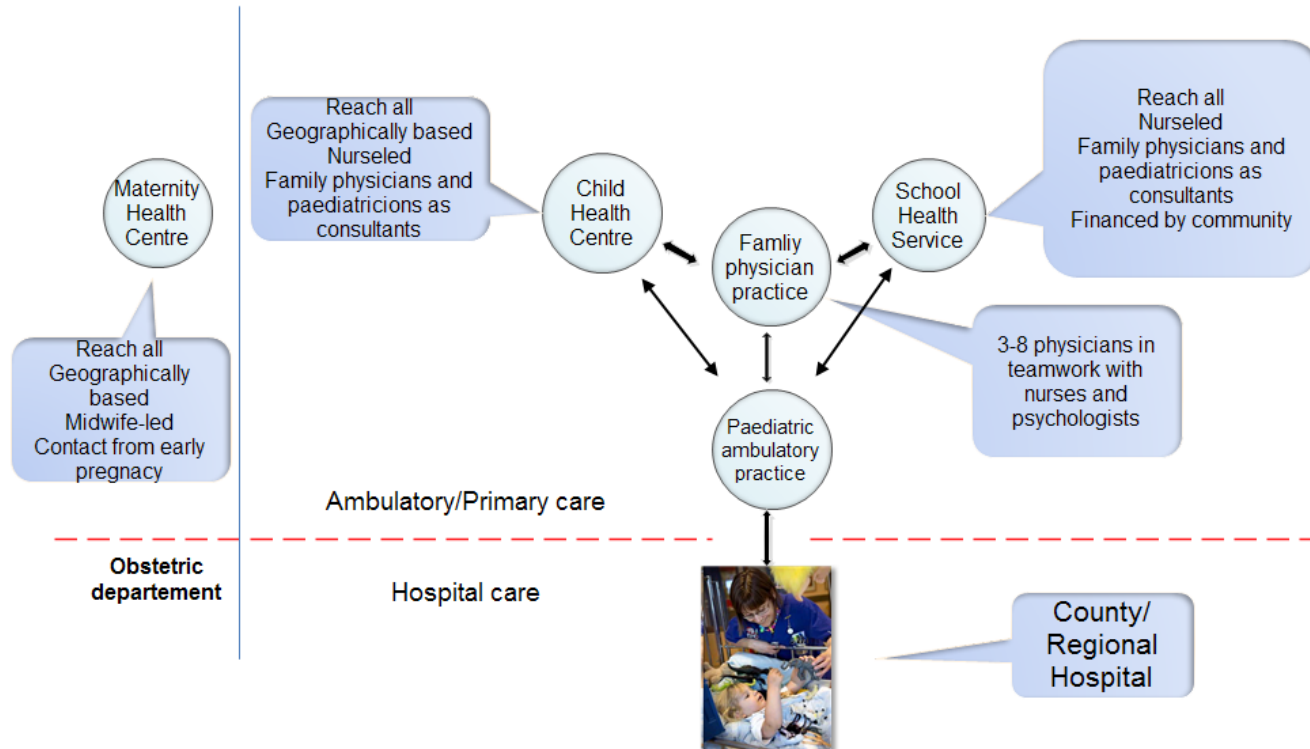


Swedish Child Health Care

Björn Wettergren
MD, PhD

Swedish health care

- Almost all is publicly financed
- Decentralized to 21 counties or regions
- Based on local taxation in each county/region
- Can be run by private caregivers, but is financed by public funds
- Secondary and tertiary care is mostly run publicly
- Primary care is a mix between publicly and privately run offices
- Same cost for the patient in privately or publicly run health care
- Specially trained nurses have duties and responsibilities of their own which are well defined and regulated in legal documents



Maternity health care

- Reach all and usually at an early stage of pregnancy
- Midwife led
- An obstetrician as medical director in each county

