
1st World Congress of Children and Youth Health Behaviors / 4th National Congress on Health Education

Viseu-Portugal, 23-25 May 2013

SCIENTIFIC PROGRAMME

THURSDAY 23 MAY 2013

- 08:30 **Opening of the Secretariat**
- 09:00 – 09:45 **Opening Ceremony**
- 09:45 – 10:45 **Plenary Conference 1: In the context of crisis - What policies to promote health in Portugal?**
Francisco George - Director General Health - Portuguese Ministry of Health
- 11:15 – 12:45 **Parallel Session 1**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 14:30 – 15:30 **Plenary Conference 2: The importance of communication in the field of health promotion**
M. Gaspar de Matos - WHO / HBSC (Health Behavior in School-Aged Children)
- 15:30 – 17:00 **Parallel Session 2**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 17:15 – 18:45 **Parallel Session 3**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 19:30 **Welcome reception**
- 21:00 **Theatre Session/Concert**

FRIDAY 24 MAY 2013

- 09:30 – 10:30 **Plenary Conference 3: Sexuality in schools: The importance of work in community**
Félix López Sánchez - Salamanca University - Spain
- 10:45 – 11:45 **Plenary Conference 4: A good start in life and early prevention: Policy, evidence-based programs and monitoring methods in Sweden**
Matthew X. Richardson, Anna Jansson, Pi Högberg - Swedish National Institute of Public Health
- 11:45 – 13:15 **Parallel Session 4**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 14:30 – 15:30 **Plenary Conference 5: Childhood obesity in the WHO European Region: A challenge within a context of economic crisis**
João Breda - Programme Manager, Nutrition, Physical Activity and Obesity - World Health Organization: Regional Office for Europe
- 15:30 – 17:00 **Parallel Session 5**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 17:15 – 18:45 **Parallel Session 6**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 20:00 **Congress Dinner**

SATURDAY 25 MAY 2013

- 09:30 – 10:30 **Plenary Conference 6: Non-fatal Suicidal behaviors in adolescence**
Carlos Brás Saraiva - University of Coimbra - Portugal
- 11:00 – 12:30 **Parallel Session 7**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 14:30 – 15:30 **Plenary Conference 7: Ban tobacco advertising, promotion and sponsorship: Protecting children and youth**
S. Belo Ravara - Tobacco Control Committee of the European Respiratory Society
- 15:30 – 17:00 **Parallel Session 8**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 17:15 – 18:30 **Parallel Session 9**
Symposium Session / Workshops Session / Oral Communications / Poster Session
- 18:30 **Closing Ceremony**

Organizers	
	Superior School of Health of Viseu http://www.essv.ipv.pt/
	Polytechnic Institute of Viseu http://www.ipv.pt/
	University of Évora http://www.uevora.pt/
	University of Trás-os-Montes e Alto Douro http://www.utad.pt/
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DIABETES MELLITUS TYPE 2 AND HEALTH LITERACY: INDIVIDUAL VERSUS GROUP EDUCATION

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Introduction: Diabetes mellitus is a multiple etiological metabolic disorder affecting 12,7% of the population in Portugal. An adequate self-management will increase health benefits and prevent disease complications. Everyday self-care is influenced by health literacy and individual characteristics such as the sense of coherence. Health education plays an important role in improving literacy and empowerment, in order to promote an efficient disease self-management and the increment of comprehensibility, manageability and meaningfulness (sense of coherence dimensions). It is discussed, however, what kind of intervention gives the best results to improve this process: individual or group education.

Objectives: To assess health literacy competencies; to improve diabetes everyday self-care; to evaluate the trade-off between individual versus group intervention methodologies.

Methods: Intervention program with a convenience sample of type 2 diabetes patients. Individual intervention (n = 15) and group intervention (n = 15). Health literacy competencies assessment is implemented before and after the intervention by interview and questionnaires: HLS-EU-PT and "Escala de actividades de autocuidado com a diabetes".

Results: Determine which intervention (individual or group) seems to have best results to increment health literacy and to improve self-care management, while several other personal characteristics are considered like the individual sense of coherence.

