

The Relationship of Mom's Knowledge About Dental Care With The Event Of Dental Caries In Children Aged 3-6 Years

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Abstract

Dental caries is one of the problems in health, especially in children. Parents, especially mothers, play an important role in developing children's positive behavior towards dental and oral health, parental participation in maintaining children's dental and oral health can be applied by paying attention to children's behavior regarding dental and oral health and children's eating patterns. The purpose of this study was to determine the level of knowledge of mothers about dental care with the incidence of dental caries in children. This study uses a quantitative approach design with a cross sectional design. This study used a sample of 43 respondents. The results obtained in this study showed a significant relationship between the mother's level of knowledge regarding dental care and the incidence of dental caries in children with p value = 0.000. Mothers who have a good level of knowledge about dental care have a small risk of their children experiencing dental caries.

Keywords: Dental care, Dental caries, Mother's knowledge

INTRODUCTION

Dental health in children requires special attention for parents, especially mothers, for good dental development and growth in children. Mothers' knowledge and ability to maintain children's dental health can be influenced by several things, including age, education, socioeconomic status, experience, mass media information and the environment. In terms of knowledge, mothers are the closest people to children in health maintenance, which has a significant influence on children's attitudes and behavior (Kusumawati et al.,

2020).

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attitudes and behavior (Saptiwi et al., 2020).

Oral health is the most important part of life, because any problems in oral health can affect the health of the body as a whole. Dental health is important to ensure good nutritional status, besides that it can make it easier to speak and make the appearance more attractive. With the function of teeth, namely to chew food so as to facilitate the digestive process, to speak well, and to support the appearance of the teeth (Yuditami et al., 2015).

According to the World Health Organization (WHO), about 90% of the population has experienced dental disease, most of which cannot be avoided. As many as 78% of children in the world in 2018, which is about 573 million children, suffer from untreated dental disease, and is mainly due to the lack of accessibility to dental facilities (Az-Zahrah et al., 2021).

Diseases not only cause discomfort but also affect productivity and quality of life. Dental disease in the United States results in a total annual loss of 2.4 million working days, and 1.6 million school days. While in Thailand per 1000 lost 1900 school hours per year due to dental disease (Sadimin et al., 2021).

In Indonesia, the results of the Basic Health Research which organized by the Ministry of Health showed that 57.4% of the population had oral problems, but only 10.2% received treatment by dental medical

personnel. Of the entire population, 88.8% had dental caries. Although 94.7% brushed their teeth every day, only 2.8% brushed their teeth at the correct time, namely at least 2 times a day in the morning after eating and at night before going to bed (Firdaus et al., 2023).

Based on the annual report by the Garut Regency Health Office in 2023, in Garut Regency TW 1 of the 67 health centers in Garut Regency there are four health centers that have the highest cases of dental caries including the Wanaraja health center (97 people), Kersamenak (40 people), Pasundan (32 people), and Cibatu (11 people). Cibatu (11 people) Judging from this data, the level of tooth decay in children is still relatively high. Based on data from patients who came for examination to the dental clinic at the Wanaraja Health Center in 2022, there is data on the results of dental examinations in children aged 3-6 years with the type of disease diagnosis being dental caries.

Dental health knowledge must be introduced early to children, to know how to maintain good and correct dental health. The role of mothers is very important in paying attention to oral health in children, the impact of a mother who ignores oral health problems in children is a factor of lack of knowledge about oral hygiene. Children's oral health is important to pay attention to and requires immediate

treatment before it is too late (Wali et al., 2023)

Parents, especially mothers, play an important role in developing children's positive behavior towards oral and dental health, parents' participation in maintaining children's oral and dental health can be applied by paying attention to children's behavior regarding oral and dental health and children's diet. knowledge possessed by a mother is very significant in influencing knowledge, attitudes, and behavior of children, Parents must take an active role in nurturing, educating, motivating, and supervising oral and dental health care. Parental assistance is needed to help reduce or remove plaque on the teeth, the selection of the size and fineness of toothbrush bristles also plays an important role in maintaining children's oral and dental health (Santoso et.al 2020).

