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Report

A Dental Health Education Video for Nigerian Children in the Yoruba Language

***Bankole O.O. *Ibiyemi O and *Oke G.A.**

**Departments of Child Oral Health and *Periodontology and Community Dentistry,
College of Medicine, University of Ibadan, Ibadan, Nigeria*

ABSTRACT: The development of a video titled “*Itoju Eyin*” (meaning care of the teeth) was prompted by research findings which revealed poor oral hygiene among Nigerian children from the lower socioeconomic class. Videos have been employed as a medium of dental health education and research has shown them to be useful and valuable visual aids. This may be attributed to the fact that what is seen is usually retained better having a lasting impression on the target population. The video was produced in the Yoruba language which serves as a culturally appropriate dental health education tool for children particularly in south western Nigeria. The video particularly targets children from the lower socioeconomic class

Keywords: Dental Health Education Video, Nigeria, Children.

INTRODUCTION

Despite vast improvement in global oral health, problems still persist in many populations around the world particularly among the underprivileged (Peterson2004).

Even though many children have signs of gingivitis, oral hygiene has been found to be poor among children of the lower socioeconomic class.

In a study investigating oral hygiene practices, oral cleanliness and oral periodontal treatment needs in 12 year old children in Ghana by Addo –Yobo et al,(1991), children in urban areas particularly those attending private schools had better oral hygiene and lower periodontal treatment needs than those in rural areas. Similarly, children from the higher socioeconomic status in Tanzania have been reported to have a lower prevalence of calculus than the less privileged ones (Frenken et al,1991).

Findings in Nigeria have been in consonance with these reports as social class has been found to be related to level of oral hygiene (Noah, 1981). Aderinokun et al,(1999), in studying the effect of Nigerian chewing sticks on oral health revealed that 21.6% and 8.4% respectively had calculus scores of 2 and 3 respectively. Sofola et al(1994) in assessing oral health and periodontal treatment needs of urban and rural school children in Lagos, found poorer oral hygiene in children from rural schools. A study of oral hygiene and nutritional status of children aged 1-7 years in a rural community in northern Nigeria by Okolo et al,(2006) revealed that 55.2% and 12.6% of them had plaque/debris index of 2 and 3 respectively. Consequently, many researchers in oral health in Nigeria have concluded that there is a clear need for oral health programmes targeted at the populace especially children in the low socioeconomic group. Oral health programmes have been carried out in schools in Nigeria but most have been delivered verbally with demonstrations and posters.

Videos as a medium of dental health education have been employed in many countries and research has revealed them to be useful and valuable visual aids and high levels of effectiveness have been demonstrated(Laiho et al, 1993; Paulin-Palokas et al,1997; Alsada et al,2005; Chalmers et al, 2005). This may be attributed to the fact that what is seen is usually retained better having a lasting impression on the target population. However, there have been no reported

**Address for Correspondence (e-mail):*

bumbank2002@yahoo.com

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studies documenting a video developed in a local Nigerian language as a dental health educational tool. This article describes the rationale behind the choice of a culturally appropriate health educational video and the process that went into the finished work.

Background.

A twenty minute video in the Yoruba language titled "Itoju Eyin" (meaning care of the teeth) was developed for children particularly from the lower socioeconomic status, as a dental health education tool. The purpose of the video is to improve oral hygiene in children by :

- Highlighting the causes of poor oral hygiene
- Demonstrating the proper method of tooth brushing
- Educating about ways of preventing poor oral hygiene

The home video trade has thrived in recent times in Nigeria and the populace especially the lower social class appear to have a greater preference for local films. Children too have been observed to spend much time watching these videos either in their homes or the neighbourhood. Furthermore, pictures are better than words the authors thought that videos will be a more colourful and relaxing ways to catch their attention. It has been proven that people are usually more captivated with health promotion messages grounded in a story set in their own social and cultural context (Mathews et al, 2002) Thus, the cast consisted of entirely of artistes who appear in the local home videos often watched by these children.

Creating the story

Based on research findings carried out in Nigeria which revealed poor oral hygiene among children particularly in the lower social class, a storyline was developed by the authors to address this problem. To ensure that the message was delivered in an interesting and entertaining manner the advice of a professional scriptwriter was sought and screenplay written. The screen play was rewritten several times over to improve dramatization, clarity, structure, character, dialogue and overall style.

