

Health Education about Dental Health of School Children at SDN 7 Sukamenteri, Garut Kota District

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Abstract

Dental health problems can have a negative impact and affect the quality of life for children, dental health problems such as cavities and dental caries will cause pain and discomfort. This will also interfere with children's activities at school, where children will experience a decrease in learning abilities, children with dental pain will not do their homework, and it is difficult to answer questions as well as children who are not bothered by dental health problems. Dental and Oral Health, Mouth is formed by 2 jaws, namely the upper and lower jaws. In this jaw there are teeth and gums. The teeth and mouth themselves function to chew, speak, and give a harmonious shape to the face. The purpose of education is to provide and improve students' understanding of the importance of preventing dental health problems and to identify the importance of early detection to avoid dental disease. The method used is the lecture method, question and answer, discussion and demonstration. The results of the health counselling activities were approximately 151 students. The counseling participants looked enthusiastic when the material was given. Participants participated in the counselling happily because the counselling was carried out in a fun way. The counselling activity was conducive because the participants paid attention to the material presented well. This is evidenced by the number of participants who are interested in answering questions during the question and answer session. Participants participated in the counselling happily because the counselling was carried out with a pleasant face-to-face method. The counselling activity was conducive because the participants paid attention to the material presented well about personal hygiene and dental and oral hygiene.

Keywords: Dental Health, Health Education, Elementary School Students

INTRODUCTION

School health nursing is one area in community nursing that is more focused on prevention and management of infectious diseases by emphasizing preventive and primitive efforts. The perspective in school nursing is how to integrate the concept of health in the school curriculum through various efforts in early detection of health problems (case finding), efforts to maintain health and the school environment. School health programs are very important to apply because school students as a special group need protection from various hazards. School students also need health in order to learn optimally and effectively, so that they can produce healthy and intelligent human resources or adults in the future. School health goals are focused on efforts to improve health and prevent disease, identify health problems and seek solutions to existing health problems, and provide health education about a clean and healthy lifestyle to students and families (Stanhope & Lancaster, 2012).

The School Health Unit is part of the main health effort that is the burden of the task of the Community health centres, which is aimed at schools with students and their living environment, in order to achieve the best state of child health and at the same time improve the learning achievement of school children as high as possible (Efendi, 2015). According to the Decree of the Minister of Health No. 828/MENKES/SK/IX/2008, School Health Efforts (UKS) are integrated cross-program and cross-sector efforts in order to improve the ability to live healthy and then shape the healthy lifestyle of school-age children who are in school. The schools in question cover various levels and types of education. Namely TK/RA, SD/MI/Package A, SMP/MTs/Package B, SMA/SMK/MA/MAK/Package C, including religious education pathways such as Islamic boarding schools (Ketenes RI, 2017; Ketenes RI, 2020)

Based on the Law of the Republic of Indonesia number 35 of 2014 concerning UKS, it is explained that UKS activities are aimed at improving students' ability to live healthy lives in a healthy environment, so that students can grow and develop harmoniously and optimally in order to become quality human resources. The purpose of another school health unit is explained by Rebelo, M. A. B, et al., (2019) which explains that the UKS goal is to improve the quality of education and learning achievement of students through increasing physical and spiritual clean living behaviour so that students can grow and develop optimally along with independence in activities. And in the end become a more qualified human being. The implementation of UKS is inseparable from the UKS Trials, which is in the form of health education, health services, and fostering a healthy school environment (Dewi, W. A. F, 2020).

Supervision of a healthy school environment is focused on monitoring behaviour and environmental factors that facilitate the onset of disease or affect the health status of students in maintaining personal and environmental health (Aulina, 2018). The cleanliness of the school environment is very influential for teaching and learning activities, when the condition of the cleanliness of the environment in the school is not good it can cause discomfort and interfere with teaching and learning activities and vice versa and schools are considered as appropriate and effective to foster a sense of student concern for environmental cleanliness, especially in the environment. School, because school is a place where students get education where the educational process takes place with the aim of changing behaviour for the better. To foster a sense of student concern for environmental cleanliness, concrete steps are needed to maintain environmental cleanliness.

