Oral Hygiene: Association between knowledge and Practice among school going children in Ajman, United Arab Emirates

Sara Dakhili¹, Noora Obaid Alsuwaidi¹, Sara Saeed¹, Sara Bassam Murad¹, Dana Mohammad¹, Jayakumary Muttappallymyalil², Pratibha Prasad³, Aji Gopakumar⁴, Faheem Ahmed Khan⁵

¹Final year DMD students, College of Dentistry, ²Faculty, Department of Community Medicine, ³Faculty College of Dentistry, ⁴Statistical Support Facility, ⁵Former faculty, Department of Community Medicine, Gulf Medical University, Ajman, United Arab Emirates

Abstract

Introduction: Oral health is an integral component in the general health of an individual and has become a major public health issue with a substantial social impact.

Objectives: The association between knowledge and practice regarding oral hygiene among school children is assessed in this research.

Materials and Methods: The present study was conducted in a single school, United Arab Emirates. A cross-sectional research design was adopted to achieve the objectives. Consent from the parents’ of the participating children was obtained before the administration of the questionnaire. The questionnaire included questions relating to socio-demographic characteristics, oral hygiene knowledge and practice. Questionnaires were distributed among all the children studying from grade six to nine. Chi square test was performed to find the association between knowledge regarding oral hygiene measures and practice.

Results: A total of 175 school children participated. All participants were Arab nationals. All children had knowledge on importance of brushing and cent percent practice brushing their teeth. Among the participants who had knowledge on frequency of brushing, 91.9% practiced the correct frequency of brushing. The association observed was statistically significant (p≤0.001). Association between the knowledge on type of brush to be used and practice were statistically significant (p≤0.001). A statistically significant association was observed between knowledge on frequency of changing brush and practice (p≤0.001). The association observed between correct knowledge and practice regarding interdental cleaning was statistically significant (p≤0.001). Association between the knowledge about importance to clean the tongue and practice were statistically significant (p≤0.001). A statistically significant association was observed between knowledge on frequency of cleaning the tongue and practice (p≤0.001). The relationship between knowledge and practice showed that when knowledge increases practice also increases.

Conclusion: The study concludes that good knowledge and practice regarding importance of brushing, frequency of brushing, frequency of changing the brush, performing interdental cleaning, and importance of cleaning the tongue was observed.
Introduction

Oral health is an integral component in the general health of an individual and has become a major public health issue with a substantial social impact. Clinical manifestations in the oral cavity are influenced by modifiable and non-modifiable factors. To achieve appropriate general health oral hygiene plays a pivotal role. Oral health can be defined as “a standard of health of the oral and related tissues which enables an individual to eat, speak, and socialize without active disease, discomfort or embarrassment and which contributes to general well-being”.

Assessment of oral health behaviour in children is important for planning and for evaluation of oral health promotion programs. Maintaining good oral health among school children is very essential to avoid the restriction of activities at home and in the school due to poor oral health. Poor oral health has an impact on the physical, social, and psychological health and decreases the quality of life of school aged children. Studies have reported that increase in knowledge on oral health promotes good oral health practice. It was reported that those who have acquired good knowledge shown good oral health behaviour.

The methodologies of oral hygiene ranges from brushing, inter-dental cleaning, use of mouth wash, and tongue hygiene. Regular tooth brushing is one of the most effective mechanisms to prevent oral sickness. Brushing at least two times daily: once early in the morning and the next before going to bed at night is an ideal practice. Inter-dental cleaning is just as essential as brushing to prevent tooth decay by eliminating food residues present between the teeth. Food residue is the drive force of cavity formation and subsequently teeth are vulnerable to plaque, which attract bacteria and cause them to attack the enamel. In the past 20 years; many industrialized countries witnessed a dramatic decline in prevalence and severity of dental caries between children and adolescents. Once dental care is neglected and oral hygiene depreciates, it becomes the gateway for communicable diseases and more importantly chronic diseases.

