

Performance (Child-OIDP) instrument and WHO Oral Health Assessment Proforma (1997) to assess the impacts of oral health on daily performance. Results: 55.4% of children had one or more oral impacts. The overall mean impact score was 3.15 ± 4.4 . The extent of impact varied from 1 to 4 performances with impacts. Impacts on eating were the most prevalent (56.8%), followed by cleaning teeth (45.1%). The impacts were mostly very little (35%) and moderate (34%). The more prevalent problems leading to impacts were tooth decay (62.7%), toothache (53%), sensitive tooth (40.7%), bleeding gums (40.7%) and exfoliating primary teeth (34.8%). Oral conditions that related to appearance also frequently affected children. Conclusions: The study reveals that impacts of oral health on daily performance were prevalent, but not severe. The impacts were mainly related to difficulty in eating and smiling. Toothache, oral ulcers and natural processes contributed largely to the incidence of oral impacts.

SP-044

The Measurement of Service Quality in Primary Dental Care

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In addition to the pressure form Nation Health Insurance, the healthcare sector in Taiwan is facing unparalleled challenges in an increasingly customer oriented environment. Service quality has become a watchword in dental services because of increasing competition and more demanding patients. This study aimed to explore the primary dental care quality and to identify the association between these variables. Totally 404 patients from 2 primary care clinics of a famous dental alliance were selected for interview. Dental service quality was based on the concept of SERVQUAL and modified by referring other dental service literatures. Self-administrated questionnaire including the expectations, perceptions of primary care quality, the gap of each item was calculated by the difference between perception and expectation. According to factor analysis. dental service quality been divided into 7 domains named as professional competence, reputation of dentist, location access, tangible environment and service delivering, attitude of staffs, cost, and time convenience; satisfaction and loyalty both showed single domain. As the results, professional competence was the largest gap among these 7 domains of service quality, but reputation of dentist, location access, tangible environment and service delivering were "positive" gap showed that the perception levels were higher than the expectation levels. The literature refers to "positive" gaps as super-pleasing the customers, or delivering superior performance. It may be worth considering moving some levels of

investment and effort away from the "positive" gap to those where really service quality gaps exist in order to bridge gaps.

SP-045

Prenatal and Perinatal Factors and the Risk of Oral Clefts Defects: A Population-Based Cross-Sectional Study in Taiwan

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The objective of the present study was to assess the effect of prenatal and perinatal factors on the risk of oral cleft defects (OCs). We conducted a population-based cross-sectional study of 1,138,605 Taiwanese births in 2001-2005 using information from the Birth Registry. Although the quality of prenatal care was good and free in Taiwan, small gestational age (<37 weeks), low birthweight (<2500 g), and low 5-minute Apgar score (<7) are more frequent among newborns with OCs than in Non-OCs. In multivariate logistic regression analysis adjusting for maternal age, parental education, annul average incomes, and conception of season, the risk of OCs were associated with anemia (adjusted odds ratio 2.17, 95% confidence interval: 1.39, 3.38), and diabetes (2.71. 95% CI: 1.29, 5.71), amniocentesis (2.20. 95% CI: 1.57, 3.09), induction of labor (3.64 95% CI: 2.33, 5.66), and stimulation of labor (1.44. 95% CI: 1.20, 1.74). This large population-based study suggests that prenatal and perinatal complications in the pregnant women may increase the risk of OCs.

SP-046

The Relationship between Oral Health Status and Nutrition Intake in the Elderly

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Introduction: As the health-related factors, the oral health status in the elderly has been reported to affect the nutrition intake. Besides, the health status of gingival, tooth missing and the denture status have also been reported to have a higher degree of the poor nutritional status. Attempts were made to analyze the status of nutrition intake depending on the oral health status in the elderly aged 65 years or older nutrition intake. Methods: The correlation between the subjective problems with the mastication and the status of prosthesis in the elderly was analyzed using a logistic regression analysis. The correlation between the the status of prosthesis and the amount of nutritional intake was analyzed using a regression analysis. Results: This showed that the elderly who had a complete or a partial denture implanted perceived a significantly higher degree of the masticatory problems



than the elderly who had a dental bridge implanted (1.67 CI 1.07, 2.59). Particularly regarding such nutrients as protein, calcium, fat and vitamin b1, the degree of nutritional intake was significantly lower (p<0.05). Discussion: By examining whether such causative factors affecting the oral health as the frequency of dental visits and toothbrushing are associated with a poor oral health status in the elderly.

