

### Associate factor to prevalence of anemia among women of reproductive age in Laos

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**Aim:** to identify factors associated with anemia among women of reproductive age 15-49 years in Laos. **Method:** A quantitative, cross-sectional study, using a nationally representative sample from the Lao Social Indicator Survey (LSIS) II databases, conducted 2017 in Lao PDR, through multi-stage sampling approaches. Anemia defined as hemoglobin level less than 11.0 g/dl and less than 12.0 g/dl in pregnant and non-pregnant women, respectively. Multivariate logistic regression was conducted to determine the adjusted effect for associated factors to prevalence of anemia. **Finding:** Of 12,519 women, 39.2% were anemic. Seven factors were found to be associated with higher odds of anemia, including residing in central provinces (AOR: 2.16, 95% CI: 1.96-2.38), or southern provinces (AOR: 2.05, 95% CI: 1.982-2.31), living in rural with road area (AOR: 1.1, 95% CI: 1-1.2), living in large family size with more 6 people (AOR: 1.14, 95% CI: 1.01-1.29), being pregnant (AOR: 1.46, 95% CI: 1.22-1.74), experienced any adverse pregnancy outcomes (AOR: 1.14, 95% CI: 1.03-1.25), having poor source of drinking water (AOR: 1.24, 95% CI: 1.1-1.39) and poor sanitation facility (AOR: 1.15, 95% CI: 1.03-1.28). Four factors were associated with lower odds of being anemia such as aged 25-34 years (AOR: 0.81, 95% CI: 0.74-0.9), having post-secondary education (AOR: 0.76, 95% CI: 0.6-0.97), being Hmong-Mien ethno-linguistic group (AOR: 0.48, 95% CI: 0.39-0.59), watching television at least once a week (AOR: 0.8, 95% CI: 0.69-0.92), or almost daily (AOR: 0.84, 95% CI: 0.75-0.95). **Conclusion:** Anemia continue to be a major public health challenges in Lao PDR. Interventions should consider on geographic variations, improving safe water and sanitation facility, promoting family planning and enhancing antenatal care during pregnancy. Continue to support women in higher education and provide health education via mass media in rural areas

### Association between living alone and fear of falling among Vietnamese elderly

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**Aim:** This study aims to investigate the association between living alone and FoF among older Vietnamese adults.

**Methods:** Data from the survey of 725 people aged 60 and above conducted in Thua Thua Hue Province, Viet Nam in 2018 was used for analysis. The survey instruments contained questions about socio-demographic characteristics including living arrangement, physical functional status and FoF. FoF was assessed using the Fall Efficacy Scale International (FES-I). Multivariate logistic regression analyses adjusted for associated factors were conducted to examine the association between living alone and high FoF (FES-I score  $\geq$  28) with a significance level at  $p < 0.05$ .

**Results:** Out of 725 participants, 40.8% had a high FoF and 8.9% were living alone. Being female, older age, being single or formerly married, living alone, having history of falls, arthritis hypertension, Instrumental ADL and Basic ADL limitations, vision and walking difficulty, low social support and cognitive decline were significantly associated with a high FoF. Living alone remained a significant factor associated with high FoF among the elderly (AOR= 2.42, 95% CI 1.19-4.91) after adjustment for age, gender, marital status, history of falls, health related factors and perceived social support.

**Conclusion:** Living alone was associated with a high FoF after adjustment of socio-demographic factors and physical functional status. These findings might be useful for public health workers to identify the solitary-living elderly who would be benefited from strategies and interventions to reduce falls and FoF in community.

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