## **MOTIVATION IN COMMUNITY DENTISTRY**

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## ABSTRACT

Motivation in Community Dentistry has great role to play if we want to avoid a toothless generation in near future in India. The existing dental services in the country are unable to prevent edentulousness among the masses. Various regulatory authorities including dental associations and dental professionals have not yet been able to achieve the goal of healthy teeth. They have individually and collectively not succeeded in improving the quality of dental educational standards as well as dental services which have deteriorated at various institutional levels. Dental caries and Periodontal diseases major cause of tooth loss . For this the general dental practitioner is equally or more responsible because he hardly practises preventive dentistry to improve oral hygiene status. However of late, the Indian Dental Association and some oral hygiene product manufacturers have come together to create awareness among people through print as well as electronic media. It is making its impact in educating urban as well as rural population. Keeping this fact in view, other associated dental societies/ speciality associations and social organisation working in health and education sector should join hands and develop some programme for motivating people. Education sector through its network of schools is very important because healthy habits formed early in life last longer. This can go a long way in improving the dental health status of population and ensure that they keep their teeth healthy throughout lifetime.

Health tends to be appreciated only when it is impaired or lost. Early symptoms of the disease frequently go un-noticed or are neglected and regarded as of little significance. This tendency also applies to the most common dental diseases such as Dental caries and Periodontal disease. The development of concept of positive dental health is made difficult by chronic, irreversible, cumulative and prevalent nature of these diseases. Moreover, teeth have different degree of importance to different people.

- Some protect their teeth because of their functional and esthetic value
- Others look after them because of their contribution to social and mental wellbeing
- To many teeth are of such low value that very few attempts are made to protect them.

Other major obstacles to the development of a concept of positive dental health are: undramatic nature of dental diseases and the association of their treatment with pain, discomfort and anxiety. The reluctance of many individuals to accept and carry out on regular basis, oral hygiene and healthy dietary practices related to prevention and control of various diseases also adds to the negativity.

It is a fact that the topic "MOTIVATION IN COMMUNITY DENTISTRY" seems very easy to understand, but it is very hard to practice. This is

due to the fact that in dentistry, we try to inform an individual about existing dental diseases in his mouth which have gradually become part him over a period of many years. Almost everybody over-estimates his oral health as he himself looks after his mouth by whatever means available like toothbrush, chew stick, commercial or domestic tooth powders, salt charcoal mixture or even plain water rinse. It is also a fact that how much inefficiently or insufficiently oral hygiene is practised, no body appreciates it to be pointed out to him frankly. That is why they proudly announce that they had been brushing their teeth very thoroughly since their childhood i.e. 10, 15, 20 or more years. Then, how could it be possible that they lacked the skill to do it? Regular dental checkups are a very important tool in the hands of a community dentist (Picture 1).



Picture 1. Dental check-up of children in a school setting

It is very challenging task to point out deficiency in one's mouth, as it is the most personal and emotional part of human beings at every age. As new born, peri-oral reflex is the first to develop and the baby recognises everything around him with his lips. As the baby grows, the mouth is used for the pleasures of sucking, tasting, swallowing, eating, speaking and for appearance and beauty. These functions are so dear to everybody individually that he does not want to listen anything about so sensitive part of his body. With all the assurances to improve his present status of mouth, he takes too long to believe that he will not lose even a bit of what he already possesses, in any attempt to improve upon it. This is because his mouth is very dear and important to him. That is why it is the most difficult area to interfere and poses a great challenge to the dentist.

It is true that dental caries is usually disease of younger population but periodontal disease does not usually affect irreversibly very young people. Though dental diseases do not cause serious pain or death, it does make life miserable for many a middle and old aged people. Poor dental health impairs nutrition and adversely affects appearance and communication so that the individual is affected biologically, psychologically and socially. The total effect of dental diseases on general health is un-assessable. The fact is that dental caries is major cause of tooth loss up to 40 years and periodontal disease is major cause after the age of say 40 years. People have accepted this unfavourable state of affairs as inevitable and it acts as a negative attitude towards motivation for seeking dental treatment.