Conclusions: Particularly regarding such nutrients as protein, calcium, fat and vitamin b1, the degree of nutritional intake was significantly lower.

SP-047

Equity in Healthcare: Share of Out of Pocket Costs in Sri Lanka

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Introduction: Disputing the claim, "free-state health services", half of total health expenditure is estimated to be out of pocket in Sri Lanka. Hence, as a measure of equity, paper focuses on out of pocket expenditure in first contact care services in Sri Lanka.

Methods: A cross sectional study was conducted in a rural district where medical pluralism is long established. A total of 2221 patients attending 8 state-Western facilities, 4 state-Ayurveda facilities, 10 private Western facilities and 8 private-Ayurveda/traditional practitioners were identified using a probability sampling method. "Out of pocket cost" was obtained using an interviewer administered questionnaire.

Results: Total median cost incurred was highest in the private Ayurveda facility (SLR.224, range 0-1500) followed by private western (SLR. 180, range 0-1000). Patients attending both state western (SLR.22, 0-410) and Ayurveda facilities (SLR.30, 0-1090) also had to incur costs in obtaining services. The median cost for transport of the patients (SLR. 36, range 0-800) and consultation fees (SLR.130, 20-430) were highest in private Ayurveda facility. For purchase of drugs, patients in private western facility incurred highest median cost (SLR.80, range 3-800). The incidental expenses were highest at private Ayurveda (SLR.40, 12-100). Conclusions: The findings indicate that a country where one third of the population living below the official poverty line had to incur a substantial amount on health. Seeking Ayurveda/ traditional care was more costly than western care, curtailing the ability to fallback on traditional system when necessary. This highlights the need for new buffer mechanisms to establish equity in health.

SP-048

Health Equity Vis-a-Vis Health Communication Strategies in a Decentralized Health System in India Ashis Kumar Das

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Objective: To assess the equity sensitiveness of health communication strategies of health programs vis-a-vis vulnerable groups in the state of Orissa, India Methods: We reviewed the planning (identification of the communication needs of vulnerable groups), delivery (content, language and medium) and review of communication strategies of government health programs (under National Rural Health Mission) during 2008-09. We selected various disease control programs (for tuberculosis, malaria, HIV, blindness and leprosy), and reproductive and child health program. Results: Since communication strategies are catalyst for different health programs, they cater to only those vulnerable groups or issues of vulnerable groups addressed by each health program. For example, since malaria control program has a specific focus on pregnant women and children, there are specific BCC strategies for such groups. Apart from AIDS control program, there is no information needs assessment for the vulnerable groups. Though there is use of local dialects, it is not addressing all the linguistic groups. Conclusion: Though communication strategies are equity sensitive, they are not comprehensive enough to address all the vulnerable groups. In order to ensure health equity, communication strategies should be easy to understand, acceptable and accessible to all the vulnerable groups. Also, there needs to be community participation in identifying the information needs and review of various

SP-049

Better Understanding Better Care: A Study on the Relationship of Health Literacy and Patient Right <u>Hsin-Hua Lee¹</u>, Fen-Ju Chen²

communication strategies vis-à-vis vulnerable groups.

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Under the current environment that emphasizes patient safety, the public certainly have to be with the ability of identifying and reading health information in order to spontaneously select the decisions or behaviors that benefit health. For that reason, the health literacy of the public has to be enhanced for the improvement of the knowledge of patient right. This study aimed to explore the relationship between the level of health literacy and understanding of patient right. The relationship between the level of health literacy and understanding of patient right of the interviewed public was explored through the structured questionnaire. A total of 402 effective questionnaires were returned. The study results showed that age, education level, and the medical background of the public or publics' family were the important factors that influenced the level of health literacy or understanding of patient right of the public. After the demographic variables of the public were controlled, the results suggested a trend that the higher health literacy level the better understanding of patient right. As patient safety and patient right are being promoted all over the world, to help the public perceive and understand patient