

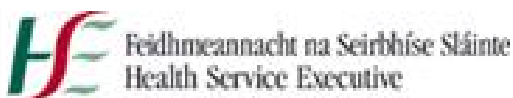


## **13<sup>th</sup> Annual Health Promotion Conference**

### **Closing the Gap in Child and Adolescent Health: the Settings Approach**

**NUI, Galway**

**June 11th and 12th 2009**



Conference Steering Committee:

Ms. Catherine Murphy	Population Health Directorate, Health Service Executive
Ms. Olive McGovern	Office of the Minister for Children and Youth Affairs, Department of Health and Children
Dr. Jacky Jones	Functional Manager for Health Promotion, Health Service Executive West
Dr.. Sinead Hanafin	Head of Research, Department of Health and Children
Dr. Celia Keenaghan	Health Service Executive Population Health Children and Young People's Team
Mr. Robbie Breen	Health Promotion Policy Unit, Department of Health and Children
Dr. Saoirse Nic Gabhainn	Health Promotion Research Centre, NUI, Galway
Professor Margaret Barry	Health Promotion Research Centre, NUI, Galway
Dr. Michal Molcho	Health Promotion Research Centre, NUI, Galway
Dr. Colette Kelly	Health Promotion Research Centre, NUI, Galway
Ms. Priscilla Doyle	Health Promotion Research Centre, NUI, Galway
Ms. Geraldine Nolan	Health Promotion Research Centre, NUI, Galway

Conference Secretariat:

Dr. Vivienne Batt	Health Promotion Research Centre, NUI, Galway
Ms. Christina Costello	Health Promotion Research Centre, NUI, Galway

**CONFERENCE PROGRAMME**

**Closing the gap in child and adolescent health: the settings approach**

**Health Promotion Research Centre Annual Conference**

11<sup>th</sup> and 12<sup>th</sup> June, 2009

**Thursday 11<sup>th</sup> June 2009**

9.30-10.40 *Parallel Paper Sessions A, B and C*

*Venues: AC201, AC202, AC203*

*Chairs: Dr. Ágnes Németh, National Institute of Child Health, Hungary, Dr. Carmen Moreno, University of Sevilla, Spain, Professor Oya Ercan, Istanbul University, Turkey*

10.00am **Registration**

**Venue:** Foyer, Arts Concourse Building

Tea and Coffee will be available.

11.00am **Welcome Address:**

**Venue:** Kirwan Theatre, Arts Concourse Building

**Dr. Saoirse Nic Gabhainn**, Health Promotion Research Centre, NUI Galway

**Professor Gerard Loftus**, Dean of Medicine, Nursing and Health Sciences, NUI Galway

11.15am **Plenary: Policy**

**Venue:** Kirwan Theatre, Arts Concourse Building

- **Vivienne Barnekow**, Programme Manager, Child and Adolescent Health Development, WHO Regional Office for Europe
- **Dr. Sean Denyer**, Director, HSE Programme of Action for Children

*Chair: Robbie Breen, Health Promotion Policy Unit, Department of Health and Children*

12.00pm **Parallel Paper Session 1:**

**Venue:** AC201

*Chair: Ms. Saskia van Dorsselaer, Trimbos Institute, Netherlands*

**Parallel Paper Session 2:**

**Venue:** AC202

*Chair: Dr. Celia Keenaghan, HSE Population Health Children and Young People's Team*

**Parallel Paper Session 3:**

**Venue:** AC203

*Chair: Dr. Emmanuel Kuntsche, Swiss Institute for the Prevention of Alcohol and Drug Problems, Switzerland*

**Parallel Paper Session 4:**

**Venue:** AC204

*Chair: Dr. Jane Sixsmith, Health Promotion Research Centre, National University of Ireland, Galway*



11.00am

**Schools Health Promotion**

**Venue:** AC201

Facilitator: Mr. Ian Young, Formerly NHS Health Scotland

**Doing Participatory Research**

**Venue:** AC202

Facilitator: Ms. Siobhan O’Higgins, Health Promotion Research Centre, National University of Ireland, Galway

**Symposium: Zippy’s Friends – an emotional wellbeing programme for children in primary school**

**Venue:** AC203

Convened by: Professor Margaret Barry, Health Promotion Research Centre, National University of Ireland, Galway

**Parallel Paper Session 9**

**Venue:** AC204

*Chair:* Dr. Colette Kelly, Health Promotion Research Centre, National University of Ireland, Galway

12.30pm

**Closing Session**

**Venue:** Kirwan Theatre, Arts Concourse Building

*Chair:* Ms Olive McGovern, Office of the Minister for Children and Youth Affairs, Department of Health and Children

**Launch of Ethics of Children’s Research**

**Dr Sinead Hanafin**, Head of Research, Department of Health and Children

**Dr Anne Cleary**, Director of Research, School of Sociology, University College Dublin

**Dr Heike Felzmann**, Centre for Bioethical Research, National University of Ireland, Galway

**Conference Wrap-Up**

**Mr. Ian Young**, formerly NHS Scotland

1.30pm

**Lunch**

**Venue:** Foyer, Arts Concourse Building

## Plenary Speaker Biographies



Vivian Barnekow is working in the division for Country Health Systems at WHO, Regional Office for Europe. She taught in a comprehensive school in Denmark for a number of years, in which period she was also working as county educational adviser on health promotion programmes dealing with lifestyles, alcohol and drugs. Having finalised post-graduate education in health promotion she started working for WHO 15 years ago. Her main involvement for many years was with the European Network of Health Promoting Schools where she was responsible for the Technical Secretariat. The focus of her work now is coordination of child and adolescent activities in the European Region, and in particular the implementation of the European Strategy for Child and Adolescent Health and Development in a large number of countries in Europe. She is

the WHO focal point for the Health Behaviour in School-aged Children survey.



Sean Denyer is a medical doctor and public health physician who has worked in senior management roles for the last 15 years in both Ireland and the UK. He is currently the Director of the Children and Young People's Team in the Population Health Directorate in the Health Services Executive. He was previously director of Best Health for Children for the Health Board's Executive of Ireland, and has been responsible for setting up and leading two Public Health Departments from start-up in the UK and Ireland. Sean has strong expertise in research, practice, strategy

development and policy and to improve the health and wellbeing of children and young people. Much of his most recent work has involved developing programmes and models for training professionals working with children and young people in a range of settings to promote health and wellbeing.



Professor Candace Currie holds a Personal Chair in Child and Adolescent Health at the University of Edinburgh where she is founding Director of the Child and Adolescent Health Research Unit ([www.education.ed.ac.uk/cahru](http://www.education.ed.ac.uk/cahru)) established in 2000. CAHRU is dedicated to improving understanding of child and adolescent health in Scotland while taking a broad international perspective. Studies include projects that focus on cross-national comparisons as well as the evaluation of health-related programmes and interventions. Particular attention is given to young people's perceptions and the influence of the social and developmental context. Since 1989, Candace has been Principal Investigator for Scotland of the Health Behaviour in School-Aged Children

Study: WHO Collaborative Cross-National Study ([www.hbsc.org](http://www.hbsc.org)) and elected International Coordinator of the HBSC Study since 1995. The HBSC study began in 1983 as collaboration between three countries and today includes 43 member countries and a network of over 250 researchers in Europe and North America. The HBSC International Coordinating Centre is based at CAHRU. Candace's primary research interests are in socioeconomic inequalities in adolescent health, in puberty and health and in the development of biosocial perspectives on adolescent health; she is also dedicated to the dissemination of research to inform and influence policy and practice for young people's health improvement. Candace was awarded an OBE for services to healthcare in 2008.



Dr. Helen McAvoy graduated from Trinity College Dublin as a medical doctor in 1997 and worked for several years in both hospital and general practice. She completed her Masters in Health Promotion in NUI Galway and her thesis examined the role of day services for older people in rural Connemara. She has worked on a number of government programmes relating to ageing and older people. She is now working as Senior Policy Officer with the Institute of Public Health in Ireland focussing on the government's health inequality agenda in Ireland and Northern Ireland. In this role, she has contributed to a number of reports focusing on inequalities in maternal and child health, food poverty, fuel poverty and inequalities in the border region.



Goof Buijs (1954) is the manager of the Schools for Health in Europe network - SHE network- and is employed by the Netherlands Institute for Health Promotion NIGZ. He graduated at the Wageningen University in Human Nutrition (1980) and started his career as teacher trainer in health science on the Free University teacher trainer institute. In 1985 he started working in the area of school health promotion, 9 years in Amsterdam at the Amsterdam Health Education Bureau, and since 1995 at NIGZ. He is the author of the Dutch healthy school method and has been coordinator of the NIGZ school programme. He is involved in European and international work since 1996 as national coordinator for the European Network of Healthy Promoting Schools (ENHPS). He is international coordinator of the Healthy Eating and Physical Activity in Schools project.



Professor Nóirín Hayes, PhD, is a senior lecturer at the Dublin Institute of Technology within the School of Social Sciences and Law and Associate Director of the Centre for Social and Educational Research [CSER]. She is a developmental psychologist and lectures on children and childhoods, early education, children's rights and research methods. She is Principal Investigator on a number of research projects in the field of early childhood and the author of a number of publications on practice and policy in early childhood education.



Ian Young has ten years experience as a high school teacher and five years as an educational adviser in Strathclyde Region education department in Scotland. He was formerly Head of International Development at the national health promotion agency, NHS Health Scotland.

He has been involved in the health promoting schools movement in Europe as a key player since its inception in the 1980's and he is currently a consultant on school health for The International Union for Health Promotion and Education. He has also contributed to conferences in the USA, Canada and Australia and has a global network of contacts relating to health promotion in schools from his work with the World Health Organisation, The Council of Europe and The European Commission. He has worked in countries such as Kosovo, Russia, Azerbaijan and Uzbekistan and he is an author of two case studies in the new Springer publication "Case Studies in Global School Health Promotion" which has recently been published.



Caroline Cullen works as a Specialist (National Policy and Planning) in HSE Children's Services. She has developed policy proposals for standardised implementation by the HSE of the Personal Health Record, Child Health Information Services Project, Newborn Cystic Fibrosis Screening and for the establishment of a National Child Health Standards Group. She has also managed national projects on Pre-schools Standardisation of Inspection Processes and a National Audit of the Child Health Screening and Surveillance Programme. She is currently working on developing children's services for the HSE National Primary Care Programme and on the project management of newborn screening Programmes.

Caroline was an Assistant Director with the Programme of Action for Children (2002-2006) and a National Child Health Co-ordinator with Best Health for Children (1999-2002). Previously she worked as the National Education and Training Officer with the Health Promotion Unit, Dept. of Health and Children, as a trainer of teachers with the Dept of Education and Science, and as a part-time lecturer in the University of Limerick. She originally qualified in teaching and counselling and holds a Masters in Educational Leadership. She has undertaken professional development in health promotion, project management and public health leadership. Caroline is currently pursuing a Doctorate in Social Science focusing on the construction of children as a social problem in Irish social policy.



## Plenary Sessions

**Presenter:** Vivian Barnekow, Programme Coordinator, Child and Adolescent Health Development, WHO Regional Office for Europe

**Title:** European Strategy for Child and adolescent health

In general, children and adolescents in the WHO European Region today have better health and development than ever before. However although some progress has been made, this age group still Europe fall a long way short of achieving their full health potential. This results in significant social, economic and human costs. There are wide variations in young people's health in every Member State within the European Region. An investment in the early stages of development reaps dividends in later life and benefits the entire society.

Addressing child and adolescent health issues is the responsibility of the key partners in health at international, national and local level.

The purpose of the WHO European Strategy for Child and Adolescent Health is to assist Member States in formulating their own policies and programmes. It identifies the main challenges to child and adolescent health and development and, most importantly, provides guidance based on evidence and the experience gathered over recent years.

The rationale for investing in children and adolescents is threefold.

- We have a moral and legal obligation to protect and promote the rights of children and adolescents as embodied in the Convention on the Rights of the Child.
- Such investment will lead to the establishment of a healthier society in future years, along with the consequent social, community and individual benefits.
- It will promote social and economic development and sustainability, as interventions will be targeted at the most appropriate stages in the development of the child. This life-course approach will lead to the most efficient and effective use of resources.

The strategy for child and adolescent health and development is designed to help Member States achieve the following objectives:

- to develop a framework for an evidence-based review and improvement of national child and adolescent health and development policies, programmes and action plans, from a life-course perspective;
- to promote multisectoral action to address the main health issues related to child and adolescent health;
- to identify the role of the health sector in the development and coordination of policies and in delivering services that meet the health needs of children and adolescents.

Four guiding principles are imbedded in the project

- Life-course approach.
- Equity.
- Intersectoral action.
- Participation.

A toolkit has been developed to assist member states in reviewing, developing and implementing their own national policies, strategies and actions plans..

**Presenter:** Dr. Sean Denyer, Director, HSE Programme of Action for Children

**Title:** What We Know and What We Do: policy led approaches to addressing child and adolescent health and well-being in Ireland.

In this presentation I will make the case that we already have much of the knowledge needed to reduce inequalities and improve the health of well being of children and young people. The reasons for the failure to often put this knowledge into practice will be discussed, and examples given of some of the current gaps between policy and practice. An example of the successful translation of evidence into policy and then into practice in the area of Child Health will be given. Finally, possible actions to improve the situation in the future will be discussed.

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**Presenter:** Professor Candace Currie, HBSC International Coordinator and Chair of Child and Adolescent Health Research Unit, University of Edinburgh

**Title:** Dimensions of inequality in young people's health internationally: evidence for action in settings from the HBSC Study

The Health Behaviour in School-Aged Children: WHO Collaborative Cross-National Study (HBSC) provides a unique data source on the social context of health, health behaviours and health outcomes among young people in the early and middle years of adolescence (11-16 years). The focus of the most recent international report from the 2005/6 survey in 41 countries is inequalities according to age, gender, affluence and geography and this paper presents some key findings. The paper sheds lights on similarities and contrasts in the living and health experience of adolescents growing up in different parts of Europe and North America and identifies consistent patterns of inequality that need to be tackled in order to close the gap in child and adolescent health. The social domains of family, school and peers and socioeconomic conditions are examined as contextual factors that influence a range of health behaviours and health and well-being outcomes. The paper aims to contribute to a settings based approach by offering an evidence base to policy makers and practitioners that may help to shape their work.

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**Presenter:** Dr. Helen McAvooy, Senior Policy Officer, Institute of Public Health in Ireland

**Title:** Inequalities in child health – what do we know and where are we going?

This presentation explores how approaches to conceptualising and recording socio-economic inequalities in child health have developed over time. Directions for research on inequalities in child health in the future are then proposed. Despite quite striking improvements in some child health outcomes over the past thirty years in Ireland, there is also evidence of persistent health inequalities. In some aspects of child health and development good quality evidence exists, but in others the evidence is absent, fragmented or insufficient, leading to the further marginalisation of vulnerable groups of children. Data on inequalities in child health must be considered in the context of Ireland's high levels of child poverty. Even in peak times of economic development in Ireland, children remained the age-group most at risk of poverty.

Multi-sectoral commitment to reducing inequalities in child health is required if strategies aimed at reducing health inequalities at population level are to be successful. The World Health Organisation's Commission on Social Determinants of Health emphasises that policies and practices which support 'Equity from the Start' are critical to tackling health inequalities. In Ireland, economic downturn is already precipitating reductions in the financial supports available to parents through unemployment, reductions in wages and government allowances, as well as cuts in family support and children's services. There is therefore an urgent need for data to direct policy to both protect the health and wellbeing of children living in poverty and reduce inequalities in child health.

**Presenter:** Mr. Goof Buijs, Coordinator School Programme, Institute for Health Promotion and Disease Prevention, Netherlands

**Title:** How schools can contribute to better health

Goof will describe the health promoting school approach in Europe, the Schools for Health in Europe (SHE) core values and SHE pillars, what we know about the effectiveness and the evidence of health promoting schools, and about the SHE network including its plans for the future and how this could support the further development of Health Promoting Schools in Ireland.

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**Presenter:** Dr. Nóirín Hayes, Head of School of Social Sciences and Law, Dublin Institute of Technology, Ireland

**Title:** The policy document *A Vision for Change* (2006) noted that '*[T]o grow and develop as healthy individuals they need safety and security within their primary relationships, opportunities to play and learn, and the positive self-esteem that comes from knowing they are valued and cherished by families and friends*'. (p. 84).

