

AWARENESS AND HEALTH SEEKING BEHAVIOUR OF PARENTS REGARDING THEIR CHILDREN'S ORAL HEALTH AND PROFESSIONAL DENTAL CARE IN ISLAMABAD, PAKISTAN

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ABSTRACT

Long term optimum oral health of children widely depends upon their parent's knowledge and attitude towards oral hygiene. Good treatment seeking behavior for their children might prevent them from a great deal of suffering and pain throughout their lives. The objective of this descriptive cross-sectional survey was to assess and determine the knowledge and health seeking behavior of parents from urban areas of Islamabad capital territory towards oral health and professional dental care for their children and identify the barriers to seeking dental healthcare. A sample of 250 parents, both males and females was approached using convenient sampling. A questionnaire having both open and closed ended questions regarding knowledge and behavior of parents towards their children's oral health including dental healthseeking was used. From the results it was evident that most of the parents were not aware of cause of dental caries and methods of preventive dental care that in turn made their dental health seeking behavior for children poor.

Key Words: dental caries, prevention, barriers, fluoride.

INTRODUCTION

Dental caries being the most common oral disease affecting children if left untreated can lead to complications such as pain, dental infection, eating and sleeping disturbances, malnutrition, altered growth and development^{1,2} and possibility of early teeth loss.³ According to American Dental Association and American Academy of Pediatrics, every child should be taken to a dentist before one year of age or on eruption of 1st deciduous tooth. This "well baby visit" helps parents know how to care for the children's teeth and help them remain caries-free.⁴ In this regard use of home remedies is common and it is believed that professional help is required only for older children and not for younger children which is why they don't believe in

early dental checkups.⁵ Many believe that milk teeth if get diseased do not require treatment as permanent teeth will eventually replace them.⁶

Parents and family members are the first source for knowledge about child bearing and their health habits, which has long-term effect in determining oral health status of the child.⁷ Results of a study by Lalic M et al show statistically significant correlation between oral hygiene of parents and their habit to help the child in brushing and maintaining his/her oral health status.⁸ It is important to understand perceptions of parents regarding early childhood oral health to develop effective preventive measures since their health beliefs, attitude and practices have a direct effect on their children's dental health.⁹

Regarding poor dental healthcare seeking, cost of treatment is one of the factors as most of the insurance companies do not include the dental treatment, hence people seek dental help only in emergencies and don't get their teeth restored, instead get them extracted to save money. Another cause is the fear, which is very common in children as well as in adults. Fear of dental treatment includes fear of pain, fingers or needles in the mouth, sedation, lying on dental unit, sound of

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dental instruments, and receiving bad news etc.⁴ All these factors modify parent's behavior towards their children's professional dental healthcare seeking.

By identifying a disease in its early stage, preventive measures can be taken not only leading to decreased cost of overall treatment but it also greatly decreases the amount of fear a child has. This practice should be started as early as the first tooth appears in child's mouth. The aim of the study was to analyze the experience, knowledge and health seeking behavior of parents regarding oral health and professional dental care for their children and to explore certain barriers to seeking professional dental care.

METHODOLOGY

It was a descriptive cross-sectional survey, carried out in urban areas of Islamabad capital territory between August and October 2014. A total of 250 parents were given a self administered pre-coded questionnaire at their houses utilizing convenient sampling. An informed verbal and written consent was taken from each participant. The inclusion criteria included parents living within Islamabad capital territory for at least 5 years having at least one child more than 1 year of age. The data collected were analyzed by using SPSS version 19. The variables that were scored to determine the knowledge regarding cause of dental caries and its prevention were collected and total score of 7 was given to assess the knowledge. Respondents with score 6 and above were regarded as having good knowledge, from score 3 to 5 as moderate and below 3 were having poor knowledge.

