adjustment for sociodemographic characteristics, behavioural risk factors and health condition of individuals. But, the association between unemployment and poor self-rated health was not modified by neighbourhood socioeconomic indicators.

**Conclusion** Results confirm the association between unemployment and poor self-rated health, regardless the personal or contextual characteristics studied here. Similarly, they show a clear independent association between self-rated health and neighbourhood context. But, they do not show that the neighbourhood contexts investigated modify the associations between unemployment and poor self-rated health.

**Results** We observed concentrations were considered well above the tolerance limits allowed. The distribution shows typical asymmetrical pattern, because of the presence of individuals with concentrations outliers distribution. Deserve special attention from the HCH congeners, the p,p’DDT and p,p’DDE, whose serum concentration mean and median are much higher than the level of tolerance permitted. Concentration obtained were from a HCH (115.81 Mean ± SD 1438.529), b HCH (1616.266 Mean ± SD 155.15), g HCH (Mean ± 5573.357 SD 447.66), p, p’DDE (Mean 94.92 ± 584.979 SD), p, p’DDD (5:23 Mean ± 4350.50), o, p ’DDT (SS96 Mean 1.82 ± SD and p, p’ DDT (45.61 Mean ± SD 464.589). In measuring the correlation between different types of organochlorine compounds evaluated, it is observed that the majority has mayor correlation (r = 1.000), or nearly so, with great statistical significance (p<0.0001).

**Conclusion** There is needing for monitoring and periodic evaluation of health of this population, considering that the blood is altered dimensions, ranging from 0.87 and 0.96. About internal dimensions consistency, Cronbach’s z values varied from 0.64 to 0.85. On the items, the weighted κ varied from 0.66 (95% CI 0.52 to 0.81, and 0.95 (95% CI 0.87 to 0.99). The results of this study indicate that the scale shows high reproducibility for all dimensions evaluated.

**Methods** We obtained laboratory results of serum concentrations of the isomers of HCH and DDT metabolites from the data collection from medical records at a local health unit from a previous screening.

**Results** We observed concentrations were considered well above the tolerance limits allowed. The distribution shows typical asymmetrical pattern, because of the presence of individuals with concentrations outliers distribution. Deserve special attention from the HCH congeners, the p,p’DDT and p,p’DDE, whose serum concentration mean and median are much higher than the level of tolerance permitted. Concentration obtained were from a HCH (115.81 Mean ± SD 1438.529), b HCH (1616.266 Mean ± SD 155.15), g HCH (Mean ± 5573.357 SD 447.66), p, p’DDE (Mean 94.92 ± 584.979 SD), p, p’DDD (5:23 Mean ± 4350.50), o, p ’DDT (SS96 Mean 1.82 ± SD and p, p’ DDT (45.61 Mean ± SD 464.589). In measuring the correlation between different types of organochlorine compounds evaluated, it is observed that the majority has mayor correlation (r = 1.000), or nearly so, with great statistical significance (p<0.0001).

**Conclusion** There is needing for monitoring and periodic evaluation of health of this population, considering that the blood is altered especially at this critical period of development.