Taking a lead from the conference theme this paper will consider the role of early years settings in closing the gap in child health and well-being. In this regard Irish policy makers have been slow to reflect on the dual potential of early years services for children and their families. Drawing on international and national research and literature this presentation will argue the case for an integrated policy approach to supporting a national, sustainable and high quality early years sector for young children, their families and society as a whole.

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**Presenter:** Ms. Caroline Cullen, Office of the CEO, Health Services Executive, Ireland

**Title:** Closing the gap in child and adolescent health: the settings approach - Settings

Caroline will address the issue of how to integrate child and adolescent health into a holistic vision for how children's services are delivered. She will particularly focus on how national policy and evidence-based practice can be delivered on through an integrated model for children's services that brings together primary, secondary and tertiary care.

## Oral Communications

**Thursday 11<sup>th</sup> - 9.00-10.40**

A	AC201; Chair - Dr. Ágnes Németh, National Institute of Child Health, Hungary
9.30	Joanna Mazur, Izabela Tabak and Ulrike Ravens-Sieberer <i>'Child and adolescent perception of life satisfaction: cantril validation study'</i>
9.45	Luis Calmeiro, Margarida Gaspar de Matos and Celeste Simões <i>'Is it valid yet? The social physique anxiety scale for Portuguese adolescents'</i>
10.00	Signe Boe Rayce <i>'Aspects of alienation and symptom load among adolescents'</i>
10.15	Emmanuel Kuntsche <i>'The importance of drinking motives in cross-national perspective'</i>

B	AC202; Chair - Dr. Carmen Moreno, University of Sevilla, Spain
9.30	Thoroddur Bjarnason and Arsaell M. Arnarsson <i>'Bullying and relations with friends and family'</i>
9.45	Adrien Gaudineau, Virginie Ehlinger, Catherine Arnaud and Emmanuelle Godeau <i>'Morning-after pill use among 15 years-olds in 11 European countries'</i>
10.00	Margreet de Looze <i>'Risky lifestyles among youth: a call for broad interventions'</i>
10.15	Thoroddur Bjarnason, Arsaell M. Arnarsson, and Sigrun Sveinbjornsdottir, <i>'The association of homosexual orientation with emotional and social problems among 15 year old students in Iceland'</i>

C	AC203; Chair - Professor Oya Ercan, Istanbul University, Turkey
9.30	Ronald J. Iannotti and Jing Wang <i>'Motivations for U.S. Adolescent Physical Activity: Gender, Race, and Ethnic Differences'</i>
9.45	Pernille Bendtsen, Helene N. Jensen, Christina W. Schnohr, Rikke Krølner and Anette Andersen <i>'National level indicators: a new database and preliminary findings'</i>
10.00	Torbjørn Torsheim, Ulrike Ravens-Sieberer, Raili Välimaa, Gyöngyi, Kokonyei, Jørn Hetland and the Positive Health Group <i>'Crossnational consistency of gender differences in health complaints: The role of gender development'</i>
10.15	Helene Nordahl, Bjørn E. Holstein and Mogens T. Damsgaard <i>'Immigrant status and social class as predictors of toothbrushing among 11, 13 and 15-year-olds in Denmark'</i>

**12.00-13.00 Thursday 11<sup>th</sup>**

<b>1</b>	<b>AC201; Chair - Ms. Saskia van Dorsselaer, Trimbos Institute, Netherlands</b>
12	Fiona Brooks, Ellen Klemmer, Josefine Magnusson and Antony Morgan <i>'Beyond questions and answers: Young people's participation in the HBSC England study'</i>
12.15	Gail Cummins, Colette Kelly, Priscilla Doyle, Michal Molcho, Jane Sixsmith and Saoirse Nic Gabhainn <i>'The process of producing a youth friendly resource using data from HBSC Ireland 2006'</i>
12.30	Aisling McLaughlin, Mary McColgan and Anne Campbell, <i>'Accessing Young People's Views on Drug use in Northern Ireland using Participatory Techniques'</i>
12.45	Siobhan O'Higgins and Saoirse Nic Gabhainn <i>'Adapted participative methodological approach sexual health promotion research'</i>

<b>2</b>	<b>AC202; Chair - Dr. Celia Keenaghan, HSE Population Health Children and Young People's Team</b>
12	John Freeman, Oddrun Samdal and Delia Bancila <i>'The relationship between school and emotional health: A cross-country comparison of Canada, Norway, and Romania'</i>
12.15	O. Samdal, J. Freeman, D. Bancila, A.G. Danielsen, M. Rasmussen, R. Griebler, W. Dür, and D. Currie <i>'The role of support and demands for students liking of school and academic achievement'</i>
12.30	Teresa Lavin, Claire Higgins and Owen Metcalfe <i>'Towards Healthier Education - The Evidence'</i>
12.45	Robert Griebler <i>'Led into burnout? – Analyses of associations between leadership style and burnout of Austrian school teachers'</i>

<b>3</b>	<b>AC203; Chair - Dr. Emmanuel Kuntsche, Swiss Institute for the Prevention of Alcohol and Drug Problems, Switzerland</b>
12	Frank Elgar and William Boyce <i>'Can neighbourhood social capital reduce health inequalities in youth? Evidence from the Canadian Health Behaviour of School-aged Children study'</i>
12.15	Alessio Zambon, Antony Morgan, Carine Vereecken, Sabina Colombini, Will Boyce, Joanna Mazur, Patrizia Lemma and Franco Cavallo. <i>'The contribution of clubs participation to adolescent health: evidence from 6 countries'</i>
12.30	Chalida Svastisalee, Mette Rasmussen, Mogens T. Damsgaard, Bjørn Holstein and Pernille Due <i>'The neighborhood food environment and fruit and vegetable intake among boys and girls in Denmark'</i>
12.45	M. Lenzi, M. Santinello and L. Dallago <i>'Neighbourhood as context of development: the promotive effect of social capital on psychosocial well-being and prosocial values'</i>

<b>4</b>	<b>AC204; Chair - Dr. Jane Sixsmith, HPRC, National University of Ireland, Galway</b>
12	Mary O'Hara and Dr. Margaret Hodgins <i>'Living with Chronic Illness: Insights of young people with juvenile idiopathic arthritis on their condition, their quality of life and their health care services'</i>
12.15	Emmanuelle Godeau, Mariane Sentenac, Virginie Ehlinger, Céline Vignes <i>'Improving attitudes towards children with disabilities in a school context: a randomized intervention study'</i>
12.30	Mariane Sentenac, Paul Sabatier, ARNAUD Catherine, Paul Sabatier, <i>'The Quality of Life of children with cerebral palsy in Europe: the SPARACLE study'</i>
12.45	Jerome Goldstein <i>'The Neurobiology of Sexual Orientation'</i>

**15.00-17.00 Thursday 11<sup>th</sup>**

<b>5</b>	<b>AC203; Chair - Dr. Don Klinger, Queen's University at Kingston, Canada</b>
15.00	
15.15	Bjørn Holstein, Mogens Trab Damsgaard, Pia Wicmann Henriksen, Rikke Krølner, Mette Rasmussen, Signe Boe Rayce, Chalida Svastisalee and Pernille Due <i>'Active avoidance of physical education classes: the influence of norms and social class'</i>
15.30	A. Örkényi, G. Kökönyei, I. Zakariás, D. Várnai and A. Németh <i>'Deviance and perception of school: role of schoolclass-level attitudes'</i>
15.45	Hana Saab and Don Klinger <i>'Self-rated Health: The association of student and school-level factors'</i>
16.00	Ursula Mager, Robert Griebler, Peter Nowak and Wolfgang Dür <i>'Development of HBSC survey tools to measure student participation in school decision making processes – An Austrian example'</i>
16.15	Break

<b>7</b>	<b>AC203; Chair - Dr. Michal Molcho, HPRC, National University of Ireland</b>
16.30	Sheelagh Broderick <i>'Visual Research Methods: Evaluation or Practice?'</i>
16.45	Craig Hodges, Tony Bates and Bob Illback <i>'Youth Mental Health: Making a shift to a new paradigm'</i>
17.00	Siobhan Brennan <i>'Developing Primary Care Services for Adolescents: A Participatory Approach'</i>
17.15	Mary Russell <i>'Teen Health Initiative'</i>
<b>17.30</b>	<b>RECEPTION</b>

<b>6</b>	<b>AC204; Chair - Dr. Winifried van de Sluijs, University of Edinburgh</b>
15.15	Béat Windlin and Emmanuel Kuntsche <i>'Do you like what you (have to) do with your parents? Differences in the impact of joint family activities on adolescent problem behaviours'</i>
15.30	Victoria Hogan, Margaret Hodgins and Marie Galvin <i>'Employment in post-primary students and their attitudes to occupational health and safety: Results from the 'Choose Safety' Evaluation'</i>
15.45	John Freeman, Matthew King and William Pickett <i>'The protective roles of social environments for the health of young Canadians: an application of population health theory'</i>
16.00	
16.15	Break

<b>8</b>	<b>AC204; Chair - Dr. Jacky Jones, Functional Manager for Health Promotion, HSE West</b>
16.30	Antoinette Hassett and Joan Crawford <i>'Health Promoting School in the HSE Dublin North East'</i>
16.45	Jean Lodge and Elaine Mullan <i>'Active Transportation to School: "You'd look like a right idiot showing up on a bike"'</i>
17.00	Fergal Fox <i>'Adolescent health - Community Setting 'Young Traveller Men's Health Needs in the Midlands'</i>
17.15	Fiachra O'Mathuna and Meabh McGuinness <i>'HSE Community Games - building health promotion capacity in a voluntary organisation'</i>
<b>17.30</b>	<b>RECEPTION</b>

**11.00-12.00 Friday 12<sup>th</sup>**

<b>9</b>	<b>AC204; Chair - Dr. Colette Kelly, HPRC, National University of Ireland</b>
11.00	Bernadine Brady <i>'Promoting resilience: Children and young people's participation in family welfare conferences'</i>
11.15	Marcella Kelly and Sínead Hahessy <i>'Exploring multidisciplinary knowledge of child protection. Phase one of a research project'</i>
11.30	Agnes Tully Clarke <i>'Reassuring our children during this economic crisis'</i>
11.45	C. Johnston, C. Molloy, C. Corish, J. Kearney, N. Hayes and C. Glennon Slattery <i>'The HIP (Healthy Incentive for Pre-schools) Project: Results of a pilot assessment of pre-school nutrition practices in full day care Irish Pre-schools'</i>
12.00	Helen Lynch and Noirin Hayes <i>'Every day learning in home environments for children under two: the power of the ordinary'</i>
12.15	Aislinn Murphy <i>'Healthy eating for the preschool years'</i>

## Oral Communications

**A** AC201; Chair - Dr. Ágnes Németh, National Institute of Child Health, Hungary

**Presentation Title:** Child and Adolescent Perception of Life Satisfaction: Cantril Validation Study

**Author(s) and Affiliation:** Joanna Mazur<sup>1</sup>, Izabela Tabak<sup>1</sup> and Ulrike Ravens-Sieberer<sup>2</sup>  
<sup>1</sup>Institute of Mother and Child, Warsaw, Poland  
<sup>2</sup>University Medical Center Hamburg-Eppendorf, Germany

**Objective:** To investigate the relationship between Cantril concept and more comprehensive model of health.

**Methods:** Data come from KIDSCREEN-52 survey conducted in 2003 in Poland, Czech Republic and Hungary on the sample of 4983 children aged 9-18 years. Multivariate linear, binary logistic and multinomial logistic regression models were compared. Independent variables included age, gender and ten KIDSCREEN-52 scores, transformed into 0-100 values. Additional models specific for countries and age groups were estimated (not described below).

**Results:** In the linear model, four KIDSCREEN-52 dimensions had substantial impact: psychological wellbeing ( $\Delta R^2=0.296$ ), parents and home life ( $\Delta R^2=0.077$ ), self-perception ( $\Delta R^2=0.033$ ), financial resources ( $\Delta R^2=0.016$ ). In binary logistic model, psychological wellbeing also appeared as the most important factor ( $\Delta R^2$  Nagelkerke =0.241). Multinomial logistic regression with middle level as reference category, showed that low score on the dimension of moods and emotions was the main predictor of low life satisfaction, but did not reduce OR of high Cantril score. In all models, physical health, autonomy, peers, school and bullying account for a very small amount of extra variance.

**Conclusions:** Adolescent perception of life satisfaction is dominated by positive emotions, but other often neglected factors should be considered, especially child-parent relation and self-perception. These results may be helpful in the interpretation of HBSC data.

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**Presentation Title:** Is it valid yet? The social physique anxiety scale for Portuguese adolescents

**Author(s) and Affiliation:** Luis Calmeiro, University of Abertay Dundee, UK  
Margarida Gaspar de Matos, Faculty of Human Movement, Portugal  
Celeste Simões, Faculty of Human Movement, Portugal

Social physique anxiety (SPA) has been associated with a range of psychosocial and health-related variables. The purpose of this paper is to determine the factorial validity and group invariance of the translated 7-item social physique anxiety scale (SPAS) among Portuguese adolescents. A nationally representative sample of 3330 8th and 10th grade students ( $15.07 \pm 1.34$  years old; 47.5% males and 52.5% females) answered a survey as a part of a larger collaborative cross-national survey, the Health Behaviour in School-Aged Children (HBSC) 2006 study. Exploratory and confirmatory factor analyses resulted on a uni-dimensional factor structure of 6 items [Satorra-Bentler  $\chi^2 = 30.85$ ,  $df = 8$ ,  $p < .01$ ; CFI = .996; NNFI = .992; RMSEA = .038 (90% C.I.: .024 - .052); SRMR = .010]. Configurational and metric invariances across gender, grade level, diet beliefs, physical activity, perception of body, and BMI were confirmed. Between subject comparisons provide further evidence of construct and concurrent validity: girls, those who are or believe should be on a diet, those who are less active, and those who report feeling low regularly score significantly higher in SPA than their counterparts. It appears that SPAS has the potential to be an indicator of social-psychological adjustment.



**Presentation Title:** Aspects of alienation and symptom load among adolescents

**Author(s) and Affiliation:** Signe Boe Rayce

**Objectives:** To examine the association between aspects of alienation and symptom load. Furthermore an integrated purpose was to construct and validate an alienation scale.

**Methods:** Analyses were based on Danish HBSC data (n=5205). Alienation was measured with a new scale fulfilling four criteria: 1) theoretical foundation, 2) inter-correlation between items, 3) correlation between each of the scale's items and the outcomes and 4) no differential item functioning. The final scale included three indicators of alienation: helplessness, feeling left out of things and lack of confidentiality with parents. Symptom load was measured by HBSC-SCL and divided into physical and psychological symptoms respectively. High symptom load was defined as experiencing at least one symptom on a daily basis.

**Results:** The odds-ratio (OR) for high symptom load increased with the degree of alienation. For students with all three indicators of alienation, the OR for high physical symptom load was 2.49 (1.05-5.87). The OR for high psychological symptom load was for the corresponding degree of alienation 6.50 (3.11-13.56).

**Conclusions:** The alienation scale fulfilled psychometric criteria for scalability. Furthermore analyses showed a graded and significant association between alienation and high symptom load. This suggests alienation to be taken into account in future health interventions among adolescents.

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**Presentation Title:** The importance of drinking motives in cross-national perspective

**Author(s) and Affiliation:** Emmanuel Kuntsche

Research has demonstrated that drinking motives are important determinants of health behaviours in adolescence. Drinking motives are defined as the final decision whether to drink or not to drink and therefore the most proximal factor for engaging in drinking. In other words, drinking motives are the final pathway to alcohol use, i.e. the gateway through which more distal influences are mediated. Moreover, drinking motives are related to a variety of problem behaviours such as academic failure, violence, and delinquency over and above alcohol use levels. Therefore, authors argue that drinking motives are useful in early identification and intervention for adolescents who are likely to experience a variety of problem behaviours. Unfortunately, most evidence has been restricted to North America. In particular, cross-cultural studies are scarce partly because no concise theoretically-based questionnaire has been available until recently.

