

MEETING ABSTRACTS

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Health promotion

A1

- Understanding turning points in the process of changing attitude towards the practice of Female Genital Mutilation among migrant women in Belgium

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Background: The change of any norm is difficult especially if it is a social norm deeply rooted in the traditions and practises of a whole community. It is the case of female genital mutilation (FGM), a social norm and harmful practice where women are not only victims, but they are also the perpetrators. However, some women have changed their attitude towards the practice. This study seeks to explore how the change occurs. Thus, it investigates significant events in the trajectories of the migrant women in relation to their change of attitude.

Methods: Fifteen women with FGM living in Belgium were recruited through gatekeepers and snowball procedure. They were met twice for individual interview using biographical narrative interview method. Congruently with this interview method, we did not have a structured interview guide. The analysis drew on a life story approach and lifeline constructions to identify significant and common turning points (TP) by which the change occurs.

Results: Six important TP were identified as factors of awareness leading to a change of attitude and in relation to a challenge of related norms: *change in the perception of pain; sense of responsibility to protect daughters; confrontation with the anatomy of an intact female external genitalia; awareness through the confrontation with other women's cultures; awareness that they are not defined exclusively by FGM. The change in the representation of pain during sexual intercourse, for example, was considered normal in the home country but was no longer perceived as normal in Belgium by most research participants. This TP challenged the norm 'women must endure pain and suffering'.*

Conclusions: Professionals working with women who have undergone FGM may use the TP to give awareness in order for other women to take action and change their attitude towards the practice.

Keywords: FGM, migrant women, turning points

A2

- How to tackle nursing students' self-esteem decline? A qualitative phenomenological study

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Background: Self-esteem is proved to have a significant impact on nurses' professional behaviour and competence. Previous studies have

highlighted that nursing students reported a lower self-esteem than the general population of other students. Moreover, other reports have pointed out a decrease in self-esteem during the education process of nurses. The aim of this study was to explore the key factors and mechanisms involved in the self-esteem of nursing students.

Methods: A purposive sample of 41 (33 females and 8 males) first- and second-year nursing students from 4 Belgian Colleges was interviewed in order to investigate perceived self-esteem and potential influencing factors selected from an integrative literature review. A phenomenological thematic analysis was done using NVivo 12 and themes were assembled in an explicative model following Mruk's theory (2013).

Results: Students described their self-esteem during the first two years of education as being highly unstable. Mruk explains such variations through what he calls 'self-esteem moments', which are related to various stress factors including (1) frequently having to be accepted in new groups (as during training periods) and (2) rapidly and recurrently having to prove their competence. Students described two moments mostly impacting their self-esteem: (1) the training period and particularly the nursing teams' and teachers' attitudes; and (2) receiving their exam results. Students reported that such 'self-esteem moments' influenced their professional behaviour, leading to either proactive engagement, or defensive withdrawal. The level of engagement fostered more or less the competence development, forming a circle either virtuous or vicious.

Conclusion: These first results allow to identify the perceived critical 'self-esteem moments' at the beginning of nursing curriculum and to explore their consequences on students' self-esteem and engagement. Based on these results, actions focusing on self-esteem moments and on students' ability to cope with them could be suggested to nursing schools.

Keywords: self-esteem, nursing student, clinical competence

A3

- Knowledge, attitude and practices of pregnant women and gynaecologists-obstetricians regarding omega-3 polyunsaturated fatty acid consumption during pregnancy

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Background: Omega-3 polyunsaturated fatty acids (n-3 PUFA) during pregnancy have been subject to large media coverage, early and non-definitive research on health benefits and absence of consensual guidelines for the management of nutrient deficit. These conditions have shown to create a situation of confusion among both patients and healthcare providers. This cross-sectional study was carried out to explore knowledge, attitude and practices regarding n-3 PUFA in two independent populations of pregnant women and gynaecologists-obstetricians. The relationship between pregnant women's attributes



and their n-3 PUFA status measured by the omega-3 index (IOM3) was also investigated.

Methods: Participants included 122 women in early pregnancy and 67 gynaecologists-obstetricians. Knowledge, attitude and practices were collected by self-administered questionnaires. Fasting blood specimens were obtained from each pregnant woman at recruitment for testing for IOM3. The IOM3 was defined as erythrocyte eicosapentaenoic plus docosahexaenoic acids expressed as weight percentage of total fatty acids.

Results: Marked discrepancies in perception were observed between the pregnant women and the gynaecologist-obstetricians. While 82% of the women gave high importance to n-3 PUFA during pregnancy, only a third did so among health providers. About 35% of the women declared paying particular attention to their n-3 PUFA intake. After adjusting for sociodemographic characteristics, these favourable dietary practices were significantly associated with higher omega-3 index ($p=0.04$). Overall 43.3% of the professionals didn't provide any information about n-3 PUFA to their pregnant patients and 46.3% didn't implement any preventive actions when suboptimal n-3 PUFA levels were suspected.

