

duration in girls. The TEE and AEE were associated with the motor ability score in girls. This study suggested that physical activity was partly associated with motor abilities in kindergarten children. Daily physical activity was partly associated with motor abilities in kindergarten children. Daily physical activity may improve motor abilities in kindergarten children.

FP-180

Development of Temple Health Promotion Model in Rural Area Thailand

Sukdepat Puangkot¹, Mali Photipim², Charlarmchai Bonphasit², Udom Pongpila³

1. Charlermkanchana College, Thailand

2. Phiboonmangsaan Hospital, Thailand

3. Ubonratchatani Province Public Health Office, Thailand

Background: Thailand health promotion aimed to all of sectors of social must participated to encourage health but in reality temples have no activities.

The objective: To set a role model of health promotion of their monks and people who came to temple.

Participant: Monks, Buddhist novices, municipal officer, public health officer, leader of community and people.

Setting: This model is established at Pho Tak temple located in Phiboonmangsaan District a small city which rural area in northeast region.

Duration: 2006-2008.

Study design: The participatory action research.

There were 6 stage studied : Stage 1st studied context of community and searched a problem , stage 2nd analysis and synthesized data , stage 3rd community brainstorming , stage 4th participatory planning and action ,stage 5th evaluation and synthesized experiences, stage 6th adjusted activities from evaluation.

Results: The health activities were found that pattern such as a meditation, alternative medicine , fire security, traffic safety, health education, health prevention, communicable and non communicable disease screening, environmental health activities and etc.

Conclusion: Health promotion in temple is proceeded gradually step by step under CPLFP model concept (clean, peace, local culture, folk wisdom, participation). An evaluation was measured both of quantitative and qualitative method used questionnaires, physical health check, in-depth interviews, focus groups discussion and observations. The success or failure of activities could be found when considered each activities and overviews. Keys of success depended on community unity, participation, used folk wisdom, creative thinking, effort, systematic, clarify, and easily methodology for participant .

FP-181

Stress Behavior and Stress-Coping of the Disabled People in Two Provinces of Thailand

Supachai Pitikultang, Pimsurang Taechaboonsermsak, Chokchai Munsawaengsub, Phitaya Charupoonphol, Dusit Sujirarat

Mahidol University, Thailand

Objective: To study the stress behavior and stress-coping of disabled people in two provinces of Thailand.

Methods: A cross-sectional survey conducted in 5,352 disabled people age over 15 years by multistage cluster sampling. Data were collected from April to June 2008 by interviewing questionnaires and analyzed by frequency and percentage.

Results: Most of the disabled people (62.6%) had normal level of stress, 25.6 % had moderate level and only 11.8% had high level. About 2.7% of disabled people felt desperation, 3.2% had lost of self-esteem, 2.1% had suicidal experience and less than 10 % had faced with the frequent stress symptoms. The way to cope with stress included staying alone (27.3%), calmness/praying/meditation (25.9%), doing favorite activities (20.1%) and seek for consultation (18.4%). Thirty percent of disabled people with totally dependent had moderate to high level of stress while 20% of those with partially dependent and 13.7% with independent had moderate to high level of stress.

Conclusion: Two-third of the disabled people had normal level of stress. Coping with stress were staying alone, calmness/praying/meditation, doing favorite activities and consultation seeking. To reduce the stress among the disabled people, empowerment of the individual's self-esteem and the strengths/supports from the community should be encouraged.

FP-182

The Development of Professional Law for Health Manpower in Sub-District Health Center in Thailand **Surachart NA Nongkhai**

Mahidol University, Thailand

Background: Such enhancing requires legal supporting mechanism for health officials' performance. These officials are considered to be the important public health body that work closely to the remote rural community. It has been operating for about 95 years, no sign to enact the law or any other legal provision to control professional standard and professional ethics. In fact this group of people haven't legally recognized as "Professional".

Method: Data of the study were collected through documents involving professional law for health manpower so as to answer the research question of this study.

Results: As a result, the principle of Professional health manpower law in any sections of organizations and workplaces in Thailand are required at least 3 major elements ; 1. Having an advanced Knowledge about their existing job 2. Having chosen or established committees taking charge with their performance evaluation 3. Having the effective mechanism regulating their