



17TH WORLD CONGRESS ON PUBLIC HEALTH 2023 May 2-6 ROME ITALY

ABSTRACT BOOK



Abstract book by:





ORGANISING COMMITTEE

CMC

The three organising partners of the 17th World Congress on Public Health established a Congress Management Committee (CMC) consisting of representatives of WFPHA, SItI, ASPHER and the PCO. The CMC has the full managerial and financial management responsibility for the Congress.

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ICC

The International Congress Council (ICC) consisted of the Congress Management Committee and international public health experts representing various regions of the WFPHA, international health organisations, European health non-governmental organisations and Italian universities and institutes. The ICC in particular develops, in consultation with the CMC, the scientific programme including subthemes and plenary programme of the WCPH and identify speakers/panellists/moderators of the plenary sessions.

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ISC

The International Scientific Committee (ISC) consists of experienced public health experts from around the world nominated by WFPHA, SItI and Aspher. It mainly advises the ICC on scientific matters of the conference and contributes to the scientific evaluation of the conference. We would like to thank the ISC for their support.

Aim & Scope

Population Medicine is an open-access double-blind peer-reviewed scientific journal that encompasses all aspects of population, preventive, and public health research including health care systems and health care delivery. Its broader goal is to address major and diverse health issues, to provide evidence-based information to professionals at all levels of the health care system, and to inform policymakers who are responsible for the formation of health policies that can lead to evidence-based actions.

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School Health Survey 2019

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Adolescents are considered one of society's vulnerable groups, and are exposed to different types of social and health problems, among which violence stands out. Sexual violence (SV) stands out as one of the main forms of aggression against teenager. SV is defined as "any action in which a person, taking advantage of his position of power and making use of physical force, coercion, intimidation or psychological influence, with or without the use of weapons or drugs, compels another person - any sex - to have, witness, or otherwise participate in sexual interactions." The study analyzes data on sexual violence against adolescents using the 2019 National School Health Survey. Objectives To analyze the prevalence of sexual violence among students between 13 and 17 years old in Brazil. methods Cross-sectional study with data from National Survey of School Health 2019. It was analyzed the prevalence and respective 95% confidence intervals (95%CI) of sexual abuse and rape involving students from 13 to 17 years old of Brazil, according to sex, age groups, school type, aggressor, administrative region of residence and federative units.

Results: The prevalence of sexual abuse among students was 14.6% (95%CI: 14.2;15.1) and of rape was 6.3% (95%CI: 6.0;6.6). The prevalence was higher among the female students and of the age group of 16 and 17 years old. The most common aggressor was a intimate partner. Among schoolchildren who were raped, more than half reported to have experienced this violence before the age 13 years old (53.2%; 95%CI: 51.0;55.4). Conclusions: The sexual violence has a elevated prevalence among the Brazilian students between 13 and 17 years old. Besides, the aggressions were perpetrated, overall, by people in the family nucleus and intimate and affectionate relationships. There must be intersectoral articulation to develop public policies that act to face this problem.

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Monitoring and evaluation of perinatal healthcare in Italy: data from the National Outcomes Evaluation Programme (years 2015-2021)

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Background and Objective: The National Outcomes Evaluation Programme (Programma Nazionale Esiti, PNE) monitors several aspects of perinatal health care, with particular attention to the quality and appropriateness of health care in Italian maternities.

Methods: Perinatal health care was assessed by calculating seven indicators: two volume indicators (total number of deliveries; number of deliveries by caesarean section, CS); three process indicators (proportion of deliveries with primary CS; proportion of vaginal births after caesarean, VBAC; proportion of episiotomies in vaginal deliveries); and two outcome indicators (hospital readmissions within 42 days from hospitalization in case of vaginal delivery and CS). The information source was the National Hospital Discharge Records. Risk adjustment models were implemented to compare hospital performance and the impact of women's area of residence, eliminating confounding due to women's age, and comorbidities both before and at the time of hospitalization for delivery, as well as for potential clinical determinants of the mode of delivery.

Results: In Italy, the number of hospitalizations for birth has progressively decreased over time, from 484743 in 2015 to 398,506 in 2021. At the same time, the primary CS rate decreased from 25.1% in 2015 to 22.4% in 2021, and the proportion of episiotomies dropped from 24.4% to 12.3%. Both procedures demonstrated significant regional and hospital variability and a strong North-South gradient. Within the same period, the proportion of VBAC increased slightly from 8.4% to 10.7%.

Conclusions: The analysis based on perinatal indicators of the PNE shows high proportion of CS and episiotomy compared to the WHO recommended rates. In addition, the low proportion of VBAC and the persistence of a wide inter- and intra-regional variability suggest ample room for improvement in perinatal care in Italy.

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Child development in the context of the COVID-19 pandemic: repercussions for health promotion

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Introduction: The COVID-19 pandemic has made the health situation worldwide serious, with possible effects on children related to behavioral, dietary and emotional changes. Objective: To analyze care circumstances and concerns about child development in the context of the COVID-19 pandemic from the maternal perspective. Methodology: Longitudinal study, through telephone interviews with 86 mothers of Brazilian children between two and three years old, with the same participants in 2020, 2021 and 2022.

