The Social and Cultural Capital Exploration Keeping Personal Hygiene in Children

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Abstract

Knowledge of parents is very important in the formation of the underlying behaviors that support or do not support the child's oral hygiene. The number of children aged 9 to 12 years with impaired oral around Puskesmas SUAK Ribe are as many as 230 people in 2014 and 183 in 2015 from January to September 18, 2015. The purpose of research is to determine the effect of knowledge and the mother's attitude to Dentistry and Oral on elementary School Students 19 SUAK Ribe West Aceh District. This research is an analytic with cross-sectional design. The research was conducted in SD Negeri 19 SUAK Ribe West Aceh district on 11 to 21 November 2015 with a population sample of 178 respondents and 64 people, with univariate and bivariate analysis using chi-square test. The results showed that the mother's knowledge and attitudes significantly affect children's personal hygiene (P.Value <0.05).

Keywords: Knowledge, Attitude, Dental Hygiene and Oral

1. Introduction

Oral health problems become an important concern in health development, one of which caused by the vulnerability of school-age children from dental health problems. School age is the time to lay a firm foundation for the realization of quality human being and health is an important factor that determines the quality of human resources. Tooth is part of the masticatory apparatus of the digestive system in the human body. The main problem of children's oral health is dental caries. Dental disease that is often suffered by almost all of Indonesia's population is dental caries. Indry based on research results, the results showed that primary school students in the village Kiawa have dental caries experience moderate category with an average of DMF-T is 3.71, which means the school children with caries an average of four teeth. Cariogenic carbohydrate diet foods highest in primary school children are snack at a frequency of 2-3 times per day. Highest cariogenic drinking patterns on elementary school children are isotonic drinks at a frequency of 1-3 times per week 2.

The national prevalence of brushing their teeth every day is 94.2 percent as much as 15 provinces were below the national prevalence. For correct behavior in brushing teeth with regard to gender factors, economic, and geographic location. Most of Indonesian people brushing their teeth in the bath in the morning or evening bath, (76.6%). Brushing teeth properly is after breakfast and before bed at night, to Indonesia found only 2.3 percent. The status of caries, DMF-T index average is 3.1 and based on WHO criteria that are in the moderate category. The results also show a pattern maintaining oral health respondents including eating habits cariogenic at the high category and non-cariogenic in the low category, brush your teeth after eating are in the moderate category and students that the frequency of visits to the dentist are in the low category. Oral hygiene research results using the Simplified Oral Hygiene Index (OHI-S) in the crowding of both jaws show that the majority of 66.67% of the study have good oral hygiene and dental status of research results by using an index crowding of teeth on both jaws partially big 65.22% of the study have gingival status (oral mucosa surrounding the teeth) inflammation.

Knowledge of parents is very important in the formation of the underlying behaviors that support or do not support the child's oral hygiene. Such knowledge can be obtained naturally or in a planned manner, namely through education, with higher education the knowledge of the high tuapun. Parents with low knowledge about oral health is a predisposing factor of behavior that does not support the oral health of children this can be constituted due to the low education of parents so that the knowledge of parents too low.

WHO (World Health Organization) in collaboration with the Federation of National Dental Association (FDI) and the International Association of Dental Research (IADR) create a global destination with the slogan "Global Goals for Oral Health 2020". The goal is to reduce dental disease and reduce its impact on the health and psychosocial development, emphasizing the importance of oral health. In addition, reducing the impact of systemic disease manifestations in the oral cavity in a person and take advantage of this manifestation for the early detection and prevention and management of systemic diseases (WHO, 2003).

According to data from Health Research Association (RISK-ESDAS) in 2013, the national prevalence of oral and dental problems is 25.9%, a total of 16 provinces have prevalence of oral and dental problems, namely Aceh above the national rate of 30.5%, 29.1% of DKI Jakarta, 28% of West Java, Yogyakarta 32.1%, 28.6% in East Java, West Nusa Tenggara 26.9%, 27.2% East Nusa Tenggara, South Kalimantan 36.1%, 31.6% in North Sulawesi, Central Sulawesi 35.6%, 36.2% in South Sulawesi, Southeast
2. Methodology

This research is an analytic with cross-sectional design, was held on 11 to 21 November 2015. The population sample of 178 respondents and 64 people, with univariate and bivariate analysis using chi-square test.

2. Result

3.1. Respondent Child Sex

The results of calculation of frequency and percentages by gender of the child respondents can be seen in Table 4.1 follows below:

Table 4.1. Frequency Distribution of Respondents by Gender Children with Dental Hygiene and Oral

<table>
<thead>
<tr>
<th>Sex</th>
<th>Frekuensi</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>46.9</td>
<td>30</td>
</tr>
<tr>
<td>Male</td>
<td>53.1</td>
<td>34</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data 2015

Based on Table 4.1 in the know that the respondents who are women is 30 persons (46.9%), while respondents were male sex is as much as 34 people (53.1%).

