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Alcoholic Behavior of Street Boys (Anjal) in Makassar

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Based on data of Indonesia Social Department (2006) amount of street boys in Indonesia with high-risk behaviour until 144.889 children and a half of them is drug user (MOH,2007) The aim of this research is to explore perception and behavoir of street boys in Makassar about alcoholic beverage. This research is a qualitative reseach with phenomenology approach. Result of research shown that perception of street boys to alcoholic beverage is a 'drunk' beverage/ intoxicated drink and good for their body, refreshing and strenghten it. They are also consider that alcoholic beverage doesn't have any side-effect. The resource of information and the reason why street boys has alcoholic behavior is because a free life-style without any norms and rules on the street and also their social-group such as neighbour, 'hoodlums' or 'boss', that already be their 'family' on street, has an alcoholic behavior also., Another reason is why they choosed alcohol and wouldn't stop consumed is, the social-effect of alcohol is entertainning taking down their weary after finishing work, forgetting sorrow and become a media to gathering friends. The frequency in using alcohol is 2-6 times in a week, with 1-2 bottle alcoholic beverage. (1 bottle = 1L). In general, type of alcohol that use by street boys is ballo'. Ballo is one kind of traditional drink from South Sulawesi, made from Lontar fruit. The taste is sweet, but in big amount it will have alcoholic effect. This type is easy to get moreover often free from social-group among them, cheap and delicious. Alcoholic activities were doing at night after work, with social-group near from their work-place or in their home. Addiction effect had been emerged is nervous or restless and dizzy. Moreover, smoking is activity while use alcoholic beverage, beside of watching 'porn-movies' or destroy everything around them when they get drunk Participation from several parts is needed in solving street boys such as local govenrment of Makassar, Social Department and Health Department. This way should done by ratify of regulation about alcoholic beverage and regulation for control the hoodlums to cut the chain-link this problem. The last but not least, as a citizens we have to support and help the government in carrying out from street-boys problems.

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How to Promote People to Receive Colorectal Cancer Screening?

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Colorectal cancer (CRC) was the third leading cause of the cancer deaths in Taiwan. One of the most important

preventative methods is to do colorectal cancer screening. But most people ignored the importance of colorectal cancer screening and the screening rate was very low. This study is to find out the most popular media and from which media people would like to receive the information of colorectal cancer screening. 383 subjects from hospitals, departments, stations, and MSN.net groups were enrolled in this survey and their ages were from 20 to 60 years old. The content of questionnaire included the demographic characteristics, the receiving modes of colorectal cancer screening, and the major media to get the information of colorectal cancer and screening methods. Data were analyzed by frequency and Chi Square test by SPSS 12.0. The colorectal cancer screening rate was 10.7 %. The rate of people having received information of CRC screening was 56.1% and it was 2.11 fold (p=0.02) of people without such information (43.9%). Only 39.7% subjects have received the information of CRC screening. People with the educational level under high school would like to watch TV, but people with more than college degree received health-relative information from internet (p=0.0001). 52.0% people aged 41-60 years old would like to watch TV to get health-relative information, and 40.9% people aged 20-40 years olds got those information from internet (p=0.003). Only 10.2% people in this study could not accept receiving the information of CRC screening from cellular phone text message.

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Physical Activity and Motor Abilities of Kindergarten Children in Okinawa, Japan <u>Minori Takara</u>, Yutatsu Shokida, Sakura Kinjo, <u>Minoru Kobayashi, Minoru Takakura</u> University of the Ryukyus, Japan

The aim of this study was to estimate daily physical activity and to examine the association between physical activity and motor abilities of kindergarten children in Okinawa, Japan. Subjects were a total of 129 children (57 boys, 72 girls), aged 5-6 years at two kindergartens in Okinawa. Total energy expenditure (TEE-kcal/kg/day), activity energy expenditure (AEE-kcal/kg/day) and step counts (steps/day) were measured by using an accelerometer. Subjects were monitored over 8 consecutive days including a weekend. The motor abilities of children were assessed by a motor ability test including 25m dash, standing long jump, soft ball throw, popping, body supporting duration and ball catching, and the motor ability score was calculated. The mean TEEs were 69.7 kcal/kg/day in boys a! nd 70.5 kcal/kg/day in girls. The mean AEEs were 7.1 kcal/kg/day in boys and 6.7 kcal/kg/day in girls. The mean step counts were 14269.2 steps/day in boys and 12820.3 steps/day in girls. The TEEs were higher on weekdays than on weekends, but not AEEs and step counts. These were no significant differences in physical activity by sex and ages. The TEEs were associated with body supporting duration in boys. The AEEs were associated with body supporting



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.

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Development of Temple Health Promotion Model in Rural Area Thailand

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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 Phiboonmangsahan 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 heath 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.

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

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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.

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

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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