

MEETING ABSTRACTS

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Session 1: Citizenship in health

S1

Health literacy and health education in adolescence

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Health literacy, a more complex concept than knowledge, is a required capacity to obtain, understand, integrate and act on health information [1], in order to enhance individual and community health, which is defined by different levels, according to the autonomy and personal capacitation in decision making [2].

Medium levels of Health literacy in an adolescent population were found in a study conducted in 2013/2014, being higher in sexual and reproductive health and lower in substance use. It was also noticed that the higher levels of health literacy were in the area adolescents refer to have receipt more health information. The health literacy competence with higher scores was communication skills, and the lower scores were in the capacity to analyze factors that influence health. Higher levels were also found in younger teenagers, but in a higher school level, confirming the importance of health education in these age and development stage. Adolescents seek more information in health professionals and parents, being friends more valued as a source information in older adolescents, which enhance the importance of peer education mainly in older adolescents [3].

As a set of competences based on knowledge, health literacy should be developed through education interventions, encompassing the cultural and social context of individuals, since the society, culture and education system where the individual is inserted can define the way the development and enforcement of the health literacy competences [4]. The valued sources of information should be taken into account, as well as needs of information in some topics referred by adolescents in an efficient health education.

References

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Session 2: Evaluation & intervention in health

S2

The effect of a walking program on the quality of life and well-being of people with schizophrenia

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Schizophrenia is a serious and chronic mental illness which has a profound effect on the health and well-being related with the well-known nature of psychotic symptoms. The exercise has the potential to improve the life of people with schizophrenia improving physical health and alleviating psychiatric symptoms. However, most people with schizophrenia remains sedentary and lack of access to exercise programs are barriers to achieve health benefits. The aim of this study is to evaluate the effect of exercise on I) the type of intervention in mental health, II) in salivary levels of alpha-amylase and cortisol and serum levels of S100B and BDNF, and on III) the quality of life and self-perception of the physical domain of people with schizophrenia. The sample consisted of 31 females in long-term institutions in the Casa de Saúde Rainha Santa Isabel, with age between 25 and 63, and with diagnosis of schizophrenia according to the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR). Physical fitness was assessed by the six-minute walk distance test (6MWD). Biological variables were determined by ELISA (Enzyme-Linked Immunosorbent Assay). Psychological variables were assessed using SF-36, PSPP-SCV, RSES and SWLS tests. Walking exercise has a positive impact on physical fitness (6MWD – $p=0.001$) and physical components of the psychological tests ([SF-36] physical functioning $p < 0.05$; [PSPP-SCV] functionality $p < 0.05$ and SWLS $p < 0.05$ of people with schizophrenia. The walking program enhances the quality of life and self-perception of the physical domain and physical fitness of people with schizophrenia.

S3

Diagnosis and innovative treatments - the way to a better medical practice

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The study of the relationship between the musculoskeletal pain and postural habits in children and teenagers of the 2nd and 3rd cycles of basic education (107 male and 97 female) can establish criteria in health care in individuals during growth. A body part discomfort scale was adopted to check the references of pain level and localization. The results indicated ranged from 0 (no pain) and 5 (maximum pain), with an average of 2.40 ± 0.96 (moderate to severe pain), and longer time of the presence of pain (39.2 % of chronic pain) the greater the average intensity of pain (2.59 ± 0.87). 67.3 % (148) of the participants indicated musculoskeletal pain, 53.4 % reported pain in at least two different locations and 27 % referred to pain in three or more places. The 5th grade participants indicated chronic pain with 27.3 % as being 25 % (subacute) and 47.7 % (acute). In contrast, the amount of 9th grade participants who referred to pain in the body decreased (58.8 %), but the average pain (2.50 ± 0.89) and its duration increased (56.7 % of chronic pain). The average value of greater pain among women (2.57 ± 0.93) in both years of schooling was greater compared to males who had a mean value of pain 2.18 ± 0.97 . This study aimed to present the 1st phase of a study developed in the school environment, in order to contribute to the deepening of the discussion on postural education. These results showed a prevalence of moderate/severe pain, the largest level of pain in females and in higher grade students.