The presentation will provide a short overview of the importance and cross-cultural evidence of drinking motives in adolescence. The Drinking Motive Questionnaire Revised Short Form (DMQ-R SF) will be introduced which has been developed in Switzerland based on the 2003 ESPAD data and validated by means of the 2006 HBSC data. The results demonstrate that the 12-item DMQ-R SF reliably and validly measures the four principal motive dimensions. This demonstrates the potential of the instrument when included in large health monitoring surveys. Further advantages of the DMQ-R SF (e.g., in terms of policy making) will be discussed. The overall aim of the presentation is to promote the inclusion of the DMQ-R SF as optional package in the 2010 HBSC survey. Providing data from a large number of countries (including Southern and Eastern Europe in particular), the HBSC study could make a unique contribution to drinking motive research.

<b>B</b>	<b>AC202; Chair - Dr. Carmen Moreno, University of Sevilla, Spain</b>
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**Presentation Title:** Bullying and relations with friends and family

**Author(s) and Affiliation:** Thoroddur Bjarnason, University of Akureyri, Iceland  
Arsaell M. Arnarsson, University of Akureyri, Iceland

**Objectives:** To analyse the prevalence and forms of bullying amongst male and female students, the relationship with ease of communication with family and friends, as well as life-satisfaction.

**Methods:** Of a total of 13,384 students in these age-groups in Iceland, answers were received from 11,813 or 88.3% of the population.

**Results:** 8.8% of students claimed to be victims, bullies or both; 10.4% of boys, and 5.7% of girls ( $\chi^2= 228.372$ ,  $df = 6$ ,  $p < 0.001$ ). Boys also bullied other students more often than girls, 4.4% versus 1.7% respectively. Bully-victims became relatively fewer with increasing age, whilst the bullies became more numerous ( $\chi^2= 224.096$ ,  $df = 12$ ,  $p < 0.001$ ). Boys were more likely to be bullied because of their religion ( $\chi^2= 4.104$ ,  $df = 1$ ,  $p < 0.05$ ), were more likely to have physical fights ( $\chi^2= 4.522$ ,  $df = 1$ ,  $p < 0.05$ ) and to be called names ( $\chi^2= 18.284$ ,  $df = 1$ ,  $p < 0.001$ ).

**Key conclusions:** Bullying is not as frequent in Iceland as in many other countries. Boys are more likely to be victims, but are also more likely to bully others. Bully-victims decrease in numbers with increasing age, but the reverse is true of bullies.

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**Presentation Title:** Morning-after pill use among 15 years-olds in 11 European countries

**Author(s) and Affiliation:** Adrien Gaudineau<sup>1</sup>, MD, Virginie Ehlinger<sup>1</sup>, MS, Catherine Arnaud<sup>1</sup>, MD and Emmanuelle Godeau<sup>1, 2</sup>, MD, PhD,  
<sup>1</sup>INSERM U558, Toulouse, France  
<sup>2</sup> Service médical du rectorat, Toulouse, France

**Objectives:** To investigate differences in morning-after pill use at last sexual intercourse in the 11 countries that asked about it and to investigate factors (family, social and school environment, substance use, initiation of sexual activities, age at menarche) associated with contraceptive use, and use of morning-after pill particularly.

**Methods:** Chi-square test, to compare the contraceptive use patterns across countries.

Multilevel multinomial logistic regression analysis, to determine factors related to contraceptive behaviour in 3 groups (“poorly protected”, “well protected”, “morning-after”).

**Results:** Of the 1807 girls reporting ever had sexual intercourse and whose contraceptive behaviour was known, 133 (7.3%) reported having used the morning-after pill at last sexual intercourse, from 1.9% in Hungary to 16.4% in France ( $p < 0.001$ ). For 26 girls, morning-after pill was the only protection used against pregnancy.

When comparing the “poorly protected” girls and the girls using the morning-after pill to the “well protected” girls, we found that easy communication with at least one adult was associated with a reduced odd of using the morning-after pill ( $OR=0.53$ ,  $p=0.002$ ). Results also showed that the risk of using the morning-after pill was related to weekly tobacco use, cannabis experimentation and drunkenness.

**Presentation Title:** Risky lifestyles among youth: a call for broad interventions

**Author(s) and affiliation:** Margreet de Looze, Utrecht University

Adolescence is a time for experimentation, even – and maybe especially – if risks are involved. A sense of invincibility, combined with bravado, may increase the appeal of behaviours like drinking alcohol, smoking tobacco and cannabis, and engaging in (early and unsafe) sexual intercourse. Although these behaviours can have a positive function, for example in terms of social relations, they have been related to severe negative health effects including cancer, neurological damage, and mental health problems. Previous research has demonstrated that chances of experiencing negative health effects strongly increase when youth engage in more than one risk behaviour at the same time.

The current study investigates the co-occurrence among risk behaviours among 15-year-old European youth in two different ways. First, we conducted factor analyses to investigate whether the four behaviours loaded on one single factor and to find out whether the same results were found in all countries participating in the HBSC study. Subsequently, we performed a latent class analysis in the Netherlands in order to find out how many different lifestyles exist with respect to risk behaviour among Dutch youth and to identify those youth who belong to the 'high risk' and the 'low risk' group.

Preliminary results show that drinking alcohol, smoking tobacco and cannabis, and engaging in sexual intercourse load on a single factor in all HBSC countries, indicating that they form a cluster of problem behaviour in adolescents at age 15. In addition, the latent class analysis identified two groups of youth with clearly different lifestyles. About 20% of all Dutch youth belonged to the 'high risk' group, scoring high on all four risk behaviours, and 80% belonged to the (relatively) 'low risk' group. The high and low risk group will be compared based on background characteristics and health outcomes. Based on these findings, it is advisable that broad intervention programmes are developed for the 'high risk' group, targeting their lifestyle as a whole instead of single aspects that form part of this lifestyle.

Next steps to be taken at this point are explaining the relations between the cluster of risk behaviour and socio-economic status, school level, and other background variables. This is currently done by means of mediation testing in structural equation models.

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**Presentation Title:** The association of homosexual orientation with emotional and social problems among 15-year old students in Iceland

**Author(s) and Affiliation:** Thoroddur Bjarnason, University of Akureyri, Iceland  
Arsaell M. Arnarsson, University of Akureyri, Iceland  
Sigrun Sveinbjornsdottir, University of Akureyri, Iceland

Considerable research evidence suggests that homosexual adolescents are at increased risk for various emotional, behavioural and social problems. However, such studies are frequently based on qualitative research among small, non-representative samples of youth that have established a firm homosexual identity. Nationally representative studies of the association of sexual orientation and such problems remain scarce. The 2006 HBSC study in Iceland employed a split-half sample methodology that enabled the research team to develop measures of sexual orientation in 50% of the national sample. 3.2% of 15-year old students report same-sex attraction or sexual experiences and are classified as having a homosexual orientation for the purposes of the current study. Results show that adolescents with a homosexual orientation are significantly less likely to maintain healthy lifestyles than their heterosexual counterparts. They are also more likely to smoke cigarettes, get drunk and use cannabis. They report less satisfying relations with their parents,

are less satisfied in school, are less integrated into the school community and are much more likely to have been bullied. Finally, they report more psychological distress and a more negative body image. Findings are discussed in terms of the health consequences of internal and external strains experienced by homosexual adolescents.

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<b>C</b>	<b>AC203; Chair - Professor Oya Ercan, Istanbul University, Turkey</b>
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**Presentation Title:** Motivations for U.S. Adolescent Physical Activity: Gender, Race, and Ethnic Differences

**Author(s) and Affiliation:** Ronald J. Iannotti and Jing Wang, National Institute of Child Health and Human Development (USA)

**Purpose:** To examine the potential role of motivation in gender and racial/ethnic differences in adolescent physical activity (PA).

**Methods:** A nationally-representative sample of 8,842 U.S. adolescents ages 11 to 16 (52% female; 43% White; 20% African-American; 26% Hispanic; 11% 'Other') participated in the Health Behaviour in School-Aged Children survey assessing PA, socioeconomic status, and motivations for PA with a previously validated measure. Structural equation models (SEM) controlling for age and socioeconomic status (SES), including one stratified by gender and race/ethnicity, predicted PA.

**Results:** Confirmatory factor analysis indicated that there was measurement invariance across the groups for all measures. In all race/ethnic groups, PA and two motivation subscales (social and health) were positively related to SES and significantly higher in males than females. Across the ages studied, PA decreased with age in females only. PA was highest in White adolescents and lowest in African-American females. The level and predictive value of the motivation subscales varied significantly across gender and race/ethnicity. Social motivation was a significant predictor of PA in African-American females only. Health motivation was significantly associated with PA in all subgroups with the exception of African-American males. Adding motivations to a SEM model including age, race/ethnicity, and SES increased  $R^2$  from .15 to .24.

**Conclusions:** Health motivation was related to PA in most groups; however, facilitating social motivation for PA may be useful for programs targeting the group with the lowest level of PA, African-American females. Identifying motivations for PA in African-American males requires further research.

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**Presentation Title:** National level indicators: a new database and preliminary findings

**Author(s) and Affiliation:** Pernille Bendtsen<sup>1</sup>, Helene N. Jensen<sup>1</sup>, Christina W. Schnohr<sup>1</sup>, Rikke Krølner<sup>2</sup> and Anette Andersen<sup>2</sup>

<sup>1</sup>Department of Social Medicine, University of Copenhagen

<sup>2</sup>National Institute of Public Health, Copenhagen

The objective was to create a database including national level indicators for use in the HBSC network. This presentation will also include some preliminary findings.

We included data from other available data sources, e.g. tobacco control database from WHO. We show analyses of the association between smoking prevalence (HBSC data) and legislation, sale statistics.

We would like to have input on how to proceed in order to create a database which is useful for others in HBSC.

**Presentation Title:** Crossnational consistency of gender differences in health complaints: The role of gender development  
**Author(s) and Affiliation:** Torbjørn Torsheim, Ulrike Ravens-Sieberer, Raili Välimaa, Gyöngyi, Kokonyei, Jørn Hetland and the Positive Health Group

**Objectives:** In a previous paper on the HBSC 1997/98 material we revealed cross-national variation in gender differences of health complaints. The present paper aims to replicate and extend that finding by using the HBSC 2005/06 material in conjunction with the 2001/05 material.

**Methods:** The 2001/02 and 2005/6 international HBSC material was combined and analysed. Health complaints were measured with the HBSC symptom checklist. Data were analysed with Stata 10 XTMIXED and XTMELOGISTIC procedure for mixed effects regression analysis. Gender Development Index from the UNDP was the key country level independent variable.

**Results:** The fixed effect of gender was highly consistent across survey rounds. The UNDP Gender development Index predicted lower level of health complaints in boys and in girls, but did not predict between-country variation in gender differences.

**Conclusion:** There is a temporally stable variation in the magnitude of gender differences in health complaints, but the Gender Development Index does not moderate these differences.

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**Presentation Title:** Immigrant status and social class as predictors of toothbrushing among 11, 13 and 15-year-olds in Denmark.  
**Author(s) and Affiliation:** Helene Nordahl<sup>1</sup>, Bjørn E. Holstein<sup>1</sup> and Mogens T. Damsgaard<sup>1</sup>  
<sup>1</sup>Department of Social Medicine, University of Copenhagen  
<sup>2</sup>National Institute of Public Health, Copenhagen

**Objective:** The factors underlying differences in tooth brushing among children and adolescents, in particular the role that socioeconomic position in combination with immigrant status may play, has not yet been clarified. We intend to investigate whether immigrant status and family social class are independent or interdependent predictors of tooth brushing among 11, 13 and 15-year-olds in Denmark.

**Material and method:** This study reports 2002 and 2006 data from the Danish contributions to the HBSC study. The combined dataset contains information from 11.020 students of which 9.980 students are ethnic Danes, 574 students are children of migrants and 466 are migrants. We use unconditional multilevel logistic regression modelling to estimate ORs of infrequent tooth brushing (brush teeth once a day or less). All analyses are performed separately for boys and girls and adjusted for age. Data analysis consists of three activities: First, we explore the association of immigrant status and family social class with infrequent tooth brushing respectively. Second, we explore the association between immigrant status and infrequent tooth brushing in statistical models stratified by family social class. Third, we use a combined variable of immigrant status and family social class to explore the joint effect of the two social statuses on infrequent tooth brushing.

<b>1</b>	<b>AC201; Chair - Ms. Saskia van Dorsselaer, Trimbos Institute, Netherlands</b>
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**Presentation Title:** Beyond questions and answers: Young people's participation in the HBSC England study

**Author(s) and Affiliation:** Fiona Brooks, Ellen Klemers, Josefine Magnusson and Antony Morgan, University of Hertfordshire.

**Aim:** This paper will describe the process and outcomes of running reference groups with young people in order to gain insight into their views of the HBSC study.

**Background:** Participant involvement in all stages of research and not just as subjects is increasingly seen as vital to the research process, as it provides a perspective on the research from the participant's point of view. However in England, previously HBSC study has not actively sought young people's own interpretation and participation.

**Method:** Young people were asked, in small single sex groups, to interpret findings from the 2006 data set from their own experiences, including social context and health behaviour data. The groups have been set up to represent the ages included in the HBSC, i.e 11, 13 and 15. We also facilitated feedback on the types of questions that were being asked, and the procedure of data collection. At the end of the session, the young people used the discussions to produce HBSC fact sheets aimed particularly at their age group.

**Discussion:** The discussion will elaborate how the elicitation of young people's perspectives and interpretations of key HBSC topics offers valuable insights into not only how the data should be interpreted and further analysed, but also for future question development.

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**Presentation Title:** The process of producing a youth friendly resource using data from HBSC Ireland 2006

**Author(s) and Affiliation:** Gail Cummins, Colette Kelly, Priscilla Doyle, Michal Molcho, Jane Sixsmith and Saoirse Nic Gabhainn, Health Promotion Research Centre, NUI Galway.

The Health Behaviour in School-aged Children (HBSC) study is an international survey, with the most recent survey conducted in Ireland in 2006, funded by the Department of Health and Children. During the HBSC survey, children voluntarily give their time and information about themselves. However, beyond the data collection phase children are not involved in the study, whereas other stakeholders are provided with various dissemination options and can request specific data analysis and topic-focused reports.

The aim of this study is to explore young people's ideas in relation to how the HBSC Ireland data can be disseminated as a youth friendly resource. Through workshops a participatory approach is being utilised. The objectives of this study are twofold: 1) to establish effective methods and levels of engagement in the research process, and 2) to gain an insight into the importance of the HBSC topics to children. Three pilot studies have been carried out in both primary and post-primary schools in Galway city. Recruitment of both primary and post-primary schools is currently taking place. It is anticipated that eight schools, including both DEIS/ non-DEIS schools of mixed gender will participate in the study, located in both rural and urban areas of Ireland.

**Presentation Title:** Accessing Young People's Views on Drug use in Northern Ireland using Participatory Techniques

**Author(s) and Affiliation:** Aisling McLaughlin, Queen's University Belfast, Mary McColgan, University of Ulster and Anne Campbell, University of Ulster

**Aim:** The aim of this study was to actively involve young people in the research process by '*feeding back*' the results from a focus group (n=62) and questionnaire study (n=1,114) which had previously been carried out by the researcher. The objectives were twofold: 1) to give the young people the opportunity to interpret and evaluate the research findings and; 2) to enable them to make their own recommendations for policy based on the findings.

**Method:** Six focus groups were facilitated consisting of 40 students (19 males and 21 females) aged 12 to 17 years old in schools across Northern Ireland.

**Findings:** Overall, participants agreed with the main themes which emerged from the studies. However, they felt that reported drug use was significantly lower than what they expected. Participants gave a number of reasons as to why they felt this was the case.

**Conclusion:** The study highlighted the importance of involving young people in the research process as a method of evaluating and explaining previous research findings and to make recommendations for future research studies. Overall, it gave participants the opportunity to 'voice' their own views on the direction of policy making and health promotion in relation to drug use by young people.

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**Presentation Title:** Adapted participative methodological approach to sexual health promotion research.

**Author(s) and Affiliation:** Siobhan O'Higgins and Saoirse Nic Gabhainn, Health Promotion Research Centre, NUI Galway.

This presentation examines how the participative methodology can be adapted in a study on positive sexual health promotion. Initially 409 young people over the age of 18 filled in questionnaires on their sexual practices and attitudes in order to ascertain their views on the reasons that young people in Ireland do or don't use condoms. The data from the qualitative responses was translated into 'issue cards' and used as the basis for the participative methodology with Transition year (15-17year old) students.

