

Abstract

Introduction

Oral health means more than good teeth. It is integral to general health and essential for the wellbeing of the person. The craniofacial complex allows us to speak, smile, touch, smell, taste, chew, and swallow and let out a cry when in pain. The psychological impact of these diseases often significantly diminishes the quality of life. In Sri Lanka, the prevalence of oral diseases among preschool children is high according to the latest data of National Oral Health Survey (2002/2003). The preschool aged child is under the care of School Dental Therapists (SDT). The limited number of SDTT in Sri Lanka are mainly given the task of looking after the oral health problems of school children specially children aged 3-13 years and their main target group of school children in grades 1, 4 and 7. As a result the oral health care needs of preschool children are neglected and parents or other figures in the life of a preschool child is not skilled enough to identify oral diseases of the preschool child at early stages and be directed for treatment. With the available infra-structure and oral health care manpower in Sri Lanka, a comprehensive oral health care service cannot be provided by the curative sector alone, to the population of preschool children. Hence the importance of utilization of non-health/non-dental personnel is greatly felt at present. With reference of literature and with consultation of the experts in the field of dentistry, it was decided to use the two most influential figures in a preschool child's life to promote the oral health of the preschool child. Mothers/care givers of preschool children and preschool teachers were utilized as target groups for an intervention with the objective of promoting oral health of preschool children.

General Objective

To determine the effectiveness of an education intervention designed for preschool teachers and mothers or care givers of preschool children as a method of promoting oral health of preschool children