to course objectives and administered during the pilot. Competency on the post-test was set at ≥70%. Tests and evaluations were analysed to guide curriculum improvements.

Results Ten participants took the pre-post test; mean scores were 60.3% (46%–81%) and 76.7% (70%–83%) respectively, with a mean increase of 16.4% (1%–37.5%). On course evaluations, all participants indicated that training content was relevant to their work. Areas of improvement included the need for better guidance on improving data quality and interpreting statistical test results.

Conclusion All participants demonstrated overall competency on knowledge and skills covered in training. Training will be revised and implemented among public health field workers throughout the country. We will continue to actively involve government and local partners to improve potential for sustainability.

P2-377 | A RURAL-URBAN COMPARISON OF THE PREVALENCE AND PATTERNS OF ELDER ABUSE IN OYO STATE, SOUTH WESTERN NIGERIA

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Introduction Globally, it has been documented that the population is ageing at an unprecedented rate. The issue of elder abuse has not been adequately addressed, especially in Nigeria because it has not yet been recognised as a serious matter. This study compares prevalence, patterns and factors associated with elder abuse among the elderly in a rural and an urban community in Oyo State, Nigeria.

Methods A comparative cross sectional survey was conducted among the elderly in selected rural and urban Local Government Areas in Oyo state, Nigeria, using interviewer administered questionnaires. Data obtained was analysed using SPSS version 16.

Results A total of 722 respondents were interviewed, 358 (49.6%) in the urban location and 364 (50.4%) in the rural area. The mean age of respondents was 70.92±9.21 years (urban 70.22±8.91 years: rural 71.62±9.47 years p<0.05). Over half of the respondents were female (56.0%) and married (58.2%). The urban and rural prevalence of abuse are: physical abuse 21.8% vs 6.3%; emotional abuse 16.8% vs 4.1%; social abuse 27.4% vs 10.2% and financial abuse 20.9% vs 7.7% respectively. Sexual abuse (0.6%) was reported only in the urban area. The positive predictors of elder abuse were locality, living arrangements and functional impairment.

Conclusion This study reveals that there is a high prevalence of all forms of elder abuse especially in the urban areas. There is a need to create awareness of the problem of elder abuse and formulate social security policies to protect the elderly.

P2-378 | WITHDRAWN

P2-379 | EFFECTIVENESS OF A LOW-IMPACT EXERCISE PROGRAM IN LEBANESE MARGINALISED POSTMENOPAUSAL WOMEN WITH PSYCHOLOGICAL DISTRESS: A RANDOMISED CONTROLLED TRIAL

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Background Psychological distress (PD) is common worldwide. Physical exercise is usually recommended by physicians to relieve PD among older adults. However, there is not yet strong enough evidence to support this recommendation.

Aim This study examined the effect of a low impact exercise program on marginalised Lebanese women with psychological distress.

Methods Community-dwelling women with a mean age of 56 years were randomised to either a low impact exercise program of three times a week for 6 weeks or a control group that received daily calcium tablets. The 12-item General Health Questionnaire (GHQ-12) was used to assess PD, the main outcome measure, and intention-to-treat analysis was performed. A focus group discussion was then conducted with a group of women who completed the exercise program.

Results Sixty nine women were enrolled. Psychological distress was significantly lower at the completion of the study when compared to baseline levels in both intervention and calcium groups, whereby a drop in the GHQ-12 was noted in all 69 women, but this drop did not differ significantly between the two groups.

Conclusion This study showed that light impact exercise did not result in significant improvement of PD though the women who participated in the exercise program reported improvement and asked to sustain this activity.

P2-380 | NEONATAL MORTALITY RISK FACTORS IN A RURAL PART OF IRAN: A NESTED CASE-CONTROL STUDY

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Introduction Neonatal death has a complex causal framework and improvement of this health indicator is quite gradual. The aim of present study was evaluation of neonatal death risk factors in a substantial sample of Iranian neonates in a part of rural areas by using a relatively new design and modern analytic technique.

Methods and Materials This study was conducted as a nested case-control study and the study cohort was all of the neonates who were born in rural area of Kohgiluyeh and Boyerahmad province (South of Iran) during one calendar year (from March 2006 to March 2007). Due to occurrence of 97 cases of neonatal death in the studied cohort (6900 newborn), 97 controls were selected, resulting in a total sample size of 194.

Results Univariate conditional logistic regression for each variable was performed and any risk factors that showed marked association (p value <0.2) was selected for the next step analysis. In the final model (conditional logistic regression) LBW (AOR=8.92), C-section (AOR=9.17), birth rank more than 3 (AOR=6.12), mother illiteracy (AOR=3.96) and birth spacing <24 months (AOR=5.45) showed significant statistical association (p value <0.05) with neonatal mortality.

Conclusion This study has identified; LBW, C-section, birth spacing <24 months, mother illiteracy and birth rank more than 3 as potential risk factors for neonatal mortality.

P2-381 | CHILDHOOD MORTALITY RISK FACTORS IN RURAL AREAS OF SHAHROUD, IRAN: A COMMUNITY BASED NESTED CASE-CONTROL STUDY

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Background There is a complex causal framework for one-month to five-year-old child mortality. Hence, the improvement of this health indicator would also be quite gradual. This study was carried out to evaluate potential risk factors for death among children aged 1–59 months.