RESULTS & ANALYSIS

In an attempt to assess dental healthcare seeking behavior of parents for their children, data was collected from 250 parents living in Islamabad capital territory with mean age 41 years (± 7.6 years), mean education level was 14 years, equivalent to Graduation (SD ± 1.2)

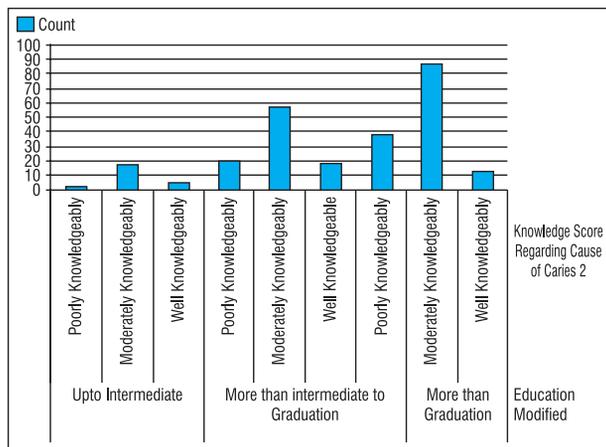


Fig 1: Relation of education of the respondents to knowledge score of cause of caries

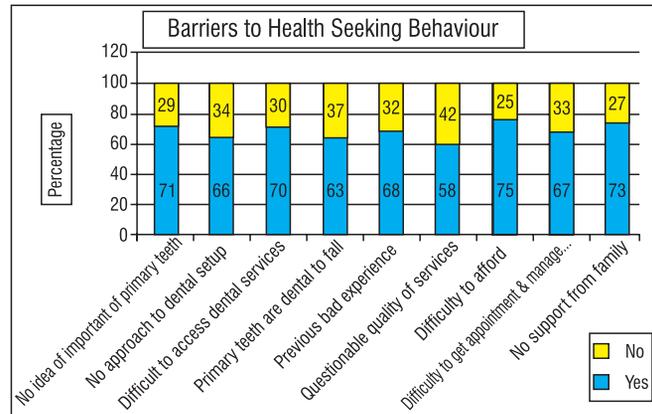


Fig 2: Barriers faced by respondents regarding dental healthcare seeking

and mean income was 51168 PKR (SD ± 21717) equivalent to 505 USD. Mean knowledge score about cause of dental caries was 3.77 (SD ±1.4), where 13.6% of the respondents were well knowledgeable, 63% moderate and 23.2% respondents had poor score.

Mean knowledge score about caries prevention was 3.54 (± 1.3), 8.8% of the respondents were in well knowledgeable category while 68% in moderate and 23.2% respondents had poor knowledge. Regarding knowledge of fluorides role, 23.6% of the respondents believed it whitens the teeth, 32% thought it prevents dental caries, 26.8% believed it has no role in dental health. Regarding importance of oral health, 22% respondents believed that it prevents dental problems, 31.2% said it develops good dental habits, 28.8% said it affects appearance, aesthetics and self-esteem. According to 76.4% of the respondents, regular visits to the dentist is important.

Regarding health seeking behavior, none of the respondents took their child for first dental checkup at 6 months of age, 16.8% took between 6 months to 1 year, 22.8% between 1 year to 2 years, 35.2% at more than 2 years to 6 years and 25.3% after 6 years. Regarding reason for child's last dental visit 39.6% respondents went to treat cavities whereas 53.6% for pain, 4% for retained primary teeth, and 2.8 for malaligned teeth.

Regarding influence of past dental experience of their own, according to 16.8% of the respondents, there is positive influence, 18.4% said it as negative. Regarding barriers to access and seek dental services, 66.4% respondents identified lack of access to any dental setup, 70% identified difficulty to access dental services whereas 63.2% identified that primary teeth are bound to fall so they need not to be cured. 75.2% thought dental services are difficult to afford. 65% respondents made sure their child brushes teeth. For pain remedy, only 9.2% went to a dentist whereas 44.8% of the respondents identified home remedies as first thing they do, 38% used self-medication.