According to survey data from the World Health Organization (WHO), it is noted that 60–90% of children worldwide experience dental health problems (WHO, 2003 in Mukhbitin, 2018). In 2010, the Survey of the Ministry of Health of the Republic of Indonesia (IDHS) in Mukhbitin (2018) showed that the prevalence of the Indonesian population suffering from dental problems was 80%–90%, of which the majority were children of school age. Lack of dental health in school children can be caused by several things, namely not maintaining oral and dental hygiene, how to brush teeth and use of toothpaste that is not appropriate and the habit of brushing teeth is not in accordance with what is recommended (Tjahyadi and Andini, 2011 in Mukhbitin, 2018)

Dental health problems can have a negative impact and affect the quality of life for children, this is supported by research conducted by Zetu et al., (2014) which states that dental health problems such as cavities and dental caries will cause pain and discomfort. It will also interfere with children's activities at school, where children will experience a decrease in learning abilities, children with tooth pain will not do assignments, and it is difficult to answer questions as well as children who are not bothered by dental health problems (Sheiham, 2005 in Mukhbitin, 2018). Dental and Oral Health, Mouth is formed by 2 jaws, namely the upper and lower jaws. In this jaw there are teeth and gums. The teeth and mouth themselves function to chew, speak, and give a harmonious shape to the face (Malik, 2008).

Dental health problems include: Caries is a demineralization of the tooth surface caused by bacteria. The product of the bacteria contained in it is an acid. Over a period of time, this acid will destroy the enamel, causing cavities. Cavities are a form of damage to tooth enamel (Malik, 2008). Tooth decay can occur at any age. Most often occurs in children and young people. Cavities in children cause a lot of tooth loss at a young age. Signs of cavities (Malik, 2008). Examination of cavities can be done with sedation and making X-rays, while the stages of treatment are as follows (Malik, 2008). Prevention of cavities among them is done by (Malik, 2008). brushing teeth at least 2 times a day Use of dental floss; Routine checks every 6 months; After eating sticky food, brush your teeth or rinse your mouth and apply fluoride to the tooth surface (Nurmahmudah, et, al, 2018).

All diseases related to the condition of the teeth and mouth must be treated. The removal of plaque and calculus from inflamed gums will be uncomfortable. Bleeding and softening of the gums will decrease between 1 to 2 weeks after cleaning by a dentist. Warm salt water or antibacterial mouthwash can speed up the healing process. Anti-inflammatory medications can relieve discomfort after cleansing. Healthy gums will look pink. Oral hygiene must be maintained

for life or the gingivitis may recur. Gingivitis that is not treated with proper care can progress to periodontitis. And infection or abscess of the gums or jawbone may occur. We can take steps to prevent gingivitis. Good oral hygiene is the best way to prevent gingivitis. Teeth should be brushed at least twice a day and flossed at least once a day. For people who are prone to gingivitis, brushing teeth and flossing can be recommended after every meal and at bedtime (Malik, 2008).

Personal hygiene comes from the Greek, namely personal which means individual and hygiene means healthy. Personal hygiene is an action to maintain one's cleanliness and health for physical and psychological well-being (Tarwoto & Wartonah, 2011). Personal hygiene is a knowledge and effort of individual health by maintaining personal hygiene. Personal hygiene includes cleanliness of the skin, hands and feet, nails, hair, mouth and teeth, nose, eyes, ears, clothes and hand and foot hygiene after defecating and urinating (Tarwoto & Wartonah, 2011; Gunadi, R. A. A., et, al, 2020).