The story is about two contrasting families from low socioeconomic backgrounds. The first is *Kunle's* family where there is neglect of oral hygiene resulting in very poor oral health. Consequently *Kunle* develops dental problems and is taken to the dentist who counsels them about causes and prevention of oral diseases. In addition, the dentist advises *Kunles* mother to attend a local community health centre where health talks are given regularly to mothers.

The second is *Bola's* family in which healthy diet is consumed and good care of the teeth is taken

resulting good oral hygiene. The last scene shows *Kunles* mother attending a community health centre where oral health education given and basic oral hygiene methods demonstrated.

Video production

The video was designed and planned. A production budget was drawn up. Preparations were made to shoot the film. Casts were selected for age, appearance and personality. Locations selected included two household compounds in Idikan (a sub-urban area in Ibadan), a primary health care centre, and a building set as a community health care centre. Filming lasted one week and wide, medium and close shots were taken. Each take of the shot was marked on a clapperboard which helped the editor keep track of takes in the post-production. The film was edited. A sound mix comprising sound effects, background sounds and music as well as computer graphic effects were digitally added. The video was previewed among some children and their teachers in a public primary school. The feedback resulted in further shooting to effect correction.

The final version of the video has since been shown to children in some public primary schools in suburban areas of Ibadan. An assessment of the impact of this initiative is being carried out. It is hoped that it will be translated into the other two major Nigerian languages and viewed in other states in Nigeria.

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References

- Addo –YoboC, Williams SA, Curzon ME(1991):** Oral hygiene practices, oral cleanliness and periodontal treatment needs in 12 year old urban and rural children in Ghana. *Community Dent Health*, 8: 155-162
- Aderinokun GA, Lawoyin JO, Onyeaso CO(1999):** Effect of two common Nigerian chewing sticks on gingival health and oral hygiene. *Odonto-stomologie Tropicale*, 22: 13-18
- Alsada LH, Sigal M J, Limback H, Fiege J, Kulkarni GV(2005):** Development and testing of an audiovisual aid for improving infant oral health through primary care giver education. *J Can Dent Assoc*, 71: 241, 241a-241n
- Chalmers JM, Robinson J, Nankivell N(2005):** The practical oral care video evaluation of a dental awareness mouth initiative. *Aust Dent J*, 50:75-80.
- Frenken JE, Truin GJ, Van't Hoff, Konig(1991):** Calculus, gingival bleeding and type of tooth cleaning device in a Tanzanian child population 1984, 1986, 1988. *J Clin Periodontol*, 8:592-597.
- Laiho M, Honkala E, Nyyssonen V, Milen A(1993):** Three methods of oral health in secondary schools. *Scand J Dent Res*, 101: 442-447.

Mathews C, Guttmacher SJ, Coetzee N, Magwaza S, Stein J, Lombard C,

Goldstein S, Coetzee D(2002): Evaluation of a video based health education strategy to improve sexually transmitted disease partner notification in South Africa. *Sex Trans Inf* , 78:53-57

Noah MO(1981): Caries experience and state of oral cleanliness in 4 year old children attending private schools. *J .Int Ass Dent Child*, 12: 17-23.

Okolo SN, Chukwu GA, Egbuonu I, Ezeogu FA, Onwuanaku C, Adeleke OA, Hassan A, and Ngoe-Nesoah A (2006): Oral Hygiene and Nutritional Status of Children

Aged 1–7 Years in a Rural Community. *Ghana Med J*,40(1): 22–25.

Paulin-Palokas T, Nordblad A, Remes-Lyly T(1997): Video as a medium of oral health education for children with mental handicaps. *Spec care Dentist*, 17: 211-214.

Peterson PE(2004) : Improvement of oral health in Africa in the 21st century-role of WHO global health programme. *African Journal of Oral Health*,1: 2-4.

Sofola OO, Shabar OP, Jeboda SO.(1994): Oral hygiene and periodontal treatment needs of urban school children compared with those of rural school children in Nigeria. *Afr Dent J*, 8: 20-25.