

create a structure that has both safety management systems.

FP-195

Factors Influencing the Life Happiness among the Elderly Female in Rayong Province, Thailand

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Objective: To study the factors influencing the life happiness of elderly female in Rayong province, Thailand.

Methods: A cross-sectional survey research was conducted in 233 elderly female aged between 60-80 years by multi-stage random sampling. The data were collected from June 6th to July 31st 2008 by interviewing questionnaires. Data were analyzed by frequency, percentage, Pearson's product moment correlation coefficient and Stepwise multiple regression analysis.

Results: About half (50.2%) of the elderly female had moderate level of life happiness, followed by low (27.1%) and high level (22.7%). The factors which significantly influencing the life happiness of the elderly female were self – esteem, social support, and family relationships (p -value < 0.05). In addition, self – esteem, social support, and family relationships could significantly predict life happiness of the elderly female by 91.4 %. Whereas self – esteem had the highest predictive power of life happiness. elderly female.

Conclusion: The important factors influencing the life happiness of the elderly female were self – esteem, social support, and family relationships. To promote happiness of the elderly female, the responsible organizations should establish the activities that enhance elderly's self-esteem and also provide sufficient social support, and good family relationships, to maintain their life happiness.

FP-197

Social Gradient in Health of Schoolchildren in Kazakhstan

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Background: The social gradient in health has been shown to be one of the dominant features affecting the health situation. This study attempts to examine the socioeconomic state and investigate the relationship between socioeconomic state and health and bad habits among schoolchildren in Kazakhstan.

Methods: The form based on the WHO for Health Behavior in School-aged Children Study, has been used. The Family Affluence Scale (FAS), with the higher level of family socioeconomic state - FAS 3, was used for indication of social inequality as well correlated with macroeconomic measures on national level. Binary logistic regression with comparison for odds ratios (OR)

for the variables for socioeconomic determinants was done in Epi -Info Program 3.5.

Results: Odds ratios for variable FAS (FAS2/FAS1 and FAS3/FAS1) show that chance for positive appraisal for health is higher in FAS2 groups. As for separate subjective complaints, the chance for appearance is lower in groups FAS 2 and FAS 3, then in group FAS1. We can not see strong connection between smoking and FAS and there is no strong connection between FAS and drinking.

Conclusion: Health of schoolchildren is directly influenced by socioeconomic state of the family. One of the reasons for more health complaints and worth state of health is low socioeconomic status.

FP-198

Subjective Dimensions of Squint

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Strabismus is a significant problem with considerable psycho-social effects on health. In cases of strabismus, in Austria coverage of costs is only given within the procedure of treating the medical relevant diagnose, no coverage of costs is given for „cosmetic“ or subjective handicaps due to strabismus. However patients experience dysfunctionality, abnormality and social exclusion in all aspects of life. Strabismus affects one's social and economic status. Study design was based upon extensive history and narrative interviews. The findings of narrative interviews were consistent with those of patient history and showed that the physical dysfunctionality is not the main criterion for not feeling healthy, and that the consideration of social determinants and gender categories are critical for proper diagnosis and treatment. We recommend that medical professionals view the strabismus affliction in different ways through modified models of illness. These models are of utmost importance for qualitative health research. The model of P.-E. Schnabel corresponds with the experiences of the participants in our study. Schnabel's main focus is the transition from the state of health to illness and vice versa. There are patients who feel handicapped (subjective dimension), but who are not diagnosed by the medical professionals, since strabismus is usually an aesthetic concern; however, others perceive them as abnormal. Those who do not feel handicapped do not consult medical professionals, and are thus never diagnosed, but they are nonetheless seen as being abnormal.