Child health center - Meeting the nurse, getting a relationship



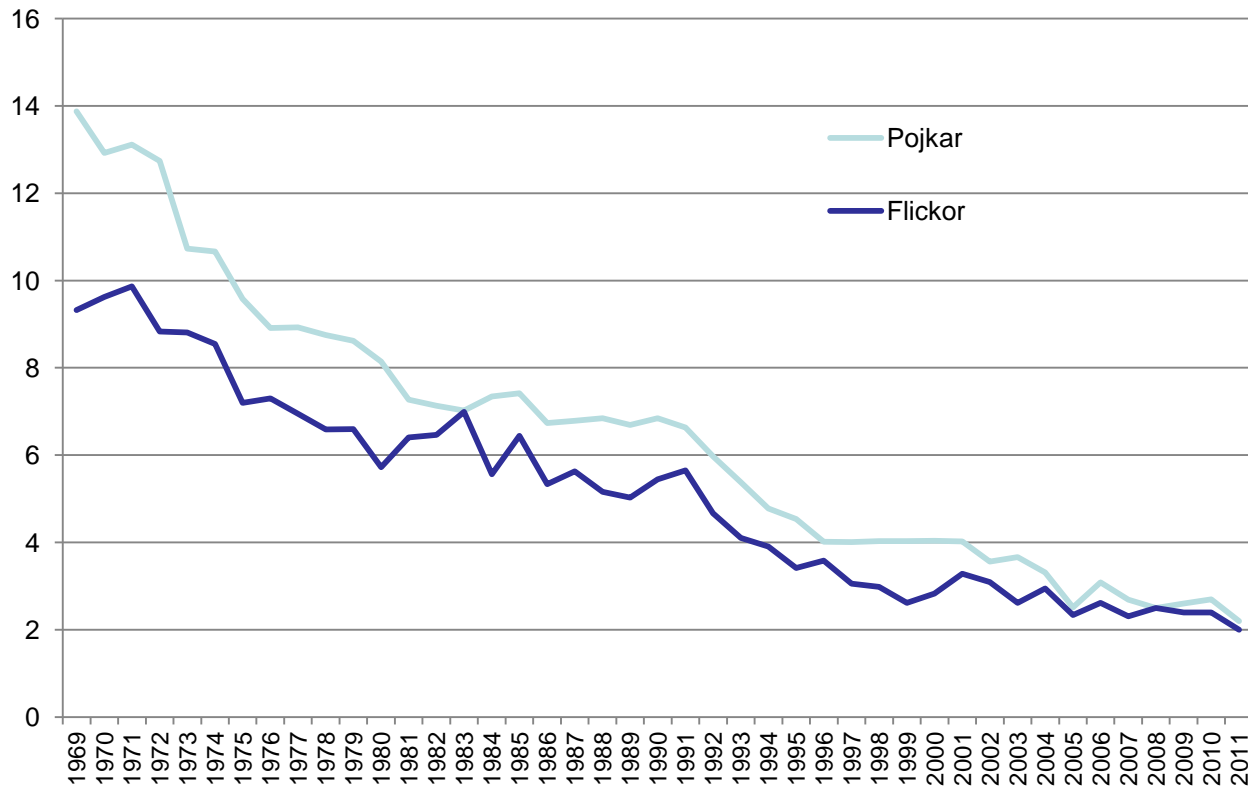
Child health care center

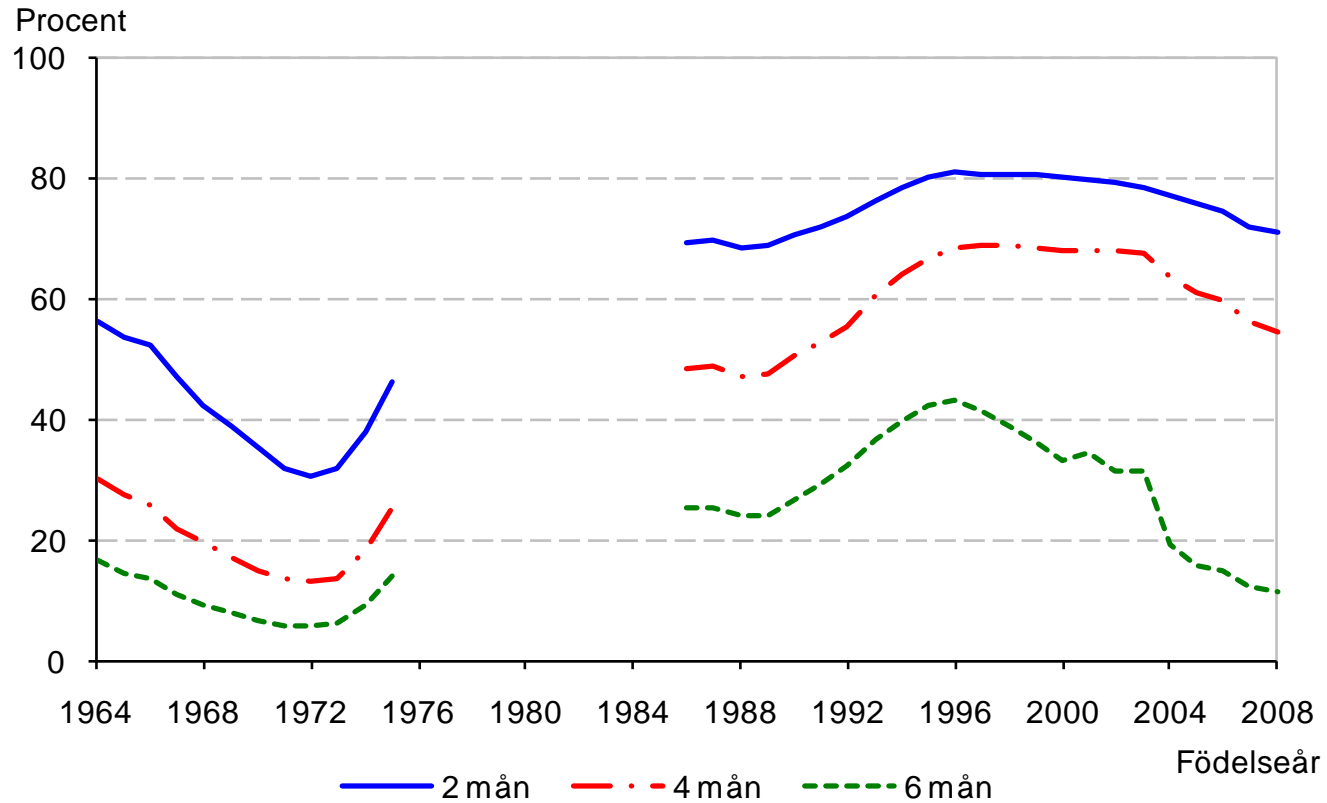
- Reach all independent of social class
- Nurse-led
- Family physicians in the front line
- Ambulatory paediatricians as consultants
- A paediatrician as medical director in each county
- Since more than 50 years focus on vaccination rates, accident prevention, breastfeeding, exposure for tobacco smoke