Based on the results of the recapitulation of the results of the study needs assessment, it can be seen that there are some students whose learning needs are included in learning needs: Perceived needs Because some know the impact of dental health on students; Unperceived needs Because there are some students who do not take proper and correct prevention of the risk of dental caries which is harmful to health; Misperceived needs Because there are some students who know the dangers of not preventing the risk of dental caries properly and correctly which is harmful to health, but there are still habits that do not know how to make efforts to prevent dental health problems, especially dental caries in learning activities. Data Recapitulation of Learning Needs Assessment Results Audience: 151 people, Audience consists of students from all classes.

METHODS

The methodology of health education carried out in this service is through the approach of presenting group material in the sukamentri state elementary school class with stages starting from giving material, question and answer, discussion to demonstrating how to brush teeth properly and correctly. In detail, it can be seen in the figure 1.

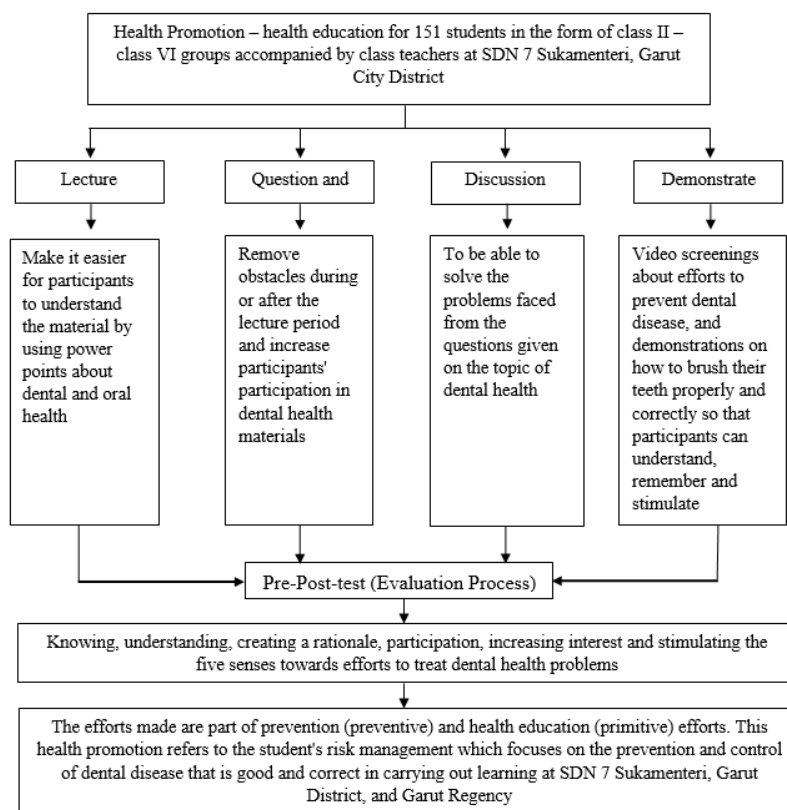


Figure 1. Diagram of the health counselling process

RESULTS

The results of the study are divided into several dimensions, namely the physical dimension which shows the age composition of the student population at SDN 7 Sukamenteri Garut in the age range of 6-15 years, mostly female as many as 80 people out of a total of 151 students. From the genetic element, it was not found that there were students who had genetic disorders or diseases that might not have been detected in detail. Physiological functions regarding health problems, many students who experience health problems are brought to the UKS (School Health Business) room because they have flu, colds, dizziness, nausea, weakness, feeling weak, hands and feet feel cold.

Physical Dimensions of the School: Based on observations, some environmental conditions and educational facilities at SDN 7 Sukamenteri are classified as good. For example, the room temperature is cool, and there are no other sources of noise except motorized vehicles in front of the school. Each class is also equipped with 7 well-functioning ventilation. In the morning, the condition of the school environment looks cleaner, but in the afternoon some food packaging waste appears scattered, especially in the field area

In addition to observing the physical dimensions, environmental observations were also carried out by assessing compliance with health protocols at SDN 7 Sukamenteri. Compliance with health protocols is still lacking, this is evidenced by the behaviour of students, teachers, and tradesmen, the majority of whom have not used masks and have not kept their distance. There are no supporting facilities for health protocols such as hand sanitizer, but there are about 5 hand washing places that can be easily accessed by students. However, the condition of the hand washing area needs to be optimized because it is not equipped with hand soap that can be used by school residents.

