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# **RESEARCH ARTICLE**

## EVALUATE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING DENTAL HYGIENE AMONG SCHOOL CHILDREN

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ARTICLE INFO	ABSTRACT
<i>Article History:</i> Received 06 <sup>th</sup> December, 2018 Received in revised form 24 <sup>th</sup> January, 2019 Accepted 07 <sup>th</sup> February, 2019 Published online 31 <sup>st</sup> March, 2019	Dental caries is the leading dental problem of children, 90% of all children have some tooth decay by 12 years of age, and 95% of all cavities are caused by specific eating habits like candies, ice cream, canned juices which usually develop during early childhood as a result of changing life style. The ages of greatest vulnerability are 4-8 years for the primary dentition and 12-15 years for the secondary (or) permanent dentition. Dental caries if untreated result in destruction of involved teeth. The goal of WHO, "Health for all by the year 2025", includes oral health as one among the healthy life. So WHO has selected the theme
Key Words: Effectiveness, Knowledge,	"Oral health for healthy life" in 1994. The purpose behind this was to make the people aware about various diseases of oral cavity and to educate them in relation to prevention of these diseases. The aim of the study was to evaluate the effectiveness of structured teaching programme on knowledge regarding Denta Hygiene among school children in Govt. Middle schools of District Budgam Kashmir.
bental Hygiene, Middle School Children, Structured teaching Programme, Self structured knowledge questionnaire. *Corresponding author:	<ul> <li>Objectives</li> <li>1) To assess the pre-existing knowledge score of middle school children regarding dental hygiene before implementation of structured teaching programme (pre-test).</li> <li>2) To assess the knowledge score of middle school children, after implementation of structured teaching programme. (Post-test).</li> </ul>
	<ul> <li>3) To determine the effectiveness of structured teaching programme regarding dental hygiene among middle school children by comparing pre-test and post-test knowledge scores of middle school children.</li> <li>4) To determine association of pre-test knowledge score of middle school children regarding denta hygiene with their selected demographic variables (Gender, Type of family, Educational status o parents, Monthly family income).</li> </ul>
	Methods: Quantitative research approach & pre-experimental one group pre test post test design was used Purposive sampling technique was used to select the samples that were 50 middle school children studying at Govt. Middle school Razwan, Zone Narbal Dist .Budgam Kashmir. Data was collected using sel structured knowledge questionnaire. <b>Results:</b> The result of the study showed that the mean knowledge score in pre test was 22.58 and S.D was 3.78 and in post test mean was 31.14 and S.D was 3.81. By the evidence of results mean post test knowledge score of school children regarding dental hygiene were significantly greater than their mean pre test knowledge score at $p \le 0.05$ level of significance. Hence structured teaching programme regarding dental hygiene among school children was effective. There was significant association of pre test knowledge score and selected demographic variables like educationa status of parents (0.000) and Monthly family income (0.000) of the school children. The other demographic variables like Gender (0.220), and Type of family (0.128) were found to be insignificant. <b>Interpretation and conclusion:</b> The findings of the study revealed that the knowledge score of middle school children was very low before the implementation of structured teaching programme. The structured teaching programme facilitated them to improve their knowledge about dental hygiene which was evident from the post test knowledge score. Hence structured teaching programme was an effective method for providing information
Parvaze Sheikh	and to improve knowledge of school children which was well appreciated and accepted by school children.

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### **INTRODUCTION**

Dental hygiene is the practice of keeping one's mouth clean and free from diseases and other related oral health problems by regular brushing and cleaning between the teeth. It is important that dental hygiene be carried out on a regular basis to enable prevention of dental disease. The most common dental diseases are tooth decay like cavities, dental caries and gum diseases like gingivitis, and periodontitis (Darby *et al.*, 2010). Regular brushing means brushing twice a day before breakfast and before going to bed and cleaning between the teeth means interdental cleaning which is as important as tooth brushing. It can be done with floss, flossettes and interdental brushes (Calydon, 2000). The aim of the study was to evaluate the effectiveness of structured teaching programme on knowledge regarding Dental Hygiene among school children in Govt. Middle schools of District Budgam Kashmir.

#### Objectives

- To assess the pre-existing knowledge score of middle school children regarding dental hygiene before implementation of structured teaching programme (pre-test).
- To assess the knowledge score of middle school children, after implementation of structured teaching programme. (Post-test).
- To determine the effectiveness of structured teaching programme regarding dental hygiene among middle school children by comparing pre-test and post-test knowledge scores of middle school children.
- To determine association of pre-test knowledge score of middle school children regarding dental hygiene with their selected demographic variables (Gender, Type of family, Educational status of parents, Monthly family income).

### **MATERIALS AND METHODS**

Quantitative research approach & pre-experimental one group pre test post test design was used. Purposive sampling technique was used to select the samples that were 50 middle school children studying at Govt. Middle school Razwan, Zone Narbal Dist .Budgam Kashmir. Data was collected using self structured knowledge questionnaire.

### RESULTS

The result of the study showed that the mean knowledge score in pre test was 22.58 and S.D was 3.78 and in post test mean was 31.14 and S.D was 3.81. By the evidence of results mean post test knowledge score of school children regarding dental hygiene were significantly greater than their mean pre test knowledge score at  $p \le 0.05$  level of significance. Hence structured teaching programme regarding dental hygiene among school children was effective. There was significant association of pre test knowledge score and selected demographic variables like educational status of parents (0.000) and Monthly family income (0.000) of the school children. The other demographic variables like Gender (0.220), and Type of family (0.128) were found to be insignificant.

