HAPPINESS AND SUBJECTIVE HEALTH STATUS AMONG OLDER ADULTS IN SOUTHERN EUROPE AND SCANDINAVIA

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Introduction: European societies are facing social challenges arising from rapid demographic aging process. The emergence of a “graying society” has sparked the debate around the promotion of the living conditions of the elderly.

Objective: In this paper we analyze the level of happiness of the elderly as an important dimension of quality of life, correlating with the subjective assessment of health status. We take as reference the specificity of senior status in southern Europe (Portugal, Spain and Greece) and in Scandinavia (Denmark, Finland, Norway, Sweden). We seek to understand if there are different ways of experiencing old age in these societies, with a setting of distinct models of social protection.

Methods: The tool of inquiry (European Social Survey, round 5: 2010) consisted of a questionnaire administered to representative samples.

Results: The results show that the level of happiness (measured on a scale of 11 values, where 0 corresponds to the lowest level of happiness and 10 to the highest) is higher among the elderly in Scandinavia (n=475, M=8.06) when compared with the elderly in Southern Europe (n=1169, M=6.74), with a statistically significant difference (t_{1644}=12.9, p<0.000). The analysis reveals correlations between the level of happiness and the level of well-being, being stronger in Southern Europe (r=0.496) than in Scandinavia (r=0.438). Testing the relationship between happiness and health status reveals the existence of correlation between the variables, higher in Scandinavia (r=3.07) than in Southern Europe (r=0.254).

Conclusions: The general conclusion of the research points out to the existence of specific senior status in the analyzed countries.

Descriptors: aging; subjective health status; happiness; quality of life.

PHYSICAL ACTIVITY AND SLEEP – BASELINE RESULTS FROM AN INTERVENTION STUDY

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Introduction: Symptoms of disturbed sleep appear to be related to aging and gender and influences negatively on health. Regular physical activity has been indicated as beneficial to the quality of sleep, and an alternative to pharmacological treatment of sleeping disorders.

Objective: The aim of the present paper was to describe baseline data from the participants of the first wave of recruitment of an intervention study aimed at analyzing the effects of different types of exercise in adults with sleeping disorders.

Methods: A total of 112 individuals (mean age 33.25 years ±12.74), completed the Pittsburgh Sleep Quality Index Questionnaire (PSQI), the Berlin Questionnaire, the Epworth Sleepiness Scale (ESS) and the International Physical Activity Questionnaire (IPAQ), before starting the intervention.

Results: Our results showed that only 11% of participants reported excessive daytime sleepiness (ESS>10), around 15% revealed symptoms for sleep apnea and 22.5% were more than half of the individuals reported being active and GHPRQVWUDWHGVOLJKWOEHWWHUEXWQRWVWDWLFDOOVLJQL¿FDQWresults in all tests scores.

Conclusions: Our preliminary results indicate that more active individuals reported less poor sleep quality, fewer symptoms for sleep apnea and less disturbed sleep as documented in the literature. However, enlarging the sample and implementing the program will provide more information regarding age and gender differences and the most effective type of exercise, fundamental to build the knowledge on the subject.

Descriptors: physical activity; exercise; sleep; intervention.

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