

The Relationship Between The Role of The Teacher and The Dental and Oral Hygiene Status of Children With Special Needs in SLB Bukesra Ulee Kareng Banda Aceh

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e-ISSN: 2830-7186

DOI Prefix: 10.30867

Published online Agustus 2022

Received: 19 Agustus 2022

Accepted: 21 Agustus 2022

Published: September 2022

Keywords:

Keywords 1; Special Needs Children

Keywords 2; Promotor

Keywords 3; Oral Hygiene

ABSTRACT

Children with special needs are special characteristics that are different without always showing mental, emotional or physical disabilities. Teachers are the best promoters of educational activities because they are familiar with the methods of educating and motivating school students. Based on the initial examination of the dental and oral hygiene of students at SLB Bukesra Ulee Kareng Banda Aceh, the results obtained were from 10 children examined; it was known that 6 children had moderate criteria with an average of 2.3 and 4 of them had poor criteria with an average of 4.1. This research is analytic with cross-sectional design. The population in this study were all teachers and students as subjects. Determination of the sample in the study using a saturated sample technique are 20 teachers and 43 students. The research was carried out at the Bukesra Special School Ulee Kareng Banda Aceh on May 24, 2021. The instruments used in this study were questionnaire sheets, diagnostic sets and OHI-S KSP sheets. The results showed that the teacher's role as a motivator and educator was not good enough to show poor oral and dental hygiene experienced by 8 respondents (61.5%). Statistical test results obtained, p. Value 0.01. Based on the results of the study, it can be concluded that there is a significant relationship between motivators and educators with the dental and oral hygiene of children with special needs. It is hoped that the teacher will further improve in motivating students towards a better direction and carry out good education and in accordance with the child's condition, in explaining the maintenance of dental and oral hygiene.



INTRODUCTION

Health Law Number 36 of 2009 has stated that health is the right of every human being and one of the aspects that the Indonesian nation aspires to in the Act and Pancasila. Health is built for the realization of a high degree of health. Promotive, preventive, curative and rehabilitative efforts can be carried out in order to create a high degree of health and be carried out in an integrated and sustainable manner (1).

Child health development in the health development program is focused on reducing infant mortality and improving children's quality of life. In order to improve the quality of life of children, various child health programs are developed and implemented without discrimination, which means providing health services to all children, including children with special needs, whether in special schools or other institutions, as well as those in the community. School health is organized to improve the ability of students to live healthy lives in a healthy environment so that students can learn, grow, and develop harmoniously and as high as possible into quality human resources, which is held through formal and informal schools or through other educational institutions. Therefore, health services for children with disabilities in Special Schools (SLB) must be carried out the same and equally as those given to other children.(2).

Interventions for school students are carried out with the aim that learning about dental hygiene and health can be carried out as early as possible to increase students' knowledge about the importance of maintaining health, especially dental and oral health as well as body and environmental health in general. In addition, the teacher component is the best promoter in educational activities because they are familiar with the methods of educating and motivating school students(3).

The teacher is a person who professionally educates who has the role of educating, teaching, guiding, directing, training, assessing, and evaluating students in early childhood education through formal education, basic education, and education. Teachers also play a role in taking promotive actions as teachers' efforts to improve student health, especially teeth and mouth with training to maintain dental and oral health. Teachers have a role in inviting and providing dental and oral health education to students so that students are more motivated, because during elementary school students put their trust in teachers and their parents.(4).

Physical education and sports teachers who have been trained by the community health center and given the cultivation of positive attitudes towards the principles of healthy living and improving skills in carrying out educational activities to students. In addition, teachers are also trained on simple student health care and assistance. While the material that must be taught in dental and oral health education to students includes providing knowledge about dental and oral health, exercises or demonstrations on how to maintain oral hygiene and health, brushing teeth together at school, as well as individual dental and oral health counseling. (5).

Children with special needs have lower levels of oral health and hygiene when compared to normal children. Children with special needs cannot carry out activities of daily life normally so they need help from other people around them. Children with special needs have mental, physical and emotional limitations that are different from normal children, so they need help in keeping their teeth and mouth clean (6).

Social problems in children with special needs affect the educational needs of these children, including children with special needs who have insufficient knowledge, especially knowledge in the field of dental and oral health. Knowledge of how to maintain low dental health supports the high caries rate in children with special needs. This means that children with special needs require more types of health services than normal children in general. Regarding dental and oral problems in children with special needs, the status of dental caries in children with special needs at SLB YPAC Manado with a DMF-T index of 4.4 is in the moderate category. (6).

