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The Relationship Between Parental Support and Toddlers Habit in Dental and Oral Health Maintenance

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Abstract— Dental and oral health in children is a growth and development that must be considered because tooth decay in children under five can affect the growth of teeth at a later age. Parents have an important role in shaping children's positive behavior towards dental and oral health. The participation of parents in maintaining dental and oral health can be done by paying attention to the behavior of children. The purpose of this study was to analyze the description of parental support regarding the dental and oral health of toddlers in the Bangsalsari sub-district, to analyze the description of the habits of children under five in maintaining oral and dental health in the Bangsalsari sub-district and to analyze the relationship between parental support and the habits of children under five in maintaining oral and dental health in the Bangsalsari sub-district. The research method used questionnaires and interviews. The analysis of this research uses the Spearman Test. The results of the study were that there was a significant relationship between the parental support variable and the habits of children under five with p <0.05. The conclusion of this study is that there is a significant relationship between parental support and the habits of children under five in maintaining oral and dental health in Bangsalsari District.

Keywords: Support Parent, Habbit Toddlers

I. INTRODUCTION

Dental and oral health in children is a growth and development that must be considered because tooth decay in children under five can affect the growth of teeth at a later age (Oktarina et al., 2017). Parents have an important role in shaping children's positive behavior towards dental and oral health. The participation of parents in maintaining dental and oral health can be done by paying attention to the behavior and eating patterns of children (Mentari et al., 2016).

The global burden of disease study in 2017 states that caries is a dental and oral health problem experienced by half the world's population, namely 3.58 billion people (Dye, 2017). In Indonesia the prevalence of caries is 45.3% (Riskesdas, 2018). The incidence of caries in children has increased from 2013 to 2018, with a prevalence of 60% aged 3 years and 4 years old by 85% and 5 years old by 86.4% (Norfai & Rahman, 2017).

Toddlers do not know and understand about maintaining dental and oral health. Children still need the help of their parents (Cahyaningrum, 2017). Keyes' multifactorial theory states that there are several factors that cause dental caries, one of which is related to the habits of children who like to eat sweet foods and drinks that can cause dental caries but are not balanced with maintaining dental hygiene, and mouth. Foods that can cause dental caries are classified as cariogenic foods (Hana, 2014). Habit implies repetition or often doing it at different times (Nurfirdaus et all., 2019). According to Al-Atabi (2014) that a habit is an act or certain actions that are carried out repeatedly. At the time of repetition, the action becomes less conscious until it has fully formed without realizing it into a routine.

Support is the exchange of reciprocal relationships by providing assistance to others. Support from parents can provide physical and psychological comfort for children. Children will feel loved, cared for and appreciated (Lin, 2013). According to Spilsbury & Korbin (2013) that providing assistance can be in the form of participation, emancipation, motivation, provision of information, appreciation or assessment to others. The role of parents is needed for the success of children's dental care as figures and role models who provide good examples (Sunati, 2012).

Severe caries can cause primary teeth to be extracted prematurely. Children's teeth that fall out prematurely will have an impact on the mastication process so that nutritional intake is reduced (Eddy & Hanna, 2015). According to Widayati (2014) caries has an impact on children's development which will reduce the level of intelligence of children. The Bangsalsari Health Center is located in the Bangsalsari District, Jember Regency. The working area of the Bangsalsari Health Center consists of 7 villages. Based on data from case reports of dental and oral diseases in the working area of the Bangsalsari Health Center, dental caries has increased from 334 patients in 2019 to 723 in 2020. In the preliminary survey, most of the toddlers who came to posyandu activities experienced dental caries. Data reports on the number of patients in Bangsalsari District in 2021 as many as 2,497 toddlers out of 4,799 toddlers experiencing dental caries.

II. MATERIAL AND METHOD

This research is an analytic observational study with a cross sectional research design. The subjects of this study were parents or guardians who came to the posyandu in the working area of the Bangsalsari Health Center totaling 126 parents. The research was carried out at the posyandu in the working area of the Bangsalsari Health Center, Jember Regency. The population and subjects in this study were parents or guardians who came to the posyandu in the working area of the Bangsalsari Health Center. The sampling technique used was total sampling. Data on parental support for the habits of children under five in maintaining oral and dental health were obtained through questions in questionnaires and interviews given to respondents. The data obtained were then tabulated and analyzed using the Spearman Test. Data analysis was conducted to analyze the relationship between parental support and children's habits.

III. RESULT

The research was conducted in Bangsalsari village, Langkap village and Petung village, Bangsalsari sub-district, Jember district with a total of 126 parents as respondents who have children under five. The results of data collection were obtained through filling out questionnaires by parents of toddlers who were present at posyandu activities. Based on the results of research that has been done, the characteristics of the respondents can be described as follows: The results of the distribution of respondents based on the age of parents and the age of toddlers in the working area of the Bangsalsari Health Center are described in table 1.

