KNOWLEDGE, OPINIONS AND BARRIERS OF ORAL HEALTH CARE STUDENTS TOWARDS CLIMATE CHANGE, POLLUTION AND CONSERVATION OF RESOURCES IN ORAL HEALTH CARE SERVICES

^[1] Dr. A. Vinita Mary, ^[2] Dr. A. V. Rajesh Ebenezar, ^[3] Dr. Vidhya Rekha Umapathy, ^[4] Dr. Ranjani D, ^[5] Dr. Vaishnavi Vinod Rajan

[1] MDS, PhD, Professor and Head, Department of Public Health Dentistry, Thai Moogambigai Dental College and Hospital, Chennai, Tamil Nadu, India

[2] MDS, M.Phil, Professor, Ebenezar Multi-speciality Dental Clinic, Chennai, Tamil Nadu, India

[3] MDS, Reader, Dept of Public Health Dentistry, Thai Moogambigai Dental College and Hospital, Chennai, India

[4] BDS, Lecturer, Dept of Public Health Dentistry, Thai Moogambigai Dental College and Hospital, Chennai, India

[5] BDS, Lecturer, Dept of Public Health Dentistry, Thai Moogambigai Dental College and Hospital, Chennai, India

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ABSTRACT

Background: Climate change is a threat for global health. The changes in the climate can have direct or indirect effect on health. The healthcare systems emit a huge quantity of greenhouse gases into the atmosphere during manufacturing and transport of healthcare goods. Thus, it is mandatory for every healthcare professional to take steps to reduce their carbon footprint and thus decrease the effect of climate.

Aims: The aim of the study was to assess knowledge, opinions and barriers of oral health care students towards climate change, pollution and conservation of resources in oral health care services.

Materials and Methods: A cross-sectional study was conducted among the students of a private dental college using a pretested, structured questionnaire which was circulated via online platform.

Results: A total of 275 dental students participated in the study. The age of the respondents ranged from 18-23 years with mean age being 20.93+1.248. Majority, 261 (94.9%), were concerned about pollution stemming from the health care industry; 250 (90.9%) felt that it was important to understand this issue so that they can help their patients and 238 (86.5%) felt that manufactures should provide information regarding their product's effect on environment during and post production.

Conclusion

The present study highlights that the respondents are willing to avoid pollution pertaining to their professional practice but lack the information for the same. Thus, steps should be taken to include educational modules to disseminate the information and inculcate the habit in the budding oral health care professionals and thus reducing their carbon footprint.

Key words: Oral healthcare professionals, climate change, environment, resource conservation.

INTRODUCTION

Climate change is a threat for global health. According to United Nations, burning of fossil fuels accounts for 75% of the greenhouse gas emissions. The causes of climate change are generating power by burning fossil fuels, manufacturing goods, mining and construction industry, cutting down forests which decreases the carbon dioxide utilizations by the flora, using transportation which mainly runs on fossil fuels, producing food through deforestation and clearing of land for agriculture and grazing, powering buildings and consuming too much clothing, electronics, and plastics. 1 The various effects climate change include more severe storms, increased drought, a warming and rising ocean, loss of species, shortage of food, more health risks, poverty and displacement of population.1

The changes in the climate can have direct or indirect effect on health. The effects of climate change on health include2 a) Injury and mortality from extreme weather events, b) Heat related illness, c) Respiratory illness, d) Water-borne disease and other water-related health impacts, e) Zoonoses, f) Vector-borne diseases, g) Malnutrition and foodborne diseases, h) Noncommunicable diseases and g) Mental and psychosocial health. Climate change can also affect oral health. The effect on oral health can be either due to a) direct effect on oral cavity and its tissues and b) indirect effect of systemic health problem due to oral health.