Psychological Dimensions: Based on the results of interviews conducted with representatives of teachers at SDN 7 Sukamenteri, it was found that health promotion or education activities that have been carried out in schools include hand washing training activities, small doctor or doctoral programs, dental and oral examinations, and giving worm medicine. Meanwhile, during the Covid-19 pandemic, the school held a special antigen swab for 6 the grade students.

Regarding socialization between students, the teachers stated that communication, relationships, and social interactions of students went well, were intimate, warm, and interactive. Each student can also get to know each other. They often show their intimacy through playing together and joking or joking at certain times.

In line with the results of direct assessments of students, the teachers also stated the same thing that violations of school rules often occur or are carried out by students. The form of violation that students often do is hair that is left as long as they like. So that teachers are forced to reprimand and give warnings to students who violate even by being forced to cut directly.

The school has implemented an affirmation of the rules that have been made. However, this rule was not followed by an affirmation from the BK teacher because there were no BK teachers at the SDN 7 Sukamenteri School. With regard to communication between teachers and parents, communication can be established properly and openly, as well as prioritizing the kinship aspect

Social Dimension: Based on the results of interviews, at SDN 7 Sukamenteri there are human resources consisting of principals, teachers, and operators who play a role in school administration. Most of the staff and students belong to the lower middle social status, but there are no students who are homeless. The school community is dominated by staff and students who adhere to Sundanese culture. The school environment is quite safe because there is a school guard who lives in front of the school. According to one teacher interviewed, the community around the school cares and supports academic and non-academic activities carried out by the school.

Behavioral Dimensions: Based on the results of interviews conducted with representatives of SDN 7 Sukamenteri teachers, it was obtained data that teachers were not provided with knowledge about the nutritional needs of students at school and from school there was no special program to meet nutrition for students, so teachers did not focus on meeting nutritional needs. nutrition. The teacher said that students at SDN 7 Sukamenteri had a habit of buying food

and drinks sold at school by street vendors such as fried foods and cold drinks. In addition, the majority of students consume foods that contain preservatives

Based on the results of interviews conducted with representatives of teachers at SDN 7 Sukamentri, students do not have the habit of smoking at school or outside of school. Students have recreational activities regularly every grade increase. During sports activities at school, student safety can be said to be safe because every student sports activity is always accompanied by their respective class teachers. The extracurricular at school are karate, BTQ, martial arts, and scouts. Based on the results of interviews conducted with representatives of teachers at SDN 7 Sukamentri, there is no treatment being carried out by students. Students take a break while at school, which is for 30 minutes starting at 08.30 - 09.00 WIB and 10.30 - 11.00 WIB.

In the school environment, almost all teachers (as many as 12 people) have complied with the regulations regarding the prohibition of smoking in the school environment. However, there are still some teachers who have a Health Dimension: Based on the results of interviews, health promotion efforts at SDN 7 Sukamentri are in the form of dental and oral examinations and nail hygiene. Regarding health service efforts in schools, SDN 7 Sukamentri does not yet have a UKS but empowers small doctors. In addition, medicines or medical equipment are also available at the school. Health services in schools are still inadequate, preventive efforts in schools are immunization, giving worm medicine 2 times a year, and community service such as class pickets. Based on interviews, there are obstacles in implementing health protocols in schools for reasons of student convenience.

Health education activities which will be held on Friday and Saturday, May 13-14, 2022 at 07.00 - finish WIB, are carried out face-to-face which are divided into 4 classrooms for four groups. This activity began with an opening by the MC, then a speech. The activity began with the MC asking to what extent the participants knew about dental health and dental caries, whether the participants had experienced health problems due to dental caries, especially the risk of learning, and what impacts would arise if they did not take these preventive measures. From all participant answers, participants were quite familiar with the dangers of not making good and correct efforts to prevent dental caries, but participants still did not understand what impact it would have on students with caries. Then participants were given a pre-test to find out the extent of their knowledge before the material was delivered by the presenter.

