

Perceptions of children aged 7-12 years towards professional students at the dental and oral hospital institute of health sciences Bhakti Wiyata Kediri

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Abstract

Fear is the emotion most often shown by children during dental treatment. Children often make perceptions (judgments) about dentists based on the appearance of the dentist and often record and analyze every action, word, movement, and of the dentist during treatment. Professional students are young dentists who pursue advanced degrees to become dentists as health service providers to the community in Dental and Oral Hospitals who are assigned to provide or handle oral and dental care optimally and routinely in every field of dentistry, one of which is in the field of IKGA. Patients who will be treated in the field of Pediatric Dentistry before being taken to the Dental and Oral Hospital (RSGM) have had initial communication between professional students and patients, so that there has been familiarity and patient trust in the operator (professional students). Objective: This study aims to determine the perception of children aged 7-12 years to professional students at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri. Methods: This research is descriptive observational with cross sectional study design. Results: This study showed that 50 respondents had a good (positive) perception and 0 respondents had a bad (negative) perception of professional students. Conclusion: There is a good perception in children aged 7-12 years towards professional students at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri.

Keywords: Perception; Children; Professional Students; RSGM Institute of Health Sciences Bhakti Wiyata Kediri

1. Introduction

Oral health problems can occur in adults and children. Oral health problems experienced by children can interfere with activities both activities at school, activities at home, the number of attendance at school, learning concentration, affecting and children's nutritional intake. Efforts to overcome children's oral health problems by taking treatment to the dentist. However, most children are less cooperative during the treatment process so that dentists have difficulty handling children. The difficulty of handling children is not only related to the treatment process, but also emotional differences [1,2].

Fear is the most common emotion shown by children during dental treatment. Given the importance of dental health, dentists must realize the perception of meeting the needs of patients by providing optimal care and reducing fear [3].

Behavior management of the child begins when the child first enters the dental environment and continues until the child leaves. An ability to lead the child to form a good experience of the dentist is fundamental to the practice of pediatric dentistry. Having a strong relationship at the child's first visit helps create a comfortable atmosphere so that they do not feel threatened. Children often make perceptions (judgments) about the dentist based on the dentist's appearance and often record and analyze the dentist's movement, every and action, gesture word, during treatment. A

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friendly relationship with the dentist will assist the patient in overcoming specific identifying stimuli, such as anesthetic syringes and the sight, sound, and sensation of handpieces and burs that have been shown to provoke fear or anxiety [3,4].

Children aged 7-12 years are at the concrete operational stage of development, where children are mature enough to use logical thinking and have been able to classify objects received through the five senses (sight, hearing, touch) so as to make children give perceptions [6]. Patients who will be treated in the field of Pediatric Dentistry (IKGA) before being taken to the Dental and Oral Hospital have had initial communication between professional students and patients so that familiarity and trust have been established patients to professional students [5,6].

Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri is the only Dental and Oral Hospital in Kediri City, located at KH. Wahid Hasyim No. 65, Mojoroto District, Kediri City, East Java Province [7].

Based on the above background, the researcher wants to know the perception of children aged 7-12 years towards professional students at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri.

2. Material and methods

2.1. Material

The instruments used in this study were informed consent, questionnaires or lists of questions to be answered by respondents, stationery and digital cameras. Questionnaire of children's perception of students profession using a guttman scale in Multiple choice form, where the respondent chooses 1 answer from 2 answer options question.

2.2. Methods

This study is a type of descriptive observational research with a cross sectional study design. The population in this study were all children who visited the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri in the field of Pediatric Dentistry (IKGA) and the sample in this study were children aged 7-12 years who visited the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri in the field of Pediatric Dentistry (IKGA) on March 6 - April 7, 2023 and met the sample criteria. Sample inclusion criteria are parents / guardians signed Informed Consent, children who are willing to be respondents, children aged 7-12 years, children who will be treated by professional students at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri in the field of Pediatric Dentistry (IKGA). Meanwhile, the sample exclusion criteria are parents / guardians who do not sign the Informed Consent, children who are not willing to be respondents, children under 7 years old and over 12 years old, children who do not perform dental treatment at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri in the field of Pediatric Dentistry (IKGA), children who will be treated by dentists at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri in the field of Pediatric (IKGA).

3. Results and discussion

The research data obtained, processed, analyzed and interpreted.

