

## Results

Globally, students revealed good EI. Students with mental illness scored lower in EI on subscale of self-appraisal emotions ( $p = 0.000$ ) and emotional regulation ( $p = 0.015$ ). However, students with mental illness revealed higher "emotional appraisal of others" compared to the ones without mental illness ( $p = 0.000$ ). There are no differences in EI related to mental illness in family. Positive significant correlations were found between perceived knowledge in mental health and EI ( $p = 0.039$ ) as well as regulation of emotions ( $p = 0.039$ ).

## Conclusions

Health students with mental illness have lower emotional self-appraisal and regulation of emotional than students without mental illness. Nevertheless, students with mental illness also have better ability to emotional appraisal of others, suggesting a bigger awareness to emotional suffering of others. Correlation between mental health knowledge and EI points out the need of enhancing mental health education to improve emotional intelligence.

## Keywords

Emotional Intelligence, mental health, students

## P1

### Fall risk factors in people older than 50 years old – a pilot report

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## Background

Falls are a major public health problem worldwide that has been mainly studied in people older than 65 years old however, recently it has been demonstrated that this problem might affect people at an earlier age. Objective: To determine fall risk factors in a wider range of age interval.

## Methods

People older than 50 years were recruited in a primary care centre of Portugal. Age, gender, falls history over the past 2 months, comorbidities, need of ambulatory aid and gait difficulties were collected using Morse scale. Independent t-tests and Chi-square tests were used to examine statistical differences ( $p < 0.05$ ) in these characteristics between fallers and non-fallers. A logistic regression model was built using as independent variables the statistically different characteristics between the two groups and as dependent variable the fall status (fallers or non-fallers).

## Results

One hundred and forty participants were included (90 female;  $71.33 \pm 9.97$  years; 31.4 % fallers). Fallers were statistically different from non-fallers in: age ( $74.0 \pm 9.9$  years vs  $69.9 \pm 9.9$  years,  $p = 0.03$ ), gender (77.3 % vs 58.5 % female;  $p = 0.01$ ); incidence of multiple comorbidities (70.5 % vs 48.0 %,  $p = 0.01$ ); need of ambulatory aid (55.0 % vs 17.0 %,  $p = 0.01$ ) and incidence of gait difficulties (79.5 % vs 44.7 %,  $p = 0.01$ ). The odds of falling increased 2.6 in females (95 % CI 1.1-6.5), 3.5 in people that need ambulatory aid (95 % CI 1.4-8.4) and 3.3 in people with gait difficulties (95 % CI 1.3-8.6). These three factors significantly contributed to explain 27.2 % of falls history variability ( $p = 0.01$ ).

## Conclusions

Gait impairments and female gender seem to explain almost 30 % of fall risk in people older than 50 years.

## Keywords

Falls, risk factors, middle-aged, elderly

## P2

### What about the Portuguese oldest old? A global overview using census data

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## Background

The older population is itself aging, and achieving an advanced age is becoming more common worldwide. In Portugal, individuals aged 80+ represent 5.6 % of the total population and 26.5 % of the population were aged 65 and over in 2011. Having a national profile on this population will give important information to develop intervention programs and identify the areas requiring most attention. Objective: This study aims to provide a profile of the Portuguese oldest old, as given by the last national census data.

## Methods

The characteristics of all residents aged 80+ ( $N = 532,219$ ) were analysed considering socio-demographic information (gender, marital status, education, type of residence, place of birth, income) and the existence of difficulties in functional, sensorial and cognitive activities due to health problems or ageing.

## Results

The majority of the most aged are females (64.5 %), widowed (53.9 %), and present low educational levels (46.1 % never attended school and 31.6 % do not know how to read/write). Own pensions constitute the main source of income (96.3 %) and the majority live in private households (88.8 %), with 43.2 % currently living in the place where they were born. The majority (73.0 %) reported major difficulties in at least one functional activity – bathing/dressing, walking/climbing stairs, seeing, hearing, memory/concentration, understanding others/being understood.

## Conclusions

The high percentage of oldest old living in private households and the presence of functional limitations point to the importance of informal care and community care services to support this population. Further studies paying attention to their needs and utilisation of services are required.

## Keywords

Oldest old, census, Portuguese, sociodemographic profile

## P3

### Prevalence of injuries in senior amateur volleyball athletes in Alentejo and Algarve clubs, Portugal: factors associated

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