Mother's role as a motivator in motivating children related to maintaining oral hygiene. The mother's role as an educator is to provide simple knowledge about the maintenance of dental and oral hygiene, Maintenance of oral hygiene or Oral Hygiene can be done by regular dental examinations which can help prevent caries. Oral Hygiene is an action to maintain the cleanliness of the oral cavity to keep it clean and healthy so that it can prevent caries, and bad breath. One way to maintain oral hygiene is by brushing your teeth in 4

appropriate ways, namely the right tool, the right method, the right time, and the right target (Dewi & Ma'ruf, 2021).

Based on the results of research from (Perceka, 2020) the relationship between parental knowledge about dental health and the occurrence of caries in preschool children states that there is a significant relationship between maternal knowledge about child dental care and the incidence of dental caries in children. While the results of research from (Wahyudin & Perceka, 2019), the relationship between maternal knowledge about dental care and the incidence of dental caries in toddlers aged 3-5 years stated that there was no relationship between maternal knowledge about dental care and the incidence of dental caries in children.

Based on the results of preliminary studies at Wanaraja Pubic Health care April 20, 2023 to 15 parents who have children aged 3-6 years with dental caries, it was found that 8 respondents, mothers rarely pay attention to oral hygiene problems in children, 4 respondents, mothers sometimes pay attention to oral hygiene in children and 3 respondent mothers are good at paying attention to oral hygiene in children.

RESEARCH METHOD

The approach used in this research uses a quantitative approach with a cross-sectional research design (Perceka et al.,

2022). The population in this study were mothers who had children aged 3 to 6 years at Wanaraja Public Health Center, totaling 97 children in 2023. The sample was obtained by means of Incidental Sampling. The sample calculation that will be used in this research is 43 people with inclusion and exclusion qualifications:

- 1) Inclusion qualifications for this research:
 - a. Mothers who have children aged 3 to 6 years old
 - b. Mothers are willing to be respondents
- 2) Exclusion criteria in this research are:
 - a. Mothers who do not have children aged 3 to 6 years.
 - b. Mothers are not willing to be respondents.

The data collection technique that will be used in this study uses the technique of collecting answers from questionnaire sheets by giving informed consent to respondents. This questionnaire is done by circulating a list of questions in the form of forms, submitted in writing to a number of subjects to get responses, information, answers, and so on. Then after the data needed in this study were collected, the data processing stage was carried out with steps: editing the collected data, carrying out data coding, entering data in such a way that it is easy to sum, arrange, and present in the

form of tables, figures or graphs, moving data into a computer, and checking data. In order to obtain optimal results, the questionnaire data was then tested using the Pearson product moment formula.

$$r_{hitung} = \frac{n(\sum XY) - (\sum X)(\sum Y)}{\sqrt{\{n\sum X^2 - (\sum X)^2\} \{n\sum Y^2 - (\sum Y)^2\}}}$$

The validity test of the mother's knowledge questionnaire about dental care with the incidence of dental caries in children aged 3 to 6 years was carried out on July 14, 2023 at the Pasundan Health Center with the number of respondents to 20 mothers who have children aged 3 to 6 years. Of the 20 questions that the researchers made, all were said to be valid with a calculated r value ≥ 0.444 . In this study to test the reliability of the instrument the researcher used the Spearman Brown formula because it used a Guttman scale questionnaire.

The acquisition of the reliability experiment on the mother's knowledge questionnaire about dental care with the incidence of dental caries in children aged 3 to 6 years at UPT Puskesmas Wanaraja is said to be reliable with the acquisition of Cronbach's alpha more than 0.7.

1) Data Analysis Technique for Maternal Knowledge Variables

Data analysis for knowledge variables was carried out by tabulation by determining the percentage using the

frequency distribution formula, which is as follows:

$$P = \frac{X}{N} \times 100\%$$

Furthermore, the calculation results are entered into the standard objective criteria, namely: 76 to 100% (categorized good), 56 to 75% (categorized: sufficient), More than 56% (categorized: less).

2) Data Analysis Technique for Dental Caries Occurrence Variables.