Table 1 Frequency Distribution of Respondents who will have Dental Treatment by Professional Students Based on Gender

Gender	Frequency (n)
Female	30
Male	20

Based on Table V.1 above, it shows that there are more female sexes, namely 30 people, while respondents with male sexes are fewer, namely 20 people. This is showed that the female gender performed more dental treatments at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri when compared to the male gender. This can be caused by differences in diet, where women like cariogenic foods more such as sugary foods and drinks. Foods and drinks containing sugar will reduce the pH of plaque quickly so that it can cause demineralization of enamel so that tooth decay will occur and female teeth generally erupt faster than in men. This causes women's teeth to be exposed to the oral environment longer and hormonal fluctuations in women can trigger the onset of poor oral health [8].

Table 2 Frequency Distribution of Respondents who will have Dental Treatment by Professional Students Based on Age

Age	Frequency (n)
7 years	17
8 years	12
9 years	9
10 years	7
11 years	3
12 years	2

Based on Table V.2 above shows the frequency distribution based on the age of the respondents. The number of respondents aged 7 years, namely 17 people, age 7 years is the largest number, age 8 years is 12 people, age 9 years is 9 people, age 10 years 7 people, age 11 years is 3 people, and age 12 years is the least number, namely 2 people. This can be caused by the knowledge possessed by the child has not been able to raise awareness in an effort to implement positive habits to maintain oral health, especially brushing teeth and children of this age usually have brushing behavior that is still not correct [9]. Age will affect a person's attention span and mindset. The older a person gets, the more developed his/her ability to understand and think mindset so that knowledge gained will be better [10].

Table 3 Frequency Distribution of 7-12 Years Old Children's Perception of Professional Students Based on Answers from Respondents

NO	Question	Frequency (n)
1	Have you had any previous dental treatment at a professional student (young dentist) ?	
	Yes	23
	No	27
2	Do you like being treated by professional students (young dentist)?	
	Yes	50
	No	0
3	Have you communicated well with students (young dentists)?	
	Already	50
	Not yet	0
4	Do you feel close to the professional students (young dentists)?	
	Already	50
	Not yet	0
5	Have the professional students (young dentists) told you what they will be doing in the future?	
	Yes	50
	No	0
6	How do you feel about being treated by professional students (young dentists)?	
	Fear	5
	Not afraid	45
7	How do you feel when you see professional students (young dentists) carrying/holding instruments (tools)?	
	Calm down	40
	Not calm	10

8	Do you like it when see professional students (young dentists) wearing personal protective equipment (masks)?	
	Yes	47
	No	3
9	Do you like it when see professional students (young dentists) wearing scrubs ?	
	Yes	46
	No	4
10	Do you like it when you see professional students (young dentists) who wear shirts and dress neatly?	
	Yes	50
	No	0

Based on Table V.3 on question "No.1", related to the perception of touch, the respondents who chose the answer "yes" were 27 people, while the respondents who chose the answer "no" were 23 people. According to previous references, the cause of children having previous dental treatment in professional students is brought directly or picked up by professional students [11]. While the possible causes of children who have never had dental care before in professional students are not brought directly or not picked up by professional students. picked up by professional students.

In question "No.2", related to visual perception (vision), respondents who chose the answer "yes" were 50 people, while respondents who chose the answer "no" were 0 people. Children in this study showed that they preferred to be cared for by professional students of the same sex or gender. According to previous references, the reason why children like to be cared for by the same gender is that it can increase the level of comfort [12].

Respondents' responses to question "No.3", related to auditorial perception (hearing), respondents who chose the answer "already" were 50 people, while respondents who chose the answer "not yet" were 0 people. In question "No.4", related to auditorial perception (hearing), 50 respondents chose the answer "already", while 0 respondents chose the answer "not yet". In Question "No.5", related to auditorial perception (hearing), respondents who chose the answer "yes" were 50 people, while respondents who chose the answer "no" were 0 people. According to previous references, the possible cause of children already communicating well, feeling close, and knowing the treatment that will be done by professional students is because there has been initial communication or interaction [11].

Question "No.6", related to visual perception (vision), respondents who chose the answer "afraid" were 5 people, while respondents who chose the answer "not afraid" were 0 people. Fear is a feeling that everyone experiences, including children in everyday life. There are two factors that cause fear in children, namely internal and external factors. Internal factors are pain, age, and mood or emotion. While external factors are social background, fear of parents and the doctor's team [2].