Conclusions: Health education improves the everyday care self-management with diabetes type 2, promoting well-being and best quality of life. At same time, there are health earnings and less risk of disease complications.

THE IMPACT OF EDUCATIONAL PROGRAMS ON THE PREVENTION OF DIABETIC FOOT COMPLICATIONS: A SYSTEMATIC REVIEW

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Introduction: The tremendous increase in the prevalence of diabetes and its serious chronic illness repercussions has presently made a public health issue. It is estimated that it affects more than 300 million people worldwide (WHO, 2012). Diabetic foot ulcer is a complication with significant socio-economic impact. Studies indicate that 50% to 70% of non-traumatic amputations occur in diabetic patients. Current evidence demonstrates the potential of these patients to improve self-management and efficacy through their empowerment. (IDF, 2008)

Objectives: Highlight the effects of patient education in the prevention of diabetic foot complications.

Methods: Systematic review. Research conducted in April 2013 with the descriptors "diabetic foot" or "foot care" AND "patient education" AND "randomized controlled trial" in scientific databases: PubMed, EBSCOhost; RCAAP; SciELO, LILACS. Primary studies included were randomized controlled trials (RCT's), published from 2005 to present.

Results: Seven RCT's met the inclusion criteria, almost all studies used a small sample. Most articles focused on the effectiveness of educational group programs. In some studies, we've found that the interventions improved knowledge and behaviors in self-care and reduced rates of re-incidence and amputation, with a larger time span without ulceration, but with no statistical significance in most studies.

Conclusions: The patient education appears to have contributed to reduce long-term complications and improved self-foot care. However, methodological issues may have influenced the results. Authors also suggest that other factors such as individual experience and patient's compliance to therapy must be taken into account.

CONTRIBUTION OF HISTORY OF SCIENCE TO UNDERSTAND THE PROBLEMS OF PREGNANCY AND CHILDBIRTH

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Introduction: This work was performed under the course of History of Science, included in the syllabus of the courses in Teaching Education of UTAD - University of Trás-os-Montes e Alto Douro-Vila Real. The history of science can be used as a teaching device to improve understanding of the evolution of the problems related to pregnancy and childbirth. It is important to know the historical context and understand that there are many factors that have implications for the development of science and contribute to improving the health promotion in the context of training.

Objectives: Increase knowledge about the evolution of the problems of pregnancy and childbirth, reflect on the importance of the context political, social, economic and technological in the construction of scientific knowledge about pregnancy and childbirth. Reflect about the contribution of the History of Science on the problems of pregnancy and childbirth to improve scientific culture.

Methods: For this work we used methodology call Investigation-action. We apply a questionnaire at the beginning of training (pre-test), then we developed a seminar about the matter in study and after was again applied the same questionnaire (post-test). The sample contemplated 54 students in Course Teaching Education of UTAD.

Results and conclusions: The history of science should be an indispensable dimension in the education of young people. The results obtained in the post-test showed that there was an evolution of knowledge, helping improve aspects related to their scientific literacy.

YOUNG POPULATION IN THE DISTRICT OF BRAGANÇA: CONCERNING DEMOGRAPHIC INDICATORS

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Portugal has a very high aging rate (19%). The number of the elderly is of 39 thousand, of which around 24 000 (63% of the total) live alone or with other elderly (INE; 2011). The proportion of old people living in the district of Bragança increases to 29%.

This district lengths 6608 Km² and has a population of 136,252, corresponding to a population density of 21 inhabitants per km². To analyse this region's demographic indicators, according to the young population versus old population, is the aim of the present study.

Methods: Data were collected from the Instituto Nacional de Estatística (INE, 2011).

Results: Demographic indicators of northeast of Trás-os-Montes stress the large aging population. Natural growth rate is negative (-1.01%). The decline of birth rate (6 ‰) and the increasing of life expectancy (80 years), has as a consequence the double aging, that is, the decrease of the young and the increase of the elderly. In the district, the weight of the elderly is almost three times higher than the one of the young (10.8% vs 29%). The aging rate is about 227.5 and in more peripheral municipalities (Vinhais; Vimioso and Moncorvo) that rate is almost the double (423; 372 e 354,4 respectively). These municipalities indicate very concerning and progressive aging rates which can hardly be reversed. Dependency rate is about 55.3. The number of aged people living exclusively with people belonging to the same age group is, in this region, of 83.7%.

