

ECONOMIC ANALYSIS OF SCHOOL-BASED ORAL HEALTH PROGRAMME AT
PRIMARY SHOOOL IN THE NORTH OF VIET NAM

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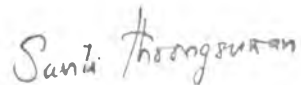
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This is a retrospective study based on secondary data collected during 1990-1994. The objectives of the study were to analyze the costs to provider in implementing the School-based Oral Health Programme at primary schools in the North of Vietnam with the aim to suggest the most cost-effective programme.

School-based Oral Health Programme has been applied in the North of Vietnam since 1985 but the coverage is still low. For evaluating this programme, dental status is measured by DMFT indices which indicate the number of decayed, missing and filled teeth per person. The effectiveness was measured by the difference of DMFT index between intervention and non-intervention group. In this study, an attempt has been made to analyze the costs to provider in implementing the Programme and its impacts on the dental caries.

The analysis consists of three stages:

1. The DMFT indices of the two groups of school children, one implementing the Programme and the other not implementing the Programme, were tested and it was found that DMFT indices of the two groups of school children were significantly different. The DMFT index of the intervention group was lower than that of the non-intervention group.

2. By analysing the costs of the programme in the urban, rural area, and two areas, it was shown that by using current price and constant price for calculation, the total cost and the average cost for running the programme are not too high and decreased year by year. The Programme is necessary to the children in both areas.

Under this Programme the children can avoid not only dental disease but also related diseases. Besides, they can save money from dental treatment and save the time loss from their schooling and their parent's work. From the cost analysis of the programme, cost-effectiveness was examined to evaluate the effectiveness of the programme. The cost-effectiveness ratio decreased every year suggesting that the programme was effective. But this ratio in the rural area was higher than the urban area. When the Programme was applied, the effectiveness of the programme in the rural area was lower than that in the urban area.

3. Sensitivity analysis was carried out to assess the impact of input activities on the outcome of the programme, given assumption regarding the change of each component of recurrent cost, which includes consumable cost, personal cost, retraining cost for the teachers, repair and maintenance cost and supervision cost. It was found that among these costs, consumable cost played the most important part. This cost had more effect on the cost-effectiveness ratio when compared with the others.

Sensitivity analysis of the change in effectiveness showed that the change of cost-effectiveness ratio was higher than the change in the effectiveness.

The study provides information about the costs of the programme and its impacts but how to expand this programme to a nationwide level, it requires a further study.

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