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Verbal Communication with Second Language Toward Children Fear in Dental Care

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ABSTRACT

Good verbal communicating with children can use phrases or words - a substitute word that connotes not painful and terrible (second language), so that the child can receive dental treatment. This study to know the effect of using a second language toward children fear in dental care. Samples are 4-6 years old pediatric patients who came in dental clinic Listyo Rinawati on Johor Malaysia. Measurement of children fear on dental care is scaled Venham's Clinical Ratings. The results showed in the intervention group second language is 100% of children experience fear level changes according to the scale Venham's Clinical Ratings. There are 45% who were initially reluctant to change it to relax. In children without giving a second language showed 35% had only reluctantly and turned decreased by 25%. The results of the independent T-test are sig. 0.00 < 0.05 which means that there are differences in fear in the two groups of different treatments. Verbal communication with a second language may help overcome the fear of the child before and during dental treatment, dental treatment of children that will be successful and the child will not be afraid to make a visit next dental care.

Keywords: second language; Children fear

Introduction

The approach that can be done by dentists in managing children's behavior includes communication, modeling, tell show do, HOME, distraction, desensitization, sound control, and reinforcement (Mappahijah, 2010; Budiyaniti and Heriandi, 2001; Robert et al., 2010). The most common and easy approach to children is good communication and adapted to the level of understanding of children. Communication with children verbal way that is through spoken language. Many ways to start verbal communication, for example for small children can be asked about new clothes, brother, sister, objects or pets. Sometimes a second language is needed, especially for small children, for example, to do anesthesia on the teeth before extraction can be used to terminate the teeth. While nonverbal

communication can be done for example by making eye contact with a child, shaking a child's hand, smiling warmly, holding a child's hand before sitting in a dental care chair, and others (Chadwick and Hosey, 2003 in Permatasari, 2014).

Methods

There are 2 groups, namely the treatment group in the form of second language verbal communication and the control group in the form of communication without a second language. The population of this study is the total population, namely all children 4-6 years who came to the Dental Clinic in Listyo Rinawati on Johor Malaysia. There were 40 children in the treatment group and 40 children in the control group.

Verbal communication is a method of approaching children in dental care who experience

fear by conveying verbally from the beginning of the child entering the dental ward until completion of dental care. As for the use of second language is the language or word used by doctors / dental nurses in the form of vocabulary substitutions that have a frightening/horrible/creepy connotation into pleasant language/words according to the level of understanding of the child. The definition of second language is interpreted as a second language or a substitute language. Children's fear of dental care is measured by instruments according to the Venham's Clinical Ratings scale (Berge et al. 1999). Data obtained from observations of facial expressions were analyzed by descriptive analysis. Statistic analysis used the independent T-test.

Results and Discussion

The normality test was carried out the data using the Kolmogorov smirnov test with the results of sig. > 0.05. The results of the independent T-test are sig. 0.00 < 0.05 which means that there are differences in fear in the two groups of different treatments.

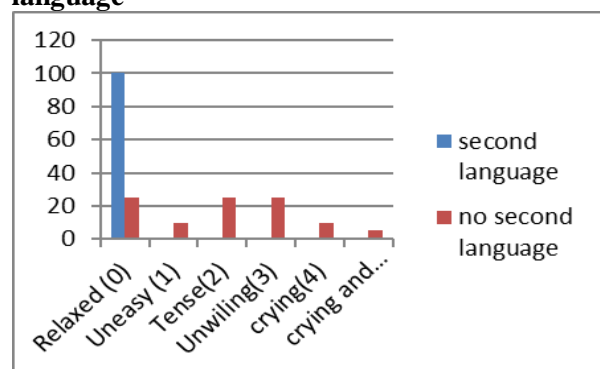
Table 1.

Frequency distribution of respondents by sex and type of dental care in the group of children who received a second language intervention

Treated	sex	
	male	female
Extraction	45 %	44 %
Scalling	18 %	22 %
Topical Fluoride	27 %	11 %
Filing	0 %	11 %
Fissure sealing	9 %	11 %

Picture 1.

Differences fear of children on dental care after using a second language and do not use a second language



In this study changes in the level of fear of children in dental care towards 100% of pediatric patients became relaxed. Oral communication delivered by the dentist or dental nurse in the treatment procedure will reduce the pressure of fear of the child. Communication that is used uses the term to replace scary / terrible words (second language). Examples of words that are often used by dental chairs are 'airplanes', tooth extraction is 'cleaning teeth', dental bur is 'bamboo propeller', and so on.

Talking to children must be adjusted to the level of understanding so that verbal communication in the form of a second language is needed (Budiyanthi & Heriandi, 2001). Verbal communication effectiveness in the behaviour management of the children is tremendous, along with patient satisfaction. Even any instruction advised by the paediatric dentist depends upon how the parental attitude will be towards the dentistry (Padmanabh & Dave, 2021).

Some second languages that can help dentists in doing dental care in children include : performing anesthetics before tooth extraction can be used as the term 'put your teeth to bed', Do cleaning with a brush and pumice can be used the term 'bathing and clenching the teeth', then drying with cotton pellets can be used the term 'to handle teeth', drilling to remove tissue of dental caries can be used as the term 'clean house germs'.

Effective communication between dentists, children and parents of patients is an important component in order to grow the patient's trust. An effective relationship between the three can reduce doubts about dental care in children. If the dentist is responsive to the response of the child and parents to the information conveyed, the child and parents will be more open in listening and learning. Pedodontic Treatment Triangle is a description of the relationship between components in the pedodontic treatment triangle where each component is closely related, the position of the child at the top of the triangle and the position of parents and dentists on each corner of the triangular leg. Reciprocal (Muthu, 2009 and Rao, 2008).

Conclusion

Verbal communication with a second language may help overcome the fear of the child before and during dental treatment, dental treatment of children that will be successful and the child will not be afraid to make a visit next dental care.

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