

Discussion paper: Working-group on Preventive Activities

Promoting child welfare in GP's work

In Europe, prosperity is steadily increasing. At the same time it is clear that society is being divided into families that are doing well and to those that have nothing. Divorce rates are on the increase all over Europe.

When the well-being of the family is threatened, it is always the children who suffer.

Unemployment, alcohol, and mental problems are problems that parents have to deal with but all these problems always affect children too. There are at least two projects in the EU that aim to lessen the ill-being of children, especially at school. One of the projects is concentrating on educating teachers, the other aims to reduce violence and improve mental health.

A research published in Finland reported that one in five of 10-12-year-olds needs psychiatric help of some sort. Underage smoking has not decreased as much as had been expected. Violence in schools is not only an American problem anymore; it has become reality also in Finland. Learning difficulties have increased, as has general restlessness. Children spend more and more time without any adult company. Small children are placed in large day-care groups, and respiratory infections are on the up. New child abuse cases are frequently found.

In the 1940s, a network of mother care units covering the whole country was established in Finland. It was based on health care nurses working with general practitioners. We have the mother care units to thank for one the lowest perinatal death rate in the world and for the small number of babies with a low birth weight. The implementation of immunisation programs has been the responsibility of general practitioners.

Young families increasingly find themselves unable to take care of their children. They lack the support of close relatives. Families are small and there is no contact with the previous generation. Increasing social misery of families has led to violence and misuse of alcohol and drugs. This means that parents are no longer able to take care of the children and provide them with a good environment in which to grow. The problems of the parents come before the problems of the children.

Families need more and more help from the authorities in basic chores at home as well as financial help from the government. The authority has become the "next of kin".

A general practitioner is one part of the support network available for families in the health care section. Can we use our position the right way? Families that attend arranged health checks are usually those who have no problems coping with their lives. However, we also meet children and their parents in acute medical cases, which gives us the opportunity to influence parents and offer support. We must also act as the guardians of the children's interests and intervene whenever we see that a child is being mistreated.

The concept is that general practitioners in Europe could act as the guardians of children's interest and, at the same time, also support parents. What could be the objectives of this work?

- Promoting the mental and physical welfare of children during the early years
- Reducing alcohol and drugs use among children and adolescents
- Preventing smoking during the early years
- Helping children to grow into well-adjusted adults
- Reducing accidents in childhood

Possible means:

- Supporting families in parenthood
- Promoting the mental and physical welfare of mothers
- Advising on exercise and healthy eating habits
- Recognising problems early enough
- Working with schools
- Guaranteeing a safe living environment
- Ensuring that a sufficient amount of healthy food is available
- Starting the prevention of national diseases (DM, hypertension, coronary disease, hyperlipaemia, alcoholism) from early childhood

Are we willing to create a program to ensure the welfare of children? Often the general practitioner is the first step when people seek help for a health problem that could, in many cases, have been prevented. Often we are the ones who have a contact with the family and can view the family situation as a whole. We are in a key position when it comes to helping families.

Further actions:

Contention for children: Children have the right to a good childhood!

How can we as GPs support this challenge?

This needs further charting! Basic health care must extend to children who have no say in matters that concern them. We must have the right and the courage to intervene whenever there is a problem. We need information on the welfare of children in our own county.

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