Word from past and at this number
guest Editor

Mojca Jurčič

Editing the Newsletter for more than five years has been a great challenge for me. Sometimes there were enough contributions for at least one number per year, sometimes not. With the help of many of you, the Newsletters continue to be with you. I wish the new editor more customer-readers and colleagues sending interesting articles, with news to share with others.

IV Congress of Croatian Society for School and University Medicine, Croatian Medical Association

Public health challenges of school and adolescent medicine

Split, October 26-28 2012

Zeljka Karin, President of the Croatian Society for School and University Medicine Croatian Medical Association

Marina Kuzman, EUSUHM President

Croatian Society for School and University Medicine, Croatian Medical Association and Croatian Nurses Association organised and hosted the joint event: IV. Croatian Congress of Croatian Society for School and University Medicine Croatian Medical Association with international participation “Public health challenges of school and adolescent medicine” and I. Symposium of the Croatian Society of School and University Medicine Nurses “Specific nurses' tasks in the school health medical team”. The event was held in Split 26-28 October 2012.

The event was very well attended, with more than 200 participants and numerous distinguished guests and keynote speakers. Congress was greeted by the deputy Minister of Health, Marinjan Cesak, Children Ombudsman for Children Mila Jelavic, Head of the WHO Office in Croatia Antoinette Kaic-Rak, EUSUHM President Marina Kuzman, representatives of the Medical School Universities in Split and Zagreb, colleagues from different health institutions and representatives of the local government. Ministry of Science, Education and Sport, Zeljko Jovanovic, opened the Congress and gave the introductory speech on the integration of children with special needs in the educational system.

The aim of the Congress was to gather as many professionals working in the health care of children and youth as possible, but also to provide a comprehensive insight into different areas regarding children’s and adolescent needs and offer scientific analysis, practical information and best practices for action.

At the I. Symposium of school health nurses, 13 oral presentations and 11 posters were presented. The complex and responsible role of the nurse in the school health service has been analysed and the opportunity to talk about nurses' experiences and problems was very well accepted.

At the IV. Congress of School and University Medicine, 82 oral presentations and 47 posters were presented. The main topics were selected according to the leading challenges in child and adolescent care and contextual influencing factors: reproductive health, mental health, children with special needs, cardiovascular risks, physical activity and vaccination.

Introductory speeches addressed the WHO role in child and adolescent health and development, health care for children and youth in the 21st century and the European dimension of school children care.

During the Congress, through lectures, discussions and comments of the distinguished participants from Croatia and other countries, as well as very lively participation of all delegates, all aspects of child and adolescent health and care were addressed, experiences exchanged and proposals discussed.

Particular attention has been dedicated to the possibilities of improving children's health and wellbeing through specific programmes and well established organisational systems, emphasizing the necessity for specific education for professionals working in the area.

Health and health promotion of children and adolescents are among the most important tasks of contemporary society; a healthy young population is one of the prerequisites of the prosperity and welfare of the state. New trends and future challenges require alertness and prompt action by society, but above all by the health and educational sector. School and adolescent medicine is definitely a very important actor and intersectional “bridging structure” which enables better communication and better fulfillment of requirements of mutual interests.

Student Health Survey 2012: a national survey among Finnish university students.

Helsinki Finnish Student Health Service Kunttu K, Pesonen T.

The University Student Health Survey 2012 was conducted to investigate students' physical, mental and social health, certain key aspects of health-related behaviour, as well as the use of health services and opinions concerning the quality of the services. In addition, the study explored a range of factors related to health, health behaviours and study ability, such as social relationships, studying and subsistence. Special themes in the 2012 survey included learning difficulties (dyslexia, in particular), gambling addiction and Internet use, pain in the head and facial area (bruxism), panic anxiety syndrome, sexual problems, vulvodynia, experiences of bullying, stalking and violence, as well as the cultural and social meanings of physical activities. Furthermore, the survey aimed to provide information about immigrant students. The majority of the special themes will be discussed in separate articles.

The survey was designed so as to allow for comparison with the earlier nationwide health surveys among university students, carried out in 2000, 2004 and 2008. The study protocol was approved by the Medical Ethics Committee of the Hospital District of Southwest Finland and the participating students gave their informed consent by voluntarily responding to the questionnaire.

The target population consisted of undergraduate students, aged under 35 years and studying in Finnish universities. The sample consisted of 9,992 students, of whom 47% were men. The proportional share of students in academic universities (Univ) and universities of applied sciences (UAS) were equal, and the gender distribution was equal as well. The self-report survey was implemented as a postal questionnaire, but it was also possible to complete the questionnaire online. Four reminders were sent electronically and a reminder questionnaire was sent once by mail.

