

related with the differences in "planning", "positive reframing", "religion", "denial", and "behavioral disengagement" of coping behaviors with bereavement. 3. Attachment styles were significantly related with the differences in "existential concerns", "depression", and "physical distress" of anticipatory mourning reactions. 4. The anticipatory mourning reactions among subjects correlated negatively with coping behaviors of "active coping", "positive reframing", "acceptance", "using instrumental support", and "venting", whereas positively with coping behaviors of "denial", "behavioral disengagement", and "self-blame". Suggestions were proposed in accordance with the study result.

SP-111

The Analysis of Exercise Behavior and Depression Tendency in Taiwan: Results from Taiwan National Health Kap Interview Survey in 2002

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This study aimed to: (1) describe the prevalence of exercise behavior and depression tendency in Taiwan, and (2) analyze the relationships between exercise behavior and depression tendency. Data from Taiwan National Health KAP Interview Survey were analyzed. People of age 15 years and older (n=26,755) were reviewed by a three stage systematic random sampling of households in this cross-sectional study. The relationships between exercise behavior and depression tendency was analyzed by Chi-square test and logistic regression. The main findings of this study were as the following: 1. The subjects without exercise behavior were 44.8%. 2. The subjects with depression tendency were 4.8%. 3. Subjects who were males, older than 65 years old, illiterate, widowed, not working, at lower health status, at lower economic level or living alone were more likely to exercise regularly. 4. Subjects who were females, elderly and adolescents, widowed, divorced, separated, at lower health status, at lower economic status or living alone were at highest risk of depression tendency. 5. The relationships between exercise regularity and depression tendency were negative; and that between exercise intensity and depression tendency were positive. 6. When demographic factors were adjusted, regular exercise was the major factor to decrease depression tendency, and the relationships between exercise intensity and depression tendency were positive. According to the finding, we may apply to help develop the policy for preventing depression and promoting physical and mental health.

SP-112

Effects of Work Support Program for the Person with Disabilities Rehabilitation

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Purpose: The purpose of our study was to establish fundamental job support environmental at psychiatric department clinical site.

Subjects and method: We adopted

Randomized-Controlled Trial to measure the effectiveness of starting job program during the six months. Twenty people with schizophrenia were randomly assigned to either an intervention group (n = 10) or to a control group (n = 10). Regards to judgment scale of intervention effect, we conducted several scale for three times, pretest, 3-months posttest, and 6-months posttest and these scales are Positive and Negative Syndrome Scale, Life Assessment Scale for the Mentally Ill and Self-Efficacy for Community Life scale. We also used General Self-efficacy Scale and Work-Personality scale.

Result: The score of GSES in the control group increased significantly after 6 months, but that in the intervention group did not. The score of SECL in both the control group and the intervention group did not change significantly between pre-test and post-test. The score of Work-Personality in the intervention group increased significantly between pre-test and 2-months post-test, and between pre-test and 4-months post-test, whereas that in the control group did not.

Conclusion: Considering above results, this work support program has proved that it has learning effect on schizophrenia in terms of their current recognition and job skills. Thus, this program has demonstrated its effectiveness toward schizophrenia for their social reinstatement support.

SP-113

Medicine Inefficiency among the Insured in Indonesia: A Case Study in a Hospital in Jakarta, Indonesia

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Physicians tend to be less sensitive to the costs of healthcare services when the patients covered by insurance. This makes the physician provides unnecessary of healthcare services, including provide prescriptions more medicine. One of the types of inefficiency is the unused medicine that has been prescribed by the physician. To test a hypothesis of whether the physicians prescribed more medicine among the insured patients, a study was done in a hospital in Jakarta. The study include 236 insured patients as the sample, which was selected randomly from 2.225 inpatients during the year 2008. The results confirms that there was an inefficiency of prescribed medicine, among other, due to (i) replacement of existing medicine, (ii) the physician prescribed more medicine than needed, and (iii) the doctors prescribe more medicine in order to be stocked of the ward. The inefficiency figures reached about 19% of the total medicine costs, consisting of 21% of the medicine covered by insurance and 5% of non-insurance. Our multiple linear regressions confirms

that education, age, experiences, and department of obgyn (vs other departments) were the determinants of inefficiency. The most predominant factors contribute to the inefficiency was the obgyn department. This study recommends to adopts a single-dose prescription policy.

