Knowledge, Attitude, and Practice of Parents toward Child Oral Health

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ABSTRACT

Background and Aim: Parents have an important role in making decisions about their child’s oral health. The purpose of this study was to determine the parental awareness of their children’s oral health maintenance and their attitude toward dental treatment.

Materials and Methods: A total of 100 parents from different socioeconomic groups participated in the study. Data were collected using a self-administered questionnaire addressing various aspects of knowledge and attitude of parents toward oral health and treatment modalities.

Results: Awareness among parents was significantly lower in low socioeconomic group. Their attitude toward dental treatment differed significantly from high socioeconomic group who preferred going to the pediatric dentist.

Conclusion: The level of awareness among parents is relatively low, and there is need for the implementation of oral health awareness programs for parents to change their attitude toward dental treatment of their children.

Keywords: Oral health, Parents, Treatment modalities

INTRODUCTION

General health cannot be attained or maintained without oral health. The mouth is regarded as the mirror of the body and the gateway to good health. Oral health education today has been conducted in schools and other settings; however, these efforts will not succeed until people are not aware of the importance of oral health and positive attitude toward treatment modalities. As the oral health of children depends on awareness of their parents, evaluation of need for implementation of oral health awareness programs is important.

MATERIALS AND METHODS

A total of 100 parents participated in the study who visited to the Department of Pediatric and Preventive Dentistry, Awadh, Dental College, Jamshedpur, Jharkhand, India. Data were collected using a self-administered questionnaire addressing various aspects of knowledge and attitude of parents toward oral health and treatment modalities and divided into two groups according to their socioeconomic status where Group I was parents having their annual income below 30,000 and Group II: Parents having their annual income above 30,000. Incompletely filled questionnaire forms were excluded from the study. The questionnaire included questions regarding parental awareness and attitude toward dental treatment. All aspects of oral health awareness and dental treatment attitudes were addressed. Data were entered and analyzed.

RESULTS

Most parents had good knowledge of about role of fluoride and tooth brushing in caries development and that sugar-containing food products affect oral health. 85% of parents who believed that caries are caused by sugar-containing food products. 89% of parents responded as yes when they were asked that is cleaning baby’s teeth important for oral health. Furthermore, the parent’s attitude toward child oral health showed 27% respondents agreed that tooth decay is caused by bacteria transmitted by sharing utensils, while 75% thought that night time and bottle feeding/breastfeeding did not cause tooth decay. About 34% agreed that swallowing of toothpaste can be harmful to a child’s health. The responses to oral health practices showed that 66% of respondents agreed that they clean their child’s teeth once in a day. 54% agreed that very less often they examine child’s teeth. Is brushing of babies teeth important for oral health? Is shown in Figure 1.

DISCUSSION

The rationale of oral health awareness program is to improve and motivate the parents regarding their
dental health and treatment needs. The parents’ support and involvement in child’s oral health are important in influencing the dental health of the child. Majority of the surveys reported that parents belonging to minority and economically disadvantaged groups were overrepresented in the poor perception of their children’s oral health. This study highlights increased demand to initiate dental awareness programs aiming at the people belonging to low socioeconomic groups. Children from low-income and disadvantaged families have a disproportionately higher prevalence of untreated dental caries and lower dental care utilization than higher income group children. A better understanding of how well caregivers perceive their children’s oral health status may improve utilization of dental care services. A better understanding of these beliefs may help providers explain the goals, risks, and benefits of treatment to the parents as well as to their families, which play an important role in the decision-making. The American Academy of Pediatric Dentistry recommends cleaning children’s teeth as soon as they erupt and use of dental floss when adjacent teeth are touching. Since many parents in this study from the low socioeconomic group did not have the perception of cleaning their children’s teeth using oral hygiene aids, there is need for the awareness programs, especially in low socioeconomic groups. It is generally assumed that a well-educated person is generally more aware of overall health, but the lack of awareness regarding the importance of deciduous teeth was evident. Indians have been reported to have low level of oral health awareness and practice as compared to Western people. Western children have also been reported to be more aware of regular visits to a dentist because it is initiated either by their parents or dentists. Such an effort on the part of the parents is predominantly missing in Indian children. Similar findings were observed in our study that high socioeconomic status parents were also unaware of importance of timely treatment of primary teeth. Attainment of good oral health is based on awareness of good dietary habits and oral hygiene practices. The need for making parents aware of the brushing methods and importance of preventive measures for the children through school dental programs have been reported in the literature. When the awareness was assessed in all 94% of parents attending school dental program, it was observed that majority of the parents did not know the recommended oral hygiene maintenance procedures for children. It was also observed that all parents needed education on importance of regular dental visits, dietary habits, and oral hygiene procedures in young children. This finding is in accordance with our study that stresses on importance of influencing parents to achieve oral health of children. Understanding factors that affect parent’s perceptions of their children’s oral health can move dentistry closer to developing strategies to help overcome the barriers parents encounter in accessing oral health care for their children. In turn, this understanding may enable parents to be partners with health-care providers in ensuring the well-being of their children.

CONCLUSION

This study sheds light on a new dimension of significant role of pedodontic triangle in organizing dental health awareness programs for parents. There is need to create more awareness about the knowledge and importance of first dental visit among the society. It is worthwhile to attempt regular oral health promotion education programs, with stress on attitude toward treatment modalities for their children.

REFERENCES

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