It is ironic that the effects of climate change are most prominent on the people who are least contributing towards the climate change i.e., the people in lowincome and disadvantaged countries and communities.2

Furthermore, the healthcare systems emit a huge quantity of greenhouse gases into the atmosphere during manufacturing and transport of healthcare goods. Thus, it is mandatory for every healthcare professional to take steps to reduce their carbon footprint and thus decrease the effect of climate. Moreover, health care industry uses a lot of disposable materials to avoid the transmission of diseases from one person to another. The production, transport and proper disposal of these materials pose a threat to climate as well as can act as a health hazard if not properly treated and disposed. Post covid everyone has started using more and more disposable items to prevent spread of communicable diseases. Also, general public also psychosocially prefers to get treatment with a disposable item.

Hence, as an oral healthcare professional, the individual should have a thorough knowledge about the various factors that lead to pollution and climate change. The objectives of the study were:

- 1. To assess the knowledge and attitudes of oral health care students towards climate change.
- 2. To assess study population's knowledge and attitudes towards pollution generated by dental health care sector.
- 3. To assess study population's opinion on inclusion of pollution generated by dental health care sector, its impact on climate change and health of individuals in oral health care curriculum.
- 4. To assess the barriers faced by the study population from taking responsibility for conservation of resources and prevention of pollution.

Materials and Methods

A cross-sectional study was conducted among the students of a private dental college to determine their knowledge, opinions and barriers towards climate change, pollution and conservation of resources in oral health care services. A pretested, structured questionnaire was circulated via online platform. The first section of the questionnaire explained the purpose of the study and the respondents who were interested were asked to give informed consent. The second and third sections collected information on demographic details of the respondents, and knowledge, opinions and barriers regarding health impacts of health sector pollution and climate change, respectively. The respondents were asked to grade their opinions on a 5-point Likert scale viz. strongly agree, agree, neutral, disagree and strongly disagree. For the analysis purposes, the responses agree and strongly agree were clubbed together and recorded as population who agreed to the statement and the responses neutral, disagree and strongly disagree were clubbed together and recorded as population who disagreed to the statement. Also, the age group of the respondents was divided into two groups viz. 18-20 years and 12-23 years.

The collected data was analysed using IBM SPSS Statistics for Windows, Version 26.0. Armonk, NY: IBM Corp. Descriptive statistics including frequency, percentages, mean and standard deviation, were calculated for the demographic details and responses given by the respondents. A Binary Logistic Regression model was developed keeping demographic details as predictor and disagreement with certain statements as outcome variables to assess their relationship. In the present study, p< 0.05 is

considered as statistically significant.

Results

A total of 275 dental students participated in the study. The age of the respondents ranged from 18-23 years with mean age being 20.93+1.248. Among them, 64 (23.3%) were males and 211 (76.7) were females and majority were doing their internship, 104 (37.8%). (Table 1)

The respondents' knowledge and opinions regarding the health impacts of health sector pollution and climate change is presented in Table 2. It was observed that majority were concerned about the health impacts of climate change; 261 (94.9%), majority were concerned about pollution stemming from the health care industry; 228 (82.9%), majority thought that the disease burden associated with health care sector pollution is of the same order of magnitude as the disease burden associated with medical errors first reported by the Institute of Medicine; 6 185 (67.3%) and majority felt that dental professionals had a responsibility to conserve resources and prevent pollution within their professional practice; 244 (88.7%).

The respondents' opinions on inclusion of pollution, climate change and health in the dental curriculum is presented in table 3. It was observed that majority felt that it was important to understand this issue so that they can help their patients; 250 (90.9%) and majority felt that dental professionals had an important role to play in educating patients and the public about the impacts of pollution and climate change on health; 216 (78.5%).

The respondents' opinions regarding ways to promote resource conservation and pollution prevention within their professional practice and barriers to doing so is presented in table 4. It was observed that majority agreed that manufactures should provide information regarding their product's effect on environment during and post production; 238 (86.5%) and majority agreed that medical devices should be tracked to understand their utilization and disposal; 232 (84.4%). It was observed that majority agreed that there was a lack of education on disease burden because of health care pollution; 176 (64.0%) and majority agreed that there was lack of time/production pressure leading to inefficient utilization of resources; 180 (65.5%).

