



## EDITORIAL

**It is time to act****Es hora de actuar****Luis Carlos Blesa Baviera***Presidente de la Asociación Española de Pediatría*

Midway through our term as the Executive Committee of the Asociación Española de Pediatría (AEP, Spanish Association of Paediatrics), it is not easy to summarise in just a few lines the activity developed in the past two years or to convey the feelings experienced during a period that, at the professional level, was defined initially by the pandemic and subsequently by the slow return to normalcy, which has not actually been such, among other things due to the weakened health care system it has left in its wake, which has exacerbated already existing lacks.

Before the expiration of the previous term, we took stock and announced that it was time to act, in the field of paediatrics, which directly concerns our association, but also in the medical profession overall. With the first few months of 2023 behind us, we are fully convinced of this necessity and focused on this objective: Yes, it is indeed time! The times we are living call for courage and commitment to face the complex challenges that shape our profession and our everyday practice and that grow in importance among our worries as paediatricians.

In recent years we have been calling attention to the critical role of primary care in ensuring the sustainability and adequate functioning of our public health system, underscoring the importance of recognising the different paediatrics specialities to guarantee the quality and safety of paediatric care. Sadly, we have witnessed the progressive worsening of situations that, in our opinion, have reached rock bottom and cannot, must not, endure any longer.

After years of institutional neglect in which the repeated warnings of health care professionals and the scientific societies that represent them have gone unheeded and no effective palliative measures have been implemented, the insidious crisis looming in paediatric primary care has finally come to a head in several regions in Spain, with protests breaking out. Paediatricians are firm in their vocation to serve the health of children and adolescents and, by extension, society at large, and aware of their professional duty, but they also seek to achieve some semblance of work-life balance and demand time for training and research, acceptable working conditions and remuneration commensurate with their competencies, qualifications and responsibilities.

The AEP has fully supported the demands of paediatricians due to the adverse working conditions in which they are forced to carry out their activity.<sup>1</sup> It is time to raise our voices to health care administrations, policymakers and society to redirect a situation that we consider untenable. Our field is exhausted due to the unsustainable and growing demand for paediatric care, in many cases unwarranted from a health perspective, as material and human resources continue to dwindle.

The answer cannot once again hinge on the motivation and commitment of professionals. Health care workers can only be stretched so far. Unless demand is not reasonably adjusted and the public health care system reinforced with additional resources, the primary care level will collapse, followed by the others, due to the scarcity or absence of new recruits due to the lack of appeal of the profession and the increasingly frequent resignations or early retirement of our colleagues.

On the other hand, the enactment of the Royal Decree regulating medical specialities and specific training areas<sup>2</sup>

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has hampered our aspirations in the path to have paediatric specialities recognised, as we noticed that the requirements imposed by the decree are complex and all but unattainable.

This is no time to falter. Far from discouraging us, the challenges we face spur us to continue to commit wholeheartedly and strive harder, if at all possible, to further the interests of our members and to advocate for the paediatric profession and the health of our children and youth.

It is election year in 2023, and therefore a time for new proposals and electoral promises. The AEP has not wasted the opportunity to make itself heard through an open letter that summarised the unease of our profession stemming from the impact of this situation on the quality of the care provided to children and adolescents and proposed improvement strategies to the members in charge of health care policy of every party that is running in the upcoming regional elections. We will do the same at the time of the national election.<sup>3</sup>

We believe that it is possible to improve paediatric care, but this requires the urgent synchronization of different forces to bring about a sociocultural shift of substantial proportions. It is time, for instance, to do away with the culture of instant gratification that was peddled to health care users in the periods of economic boom and growth when there was a surplus of inactive medical professionals who bore working conditions and wages that are unsustainable under the current supply and demand. This inertia must be stopped, however discomfiting and unpopular it may be. We must raise awareness to promote appropriate use and prevent abuse of health care resources.

We are also working on increasing our capacity for dialogue and our influence as reliable interlocutors in the interaction with administrations. One of our main objectives is to have the association recognised as an advisory institution in policymaking related to child and adolescent health. One example of institutional dialogue promoted from the AEP is the meeting on the subject of the immunization schedule held with the representatives of the public health administrations at the autonomous community level in the framework of the XIV Vaccines Conferences held in Ourense.<sup>4</sup>

The first two years of this term have also allowed us to get more thoroughly acquainted with the AEP, its membership and the needs of both, and to understand the context in which the association operates. Lines of work have been established and some changes implemented, for instance, changes to increase transparency and information about our activity through ongoing communication with our membership and the societies that conform the AEP, to keep them updated at all times about the areas we are working on. At the same time, we strive to be more efficient, making the most of our synergy with our affiliated regional and speciality societies, which are a primordial and essential part of our association.

We continue to promote technological development and the acquisition of information and technology skills in health

care administration, education and communication as tools that allow us to improve our performance and respond to our members quickly and effectively through the different online platforms of the AEP.

Another priority of the Executive Committee is the ongoing support of the activity of the Working Groups, Committees and platforms of the AEP, whose work is crucial to our progress and recognition as a medical and scientific society. We also want to take this opportunity to thank all members actively involved in these pursuits for their contribution.

The AEP will continue to assess the current challenges and analyse possible strategies to improve the situation of paediatricians and paediatric care. We take on this challenge with a determined spirit, embracing dialogue and cooperation with social, educational, economic, union and political agents, public and private, open to studying alternatives and promoting the changes the system requires to guarantee equitable and sustainable health care for children and adolescents. We take on this challenge united and strengthened as a collective, with the support of all paediatric speciality and regional societies and all of our members.

We know what the problems are, we know the solutions: it is time to act.

## References

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2. BOE-A-2022-12015 Real Decreto 589/2022, de 19 de julio, por el que se regulan la formación transversal de las especialidades en Ciencias de la Salud, el procedimiento y criterios para la propuesta de un nuevo título de especialista en Ciencias de la Salud o diploma de área de capacitación específica, y la revisión de los establecidos, y el acceso y la formación de las áreas de capacitación específica; y se establecen las normas aplicables a las pruebas anuales de acceso a plazas de formación en especialidades en Ciencias de la Salud. [accessed 27 April 2023] Available from: <https://www.boe.es/buscar/doc.php?id=BOE-A-2022-12015>.
3. La AEP envía una carta abierta a las formaciones políticas para instar a poner el foco en la salud infantojuvenil en sus programas electorales. [accessed 27 April 2023] Available from: <https://www.aeped.es/noticias/aep-envia-una-carta-abierta-las-formaciones-politicas-instar-poner-foco-en-salud-infantojuvenil-en>.
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