School health care

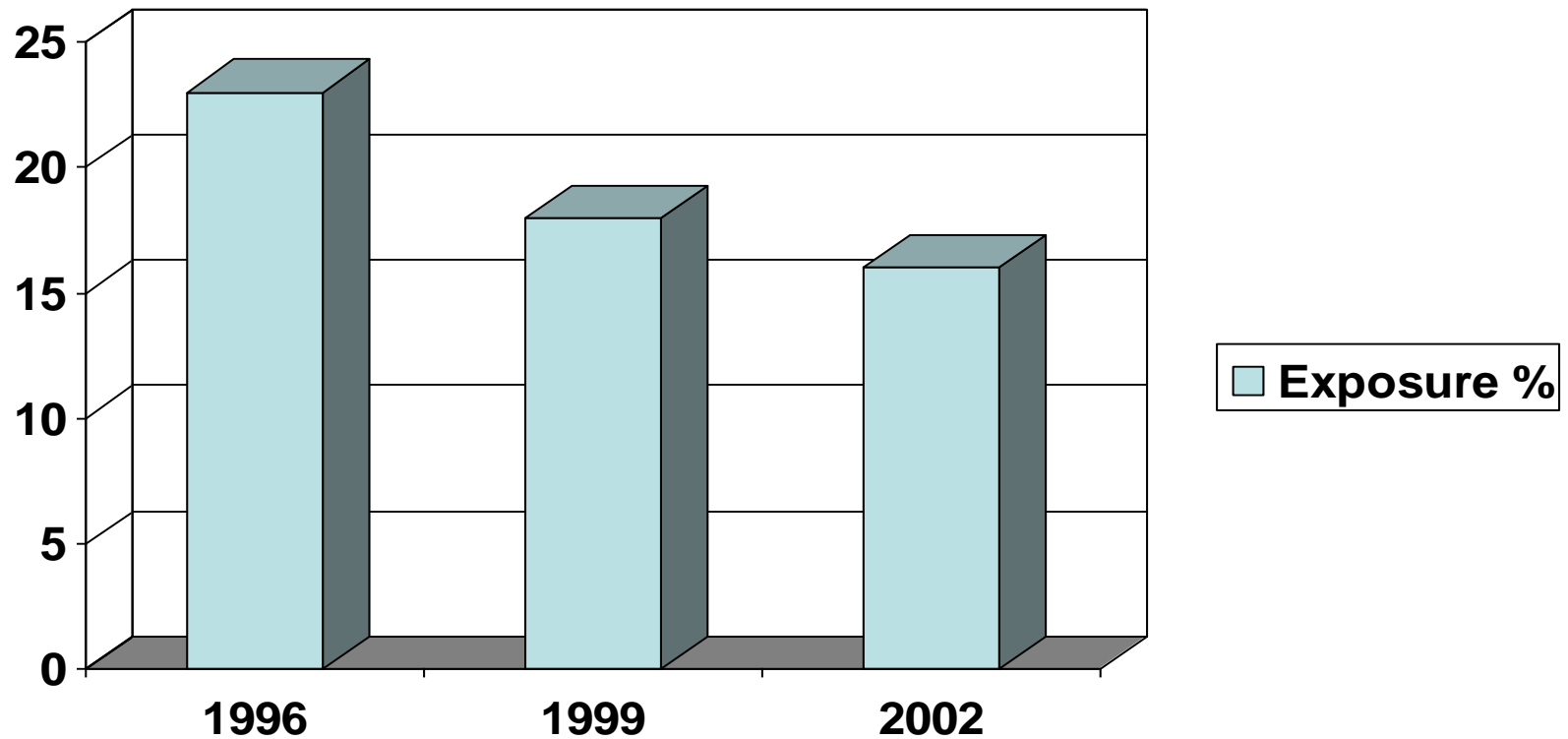
- Financed by the community
- Reach all
- Nurse-based
- A mix of family physicians and ambulatory paediatricians

