ORIGINAL RESEARCH

Knowledge, Awareness and associated practices of pre-school children's mothers towards their children's oral health in Patiala, Punjab

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ABSTRACT

Introduction: Children under the age of 5 years generally spend most of their time with their parents and guardians, especially mothers, even when they attend pre-schools or nurseries. Mothers are the primary and important source of care for the children. **Aim:** To assess the mothers' awareness and knowledge towards their children's oral health. Methodology: A cross-sectional questionnaire survey was conducted among 150 mothers of preschool children. A self - administered questionnaire, written both in English and local language (Punjabi) was distributed to the mothers. **Results:** Majority (63.6%) had poor knowledge, 43.8% exhibited poor attitude and 48.2% were following poor practices towards children's oral health. Knowledge regarding the role of fluorides, causes and prevention of dental caries, malocclusion were found to be inadequate. **Conclusion:** This study showed that mothers had poor knowledge and attitude towards their children's oral heath due to which majority were following poor oral health practices.

KEYWORDS: Oral Health, Knowledge, Oral Health Pracitces

INTRODUCTION

A good oral health contributes positively to the overall physical, mental and social well-being of an individual by allowing them to enjoy their lives without experiencing pain, discomfort or embarrassment. Preschool children are an innocent and compassionate segment of the society and their oral health care is of utmost importance as it determines the oral health status of the future generations. The oral health care provided by the parents to the pre-school children is of crucial importance as this determines not only the current oral health status of the child but also lays the backbone of attitudes and practices that a child adopts in this age which he carries over into his or her adulthood.

Children under the age of 5 years are dependent on the knowledge and behavior of parents and elder siblings as they spend most of their time with them. During these early years childhood routines and habits are acquired which include dietary habits and healthy behaviors established as norms in the home. It has been found that the more positive is the parents' attitude towards dental health; the better will be the dental health of their children[4]. Young children's oral health maintenance and outcomes are influenced by their parent's knowledge and beliefs, which affect oral hygiene and healthy eating habits. Without basic knowledge of caries risk factors, the importance of the deciduous teeth and oral maintenance, it is difficult to employ effective disease preventive strategies. Parent's knowledge and positive attitude toward good dental care are very important in the preventive cycle.

Mothers have an important role in establishing healthy oral habits in their children early in life. Mothers are the primary and important source of care for the children. The relationship between the oral health of mothers and that of their children has been highlighted by many researchers. Considering this crucial and sensitive role of mothers, this study was designed so as to evaluate the knowledge, attitude and practices of mothers towards the oral health of their children and the association of their knowledge, attitude, and practices with educational level.

MATERIALS AND METHODS

A cross-sectional questionnaire study was conducted among 150 mothers of preschool children. A questionnaire was designed to assess the knowledge and the attitude of mothers regarding oral health of their preschool children. A structured questionnaire proforma was designed. It was designed in English and Punjabi. The first part of the questionnaire included demographic information regarding mother's age and level of education. There were 30 questions related to knowledge, attitude and practices towards their children's oral health. Out of which ten questions were related to knowledge, ten were related to attitude and ten were related to practice.

The study was carried out in four randomly selected preschools in Patiala district. A total of 220 questionnaires were distributed among the schools. Out of these 150 questionnaires were returned by the schools

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completely filled by the mothers. The participants were scored on the basis of the number of correct responses given by them. The scores obtained were categorized as good: ≥7, fair: 4–6 and poor: <4 for all the three parts of knowledge, attitude, and practices.

Data were entered in Microsoft Excel 2010 software and analyzed. Descriptive statistics were carried out. One-way ANOVA was used to carry out the analysis of the different questions.

RESULTS

The sample comprised 150 mothers, with their mean age being 28.7±3.3 years. Out of 150 mothers, 44 had education up to primary, 55 mothers up to senior secondary and 51 mothers were qualified graduation and above (Table 1). 63.3% of subjects had poor oral health knowledge (Table 2). Statistical significant differences in Knowledge, Attitude and Practitces were seen among the mothers of students (Table 3).

Total	Primary	Senior secondary	Graduation & above
150	44	55	51

Table 1: Distribution of mothers according to education

	Good	Fair	Poor
Knowledge	15.4	21.3	63.3
Attitude	19.3	36.7	44
Practices	32	19.3	48.7

Table 2: Overall knowledge, attitude, and practices percentage

	Primary	Senior secondary	Graduation & above	P value
Knowledge	2.47±1.25	3.16±1.47	3.88±1.98	0.003
Attitude	2.87±0.99	3.45±1.52	4.71±2.71	0.000
Practices	2.19±1.88	4.34±1.93	4.22±2.23	0.001

Table 3: Mean knowledge, attitude, and practice scores according to education level

DISCUSSION

The present study was conducted in four randomly selected schools of Patiala city, to assess the knowledge and practices of mothers regarding oral hygiene of their preschool children.

Overall knowledge, attitude, and practice: Based on the scoring criterion used, it was found that 63.3% mothers exhibited poor knowledge, 44% showed poor attitude and 48.7% showed poor practices. Whereas around 21.3% exhibited fair knowledge, 36.7% fair attitude, and only 19.3% showed fair practices. Very few participants in this study were in a good category. Only 15.4%, 19.3% and 32% mothers were in the good category for knowledge, attitude and practices, respectively.

Knowledge regarding the role of fluoride in preventing dental caries was poor in this study. These results were similar to the studies done by Moulana et al[3] and Suresh et al[4]. Majority of the mothers stated tooth decay as the most common dental disease among children, which was in accordance with the other studies.

Association with Educational qualification: When the variation of knowledge, attitude, and practice was observed across the different levels of education, statistically significant difference was found. Mothers with higher educational qualification (graduates and postgraduates) scored significantly higher mean knowledge (3.88±1.98), attitude (4.71±2.71) and practice (4.22±2.23) scores compared with lower educational qualification (P = 0.000) (Table 3). Thus, as the educational qualification increased, the mean knowledge, attitude and practice scores also increased significantly.

In this study knowledge, attitude and practice scores and level of education showed a significant association. It was observed that mothers with higher education had better knowledge about oral hygiene practices and importance of deciduous teeth. This was in accordance to studies done by Suresh et al[4] and Williams et al[5] who also showed that parents with lower education had the poor dental knowledge and attitude level. This may be due to the reason that parents with higher education level are more likely to have positive health attitudes and render greater attention to the health of their children. Williams et al (2005) suggested that the parents with an improved level of education may be able to assess the appropriate source of information and understand that information more completely.

Overall the oral health knowledge, attitude, and practices scores of mothers were in poor category. As different sections of society have different resources, appropriate oral health programs with strategies designed for specific requirements, targeting different groups should be planned. Improving the level of knowledge of mothers, will lead to improved oral health behavior of their children. Suresh et al (2010) stated that parents, especially mothers, need to be helped to realize that they are role models for their children and to be encouraged to improve the child's dental health habits.

CONCLUSION

The study concludes with the finding that there is a lack of knowledge in the majority of mothers of Patiala city, India regarding the importance of primary teeth. Hence, there is a need to carry out more of awareness programs in the city. Mothers need to be educated and trained about the importance of first dental visit as well as the value of a pediatric dentist for their children. When it comes to the health of child's primary teeth, there is no better time than now to start practicing excellent oral hygiene. Pediatric dental care ensures child's primary teeth stay healthy and free of decay and other dental diseases. Educating mothers on child dental care will promote lifelong good oral hygiene habits and will bring down the prevalence of oral diseases considerably.

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