Table 1. Dental Caries Measurement

1. Caries (Caries is mentioned if it meets the criteria of points 1,2 and 3.)	a. The teeth appear chalky, blackish brown on the surface of the teeth (tooth enamel) indicating the destruction of tooth enamel.
	b. The tooth appears chalky, blackish brown which has reached the dentin or the middle part between the tooth surface and the pulp.
	c. The tooth appears chalky, blackish brown which has approached or has reached the pulp, resulting in inflammation of the pulp.
2. No Caries (Mentioned as no caries if it meets the criteria of points 4 and 5.)	a. Pure white tooth color
	b. No cavities, colorless, not chalky, not brown or blackish

The diagnosis of the presence and absence of dental caries was determined by the researcher and accompanied by a dental nurse at the Wanaraja Public Health Center.

The bi variate analysis in this research used a chi-square test.

$$X^2 = \sum \frac{(fo - fh)^2}{fh}$$

Decision making on the magnitude of the p value is p value <0.05 then Ho is rejected, meaning that there is a relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years at the Wanaraja Health Center, Garut Regency.

Place and Time The research was conducted at the Wanaraja Health Center and the time of this research was carried out from July 15 to July 29, 2023 at the Wanaraja Health Center.

RESEARCH RESULT AND DISCUSSION RESULT

In this section the researcher presents the results of research that has been conducted using primary data on 43 mothers who have children aged 3-6 years, as respondents regarding the relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years at UPT Puskesmas Wanaraja. This research was conducted in July 2022 at Wanaraja Health Care Center.

1. Respondent Characteristics

Table 2. Frequency Distribution of Children's Gender

Gender Classification of Child's Gender	F	(%)
Male	21	48,8
Female	22	51,2
Total	43	100

Based on table 2, showing the characteristics of child respondents by gender, more than half of the respondents were female as many as 22 respondents (51.8%) and less than half were male as many as 21 respondents (48.8%).

Table 3. Frequency Distribution of Child Age

Child Age Classification Respondent (Year)	F (n)	(%)
3	9	20,9
4	10	23,3
5	12	27,9
6	12	27,9
Total	43	100

Characteristics of respondents in table 3 based on the age of the child. From these results it can be seen that less than half of the respondents were 5 and 6 years old, namely 12 respondents (27.9%), while a small proportion of children aged 3 years were 9 respondents (20.9%).

Characteristics of respondents in Table 3 based on the age group of the mother. From these results it can be seen that less than half of the mothers are in the age group 22-27 years as many as 14

respondents (32.6) and a small proportion of mothers are in the age group 40-46 years as many as 5 respondents (11.6%).

Table 4. Frequency Distribution of Mother's Age

Age Classification of Respondent's Mother (Year)	F (n)	(%)
22-27	14	32,6
28-33	11	25,6
34-39	13	30,2
40-46	5	11,6
Total	43	100

Table 5. Frequency Distribution of Maternal Education

Mother's Education Classification Respondents	F (n)	(%)
Elementary	2	4,7
Junior High	14	32,6
High School	24	55,8
Bachelor Degree	3	7
Total	43	100

The characteristics of the respondents shown in table 5 based on the mother's latest education showed that more than half of the mothers had a high school education level as many as 24 respondents (55.8%). Meanwhile, the smallest part of the mother's education level was elementary school as many as 2 respondents (4.7%).

Table 6. Frequency Distribution of Mother's Occupation

Classification of Mother's Occupation	F	(%)
House Wife	31	72
Labor	6	14
Trader	3	7
Teacher	3	7
Total	43	100

Table 6 shows the characteristics of respondents based on the mother's occupation group. More than half of the mothers worked as housewives, namely 31 respondents (72.1%), while a small proportion of mothers worked as traders and teachers, each as many as 3 respondents (7%).

