Plan Overview

A Data Management Plan created using DMPTool

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Title: QUITO-OH Survey - Quito Oral Health Epidemiological Survey

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Project abstract:

Due to the lack of populational representative data for oral health problems in Ecuador, the aim of this study will be to conduct an epidemiological survey in Quito – Ecuador with a representative sample of 12-year-old children from public schools of urban area. For this, 917 children from 32 public schools will be randomly selected and examined regarding oral health conditions in 2016. Six trained and calibrated examiners will conduct the clinical examinations in the school environment using plane buccal mirrors and WHO probes. The main oral health problems evaluated will be: dental caries (DMF-T index), dental traumas (O’Brien index), malocclusion (DAI index), presence of gingival bleeding (CPI), plaque and calculus. A questionnaire will be applied for school coordinators to evaluate data related to the school environment. Data on demographic, socioeconomic conditions and access to dental services will be collected with the children’s parents. The school performance will be recorded considering grades obtained in Spanish language and mathematics, and the number of missed school days. The participants will respond completed the Spanish version of the Child Perception Questionnaire (CPQ11-14) to collect data on Oral Health-Related Quality of Life. We will perform descriptive analysis for the prevalence and severity of all oral health problems evaluated.
Association with contextual variables related to the school environment and individual variables and several outcomes, such as dental caries, dental trauma, malocclusion, presence of gingival bleeding, plaque and calculus, access to dental services, impact on children’s oral health-related quality of life and school performance. Multilevel regression analysis will be conducted.

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Data Creation and Collection

What data will be collected or created?

We will collect data about participants of the epidemiological survey conducted in public schools of urban area of Quito, Ecuador. Data are from 12 years old children. Individual data is related to demographic socioeconomic information from those participants' family: children sex, family income, mother's and father's schooling, household overcrowding. Moreover, data will be gathered through a clinical examination regarding some oral health problems: dental caries, dental trauma, malocclusion, fluorosis, presence of gingival bleeding, dental plaque and calculus. Data related to access to dental service, oral health-related quality of life and school performance will be also collected. Moreover, we will collected data related to th school environment, health practices and negative episodes from the schools that the participants were enrolled.

How data will be collected or created

Demographic, socioeconomic and data related to access to dental services: from children's legal guardians

Data related to oral health: 6 examiners trained and calibrated

Data related to oral health related quality of life: the participants will respond a questionnaire (CPQ11-14)

Data related to school performance and school environment: from school coordinators through questionnaire.