



## European Pediatricians: Speaking with One Voice to Advocate for Children and Their Health

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In May of 2019 the European Paediatric Association, which is the Union of National European Paediatric Societies and Associations (EPA/UNEPSA), and the European Confederation of Primary Care Paediatricians (ECPCP) signed a key partnership memorandum of understanding, which marks an important step for European pediatricians toward the goal of speaking with 1 voice to advocate for children and their health. These 2 European pediatric societies together represent more than 200 000 European pediatricians working in primary, secondary, and tertiary pediatric care.

Despite frequent public statements regarding the importance of adequately supporting child healthcare, in reality pediatric care in Europe is traditionally not sufficiently prioritized by national authorities involved in the key decisional processes related to children's health. Consequently, the responsibility for children's primary care is frequently transferred to health care professionals other than pediatricians who have received limited pediatric training.<sup>1</sup> Key decisions regarding this important aspect of child health are based on changing political visions and policies of single nations and frequently are impacted by economic contingencies. This is despite the evidence that primary pediatric care provided by pediatricians achieves important public health goals, such as less hospitalization of children, higher vaccination rates, and reduced prescription of antibiotics.<sup>2</sup>

The EPA/UNEPSA, ECPCP, and the European Academy of Pediatrics, currently the 3 main European pediatric organizations, are characterized by several common features, objectives, and ambitions. However, their ability to effectively interact with national and international public health authorities and legislators has been traditionally limited by their inability to speak with 1 voice to advocate for children and their health. The agreement between the EPA/UNEPSA and ECPCP will pave the way for achieving a unification of all European pediatric forces actively engaged in protecting children's health and promoting their well-being.

### Mission and Objectives of the EPA/UNEPSA

EPA/UNEPSA, the union of the major national European pediatric societies and associations, operates on a nonprofit basis. Founded more than 40 years ago with the purpose of building scientific bridges between Eastern and Western Europe, which were then separated by the Iron Curtain, the EPA/UNEPSA has become the largest European pediatric organization. The main objectives of EPA/UNEPSA are to promote child health and comprehensive pediatric care, and to encourage the scientific cooperation and interaction between the national European pediatric scientific organizations, as well as among European pediatricians working in primary, secondary, and tertiary care.

The EPA/UNEPSA is active in promoting and supporting scientific and editorial projects in the area of pediatric health care, working closely with the major international organizations, including the World Health Organization, the United Nations, and the Council of Europe. Since its foundation in 1976, the EPA/UNEPSA has encouraged the education of patients, families, and care givers by making available specialized knowledge to generalists. Throughout the years, it has worked to improve the quality of pediatric care in all European countries, including both member and nonmember states of the European Union, by promoting the importance of clinical research and its implementation into practice. As a pan-European pediatric association representing 50 different national groups and organizations, the EPA/UNEPSA embraces diversity and fosters the exchange of experiences and cooperation among all European pediatricians.

### The Role of the ECPCP and Its Goals

The ECPCP represents more than 30 000 European pediatricians, members of 22 societies from 18 European countries, engaged in community pediatrics and primary childcare. The ECPCP regards infants, children, and adolescents as its

EPA/UNEPSA European Paediatric Association/Union of National European Paediatric Societies and Associations  
ECPCP European Confederation of Primary Care Paediatricians

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**Table. Joint activities and aims agreed between EPA/ UNEPSA and ECPCP**

- Create synergies wherever possible between both organizations and their members.
- Exchange and disseminate information on reciprocal activities and projects to their respective networks.
- Advertise the periodical conferences/meetings of the 2 organizations.
- Work to develop a periodical joint meeting/congress and share its scientific program.
- Develop joint educational activities/projects.
- Develop joint editorial activities/projects.
- Consult and share the texts of future recommendations, guidelines, and statements involving child health and care, before releasing any document, which could be in contrast with the principles of the 2 organizations.
- Pursue a common strategy leading to the development of a common unique organization including ECPCP, EPA/UNEPSA, as well as EAP and other major European associations.
- Develop an effective format to enable the existing European societies to more effectively and efficiently speak with 1 voice advocating for European children and adolescents, while being respectful of the reciprocal areas of interests, missions, and expertise of the participating organizations.

