

mothers with a low family income, a low level of social support and family functioning.

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### **O66**

#### **Stakeholders' views on EU child healthcare systems; the MOCHA project**

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#### Background and aims

One of the aims of the Models of Child Health Appraised (MOCHA) project was to analyze stakeholders' views on imaginary scenarios of primary child health care systems in the future, and how potential changes might be achieved.

#### Methods

An online questionnaire about three future scenarios on imaginary components of the child healthcare system was filled out by 80 stakeholders of 22 EU countries. The respondents were policy makers, nurses, pediatricians, GP's, researchers and representatives of end-users. Scenario 1 considered specialized preventive health services for infant measles vaccination. Scenario 2 considered working in multidisciplinary teams in the chronic care for children with asthma and complex needs. Scenario 3 considered confidential access for early identification of mental health disorders in adolescents. Thereafter online focus group interviews were performed about each scenario. We interviewed 13 experts from 8 EU countries. The experts were recruited among the respondents of the online questionnaire.

#### Results

The stakeholders expressed a need for improvements to the child healthcare system. The participants of the survey and of focus groups agreed on preferences for several ways of achieving optimal care with regard to the varying scenarios presented in our study. The following primary child health care system components received priority in optimization: public access to information about vaccination, open access to services for adolescents and confidentiality unless parents' consent is needed for treatment, coordination and continuity of care, continuity of information on children's health status using electronic health records, and increase and training of the workforce. Transparent policy making and increase of resources could benefit systems' changes. Stakeholders identified the current healthcare system and service provision as the major barrier for implementation of the optimal scenarios.

#### Conclusion(s) with key message

The stakeholders expressed a need for improvements in the child healthcare system and reached high levels of agreement on three potential scenarios for improvement. They also identified major barriers for the implementation of the forecasted system components.

#### Statement or main question

Changes to optimize primary child health care in the EU are needed, although the countries' environmental characteristics should be taken account of.

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#### **Counseling Center for reproductive health, Zagreb 2015-2017**

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Sexually transmitted infections are the most common infections among adolescents. Therefore, their sexual system is prone to infections. The latest data from 2015. The National Cancer Registry tells that in Croatia, every third day one woman dies from the cervical cancer. Data for Croatia shows that 65% of reported SPBs are found in younger than 25, mostly among women. For Ca. In situ cervical cancer incidence rates are highest at age 30-34. This is the age when women are in reproductive and working-active age. For this reason, in the City of Zagreb there is an over standard for high school students and college students. The counseling center works as part of the School and Adolescent Medical Service and operates on the principle of open doors, without any reference to primary health care. Methods: In the Counseling Center, the patient can talk to a specialist of school and adolescent medicine, gynecologist and nurse. The patient can have an advisory discussion, explanation of SPB positive results, as well as gynecological treatment, PAP smear and cervical scars. Every user get questionnaire before we start counselling. For the PAP smear we use LBC method (liquid cytology method), where we are able to make HPV typing from the same sample and than we don't have to call user to come over, we use example from PAP smear. Results: based on the data collected between 2015 and 2017 Among population of young girls we find 26-29% have pathological PAP smear. LBC finds higher rate of ASCUS, and in 2017 we also find lots of Ureaplasma urealiticum (33%) of all Cervikal smear, after abnormal PAP smear. Youth counseling facilities are needed to preserve the youth's reproductional health. Moreover, counseling facilities are needed in order to improve Croatia's demographic structure, which is in extremely bad state, concluding from the following data: in year 2016 - 51 542 people died, and only 37 537 were born.

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#### **Preventive definition of vascular age in students: experience of diagnostic and motivational work of the**