Infant mortality

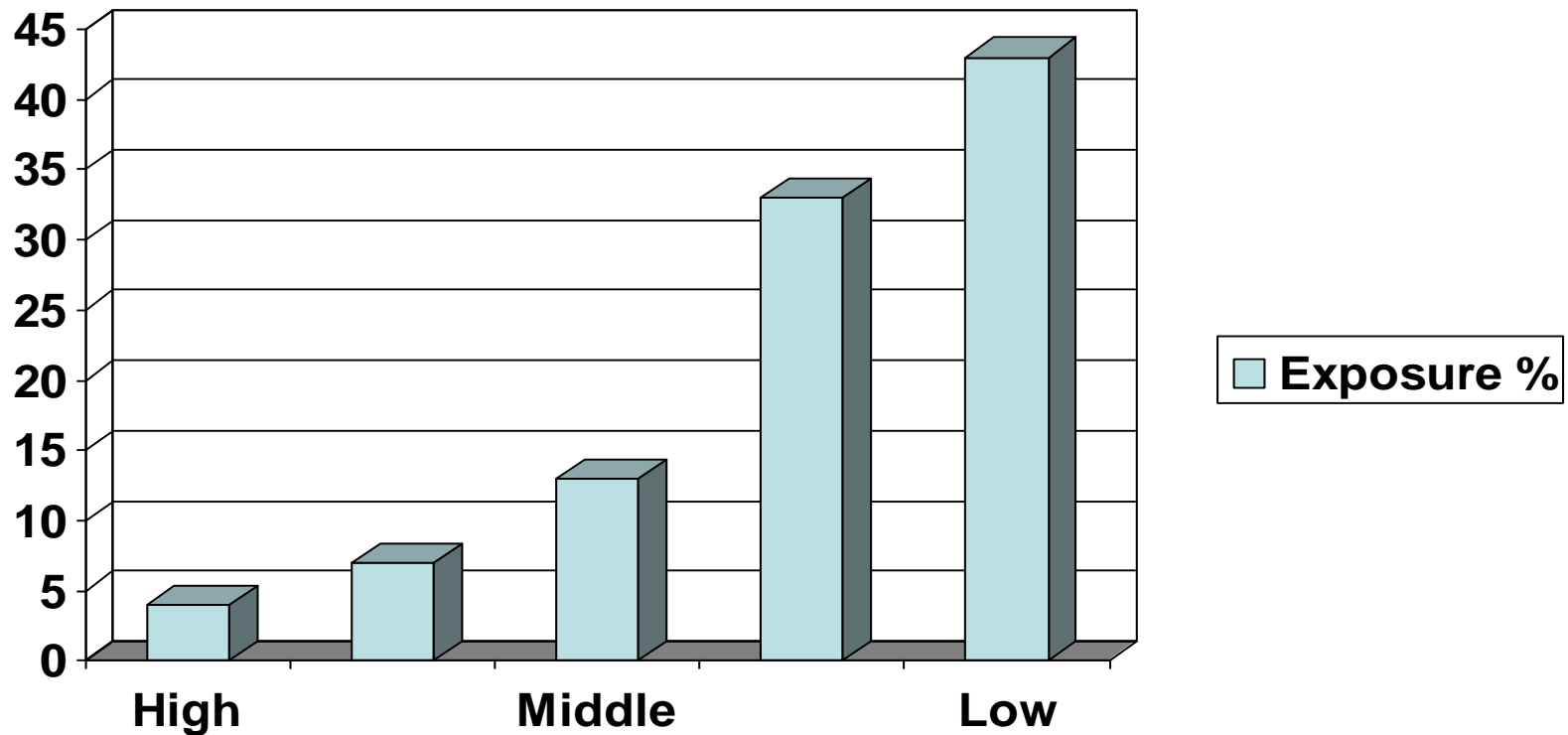




Exposure for tobacco smoke at home at 8 months of age



Exposure for tobacco smoke at 8 months of age related to socioeconomic background



