

# **ABSTRACT**

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**The Abstract Review Board for Siriraj Medical Conference**  
**“Healthy Society Beyond Frontiers”**  
**Faculty of Medicine Siriraj Hospital, Mahidol University**  
**24 – 28 June 2013**

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### RS-033

#### **Title: Health Problems, Causes and Solutions and Health-Promoting Behaviors on Adolescents**

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**Objectives:** This study is to determine problems, causes and solutions on perceived health status and health-promoting behaviors in adolescence.

**Materials and Methods:** Qualitative research methods were used to determine problems and causes on perceived health status and health promotion behaviors of adolescent living in Nawung, Phetchaburi Province. A represent number of 20 persons were selected to the in-depth interview and focus group. There were two sample groups: the adolescents and the people who associated with them. The data were the transcribed verbatim, while the content analysis was based on Burnard (1991) concepts.

**Results:** According to the research findings, the three issues of perceived adolescent health status were: 1) family problems, 2) sexual problems, and 3) drug addiction problems. Meanwhile, the four issues of adolescent health promotion behaviors were: 1) the adolescents' needs of health behavior promotion knowledge, 2) their needs of sexual health knowledge 3) community involvement in health care promotion 4) lack of leader in adolescent health promotion. Besides, according to the findings based on the people who have associated with the adolescents, there were two issues on the perceived health status and health promotion behavior 1) the appointment of a community leader in adolescent health, and 2) the development of the community network for adolescent health promotion.

**Conclusion:** Due to the participants' engagement in health promotion and perceived health status, it is urgent to introduce a leader in the adolescent health and the community network of adolescent health promotion. Also, the adolescents should be provided with the knowledge on sexual education.

**Keywords:** Adolescence, risk of behaviors, perceived health promotion, solutions

### RS-034

#### **Title: Hospital Infection Control and Antimicrobial Stewardship Programs: Gaps & Opportunities in Thai Hospitals**

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**Objectives:** To survey hospital infection control (IC) measures, antibiotic stewardship programs (ASPs), and barriers to implement the measures in tertiary care public (TH), district (DH), and private hospitals (PH).

**Material and Methods:** Cross-sectional study using validated questionnaire in all hospitals in 9 provinces representing 5 regions of Thailand during April-May 2012.

**Results:** In 102 hospitals included (13 TH, 69 DH, 18 PV), the IC measures were implemented more than the ASP (92-97% vs. 65-99%) with different focus in each hospital groups. Non-cooperation

from health personnel was the most common barriers to IC and ASP implementation in all groups (38-70%). Inclusion of IC as the criteria for hospital accreditation was the strongest drive for IC activities in most hospitals. TH had strengths in microbiology laboratories and antibiotic susceptibility test. They use antibiograms for selection of antimicrobials in hospital formulary and tended to implement antibiotic restrictive strategies; but limitations were staff shortage and disagreement to antibiotic guidelines. DH had strengths in persuasive measures developed from the Antibiotics Smart Use program, but lack of budget, faced frequent staff rotation and activity discontinuation. PH had strengths in microbiology laboratories, persuasive measures, and distribution of antibiotic and IC guidelines.

**Conclusion:** TH, DH and PH had different strengths and limitations. Careful selection of measures is thus needed with participation of all stakeholders. Priorities may include raising concern in health personnel, supporting their strengths, alerting the private hospitals, and reducing obstacles that limit the growth and sustainability of the IC and ASP.

**Keywords:** Antibiotics, antibiotic stewardship program, hospital, infection control

### RS-035

#### **Title: Impact of "Health Insurance Policy for People with Citizenship Problems": A Case Study of Kraburi Hospital, Ranong Province**

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**Objectives:** To evaluate the impact of "Health Insurance for People with Citizenship Problems (HIS-PCP)", policy endorsed by the resolution cabinet on 23<sup>rd</sup> March 2013 in lens of inpatients' utilization, disease severity, and financial implication in Kraburi hospital, Ranong province.

**Materials and Methods:** Standard individual hospital recodes between 1<sup>st</sup> October 2009 and 30<sup>th</sup> September 2012 were analysed by econometric models ("Difference in Difference" and "Two-part model", using STATA XI). Series of in-depth interviews with 6 key informants in Kraburi Contracting Unit for Primary Care (Kraburi-CUP) was performed to help explain the quantitative results.

**Results:** Kraburi-CUP had around 2,600 people registered under HIS-PCP (6% of the total population). After adjusting all confounders, HIS-PCP increased inpatient's utilization rate for 0.14 admissions/person/year with borderline statistical significance, compared to counterfactual premise if the policy had not been implemented. It also reduced admission days for 0.37 days and enabled patients with more severe diseases to be admitted as the adjusted relative weight (AdjRW) rose for 0.2 on average, despite not having a statistical significance. Out-of-pocket payment significantly decreased for 552 Baht per admission. The interviews revealed that, though campaign for promoting recognition of the right to health amongst this target population was done, the budget of this policy has not been mobilized for prevention and promotion activities adequately.

**Conclusion:** HIS-PCP has merits in increasing utilization and reducing out-of-pocket payment in the inpatients of Kraburi hospital. Parts of this budget should be set aside for health promotion programmes to reduce severity of diseases of patients upon admission.

**Keywords:** Impact evaluation, health insurance for people with citizenship problems, econometrics