



## Focus On Subspecialties

# IEP must include transition plan to prepare teens for adulthood

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Most pediatricians are familiar with individualized education plans (IEPs) for children with disabilities. Physicians may not be aware, however, that the IEP must include an individualized transition plan (ITP) for those 16 years of age and older to help prepare them for adulthood.

There are important differences between the typical IEP processes and goals and those associated with developing the ITP. Pediatricians familiar with these differences can help families advocate for meaningful transition to adulthood planning that will improve health, graduation success, employment options, and increase independence for youths with disabilities.

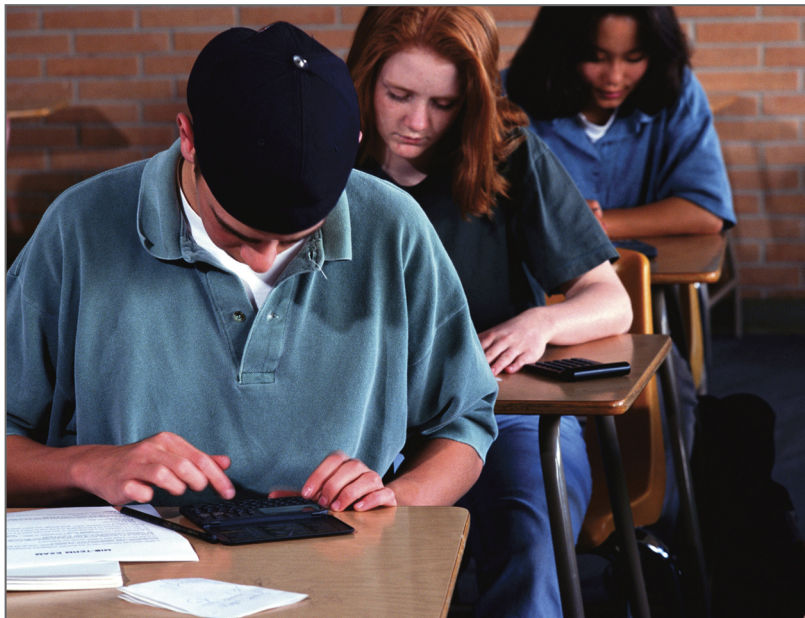
### Nurturing self-advocacy skills

The Individuals with Disabilities Education Act requires that an ITP be included in the IEP when a youth with a disability turns 16, although states can set a younger age. Like an IEP, the ITP is developed by a multidisciplinary team that includes the parents. In addition, the law requires that the young person be part of the team developing the IEP/ITP. This not only ensures that the youth's interests and goals are considered, it also helps the student learn self-advocacy skills that will be critical in adulthood.

For example, although all colleges and universities that receive federal funds (which is most of them) have an office that can provide services to young adults with disabilities, it is illegal for these offices to approach a student and offer assistance. The young adult must self-identify as a person with a disability and request assistance.

Similarly, the Americans with Disabilities Act requires any employer with 15 or more employees to provide reasonable accommodation for individuals with disabilities, unless doing so would cause undue hardship. Again, the individual must advocate for these changes in the work environment.

Pediatricians can help their patients with disabilities learn to advocate for themselves by meeting with them alone and encouraging them to take part in health care decisions. The trusting relationship developed with a caring pediatrician also can provide a safe place for the student and parents to explore the issues of privacy vs. disclosure of a disability.



The young adult should be included in the interdisciplinary team developing an individualized transition plan (ITP) so that the youth's interests and goals are considered and self-advocacy skills are learned.

### Developing goals

The types of goals typically included in IEPs differ from the goals that can be included once an ITP is part of the IEP. Federal law requires IEPs to be revised at least yearly and specifies that they contain goals for academic and school-related progress for the next year. For ITPs, the timeframe and range of goals are expanded. Goals can be specified for adulthood, which may be years away, and can relate to post-secondary education or employment, community living and self-care.

When developing the IEP/ITP, the team must think about the skills the youth will need as an adult, especially skills and behaviors essential for employment and independent living, and lay out plans to teach these skills.

One critical issue for families is determining whether the youth will graduate from high school with classmates (typically around 18 years of age). Once youths with disabilities graduate, they no longer are entitled to special education services through the school district, and there is no entitlement to training as an adult. Vocational rehabilitation services may be available to eligible adults with disabilities,

but these services are not an entitlement.

If IEP team members identify additional skills needed for a successful transition to independent adult living, they may opt to extend schooling through a transition IEP until the student's 22nd birthday. If individuals with a disability stay in school beyond 18 years of age, they are allowed to work while attending school.

Training opportunities that will promote inclusion in recreational activities and skills needed for independent community living such as riding public transportation also should be considered. If an individual has a chronic illness such as diabetes or asthma, disease self-management skills necessary for independent living also could be included in the ITP. Physicians can help families and schools identify reasonable and safe self-management goals.

Transition to adult life presents challenges and opportunities for practitioners guiding families of children with disabilities. Thoughtful planning, beginning at a young age and supported by a medical home, can increase the chances that these youths will take on adult roles and responsibilities.

## RESOURCES

The AAP Section on Developmental and Behavioral Pediatrics offers checklists, procedural guides, summaries of legal requirements and other materials to support pediatricians, youths in transition, and their family and community teams, at <http://www2.aap.org/sections/dbpeds/index.asp>.



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