Results: Maternal reports express changes in the child's sleep routine, diet and behavior. Dialogues about the pandemic were not carried out with children, mainly in 2020 (48%), with an improvement in 2021 and 2022. From the maternal perspective, the pandemic situation can harm child development, reported in 2020 (40%), increased in 2021 (63%) and returned to the same level in 2022 (40%). Reading children's books was a practice carried out by the majority in 2020 (65%), 2021 (71%) and 2022 (63%). Use of electronic devices in children's routine was frequent in 2020 (78%), 2021 (80%) and 2022 (94%). More than 90% of children's vaccination status was up-to-date, and around 30% of families failed to take their children to health appointments during the analyzed period. Conclusions: There are gaps in activities to promote development, to establish limits and understand children's needs. The situation of the COVID-19 pandemic presents itself as a circumstance that can generate difficulties in the process of caring and providing development at home. Implications for health: Health care in the context of early childhood requires advances to increase the decision-making process and choices of everyday parenting practices. Primary health care for children with quality and proximity to families has the potential to promote development, reduce vulnerabilities and contribute to meeting the essential needs of children.

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The associations of early formal childcare with problem behaviour trajectories from 5 to 14 years of age

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Background and Objective: Childcare provides the first opportunity to stimulate children's cognitive, social, and emotional development outside the home. We know little about how childcare is associated with mental health in childhood and adolescence. The Millennium Cohort Study, a large UK longitudinal study, was used to examine the relationship between age of starting childcare and weekly hours in formal childcare between birth and 5 years and internalizing and externalizing behavior trajectories from ages 5 to 14 years.

Methods: The sample comprised 6194 children. Parents reported externalizing and internalizing behaviors with the strengths and difficulties questionnaire at 5, 7, 11 and 14 years. Associations were analyzed using a multilevel general linear regression model, with adjustment for socio-economic position, maternal mental health, demographics, and child temperament.

Results: Later entry into childcare was associated with more internalizing but not externalizing behaviors, with the effect strengthening from 5 years to 14 years. In the fully adjusted model, starting childcare between 1-2 and 4-5 years compared to starting between 0-1 year was associated with 0.39 (-0.01, -0.79) and 0.98 (0.24, -1.71) higher internalizing behavior scores at 14 years. Children who spent more than 40 hours per week in childcare between birth and 3 years had 1.23 (0.58, 1.87) higher externalizing behavior scores at 5 years than children who spent no time in childcare. The association disappeared by 14 years. Weekly hours were not associated with internalizing behavior.

Conclusions: Results show that childcare is associated with subsequent mental health and that the timing matters. Childcare could play an important role in a population's mental health promotion, however so far this is only the case for internalizing behaviors, and high intensities might even be associated to more problem behaviors.

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New perspectives for the school medical service in Italy

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Background and Objective: The School Medical Service was introduced in Italy in 1978 with the aim of developing health prevention and promotion targeted to school pupils. For many years it played a key role, but then it lost its relevance. Despite this, the National Prevention Plan 2020-25 considers it as a fundamental setting for health promotion and protection of the overall national community. Fondazione The Bridge launched an in-depth study aimed to develop an implementation strategy useful to create a new model of school medical service

focused on health promotion.

Methods: The first step was building a multi-stakeholder working group that worked on the analysis of the literature review to collect examples of best practices at national and international level. The second step concerned the identification of strength and weakness of different regulatory aspects gathered from existing local practices. Three surveys addressed to mayors, teachers and headmasters have been carried out to collect their wishes and views, generating new ideas that have been proposed as suggestions to policy makers.

Results: The multistakeholders team identified key issues to be considered when developing a new school medical service able to support health promotion and prevention, including the possibility to consider the school as a vaccination setting. The position paper proposed a working model and concrete operative options for the development of policy initiatives.

Conclusions: An innovative strategy able to redesign the relationship between Primary Care, Social Health Services and School, within an integrated strategy able to gather relevant stakeholders (school, health services, municipality), has the potential to generate benefits and positive effects for students, their families and the overall community. Bringing social and health services closer to schools and raising awareness among students can positively influence the determinants of health and ensure greater equity in the provision of social and health services.

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Adolescents' knowledge, self-efficacy, and the use of implant contraceptives in west point community, Liberia

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Background: Implant contraceptives are available for free in public health facilities and selected private clinics in most communities in Liberia for the purpose of controlling and preventing unplanned and unwanted pregnancies. Despite the freely available contraceptives, adolescents between the ages of 10 to 19 years still conceive. As a result, nearly 26% of adolescents unintentionally become pregnant, and 30% of pregnancies end in unsafe abortions.

Objective: The aim of this study was realized through the following objectives: 1. What is the extent of knowledge of adolescents on implant contraceptive use? 2. What is the extent of self-efficacy of adolescents on implant contraceptive use? 3. What is the extent of implant contraceptive use among adolescents?