SP-114

Pediatricians' Role of Caring Preschool Children in Taiwan under the National Health Insurance Program

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Background: The National Health Insurance (NHI) covers more than 98% of the 22 million people in Taiwan. Because referral is not mandated, competition among specialties exists in caring preschool children. The aim of this study was to analyze the utility of outpatient service among preschool children to investigate the pediatricians' role in caring preschool children. We also analyzed how the density of specialists induces demand by using the NHI database.

Methods: We used the systematic sampling file, CD20040, from the bureau of NHI, Taiwan, as the data source for analysis. We linked the file to the registries for medical personnel and the board-certified specialists to analyze the specialty distribution. We also linked to the registry for contracted medical facilities to analyze the distribution in different levels of hospitals. **Results:** In total, 56,144 outpatient visits for preschool children were analyzed. Among them, 59.1% of outpatient services for preschool children were provided by pediatric specialists, 20.7% by otolaryngologists, 13.5% by family medicine specialists, and the other 6.7% by general practitioners. Most of the visits occurred in the primary care setting (84.1%). As children grew older, a significant decline in the pediatric specialists' visit rate and an increase in the otolaryngologists' visit rate were observed in the primary care setting. Young children visited pediatric specialists more frequently. The pediatric specialists' visit rate was higher in the northern urban areas. It was also significantly correlated with the density of pediatricians. **Conclusion:** In summary, otolaryngologists compete with pediatricians in the primary care of preschool children in Taiwan. The proportion of visits to pediatric specialists was significantly correlated with the density of pediatricians among different counties. The NHI should modify its policy to make the medical system more equitable.

SP-115

Managerial Effectiveness of Universal Coverage Insurance Scheme in Thailand

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The objective of this study is to evaluate managerial effectiveness of Universal Coverage Insurance 2006-2008. Analysis of secondary data from 3 resources (National Statistic Office, National Health Security Office and Assumption Business Administration College Poll) is the method of this study. Results indicated that 61.2 million Thai populations was covered by National Health Security Office (97.94%). Regarding quality assurance of primary care unit, there was an increase in competency of health workers and compliances with the standard of hospital assurance (HA) or ISO 9001:2000, from 91.36% to 94.33%. Even though there were health service providers for 5 work days per week, but there were problems such as standard of health care, delayed of services, follow up / referral system, refusal of treatments by providers and quality of pharmaceutical products. Analysis of the 3 data sources indicated that the universal coverage insurance was able to: 1) decrease household expenses, 2) increase quality of life for Thai population, 3) find no definite direction of other health funding, and 4) prevent litigation by paying compensation for those who received medical treatment errors. Recommendations for universal coverage insurance program are as followed, provide enough cash flow for primary care units; control cost of pharmaceutical products and increase quality by using co-payment concept, local budgeting and combining other health funds.

SP-116

Did Patients and Primary Clinic Physicians in the "Family Physician Integrated Health Care Program" Have the Same Expectations of Health Care Services? Yi-Chun Chen¹, Weir-Sen Lin², Hui-Fang Chen², Li-Ching Chung²

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In 2003, Bureau of National Health Insurance (BNHI) promoted "the family physician integrated health care program (FPIHCP)" to offer a complete and continuous health care for patients in Taiwan. In this program, BNHI provided patients in this program with 24-hours telephone consultant, primary health care, referrals, etc. But, did the contracted clinical physicians have intentions to providing these services and can these services meet participants' expectations? The purpose of this study is to focus on what kind of health care services clinic physicians would like to provide with and how these services meet demands of patients in the program. Clinical physicians and patients involved in FPIHCP were recruited in this study. Questionnaires sent out for all of 163 clinical physicians in southern Taiwan and 106 returned. Patients were randomly selected to respond the questionnaire with consents. A total of 454 patient questionnaires were used in this study. Contents of the measurement included demographic variables, 24-hours telephone consultant, informing patients to having health checkup, etc. Data were analyzed by SPSS10.0 statistical