Peterson et al. reported that 90% of the school children have experienced dental cavities and could lead to tooth loss at a very young age. Out of which, the girls have a higher percentage of taking care of their oral hygiene, more specifically just brushing their teeth as compared to boys. In the National Oral Health Survey conducted in the UAE the occurrence of dental caries in the permanent teeth of 12-year-olds was estimated to be 54%, while the mean DMFT (number of missing, decayed or filled permanent teeth) for each child was 1.6. The pervasiveness of dental caries in 15-year-olds was 65% and the mean DMFT resulted to be 2.5.
OECD (the Organization of Economic Co-Operation and Development) in 2006\textsuperscript{10} found out that Brazil, Russia, Saudi Arabia, United States, France, Italy and Poland have the poorest oral hygiene in the 12-year olds while Britain had a better oral hygiene\textsuperscript{11-13}. As oral hygiene is the maintenance of the cleanliness of the mouth by flossing or brushing the teeth in order to avoid tooth decays and diseases of the gum. The purpose of this is to avoid the build-up of bacteria and food on the teeth in order to prevent the generation of acids that dissolve the protective layer of tooth, the enamel, and causing holes in the tooth\textsuperscript{12}.

Oral hygiene should be educated and practiced at early age as it is one of the determinants of the health state later in one’s life. Considering the fact that very few studies have been done regarding the knowledge and practices of dental hygiene in Ajman, UAE. Yet another factor is the rise in the number of dental problems in students of this age. Hence, the association between knowledge and practice regarding oral hygiene among school children is assessed in this research.

**Materials and Methods**

The present study was conducted in a single school in Ajman, United Arab Emirates. The proximity of the school to the university and willingness of students to participate in the research were the basis for selection of the school. The students were of Arab nationality, and all children attending the school from grade six to nine participated in this study. A cross-sectional research design was adopted to achieve the objectives. Consent from the parents’ of the participating children was obtained before the administration of the questionnaire. The study was conducted over a period of six months. Questionnaire was prepared in English language and translated to Arabic language for the convenience of the study population. Questionnaire was back translated. The questionnaire included questions relating to socio-demographic characteristics, oral hygiene knowledge and practice. The questionnaire was pilot tested before finalizing the questionnaire.

Questionnaires were distributed among all the children studying from grade six to nine. Anonymity and confidentiality was maintained by asking the participants not to write any information revealing their identity in the questionnaire. Analysis was performed using SPSS version 21. Chi square test was performed to find the association between knowledge regarding oral hygiene measures and practice.

**Results**

A total of 175 school children participated, of which 89 (50.9\%) were of above 13 years. The participant’s age ranges between 11 and 15 years. All participants were Arab nationals.
Table 1: Association between correct knowledge and practice on Dental Hygiene (N=175)

<table>
<thead>
<tr>
<th>Dental Hygiene</th>
<th>Knowledge</th>
<th>Practice</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Frequency of brushing</td>
<td>Yes</td>
<td>136 91.9</td>
<td>12 8.1</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2 7.4</td>
<td>25 92.6</td>
</tr>
<tr>
<td>Type of brush</td>
<td>Yes</td>
<td>68 82.9</td>
<td>14 17.1</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>17 18.3</td>
<td>76 81.7</td>
</tr>
<tr>
<td>Frequency of changing brush</td>
<td>Yes</td>
<td>114 96.6</td>
<td>4 3.4</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>10 17.5</td>
<td>47 82.5</td>
</tr>
<tr>
<td>Duration of brushing</td>
<td>Yes</td>
<td>37 59.7</td>
<td>25 40.3</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>10 8.8</td>
<td>103 91.2</td>
</tr>
<tr>
<td>Method of brushing</td>
<td>Yes</td>
<td>16 64.0</td>
<td>9 36.0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>4 2.7</td>
<td>146 97.3</td>
</tr>
</tbody>
</table>

All children had knowledge on importance of brushing and cent percent practice brushing their teeth. Among the participants who had knowledge on frequency of brushing, 136 (91.9%) practiced the correct frequency of brushing. Among those who did not have knowledge on frequency of brushing only two (7.4%) were practicing the correct frequency of brushing. The association observed was statistically significant (p≤0.001).