The participative methodology protocol developed organically during the work in 14 schools with 428 students. There have been three adaptations to the protocol in order to facilitate these specific young people in their work towards creating, collating and presenting data that meet the aims of the study, which were "*to work in participative ways that allow the voice of young people to be heard and facilitate Transition Year students to develop a resource that promotes safer sexual behaviours as part of the Relationship and Sexuality Education (RSE) programme that reflects the perceived needs of the participants in terms of content and delivery*". Interesting data has emerged as well a methodology that was effective in facilitating participants in decision making and thought processing during the workshops – 'The Webs'.

2	AC202; Chair - Dr. Celia Keenaghan, HSE Population Health Children and Young People's Team
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**Presentation Title:** The relationship between school and emotional health: A cross-country comparison of Canada, Norway, and Romania

**Author(s) and Affiliation:** John Freeman<sup>1</sup>, Oddrun Samdal<sup>2</sup> and Delia Bancila<sup>2</sup>  
<sup>1</sup>Queen's University at Kingston, Canada, <sup>2</sup>University of Bergen

This study examines the country effects, as moderated by age, on school climate, peer support, and psychosomatic symptoms in Canada, Norway, and Romania. In addition, it investigates how school climate and peer support differentially predict emotional health across the three countries using Structural Equation Modelling (SEM). For all analyses, we include perceived academic achievement and school satisfaction as contrast outcome variables to emotional health. We found country effects for the levels of the five variables, with Canada reporting the highest levels of school climate, emotional health, and academic achievement (the latter not significantly different from Romania), but the lowest levels of peer support and school satisfaction. Romanian adolescents reported the lowest levels of school climate and emotional health, while the Norwegian adolescents, while indicating the highest levels of peer support and school satisfaction, reported the lowest academic achievement. Fit statistics indicated that the SEM models fit the data very well. School climate was significantly related to all outcome variables in all three countries, while the effect of peer support tended to differ across countries and be weaker than that of school climate. Results are discussed with respect to the current literature and the varying educational systems across the three countries.

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**Presentation Title:** The role of support and demands for students liking of school and academic achievement

**Author(s) and Affiliation:** O. Samdal, J. Freeman, D. Bancila, A.G. Danielsen, M. Rasmussen, R. Griebler, W. Dür and D. Currie

**Objectives:** The aim of this paper is to test the importance of students' school experiences in terms of support and perceived demands in school, for their academic performance and liking of school.

**Methods:** HBSC data from 22 countries that used the school optional packages in the 2005 survey were used. Only data from 13 and 15 year olds were included. Multiple linear regression analyses were employed.

**Results:** Initially the relationship between the school environment index and academic achievement and liking of school was analysed. The index had low explanatory power, and therefore the student support, teacher support and perceived school demands were analysed as separate dimensions. They explained 7-31% of the variance in students' academic achievement and liking of school across the 22 countries. High student support was positively related to both academic achievement and students' liking of school across all countries ( $\beta$  ranging from .10-.31). Similarly perceived high school demands were consistently negatively associated with the two outcomes ( $\beta$  .09-.35). Teacher support was positively associated with both academic achievement and school liking, but not consistently across countries.

**Key conclusions:** These findings support theories of adult work environment research as well as the importance of meeting needs for relatedness and competence in adolescents' life settings.



**Presentation Title:** Towards Healthier Education – The Evidence

**Author(s) and Affiliation:** Teresa Lavin, Claire Higgins and Owen Metcalfe  
Institute of Public Health, Ireland

There is considerable evidence that those with more education experience better health than those with less education. A recent review of evidence conducted by the Institute of Public Health in Ireland demonstrates and explores the links between education and health. The purpose of the document is to stimulate dialogue and action among people from different sectors whose work impacts in this area, from policy or practitioner perspective.

Key findings from the review will be presented including:

- A model illustrating pathways between education and health
- Clearly documented evidence of the impact that poor educational status has on health.
- An overview of evidence which investigates the causal pathways between education and health particularly in the areas of economic, social and personal development
- Consideration of the factors which influence opportunities for education at different levels including national policies and programmes through to individual and family circumstances
- Key areas for action.

This is the fourth in a series of reviews which aim to support more informed decision making for better health. It is particularly aimed as a support for those conducting Health Impact Assessments in this area.

Previous reviews focused on Transport, Employment and the Built Environment.

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**Presentation Title:** Led into burnout? – Analyses of associations between leadership style and burnout of Austrian school teachers

**Author(s) and Affiliation:** Robert Griebler, Ludwig Boltzmann Institute Health Promotion Research

**Objectives:** Burnout is a prevalent phenomenon among teachers. Current studies report that one out of three teachers is affected by burnout experiences and that teachers are more affected by burnout than several other professions. Aside from individual factors, workplace-related factors are accountable for the development of burnout. The following study focuses on the importance of “transformational” leadership-behaviour for the emergence of teacher burnout.

**Methods:** Data were collected in the context of the 7th international HBSC survey (2006). The sample consists of 2,498 Austrian teachers, coming from 317 schools (response rate = 70.4%). The sample is representative for school type, age, gender and municipalities. The impact of leadership-behaviour was studied by using multilevel and structural equation modeling techniques.

**Results:** Based on a shortened version of the Maslach Burnout Inventory, 17.9% of the Austrian teachers were affected by burnout. There were no significant gender differences and differences by weekly working time had only a small impact. The quality of leadership-behaviour was rated very positively. In total, 32% of teachers stated that their head teachers act in a transformational (supportive and empowering) way, whereas 17% stated that this was (rather) not the case. Furthermore, results showed that perceived leadership behaviour had a moderate impact on teachers’ burnout situation.

**Key conclusions:** Establishment of a transformational leadership style in schools may be one possibility to protect teachers from sliding into burnout.

<b>3</b>	<b>AC203; Chair - Dr. Emmanuel Kuntsche, Swiss Institute for the Prevention of Alcohol and Drug Problems, Switzerland</b>
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**Presentation Title:** Can neighbourhood social capital reduce health inequalities in youth? Evidence from the Canadian Health Behaviour of School-aged Children study

**Author(s) and Affiliation:** Frank J. Elgar, Department of Psychology, Carleton University, Ottawa, Canada, William Boyce, Department of Community Health and Epidemiology, Queen's University, Kingston, Canada

**Objectives:** Social capital is the value of social relationships to individuals and measured in terms of the qualities of social relationships that facilitate cooperation for mutual benefit (e.g., civic participation, norms of reciprocity, interpersonal trust). We examined whether exposure to neighbourhood social capital reduces socioeconomic differences in physical and psychological health outcomes in youth.

**Methods:** Survey data were collected from 9,717 Canadian youth in grades 6 to 10 during the 2006 Health Behaviour of School-aged Children (HBSC) survey. Data analyses tested interaction effects of family affluence and social capital on five health outcomes: psychological symptoms, somatic symptoms, injuries, fighting, and life satisfaction.

**Results:** The effect of family affluence on each health outcome varied according to exposure to neighbourhood social capital. High social capital eliminated socioeconomic differences in psychological symptoms and life satisfaction, and reversed socioeconomic differences in somatic symptoms, injuries, and fighting.

**Conclusion:** Narrowing socioeconomic differences in health outcomes is a priority area for public policy. Building neighbourhood social capital is one avenue for reducing socioeconomic disparities in children's health, however these findings also suggest that there might be a downside to social capital in that it reverses socioeconomic differences in some outcomes.

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**Presentation Title:** The contribution of clubs participation to adolescent health: evidence from 6 countries

**Author(s) and Affiliation:** Alessio Zamboni<sup>1</sup>, Antony Morgan<sup>2</sup>, Carine Vereecken<sup>3</sup>, Sabina Colombini<sup>1</sup>, Will Boyce<sup>4</sup>, Joanna Mazur<sup>5</sup>, Patrizia Lemma<sup>1</sup> and Franco Cavallo<sup>1</sup>  
<sup>1</sup>University of Torino, Dept. of Public Health; <sup>2</sup>National Institute for Health and Clinical Excellence (NICE), London; <sup>3</sup>Gent University Hospital; <sup>4</sup>Social Program Evaluation Group McArthur Hall, Queen's University, Kingston; <sup>5</sup>Department of Child and Adolescent Health, Institute of Mother and Child, Warsaw

**Background:** Social networks have been recognised as an important factor for enhancing the health of people and communities. Bridging social capital, characterised by numerous and varied weak ties, exemplifies a particular type of network which can help people reach their goals and improve their health. This paper seeks to contribute to the evidence base on the use of positive social networks for young people's health by exploring the importance of club participation in predicting the health and health related behaviours of 15 year old girls and boys across Europe and North America.

**Methods:** Data derive from the 2005-06 WHO collaborative Health Behaviour in School-aged Children (HBSC) study to establish the relationships between different types of club and a range of health outcomes (self perceived health, wellbeing and symptoms) and health related behaviours (smoking, drinking). We used multi-level logistic regression to assess the independent effects of club participation by controlling for gender and

socio-economic position. We compared data across 6 countries to explore the consistency of the relationships found.

Results: All the considered outcomes, both in terms of perceived health and wellbeing and health behaviours were associated with participation in formal associations. The associations are in the expected direction (participating corresponding to better health) except for some particular association types, but participating in any whichever association, or more than one, is always correlated with better health.

Conclusions: Participation in formal associations seems supportive for good health and health behaviours in adolescence, and should be promoted in this age group

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**Presentation Title:** The neighborhood food environment and fruit and vegetable intake among boys and girls in Denmark

**Author(s) and Affiliation:** Chalida Svastisalee<sup>1</sup>, Mette Rasmussen<sup>1</sup>, Mogens T. Damsgaard<sup>1</sup>, Bjørn Holstein<sup>1</sup>, Pernille Due<sup>2</sup>,  
<sup>1</sup>University of Copenhagen <sup>2</sup>University of Southern Denmark

Objectives: We investigated SES indicators and distance to food outlets on the risk of less than daily fruit and vegetable consumption.

Methods: The 2006 Danish HBSC questionnaire was used to measure less than daily fruit and vegetable intake in boys (50%) and girls. We employed self-rated and aggregated neighborhood well-off as well as family social class and postal-level household income in a multi-level analysis (n = 4,588). Distances to the closest food outlet types were obtained for each school (n = 80).

Results: Self-rated neighborhood wealth and family social class were significant risk factors for boys and girls, such that the poorest social groups were at greater risk (OR = 1.64 and OR = 1.71 respectively) of not eating vegetables daily. Girls from the poorest neighborhoods were at risk of eating less fruit (OR = 1.78) and vegetables (OR = 1.87) per day than girls from wealthier ones. Fast food outlets located within 300 m from school increased the risk of less than daily intake for boys only.

Conclusions: Family social class is still a strong predictor of less than daily fruit or vegetable intake. However, the neighborhood environment may affect fruit and vegetable intake differently for boys and girls.

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**Presentation Title:** Neighbourhood as context of development: the promotive effect of social capital on psychosocial well-being and prosocial values

**Author(s) and Affiliation:** M. Lenzi, M. Santinello and L. Dallago  
University of Padua, Department of Developmental and Social Psychology

In adolescence, living in a disadvantaged neighbourhood can have a negative impact on development, in terms of behavioural, psychosocial and school problems (Leventhal and Brooks-Gunn, 2000); less studied are the neighbourhood characteristics able to promote psychosocial well-being in this developmental stage.

Several researches carried out with the Positive Youth Development framework showed the importance of neighbourhood context, among the others external developmental assets, for adolescents' *thriving*, a concept that incorporates not only the absence of problem behaviors or other signs of pathology, but also the signs or indicators of healthy development (Leffert et al., 1998; Romano et al., 2005; Scales et al., 2000). In these studies, neighbourhood characteristics are measured by short scales or single item measures (that investigate

trust, reciprocity or informal social control), so we are unable to determine the contribution of different neighbourhood features to adolescents' well-being.

The present work aims to study the relation between two aspects of neighbourhood social capital (neighbourhood cohesion/ neighbourhood opportunity) and adolescents' psychosocial well-being, defined as life satisfaction and prosocial values (measured by the importance of tolerance and respect for other people); this way it is possible to evaluate if social capital is associated not only with subjective well-being, but is also important for the transmission of prosocial values among citizens. We hypothesised that neighbourhood cohesion has a stronger relation with the development of prosocial values, while neighbourhood opportunity are mainly related to personal well-being (life satisfaction). Data used are part of the Italy 2006 HBSC Study (only 15 year olds).

<b>4</b>	<b>AC204; Chair - Dr. Jane Sixsmith, HPRC, National University of Ireland, Galway</b>
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**Presentation Title:** Living with Chronic Illness: Insights of young people with juvenile idiopathic arthritis on their condition, their quality of life and their health care services

**Author(s) and Affiliation:** Mary O'Hara, School of Nursing and Midwifery, National University of Ireland, Galway and Margaret Hodgins, Health Promotion Research Centre, National University of Ireland, Galway,

**Background:** Young people with the chronic disease of juvenile idiopathic arthritis (JIA) come into contact with healthcare personnel and services often from an early age and on a regular basis. They have expert knowledge of the condition and the available services. Living with chronic illness these young people discuss the impact of arthritis, their quality of life and service provision.

**Aim and Methodology:** This phase of the study, explored health related quality of life issues and health service needs of young people aged 12-18 years with JIA using a qualitative approach, and concept analysis.

**Findings:** The need for greater public awareness of JIA is highlighted. Peers are very significant. The dichotomy of wishing to be the same as their peers yet acknowledging they have particular needs is frequently frustrating. Communications need to be open and direct. Integrating services could help to optimise outpatient visits.

**Conclusions:** Interventions need to be delivered to the young people with quiet sensitivity avoiding 'the glare of the spotlight'. Juvenile idiopathic arthritis, a 'low visibility' condition, impacts on the quality of life of young people in a myriad of ways consequently positive coping skills need to be developed at an early age.

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**Presentation Title:** Improving attitudes towards children with disabilities in a school context: a randomised intervention study

**Author(s) and Affiliation:** Emmanuelle Godeau<sup>1</sup>, Mariane Sentenac<sup>2</sup>, Mariane Sentenac<sup>2</sup>, Virginie Ehlinger<sup>2</sup>, Céline Vignes<sup>2</sup>  
<sup>1</sup>Service medical du rectorat, <sup>2</sup>INSERM U558 Université Paul Sabatier, Toulouse, France

Although inclusive education of disabled children has become the rule, negative peer attitudes are still a challenge. We implemented an interventional study to improve students' attitudes toward disabled peers.

**Method:** Twelve schools were randomly allocated to intervention or control group. The intervention consisted of a comprehensive educational project (film presentation and discussion).

The CATCH-scale (Rosenbaum 1988) was used to assess attitudes before (T0) and after (T1) intervention. The hierarchical structure of the data was taken into account in analysis (adjusted standard deviation; linear multilevel models).

**Results:** 784 grade 7 students completed at least one of the domains (cognitive, affective, behavioural) of CATCH at T0 and T1. Mean final scores were higher than baseline ones. No differences existed between intervention and control groups. The weaker individual scores, the higher their improvement. Lower improvement existed in students from schools with special educational units for cognitively impaired children for total, affective and behavioural scores while higher improvement existed for cognitive domain.

**Conclusion:** Although we found no effect of our intervention, we did find an improvement in attitudes over time in both groups. It could be that scales and questionnaires that students filled prior interventions contributed per se to this improvement.

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**Presentation Title:** The Quality of Life of children with cerebral palsy in Europe: the SPARCLE study

**Author(s) and Affiliation:** Mariane Sentenac and Catherine Arnaud  
INSERM Unité 558, Université Paul Sabatier, Toulouse, France

**Objectives:** The SPARCLE study investigated the quality of life (QoL) of 818 children aged 8-12 years with cerebral palsy (CP) from 7 countries in Europe. Self-reports were obtained wherever possible, and compared with reports from children in the general population.

**Methods:** QoL was measured using the child and proxy versions of a generic questionnaire. 500 children self-reported and parent reports of child QoL were obtained for all 818 children.

**Results:** Results show that QoL is, on average, similar in self-reporting children with CP as in the general child population. Secondly, pain is common in children with CP and associated with lower QoL in both children's and parents' reports of QoL. Thirdly, in comparison with child reports, parents tend to under-rate most domains of their child's QoL if they themselves are stressed; and overestimate it if the child experiences pain.

**Discussion:** Our study highlights the need for 1) attention to parenting stress and child pain in clinical practice when attempting to improve child QoL, 2) more emphasis on the promotion of self-assessed QoL of young disabled people and 3) social and educational policies that recognize and enforce the rights of disabled children as citizens to participate as fully in society as other children.

