

EFFECTS OF SOCIOECONOMIC STATUS AND MATERNAL EDUCATION ON MOTHERS' KNOWLEDGE ON PRIMARY DENTITION IN YATINUWARA MOH AREA

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Introduction

Socioeconomic status (SES), maternal education (ME) and beliefs affect the child health including oral health (Finlayson et al., 2005; Perera 2005; Cinar et al., 2008). In a descriptive cross sectional study in which 495 adolescents were involved, Perera (2005) pointed out that SES and education level of parents are associated with dental caries in children. Children are often dependent on their mothers to attend to their oral hygiene and they may follow mother's oral hygiene practices. However, effects of SES and ME on their awareness on primary dentition and related child oral hygiene practices for Sri Lankan population and its sub-populations have been poorly investigated. Therefore, the objective of this study was to evaluate the effects of SES and ME on mothers' knowledge about primary dentition viz; development, function and prevention of caries. Further, some maternal beliefs and practices regarding primary dentition were also investigated.

Methodology

A self administered questionnaire was developed based on previous literature regarding SES and ME relating to oral health of children. The questionnaire aimed to gather information pertaining to father's occupation, mothers' level of education and mothers' knowledge on primary dentition, with regard to its development (Kdev), function (Kfun) and prevention (Kpre) of caries. After obtaining informed consent the pre-tested questionnaire was administered to a convenient sample of 285 (19-43 years; mean 29.4) mothers attending post-natal clinics of Yatinuwara MOH area. Templates were used to analyze the responses and scores were given. The associations of SES of the family and ME to the mother's knowledge on development and function of primary teeth and also to prevention of caries of primary teeth were explored using Chi-square test in SPSS 11.5 (SPSS Inc. Chicago, IL, USA).

Results

Only 20 (7%) mothers were employed while 265 (93%) were unemployed in the study population. Their education levels were distributed into low 25 (8.8%), medium 167 (58.6%) and high 93 (32.6%) categories. SES was also identified as low 109 (38.2%), medium 147 (51.6%) and high 29 (10.2%) categories. ME showed significant association ($p=0.03$) to their knowledge about the function of primary dentition (Kfun). Associations between ME and mothers' knowledge on primary teeth development (Kdev) and caries prevention (Kpre) were not significant. Mothers with higher SES had significantly higher knowledge on primary teeth development (Kdev) ($p=0.03$) and caries prevention (Kpre) ($p=0.003$). Association between SES and mothers' knowledge about function of primary dentition (Kfun) was also not significant. There were 57 (20%) mothers who believed that caries are genetically transferred. There were 109 (38.2%) mothers who believed that primary tooth development takes place after birth. Furthermore, 94 (33%) mothers did not believe that all primary teeth are replaced by the permanent teeth. It was also noted that 119 (41.8%) mothers used feeding bottle while 26 (9.1%) mothers used a teat as a pacifier for their children.

Discussion

Foregoing results suggest that ME is significantly associated with mothers' knowledge about function of primary dentition. This shows that general education level of the mother could be an important determinant of their appreciation of function of healthy primary dentition of their children. Moreover, SES was significantly associated with mothers' knowledge on development and caries prevention in primary dentition. This would indicate that mainly the nutrition (De Irala-Estévez et al., 2000) and oral health care practice (Gillcris et al., 2001) which is now indirectly related to the income of the family play a role in maternal awareness in the development and caries preventive oral health

practice with reference to primary dentition. This study also highlighted misconceptions such as genetic predisposition of primary caries, commencement of tooth development after birth and fate of the primary dentition. These erroneous beliefs also may affect the oral health of children in this community. However, use of feeding bottle and pacifier showed a decline in this population when compared with other studies in which it has been reported that about 95% of mothers used feeding bottle (Kaste and Gift, 1995) and 80% used pacifier (Victora et al., 1993) for their children. One possible reason for this is that a large proportion of mothers in present study were housewives who look after their own children. In conclusion, this study indicates that SES and ME are important factors regarding the mothers' awareness in primary dentition. Besides some erroneous beliefs on development, caries and fate of primary teeth, bottle feeding and use of pacifier are low in this population.

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