FP-199

Gender & Health in the Asia-Pacific Region (APR): Impact in Education and Culture

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Even though life expectancy in females has improved in most Asia-Pacific Region countries has increased, however, the adoption of new lifestyle risk behaviours such as smoking, drug use, diet and sexuality are beginning to diminish these gains. The changes in teen adolescent behaviors in Asia are even more dramatic and damaging leading to increase in injuries even in suicides and attempted suicides. Despite improved access to care for women in cities, significant proportion of women are deprived from adequate care and its consequences in rural areas and slums. Women of minority and indigenous populations are even more disproportionately impacted for example, in access to screening and treatment for breast and cervical cancers. There is both delay in access to detection and treatment leading to the self-fulfilling perception of powerlessness of women to change their lives and health. Only quite recently was there consensus reached on the significant differences in perception and management of heart disease in women in the developed countries. This view is yet to percolate fully into the LDCs in APR. Methodology: This paper reviews existing gender relevant data in selected APR countries Indonesia/Malaysia; Sri Lanka/Thailand; Bangladesh/Myanmar in Adolescent Health variables (smoking, injuries), MCH data (Maternal Mortality and Teenage pregnancies) and to assess emerging risks for women in the APR region. Results & Conclusion: Priority for health of women is still lacking for certain common conditions; Coronary Heart Disease and in MCH complications - morbidity remains high even though mortality reductions are significant. The dramatic increases in risk behaviors in teens and young women are likely to have serious consequences for the future health of Asian women and their offspring.

FP-200

Wanhua Citizens Health Improvement: Empowering Positive Health Strategies for the Middle Age and the Aged Population

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According to the Taipei Health Bureau, Wanhua has the largest aged population in Taipei, which also presents disadvantages as caused by physical and psychological regression. Based on statistics in recent decades, the number of death and crude death rates of Taipei citizens has been increasing over many years. This is mainly related to Taipei's rising aged demographic structure. It also indicates that the rise is the main driver for the soaring number of deaths in Wanhua. In 2007, Wanhua's total death rate was 8.00/00 which is higher than Taipei's 5.65/00. The total death rate is an important index for both public health and district care work. Indeed, the Wanhua Promotion Committee (2008) has urgently recommended the empowerment of health strategies for the middle aged and aged population as follows: 1.

Prevention and control plan of respiratory tract epidemic diseases (e.g. SARS, H1N1). 2. Establish the people's spiritual and mental care network plan. 3. Strengthen prevention and treatment of chronic diseases, as well as screening and control of related metabolic syndromes. 4. Promote healthy lifestyle, regular exercise, balance of diet and CPR for all. 5. Promote health service capacity, improve long-term care quality, and enhance health policy. These recommendations are intended to provide a platform for governments, the private sector, social organizations and communities to facilitate the middle aged and aged citizens participation in promoting their health issues and quality of life.

FP-201

The Impact of Family Attachment Programme on Medical Undergraduate Public Health Clinical Training to Appreciate the Social Determinants of Health

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Medical students of the Faculty of medical sciences, University of Sri Jayawardenapura, Sri Lanka were allocated in to groups of three students and assigned a household in the university project area for a period of two months during their final year clinical training of Paediatrics. The programme was supervised by departments of Paediatrics, Community medicine, Family medicine, Psychiatry and public health staff from the university project area. Weekly seminars were conducted to discuss the issues faced by each family and about any possible interventions that could be made to overcome them. Conventionally the undergraduate clinical training is hospital centered and mainly focused on relieving physical infirmity. But through this innovative programme we got the opportunity to consider the family as a whole with regard to psychosocial, economical and educational aspects and the overall impact of these factors on their health. Therefore, by recognizing and analyzing the problems and specific situations faced by them we were able to plan and carry out appropriate interventions, thus getting first hand experience on how to work in a practical setting. This programme proved to be a novel learning experience, both rewarding and enjoyable, and provided a gateway to broaden our understanding and appreciation on social determinants of health. Thus, including it in the undergraduate clinical training curriculum in addition to the traditional ward teaching is highly recommended.

FP-202

Influence of Breast Feeding Practices on Children's Speech, Language, and Cognitive Development

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