Association between the knowledge on type of brush to be used and practice were statistically significant (p≤0.001). Among the participants who had knowledge on type of brush to be used, 68 (82.7%) were using the correct type of brush. Among those who had no knowledge regarding the correct type of brush to be used only 17(18.3%) were using correct type of brush. With regard to frequency of changing brush, of the 118 participants who had correct knowledge 114 (96.6%) were changing the brush in correct frequency. A statistically significant association was observed between knowledge on frequency of changing brush and practice (p≤0.001). Of the total participants, 62 had correct knowledge on duration of brushing 31 (59.7%) reported correct practice whereas among those who did not have correct knowledge 10 (8.8%) followed correct practice. The association observed was statistically significant (p≤0.001). The association observed between knowledge of the method of brushing and practice was statistically significant (p≤0.001). Among the total participants 25 had correct knowledge on method of brushing, of which 16 (64.0%) were having the correct practice and of those without knowledge 4 (2.7%) reported to have correct practice. Details are given in table 1.
Table 2: Association between correct Knowledge & practice on Interdental Cleaning (N=175)

<table>
<thead>
<tr>
<th>Interdental Cleaning &amp; use of mouth wash</th>
<th>Knowledge</th>
<th>Practice</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>Inter-dental cleaning</td>
<td>Yes</td>
<td>139</td>
<td>94.6</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>9</td>
<td>32.1</td>
</tr>
<tr>
<td>Use of mouthwash</td>
<td>Yes</td>
<td>73</td>
<td>73.7</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>11</td>
<td>14.5</td>
</tr>
</tbody>
</table>

The association observed between correct knowledge and practice regarding interdental cleaning was statistically significant (p≤0.001). Among the total participants 147 had correct knowledge, and of which 139 (94.6%) had correct practice. The correct knowledge on importance of using mouth wash was observed among 73 (73.7%) of those 99 who had knowledge. Among those reported to have no knowledge on use of mouth was h 11 (14.5%) used mouth wash. The association observed was statistically significant (p≤0.001). Details are given in table 2.

Table 3: Association between correct Knowledge & practice on Tongue Hygiene (N=175)

<table>
<thead>
<tr>
<th>Tongue Hygiene</th>
<th>Knowledge</th>
<th>Practice</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>Important to clean the tongue</td>
<td>Yes</td>
<td>134</td>
<td>96.4</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>21</td>
<td>58.3</td>
</tr>
<tr>
<td>Frequency of tongue cleaning</td>
<td>Yes</td>
<td>39</td>
<td>41.1</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>11</td>
<td>13.8</td>
</tr>
<tr>
<td>Materials to clean the tongue</td>
<td>Yes</td>
<td>70</td>
<td>81.4</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>9</td>
<td>10.1</td>
</tr>
</tbody>
</table>

Association between the knowledge about importance to clean the tongue and practice were statistically significant (p≤0.001). Among the participants who had knowledge on importance of cleaning the tongue, 134 (96.4%) were practicing it whereas among those who had no knowledge regarding the importance of cleaning the tongue 21 (58.3%) used to clean their
tongue. With regard to frequency of tongue cleaning, of 95 participants who had correct knowledge 39 (41.1%) practiced it. A statistically significant association was observed between knowledge on frequency of cleaning the tongue and practice (p≤0.001). Of the participants, 86 had correct knowledge about the materials used to clean the tongue and 70 (81.4%) reported correct practice whereas among those who did not have correct knowledge 9(10.1%) had correct practice. The association observed was statistically significant (p≤0.001). Details are given in table 3.

