALTHCARE PROVIDERS

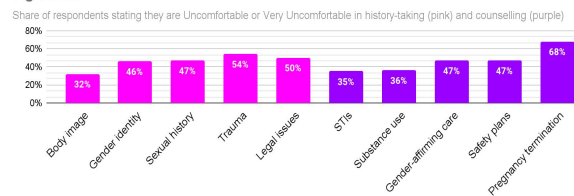
- **Demographics:** n =40; 7 males, 29 females, and 4 who identified their gender as 'other' or did not specify. Represented multiple professions: physicians (18), nurses (13), dietitians (2), occupational therapist (1), physical therapist (1), and pharmacists (2).
- Overall expressed **positive attitudes** about working with adolescents, though did identify challenges pertaining to the need to spend extra time with this patient group as well as some perceived deficiencies in terms of the adequacy of both their education/training and physical work environment (see **Figure B1** below).
- Report **discomfort** in several areas of both **history-taking** and **counselling** of adolescent patients, especially in areas pertaining to body image (32%), gender identity and gender-affirming care (46% and 47%, respectively), taking a sexual history (47%), or sexual health counselling (35% for STI counselling; 68% for pregnancy termination counselling). See **Figure B2** below.
- **Areas of need** that have been identified include continuing education/training; the creation of more teen-friendly spaces; and added adolescent-specific/mental health supports (both inpatient and community).

Figure B1



"Helping teenagers understand their health needs so they can advocate for themselves and take responsibility of their health...Makes you feel as though you have made a real difference in their lives."

Figure B2



"I think CHEO is good at looking at adolescents as a whole and supporting them in multiple ways, not just for the sole issue they were admitted/consulted for."