Trial registration

Current Controlled Trials ANZCTR370295

Keywords

Musculoskeletal pain, Postural habits in students, Postural education

O231

What's different in Southern Europe? The question of citizens' participation in health systems

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Contemporary governance demands mutual interdependence of actors through participatory devices in order to competently address public problems and improve the quality of decisions. This debate is actively present within the health system where several international organizations have been exhorting national governments to develop public spaces within civil society as the proper locations for the improvement of their health systems. To date, several initiatives have been put forward and substantial resources have been invested in the design and implementation of citizens' participation exercises in the health domain. The main focus of this paper is civil society's involvement with health systems. It analyses the characteristics of the Greek, Italian, Portuguese, and Spanish health systems and the main steps in their reform processes. The most relevant initiatives of citizen participation are identified, highlighting their key features and potential, as well as the main critical issues raised.

The evolution of the national health services in the countries analysed shares a common history, as well as similar models for the provision of health services in the case of Italy, Portugal, and Spain.

With the exception of Greece, where participation is in an early stage, the participatory activities implemented in the other three countries revealed common features: I) a gap between the discourse on the importance of citizens' participation that permeated the reform processes and the practices implemented within health services; II) most of the experiments only take place at a local or regional level; III) the changes of governments have been negatively affecting the consolidation of participatory experiences.

Keywords

National Health Service, Citizen participation, Southern European countries

O232

Occupational stress in Portuguese police officers

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Background

Occupational stress occurs when individuals perceive work demands as exceeding their resources and abilities to cope with them, inducing a set of physical and emotional responses and affecting job satisfaction. Policing is often associated with high levels of occupational stress, resulting from stressors found in the work environment and in the individual's family life. Objectives: To assess perceived occupational stress levels in police officers and to identify the most relevant stressors.

Methods

Fifteen (15) police officers (from a police station with 45 professionals), 93.3 % males, 24 - 46 years ($M = 33.27$; $SD = 6.24$), with an average of 9.07 years of experience ($SD = 6.72$), 66.7 % working more than 40 hours/week and 86.7 % doing shift work, completed the "Operational Police Stress Questionnaire" (PSQ-Op) and the "Organizational Police Stress Questionnaire" (PSQ-Org).

Results

Participants presented moderate stress levels for PSQ-Org ($M = 3.45$; $SD = 1.18$) and PSQ-Op ($M = 3.62$; $SD = 1.01$), with no significant differences between scores. No significant differences were found in stress levels regarding demographic or job variables. Main sources of stress are related to lack of resources, bureaucracy, working hours, shift work, the risk of being injured or witnessing traumatic events.

Conclusions

Our findings suggest a perception of moderate level of occupational stress in police officers, both at organizational and operational level. The fact that even moderate-intensity stressors affect individuals in a chronic way and may elicit physical and emotional responses, affecting health and well-being, strengthens the importance of interventions that enhance police officers' ability to cope with stressors, helping to preserve job satisfaction and quality of life.

Keywords

Occupational stress, Police stress, Occupational health

O233

Is occupational therapy culturally relevant to promote mental health in Burkina Faso?

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Background

The processes of globalization have a clear impact on occupational therapy. Consequently, there is a growing interest in aspects relating to health and culture in many societies. The development of an occupational therapy centre to promote mental health in Houndé, Burkina Faso (West Africa), must to go beyond the usual terminological questions, and to deepen and refine new guidelines in relation to the construction and consolidation of knowledge and also to the practical aspects in the country. Objectives: The main objective of this qualitative study was to analyse the occupational therapy professional culture and its impact on practice having the development of the occupational therapy centre to promote mental health in Burkina Faso as reference.

Methods

A qualitative design was used and it was based on a doubly reflexive ethnography, a heuristic three-dimensional model consisting of syntactic, pragmatic and semantic dimensions. Accordingly, the methodology is based on ten semi-structured interviews with