Interviews with teachers at SLB Bukesra Ulee Kareng Banda Aceh regarding their efforts to maintain oral and dental hygiene stated that teachers still try their best to teach students about dental and oral health but focus more on education and train children's motor skills so that they can adapt to the education provided. given, for maximum dental health education carried out by health workers in the UKGS program which is carried out once a month.

Initial examination of the dental and oral hygiene status of children with special needs at the Bukesra Ulee Kareng SLB Banda Aceh, the results obtained were from 10 children examined, 6 children with moderate criteria with an average of 2,3 and 4 of them with poor criteria with an average average 4.1.

MATERIAL AND METHOD

This type of research is analytic, namely knowing the relationship between the teacher's role and the dental and oral hygiene status of children with special needs in SLB Bukesra Ulee Kareng Banda Aceh in 2021. The design in this study used a cross-sectional technique with a cross-sectional approach. The sample size is 20 teachers and 43 students with special needs using the saturated sample technique which was carried out at the Bukesra Ulee Kareng Special School Banda Aceh in March 2021. The instruments used were questionnaire sheets, KSP and diagnostic sets. Data analysis used Chi-square statistical test using SPSS version 21 computer application, degree of confidence 0.05

RESULTS

Based on the results of research conducted starting on May 24, 2021. The sample in this study was 20 teachers and 43 students at SLB Bukesra

Ulee Kareng Banda Aceh, where data were collected using questionnaire sheets to determine teacher motivators and educators as well as OHI-S examinations on students. at Bukesra Special School Ulee Kareng Banda Aceh, you can see the description of the research results below.

Teacher's Role as Motivator and Educator

Tabel 4.1 Frequency Distribution of Teacher's Role as Motivator and Educator About Maintaining Dental and Oral Hygiene of Students at SLB Bukesra Ulee Kareng Banda Aceh Year 2021

No.	Teacher's Role as Educator	Frekuensi	Persentase (%)
1.	Good	8	40
2.	Fair	12	60
Total		20	100

Based on Table 4.1 above, it shows that the teacher's role as a motivator and educator in maintaining oral and dental hygiene is dominant in the unfavorable category as many as 12 respondents (60%).

Oral Hygiene

Tabel 4.2. Frequency Distribution of Dental and Oral Hygiene Students at Bukesra Special School Ulee Kareng Banda Aceh

year 2021

No	Oral Hygiene	Frekuensi	Persentase (%)
1	Good	4	9,3
2	Fair	15	34,9
3	Poor	24	55,8
Total		43	100

Based on Table 4.2, it shows that the dental and oral hygiene of the students are mostly in the

bad category, totaling 24 respondents (55.8%) and the least being in the good category with 4 respondents (9.3%).

Bivariat Analysis

Tabel 4.3. The Relationship of the Role of Teachers as Motivators and Educators with Dental and Oral Hygiene Students at SLB Bukesra Ulee Kareng Banda Aceh

Teacher's Role as Motivator and Educator	Oral Hygiene			p
	Good (%)	Fair (%)	Poor (%)	
Poor	0	8	5	0,01
GAD	2	0	5	
Total	2	8	10	

Based on Table 4.3, it shows that the teacher's role as a motivator and educator is not good, indicating that the dental and oral hygiene experienced by students is in the moderate category, namely 8 respondents (61.5%).

Statistical test results obtained p-value 0.01 shows < 0.05 it can be concluded that Ha is accepted and H0 is rejected, meaning that there is a significant relationship between motivators and teacher educators with student dental and oral hygiene. It can also be interpreted that students' oral and dental hygiene have a correlation with teacher motivators and educators. Statistically, there is a significant relationship between motivator and educator, but in practice the teacher is not directly related.

DISCUSS

The results of the research that has been stated, it can be described the discussion of the relationship between the teacher's role as a motivator and educator with the dental and oral hygiene of students as follows:

Based on the results of statistical tests, the p-value of 0.01 shows < 0.05, it can be concluded that Ha

is accepted and H0 is rejected, which means that there is a significant relationship between the teacher's role as a motivator and educator with the dental and oral hygiene of students. It can also be interpreted that students' oral and dental hygiene have a correlation with teacher motivators and educators. The author argues that the motivators and educators of teachers who are not good have an effect on poor dental and oral hygiene experienced by students and vice versa if the teacher's role as a teacher motivator about good oral hygiene will have a positive impact on student dental and oral hygiene. The efforts of teachers in schools in giving explanations about maintaining oral hygiene are in the poor category, only 28.6% of teachers try to provide oral education about dental and oral health in the hope that children understand the maintenance of oral hygiene independently by doing special techniques in conveying various materials so that children understand the material presented by the teacher.