![Relationship between participants' Knowledge and Practice on Oral Hygiene](image)

**Figure 1: Relationship between participants’ Knowledge and Practice on Oral Hygiene.**

Figure 1 show the relationship between knowledge and practice where it was observed that when knowledge increases practice also increases. In other words, there is a positive correlation between knowledge and practice with correlation coefficient, r = 0.486 and on using Spearman correlation test, a significant correlation with p value <0.001 was found.

**Discussion**

This cross-sectional study was conducted to determine the association between knowledge of and practice regarding oral hygiene among school children in Ajman, UAE. Brushing, interdental cleaning, tongue hygiene are the most important tools for better oral health. In the present study all students were aware about the importance of brushing and were practicing it.
In terms of brushing, more than 90% of the participants reported correct practice, which is similar to the studies conducted across the globe. The observed rate is comparable with the studies conducted in Europe and Canada\(^\text{14}\), Brazil\(^\text{15}\), Sweden\(^\text{16}\) whereas the studies reported from Jordan\(^\text{17}\), China\(^\text{18}\), Nigeria\(^\text{19}\), Poland\(^\text{20}\), Burkina Faso\(^\text{21}\), India\(^\text{22}\), Mexico\(^\text{23}\), Tanzania\(^\text{24}\), and Kenya\(^\text{25}\) showed lower percentages than that reported in the present study. These differences in observation could be due to the research methodological differences in the studies and also the socio-cultural and demographic variations within and between countries.

Among the participants who had the knowledge on the type of brush to be used, 68 (82.7%) were using the correct type of brush in accordance to the guidelines given by American Dental Association. The probable reason for use of correct type of brush may be the easy availability of the correct type of brush in the market\(^\text{26}\). According to our research more than 95% change the brush in correct frequency whereas a study conducted in Pakistan\(^\text{27}\) reported lower percentage. This may be attributable to the socio-economic characteristics of the study population. A Study conducted in India, showed similar percentage with regard to correct frequency of changing brush\(^\text{28}\). This similarity in practice may be a result of higher knowledge in oral hygiene. That means those who have adequate knowledge on the importance of brushing, practice the habit of changing their brush at the appropriate time. In the present study 60% practiced correct duration of brushing. It was similar to the study conducted by Suprabha et al\(^\text{28}\). The categorization of duration of brushing differed in both the studies. With regard to method of brushing 64% were having the correct practice whereas in a study conducted in India\(^\text{29}\) showed only 11% of the participants practiced the correct method of brushing. Studies have reported that the concept of correct method of brushing develops over the years in an individual.

According to the present study, 95% performed inter-dental cleaning. A lower percentage of inter-dental cleaning was reported in studies from Pakistan\(^\text{27}\), India\(^\text{29}\), Turkey\(^\text{30}\), and Finland\(^\text{31}\). Consumption of non-vegetarian diet leads to ‘bothersome between the teeth’ may be the possible reason for higher percentage of inter-dental cleaning practice in the present study.

With regard to the use of mouth wash, more than 70% of the participants reported the use of mouthwash and a similar result was observed in a research conducted by Kompalli etal\(^\text{32}\). Whereas in a research conducted by Mahmoud et al\(^\text{33}\) reported a lower percentage as compared to the present study. It was reported in the present study that more than half of the participants used to clean their tongue and it was in accordance with the study conducted by Kompalli etal\(^\text{32}\). The major limitation in this study is that as it is a self-reported data the practice cannot be ensured and the study conducted at single school therefore cannot generalize the findings.

**Conclusion**

The present study conducted among school children concludes that good knowledge and practice regarding importance of brushing, frequency of brushing, frequency of changing the brush, performing interdental cleaning, and importance of cleaning the tongue was observed. Poor knowledge and practice was observed with regard to duration of brushing, appropriate way to brush the teeth, and use of mouthwash. Future studies with large sample may be conducted.
References


