Denial or Decay?
An Oral Health Educational Program for Caregivers of Preschoolers

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BACKGROUND:
Oral health care is the primary preventive method of tooth decay (caries or cavities) and infection in children below the age of five. Nonetheless, many children still suffer with:
- multiple infectious tooth decay
- tooth loss
- unnecessary sedative extractions
- pain
Unfortunately, not all two to five year-old children in South Florida Head Start (HS) programs receive routine preventive oral health care; resulting in:
- poor oral health
- gum disease
- nutritional concerns
- speech delays
- inadequate growth and development.

PURPOSE/AIM:
To examine the effects of an oral health educational program on knowledge and behavior-specific cognitions and affect in caregivers with children ages two to five.

RESEARCH QUESTIONS:
Four questions addressed the effects of an oral health educational intervention on prior related behavior, behavior-specific cognitions and affect (perceived benefits, perceived barriers, and perceived self-efficacy), knowledge, and intent on caregivers with children.

THEORETICAL FRAMEWORK:
The Health Promotion Model (HPM) was used to guide this study. It is a theoretical perspective that explores the factors and relationships contributing to health-promoting behaviors.

DESIGN/SAMPLE:
Descriptive quasi-experimental design utilizing a pre-test post-test method, with a convenience sample of 400 HS caregivers from seven program sites. The HS enrolled, English speaking family, attended one of 18 oral health educational programs.

METHODS:
Caregivers completed a:
- Demographic survey
- Oral health behavior questionnaire
- Knowledge pre-test
- Viewed a 16-min video designed by Colgate*
- Knowledge post-test.

DATA ANALYSIS:
Hypotheses testing were conducted using techniques of t-test analysis on the variable knowledge, measured by the Oral Health Knowledge Test, and Pearson’s r correlation on the prior related behavior and behavior-specific cognitions and affect variables, measured by the Determinants of Oral Health Behavior tool.

RESULTS:
- Overall significant effect of the oral health educational program on caregivers’ prior related behaviors, r = .43, p (two-tailed) < .01.
- Behavior-specific cognitions and affect, r = .43, p (two-tailed) < .01.
- Intention to provide oral health care for their children, r = .27, p (two-tailed) < .01.
- Post-test for knowledge of oral health care (M = 60.57, SE = .30) compared to pre-test for knowledge (M = 59.03, SE = .26), t (399) = -6.35, p < .01, r = .30.

CONCLUSION:
Educational programs have a positive impact on caregivers to increase knowledge and intent to perform preventive oral health-promoting behaviors in this underserved population.

IMPLICATIONS:
Emphasizing oral health care in nursing curriculum will contribute to greater adherence to oral health practices in caregivers. Nursing practice should implement educational programs for caregivers and provide the opportunity to affect governmental policy that support oral health care services for young children, as indicated by Healthy People 2020.