This is not in line with the theory proposed by Hasibuan(7), as an educator, a teacher is obliged to provide health education to his students in instilling healthy behavior, resulting in behavioral changes as expected in achieving optimal health levels. How to educate children and their habits can be used as examples for children. Teachers have the most role in realizing and developing health in general and maintaining dental health in schools in particular.

According to research Hardiani et al. (8) stated that parenting is a determining factor for the development of independence. Independence has an influence on the child's ability to maintain personal hygiene. Dental and oral health education and dental health services greatly affect children's oral hygiene.

According to Soenarjo (9) the role of the teacher in School Health Efforts is very important in learning health in the school environment, in this case the teacher plays an active role through the delivery of lessons in class and through health education to students. This can help students to be more concerned about individual health.

According to Hutabarat, 2009 teachers can act as counselors, givers of instructions, and managers in showing something good, for example in dental care. School teachers have an influence that tends to be relatively the same as parents but is relatively dominant in UKGS activities compared to most parents.

The results of other studies stated that the teacher's role had a positive influence on learning outcomes. The results of the hypothesis test show that there is a significant effect with a significance value of F of 0.000 which is lower than 0.05, indicating that Ha is accepted(10).

The results of other studies stated that the teacher's role had a positive influence on learning outcomes. The results of the hypothesis test show that there is a significant effect with a significance value of F of 0.000 which is lower than 0.05, indicating that Ha is accepted (11).

This is in accordance with the theory put forward that the teacher as an educator, in providing health education to children, instills healthy behavior, so that behavioral changes occur as expected in achieving optimal health levels.

CONCLUSION AND REKOMENDATION

Based on the results of research and discussion, it can be concluded that there is a relationship between the teacher's role as a motivator and educator with the dental and oral hygiene of students.

It is expected that teachers will further improve in motivating students towards better and better education and in accordance with the condition of children in explaining the maintenance of dental and oral hygiene. It is necessary to increase counseling about dental and oral health at foundations/schools for children with special needs by involving dental and oral health workers in the working area of the related health center to improve the dental and oral health of students in Special Schools (SLB).

REFERENCE

1. Kemenkes RI. Undang-Undang Kesehatan No.36 Tahun 2009 tentang Kesehatan [Internet]. Vol. 5, Kementerian Kesehatan RI. 2009. p. 12–42.
2. Harvey J, Delfabbro P. Psychological resilience in disadvantaged youth: A Critical overview. *Aust Psychol.* 2011 Feb 2;39:3–13.
3. Riolina A. Peran Guru dalam meningkatkan kesehatan gigi dan mulut siswa di Sekolah Dasar. *J Ilmu Kedokt Gigi.* 2017;1(2):51–4.
4. Veiga N, Pereira C, Amaral O, Ferreira P, Correia I. Oral Health Education : Community and Individual Levels of Intervention. *Ohdm.* 2015;14(2):129–35.
5. Sulastri S. Pengaruh pendidikan kesehatan terhadap sikap dan perilaku dalam memelihara personal hygiene gigi dan mulut pada anak usia sekolah di SD Negeri Payung. *Care J Ilm Ilmu Kesehat.* 2018;6(1):92.
6. Sengkey MM, Pangemanan DHC, Mintjelungan CN. Status Kebersihan Gigi Dan Mulut Pada Anak Autis Di Kota Manado. *e-GIGI.* 2015;3(2).
7. Hasibuan DF. Hubungan peran ibu dalam membersihkan rongga mulut dengan pengalaman karies anak umur 1-3 tahun di Desa Paya Geli. Universitas Sumatera Utara; 2010.
8. Hardiani A. Hubungan peran ibu dalam membersihkan rongga mulut dengan pengalaman karies anak umur 1-3 tahun di Desa Paya Geli. Universitas Jember; 2014.
9. Dharmawati IGAA, Wirata IN. Hubungan Tingkat Pendidikan, Umur, Dan Masa Kerja Dengan Tingkat Pengetahuan Kesehatan Gigi Dan Mulut Pada Guru Penjaskes Sd Di Kecamatan Tampak Siring Gianyar. *J Kesehat Gigi.* 2016;4(1):1–5.
10. Fitriana M. Penggunaan Strategi Pembelajaran Inkuiri Untuk Meningkatkan Metakognisi Siswa Sma. *J Inov Pendidik Kim.* 2016;10(1):1702–11.
11. Budiharto. Pengantar Ilmu Perilaku Kesehatan dan Pendidikan Kesehatan Gigi. Jakarta: EGC; 2010.