Table 1. Characteristics of Respondents in the Working Area of the Bangsalsari Health Center

Characteristics of Respondents	n	%
Parental Age (Years)		
17-25	42	33,3
26-35	66	52,3
36-45	17	13,6
46-55	1	0,8
Toddler age (Years)		
<2	25	19,8
2-3	54	42,9
4-5	47	37,3

The results showed that most of the respondents were aged 26-35 years, namely 66 respondents (52.3%). Most of the toddlers aged 2-3 years with a total (42.9%).

Data on parental support were obtained from filling out a questionnaire by parents which consisted of 10 questions. The results of the study were categorized into good (score 31-40), adequate (score 23-30) and poor (score 22) described in table 2.

Table 2. Distribution of respondents based on parental support in maintaining oral health in Bangsalsari sub-district.

No	Parental Support	n	%
1.	Fine	45	35,7
2.	Enogh	31	24,6
3.	Less	50	39,7
Total		126	100

The distribution of respondents based on the frequency of parental support in maintaining oral and dental health in children under five in the Bangsalsari sub-district showed that parents did not provide support for children under five as many as 50 (39.7%) respondents.

Data on children's habits in maintaining oral and dental health were obtained from filling out a questionnaire by parents which consisted of 10 questions. The results of the study were categorized into good (score 31-40), adequate (score 23-30) and poor (score 22) described in table 3.

Table 3 Distribution of respondents based on children's habits in maintaining oral health in Bangsalsari sub-district.

No	Toddler's Habbit	n	%
1.	Fine	39	31
2.	Enough	38	30,2
3.	Less	49	38,9
Total		126	100

The distribution of respondents based on the frequency of habits of children under five in maintaining oral health in Bangsalsari sub-district shows that most of the children under five have bad habits as much as 49 (38.9%).

Table 4 interview results of respondents in the working area of the Bangsalsari Public Health Center

Question	Answer	n	%
Children eat snacks and sweets in excess.	Rebuked	47	37
	Left	79	63
Child does not want to brush teeth	Rebuked	32	25,4
	Left	94	74,6
Children are obedient and diligent in	Praised	38	30,2
brushing their teeth.	Gifted	6	4,8
	Left	82	65
Parents provide dental and oral care	Own	100	
equipment	Shift	11	
	Haven't Brushed Tooth	15	
Help brushing children's teeth.	Assisted	100	100
Eating and drinking too much sugar	Yes	96	76
	No	30	24
Drink bottled milk.	Yes	66	52
	No	60	48
Frequency and time of brushing teeth.	1x (morning shower)	2	2
	2x (morning & evening shower)	87	78
	2x(after breakfast & evening)	8	7
	3x (shower+night)	9	8
	3x(morning, afternoon & evening)	5	5
Children's habit of eating fruits and	Yes	106	84
vegetables.	No	20	16

In table 4 the results of interviews with respondents in the working area of the Bangsalsari Public Health Center show that most parents let their children eat snacks and sweets excessively, as many as 63% of respondents, most parents let their children not brush their teeth, as many as 74.6% of respondents, most parents let their children obey and diligently brush their teeth, as many as 65% of respondents. Based on the habit of toddlers enjoying eating and drinking excessively sweet, most parents answered that their children liked to eat sweet foods and drinks, as much as 76%, most toddlers still drank bottled milk, as many as 52% of toddlers. Based on the frequency and time of brushing, most toddlers brush their teeth in the morning and evening showers, as many as 78% of toddlers and most toddlers have a habit of consuming fruits and vegetables, as many as 84% of toddlers.

Table 5 Correlation Between Parental Support and Child Habits in Maintaining Dental and Child Health in Bangsalsari

.845** .000 126

In the results of the correlation between parental support and the habits of children under five using the Spearman statistical test, it is known that n shows a total sample of 126 and a high correlation is indicated by 0.845**. The significance value or sig.(2-tailed) 0.000 <0.05, it means that there is a significant relationship between the parental support variable and the toddler's habits. The correlation coefficient is 0.845** with a positive value, meaning that the relationship between the two variables is unidirectional, meaning that the greater the parental support in maintaining dental and oral health in children under five, the better the habits of children under five in maintaining oral health with a very strong correlation level.

IV. DISCUSSION

Before you begin to format your paper, first write and save the content as a separate text file. Keep your text and graphic files separate until In table 1, the characteristics of the respondent's parental age indicate that the respondent is 26-35 years old, which is early adulthood. This is because most of the mothers who attend posyandu activities and have children under five are mothers aged 26-35 years. This study is in line with the research of Widari (2014) which explains that as many as 57% of mothers who attend posyandu activities are aged 27-35 years. The characteristics of the respondents aged under five showed that the toddlers were 2-3 years old. This is because most of the toddlers who attend posyandu activities are 2-3 years old.

