

working age population death due to leading causes of mortality on economy.

Conclusion: The mortality slightly increased in last 5 years among all age groups in the country and the fact of starting to use the specialized estimation of effects of population mortality from leading diseases on economy in policy formulation operation in developed countries is being essential.

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Globalization as a Social Determinant of Health: Influence on Food Consumption among Young People in Bangladesh

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Globalization as a social determinant of health is a relatively new construct. Worldwide, globalization is beginning to be associated with the rise of non-communicable disease via different pathways. Changes in food consumption pattern is one of the pathway through which globalization has affected the health of the young people in recent decades. Since 1990, Bangladesh has experienced major changes due to the structures and processes of globalization. The current qualitative focused ethnographic study explores the macro structures and processes of globalization in Bangladesh and examines the food consumption pattern of young students in a private university of Dhaka. It was found that most students are regular consumers of 'fast food' and many suffer from health consequences, e.g., obesity etc. Health information, education and services are inadequate even if financial access is not an issue. Globalization seems to have promoted an uncontrolled growth of trans-national food corporations (TNC) as well as a 'global' lifestyle. Policy and programs are found to be inadequate to combat the aggressive advertising of the TNC and consumerist youth lifestyle. Immediate action is required to address the negative effects of globalization on the food consumption pattern of the youth.

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Socio-Cultural Dynamics in an Upazila Health Complex: An Exploration

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Understanding the dynamics in Upazila Health Complex (UHC) is imperative in Bangladesh as it is the nucleus of PHC delivery. The study aimed at describing the epidemiological trend that lead the patients towards UHC and consequently drive them through the complex socio-cultural dynamics among different stakeholders that influences the perceived responsiveness of the patients. The mixed method study comprised inter-disciplinary approaches: epidemiology, anthropology and health systems. Quantitative data for

epidemiological pattern was generated through Patient Flow Record, Disease Profile and SRS from Patients Registry Book. Participant observation, document review, in-depth interview, FGD and debate between attendants and providers were used for qualitative data collection. Responsiveness data were generated through exit surveys. Epidemiological data suggested dramatic increase of Inhalation poisoning during the Bengali months of Bhadra-Ashwin (paddy plantation time) going overlooked by authority. Manpower shortage was the mother cause of many consequences which again was linked with problems of rural settings e.g. undue political pressure, cultural mismatch, electricity shortage, lack of security, transport facility, educational institutions for children and entertainment. Some innovative therapeutic (using straw as dropper, strap of saline bottle as micropore) and management practices (using medicine of affluent patents for needy ones) were observed utilizing locally available resources. Responsiveness of the hospital was perceived 'good' by patients using WHO questionnaire but 'bad' using proposed questionnaire. The inter-disciplinary approach yielded policy recommendations e.g. considering Disease Profile for rational medicine supply, performing anthropological research to understand local construct of prevalent diseases, introducing realistic client complain mechani

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Life Satisfaction Trajectories, Economic Status and Successful Aging among Taiwanese Elderly

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Purpose: Successful aging is composed of physical, mental and social dimensions of health. However, the economic dimension is often neglected, and the relationship of dynamic change among successful aging indicators to overall subjective well-being was less explored. This study was to explore the life satisfaction trajectories, and the relationship of subjective economic status with the time-varying successful aging to life satisfaction among the Taiwanese elderly.

Methods: Data were from the four waves of "Survey of Health and Living Status of the Elderly in Taiwan" in this study. Multilevel regression analysis was conducted. Economic status was measured by individual-level childhood economic status and time-varying subjective economic satisfaction. Time-varying physical, mental, and social successful aging variables and demographics were also used to describe the life satisfaction trajectories.

Results: Life satisfaction showed a slightly increasing linear trajectory across time. Higher educated and female had higher increase of life satisfaction across time. Childhood financial status was not related to the life satisfaction trajectories, but the lagged ($\beta=0.338$, $p<0.05$) and the change ($\beta=0.290$, $p<0.001$) of economic satisfaction was associated with life satisfaction. The lagged and the change of depressive