Speciality of dentistry has made major advancements in the diagnosis and treatment of dental disease. Research has provided very effective means of preventing dental diseasesas well as curative and rehabilitative procedures. The real challenge today is how to apply these techniques through a systematic approach that may be relevant and responsible for many needy in the Indian perspective. It is therefore, vital to develop a motivational system to identify critical barriers and evolve strategies to avoid or overcome them. Some of the most important barriers that affect motivational system for dental health can be thought of as economy, educational level, culture, training, administration, pattern of available services etc.

Dental treatment consists of coordinated procedures for the purpose of creating a well functioning dentition in a healthy environment. Prevention and control of dental diseases depends on positive action at personal level, effectiveness of effort to control progression of the diseases at the dentist level and wide range of social factors. People do not act in a desired manner and therefore, dental health cannot be assured unless efficient dental services are provided or made easily accessible. Most of the Government dental health services available in the country are extraction oriented and the facilities for restoration and rehabilitation for healthy and functional dentition are very limited. The services provided under this system vary greatly. The prevention does not receive the attention it deserves. The "forceps" approach is very common in rural areas and this in other words is promoting edentulousness at a very early age. This too acts as a strong barrier for motivating periodontal patients.

The dental profession in general is seriously concerned about the widespread prevalence of Dental caries and Periodontal disease and the premature tooth loss it causes of otherwise sound teeth. Prevention of dental diseases is only possible with the coordinated efforts of the dentists and dental hygienists as they carry most of the responsibilities of prevention and control of early disease. The existing dental services in our country are so inadequate that a total of around 80,000 dentists mostly in ill-equipped and under staffed dental clinics of the Government and private sector are struggling to cater to a population of over 1,200 millions. The dental treatment in well equipped and staffed private clinics is so expansive that only few can afford it. The majority of population in the lower and middle class socioeconomic groups have also some expectations from the dental profession.

Of late, the Indian Dental Association and some manufacturers of the oral hygiene products are doing wonderful job for the promotion of oral health through print and electronic media. Similarly, others associated dental societies should also come forward and contribute their efforts to develop some programme incorporating various social and cultural aspects for benefit of people, so that masses can also retain their teeth longer without sacrificing them prematurely.

Dental Health education and health promotion are indispensable for any programme for individual or community. It should be broad based programme to be shared by the individuals, families, health planners, local educational authorities etc. Health education can help to increase knowledge and re-enforce desired behaviour pattern. But to be successful, it must be integrated with other influences on health namely economic, social and environmental so that people have access to it and they accept it. Thanks to the internet which has made information easier for those who look for it, whether patients or the dentists.

During last more than 4 decades of my dental practice which covered Dental College Hospitals, State Health Institutions at State, district, sub district, block and panchayat level, dental establishments in India including a West African Country, I have practiced motivation successfully everywhere. Motivation has been tried through various dental health education programmes on radio, television, newspapers, pamphlets, dental health talks with and without transparencies/ slides, panel discussions but with varying success. I have observed that the most effective method is through personal communication either 1:1 or panel discussion with 30-40 participants. However, motivation of the motivator is the most important aspect of any such health programme (Picture 2).

If properly initiated and conducted, the above interaction will have very strong motivating value. It would initiate in a person, the process of action based on 4 steps. **NEED:** He would feel the need for his teeth to be cleaned. **ACTION:** He would seek an appointment with his dentist. INCENTIVE: He gets teeth cleaned for better smile . **SATISFACTION:** He will have the feeling of freshness in his mouth, which he would always like to possess.



Picture 2. Training of Oral Health Club Volunteers in a High School setting

The following 7 are the key points to be discussed as they concern everybody with or without disease:

- TEETH ARE FOR LIFETIME, YOU CAN KEEP THEM HEALTHY.
- PLAQUE CAUSES MOST DENTAL DISEAESES, YOU CAN DISCLOSE IT.
- CLEAN TEETH BRIGHTEN YOUR SMILE, YOU CAN KEEP THEM CLEAN.
- GUM DISEASE CAN BE PREVENTED, YOU CAN KEEP GUMS HEALTHY.
- PREVENTION MUST HAVE PRECEDENCE OVER REPAIR, FOLLOW IT.
- REGULAR CHECK UPS DETECT DISEASE EARLY, VISIT YOUR DENTIST.
- PLAQUE CONTROL ACHIEVES DENTAL HEALTH, SELF ADMINISTER IT.