Table 2 shows that most parents provide less support to toddlers in maintaining oral and dental health. It is possible that this is due to the mother's age, including early adulthood. Mothers who are still young tend to be less able to feel or recognize the needs of their children than older mothers, which can affect the existence of different experiences of health problems or diseases. There is a match between the age factor and experience, if the mother's age is getting older, the experience will be more, and vice versa

if the mother's age is less then the experience is limited. The more old enough, the level of maturity and strength of a person will be more mature in thinking and working (Perdani, 2018).

Based on table 4, some parents do not provide assessment support for children in the form of praise or give gifts to children if they want to brush their teeth and clean their mouth regularly and give warnings if children do not want to brush their teeth and clean their mouth regularly. This causes the child's lack of motivation to maintain healthy teeth and mouth. Fatimah (2016) that if parents provide assessment support to children, it will foster motivation and a sense of responsibility in children to maintain their dental and oral health. In table 4, some parents do not provide assessment support for children in the form of praise or give gifts to children if they want to brush their teeth and clean their mouth regularly and give warnings if children do not want to brush their teeth and clean their mouth regularly.

This causes the child's lack of motivation to maintain healthy teeth and mouth. Fatimah (2016) explained that if parents provide assessment support to children, it will foster motivation and a sense of responsibility in children to maintain their dental and oral health. Most parents help their children brush their teeth. Madyastuti (2016) explains that parents, especially mothers, are influential in providing support and encouragement for children to want to care for and clean their teeth. Child dental care also depends on how the mother helps. Mothers are believed to be the right people in providing care for children. In the results of the interview, some parents provided brushing equipment for their children. Nurhidayati (2012) explained that the role of parents is important in maintaining the health of children's teeth and mouth. Factors that can affect the success of dental health. Parents are required to provide equipment for brushing teeth according to the child's age.

Table 3 shows that toddlers have poor habits in maintaining oral and dental health. Probably due to his early age. Ignorance or ability that causes toddlers to have poor habits in maintaining dental and oral health. Most parents only provide equipment for brushing teeth and only tell them to brush their teeth without accompanying them (Fatimawati, 2015). When a child's teeth begin to grow, sometimes parents are not fully aware of it. As a result, they pay less attention to oral hygiene and children's teeth, especially after eating. Parents must understand all the changes that may arise in their children so that the possibility of disturbances in their children can occur later can be avoided (Miftakhunet Al., 2016). Bozorgmehr (2013) explained that the habit of maintaining the oral health of parents such as the habit of brushing teeth and the frequency of consuming food is important in determining children's habits in maintaining dental and oral health. In table 4 it is explained that most toddlers have a habit of eating excessive sweet foods. The habit of children eating sweet foods without being balanced by the role of good parents in teaching brushing their teeth will cause dental caries.

In table 4, most parents do not understand the right time and frequency to brush their teeth. Most parents answered that toddlers brush their teeth twice in the morning and evening. Eddy (2015) explained that teaching children to brush their teeth at least 2 times a day, after breakfast and before going to bed at night. Parents also play an important role in guiding children so that they understand what foods and drinks can damage teeth. Children should be accustomed to consuming vegetables and fruits. In table 4 it is found that most of the toddlers still drink bottled milk as much as 66%. The use of bottles for drinking is not recommended for children over 2 years of age. Children aged 0-2 years should still get exclusive breastfeeding from their mothers, but a study said that as many as 72 mothers out of 120 mothers did not provide exclusive breastfeeding for their children (Lestari, 2017).

In table 5, it is known that there is a significant relationship between parental support variables and toddler habits. The level of strength of the relationship between parental support variables and toddler habits is very strong. The coefficient number is positive, so that the relationship between the two variables is unidirectional, meaning that the greater the parental support in maintaining oral health for toddlers, the better the habits of children under five in maintaining oral health. This may be due to the support of people influencing the habits of toddlers in maintaining dental and oral health. Madyastuti & Siswanto (2016) explained that toddlers' development is still in the stage of imitating and following directions from their parents, if the parents do not tell them to do dental and oral health maintenance, the child will not do it.

Mother's habits can affect the dental and oral health of children. Mother's bad habits, such as excessive consumption of sweet foods, children have these habits, thereby increasing the risk of dental caries in children (Verma et al., 2013). Parents are needed to guide, provide understanding, remind and provide facilities for children in order to maintain dental and oral health. Toddlers cannot maintain oral hygiene properly and effectively so parents must help brush their teeth and then supervise this procedure continuously (Jahirin & Guntur, 2020).

V. CONCLUSION

Based on the results of research on the relationship between parental support and the habits of children under five in maintaining oral and dental health, it was concluded that there was a significant relationship between parental support and the habits of children under five. The relationship between the two variables is unidirectional, meaning that the greater the parental support in maintaining dental and oral health in children under five, the better the habits of children under five in maintaining oral and dental health.

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