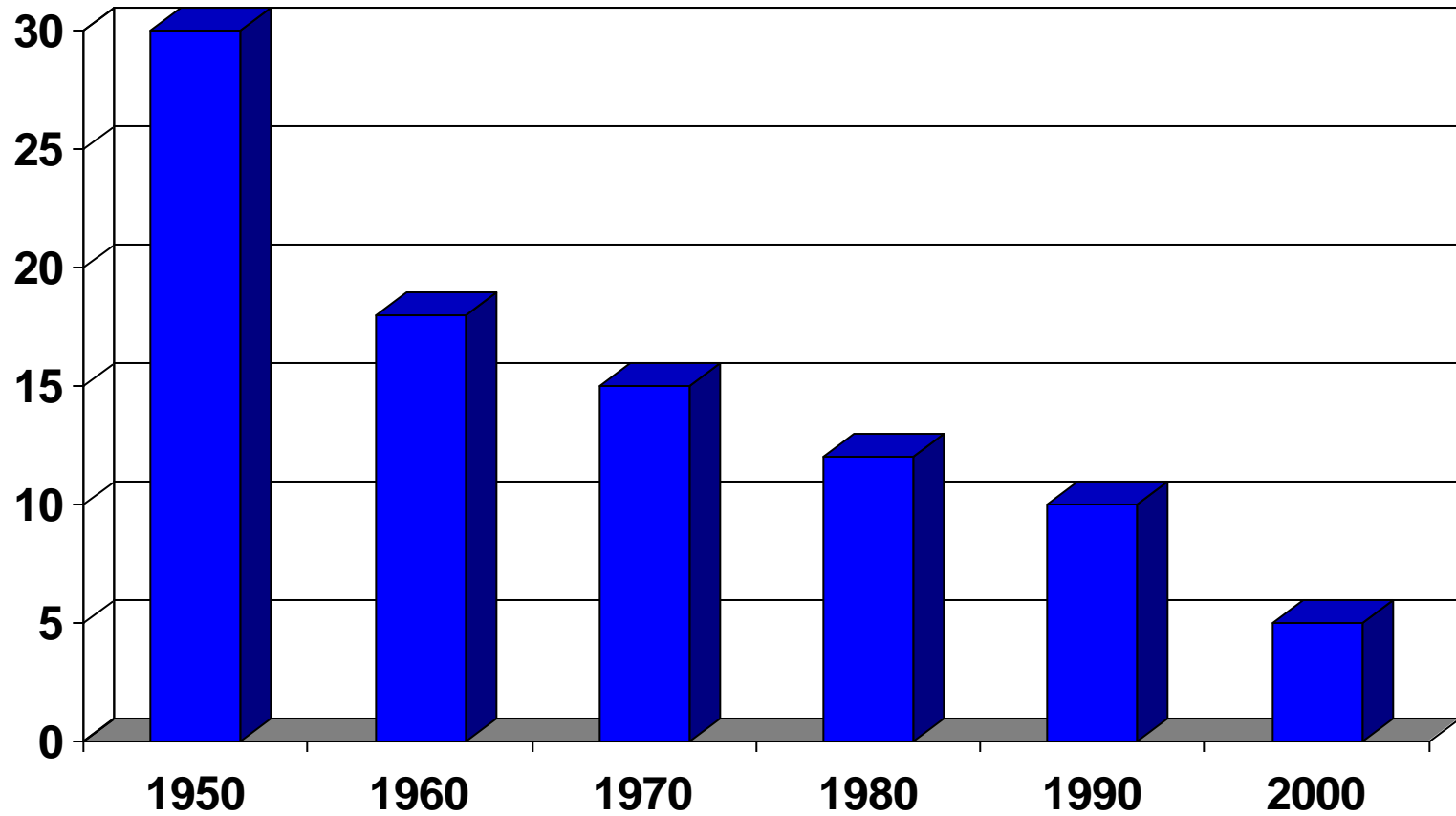
Accident prevention in Swedish children



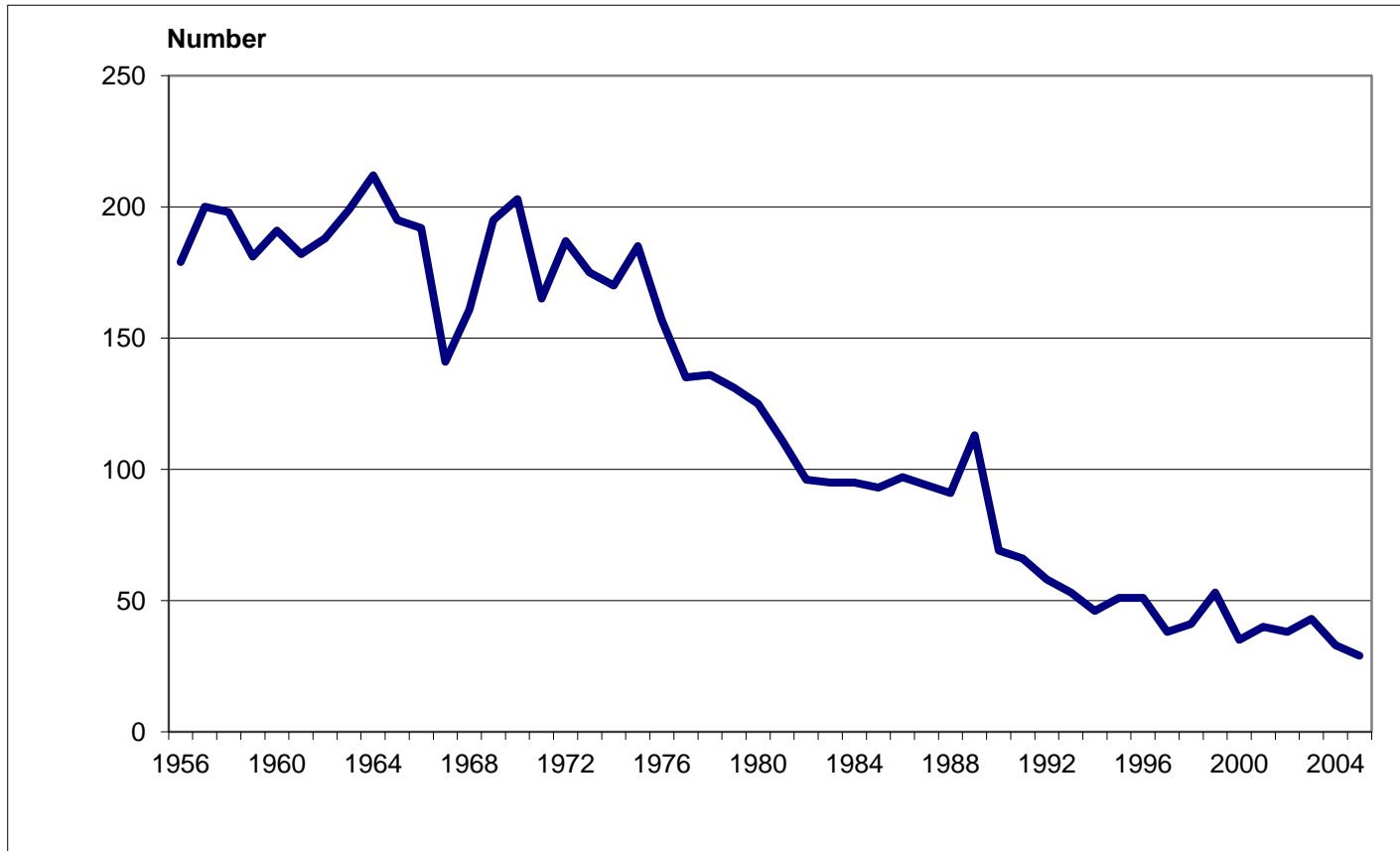
A STEP BY STEP APPROACHE

Child injury mortality rate

Death per 100 000 children 0-14 years



Mortality in road accidents 0-17 years

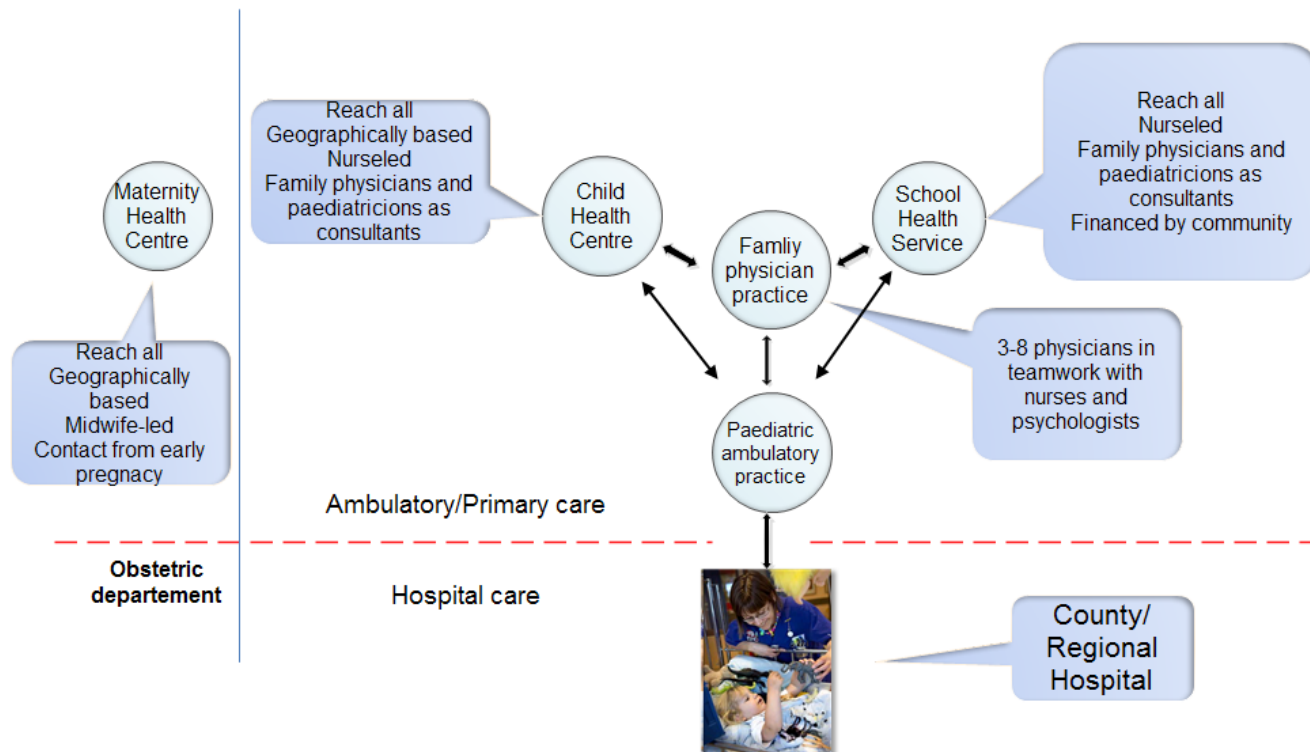


Combined efforts

- **National level**
- **County level**
- **Community level**
- **Market**



- The first product on the market was developed in Sweden.
- At the start parents to newborns could borrow the seats from the Child Health Care financed by the county.
- Accident prevention included in the Child Health Care program and starts with a home visit when the child is newborn



Family physician office

Five years training.

Three months of paediatric included in the training.