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**Presentation Title:** The Neurobiology of Sexual Orientation

**Author(s) and Affiliation:** Jerome Goldstein, M.D., San Francisco Clinical Research Center

Homosexuality is a constantly debated issue as to whether it is determined at birth or a choice (nature vs. nurture). Since the removal of homosexuality from the DSM4 in 1973, it has been mentioned as an illness only in the context of being a putative exacerbating factor in anxiety states. Recent studies reveal a clear cut neurobiology to sexual orientation.

Neurobiologist Simon LeVay conducted a study of brain tissue samples from human autopsies performed in New York and California. He found a significant size difference of the interstitial nuclei of the anterior hypothalamus between homosexual and heterosexual men.

In addition, Dr. Ivanka Savic-Berglund and Dr. Per Lindström performed fMRI and PET measurements of cerebral blood flow. They found significant cerebral size differences between homosexual and heterosexual subjects; the brains of homosexual men resembled heterosexual women and homosexual women resembled heterosexual men. In pheromonal studies, sex-atypical connections were found among homosexual participants. Amygdala connectivity differences were found to be statistically significant and provided evidence towards sexual dimorphism between heterosexual and homosexual subjects. Extensive controls were performed during testing to exclude analytical variability.

A totally evidence-based medicine presentation will provide current data regarding homosexuality showing differences, or similarities, between the brains of homosexuals and heterosexuals.

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AC203; Chair - Dr. Don Klinger, Queen's University at Kingston, Canada

**Presentation Title:** Active avoidance of physical education classes: the influence of norms and social class

**Author(s) and Affiliation:** Bjørn Holstein<sup>1</sup>, Mogens Trab Damsgaard<sup>1</sup>, Pia Wicmann Henriksen<sup>1</sup>, Rikke Krølner<sup>1</sup>, Mette Rasmussen<sup>1</sup>, Signe Boe Rayce<sup>1</sup>, Chalida Svastisalee<sup>1</sup> and Pernille Due<sup>2</sup>,

<sup>1</sup>Institute of Public Health, University of Copenhagen,

<sup>2</sup>National Institute of Public Health, University of Southern Denmark

**Objective:** Skipping physical education classes is an indicator of active avoidance of physical activity. We examined how physical activity norms and social class was associated with skipping classes.

**Methods:** We used data from the Danish 2006 HBSC study, n = 6,269. The outcome measure was infrequent participation in obligatory physical education classes (seldom + never vs. always + sometimes). We measured physical activity norms by father's, mother's and best friend's physical activity (at least weekly; seldom; never) and family social class by highest ranking parent (high; medium; low).

**Results:** Among 11-15-year olds 19% skip classes sometimes and 5% most times or always. The ORs (95% CI) for skipping classes were 1.96 (1.44-2.66) if the father was physically inactive, 2.11 (1.55-2.88) if the mother was physically inactive, 2.20 (1.66-2.92) if the best friend was physically inactive, and 2.86 (1.31-2.64) among students from lower social classes. These OR-values attenuated somewhat in mutually adjusted models but remained statistically significant.

**Conclusions:** Skipping obligatory physical education is common and significantly related to having physically inactive parents and friends and belonging to lower social classes. Intervention to fight this behaviour may contribute to young people's physical activity and also reduce the social inequality in physical activity.

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**Presentation Title:** Deviance and perception of school: role of schoolclass-level attitudes

**Author(s) and Affiliation:** A. Örkényi, G. Kökönyei, I. Zakariás, D. Várnai and A. Németh

Negative perception of school is related to increased occurrence of behaviour problems, e.g. deviant behavior. Positive experience on school in turn has been identified as a protective factor against these outcomes. Some studies however show that it is not only individual experiences that influence behavioral outcomes but also

the experiences and attitudes of classmates and peers. The aim of our analysis was to test the relationship of individual/class-level perception of school and delinquency.

The analysis was made on Hungarian data of the 2005/6 HBSC survey (N=5450). Delinquency was measured by Deviance scale of Child Behavior Checklist (Achenbach, 1991) using 6 points as cut-off point for deviant behaviour. Individual level perception of school was measured by "liking school" item of the HBSC questionnaire. Class-level perception of school was indicated by a variable that includes rate of students in the class answering "liking school a bit or a lot" to previous question. Multilevel logistic regression analysis was conducted to answer our research question.

According to our results both individual and class-level perception of school are related to deviant behaviour. After controlling for other variables (gender, class, FAS, perceived school performance and individual level "liking school") students – attending a class where every student likes school – have 58% less chance of deviant behaviour than students in classes where all students dislike school.

Results indicate that positive attitude of classmates towards school is a protective factor even for those students who don't like school themselves. Creating positive school and class climate can lead to greater school satisfaction, and this positive community then may protect its members against deviant behaviour.

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**Presentation Title:** Self-rated health: The association of student and school-level factors

**Author(s) and Affiliation:** Hana Saab and Don Klinger, Queen's University, Kingston, Canada

Research exploring the relationship between education and health suggests that people with higher levels of schooling report better health. To emphasise health as a determinant of educational achievement, this paper establishes a gradient in education by health among Canadian students. Using data from the 2006 Health Behaviour in School-aged Children (HBSC) study, the relationship between self-rated health and achievement is examined. The variation of the gradient in education by health within and between schools suggests that increases in self-rated health are associated with increased achievement for students. Moreover, the within-school regression accounted for 2.7 % of the variation in achievement due to health, while the between-school regression slope accounted for 19.8% of the variation in achievement due to health. Inequalities in achievement associated with health were more pronounced between schools than within schools. The study also estimated the variability present at each of the student and school levels for self-rated health. Next, student and school-level factors associated with self-rated health were examined using multilevel modelling.

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**Presentation Title:** Development of HBSC survey tools to measure student participation in school decision making processes – An Austrian example

**Author(s) and Affiliation:** Ursula Mager, Robert Griebler, Peter Nowak and Wolfgang Dür  
Ludwig Boltzmann Institute Health Promotion Research, Vienna, Austria

**Objectives:** The concept of student participation is a popular notion in health promoting schools and in general education, whereas the operationalisation of the participation concept within survey studies is still a challenge. Thus, our aim was to provide survey tools to measure student participation in school-related decisions.

**Methods:** To draw a complete picture on student participation in school decision-making processes, associated scales were developed for the questionnaires for students, teachers and headmasters in three steps: 1) literature search, 2) focus group interviews and 3) qualitative testing.

Results: The survey tools are designed to measure possibilities for and actual participation of students at three levels: on the school level by the headmaster scale, the classroom level by the teacher scale and the personal level by the student scale. These three scales provide an interrelated and multi-perspective overview of student participation in different areas, such as planning and organizing school activities, events and projects, and designing school space, teaching content (curriculum), teaching method, class rules, and representation.

Key conclusions: The applicability of these survey tools to provide an overall and multidimensional measure for student participation have to be tested in the upcoming Austrian HBSC survey.

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AC204; Chair - Dr. Winifried van de Sluijs, University of Edinburgh

**Presentation Title:** Do you like what you (have to) do with your parents? Differences in the impact of joint family activities on adolescent problem behaviours.

**Author(s) and Affiliation:** Béat Windlin and Emmanuel Kuntsche

Previous research has shown that family-related factors such as family bonding have an important impact on substance use and other problem behaviours among adolescents. In particular, the frequency of joint family activities has been found to be protective in this respect. Two concurrent theories can be used to explain this link. One argues that spending a considerable amount of time in joint family activities simply restricts opportunities of substance use and other problem behaviors. The other refers to transmission and internalization of conventional societal norms and values in the family, which may occur during joint family activities. In the present paper we investigate the link between the frequency of joint family activities such as playing games, going places or doing sports and substance use by taking into account the children's enjoyment (or displeasure) of these activities. The analyses are based on 13 to 15 years old adolescents participating in the 2006 Health Behaviour in School-Aged Children project in Switzerland. First results show that a low level of family activities accounts for a considerable impact on substance use. However, among the adolescents exceeding a minimum amount of joint family activities, for an even lower level of substance use, the enjoyment of family activities seems to play a more important role than a further increase of their frequency. To conclude, these results indicate that theory of restricted opportunities (of substance use) cannot account alone for the protective effect of family activity on substance use. Over and above frequent contacts, joint family activities seem to play a role in preventing adolescents from substance use as being opportunities for strengthening family ties, emotional attachment and transmission of conventional societal norms.

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**Presentation Title:** Employment in post-primary students and their attitudes to occupational health and safety: results from the "Choose Safety" Evaluation

**Author(s) and Affiliation:** Victoria Hogan, Margaret Hodgins and Marie Galvin, Health Promotion Research Centre, NUI Galway

The European Agency for Safety and Health at Work has classified young workers as a 'high risk' occupational group, due to the higher likelihood of non-fatal occupational injuries in these workers. And evidence suggests that the level of employment of young workers is increasing over time. This study aimed to create a profile of employment for a sample of post-primary students and to investigate levels of occupational health and safety knowledge and attitudes/beliefs towards safety issues. The data reported here is part of a larger dataset collected during a project which evaluated a safety intervention programme for post primary students entitled "Choose Safety". A quantitative survey questionnaire was developed for the students taking the 'Choose Safety' module which included measures of health and safety knowledge, safety behaviour and beliefs, and employment issues. Analysis revealed a high level of employment (44%) in the student sample, with some students engaged in long working hours during the school week. Levels of safety training provided by



employers to students were low (33% having received training). In general, there were relatively high levels of safety knowledge reported and the safety beliefs measured were mostly positive, however, findings with regard to safety behaviours were mixed.

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**Presentation Title:** The protective roles of social environments for the health of young Canadians: an application of population health theory

**Author(s) and Affiliation:** John Freeman<sup>2</sup>, Matthew King<sup>1,2</sup>, William Pickett<sup>1</sup>  
<sup>1</sup>Department of Community Health and Epidemiology  
<sup>2</sup>Faculty of Education Queen's University at Kingston, Canada

**Background:** We examined relationships among student environments, adolescent substance use, and two sentinel health outcomes, in an etiological analysis. The analysis focused on determinants of the health of young people and the roles of social settings in the optimisation of health.

**Methods:** 2,031 Canadian students were administered the HBSC survey in 2006 and again in 2007. Individual items and factor-analytically derived scales were used to model etiological relationships. Outcomes examined included serious injury and psychosomatic symptoms. Models developed from cross-sectional data were confirmed longitudinally.

**Results:** Adolescents who reported non-supportive home environments experienced higher levels of substance use. School environments modified these relationships. Gradients existed between the extent of adolescent substance use and the occurrence of the health outcomes. Positive school environments did not moderate the latter relationship.

**Conclusions:** Negative home environments clearly place adolescents at risk for substance use. Positive school environments can in part moderate engagement in substance use, although they do not moderate associations between substance use and adverse health outcomes. Optimisation of school social environments, combined with targeted interventions aimed at risk-taking youth, are warranted as population health strategies. Longitudinal confirmation of cross-sectional findings supports the use of cross-sectional designs for etiological research.

7	AC203; Chair - Dr. Michal Molcho, HPRC, National University of Ireland
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**Presentation Title:** Visual Research Methods: Evaluation or Practice?

**Author(s) and Affiliation:** Sheelagh Broderick and Abbest Scholar, Dublin Institute of Technology

The evaluation of health promotion projects targeted at minors present specific challenges. This paper will explore visual research methods as a tool for evaluation that is congruent with the profile of the target population. A typology of approaches will be presented and consideration given to ethical issues arising. Reflecting further on the field of arts and health as both a practice and a methodology, perspectives of arts and health will be discussed with specific reference to children and teenagers. How these practices are understood and how they relate to health promotion will be explored.

Sheelagh Broderick is currently pursuing a doctorate, 'Interpreting Arts and Health', at the Graduate School of Creative Arts and Media with the support of Dublin Institute of Technology. She has been working in the HSE South in a variety of roles since 2000 and is currently Health Promotion Officer, West Cork.

**Presentation Title:** Youth Mental Health: Making the shift to a new paradigm

**Author(s) and Affiliation:** Craig Hodges, Tony Bates and Bob Illback, Headstrong

Mental health is the single most important health issue for young people today suggesting that the way in which services are provided to young people may not be the most effective in dealing with their social and emotional wellbeing. This presentation will focus on the development of Headstrong: The National Centre for Youth Mental Health in Ireland and in particular its Jigsaw Program which is working with communities to determine the most appropriate model, at a local level, to support young people as they journey into adulthood.

Critical to the Jigsaw Program is the process by which communities are engaged to lead the establishment of an initiative at the local level which has buy in from key sectors like youth, mental health, primary care, education, young people and parents. The planning process involves a systematic review of what is currently provided to young people locally and how these services interact in their community to meet the needs of young people.

The emphasis of the presentation will be on the importance of social participation and how this can assist in building a coalition of different individuals and organisations across many sectors to bring about systemic change which impacts upon the health and wellbeing of young people living in that community.

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**Presentation Title:** Developing Primary Care Services for Adolescents: A Participatory Approach

**Author(s) and Affiliation:** Siobhan Brennan, Foroige

This research aims to explore the barriers and facilitators that exist for young people in the West of Ireland attending health services and furthermore to develop an ideal model for adolescent friendly health services. A participatory research approach was used involving 19 young people aged 15 -17 from Galway, Mayo and Roscommon.

The findings of this study indicate communication and confidentiality between health professionals and young people acts as a barrier for young people attending health services. Issues of price, transport and location also arose during the three workshops. Young people identified; kind friendly staff and having an appointment or knowing how to make one would help an individual attend a medical service.

The conclusions drawn from this study highlight the importance of involving young people in research on issues of concern for them. It ensures the results obtained will be from a young person's perspective and not an adult interpretation as in the past. In particular this study emphasizes the need for more effective communication between health staff and young people, as well as reassurance around confidentiality of consultations. In addition to this is the need for greater advertising of current health services available to young people promoting a holistic approach to ones health.

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**Presentation Title:** The Teen Health Initiative

**Author(s) and Affiliation:** Mary Russell, Health Service Executive

The Teen Health Initiative was established with an overall mandate to reduce teen pregnancy. It has assumed a much broader role in terms of overall teenage health and teenage health promotion.

As its role evolved a consistent emergent theme was the need for greater integration and sharing of skills amongst the many agencies who can impact on the lifestyles of this subpopulation group.

As a result a series of facilitated working groups with youth agencies, youth workers and young people were set up to ascertain the views/needs of the Out of School sector.

The outcome from these working groups was a strategic action plan for youth health promotion in the Out of School sector. This action plan was designed to enhance healthy lifestyles for young people and a mechanism for sharing best practice. It addresses six priorities which are being implemented since 2005

As a result of this strategy and the implementation of its priorities, the HSE and Out of School sector are working closely together to achieve a common aim i.e. developing healthier approaches to the lifestyles of young people. The proposed presentation will outline the success of this project.

<b>8</b>	<b>AC204; Chair - Dr. Jacky Jones Functional Manager for Health Promotion, HSE West</b>
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**Presentation Title:** Health Promoting School in the HSE Dublin North East

**Author(s) and Affiliation:** Antoinette Hassett and Joan Crawford  
HSE Dublin North East

The aim is to optimise the health promoting potential of primary schools. In line with the above, schools are invited to partake in a three year health promoting primary school initiative. A health promoting school is a school where a holistic approach is taken and an environment is created whereby the focus is on the improvement of the health and well being of the whole school community. The initiative promotes all dimensions of health and wellbeing of pupils and staff. It also works with others in identifying and meeting the health needs of the whole school and the wider community. The methodology employed includes setting up a school working groups, conducting needs assessments, devising and implementing an action plans while evaluating the entire process throughout. 115 schools have been recruited to this initiative to date. Priority areas addressed by schools in the region have included substance use programmes, healthy eating policy development, improvement of physical activity levels of pupils, oral health and personal hygiene programme. In addition, staff workshops on personal health and well being are a feature of this initiative. It is envisaged in the academic year of 2009/10, the schools recruited will increase to 140.

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**Presentation Title:** Active Transportation to School: "You'd look like a right idiot showing up on a bike".

**Author(s) and Affiliation:** Jean Lodge and Elaine Mullan  
Dept. Health, Sport and Exercise Sciences, Waterford Institute of Technology.

