

Chair : Ikai Hiroshi (Kyoto Prefectural University of Medicine)

O-E-1-1 Hearing impairment and cognitive function among older adults in Viet Nam

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Introduction

Recognition of hearing impairment, even with mild stage, as a risk factor for dementia, is relatively new. The potential effect of hearing impairment on cognition among different age groups, particularly older individuals, is necessary for better interventions and programs. This study aims to explore the association between hearing impairment and cognitive function among people aged 60-69 and 70 or over.

Methods

A cross-sectional study involved 725 community-dwelling older adults aged 60 and above, who were randomly selected from the central Viet Nam. Hearing impairment was determined using a questionnaire assessing self-rated hearing loss. Cognitive function was measured by the Mini-Mental State Examination (MMSE). Based on MMSE scores, cognitive decline was divided into MMSE 0-23 (severe), MMSE 24-27 (mild), and MMSE 28-30 (none). An ordinal logistic regression analysis was performed to quantify the association between the hearing impairment and cognitive function outcomes by aged groups, adjusting for social-demographic, health status, living arrangement, and lifestyles.

Results

The overall prevalence of hearing impairment was 22.3%. Results from ordinal regression showed that hearing impairment was significantly associated with reduced cognitive function only in participants aged 70 and above (AOR: 0.37, 95% CI: 0.22 to 0.62), whereas the association was not significant in participants aged 60-69 (AOR: 0.67, 95% CI: 0.34 to 1.33).

Conclusion

Prevalence of hearing impairment is considerable among older people and hearing impairment associated with cognitive impairment in older-old adults. Regular screening for and correcting hearing impairments might improve the cognitive function of older-old adults.

Keywords: Hearing impairment; cognitive function; older adults.

This study is a part of "Workforce development for older adults in ASEAN countries with acceleration of UHC". (WHO Kobe Centre: K18017).

O-E-1-2 Does co-residence with children matters for Thai elderly psychological health?

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Background: In Thailand, Long-term care system is mainly provided by family members, children in particular. Currently, urbanisation and migration in Thailand have led the younger generation to leave their hometowns. This study aims to examine the association between Thai elderly co-residence with children and their psychological health. **Methods:** We analyzed data from a national survey of Thai elderly in 2017. Stratified two-stage random sampling was used for data collection. Psychological health was measured by level of happiness on a scale from 0 to 10 with higher score represent better psychological health. The analysis be weighted to be nationally representative. Independent T-test and one way ANOVA were used to determine the difference in psychological health by living arrangements. **Results:** Overall, 41,752 elderly were interviewed, 51.6 % of the elderly reported being co-resided with their children; while 10.8% lived alone. Among those who were not co-resident with a child (48.4%), their children were living far away (56.8%), followed by living in the same area (26.1%) and living nearby (17.0%). The average happiness score of Thai elderly was 6.96 ± 1.41. Being male, the young-old (ages 60-69), living in municipal area, literate and being married showed better psychological health (p<0.001). Elderly co-residing with a child had better psychological health compared with those who were not co-resident with a child, those who had no child and those who lived alone (p<0.001). Among those who were not co-residing with a child, having children live in the same area showed better psychological health than having children living nearby (p<0.001). **Conclusion:** Living arrangements differently affect elderly psychological health. Elderly co-residing with children had better psychological health. In order to promote elderly psychological health, interventions should be focused on the elderly who were not co-residing with a child.

O-E-1-3 Gender disparity in the aspiration for longevity: Analysis of a national survey

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"Aim"To examine the impact of gender disparity on the aspiration for longevity. **Methods**The latest data of National Survey on Social Security and Peoples Life implemented in 2017 is analyzed. Besides gender, other demographic characteristics (e.g., age, marriage status, educational background, having offspring, and household income), health status (self-perceived health status, physical limitation due to poor health, and mental health status as measured by the K6 screening scale), the experience of nursing care for the elderly, financial status (e.g., household savings, household debt, self-perceived financial status) and social networks (e.g., availability of social supports, frequency of communications) are examined by performing the multi-level mixed-effects regression analysis. Relative risks of no aspiration for longevity are estimated. **"Results"**The results of multilevel generalized linear models indicate the robust effects of gender disparity on the aspiration for longevity. Besides gender, independent factors significantly affecting the individual valuation of longevity include age, household income, having offspring, self-perceived health status, psychological distress, the experience of nursing care for the elderly, frequency of communications and availability of social supports, while differences of these affective factors are obvious between male and female. When stratifying gender and experience of nursing care, those females with experience of nursing care tend to less likely desire longevity compared to other counterparts. **"Conclusions"**With relevant representativeness and quality of data source, this analysis adds knowledge on gender disparity in the individual valuation of longevity. The findings are suggestive to reform the social security scheme in the current longevity society.

O-E-1-4 Women's Health in Remote Area of Indonesia: Can Ethnicity Greatly Affect Health?

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Aim: Indonesia, ethnically and culturally diverse, is facing wide disparities and inequities among regions, particularly their eastern part. One of the social issues that protractedly has not been resolved in Eastern Indonesia is regarding the women's and children's health, especially their huge maternal mortality rates, though we know that gender remains an important social aspect of health and wellbeing of generations. The east of Indonesia has races and religious beliefs that are different from the west nor middle part of Indonesia, yet often disregarded in the making of national policy programs. This study aims to clarify the socio-cultural factors of women's health in the remote area of West Papua, east of Indonesia, and to address the importance of race and ethnicity in social determinants of health.

Methods: A community-based cross-sectional study was conducted on women of reproductive age in Teluk Bintuni Regency, West Papua Province, with a cluster systematic-random sampling method using a probability proportionate-to-size technique.

Results: A high prevalence of anemia (32.9%) and poor long-term nutritional status (28.5%) were found among women of reproductive age, with the notable incidence in sexually transmitted diseases infection (18.5%) and intestinal worm infestation (11.6%). The Papuan ethnicity becomes a strong factor that affects anemia (OR 5.75 [3.52-9.41]) and women's nutritional status (OR 1.84 [1.16-2.92]), also in many other aspects of life.

Conclusions: Racial and ethnicity had a significant impact on health outcomes. The ethnicity and its socio-cultural factors need to be considered for future multifaceted approaches to reducing the disparities in multicultural area policymaking.