Conclusions: The demographic problem in the region which relies on a deep cleavage between a highly populated coastline and an interior increasingly desertified, heritage that insists in not being corrected, is a determinant reality not only of young people's future, but also of this social space and population.

SEXUALITY AND GENDER IN THE TEACHER'S PERSPECTIVE: FROM THE CLASSROOM TO THE TEACHER TRAINING

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Introduction: The representations are forms of knowledge and communication that influences social practices, according to the Social Representations Theory.

Objectives: This study aimed to analyze the social representations of teachers on sexuality and gender.

Methods: For this purpose we used qualitative analysis based on focus group technique.

Results: The sample consisted of 22 teachers of preschool and elementary school students in the central region of the country, who attended the training course "Sex Education in School: methodologies approach/intervention" (50 hours). The collection of data took place between December 2011 and January 2012. We discern discomfort and difficulties in addressing these issues, being based on reducing representations of sexuality and sex education, ignorance of the concepts of sex and gender and the impact thereof on sexuality. Were revealing methodological difficulties and face approach to different audiences in these areas. Identified beliefs and myths related to sexual behavior in adolescence, as well as maintenance for most teachers, gender stereotypes because of characteristics socially assigned to men and women in the field of personal experiences and opinions.

Conclusions: Taking into account the results of the data from our study, we consider the construction of a relevant scenario formative and reflective representations, values and attitudes of teachers towards sexuality, gender and citizenship, while the main actors in the implementation of programs Sex Education and learning activities in this area.

10. ADULT HEALTH

PSYCHOEDUCATIONAL PROGRAMME FOR INFORMAL CAREGIVERS OF OLDER PEOPLE "CARING AT HOME"

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Introduction: The psychoeducational programs are a specific intervention for informal caregivers (Ribeiro, 2007) and represent a good strategy of Health Education. This approach allows the informal caregiver to get information and also to acquire skills for care, which mainly benefit caregiver but also the care recipient.

Objectives: To show the impact of the psychoeducational programme "Caring at Home" implemented in the municipality of Guimarães for informal caregivers of older people.

Methods: This study comprises 63 informal caregivers. The assessment protocol includes a sociodemographic questionnaire (which includes information about caregiver such as gender, age, marital status, length of care; and information about care recipient as health status, age, gender), SF-12 Health Survey, General Health Questionnaire - GHQ-12, Positive Aspects of Caring - PAC and Caregiver Strain Index-modified - M-CSI. Data for scales were collected in different moments.

Results: Significant differences between moments were found in mental health, with improvements in overall scores from baseline to follow-up ($p = 0.021$). Subjective health and depressive symptoms revealed important improvement from pre-test to post-test ($p = 0.002$ for both). Feeling depressed and positive aspects of caregiving ($p = 0.013$) worsened between post-test and follow-up 1.

Conclusions: The program seems to have a positive impact in some areas. Attention should be paid to the ending of this programs that can frustrate expectations and increment vulnerability of caregivers. Psychoeducational programs are also useful as a prevention tool and it would be good to test the effect of this approach with people in different conditions to understand its effects.

PROMOTING ADULT HEALTHY STYLES: INTERVENTION EXPERIENCE IN LABOUR CONTEXT

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Introduction: Considering that health is also a result of behaviors and habits assumed the promotion of healthy lifestyles is emerging as a very important area of nursing intervention.

Aims: The project aimed to describe lifestyles and to implement measures that promote healthy behaviors in employees of a company.

Methods: For the diagnosis of the lifestyles a descriptive study was made with a random sample (69). We used the modified questionnaire "Lifestyle FANTASTIC" validated for the portuguese population ($\alpha = 0.69$) by Añez, Reis e Petroski (2008). The intervention program was directed to the fields of nutrition and diet, physical activity and the use of harmful substances (alcohol, tobacco and drugs) by the evidence of modifiable EVs and risk factors for diseases with higher rates of morbidity and mortality.