The activity continued with the provision of material using PPT and video performances that had been prepared, so that participants remained interested in participating in the event and did not get bored. The material presented is about dental health. The presentation of the material begins with the core material, the presenter immediately displays the PPT that has been prepared. During the presentation session, the participants seemed to be focused and listening to what was being presented? After the material has been delivered, it is continued with video showing and then a question and answer session which aims to find out the extent to which students have changed from those previously and after being given health education. The questions were read by the presenters and the participants were enthusiastic to answer the questions, a total of 5 questions were answered correctly by several students.

Evaluation of dental health education regarding caries and efforts to prevent dental caries risk was carried out directly with approximately 151 participants. The counselling participants looked enthusiastic when the material was given. Participants participated in the counselling happily because the counselling was carried out in a fun way. The counselling activity was conducive because the participants paid attention to the material presented well. This is evidenced by the number of participants who are interested in answering questions during the Q&A session.

DISCUSSION

The effectiveness of the function of the teaching media used can be clearly seen by all participants. Because the counselling is done directly so that the participants are easier to understand directly. This can make the material explanation effective. The good response of the participants was seen enthusiastically to follow it from the beginning to the end of the activity.

This activity is carried out through direct counselling, namely through face-to-face lectures. This lecture is carried out according to the plan that has been prepared. The efforts made are part of preventive (preventive) and health education (primitive) efforts in an effort to prevent dental health problems, especially caries.

The Health Belief Model is the most commonly used theory in health education and health promotion. The concept underlying the HBM is that health behaviour is determined by personal beliefs or perceptions about disease and the strategies available to reduce disease occurrence. Personal perception is influenced by various factors that influence intrapersonal health behaviour. Judging from the process of behaviour change in the Health Belief Model, behaviour will change, one of which is if individuals are given an understanding of the benefits. First find the cause of an unfavourable behaviour, then provide counselling and detailed information about the benefits of improving the behaviour. This effort is carried out in health education about dental health at SDN 7 Sukamenteri Garut.

In the Trans theoretical model, behaviour change is defined as a developmental process that takes place over a certain period of time and through several stages. In this health education process, teachers can find out what stage their participants are at. During the process of health education through education, it was found that the majority of participants were in the contemplation stage, i.e. individuals were in the stage of being more concerned with the positive and negative sides of the planned behaviour change, but still felt hesitant to actually do it, so this could make individuals delay change

The Theory of Reasoned Action is most successful when applied to behaviour that is under the control of the individual concerned. If the behaviour is not completely under the control or will of the individual, he may not actually display the behaviour, in this case changing the habit of not maintaining dental health. During the health education process, teachers try to make individuals motivated and independently able to change to prevent dental health problems and how to treat dental health through personal hygiene in oral and dental hygiene.

CONCLUSIONS AND RECOMMENDATIONS

From the results of the study needs assessment, it was found that the learning needs of workers at SDN 7 Sukamenteri Garut, include perceived needs, unperceived needs, and misperceived needs. In the process of implementing counselling; the students looked enthusiastic when the material was given. The counselling activity was conducive because the participants listened well to the material presented

The program's sustainability plans in the future are: To provide an understanding of the importance of making efforts to prevent the risk of dental and oral health problems for students while studying and after studying both in the school environment and outside of school; Interactive activities through social media in two directions regarding the problems faced intensively for students to build strong clean and healthy living habits in carrying out their studies; Involving local stakeholders and school owners in efforts to prevent unhealthy habitual behavior both in the home and school environment, especially in the maintenance and prevention of dental and oral health disorders..

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APPENDIX



Figure 1. Documentation of health education on Dental Health



Figure 2. Documentation of Dental Examination of schoolchildren



Figure 3. Poster Installation About Dental Health