Active transport to and from school (ATS), all or part of the way, five days per week, provides an excellent opportunity for the accumulation of health-enhancing physical activity. However, rates of ATS are in rapid decline, and rates of cycling to school, particularly among adolescent girls, are very low. To date, there has been little ATS-based research in Ireland. The aim of this research was to explore student, teacher and parental attitudes to ATS (including barriers and facilitators) within the context of implementing and evaluating a School Travel Plan (STP). Mixed method research was undertaken in a girls' secondary school in Co. Waterford over a nine-month period. While concerns about traffic and the physical environment were the most commonly cited barriers for all, increased rates of ATS were seen without any physical interventions. All saw parents as having the greatest responsibility for promoting ATS, but, while parents were hugely supportive initially, they were less enamoured with the reality of the required car travel restrictions. Girls' greatest

barrier to ATS was their perceived image. ATS was seen as awkward, dangerous, requiring effort, creating hassle and sweat; not what 'we see ourselves doing'; not for girls.

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**Presentation Title:** Young Traveller Men's Health Needs in the Midlands

**Author(s) and Affiliation:** Fergal Fox  
Health Promotion Research Centre, NUI, Galway and HSE

Limited research exists in relation to young Traveller men's health. As part of research into the health needs of Traveller men in the Irish midlands, needs in relation to young Traveller men's health were clearly identified. Traveller young men were among the Travellers recruited through qualitative focus groups to identify health needs. A Traveller men's Research Advisory Group supported and guided the research.

Young Traveller men were identified to be at risk in terms of their lifestyle and culture which was related as a culturally and age specific display of masculinity. The health risks were experienced by young men through relatively early onset of independence and responsibility. The issues identified for young Traveller men include drug use, offending behaviour (including conflict and alcohol related offending behaviour), low education attainment and discrimination. However a main finding from the study was the high levels of stress experienced by Traveller men in general and thus this is a future risk for Traveller young men.

The needs of young Traveller men emerged as a significant theme in terms of the entire research findings requiring urgent attention. Recommendations include focusing on physical activity and sport to engage young Traveller men's groups and utilising peer initiatives and the centrality of the family to establish health promotion programmes.

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**Presentation Title:** HSE Community Games – building health promotion capacity in a voluntary organisation.

**Author(s) and Affiliation:** Fiachra O'Mathuna and Meabh McGuinness  
HSE Community Games

The HSE Community Games is developing as health promoting youth organisation in partnership with the HSE. Voluntary organisations are an ideal setting for health given their reach into their local community. Over 500,000 participants aged 6-16 years and 20,000 volunteers take part in over 40 sporting and cultural activities offered by the organisation every year throughout Ireland. The Ottawa charter has been used as a framework for developing health promotion in the organisation, and building capacity in volunteers is a central focus. Work undertaken includes healthy policy development, including substance use and healthy eating, volunteer training, development and implementation of guidelines on creating supportive environments, activities aimed at increasing participation in disadvantaged areas and target groups and a social marketing approach to health messages focusing on national HSE health promotion campaigns. The health promotion ethos in the organisation is supported through grant schemes aimed at national health promotion priorities and award schemes for good practice in health promotion at a local level. 'A healthy mind in a healthy body' is the slogan of the organisations Mascot designed by participants in the games, the mascot is used as vehicle for communicating health messages with young participants. The work of the partnership is overseen by a committee of HSE Community Games volunteers and staff and HSE representatives from the main health promotion topics and settings.

**Presentation Title:** Promoting resilience: children and young people's participation in family welfare conferences

**Author(s) and Affiliation:** Bernadine Brady  
Child and Family Research Centre, NUI Galway.

Family welfare conferences (FWC) are a participatory approach to child care planning that give the family a key role in decision-making in relation to its children and young people. Children are placed at the centre of the FWC model but, despite the rhetoric of children's rights, some argue that children are given choices but by adults in an adult dominated forum. There is a risk that children's voices will not be heard and that they may feel trapped by the official status being given to the authority of the family (Holland and O'Neill, 2006). This paper draws on recent qualitative research undertaken with service users and professional staff from a FWC service in Ireland that has adopted a reflective role in relation to children and young people's participation. It illustrates how this commitment to child and youth participation helped the service to promote youth resilience and well-being and ensure that family plans were responsive to the articulated needs of children. It is argued that, while encouraging the participation of children and young people may appear time and resource intensive, it can result in enhanced outcomes for the young person and family.

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**Presentation Title:** Exploring Multidisciplinary Knowledge of Child Protection. Phase one of a research project.

**Author(s) and Affiliation:** Marcella Kelly and Sinead Hahessy  
National University of Ireland, Galway

The move towards working co operatively in protecting the rights and welfare of the child (DOHC, 1999) in essence makes child protection and welfare 'everybody's business' and in particular those agencies, organisations and disciplines whose remit involves both working with and interacting with the child and their family (DOHC, 1999).

This two phase research project addresses the development of an educational package using the medium of e-learning, to target the concept of child protection and welfare from a multidisciplinary/ interdisciplinary focus, embracing the ideal of 'whole' and acknowledging the wider determinants of health that can impact on the child, their family and society (DOHC, 1999, 2000). For this purpose one of the key outcomes of this project is to raise the awareness of key professionals involved with children as to their roles and responsibilities linked with protecting the child and more specifically their role as a multidisciplinary team member.

Phase one utilising focus group interviews from a purposive sample (N=42) captures the current knowledge of participants from the professional disciplines of nursing, teaching, and social work on protecting children in Ireland. This initial phase of this project received funding from the Research Millennium Fund provided by the National University of Ireland Galway and is presently completed. Findings revealed interesting themes reflecting the need to 'tell someone', to 'understand professional roles' as well as learning to 'work together to protect children' and increase their 'knowledge through multidisciplinary education'. A further theme revealed the sense of 'fear and personalisation' participants had of reporting concerns. Phase two of this project aims to focus on the development of an educational resource pack that will encapsulate the ethos of multi-disciplinary approaches to child protection.

**Presentation Title:** Reassuring our children during this economic crisis

**Author(s) and Affiliation:** Agnes Tully Clarke  
School of Nursing and Midwifery NUI Galway

This past year here in Ireland we have seen an economic downturn on a scale not previously witnessed in our life times. The collapse of our economy is causing massive stress in many of our homes where wages have been cut, Pension and health levies are applied and even more significantly jobs have been lost. This situation leaves our children very vulnerable to the stress fallout. At times of economic downturn rates of stress and stress related illnesses in our adult population increase. Stressed and anxious parents unintentionally stress their children. Children in families where the negative impact of the economic downturn is strongest, eg where both parents lose their jobs or where their home is repossessed, are at greatest risk. Cognitive immaturity coupled with lack of experience and dependence on their parents makes them sensitive to picking up on their parents' worries, sometimes even amplifying out of proportion to reality.

This presentation will look at how our economic downturn may well have very negative consequences for our children and what we can do to help them cope.

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**Presentation Title:** The HIP (Healthy Incentive for Pre-schools) Project: Results of a pilot assessment of pre-school nutrition practices in full day care Irish Pre-schools.

**Author(s) and Affiliation:** C. Johnston Molloy<sup>1</sup>, C. Corish<sup>2</sup>, J. Kearney<sup>2</sup>, N. Hayes<sup>3</sup> and C. Glennon Slattery<sup>1</sup>  
<sup>1</sup>Community Nutrition and Dietetic Service, Health Service Executive Dublin Mid-Leinster, <sup>2</sup>Department of Biological Sciences, Dublin Institute of Technology, Faculty of Applied Arts, Dublin Institute of Technology

While few nutrition interventions in the pre-school setting exist, it has been recommended that such programmes should be developed<sup>1</sup>. A multidisciplinary team in the HSE Midlands developed a Scored Evaluation Form - SEF<sup>2</sup> to evaluate and score pre-school nutrition practices there, as a component of an intervention scheme aiming to incentivize pre-schools to improve their nutrition practices.

To test the reliability of each criterion included in the SEF in a setting similar to the Midlands, all eligible Full Day Care (FDC) pre-schools in County Wicklow (*n* 34) were contacted. Twelve pre-schools participated in the project. All aspects of nutrition practice for one full day in each pre-school were observed, and detailed information on each SEF criterion was recorded to assess the reliability of the score assigned.

The findings of this evaluation show unsatisfactory nutrition practices in each criterion assessed: food portion sizes provided to children were inadequate; provision of iron rich and, dairy foods, fluid and vegetables was insufficient; few pre-schools had nutrition policies or family style food service. Following further modification of the SEF, its utility as an intervention tool to encourage positive changes in nutrition practice in the pre-school setting in the Midlands will be tested.

1. Flynn MAT, McNeill DA, Maloff B, Mutasingwa D, Wu M, Ford C and Trough SC (2006) *Obes Rev* **7** (1), 7-66.
2. Molloy CJ, DeSiún A, Kennelly S & Slattery CG (2007). *J Hum Nutr Diet* **20**, 382.

This project was funded by *safefood* in association with the Health Service Executive, Ireland.

**Presentation Title:** Every day learning in home environments for children under two: the power of the ordinary.

**Author(s) and Affiliation:** Helen Lynch<sup>1</sup> and Noirin Hayes<sup>2</sup>  
<sup>1</sup>University College Cork, <sup>2</sup>Dublin Institute of Technology

Children learn through play: through doing and being in their environments. However, these environments have been changing and evolving in recent years due to factors such as the increase in parental involvement in the work-force, issues relating to safety in homes and communities, and the increase in organised play for children.

The notion of everyday activity settings/ environments as a key aspect of child development has been an area of study in recent years. In this field, the context of a child's daily life is valued: the 'everyday activities that provide the context for learning culturally meaningful behaviour' p. 3 (Dunst, Bruder, Trivette and Hamby 2006). Such research has found evidence that children learn most effectively when the environment is considered as a key aspect - that family routines and contexts bears a significant influence on child development. Creating indoor and outdoor learning environments for children is a challenge for all those who live with and work with children. This paper presents early stages of research that explores Irish childrens indoor and outdoor learning environments in the context of the social environment (family, carers) and the physical environment (place, space and objects) and how they support development of infants under two.

Dunst, C. J., Bruder, M. B., Trivette, C. M., & Hamby, D. W. (2006). Everyday Activity Settings, Natural Learning Environments, and Early Intervention Practices. *Journal of Policy and Practice in Intellectual Disabilities*, 3(1), 3-10.

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**Presentation Title:** Healthy Eating for the Preschool years

**Author(s) and Affiliation:** Aislinn Murphy, Health Service Executive

Healthy eating is vital for the proper growth and long-term health of young children. Childcare providers are ideally placed to positively influence the attitudes young children develop towards food and significantly improve their nutritional status via healthy food provision. The HSE South Eastern Community Dietetic Service in partnership with childcare service providers pioneered a pilot project to address the nutritional status of preschool children.

**Aim:** Promote the provision of optimal nutrition to pre-school children aged 0-5 in the care of registered childcare providers.

**Objectives:**

- Increase the nutrition skills of childcare providers through training in line with the National Preschool Food and Nutrition Guidelines
- Assess nutritional quality and quantity of food provision via menu audits
- Sensitize the community about preschool nutrition via local media campaigns
- Encourage the home environment to consolidate healthy eating practices via nutrition workshops for parents

**Methods:** Theory based and experiential learning methods

**Project Impact:**

- Enhanced links for dieticians with local early childhood services
- Dissemination of National Preschool Food and Nutrition Guidelines to preschools
- Widespread local media coverage of training and launch of menu award

## Poster Communications

- 1 Izabela Tabak, Joanna Mazur, Katarzyna Radiukiewicz and Anna Dzielska Institute of Mother and Child, Warsaw, Poland

*'Looking for good family scale: comparison of family dynamics measure ii and HBSC family culture questions'*
- 2 Jing Wang, Ronald J. Iannotti and Jeremy W. Luk, National Institute of Child Health and Human Development (USA)

*'Internet Bullying and Victimization among US Adolescents'*
- 3 H. Kololo, Academy of Physical Education, Warsaw, Poland, J. Mazur, A. Dzielska and A. Malkowska-Szkutnik, Institute of Mother and Child, Warsaw, Poland

*'Social Relations and Physical Activity Deficiency: Analysis of 15-year-old boys and girls in Poland'*
- 4 A. Dzielska, J. Mazur, H. Kololo and K. Mikiel-Kostyra, Institute of Mother and Child, Warsaw, Poland

*'Comparison of the Three-Factor Eating Questionnaire (TFEQ) with selected questions from HBSC's Eating and Dieting package'*
- 5 Anna Kowalewska, Faculty of Pedagogy, Warsaw University and Hanna Kololo, Department of Pedagogy, Academy of Physical Education, Warsaw

*'Tobacco smoking by 18-year-old girls and their parents' approval and disapproval'*
- 6 J. Tynjälä, R. Välimaa, J. Villberg, K. Ojala and L. Kannas, University of Jyväskylä, Department of Health Sciences, Research Center for Health Promotion, Finland

*'Trends in sleeping habits and perceived sleep difficulties in 13- and 15-year-old schoolchildren in Finland'*
- 7 Mariane Sentenac<sup>1</sup>, Aoife Gavin<sup>2</sup>, Michal Molcho<sup>2</sup>, Catherine Arnaud<sup>1</sup>, Saoirse Nic Gabhainn<sup>2</sup>, Felix Navarro<sup>3</sup> and Emmanuelle Godeau<sup>1,3</sup>, <sup>1</sup>INSERM Unité 558, Université Paul Sabatier, Toulouse, France, <sup>2</sup>National University of Ireland, Galway, <sup>3</sup>Service médical du rectorat, Toulouse, France

*'Impact of bullying at school on self perceived health among disabled students: a multilevel study in 13 western countries'*
- 8 Adrien Gaudineau<sup>1,2</sup>, Virginie Ehlinger<sup>1</sup>, Christophe Vayssiere<sup>1</sup>, Catherine Arnaud<sup>1</sup> and Emmanuelle Godeau<sup>1,3</sup>, <sup>1</sup>UMR Inserm U558/ University Paul Sabatier, Toulouse, France, <sup>2</sup>CHU Hautepierre, Université Louis Pasteur, Strasbourg, France, <sup>3</sup> Service médical du rectorat, Toulouse, France

*'Age At Onset Of Menarche And Factors Associated To Early Menarche In France: Results From The French Health Behaviour In School-Aged Children (HBSC) Study'*



- 9 I. Lenciauskiene and A. Zaborskis, Biomedical Research Institute, Kaunas University of Medicine  
*'Modelling of school-aged children's smoking by the factors of an individual and the school levels.'*
- 10 Linda O'Keeffe, Priscilla Doyle, Michal Molcho and Saoirse Nic Gabhainn, Health Promotion Research Centre, NUI Galway.  
*'Obesogenic Environments: Local area perceptions and physical activity levels in School aged Children in Ireland'*
- 11 Priscilla Doyle<sup>1</sup>, Jane Sixsmith<sup>1</sup>, Cindy Dring<sup>1</sup>, Brian Neeson<sup>2</sup>, Michal Byrne<sup>3</sup>, David McGrath<sup>4</sup>, Aileen McGloidy<sup>4</sup>,<sup>1</sup>National University of Ireland, Galway, Ireland, <sup>2</sup>Health Service Executive, <sup>3</sup>University College Cork, <sup>4</sup> Trinity College Dublin  
*'Exploring the Feasibility of Developing Internet Based Health Promotion Materials for Third Level Students'*
- 12 Priscilla Doyle<sup>1</sup>, Saoirse Nic Gabhainn<sup>1</sup>, Michal Molcho<sup>1</sup>, Kieran Walsh<sup>1</sup> and Cecily Kelleher<sup>2</sup>,  
<sup>1</sup>National University of Ireland, Galway, Ireland, <sup>2</sup>University College Dublin.  
*'Face to Face and Electronic Communication in Adolescence: Associations with Risk Behaviours and Well-being'*
- 13 Sinead Barry and Helen Lynch, University College Cork  
*'Children's perceptions of videogames as an occupation: a qualitative study'*
- 14 Cathy Wyer, Janice Crausaz and Helen Lynch, University College Cork  
*'Children with autism in public places: Mothers' perspectives'*  
Mairead Ni Bhriain and Helen Lynch, University College Cork
- 15  
*'Tactile interaction while attending to an infant's activities of daily living in the first year of life: The parent's experience'*
- 16 Colette Kelly, Michal Molcho and Saoirse Nic Gabhainn, Health Promotion Research Centre, NUI Galway.  
*'Family factors and schoolchildren's eating behaviour'*
- 17 Colette Kelly<sup>1</sup>, Maureen Mulvihill<sup>2</sup>, Pauline Clerkin<sup>1</sup> and Saoirse Nic Gabhainn<sup>1</sup>, <sup>1</sup>Health Promotion Research Centre, NUI Galway, <sup>2</sup>Irish Heart Foundation  
*'Marketing of foodstuffs in post-primary schools in Ireland'*

## Poster Communications Abstracts

**Poster Title:** Looking for good family scale: comparison of family dynamics measure II and HBSC family culture questions

**Author(s) and Affiliation:** Izabela Tabak, Joanna Mazur, Katarzyna Radiukiewicz and Anna Dzielska, Institute of Mother and Child, Warsaw, Poland

**Objective:** To present Family Dynamics Measure II (FDM II) and investigate the relationship between FDM II results and family measures used in HBSC (communication with parents, parental monitoring and satisfaction with the global family atmosphere).