Conclusions: Evidence-based guidelines, refreshment training and communication tools are needed to improve awareness and clinical practices among health providers regarding n-3 PUFA, aiming ultimately at health benefit for both mothers and their children.

Keywords: omega-3 fatty acids, perception, practices, pregnancy, healthcare professionals

A4

- Male partners' information needs, information seeking behaviour, and decision-making during the first time pregnancy of their female partners in Nigeria: a qualitative study

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Background: Male partners experiencing the pregnancy of their female partners for the first time in Nigeria are often ignorant about what they need to do to encourage a safe and healthy maternity. As key decision makers in the traditional family, male partners can ensure maternal access to resources and support if informed. This study explores the information seeking behaviour, preference of sources and priorities of first-time fathers that influence decision making.

Methods: In this qualitative study, 50 men whose partners have been pregnant within the last two years were recruited from hospitals, public places, churches and recreational centres in rural and urban settings in south-east Nigeria. An interview guide was developed from ideas provided from similar studies in sub-Saharan Africa, with three main questions in mind: what are the information needs of the male partners? how do male partners seek information regarding pregnancy? and how is decision making influenced by their information needs? Data were collected through semi-structured interviews, and the analysis was performed following Braun & Clarke's 6-step method: 1) read data to become familiar with them, 2) develop initial codes, 3) look for patterns and group them into categories and sub categories 4) review categories in relation to coded extracts 5) generate clear names for each theme 6) write-up.

Results: The male partners had similar information needs including financial cost of care and safety of the mother and child, but these needs were prioritised based on their education level, perception of gender roles, location and beliefs. Their decision making regarding the place of delivery was influenced the most by the availability of finances and trust in the professional experience of caregivers.

Conclusion: This study identifies several information needs and avenues to focus on when designing intervention strategies that reach out to male partners to improve their willingness to be involved in pregnancy related care in Nigeria.

Keywords: Information needs, first-time fathers, pregnancy

Epidemiology

A5

- Comparing administrative and survey data for ascertaining chronic disease prevalence

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Background Chronic diseases (CDs) prevalence is often estimated using surveys, disease registers or outpatient records. In the absence of these, administrative databases such as health insurance data can be used. However, the accuracy of case ascertainment in administrative databases is a concern. The aim of this study is to compare prevalence estimates of CDs in Belgium, using the Belgian Mandatory Health Insurance data (BEMAHI) with those obtained in the Belgian Health Interview Survey (BHIS).

Methods: Individual BHIS 2008 data were linked with BEMAHI data ($n=10,828$) using the national register number. CDs in the BEMAHI data were ascertained using previously validated case definitions based on billing information of "disease-specific" drugs (ATC codes). Self-reported CDs were ascertained using a single question "Have you had (name of CD) in the past 12 months?". Weighted prevalence rates from both data sources were available for 7 CDs. Agreement was measured by estimating sensitivity, specificity, positive and negative predictive values (PPV, NPV) and Cohen's kappa statistic (κ) using BHIS data as the reference.

Results: BEMAHI prevalence rates were close BHIS estimates. Agreement was good for diabetes, Parkinson's disease and thyroid disorders (κ range: 0.62-0.77), moderate for cardiovascular diseases ($\kappa=0.58$), fair for epilepsy, asthma and chronic obstructive pulmonary diseases (COPD) (κ range: 0.27-0.38). Sensitivity was moderate to high except for COPD (32.8%) and asthma (32.1%). The specificity was higher than 90% for all the CDs.

Conclusions For several CD, prevalence estimates based on billing data yield similar results as those obtained in a health survey. For CDs which are usually treated with specific medications prevalence estimates based on billing data can be an acceptable alternative. However, if the CD is not unambiguously treated with medication, the risk of misclassification is high, which is for instance the case for asthma and COPD.

Keywords: chronic diseases, linkage, prevalence, administrative data

A6

- Adverse events associated with symptomatic slow-acting drugs in osteoarthritis (SYSADOAs): A systematic review and stratified meta-analysis of randomised, double-blind, placebo-controlled trials

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Background: The SYSADOAs are an important drug class in the treatment armamentarium for osteoarthritis (OA). While some are considered safe, some concerns have been raised about the safety profile of others. We aimed to further assess the safety of various SYSADOAs in the management of OA.

Methods: We performed a systematic review and random-effects meta-analysis of placebo-controlled trials evaluating oral SYSADOAs in patients with OA. The databases Medline, CENTRAL and Scopus were searched. Adverse events (AEs) related to various System Organ Classes were investigated, along with total, overall severe and serious AEs and