Respondents' responses to question "No.7", related to visual perception (vision), respondents who chose the answer "calm" were 40 people, while respondents who chose the answer "no" were 10 people. According to previous references, the possible causes of children's fear of dental treatment and not calm when looking at instruments are having bad experiences (Trauma) [1], getting or hearing incorrect information, age, and rarely visiting the dentist. Meanwhile, according to previous references the possible causes of children who are not afraid of treatment and calm when looking at instruments are used to visiting dentists [13], having experiences of having positive interactions [1].

Respondents' responses to question "No.8", related to visual perception (vision), respondents who chose the answer "yes" were 47 people, while respondents who chose the answer "no" were 3 people. Respondents' responses to question "No.9", related to visual perception (vision), respondents who chose the answer "yes" were 46 people, while respondents who chose the answer "no" were 4 people. According to previous references, the reason why children like to see students using masks (personal protective equipment) and scrubs is that they look like professionals [14]. Meanwhile, according to previous references, the reasons why children do not like to see professional students using masks (personal protective equipment) and scrubs are feeling intimidated, not knowing the benefits of protective equipment [15].

Respondents' responses to question "No.10", related to visual perception (vision), respondents who chose the answer "yes" were 50 people, while respondents who chose the answer "no" were 0 people. According references, the to

previous possible causes of children liking to see professional students wearing shirts during initial interactions are being seen as a more caring person and looking more neat [16].

Table 4 Frequency Distribution of Perception Criteria of 7-12 Year Old Children towards Professional Students Based on the Score or Final Result from respondents

Perception criteria	Frequency (n)
Good Perception (Positive)	50
Bad Perception (Negative)	0

From table V.4 above shows that there are 50 respondents who are included in the good perception criteria and 0 respondents who are included in the bad perception criteria, which means that respondents who get the final score of the questionnaire $\geq 50\%$ are said to be included in the good perception criteria and respondents who get the final score of the questionnaire $< 50\%$ are said to be included in the bad perception criteria. According to Azwar (2012) there are 2 criteria for measuring perception, namely good (positive) perception if the score obtained by the respondent from the questionnaire \geq Mean and bad (negative) perception if the score obtained by the respondent from the questionnaire $<$ Mean.

Perception is the process that each individual has to manage and interpret sensory images of their environment, but what a person perceives can be different from objective reality. Not always different, but often there are differences of opinion [17]. Perception can be divided into two, namely positive perception (good) and negative perception (bad). Positive perception (good) is a perception that describes all knowledge and responses that are in harmony with the observed object, while negative perception is a perception that describes all knowledge and responses that are not in harmony with the observed object [18].

Measurement of perception using a guttman scale. The guttman scale is a measurement scale that only measures one dimension of a variable that has several variables, and this scale is a cumulative scale [19]. The guttman scale in this study is a scale of children's perceptions of professional students. Scoring on the scale of children's perceptions of professional students is determined according to the standard guttman scale. In this study the authors used a questionnaire that was structured with choices for each answer, for the guttman scale the researcher provided answer choices in the form of yes or no, afraid or not afraid, calm or not calm, already or not yet in the form of multiple choices [20]. Respondents' responses can be used as the lowest score is "zero" and the highest score is "one". Value Weighting Criteria on the Guttman Scale: The correct answer value is given a value of 1 and if the wrong answer is given a value of 0 [21]. Formula: $P = f/n \times 100\%$ (P = Percentage, F = Number of correct answers, N = Maximum score).

Based on the results of the study, respondents aged 7-12 years who had a good perception of professional students were 50 people and respondents who had a bad perception of professional students were 0 people. This study is in accordance with previous research which revealed that children aged 7-12 years have a good perception of dentists [3]. Children have a good perception of professional students or young dentists because pediatric patients aged 7-12 years are patients who are invited directly by professional students or young dentists, before pediatric patients are brought to the Dental and Oral Hospital, there has been an initial interaction between professional students or young dentists and children, so that there has been familiarity and patient trust in professional students or young dentists. This greatly affects the child's readiness to have his teeth examined at the Dental and Oral Hospital and affects the child's feelings so that the child is more prepared and can control his fear [1].

4. Conclusion

The conclusion in this study is that there is a good perception in children aged 7-12 years towards professional students at the Dental and Oral Hospital Institute of Health Sciences Bhakti Wiyata Kediri.

Compliance with ethical standards

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Disclosure of conflict of interest

The authors of this manuscript do not have any financial or personal conflicts of interest.

Statement of ethical approval

The study received ethical approval by Institut Ilmu Kesehatan Bhakti Wiyata Faculty of Dentistry Health Research Ethical Clearance Commission, Kediri (175/FKG/EP/II/2023).

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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