The overall response rate was 44% (UAS 40%; Univ 49%). The response rate was 35% for men (UAS 31%; Univ 39%) and for women 52% (UAS 47%; Univ 57%). Except for the low male response rate, the
respondents represented well the target population for the background variables. In this publication, the results are reported by age group, gender and educational sector, and, in the electronic reports, also by duration of studies, study location (or region) and fields of study. The results are compared between the two educational sectors (UAS vs. Univ), and against the results of the nationwide university student health surveys of 2000, 2004 and 2008.

A significant proportion of students (65%) suffered from a chronic, long-term or frequently recurring disease, disorder or disability diagnosed by a physician, dentist or psychologist and showing symptoms or requiring treatment over the preceding 12 months. The prevalence of various diseases has remained rather unchanged from year to year, but the proportions of diagnosed depression and anxiety syndrome have doubled since the year 2000. For Univ students, the proportions in this survey were 7.9% and 5.7%, respectively. A total of 84% of the respondents perceived their health as being good and only 3% as poor. Altogether 29% of men and 46% of women had experienced a particular symptom on a daily or almost daily basis. The proportions in terms of perceived health and experienced symptoms were similar to those in the previous surveys. Of different daily or weekly occurring symptoms, the most common were tiredness/fatigue and upper back/neck problems, both in men and women. Other common symptoms included skin problems, runny/blocking nose, problems in falling asleep and gas pains/feeling bloated. Of the respondents, 12% suffered, on a daily basis, from a mental symptom, 11% from a general symptom and 10% from an abdominal symptom.

Two thirds (64%) of female students reported that they had suffered from gynaecological complaints over the preceding 12 months; in most cases, this involved menstrual pains (46%) or irregular periods (20%). Approximately 10% reported disturbingly heavy menstrual periods or pain during intercourse. For men, 27% of respondents reported having problems related to sexual health, most commonly premature or delayed ejaculation. Of different birth control methods, the use of contraceptive pills was reported by 47% of women and 39% of men. The use of a contraceptive vaginal ring or patch was also reported, which increased the share of hormonal contraception. A total of 45% of men and 36% of women reported the use of condoms.

Symptoms suggesting eating disorders were reported by every tenth female student, but only 2% of women had a diagnosed eating disorder. According to the results of the GHQ-12 questionnaire, 26% of the respondents (men 20%; women 33%) suffered from mental problems. The most commonly experienced problems included continuous overstrain, a feeling of unhappiness and depression, difficulties in concentrating on the tasks at hand and loss of sleep because of worries. According to the mental health screen, 30% of all students experienced considerable stress. The most frequent causes of stress were performing in public and difficulties in getting a grip on one's studies. About every fifth student had a negative perception concerning their mood, plans for the future and own resources and capabilities. Empowering factors included human relationships and sexuality and, for the majority of respondents, the process of planning for the future, personal resources and mood were perceived as positive. Getting a grip on one's studies and performing in public, on the other hand, were positively perceived by less than one half of the students. Experience of mental problems and stress did not differ between Univ and UAS students. Mental problems have become increasingly common among Univ students since the year 2000.

A total of 41% of male students and 23% of female students were overweight. Major obesity (BMI 30 kg/m² or over) was found in 8% of male and 6.5% of female students. Overweight and obesity increased along with age: while 30% of men in younger age groups were overweight, the proportion in the oldest age group was as much as 57%. Overweight was more common among UAS students as compared to University students. In both men and women, overweight and obesity have continued to become increasingly common since the year 2000. Underweight was reported by 9% of women and only 2% of men. Women estimated themselves as being overweight more often than they actually were; in men, the trend was the opposite.

The use of health services reflects not only the need for health services among the student population, but also the availability and accessibility of services. The reported use of professional health care services of various types revealed clearly the lesser supply of municipal health services for students, as compared with the services offered by the Finnish Student Health Service. In addition to and in place of student health services, the UAS students used other services provided by municipal health centres. The number of appointments had declined since the year 2008, except for the services of the psychologists and psychiatrists of the Finnish Student Health Service. In both sectors of higher education, the students were quite satisfied with the contents of the appointments within student health services (UAS 86%; Univ 88–89%).

More
http://www.yths.fi/en/health_information_and_research/research_and_publications/the_finnish_student_health_survey

www.EUSUHM.org

http://www.inchesnetwork.net/

http://www.ciaah.org/