**Interpretation and conclusion:** The findings of the study revealed that the knowledge score of middle school children was very low before the implementation of structured teaching programme. The structured teaching programme facilitated them to improve their knowledge about dental hygiene which was evident from the post test knowledge score. Hence structured teaching programme was an effective method for providing information and to improve knowledge of school children which was well appreciated and accepted by school children.

#### REFERENCES

- Aasim Farooq et al. 2015. Dental caries experience among 6-12 year old school children of Budgam district Jammu and Kashmir state, India: Asian Pac. J. Health Sci., 2(1):55-59.
- Adekoya-Sofowora CA, Nasir WO, Oginni AO, Taiwo M. 2006. Dental caries in 12-year-old suburban Nigerian school children: *Afr Health Sci.*, 6(3):145-50.

- AL Shalan TA, Erickson PR, Hardie NA. 1997. Prenary incisor decay before age 4 as a risk factor for future dental caries. *Pediatr Dent.*, 19:37-41
- Allender JA, Spradley BW. 2005. "Community Health Nursing Promoting and projecting the public Health": Philadelphia: 6 edit; Lippincott Publication, P: 630-652.
- Bagramian et al. 2009. The global increase in dental caries: *American Journal of Dentistry*, 21(1).
- Bagramian RA, Garcia-Godoy F, Volpe AR. 2009. The global increase in dental carries. "pending public health crisis": Am J Dent., 22:3–8. [PubMed]
- Bajomo AS, Rudolph MJ, Ogunbodede EO. 2004. Dental caries in 6, 12 and 15 year old Venda children , South Africa: East African MED J, 81(5):236-43
- Calydon N. 2000. Current concepts in tooth brushing and interdental cleaning. "*Periodontology*", 48(1):10–22
- Christensen LB, Petersen PE. 2003. Community dental health, 20(3),p 153-158
- Curzon MJ, Robert K. 1996. "St.Louis Paediatric Operative Dentistry". Lippincott Publication.
- Darby M, Walsh, Margaret M. 2010. Procedures Manual to Accompany Dental Hygiene: Elsevier Publishers; 2010.
- Downer MC, Drugan CS, Blinkhorn AS. 2005. Dental caries experience of British children in an international context. Comm.: *Dent. Health*, 22(2):86-93.
- Kasturi, S.R. 2000. Paediatric Nursing, 1st edition; Gajanana Book Publishers and Distributors.
- Kruger E, Dyson K. 2005. Preschool child oral health in rural Western Australia: Australian Dent. J., 50(4):258-62.
- Navin A I, Harsh Vardhan D, Navpreet K, and Rahul G. 2014. Prevalence of dental caries among school children of Bharatpur city, India: *J IntSocPrev Community Dent*, 4(1): 52–55
- Park K. 2004. Text book of Essential community Health Nursing. 4th ed. Jabalpur: Banarsidas Bhanot Publishers; 32.
- Peretz B, Ram D, Azo E, Efrat Y. 2003. Preschool caries as an indicator of future caries : a longitudinal study. *Pediatr Dent.*, 25: 114-118.
- Petersen PE, Bourgeois D, Ogawa H, Estupinan S, Ndiaye C. 2005. The global burden of oral diseases and risks to oral health: Bull World Health Organ, 83(9): 661-669.
- Polit and Hungler, 1999. "Nursing Research, principles and methods", 16th Edition Philadelphia, J.B Lippincott Company, P: 114 – 118.
- Polit DF, Beck TC. 2003. 'Nursing Research Principles and Methods". 7th edi.Philadelphia; Lippincott Publication 2003.
- Prasai Dixit L, Shakya A, Shrestha M, Shrestha A. 2013. Dental caries prevalence, oral health knowledge and practice among indigenous Chepang school children of Nepal: *BMC Oral Health*, 14; 13:20.
- Priyadarshini H R, Hiremath S S, Puranik M, Rudresh M, and Nagaratnamma, 2011. Prevalence of early child hood caries among preschool children of low socio economic status in Bangalore city, India: *J Int. Soc Prev Comm. Dent.*, 1(1):27-30.
- Rao SP, Bharambe MS. 1993. Dental caries and periodontal disease, Indian, 30 ;( 6) p759-764.
- Saravanan S, Anuradha KP, Bhaskar DJ. 2003. Prevalence of dental caries and treatment needs among school going children: *J Indian Soc Pedod Prev Dent.*, 21:1–12.
- Sharma SK, 2012. Nursing Research and Statistics. Haryana; Elsevier Publications; 2012.
- Teng O, Narksawat K, Podang J, Pacheun O. 2004. Oral health status among 12 year old children in Phnom Penh City, Cambodia: Southeast Asian J Trop Med Pub Health, 35(2): 458-62.
- Veronica Dinyain, 2017. Report of World oral health day: Nig Del Med J., 2(1):58-59
- Weir E. 2002. Dental caries: Canadian Medical Association Journal, 167(9):1035.
- World Health magazine, 1994. Oral Health for Healthy life, Page 47.