3.2. Knowledge

The result of the calculation of the variable frequency and percentage of knowledge can be seen in the following Table 2. below:

Tabel 2. Frequency Distribution of Respondents by Knowledge Factor in Dental Hygiene and Oral

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Frekuensi</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>29</td>
<td>45.3</td>
</tr>
<tr>
<td>Bad</td>
<td>35</td>
<td>54.7</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data 2015

Based on Table 2. can be in the know that a good knowledge of the factors respondents are as many as 29 people (45.3%), while respondents who are less good knowledge of factors are as many as 35 people (54.7%).

3.3. Attitude

The results of calculation of the percentage of variable frequency and attitude can be seen in Table 3. follows below:

Tabel 3. Respondents Frequency Distribution Based on the attitude factor Dental Hygiene and Oral

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>23</td>
<td>35.9</td>
</tr>
<tr>
<td>Bad</td>
<td>41</td>
<td>64.1</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data 2015

Based on Table 3. can be in the know that a good attitude factor respondents who are as many as 23 people (35.9%), while respondents were factors unfavorable attitude are as many as 41 people (64.1%).

3.4. Dental hygiene

The result of the calculation of the variable frequency and percentage of Dentistry and Oral students can be seen in Table 4. follows below:

Tabel 4. Respondents Frequency Distribution Based Dentistry and Oral Health

<table>
<thead>
<tr>
<th>Dental hygiene</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clean</td>
<td>19</td>
<td>29.7</td>
</tr>
<tr>
<td>Not Clean</td>
<td>45</td>
<td>70.3</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: primary data 2015

Based on Table 4 can be in the know that students who clean berasarkan oral examination results are as many as 19 students (29.7%), students who do not clean the teeth and mouth berasarkan examination results are as many as 45 people (70.3%). Bivariate analyzes to determine the relationship of the independent variables (knowledge and attitude) and dependent (oral hygiene). This test using chi-square test. Where there is a statistically significant relationship if the obtained value of p value <0.05

3.5. The relationship Knowledge Factor with Dental Hygiene and Oral
Based on Tabel 6, in mind that of the 23 respondents that good attitude factor, as many as 13 people (56.5%). While 41 respondents factors unfavorable attitude, as many as 35 people (54.5%) whose children have a mouth and teeth are not clean. Based on the results obtained chi square test \( p \text{ value} = 0.001 \) and the value is smaller than \( \alpha = 0.05 \) (\( p \text{ value} = 0.000 <\alpha = 0.05 \)) this means that the hypothesis in this study answered that Ha Ho accepted and rejected, so described are a significant relationship between factors attitude with oral hygiene at primary school pupils 19 SUAK Ribee Johan Pahlawan sub-district of West Aceh district. Based on the results of prevalence ratio (RP) = 3.8 can be concluded that the respondents who feel they have a good attitude about oral hygiene will likely have 3.8 times as much as dental and oral hygiene were clean compared to respondents whose attitude is not good about dental hygiene and mouth. Research carried out aims to determine the relationship of knowledge and attitudes of parents with dental and oral hygiene to students in primary schools 19 SUAK Ribee Johan Pahlawan sub-district of West Aceh district. The variables studied in this research is the independent variable is a factor of knowledge and attitude, with the dependent variable is the dental and oral hygiene.

### 3.7. Relationship with Knowledge Factor Dental Hygiene and Oral

Based on the observations of researchers in the field, researchers found that there are still many parents do not know how to maintain their oral hygiene, it is because the parents just know that the toothbrush is done 2 times a day ie morning and evenings only. While keeping their child's diet of sweet food and drink cold can not always be in control because their children at school snacks. This has led to a lot of kids stretcher that had teeth and mouth healthy is not based on examination results Yag made during the study.

### 3.8 Relations with the attitude factor Dental Hygiene and Oral

Based on the observations of researchers in the field researchers have found that there are many parents who do not take a firm stance on their children, where the parents do not always give advice or warning to their children to keep food on the buy, not buy drinks that may interfere with healthy teeth and mouth. In addition, most parents only send their children to brush his teeth without direct attention to how their children perform the correct toothbrush, so sometimes the germs are still there in the mouths of children. This is the cause of one of the many children who have healthy teeth and mouth are not based on examination results on the field at the time of the study.

### 4. Conclusion

A significant difference between Knowledge and Attitude material factors with oral hygiene.

### 4.6. Suggestion

Need to do further research on other factors which may affect the dental and oral hygiene

### References