**Methods:** Data come from a survey conducted in 2008 in Poland on the sample of 416 children aged 10-19 years. Factor analyses and  $\alpha$ -Cronbach coefficients for FDM II scale and its six dimensions were estimated. All variables: communication with parents, parental monitoring, satisfaction with the global family atmosphere, FDM-II and its six dimensions scores were transformed into 0-100 values. Analyses with Student t-test and partial correlations were estimated.

**Results:** Cronbach  $\alpha$  coefficients were very good for total FDM II scale (0.89) and subscales: mutuality-isolation (0.87), clear-distorted communication (0.79), role reciprocity-conflict (0.78). Factor analyses not exactly confirmed six dimensions distinguished by scale authors, but for the communication scale was satisfying. Partial correlations with gender and age as controlled variables showed that full scale correlates with all HBSC variables from  $r=0.68$  for family satisfaction to 0.28 for monitoring of father; correlations with FDM II subscales were significant (for communication scale – with global satisfaction  $r=0.64$ ) except for individuation-enmeshment and flexibility-rigidity. Mean values differences in groups divided by HBSC variables were statistically important (except the same subscales).

**Conclusions:** FDM II confirms the value of HBSC measures. It is well-grounded to consider using communication scale from FDM-II in HBSC.

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**Poster Title:** Internet Bullying and Victimization among US Adolescents

**Author(s) and Affiliation:** Jing Wang, Ronald J. Iannotti and Jeremy W. Luk; National Institute of Child Health and Human Development (USA)

**Objectives:** to examine prevalence of Internet bullying/Victimization among US adolescents and the influence of computer use.

**Methods:** Data were obtained from the Health Behaviour in School-Aged Children (HBSC) 2005 Survey, a nationally-representative sample of grades 6 to 10 (N = 7222) in the United States. Logistic regression analyses were used for involvement in Internet bullying and victimization, with gender, grade, FAS, and computer use as predictors.

**Results:** Results showed that adolescents who spent 2 or more hours per day on computer use were more likely to bully others and to be bullied by others using computers. Females spent more time using computer, but were less likely to use computers to bully others. There was no gender difference in Internet victimization. Computer use increased with grade, but older adolescents were less likely to engage in either Internet bullying or victimization.

**Conclusions:** Time spent on computer use plays an important role on involvement in Internet bullying and victimization among adolescents.

**Poster Title:** Social Relations and Physical Activity Deficiency – Analysis of 15-year-old boys and girls in Poland

**Author(s) and Affiliation:** H. Kololo<sup>1</sup>, J. Mazur<sup>2</sup>, A. Dzielska<sup>2</sup> and A. Malkowska-Szkutnik<sup>2</sup>,  
<sup>1</sup>Academy of Physical Education, Warsaw, Poland  
<sup>2</sup>Institute of Mother and Child, Warsaw, Poland

There is evidence on the broad influence of social relation on health behaviours. The aim of the study was to analyse how perceived relations with peers, with parents, and also social support can indicate physical activity (p.a.) deficiency. Anonymous questionnaires were administered in 2006 in a representative sample of 15-year-old adolescents in Poland (N=2287; boys N=1092, girls N=1195) within *HBSC – Health Behaviour in School-aged Children. A WHO Cross-national Collaborative Study*. Prochaska's et al. 'physical activity questions' for measuring p.a. was used. International WHO recommendations were used to define p.a. deficiency. The *Oslo 3-Item Scale* by Dalgard, Social self-esteem subscale from *Self-Perception Profile for Adolescents* by Harter, and family relation ladder adapted from Cantril, were used. Multivariate logistic regression models were estimated. Results showed that only negative relations with family, and negative perception of peers acceptance increase risk of physical activity deficiency, respectively OR=1.44; CI(OR):1.00-2.08 and OR=1.45; CI(OR):1.17-1.79. In gender specific models, different significant relation appeared. In boys, only negative perception of peers' acceptance increased risk [OR=1.55, CI(OR):1.15-2.10] and in girls, only high social support decrease the risk [OR=0.71, CI(OR):0.53-0.94] of physical activity deficiency. There is a need for further analysis of social determinants of lack of the physical activity. In further analysis structural equations will be applied.

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**Poster Title:** Comparison of the Three-Factor Eating Questionnaire (TFEQ) with selected questions from HBSC's *Eating and Dieting* package

**Author(s) and Affiliation:** A. Dzielska, J. Mazur, H. Kololo and K. Mikiel-Kostyra  
Institute of Mother and Child Warsaw Poland

**Objective:** To show the association between the Factors of TFEQ and BIS (*Body Image Subscale*), diet status, body size satisfaction and gender.

**Methods:** Analyses was based on data from the third step of *follow-up three-wave study* of all children born in Poland between the 1<sup>st</sup> and 10<sup>th</sup> January, 1995. The general aim of the whole study was to find determinants and benefits of breastfeeding. In this wave, data were collected at the beginning of 2008 from 605 adolescents and their families.

The TFEQ contained 13 items which created three Factors entitled: *Cognitive Restraint of Eating* (Fac.1) 5 items, *Uncontrolled Eating* (Fac.2) 3 items and *Emotional Eating* (Fac.3) 5 items. Questions from HBSC questionnaire: BIS, Diet status, Body size perception and also Gender were used. These variables were transformed into series of dummy or continuous (BIS) variables in Stepwise Linear Regression Models.

**Results:** Final Model for Fac.1 included 4 predictors: *being too fat*, *being on a diet*, *being to thin* and *BIS*, however Models for Fac.2 and Fac.3 included only one predictor: *BIS*. In those successive Models value of R<sup>2</sup> was 0.242 for Fac.1, 0.074 for Fac.2 and 0.037 for Fac.3.

**Conclusions:** It was found that there is a relation between TFEQ's Factors and questions from HBSC questionnaire which measured similar effects. TFEQ could be a useful instrument to detect early symptoms of eating disorders among adolescents.

**Poster Title:** Tobacco smoking by 18-year-old girls and their parents' approval and disapproval

**Author(s) and Affiliation:** Anna Kowalewska<sup>1</sup> and Hanna Kololo<sup>2</sup>  
<sup>1</sup>Faculty of Pedagogy, Warsaw University  
<sup>2</sup>Department of Pedagogy, Academy of Physical Education, Warsaw

**Aim:** of the study was to evaluate the relationship between tobacco smoking among 18-year-old girls and approval and disapproval of this behavior by their mothers and fathers.

**Material/method:** The base for analysis was data from research conducted in three Polish provinces in November 2008 in representative sample of 1321 girls in average age 18.6 years (Ministry of Science grant NN404 164334). The anonymous questionnaire was used as an instrument for data collection.

**Results:** Girls who smoke tobacco every day declare that their mothers (15.1%; 2.6%) and fathers (13.2%; 2.9%) more frequently think that they are allowed to smoke cigarettes ( $p > 0.001$ ). Among girls who smoke tobacco every day the higher percentage of these who have problem in defining what their parents think about smoking was observed. Girls who smoked tobacco more seldom thought that this behavior is disapproved by their mothers and fathers, than in the group of those who smoke more rarely and non-smokers ( $p > 0.01$ ).

**Conclusion:** In undertaking preventive action aimed at limiting tobacco smoking among girls, parents should be informed about relationship between normative factors and girls' displayed behavior.

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**Poster Title:** Trends in sleeping habits and perceived sleep difficulties in 13- and 15-year-old schoolchildren in Finland

**Author(s) and Affiliation:** J. Tynjälä, R. Välimaa, J. Villberg, K. Ojala and L. Kannas,  
University of Jyväskylä, Department of Health Sciences, Research Center for Health Promotion, Finland

**Objectives:** The aim of this study was to analyse secular trends between 1984 and 2006 in sleeping habits and self-reported sleep difficulties in Finnish schoolchildren.

**Material and Methods:** The data are taken from the WHO collaborative cross-national study of school children's health and lifestyle (HBSC). The country representative data were collected in Finland in March-May in all survey years (1984-2006) using a standard research protocol and a questionnaire. The data consisted of 9256 boys and 9425 girls at age 13 and 15. The respondents were inquired about bedtime and wake-up time during school week and weekend as well as the type of their sleep difficulties. SPSS for Windows (15.0) were used in analysing the data.

**Results:** The amount of extra sleep on weekends has increased between 1994 and 2006 and was almost two hours in 15-year-old girls in 2006. Proportion of those with long sleep latency (at least 30 min) has doubled in girls but not in boys between 1990 and 2006. No clear trend between 1984 and 2006 was found in difficulty in falling asleep. However, nocturnal awakenings became more prevalent in girls and in the oldest boys between 1994 and 2006.

**Conclusions:** Long sleep latency, nocturnal awakenings and different sleep pattern between school nights and weekend nights may have serious effect on schoolchildren's health and well-being, especially in girls, and their ability to cope with demands at school. The results are a challenge for schools and parents.

**Poster Title:** Impact of bullying at school on self perceived health among disabled students: a multilevel study in 13 western countries

**Author(s) and Affiliation:** Mariane Sentenac<sup>1</sup>, Aoife Gavin<sup>2</sup>, Michal Molcho<sup>2</sup>, Catherine Arnaud<sup>1</sup>, Saoirse Nic Gabhainn<sup>2</sup>, Felix Navarro<sup>3</sup> and Emmanuelle Godeau<sup>1,3</sup>  
<sup>1</sup>INSERM Unité 558, Université Paul Sabatier, Toulouse, France  
<sup>2</sup>National University of Ireland, Galway, Ireland  
<sup>3</sup>Service médical du rectorat, Toulouse, France

Introduction: The negative impact of bullying at school on students' health is well known, but studies among disabled students are scarcer.

Objectives: To describe the impact of being bullied on perceived health among students who report a disability or chronic condition (D/CI) and others, to compare this association between these 2 groups, and to describe social and educational contexts that might help explain differences in the patterns observed between countries.

Methods: Population studied: 11, 13 and 15 year-olds among 13 countries from the HBSC 2006 study (n=66,494). Self-perceived health was assessed by self- related health, life satisfaction and symptoms. Multilevel logistic regressions were used to explore the relationships between being bullied and SRH according to the D/CI status of the student and the country.

Results: The distribution of SRH and the impact of being bullied on it vary greatly across countries. In general, pupils reporting being bullied declare a poorer health than the others, and this impact is more negative among children with D/CI.

Conclusion: The impact of bullying tends to be more negative for perceived health among children with D/CI compared to others. We will discuss the impact of the social and educational contexts at country level.

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**Presentation Title:** Age at onset of menarche and factors associated to early menarche in France: results from the French health behaviour in school-aged children (HBSC) study.

**Author(s) and Affiliation:** Adrien Gaudineau<sup>1,2</sup>, Virginie Ehlinger<sup>1</sup>, Christophe Vayssiere<sup>1</sup>, Catherine Arnaud<sup>1</sup> and Emmanuelle Godeau<sup>1,3</sup>  
<sup>1</sup>UMR Inserm U558/ University Paul Sabatier, Toulouse, France  
<sup>2</sup>CHU Hautepierre, Université Louis Pasteur, Strasbourg, France  
<sup>3</sup>Service médical du rectorat, Toulouse, France

Introduction: Decrease of pubertal age is debated, implying variation in adolescent's physical appearances and behaviours at same biological age. Anomalies in pubertal timing may be associated with poorer health.

Objectives:

- to describe age at menarche
- to examine factors associated to early menarche < 11 year-old)

Population Methods:

- Description of age at menarche (Kaplan-Meier) on 13 and 15 year-old schoolgirls (n=2 323) from the French HBSC study.
- Analyses of factors possibly associated to early menarche on 15 year-old girls (n=1 072).

Results: Median age at menarche was of 12.8 years; 57 girls (5.3%) were early-matured.

Controlled for familial environment, more than two drunkenness episodes (OR=2.5), early sexual initiation (OR=2.8) and overweight (OR=7.3) were associated to early menarche.

Discussion: Age at menarche decreased during last two centuries in developed countries, to stabilise at 13 year-old, our findings are in line with this trend.

Early-maturing girls may affiliate with elders, hence engage in risk behaviours appropriate to appearance rather than experience, coping or cognitive abilities.

Conclusion: The factors we find associated to early menarche highlight the necessity of specific attention to early-maturing girls to avoid them further health problems linked to risk behaviours. (194 words)

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**Poster Title:** Modelling of school-aged children's smoking by the factors of an individual and the school levels.

**Author(s) and Affiliation:** I. Lenciauskiene and A Zaborskis  
Biomedical Research Institute of Kaunas University of Medicine

The aim: to investigate the relationship between adolescent's smoking and the factors of an individual and school levels.

Methods: The research was a part of the WHO Cross – National Health Behaviour in School – Aged Children Study (HBSC) carried out in Lithuania in 2005/06. A country representative sample of schoolchildren aged 11 - 15 was drawn. The group of 5632 respondents was surveyed. The data were collected by standardised questionnaires. Teens were asked about smoking, family SES and structure, communication with parents and peers, academic achievements, life satisfaction and school factors. The multilevel analysis was applied (MLwiN 2.02 version).

Results: The boys smoked more frequently than the girls, and the percentage of smokers was increasing with age. The multilevel analysis demonstrated that the individual level factors significantly increased boy's and girl's opportunity to smoke, but the school level factors were related only to girls smoking habits. In the model of individual level the girls who were having trouble communicating with mother and father, were spending more time with friends, have more close friends (boys), were lower achievers in class had more opportunities to smoke. Boys who had more close friends (girls) and spent out more evenings with friends, who reported being unhappy and were lower achievers had many possibilities of frequent smoking. In the model of school level factors school localisation reduced smoking among girls. The girls from the schools of small towns and villages were less likely to have possibility to smoke, than the girls from schools of cities and towns.

Conclusions: The adolescent's smoking habits were more connected with factors of an individual, than school level. Additional research needs to focus on developing theoretical models that help explain the influence of school level factors on adolescent's health behaviour.

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**Poster Title:** Obesogenic Environments; local area perceptions and physical activity Levels in School aged Children in Ireland.

**Author(s) and Affiliation:** Linda O'Keeffe, Priscilla Doyle, Michal Molcho and Saoirse Nic Gabhainn  
Health Promotion Research Centre, NUI Galway.

Using HBSC Ireland 2006 data, the aim of this paper was to investigate the relationship between children's perceptions of various dimensions of their local area and physical activity attainment (>5 times per week /< 5 times per week). Measures used included an analysis of the relationship between perceptions of 1) being well

off 2) the existence of groups who cause trouble 3) the existence of litter, broken glass and rubbish 4) the presence of run down houses in the area 5) feeling safe in the area 6) whether the local area is a good place to live 7) people being trustworthy 8) that there are good places to spend your free time 8) being able to ask for help or a favour and physical activity attainment. The aim was to ascertain whether perceptions of the local area may be predictive of physical activity attainment among school aged children 10-18 years. Positive perceptions of all of the above aspects of the local area with the exception of the presence of groups who cause trouble were reported by a greater proportion of those participants who engaged in high levels of physical activity. This paper concludes that perceptions of the local area may be predictive of physical activity levels in school aged children.