DISCUSSION

Children's use of oral health services is influenced by certain parental factors. Studies around the world have shown that children's oral health, dental habits and patterns are directly correlated to those of their parents. The frequency of tooth brushing in parents is significantly in relation with frequency of tooth brushing in their children.¹⁰ The parent's support and involvement in maintaining child's oral hygiene is important in influencing the dental health of the child.¹¹

This study is an effort to find out the knowledge, attitude and practice of parents regarding oral health and professional dental care for their children. Emphasis was put on the assessment of awareness of parents to take their child to dental care before 1 year of age and barriers to get professional dental help. The ignorance of seeking dental treatment at initial stage of disease leads the tooth to an advanced stage of dental decay which is commonly beyond repair and consequently these delays lead to extraction of the tooth.¹²

Only 3.6% of respondents had a score of 7 out of the total 7 regarding awareness of cause of dental caries. This knowledge holds a lot of importance in prevention of oral diseases, as caries being the most common disease and it usually leads to many other complicated tooth related diseases. It has to be prevented and for that, knowledge regarding the causal factors is very important. Mostly parents are aware of the sugary foods that cause caries but they are not aware of the rampant caries caused by the feeding bottles, and need of rinsing after every intake of food. Knowledge of caries prevention is also very deficient, which makes it very difficult to decrease the disease burden.

Results of a study in Jordan show that 80% of the parents were aware of the harmful effect of sugar and 79% thought that poor oral hygiene may result in dental decay. 36% of the parents emphasized regular dental visits for the prevention of dental caries in children. In last visit to the dentist, 49% of the children went for tooth extraction and only 8% went for preventive services and there were variations observed in the level of education of parents.¹³

In current study, 65% of the parents supervised their children during brushing teeth. A study by Sami et al in Karachi, Pakistan shows comparable results where 83.5 percent of the parents supervised brushing, and two different studies had 82.75% and 86.5% in Bengaluru, India.^{14,15,16} A very small percentage of parents supervise their children while brushing in north Jordan i.e. 26.2%.¹⁷ Very less number of parents (32%) knew that fluoride has role in caries prevention in contrast to 85.5% with Sami et al.¹⁴

Regarding health seeking behavior of the parents and importance of dental visits 76% said regular dental visits are important comparable to sami

et al 95.5%.¹⁴ Whereas in a study in Malaysia, only 12.5% of the parents predicted the 1st year of life as recommended time for child's first dental visit.⁹ 25% parents said they took their child for first dental checkup after 6 years of age, but none took their child for dental checkup at 6 months which clearly indicated that parents were not aware of healthy baby dental visits. Whereas the reason for seeking help from the dentist was pain for 53% of respondents. Difficulty to afford dental treatment was the commonest barrier identified by parents followed by lack of support from family. Next most common was lack of knowledge regarding importance of primary teeth. When compared it with another study done on assessment of parental oral health awareness and behaviors by Anne Wilson and Angela G. Brega, the results showed that parent's socio demographic status was not significantly associated with behavior scores. Higher literacy, female gender and higher income had a significant and positive association with mean knowledge scores. Behavior and knowledge scores had significant correlation. Study subjects identified the best answer for 75% of knowledge items and involved in 58% of optimal oral health behaviors.¹⁸ Parents in current study had good mean income and were living in the capital for the last 5 years, which shows that they could easily afford the preventive dental checkup and cost of treatment.

CONCLUSION AND RECOMMENDATIONS

Early dental checkups help prevent diseases like dental caries. Establishment of good oral habits and hygiene in early years of life is very important for life-long good oral health of a child. Oral health must be a critical component in the design of community health education programmes. All district schools should be encouraged to require a dental assessment record of children entering kindergarten. There should be a separate section of preventive dental checkup in children's vaccination cards. Parents generally are unaware of causes of dental caries and methods of its prevention, hence they need to be educated about the healthy baby dental visits that will help in early diagnosis and save the cost of extensive dental treatment and reduce fear of their children.

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- 3 Zubair Nasir:** Manuscript writing, formulation of results.