1. Uni Variate Analysis

a. Maternal Knowledge about Dental Care

Table 7. Frequency Distribution of Maternal Knowledge about Dental Care

Maternal Knowledge about Dental Care	F (n)	(%)
Good	21	48,8
Enough	21	48,8
Less	1	2,4
Total	43	100

Based on Table 7, it shows that of the 43 maternal respondents at Wanaraja Public Health Center who were respondents, had maternal knowledge about dental care in the Kota Kulon Garut Urban Village Area less than half were in the good and sufficient categories with the same number of 21 respondents (48.8%), and a small portion in the poor category as many as 1 respondent (2.4%).

b. Incidence of dental caries in children aged 3-6 years

Table 8. Frequency distribution of dental caries incidence in children 3 to 6 years old

Incidence of Dental Caries in Children 3-6 years	F(n)	%
Caries	27	62,8
No Caries	16	37,3
Total	43	100

Based on Table 8, it shows that of the 43 child respondents at UPT Puskesmas Wanaraja who were respondents, more than half experienced the incidence of dental caries in children aged 3-6 years at UPT Puskesmas Wanaraja in the caries category, namely 27 children (62.8%).

2. BiVariate Analysis

a. The relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years.

Table 9. Relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3 to 6 years

Mother's knowledge about care	Incidence of dental caries in children				
	Caries		No Caries		
Tooth	F	%	F	%	
Good	6	22,2	15	93,8	0,000
Enough	20	74,1	1	6,3	
Less	1	3,7	0	0	
Amount	27	100	16	100	

Based on table 9, it can be seen that out of a total of 43 respondents. Mothers who have good knowledge have children with caries as many as 6 respondents (22.2%) and no caries as many as 15 respondents (93.8%) while mothers who have sufficient knowledge have children with caries as many as 20 respondents (74.1%) and no caries as many as 1 respondent (6.3%) and mothers who have poor knowledge have children with caries as many as 1 respondent (3.7%). knowledge of mothers at UPT Puskesmas

Wanaraja in the moderate category, with the majority of children more than half in the category experiencing dental caries 20 respondents (74.1%).

Based on statistical tests with the Chi-Square test, the p value = 0.000 at $\alpha = 0.05$ because the p value (0.000) < α (0.05) so that H_0 is rejected. Because the p value < 0.05, it statistically states that there is a relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years at Wanaraja Public Health Center.

DISCUSSION

a. Respondent Characteristics

1. Frequency Distribution of Child Gender

This study was conducted on 43 mothers who have children aged 3 to 6 years at the Wanaraja Health Center. The results of the study based on gender showed that more than half of the respondents were male as many as 22 respondents or 51.2%.

2. Frequency Distribution of Child Age

Based on the age distribution of children, it can be seen that less than half of the children aged 5-6 were 12 respondents (27.9%). Generally, children entering pre-school age are very vulnerable to dental caries. Children aged 3-6 years usually like to consume food and drinks according to their wishes. At this age

children often ignore their health, especially dental health. Damage to teeth such as caries, malocclusion, dental plaque, tartar, can affect the health of other limbs, even if the child's teeth hurt, it is likely that the child's appetite will decrease, it needs to be considered early by parents. As role models, controllers, and motivators, parents have an important role for their children's dental health, if not considered, children's dental health will develop into a problem that can interfere with the child's future (Husna & Prasko, 2019).

In the opinion of (Dwimaya & Suyatna, 2020) states that entering preschool age (3-6 years) the risk of children experiencing caries is very high. Milk teeth are more susceptible to dental caries than permanent teeth because the enamel on permanent teeth contains more minerals so it is stronger than milk teeth. This is one of the causes of the high caries rate in children.

3. Frequency Distribution of Maternal Age

Based on the age group of the mother, it shows that the age group of the mother is less than half of the respondents in the age group 22-27 years, namely 14 respondents or 32.6%. As a person ages, there will be changes in the physical and psychological aspects of mental, physical growth in outline there are 4 categories,

namely: changes in size, changes in proportion, loss of old characteristics, the emergence of new characteristics. This is due to the maturation of organ function, in the psychological or mental aspect of a person's level of thinking so that it is more mature and mature (Lestari, 2021).

4. Frequency Distribution of Maternal Education

Based on the level of education, it shows that more than half of the respondents have a high school education, namely 24 respondents or 55.8% respondents. Education can increase a person's insight or knowledge. In general, someone with a higher education will have broader knowledge and a positive attitude compared to someone with a lower level of education.

Based on research (Sari, 2020), it states that education plays a very important role in fostering attitudes, views and abilities, here parents have a high education will be able to provide good direction for children than parents who have low education.