Teamwork (5-10 family physicians per office)

- The staff includes
 - Nurses
 - Psychologists

Paediatric ambulatory care in the Göteborg area

- Aim: High paediatric quality close to the child's own context
- One paediatrician per 5000 – 6000 children aged 0-18 years
- Working mostly on a secondary care level
- Teamwork (3-5 paediatricians per office)
 - The staff includes
 - Nurses
 - Psychologists
 - Dieticians
 - Speech therapists

Paediatric ambulatory care in the Göteborg area

- Organized within the primary care sector
- Close connection with family physicians
 - Education
 - Consulting
 - Guidelines
 - Acute and chronic diseases
 - Referrels

Paediatric ambulatory care in the Göteborg area Close connection with...

- Child and school health care
- Child psychiatry units
- Habilitation centers
- Youth clinics
- The children's university hospital (Queen Silvia)

Key messages

- A stable society open for reforms, child allowance, parental benefits
- A legal system that is robust against corruption
- A national health system, equally available to everyone independent of socioeconomic status
- A school system free for all and also a pre-school system available for all
- High paediatric competence both in inpatient and outpatient care.
- A preventive maternity, child and school health care that is free of charge and reaching all and preferably midwife-led and nurse-led
- Focus on primary prevention in all sectors of society

How can we learn from each other?

- Do not focus on the organisations, look at the processes
- Study the pathways
- Analyse the background when not doing so well
- See every missed child as a failure

