

A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE AND PRACTICES OF MOTHERS TO PREVENT DENTAL PROBLEMS AMONG THE CHILDREN IN LUCKNOW

Ms. D.S. Ajetha * | Dr. Ian Clement**

** Ph. D. Scholar, Himalayan University, Itanagar, Arunachal Pradesh, India.*

*** Professor cum Vice Principal, Bhai Gurudas College, Sangrur, Punjab, India.*

ABSTRACT

Mothers hold a very significant place in child's life. Mothers should have adequate knowledge and follow hygienic practices that are necessary to make their children free from disease and infection. The present study was undertaken to assess the effectiveness of structured teaching Programme on knowledge and practices to prevent dental problems among the mothers in Lucknow. The objective of this study was to determine the existing knowledge and practices of mothers regarding Prevention of dental problems. Quasi experimental one group pretest-posttest design was used. 20 mothers were selected by convenient sampling techniques. The knowledge regarding dental problems was assessed by using structured knowledge questionnaire. The result of the study revealed that 60% mothers had inadequate knowledge, 25% had moderate knowledge and 15% had adequate knowledge.

Key Words: Knowledge, practice, dental problems, structured teaching programme.

About Authors:



Author, Ms. Ajetha is a research scholar in Himalayan University, Itanagar, Arunachal Pradesh, India.



Author, Dr. Clement, is a renowned professor. He is working as the Vice Principa of Bhai Gurudas College, Sangrur, Punjab, India.

INTRODUCTION

The children are the most important segment of our population and intend to receive attention from family, school, society and Government. The children has multitude of problems among them one of the most existing problem is related to dental health. Most common dental problems occur among children are dental plaque, cavities, tartar, malocclusion, pyorrhea and gingivitis and gum disease arise from poor oral hygiene.

Dental caries is a destructive process causing decalcification of enamel and dentin with resulting cavitation of the tooth. Early childhood caries (ECC) is a very common bacterial infection. Dental plaque is a soft thin layer of food debris and dead epithelial cells that are deposited on the teeth and provides a medium for growth of bacteria.

Calculus or tartar is formed when plaque remains on the teeth and it becomes hardened (calcified). Pyorrhea refers to pus formation in the socket of teeth. While dental caries has been regarded as the major dental disease throughout the world affecting the child, malocclusion is only next. Malocclusion (deviation from normal) is condition in which upper jaw of children matures rapidly in early childhood along with skull growth, the lower jaw forms more slowly, which forces teeth to make a prolonged series of changes until they reach their final adult alignment.

Bleeding gums can occur in vitamin –C deficiency, use of hard and stiff brush for brushing the teeth. Gingivitis is defined as inflammation of gums. Common causes of dental problems among children are certain bacteria, frequent ingestion of raw sugar, candies, chocolate, and less than optimal exposure to fluorides to prevent tooth decay or excessive use of fluoride, cultural, social and economic influences on oral health such as dietary practices, home care and beliefs about primary teeth and poor dental hygiene.

Common sign and symptoms of dental problems are white spot or lines appears on teeth, pain in gums, gum swelling and sensitivity, foul smelling from mouth, discoloration of teeth, low-grade fever, refusing food, rubbing of ears and cheeks, pyorrhea, difficulty in eating, Irritability or fussiness, sleep problems and urge to bite on hard objects.

The goal of WHO “Health for all by the year 2025” includes oral health also. WHO expert committee on dental health education emphasized on oral hygiene practices and has placed fundamental importance to achieve goals of oral hygiene.

Family members, especially mothers, are the primary source of information for children and she is directly responsible for the dental health of their offspring and can play an important role in preventing oral diseases in children. They clean teeth of their children, teach them proper hygiene and dietary habits and organize professional dental care. Mother’s knowledge and positive attitude toward good dental care are very important in the preventive cycle.

MATERIALS AND METHOD

A quasi experimental study was conducted to assess the **effectiveness of structured teaching programme on knowledge and practices of mothers to prevent dental problems among the children**, 20 mothers were selected by convenient sampling techniques. Structured knowledge questionnaire 20 items and 10 item of practice checklist were used to collect data from the participants. Tools were validated by subject experts and reliability of tool was found 0.80 and calculated by split half method.

