

Social Networking and Oral Health Education

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Abstract

Boom in information technology and computer sciences have changed the life style quotient of people. Medical and dental field have not been spared with its influence in academics to microsurgical techniques. The key factor of patient communication has been also made easy with new advances. With advances in technology came the social networking sites, which people are hooked to and are in contact with the near and dear ones. These sites have become a channel for many companies to advertise, recruit, educate and market their products. What has been the influence of this sector to oral health and especially oral health education has never been pondered especially in developing countries where most of its people live in rural areas. However, we discuss the social networking sites with their influence in health and oral health with emphasis on oral health education which is the hour of need in India with increasing population having access to social networking sites.

Keywords: Social Networking, Websites, Oral Health, Oral health education, Information technology, Media

Introduction:

Over the past two decades communication has changed beyond imagination. Mobile phones, portable computing devices and the internet have all become widely accessible and provide entirely new avenues to access information, connect, and communicate regardless of geographic location. The proliferation of modes and speed of communication and the reflexivity of knowledge all have important implications for health promotion. Individuals continually examine and change their practices in light of incoming information from a variety of sources.^{1,2} How best to present and deliver information in this rapidly changing environment is a key challenge for health promoters.

As the use of newer communication technologies continues to exponentially increase, health promotion will inevitably expand out from the 'old' media (TV, radio, billboards) and into the 'new' (mobile telephones, social networking sites).³ Today almost everyone has web access regardless of age, academics, or economics. We have seen

9-year-olds on planes with smart phones using Skype, and great-grandmothers exchanging photos via e-mail. You can safely assume that most of your target population can find links on the Internet.⁴ While not all information available on the superhighway is true, there are ways to guide your patients to the sites you trust. Hence a review was planned to know how the social networking can have impact on oral health education and the incorporation of this to oral health education.

Methodology:

A thorough search was made on the pubmed and other reliable sources. 35 relevant articles were screened for the eligibility for the manuscript. Among the 35 related articles; 16 articles were reviewed and rest were excluded as they were mainly inconclusive or were repetition of the previous studies. This subject is still in its infancy and less of literature available for the same.

Discussion:

The changing technology, such as telephone networks and the internet, has received attention in medical field applicable to HIV education,^{2,3} supporting isolated and lonely older people,⁴ genetic testing,⁵ fractures,⁶ mental health,⁷ prepartum cardiomyopathy,⁸ diabetes,⁹ child health care,¹⁰ sexual health¹¹ etc. The technologic advances in the digital media, including computers, mobile phones, and the internet, that have greatly expanded opportunities to deliver evidence-based HIV education, prevention, and treatment programs. Behavioural interventions using digital media have been developed in many forms, ranging from complex computer-tailored multimedia interventions that take into account individual behaviours and stages of change to brief untailored video interventions.

Though many websites are present for oral health only two studies have been reported, i.e., one on oral lichen planus,¹² and the other on oral leukoplakia.¹³ One study assessed the web-based training (wbt) on resident knowledge of preventive oral health and compare the addition of hands-on training (hot) to wbt on resident skills, confidence opinions, and practice. The authors concluded that both instructional methods resulted in increase in knowledge, efficacy, and practice of preventive oral health.¹⁴

The main goal of social networking for oral health should be to provide accurate, clear, and concise health information from multiple points of view. Online and off-line behavioural interventions using digital media range from computerized multimedia interventions that take into account individual behaviours to brief untailored video interventions. Numerous web sites facilitate access to care by providing a variety of services, including location of and linkage to testing and treatment sites. Treatment and adherence programs that use online medical records text messaging, paging, and tablet computer-based counselling tools are also being developed. Through a quantitative and qualitative analysis of the web sites offering such tests, it seems that these companies target a triple market based on: the "healthism" which raises health and hygiene to the top of the social values; the contemporary demands of the users to become actual actors of health decisions; and finally on the need for bio-social relationships. These three

commercial strategies underlie various ethical and societal issues justifying a general analysis. It also eliminates the social, language, and cultural barriers that otherwise could impede the effectiveness of oral health education. Text messages are viewed as an acceptable and 'personal' means of health promotion, with participants particularly valuing the informal language. Recipients are more likely to remember and share messages that were funny, rhymed and/or tied into particular annual events.¹⁵

Some of the websites which are already present for oral health education.

- 1) April 25, 2011 -- The ADA has entered into an agreement with Sharecare, an online resource that allows the public to submit health-related questions and have them answered by health professionals, to provide dental-specific expertise to the site.
- 2) Young Dental has produced a brochure to help patients better understand the oral-systemic health link. The brochure can be downloaded free at <http://www.youngdental.com/pdf/OralHealthLit.pdf>, or by visiting the Young Dental site and clicking on the Oral Systemic Health Brochure link.
- 3) The Oral Cancer Foundation has put together a nice web site for professionals and patients alike, www.oralcancerfoundation.org.
- 4) The National Institute of Dental and Craniofacial Research have a web page full of educational resources at <http://www.nidcr.nih.gov/EducationalResources/>.

None of the Indian sites are available for oral health education in true sense. Though some form of oral health information is available on IDA website, not of much interactive education is absent. Most of the websites on oral health in India were more of marketing purpose for individual dental clinics rather than oral health education. Some of the oral networking sites from which oral health education can be channelized are *Facebook, Orkut, Skype, Twitter, Youtube, Likedin, Wyn, Yahoo, Flickr* etc and also through individual websites.

Uses of social networking for oral health education:^{3-5,14-16}

- 1) The opportunity to bring the voice of the dentists to millions of people, providing them with the most credible and trustworthy oral health information there is and helping them achieve optimal oral health.
- 2) Consumers can also ask questions pertaining to cancer, fitness and exercise, and mental health, among other areas.
- 3) It will also engage the public and enhance the recognition and importance of the dentist as the authority on oral health and care.
- 4) Research - Conducting research on social media sites requires deliberate attention to consent, confidentiality, and security.
- 5) Dental dialogues that provide a platform for oral health and health professionals to share knowledge and treatment protocols for systemic diseases related to diseases of the mouth.
- 6) Emotional support of patient in every step.
- 7) Web-based program can contribute to the child health promotion as well as can provide the staff with the insightful child health information
- 8) Targets high-risk population through tailored Internet outreach via chat rooms, social networking sites, and online forums.

Conclusion:

The past few decades have witnessed a dramatic increase in consumers seeking health information online. Mobile phones, in particular SMS, internet (networking sites) offer health promoters an exciting opportunity to engage personally with a huge number of individuals for low cost. The key elements such as message style, language and broadcast schedule are directly relevant to future studies using SMS for health promotion, as well as for future health promotion interventions in other mediums that require short formats, such as social networking sites.¹⁶ There is scope to broaden the use of social networking in oral health education that would engage dentists and dental students in the social construction of knowledge. The time has come for dentists to embrace social networking, because if they don't, they will risk losing an invaluable tool of viral proportions. Oral health promotion

programmes using digital media have great potential to cost-effectively and fastly meet the complex needs of diverse and often underserved populations living with or at high risk of oral diseases.

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