5. Frequency Distribution of Maternal Occupation

Based on table 6, it shows that more than half of the respondents' jobs are housewives, namely 31 respondents or 72.1%. Basically, work is a necessity. By working, families can fulfill family needs, both basic physiological needs such as eating, drinking, shelter, clothing and the

like. As well as social needs, namely needs that arise in the relationship between a person's interaction with the environment to live more properly and can improve family welfare.

A person who works in general will get income, so that all aspects needed, especially in supporting family prevention and treatment, will be fulfilled. This is in accordance with (Rosmalia, 2019), work is a matter of obtaining sufficient income to be able to support raising one's awareness about health, especially oral health.

b. Uni Variate Analysis

1. Maternal Knowledge about Dental Care

Based on Table 7, research data from 43 respondents were found to be less than half in the good and sufficient categories with the same number of 21 respondents (48.8%), and a small proportion in the poor category as many as 1 respondent (2.4%). So it can be concluded that the mother's knowledge about dental care at Wanaraja Public Health Center has good and sufficient criteria equally. Knowledge is the result of knowing, and this occurs after people perceive a certain object. Factors that affect the level of knowledge include education, age, experience, information, environment. To determine the quality of a person's level, it is divided into 3 levels, namely the level of knowledge is good, sufficient, lacking. The picture of understanding knowledge at the cognitive

level which is a very important domain for the formation of one's actions (over behavior). Knowledge also influences a person to do something. Behavior based on knowledge will be more lasting than behavior that is not based on knowledge (Husna & Prasko, 2019).

c. Incidence of Dental Caries in Children 3-6 Years of Age

Based on table 8, dental caries in children is greater than half, namely 27 respondents (62.8%). This is in line with research where 48 respondents (50.0%) experienced dental caries. This is caused by several factors including lack of knowledge about dental care, lack of parental supervision of their children, eating and drinking sweets too often and not brushing their teeth after eating and before bed.

c. Bivariate Analysis

1. The relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3 to 6 years.

Based on table 9, the results of statistical tests with the Chi-Square test obtained a p value = 0.000 at an α value = 0.05 because the p value (0.000) < α (0.05) so that H_0 is rejected. Because the p value < 0.05, it statistically states that there is a relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years at UPT Puskesmas Wanaraja. Based on the

results of the study, it shows that mothers who have good knowledge have children with caries as many as 6 respondents (22.2%) and no caries as many as 15 respondents (93.8%) while mothers who have sufficient knowledge have children with caries as many as 20 respondents (74.1%) and no caries as many as 1 respondent (6.3%) and mothers who have poor knowledge have children with caries as many as 1 respondent (6.3%).

Children with caries as many as 1 respondent (3.7%). This shows that mothers who have good knowledge have children with a small amount of caries in agreement with the results of research according to (WAHYONO, 2022), which states that knowledge is an important factor because good hygiene will minimize or minimize the presence of bacteria that have developed rapidly, and in the end, maximum hygiene will prevent someone from getting sick, one way is brushing teeth.

Referring to the results of this study, it can be concluded that there is a relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3-6 years because the good and bad quality of knowledge will affect whether or not the mother understands the importance of brushing teeth for children (Yuana & Basuki, 2022). The higher a person's

knowledge, the easier it is for someone to receive information. Someone who has a good level of knowledge can receive information or know how to maintain good dental hygiene so as to prevent dental caries. Whereas someone who has a low level of knowledge will find it difficult to receive information or lack of information about good dental care and can cause dental caries in children.

CONCLUSION

The results of the assessment and discussion of the study can be concluded that the level of maternal knowledge about dental care, less than half of mothers with a good level of knowledge and less than half of mothers who have sufficient knowledge while a small proportion of mothers who have a poor level of knowledge. Based on the incidence of dental caries in children aged 3 to 6 years, it can be seen that more than half of the children experience dental caries while less than half of the children do not experience dental caries. And there is a significant relationship between the relationship between maternal knowledge about dental care and the incidence of dental caries in children aged 3 until 6 years at Wanaraja Public Health Care.

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