Examining Literacy of Caregivers & Oral Health Status of Children

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Abstract

Background: Oral health literacy (OHL) is the measure of how well an individual collects and comprehends oral health information, as well as his or her ability to subsequently make advisable oral health care decisions. Measures for OHL include a number of validated instruments from the literature, such as the Rapid Estimate of Adult Literacy in Medicine and Dentistry (REALM-LD). Oral health status (OHS) is the measure of one's current state of oral health, based upon clinical examination, evaluation of dental, medical and social history, and including results from and stability of previous treatment. In this rapid review, we examined literature in PubMed to determine whether there is credible evidence of a correlation between caregiver oral health literacy and children's oral health status.

Methods: We searched using applicable MeSH subject heading and keyword terms, and no filters were applied. Two blinded reviewers screened 85 articles. Only peer-reviewed articles were included in the review. This review only examined literature pertaining to children up to 11 years old, that was published within the last 15 years. Ultimately, 10 articles met the inclusion criteria, which were established a priori. The credibility of the evidence of the included articles was determined using the appropriate Joanna Briggs Critical Appraisal Checklists.

Results: Positive correlations between caregiver OHL and children OHS were demonstrated across 8 of the 10 articles. There is credible evidence that caregiver OHL is correlated with children OHS. The reviewed literature supports that a caregiver’s limited OHL may affect a child’s OHS negatively. Language, socioeconomic status, education, occupation and other factors can all influence both OHL and OHS of parents and their children.

Discussion

Positive correlations between caregiver OHL and children OHS were demonstrated across 8 of the 10 articles. Though there are many variables that can contribute to OHS, these findings are consistent with caregiver OHL being associated with children OHS. These results are promising and more research into the association between OHL and OHS in these groups is needed to more fully understand the linkages.

Methods

- Searches conducted in MEDLINE via PubMed.
- A combination of MeSH subject heading terms and keyword terms discussed by the review team were used. No filters were applied to the search.
- The PubMed search produced a total of 85 articles.
- After title/abstract screening, 31 items were included in the full-text screening.
- Two blinded reviewers (VM and BS) completed both rounds of screening separately. Conflict resolution occurred through discussion between the two reviewers.
- 10 articles were selected from full-text screening for this rapid review.

Exclusion Criteria

- Only included peer-reviewed, scientific studies.
- Only included studies that specifically addressed caregiver OHL and OHS in children.
- Only included children through 11 years of age (caregiver age not limited).
- Only included studies published in previous 15 years.

Conclusions

- This review indicates that caregivers with better OHL have children with better OHS, which has widespread public health implications.
- The variety of populations, cultures, and countries showing the same result tends to substantiate the correlation.
- Though a variety of validated OHL instruments were utilized, the majority of findings were in agreement.
- Though there are many variables that can contribute to OHS, these findings are consistent with caregiver OHL being associated with children OHS.

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