

**ID: 196/ADOLESCENT MEDICINE: 6**

Oral Presentation

**Learning from Success: The Implementation and Evaluation of a National Strategy to Reduce Alcohol Problem Drinking among Israeli Youth: A Nine-Year Follow-Up 2010–2019.**

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**Introduction:** Renewed conceptual frameworks focusing on well-being, resiliency, and positive youth development, have caused a major shift in the focus of policy and intervention strategies aimed at reducing adolescent risk behaviours. The World Health Organization—Health Behaviour in School-Aged Children (WHO-HBSC) cross-national survey has monitored these changes throughout the past three decades in over 45 countries in Europe and North America.

**Discussion:** While Israel has usually shown relatively low and stable rates of adolescent smoking, drinking, and drug use, the rates of problem drinking increased dramatically during the 15-year period of 1994 till 2009. The rate of binge drinking in the past 30 days for 11–15 years-old teens tripled from 6.2% in 1994 to over 20.6% in 2009. Findings were cleverly disseminated to the press, the Israeli Parliament (Knesset), and targeted cabinet members. Consequently, the government-funded the development and implementation of a comprehensive, long-term national program to reduce problem alcohol drinking among young people. The program was funded and implemented in three consecutive stages—2010–2012, 2012–2014 and 2014–2016 and was coordinated by the Israel Anti-Drug Authority. Activities included: implementing a comprehensive national strategy, building and maintaining partnerships with all relevant national agencies and local authorities, developing consistent and coherent messages, implementing effective national media campaigns, developing, passing and enforcing a host of new legislation, implementing a wide variety of age-specific school-based programs, implementing comprehensive community-based intervention strategies at the local settings, and more.

**Results:** The impact of the national program on national rates of youth binge drinking was monitored by the HBSC survey throughout the program period and till the recent survey of 2019. Findings from the HBSC study show that as a result of this national intensive program, binge drinking is Israeli youth dropped from 20.6% in 2009 to 12.4% in 2011, to 10.7% in 2014, and finally in 2019 to 6.2%. All in all, binge drinking dropped to about one-third (!) of its magnitude in 2009, prior to the implementation of the national program.

**Conclusion:** The paper presents findings of the evaluation study that followed the program and discusses the unique characteristic of the program that led to this remarkable success in reducing rates of on a national level.

**ID: 192/ADOLESCENT MEDICINE: 7**

Oral Presentation

**Sexual Behaviour in Adolescence, Far Beyond the Individual Choice: The Role Of Family, Peer and School Connection.**

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**Introduction:** Dealing with young people’s sexual health, in particular, increasing their commitment to timely and safe sex, has become an important issue for developed countries. While the majority of adolescents with an early sexual debut may be sexually competent, many are not. Although Sexual Intercourse (SI) is not in itself a risky behaviour, it can be a threat to wellbeing if it occurs at an early age and/or is associated with the use of inconsistent protective and contraceptive methods.

**Purpose:** The study aims to investigate first SI occurrences and the use of contraceptives in Italian adolescents discussing the role that family, peers, and school support can have.

**Materials and Methods:** Data were collected from the Italian 2014 Health Behaviour in School-aged Children (HBSC) study, a collaborative cross-national survey involving more than 45 countries. According to the international protocol, a representative sample of 47,912 students aged 11, 13, and 15 years were recruited from school classes in Italy. For the study aims, analyses included 15 -years-old students' responses, with a final sample of 13,611 youths. Data on age of first intercourse and the use of contraceptives in the very last SI, in relation to multidimensional scales for family, peers, and school support, were analysed through a multi-level adjusted logistic regression analysis, controlling for socio- and geographical-demographics.

**Results:** 24% of 15-yo have had SI, for the 37% of them it happened, prematurely, before the 15th year-of-age, being more frequent in males. Among those who had SI, 72% declared condom use (more frequently in males), 39% withdrawal (more frequently in females), and 12% pill with no gender differences. The 70% of youth reported high family and high peer support; high school support was only about 50%. Family (OR = 0.75; 95%IC 0.6; 0.9 for males and OR = 0.66; 95%IC 0.6; 0.7 for females) and school support (OR = 0.72; 95%IC 0.6; 0.8 for males and OR = 0.63; 95%IC 0.5; 0.7 for females) were positively associated with a less occurrence of SI while peer support showed an inverse association (OR = 1.64; 95%IC 1.3; 2.0 for males and OR = 1.18 non-significant for females). Students of both genders with high school support had a lower risk of reporting premature SI. Higher likelihoods of condom use for school support were significant only in the females (OR = 1.45; 95%IC 1.01; 2.1).

**Conclusions:** Sexual behaviours are only partly an individual issue, social relationships showed to have a role in adolescents' sexual choices, with notable differences between family or school support and peer support. Accordingly, Public Health initiatives dealing with sex education in communities should take into account a different approach, also involving community pediatricians because of their important connections with adolescents' families.

ID: 293/ADOLESCENT MEDICINE: 8

Oral Presentation

The Early bird Catches The Worm: Associations Between Adolescents' Sleep Chronotype, Sleep Duration and School Experience

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**Introduction:** Adolescents' subjective experience at school precedes health and wellbeing outcomes, including self-harm, depressive symptoms, and anxiety, and is associated with academic performance. As such, it is necessary to identify factors associated with school experience to inform intervention efforts. Sleep represents a plausible but relatively understudied factor in this context. This represents a salient knowledge gap given that adolescents are more likely to prefer to fall asleep and wake up at a later point in the day than at any other life stage.

**Purpose:** This study aimed to investigate the relationship between sleep (duration and chronotype) and indicators of the school experience.

**Materials and Methods:** Data were obtained from the 2014 Health Behaviour in School-aged Children (HBSC) Study in Scotland. This school-based cross-sectional sample of 10,839 Scottish adolescents (aged 11-15) collected self-reported bedtime and wake up time on school days and non-school days. These data were used to calculate typical school-day sleep duration and chronotype (mid-sleep point on non-school days). Indicators of subjective experience at school include: liking school, perceived schoolwork pressure, and load, perceived academic performance, perceived teacher and classmate support, and truancy. Design-adjusted logistic regression analyses were conducted to assess associations between binary school experience outcomes and sleep