

characteristic, sexual and reproductive health behavior and knowledge on HIV/AIDs. These street base FSWs were interviewed by using non-probability sampling methods. The study disclosed that majority of the street based FSWs were less than 18 years of age, unmarried, literate and belonging to the Tamang ethnic group. The mean age for first vaginal intercourse was 15.19 year, S.D. 1.98 years. A larger portion of the study sample has been in sex work for more than 5 years. The study revealed that the decade long insurgency was the major factor what motivated these FSWs to choose sex work as a source of income. More than 70% of the FSWs were involved in substance abuse. The average daily earning for most FSWs was NRs. 100-199. Almost 81% have undergone abortion and astoundingly almost 50 % of such abortions were done using traditional methods. Almost half of the respondents did not perceive risk of getting HIV due to misconception about HIV transmission which was evident when only 15% disclosed they used condoms at all times. About 73% of the FSWs were victims of sexual violence with 46% choosing not to file any charges. More inclusive policies and prevention strategies are required to address the socio-political and legal context of sex work, which would create an environment for sustained reduction of HIV/AIDS risk among female sex workers.

FP-067

The Preliminary Study of the Core Value of Residents in Intensive Care Unit (ICU)- the Influence on Hospital Moderating Effects

Wen-Ting Chan, Duan-Rung Chen, Li-Chu Wu
National Taiwan University, Taiwan

Objective: ACGME indicates that to be a good doctor, one has to possess at least six core abilities. However, professionalism is the key of the quality of patient care. The purpose of this study is to investigate the cross level relationship between individual (resident) and group (hospital) level.

Methods: A total of 182 valid questionnaires from 28 hospitals were return. Furthermore, the hospital constructional data were obtained from the Department of Health and Taiwan Joint Commission on Hospital Accreditation. Hierarchical Linear Modeling method was employed to analyze the data.

Results: The results showed that residents' professionalism in the third year is significantly superior to the first year. Different kinds hospitals moderate the relationship among the readmission rate 72 hours after transfer out of ICU ($p=0.001$), the average days of hospitalization, and residents' professionalism.

Conclusions: The longer residents' working year, the better their professionalism. However, the professionalism of residents who work in a medical center is better than those who work in a non-medical center. And, residents who work in a hospital with lower the readmission rate 72 hours after transfer out of ICU tend to have better professionalism than those who work

in a hospital with higher the readmission rate 72 hours after transfer out of ICU. Moreover, residents who work in a hospital with lower average days of hospitalization, also have better professionalism than those who work in a hospital with higher average days of hospitalization.

FP-068

Disease Pattern, Level of Satisfaction and Perception on Ayurvedic Medical Care among Patients Seeking Treatment from Ayurveda Practitioners in a District of Sri Lanka

N.S. Nalika Gunawardena¹, Y.N.P. De Silva²

1. University of Colombo, Sri Lanka

2. Ministry of Health, Sri Lanka

Sri Lanka has a long history of providing ayurveda medical care. Information on disease profile of users or their satisfaction and perceptions on services are scarce. This research aimed to describe disease patterns of patients seeking treatment from ayurveda practitioners and to assess their satisfaction and perceptions on ayurvedic medical care. A cross-sectional study was conducted in randomly selected 16 ayurvedic medical clinics. Patients ($n=395$) seeking care were interviewed using a questionnaire. A majority were >60 years(50.9%), females(62.8%) in the 'low' income group(71.1%). Symptoms related to: musculoskeletal diseases(35.7%); respiratory diseases(13.2%); paralysis(7.3%); wheezing(6.8%), headache(6.3%) and fracture/dislocations(6%) were the main presentations. 76.4% respondents had visited a western medical practitioner before. Mean duration of the presenting complaint was 15.7 months(± 27.2). A majority of patients were satisfied with specified facilities available at clinics (>70%), waiting time (85.5%) and cost of treatment (76.2%). Main reason for choosing ayurveda medicine for the current illness were their perceptions that permanent cure cannot be achieved with western medicines(51.6%). Majority perceived that ayurvedic medicines were less costly (66.8%) and incurred less side effects (87.4%). Regarding perceptions on better treatment modality, a majority stated that ayurvedic medicine was better for fractures(83.1%), paralysis(78.6%) and asthma(64.6%) whereas western medicine was better for dog bite(77.2%), tuberculosis(76.8%), myocardial infarctions(74.8%) and high blood pressure(78.3%). Only few knew of availability of surgical(14.8%) and family planning methods(3.5%) in ayurveda. Study reveled important information on disease pattern and patient perceptions which may be used to improve both ayurvedic and western medical services in the country.