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**Poster Title:** Exploring the Feasibility of Developing Internet Based Health Promotion Materials for Third Level Students

**Author(s) and Affiliation:** Priscilla Doyle<sup>1</sup>, Jane Sixsmith<sup>1</sup>, Cindy Dring<sup>1</sup>, Brian Neeson<sup>2</sup>, Michal Byrne<sup>3</sup>, David McGrath<sup>4</sup>, Aileen McGloidy<sup>4</sup>.  
<sup>1</sup>National University of Ireland, Galway, Ireland, <sup>2</sup>Health Service Executive, <sup>3</sup>University College Cork, <sup>4</sup> Trinity College Dublin

Colleges have been identified as a key setting for health promotion. In order to foster a health promoting environment within third level institutions, the provision of accessible, accurate and relevant information about health issues and available services for students is necessary. The aim of this study was to explore the feasibility of developing an internet based resource for health information provision for college students across three third level institutions, specifically University College Cork (UCC), Trinity College Dublin (TCD), and NUI, Galway (NUIG). This study was a joint collaboration between these colleges and the Health Service Executive. The study was divided into three components; a brief review of the literature; qualitative research to assess the perspectives of students and of university personnel, specifically computer services.

Students indicated that they use the internet, specifically Google, as their main source of health information; however they expressed a sense of mistrust with this and thus responded positively to this proposed project by the HSE and universities. They identified that any such resource should be professionally presented, with interactive features and address a variety of topics. Computer personnel identified technical issues, such as authentication and hosting, but ultimately none were seen as insurmountable and solutions were discussed. Final results suggest that this proposal is feasible and discussions are ongoing.

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**Poster Title:** Face to Face and Electronic Communication in Adolescence: Associations with Risk Behaviours and Well-being

**Author(s) and Affiliation:** Priscilla Doyle<sup>1</sup>, Saoirse Nic Gabhainn<sup>1</sup>, Michal Molcho<sup>1</sup>, Kieran Walsh<sup>1</sup> and Cecily Kelleher<sup>2</sup>  
<sup>1</sup>National University of Ireland, Galway, Ireland, <sup>2</sup>University College Dublin.

Using analysis of Health Behaviour in School-aged Children (HBSC) 2002 data, this paper investigates the relationships between different modes of communication among friends and wellbeing and risk behaviours of Irish school-going children. Electronic communication including use of telephone, texting (using SMS) and e-mailing is contrasted with face-to-face communication such as spending time with friends after school and being out with friends in the evenings, in terms of their associations with health outcomes.

The data illustrates that electronic communication increases with age, is higher among girls and that there are relatively low correlations ( $r$ 's  $\leq 0.2$ ) between electronic and face-to-face communication with peers. Both

face-to-face and electronic peer communication were consistently predictive of engaging in risk behaviours such as substance use (alcohol use, drunkenness, smoking cannabis) injuries and bullying, but face-to-face communication was also predictive of positive self-reported well-being such as happiness and life satisfaction. The results show that while electronic communication is associated with the same risk behaviours as face-to-face communication, it is not associated with the same benefits.

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**Poster Title:** Children's perceptions of videogames as an occupation: a qualitative study.

**Author(s) and Affiliation:** Sinead Barry and Helen Lynch  
University College Cork

Play is one of the primary occupations in which children engage and videogames are a relatively new form of play. The aim of this research study was to explore children's perceptions of videogames as an occupation and to identify if a gender difference exists in their perceptions. This study provides a deeper understanding of the value of videogames and their future use in occupational therapy.

This qualitative study included two focus groups, a drawing activity and questionnaires. Six boys and six girls aged between eight and twelve years, all living in a suburb of Cork city participated in this research. This study identified that videogames are a valued occupation. Boys were found to be more emotionally attached to this occupation and tended to play more often than girls. The social and physical values of videogames were highlighted as the interactive features of videogames were discussed.

This study concluded that children are motivated to engage in this occupation, thus therapists need to become more aware of videogames and their use in therapy. This research gained a deeper insight into children's perceptions of videogames and in turn offers a greater understanding of this occupations place in childhood.

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**Poster Title:** Children with autism in public places: Mothers' perspectives

**Author(s) and Affiliation:** Cathy Wyer, Janice Crausaz and Helen Lynch, University College Cork

Mothers of children with autism are at risk of increased stress levels due to the challenging behaviours sometimes exhibited by their children. Such behaviours are often triggered by the child's environment, in particular, public places such as schools, shops, cinemas, leisure centres, play areas and restaurants. The purpose of this study was to explore the lived experiences of mothers of children with autism when participating in activities carried out in public places with their children. Qualitative data was collected by way of semi-structured interview with three mothers of children diagnosed with autistic spectrum disorder aged between eight and ten years old. The findings of this study demonstrate the following: Preparation and planning is required of the mothers before they can participate in public places with their children; societal attitudes have an impact upon the mothers and their children when in public places; public places are a potential learning environment for children with autism; and the importance of accessibility of public places in terms of supports and barriers to inclusion. This study underlines the vital role of occupational therapy in assisting children with autism to develop their social skills and independence while using public places as a learning environment.



**Poster Title:** Tactile interaction while attending to an infant's activities of daily living in the first year of life: The parent's experience

**Author(s) and Affiliation:** Mairead Ni Bhriain and Helen Lynch  
University College Cork

Touch is a basic instinctual interaction between a parent and their infant (Bidmead, 2005) and has a vital role in the infant's early development. Parents provide a variety of tactile stimulation while addressing their infant's activities of daily living (ADL) (Blanche, 1998). Qualitative research, employing a phenomenological approach, was conducted to explore the experiential nature of this tactile interaction. Data was collected from six mothers of typically developing infants via single semi-structured interviews, and analysed thematically.

Mothers described the importance of tactile interaction as a medium through which to bond with their infant and also discussed the influence that the infant's development has on this dyadic relationship. Having other children, familial and external advice and support, the environment, professional and cultural background, and the infant's response to touch, were identified as affecting maternal development of tactile interaction. Based on these findings, recommendations are made for occupational therapists who work with infants who may respond negatively to tactile interaction. Consideration of these identified issues that influence mother-infant tactile interaction will contribute to an enhanced family-centred approach to therapy and encourage the achievement of best practice in this area (Dunn, 2000). Recommendations are also made for future research.

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**Poster Title:** Family factors and eating behaviour of schoolchildren

**Author(s) and Affiliation:** Colette Kelly, Michal Molcho and Saoirse Nic Gabhainn,  
Health Promotion Research Centre, NUI Galway.

Good nutrition and the establishment of healthy eating habits in childhood and adolescence promotes optimal youth health and may prevent long-term health problems. The family and home environment e.g. parental diet and home food availability and accessibility are important influences on the dietary behaviours of young people (Patrick and Nicklas 2005). Other aspects of the family environment such as parental control, family type, family structure and family communication have also been explored in relation to young people's dietary habits (Pearson *et al.*, 2009).

Ireland has relatively recently undergone considerable change in terms of family size and structure. This study investigated how family make-up (size, structure and social class) and maternal employment predict dietary habits of children in Ireland, via the 2006 Irish HBSC survey, which involved 10334 schoolchildren aged 10-18 years. Ethical approval was granted for the study and consent from schools, parents and children was obtained.

The family factors that were found to predict aspects of young people's eating patterns, such as breakfast, fruit and vegetable consumption will be discussed in relation to future nutrition policy in Ireland, which is currently at a final draft stage (Department of Health and Children, 2009).

References:

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Pearson N., Biddle, S.J.H. and Gorely T. (2009). Family correlates of fruit and vegetable consumption in children and adolescents: a systematic review. *PHN*, 12(2), 267-83.

Department of Health and Children (2009). *Report of the Inter-sectoral Group on the Implementation of the Recommendations of the National Taskforce on Obesity*. DOHC, Dublin.

[http://www.dohc.ie/publications/report\\_ntfo.html](http://www.dohc.ie/publications/report_ntfo.html) (accessed May 2009).

**Poster Title:** Marketing of foodstuffs in post-primary schools in Ireland

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Marketing of energy-dense, nutrient-poor foods is thought to contribute to the prevalence and rising levels of obesity levels among children (WHO, 2006). Whilst there are numerous media and settings through which food can be advertised to children, schools represent a growing marketing opportunity (Matthews 2007).

All post-primary schools in Ireland were contacted and requested to complete a 40-item questionnaire on the school food environment, i.e. foods provided, presence of vending machines, related policies and commercial involvement. Food sales were a prevalent form of commercial activity, with tuck shops/canteens (53%), drinks (45%) and snack (28%) vending machines present in many schools. Healthy eating and commercial sponsorship policies were present in 36% and 7% of schools respectively, whereas commercial sponsorship was accepted by 38% of schools.

Recommendations by the National Taskforce on Obesity (2005) to establish a code of practice in relation to industry sponsorship (87%) and vending machines (92%) was supported by the majority of schools. Since no progress on a code for industry sponsorship in schools has been achieved to date (Department of Health and Children, 2009), establishing a system to track whether schools are being increasingly used as a marketing venue is timely.

References:

- Department of Health and Children (2009). *Report of the Inter-sectoral Group on the Implementation of the Recommendations of the National Taskforce on Obesity*. Dublin: DOHC.  
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- Matthews, A.E. (2007). Children and obesity: a pan-European project examining the role of food marketing. *European Journal of Public Health*, 8(1), 7-11.
- WHO (2006). *Marketing of food and non-alcoholic beverages to children. Report of a WHO Forum and Technical Meeting*, Oslo, Norway, 2-5 May, 2006. Geneva, Switzerland.  
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## Young People's Perspectives: Projects

**Title:** **Where Have All The Buses Gone?**

**Organisation:** **Galway City Comhairle na nÓg**

*Where Have All the Buses Gone?* is DVD produced by Galway City Comhairle na nOg to highlight the problems relating to Public Transport. It has a number of elements: record of the making of the DVD; interviews with the general public, city councillors, city council employees and Bus Eireann; and a short film drama illustrating the transport problems.

This DVD highlights an approach which could be utilized by young people to articulate their views on any issue. It clearly illustrates the problem, is factually based and involves a wide range of stakeholders. The format is interesting, innovative and appeals to all age-groups and in doing so, effectively highlights the problem.

Galway City Comhairle na nÓg is the forum for Young People (12-18 yrs) in the City. It provides young people with an opportunity to discuss issues of concern to them and for their voices to be heard by policy makers/influencers (local and national). Galway City Comhairle na nÓg is run by a voluntary organising committee (10 young people). Typically a number of large events are organized which are open to all young people in the city to participate (usually involving a combination of fun activities (dance, bands) and workshop/information inputs).

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**Title:** **Jigsaw – Your Health In Mind**

**Organisation:** **Jigsaw**

Jigsaw Galway is a new initiative in Galway developed in partnership between the HSE, Headstrong and Mental Health Ireland

Jigsaw is an evidence based approach for organising services and supports to enhance the mental health and well-being of young people. It is designed to promote services/supports that are more accessible, youth-friendly, integrated, and engaging for young people.

Jigsaw is open to all young people aged 15-25 in Galway city and county. All young people have mental health needs. Jigsaw aims to ensure that these needs are met. Many young people may just need to access information and advice, others may benefit from peer support or being linked in with resources in their community, while a small minority may need to talk to a mental health professional. The basic premise of Jigsaw is that whatever their level of need, young people should be able to access quality support, when they need it, in settings where they feel safe, comfortable and respected. It is about meeting young people where they are.

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**Title:** **Pavee Beurs: Breaking Free**

**Organisation:** **Youthreach Clara, Co. Offaly**

As a group of Travellers, we want the younger generations of every race to be able to grow up in a society and not be ashamed of who they are, because of their colour, culture, Religion etc. We don't want to be seen just

as a group of travellers, we want to be treated as the people we are: individuals. Nobody should feel uncomfortable in their own skin or live according to someone else's standard because they're ashamed of their heritage. Therefore our goal is to try and prove a point that all Travellers are not the same. We went down to our local Primary school and Secondary school and gave two successful lessons on Traveller Culture and Multiculturalism in Ireland. We got great feedback through questions and answers and the students got really involved. We would like to continue going to different schools and getting actively involved in the community.

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**Title:** Coffee not Cocaine

**Organisation:** Dunmore Community School, Dunmore, Co. Galway

The focus of this project is to raise awareness about the importance of having a local place for young people within the community. The group hopes that such a resource will provide positive, social forms of entertainment and will help to reduce drug taking among local teenagers. The team carried out research based on the findings of last years group who initiated work on this important social issue. A survey was also distributed among students and the results were analysed. Students established links with local business people to locate a suitable premises and carry out necessary renovations. The team is in the process of painting and furnishing the youth café. The plan to write up a supervision roster to ensure that everyone helps out.

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**Title:** Youth Citizenship Project

**Organisation:** Dunmore Community School, Dunmore, Co. Galway

The focus of this project is to raise awareness about the importance of having a local place for young people within the community. The group hopes that such a resource will provide positive, social forms of entertainment and will help to reduce drug taking among local teenagers. The team carried out research based on the findings of last years group who initiated work on this important social issue. A survey was also distributed among students and the results were analysed. Students established links with local business people to locate a suitable premises and carry out necessary renovations. The team is in the process of painting and furnishing the youth café. The plan to write up a supervision roster to ensure that everyone helps out.

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**Title:** Meals on Wheels initiative for older people in the community

**Organisation:** Ballybane/Doughiska Youth Development Project, Galway

Seven young people from the Foroige Ballybane/Doughiska area youth project spent six weekends delivering meals to old people in the community in association with COPE senior support services. We met every Saturday morning and collected the meals, both hot and cold, from COPE at Ballybrit Industrial Estate. We delivered the meals to thirty old people in the community. Both the young and old people enjoyed the interaction and the young people learned some worthwhile lessons i.e.: not to wear their hoodies up as it may worry the old people, that old age can be difficult with illness and loneliness, that old people can have a good sense of humour. At the projects end the young people agreed to devote a week of their Foroige Summer Programme to helping the old people in their homes with jobs that may need to be done! Young people involved: Isaac Francis, Amy McMahan, Alanna Mckee, Nicola Stewart, Johnny Sheridan, Alex Grealish, Dylan Coyle.

**Title:**                    **It's great to integrate**

**Organisation:**        **St. Vincent's Secondary School, Dundalk, Co. Louth**

Our project was concerned with the integration of students from different cultural backgrounds. We promoted cultural diversity and produced a 'welcome pack' to be distributed to new citizens. This welcome pack contains simple translated phrases and things to do in our area. Basically our project encouraged integration in our school and the wider community.

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**Title:**                    **Process of Youth Participation**

**Organisation:**        **Galway County Comhairle na nÓg**

Abstract will available on the day

## **Young People's Perspectives: Posters**

**Title:** Making our school cleaner, making our community greener

**Organisation:** Moyne Community College

Poster will be displayed

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**Title:** Poverty – Anyone, Anywhere, Anytime

**Organisation:** Moyne Community College, Co. Longford

Poster will be displayed

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**Title:** Anti-bullying, Teenage Pregnancy, Too young to be parents

**Organisation:** St. Anne's Community College, Killaloe, Co. Claire

Poster will be displayed

## **Symposium – Zippy’s Friends**

- Presenters:** Anne McAteer and Anne Sheridan, HSE West  
Ann Lawlor, Mike Rainsford and Mary Kilraine-Hannon, HSE West  
Primary school teacher involved in the study  
Aleisha Clarke and Margaret Barry, Health Promotion Research Centre, NUI Galway
- Convened by:** Margaret Barry, Health Promotion Research Centre, NUI Galway
- Title:** Zippy’s Friends – an emotional wellbeing programme for children in primary school.

This symposium presents findings on the adoption, implementation and evaluation of the Zippy’s Friends programme in Irish primary schools. Zippy’s Friends is an international evidence-based programme that addresses the emotional wellbeing of 7-8 year old children in the school setting. In 2008 this programme was introduced into 30 designated disadvantaged schools in the western region with the support of the Health Service Executive and the Department of Education and Science.

A series of four presentations will be made in this symposium, sharing the experiences of health promoters, teachers and researchers involved in implementing and evaluating this programme.

An overview of the programme and its introduction into the Irish primary school setting will be provided, followed by a presentation on the implementation process, including the training of teachers to ensure high quality implementation and the development of mechanisms for involving parents.

The experience of delivering the programme in the Irish educational context is illustrated and the first hand experiences and insights of a teacher who delivered the programme will be presented.

The findings on the evaluation of the programme to date are presented, including results from the randomized controlled design on the programme’s impact on pupils and qualitative data from teachers on the programme implementation.

This symposium will provide an opportunity to discuss the role of mental health promotion in primary schools and the practice and research issues that arise in the adoption and adaptation of international programmes.

**Notes**



**Notes**