main subject of care, respecting their autonomy and involving parents, guardians, and/or custodians as integral part of the “unit of care.” Their strong conviction is that pursuing this goal relies on the development and implementation of attainable and accessible primary healthcare services and facilities of the highest standards in all countries in accordance and fulfillment of the Alma Ata declaration,<sup>3</sup> the United Nations Convention on the right of Children, and the World Health Organization Charter.<sup>4</sup>

The ECPCP advocates for the role of pediatricians as deliverers of primary care in the community from postnatal health care to late adolescence. It has developed procedures and trained personnel to define and develop tools useful to optimize primary care services in the countries that have chosen pediatricians as primary caretakers. Pediatric primary care is in many situations delivered by professionals other than pediatricians; these individuals may lack adequate scientific knowledge, proper skills, and formal training, which are key elements required for the provision of adequate health-care. Therefore, the ECPCP, with the strong support of its member societies, has chosen to broaden the activities of the organization and actively work and collaborate with organizations of other European and non-European countries lacking facilities and funding for primary care pediatricians, with the aim of ensuring that optimal levels of primary care will be also provided.

### The EPA/UNEPSA and ECPCP Joining Forces to Advocate for European Children

The ECPCP and EPA/UNEPSA are convinced that a systematic and coordinated interaction of primary, secondary, and tertiary care specialist pediatricians is essential

to the health and well-being of children. Both organizations recognize the importance of working closely and jointly designing and developing a common strategy that will enable European pediatricians to speak with an influential and authoritative voice on behalf of European children and adolescents.

The EPA/UNEPSA and ECPCP believe that a strong and united voice is needed to raise the awareness of national and international legislators about the importance of child and adolescent health for the future of the European continent.<sup>5</sup> A joint effort by the main European pediatric organizations will effectively promote the importance of the accessibility to the best care available for all children living in Europe, who should benefit from cutting-edge scientific research and discoveries that are protected by age-appropriate laws and regulations.<sup>6</sup>

Both the ECPCP and the EPA have agreed to work together in an egalitarian spirit to develop joint projects and activities and to accomplish common future goals (Table).

### Conclusion

Having assessed the needs of their member pediatric societies, EPA/UNEPSA and ECPCP are actively collaborating to form a joint umbrella European pediatric organization with the goal of uniting the voices, actions, and visions of European pediatricians to protect and promote the health and well-being of children in Europe. ■

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### References

1. Pettoello-Mantovani M, Ehrich J, Romondia A, Nigri L, Pettoello-Mantovani L, Giardino I. Diversity and differences of postgraduate training in general and subspecialty pediatrics in the European Union. *J Pediatr* 2014;165:424-6.e2.
2. Ehrich J, Tenore A, Del Torso S, Pettoello-Mantovani M, Lenton S, Grossman Z. Diversity of pediatric workforce and education in 2012 in Europe: a need for unifying concepts or accepting enjoyable differences? *J Pediatr* 2015;167:471-6.e4.
3. World Health Organization. Declaration of Alma-Ata. International Conference on Primary Health Care. Alma-Ata, USSR, 6-12 September, 1978. [http://www.who.int/publications/almaata\\_declaration\\_en.pdf](http://www.who.int/publications/almaata_declaration_en.pdf). Accessed May 15, 2019.
4. UNICEF. Child poverty in perspective: an overview of child well-being in rich countries. Innocenti Report Card. Vol 7. Florence, Italy: UNICEF Innocenti Research Centre. [www.unicef.org/media/files/ChildPovertyReport.pdf](http://www.unicef.org/media/files/ChildPovertyReport.pdf). Accessed May 15, 2019.
5. Ehrich J, Namazova-Baranova L, Pettoello-Mantovani M. Introduction to “Diversity of Child Health Care in Europe: a Study of the European Paediatric Association/Union of National European Paediatric Societies and Associations”. *J Pediatr* 2016;177(Suppl):S1-10.
6. Ehrich J, Kerbl R, Pettoello-Mantovani M, Lenton S. Opening the debate on pediatric subspecialties and specialist centers: opportunities for better care or risks of care fragmentation? *J Pediatr* 2015;167:1177-8.e2.