

ABSTRACT

This study was done with the aim of assessing the knowledge, attitudes and practices on oral and dental health among school children and to determine the source of oral health information. Significant differences within ethnic groups were revealed in the findings of the National Oral Health Survey conducted in 1983-84. Comparison of two ethnic groups namely Sinhala and Muslim was also done in this study therefore. The caries experience of the Muslims was found to be higher than the other ethnic groups in both the primary dentition (6 year old) and adults (35-44 year old) (1).

The school dental service in Sri Lanka provides dental care (both preventive and curative) to children - 3 to 13 years of ages, and to 13 to 18 year olds in Adolescent Clinics.

Another purpose of this study was to assess the awareness of the school dental service and whether the services were being utilized by the children. The study area was confined to the city of Colombo due to the financial and time constraints. The sample was derived from year 11 school children in Sinhala and Muslim schools. A multistage stratified random sampling method was employed to ensure best possible representation. Data was collected using a self administered questionnaire under supervision and analysed using the computer package SPSS/PC+. The results suggested an overall lack of basic knowledge on oral and dental health among the school children. Lack of knowledge among the Muslim group was more in comparison with the Sinhala group. Knowledge on periodontal disease was found to be relatively lesser than knowledge on caries.

On analysing the attitudes of school children with regard to dental health, the value of teeth was found to be not much appreciated, especially by the Muslim group. The majority in the Muslim group preferred extraction of a tooth when diseased. This finding has been reflected in the last National Oral Survey. The proportion of the missing component of the DMFT in the Muslim group was higher than in the other groups.

The entire study sample admitted to brushing at least once daily. The pattern, mode and frequency of brushing in both ethnic groups were almost similar. The majority indicated the use of a tooth brush and tooth paste for brushing teeth.

Parents and school teachers were found to be the main source of information with the Dental Surgeon contributing to a lesser degree and the least contribution made by the school dental therapist. Awareness of the school dental clinic among the school children was not adequate and significant differences between the two groups with Muslims being less aware of the school dental clinics were found.

The frequency of sugar consumption was found to be high among all school children.

Since dental diseases are preventable diseases, it is very important that preventive services should be enhanced and made active. The need to educate children about the basic aspects of dental health, current efficacious preventive methods and minimise prevalent misinformation about dental health was seen from this study.

School dental service utilisation should be brought to a maximum.