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ABSTRACT SUPPLEMENT

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Conclusions:

The study demonstrated moderate trust in societal factors in all countries, with greatest trust in health authorities. This implies that health authorities should have a pivotal role, together with physicians in primary health, in promoting vaccination and educating the general public in the Western Balkans.

Key messages:

- Vaccine hesitancy is identified as one of the crucial contributors to the decline in vaccine coverage in the Western Balkans.
- Vaccine hesitancy is associated with the global crisis of trust in science and institutions.

Abstract citation ID: ckac130.157**Development and early results of a comprehensive sexuality education experience in Italian schools**

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Background:

Comprehensive sexuality education (CSE) is an integrated approach to sexual health and wellbeing promotion, especially effective when performed in school settings, but it is not included in Italian school curricula. This study describes the creation and early results of a pilot experience targeting students attending 20 lower secondary schools (LSS) in 4 Italian regions within EduForIST project, funded by the Ministry of Health.

Methods:

A literature review and a national survey were used to collect guidelines and best practices in the field of sexuality education (SE), along with focus groups and multisectorial expert consultations. The results informed the development of 4 modules of 2 hours each, addressing: changes in adolescence; emotions and relationships; sexual identities and diversity; sexual consent, pregnancy and sexually transmitted infection (STI) prevention, sexual health services. A final session was dedicated to evaluation.

Results:

The pre-test results referred to 14 classrooms of 5 schools within 2 Regions, for a total of 266 students. A high level of uncertainty was reported, regarding the topics of personal identity development (37,4%), experiencing intense emotions during adolescence (18,1%), the definitions of gender identity, sexual orientation and stereotype (42,1%), STI symptoms (58,7%) and prevention (43,4%). The post-test results were available for 153 students. Pre/post analysis showed an increase of correct answers ($p < .05$) for 12/15 items investigated. A total of 102 students responded to the satisfaction questionnaire, with positive results.

Conclusions:

Preliminary results revealed knowledge gaps and high levels of uncertainty among LSS students. Early pre/post evaluation suggested that the pilot activity was effective in enhancing knowledge and decreasing uncertainty in all domains. Evidence collected through this study will foster awareness among policy makers on the value and urgency of introducing CSE in Italian school curricula.

Key messages:

- School-based CSE is the most effective way to positively impact on young people's behaviour and attitudes towards sexuality. However, it is not yet included in Italian school curricula.
- EduForIST pilot activity represents a first step towards the implementation of an evidence-based approach to sexuality education, to be promoted and implemented equally across Italian schools.

Abstract citation ID: ckac130.158**Health literacy and gender differences in colorectal cancer screening**

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Introduction:

Colorectal cancer (CRC) is one of the major causes of death worldwide. Previous research reported differences in screening adherence both by gender and socioeconomic determinants. However, little is known about the extent to which Health Literacy (HL) may affect gender differences in CRC screening rates. Here, we aimed to assess HL levels in both genders and their relations with CRC screening adherence.

Methods:

The study was performed within the Tuscan population sample selected in the Italian Behavioral Risk Factor Surveillance System (PASSI - Progress by local health units toward a healthier Italy) in 2017-2019. Socioeconomic status was measured by education level, occupation, financial status, and nationality, while HL by the Italian version of the 6-items European Health Literacy Survey Questionnaire (HLS-EU-Q6). Multivariate analysis was performed to investigate associations between CRC screening rates, social determinants, and HL.

Results:

Among 4,268 people aged 50-69 years included in PASSI, 64% undergo to CRC screening in the 2 years preceding the interview. No statistically significant differences in screening adherence were found by gender. In the multivariate analysis, the odds of adherence to CRC screening increased in both genders for being aged 60-69 years (Males: OR 1.43, 95% CI 1.12-1.82; Females: OR 1.72, 95% CI 1.37-2.14) and high education level (Males: OR 1.34, 95% CI 1.08-1.66; Females: OR 1.30, 95% CI 1.05-1.60). Males with a poor financial status and females with a low HL level were less likely to undergo CRC screening (OR 0.71, 95% CI 0.57-0.88 and OR 0.68 95% CI 0.49-0.95 respectively).

Conclusions:

Our findings suggest that adherence to CRC screening is associated with HL in females only, while it depends on financial status in males. Therefore, gender specific interventions, tailored on different factors, are needed to increase the CRC screening rates.

Key messages:

- The association between Health Literacy and colorectal cancer screening adherence differs according to gender.
- Gender specific interventions are needed to increase the colorectal cancer screening rates.