Methods: A self-administered questionnaire survey was distributed to 294 female adolescents using stratified and simple random sampling. Descriptive analysis was conducted on the data using the Statistical Package for Social Sciences (SPSS) software. Means and Standard deviations were used to determine the extent of knowledge, self-efficacy, and implant contraceptive use among adolescents.

Results: Nearly over half (52.2%) of the 294 surveyed female adolescents demonstrated having fair knowledge of the use of implant contraceptives. An estimated 41% of these respondents believed that implant contraceptive causes infection. Adolescents' motivation (self-efficacy) towards implant contraceptives use was low (overall mean of 2.29). The extent of adolescents' use of implant contraceptives was also low. Respondents that have used implant contraceptives recorded the least mean (2.38) which is interpreted as low for implant contraceptives.

Conclusions: These findings point out a huge gap in knowledge and self-efficacy levels of adolescents as well as their use of implant contraceptives. Hence, there is an urgent need for Sexual Reproductive Health (SRH) education programming, with a focus on the importance of implant contraceptives in the West Point Community in Liberia.

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Evaluation of indicators of physical development in children and adolescent as a standard for health

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Background and Objective: The assessment of the level of physical development is an element of the control over the health of the children and adolescent and occupies an important place in the practical activity of the health specialists.

The aim of the study was analysis from the preventive examinations of the main indicators for the physical development of children and adolescent from 1 to 18 years in organized units in Rousse for 5-years period.

Methods: Data from reports of the Regional Health Inspectorate-Ruse, Ruse were used. We analysed, evaluate and monitor the health status of children and adolescent in organized groups in Rousse district for 5 years (2016-2020). Anthropometric indicators of height, weight and physical capacity were a marker of health. When performing an individual assessment of height and weight, according to anthropometric indicators, they are divided into three groups: Group I "norm", Group II "extended norm", Group III "outside the norm".

Results: The scope of the conducted research has better indicators for children 98% and 99% (2016,2017,2018,2019), than adolescents 97.16% (2016) to 95.93% (2020). For children and adolescents, the indicators in the "norm" are leading in the three indicators of height, weight and physical capacity. 2.38% of those exempted from physical education classes were found to be obese.

Conclusions: A good organization has been established to monitor the physical development of children and adolescent in Rousse district by Regional Health Inspectorate, physicians and staff in health offices for anthropometric research for 2016-2020. It is extremely important to carry out an annual preventive screening of children and adolescents in order to promptly detect deviations from their physical development.

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Mortality profile of pregnant women with severe acute respiratory syndrome due to COVID-19 in Brazil: Pre- and post-vaccination

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Background and Objective: Pregnant women are more susceptible to more severe Sars-CoV-2 infections, therefore the Brazilian ministry of health recommends immunization since July 2021 to reduce maternal morbimortality. This study aims to describe the mortality profile of Brazilian pregnant women due to COVID-19, in the pre- and post-vaccination period. **Methods:** A descriptive, cross-sectional, and comparative study of notifications for severe acute respiratory syndrome to COVID-19 in pregnant women in Brazil, based on extracted data from the influenza epidemiological surveillance information system from epidemiological week 1 to 26 of 2021 and 2022. To perform the analyses, the statistical software SAS in 9.4 version was used, and a significance level of 5% was considered.

Results: There were 883 deaths of pregnant women with Sars to COVID-19 in 2021 and 10 in 2022. In 2021, those who were 35 years or older, lived in the northern region, had fever, cough, dyspnea, respiratory distress, saturation lower than 95%, comorbidities, obesity, admission to the Intensive Care Unit (ICU), need for ventilatory support, were not vaccinated, and had an incomplete vaccination schedule were the ones with the highest proportion of cases that died. In 2022, pregnant women were 35 years old or older (50%), from the northeast region (40%), and brown (66.7%). Regarding clinical manifestations, fever (83.3%) and cough (62.5%) were the most identified symptoms. With regard to risk factors, 80% of pregnant women had at least one comorbidity and heart disease was the most prevalent (66.7%). Between these pregnant women, 66.7% needed ICU and 77.8% needed ventilatory support. As for vaccination, 70% were not vaccinated. **Conclusions:** The study allowed the characterization of the epidemiological profile of pregnant women with Sars to COVID-19 who died in Brazil. This profile may be related to the social determinants of health and the difficult access to health care services.

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A systems thinking approach to better understand the causal relationships driving child stunting in the Lao PDR

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Background and Objectives: The Lao PDR (Laos) has the highest rate of child-stunting (low height-for-age) in South-East Asia despite a higher gross national income compared to other countries. Stunting has significant implications for a country's future economic prosperity and productivity and remains a priority global health issue. A paradigm shift is needed if the burden of childhood stunting is to be reduced both in Laos and globally. This requires a better understanding of the underlying drivers of childhood undernutrition within context, and how these drivers interact to produce the symptomatic outcome of child stunting. Using