Written permission was obtained from the ethical committee and written consent was obtained from the participants, after giving assurance to the study participants regarding the confidentiality of the collected data. Structured questionnaires were administered and practice was assessed by using checklist, same day structured teaching programme was administered. After 7 days, same questionnaires were administered and practice was reassessed. The collected data was analyzed by using descriptive and inferential statistics.

RESULT AND DISCUSSION

Out of 20 samples distributed according to age group, 60% mothers were in the age group of 20-30 years, 25 % were 31-40 years, 10% were 41-50 years & 5% were in the age group of 51-60 years. According to gender, According to professional qualification, 75% mothers were studied XII standard and 25% were graduates.

Table-1.: Frequency & Percentage distribution of level of knowledge regarding prevention of dental problems among mothers**N=20**

SL. NO	ASPECTS	RESPONSE KNOWLEDGE LEVEL					
		INADEQUATE		MODERATE		ADEQUATE	
		f	%	f	%	f	%
1.	Pre-test score	12	60	5	25	3	15
2.	Post-test score	0	0	9	45	11	55

The data in table shows pre and posttest knowledge scores regarding prevention of dental problems whereas 15% of mothers have adequate knowledge, 25% of mothers have moderate knowledge and 60% of mothers having inadequate knowledge before teaching programme. The post-test score after teaching programme shows 55% of mothers have gained adequate knowledge, 45% of mothers gained moderate knowledge regarding prevention of dental problems.

Table No. 2.: Frequency & Percentage distribution of practice of mothers regarding prevention of dental problems among their children**N=20**

SL. NO	ASPECTS	RESPONSE PRACTICE LEVEL					
		INADEQUATE		MODERATE		ADEQUATE	
		F	%	f	%	f	%
1.	Pre-test score	17	85	3	15	0	0
2.	Post-test score	0	0	6	30	14	70

The data in table shows practices of mothers regarding prevention of dental problems among their children whereas none of mothers have adequate practices regarding prevention of dental problems & 15% of mothers have moderate practices regarding prevention of dental problems & 85% have inadequate practices regarding prevention of dental problems, as per pretest score. The post-test score after STP shows that none of the mothers have inadequate practice regarding prevention of dental problems & 30% of mothers have moderate practices regarding prevention of dental problems & 70% of mothers having adequate practices regarding prevention of dental problems.

A chi square test was used to find out the association between the level of knowledge and the age at 5% level of significant with 3 degree of freedom. The calculated value of the chi square (2.611) is more than the table value of chi square (2.366). Hence there is a significant association between knowledge level and age of the respondents. Thus H_1 was found to be true.

A chi square test was used to find out the association between the levels of knowledge significant with 1 degree of freedom. The calculated value of the chi square (3.26) is more than the table value of chi square (0.455) Hence there is a significant association between knowledge level and age of the respondents. Thus H_1 was found to be true.

There was no significant association between knowledge and other selected demographic variable like religion, previous knowledge and source of information as it was expected in the hypotheses of study the investigator found there was a significant improvement in the knowledge regarding prevention of dental problems, who received structured teaching programme.

CONCLUSION

Greater collaborative and educational efforts should be made to improve the knowledge, practices and attitude of mothers. The mother's knowledge and practices in preventing dental problems were inadequate. The structured teaching programme significantly increased the knowledge and level of practices in mothers in preventing dental problems.

IMPLICATIONS OF THE STUDY

The findings of the study have markable implications in nursing services, nursing administration, nursing education and nursing research. The findings of the study can play an important role in educating the mothers as there is gross inadequacy in knowledge and practices regarding dental problems. The findings of the study by all the way will enable to make significant contributions to improve the efficiency of the mothers. Nurses can make use of teaching programme in several ways to prevent further incidences of dental problem.

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ETHICAL CLEARENCE-

The proposed study was conducted after the approval of research committee of the college. Permission The consent of each mother was obtained before data collection. Assurance was given to the study participants regarding the confidentiality of the data collected.

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