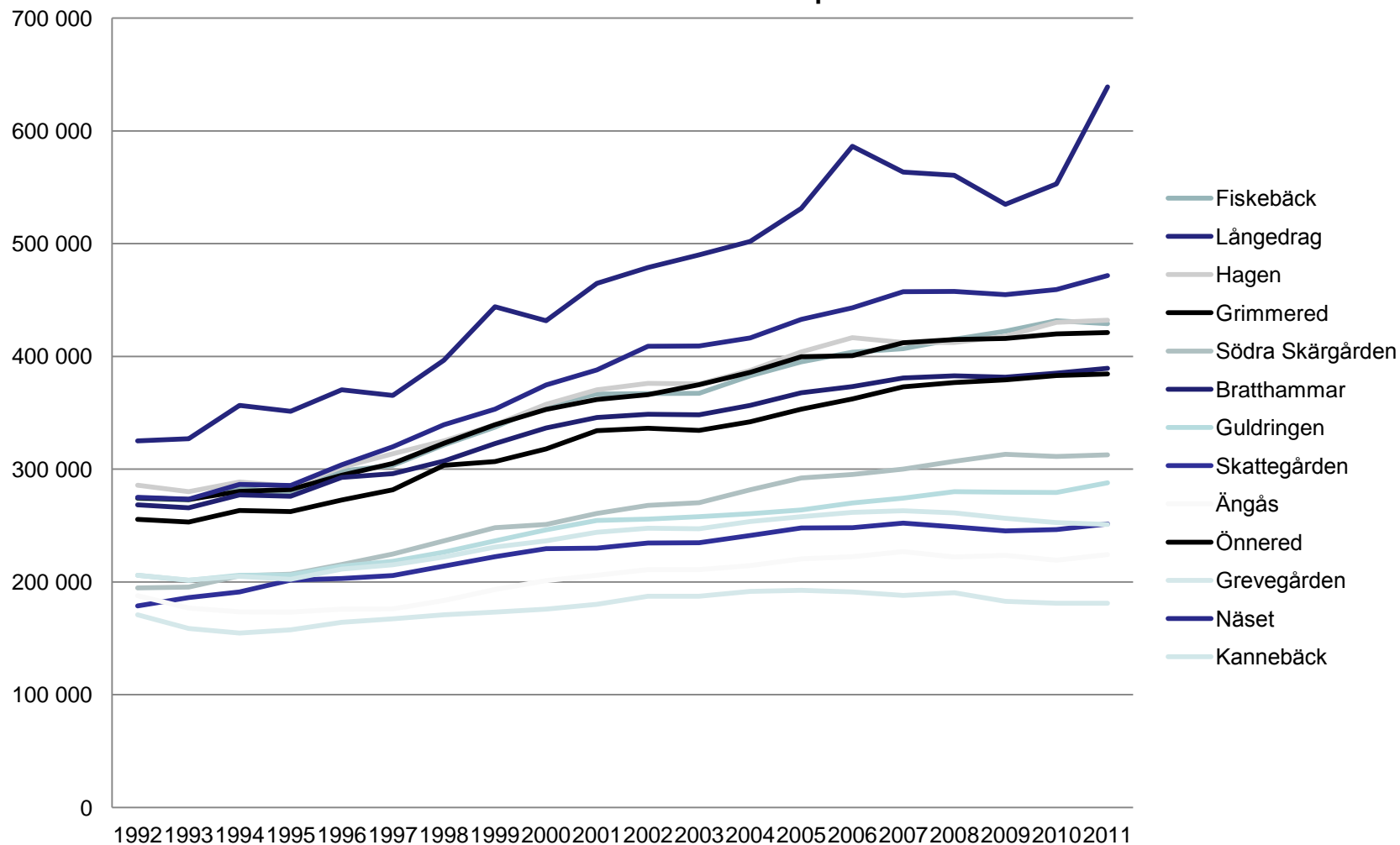
Together we can maximize

Närhälsan

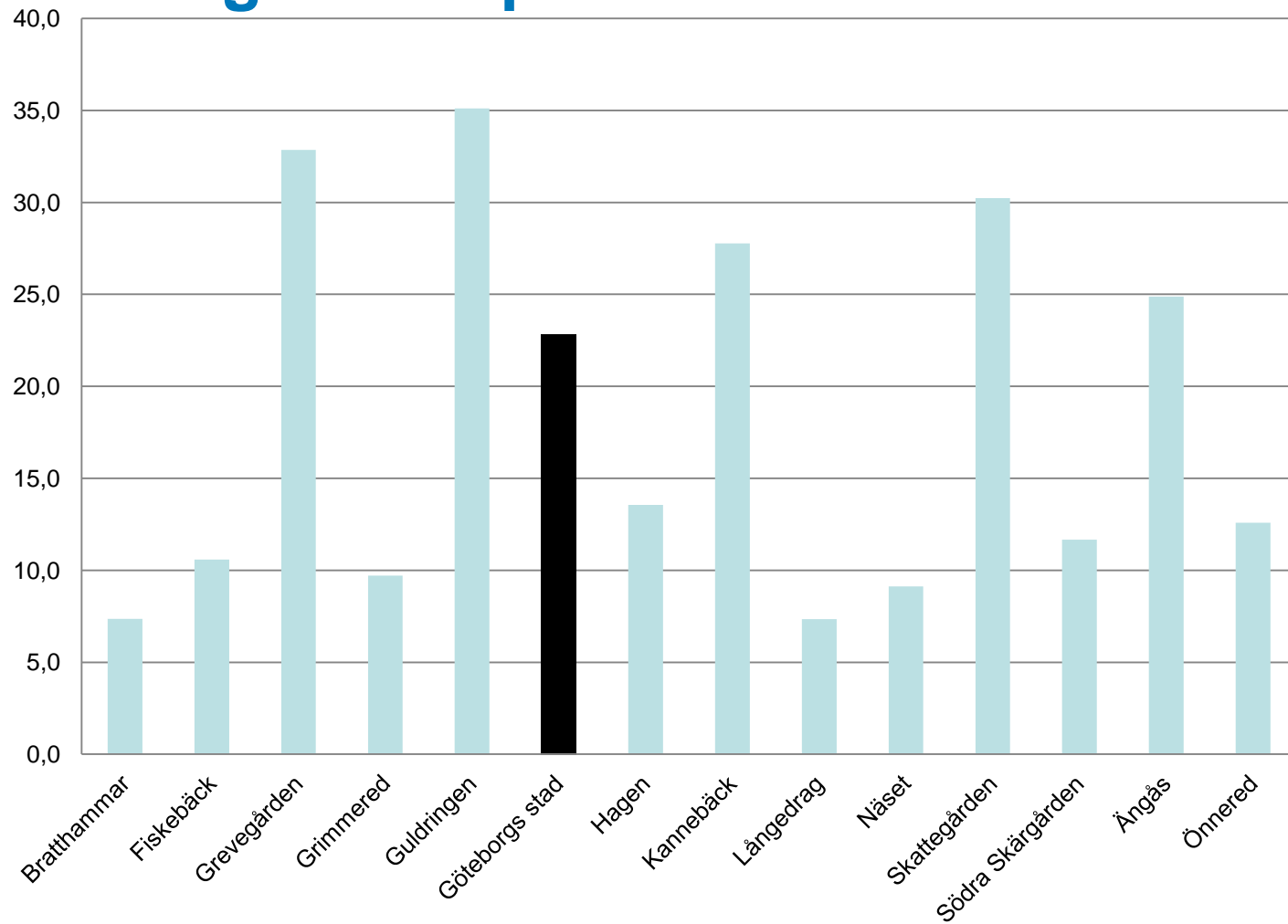


every child's comfort

Medelinkomst - Västra Göteborg omräknat till 2011 års priser



Children in Göteborg (0-17 years) Närhälsan living in one parent households



Hidden in our three biggest cities we find areas of the new poverty in Sweden. In these areas the unemployment can be about 80%. The amount of children that finish school without graduation can also be about 80%. We reach these children with our asthma inhaler devices and when they are seriously ill but not concerning...

- Life style
- Risk behavior
- Early recruitment to criminality

Combined efforts and new thinking is needed!

Factors behind the success

- Political stability and prolonged peace
- Stable economic development with low unemployment and openness for reforms
- A compulsory school system free for all
- A national health system, equally available to everyone independent of socioeconomic status
- Generous social insurance policy which includes a child allowance, parental benefit (parental leave) and a temporary parental benefit (when the child is sick).

Key messages

- A stable society with low corruption and an economy allowing health reforms
- A compulsory school system free for all and also a preschool system available for all
- A national health system, equally available to everyone disregarding socioeconomic status
- High paediatric competence both in inpatient and outpatient care
- A preventive focus in all sectors of the society
- A preventive maternity, child and school health care that is free of charge and reaching all and preferably midwife-led and nurse-led

Who dares to bribe this guy?