It was observed that majority (42%) of the respondents preferred reusable medical devices,

figure 1. The major factor influencing the preference of reusable or disposable medical devices was infection control (49%), figure 2. Majority (78%) of the respondents agreed that single-use disposable medical devices reduced infection risk, figure 3.

The responses of respondents to certain questions/ statements which were significant according to gender and age group is presented in table 5. It was observed that significantly higher number of males had responded that disease burden associated with health care sector pollution is of the same order of magnitude as the disease burden associated with medical errors. It was observed that nearly two thirds of the respondents of the age group of 18-20 years disagreed with the statement "It is important to understand this issue, but it isn't pertinent to patient" which was significantly higher than the older age group. It was observed that 66.7% of the respondents of the age group of 18-20 years disagreed to the statement "Resource conservation and pollution prevention are not a physician's responsibility" which was significantly higher than the older age group. It was observed that 61.8% of the respondents of the age group of 18-20 years disagreed to the statement "Unrealistic expectations of infection risk reduction" which was significantly higher than the older age group. It was observed that 66.7% of the respondents of the age group of 18-20 years disagreed to the statement "Resource conservation and pollution prevention are not a dental healthcare professional's responsibility" which was significantly higher than the older age group.

The Binary Logistic Regression models for relationships between personal characteristics and responses is shown in table 6. It was observed that the odds of disagreement with the statement "Disease burden associated with health care sector pollution is of the same order of magnitude as the disease burden associated with medical errors" was more among females (4.45) when compared to males. It was observed that the odds of disagreement with the 4 statements given in table 6 among 18-20 years group ranged from 1.88 to 2.68 (p<0.005) when compared to 21-23 years.

Discussion

The present study was conducted to assess knowledge, opinions and barriers of oral health care students towards climate change, pollution and conservation of resources in oral health care services.

Every industry plays a role in the degradation of the environment at various levels. Right from the materials' extraction from raw state from the earth to its manufacturing into a usable product, its packaging and distribution and its disposal after usage in health care industry, there is some effect on the environment. In some cases, the effect to the environment can lead to health impacts. So, it becomes the duty of every individual to use and dispose the healthcare product and equipment properly.

In the present study it was found that the majority of respondents agreed to the health impacts of the climate change and were concerned about pollution stemming from the health care industry which is similar to the study by Ryan EC et al.3 Since the respondents are accepting their concern regarding the impact on climate change, they can be further taught about the various effects and they will be eager to learn about it. Though majority understood that climate change was important so that they can help their patients but they felt it was not pertinent to the patient care directly. The respondents perhaps feel that they can share their knowledge about climate change to their patients as a part of educating them but they think that there is a lack the relationship between climate change and patient care. Though majority feel that medical devices should be tracked to understand their utilization and disposal but only a little more than half of them feel that resource conservation and pollution prevention are physician's responsibilities.

It was observed that in the present study lack of education on disease burden because of health care pollution and lack of time/production pressure leading to inefficient utilization of resources was felt as barriers to promote resource conservation and pollution prevention within their professional practice. This was similar to the Sarfaty M et al.4 A study by Teherani A et al suggests that the dental students should be taught about various objectives of sustainable healthcare education at preclinical, clinical and post graduate levels and delineates the objectives in their paper.5

It was observed that the younger age group was more zealous towards patient care and dental healthcare professionals' responsibilities towards resource conservation. This is similar the study by Ryan EC et al.3 This might be because they were in the preclinicals and were more aspirations towards perfect patient care but the older respondents may be more concerned about their patient quota completion and did not find it significant to be concerned about resource conservation.

Limitation: The results of the present study represent data collected from students of one dental college. Further studies are needed to collect data from all over India to assess the knowledge and opinions of the students.

Recommendation: The students can be taught about the effects of healthcare products on environment and thus climate change through various continuing dental education programs. Also, they must be sensitized regarding the usage and disposal of materials appropriately and adequately and thus minimizing the wastage of the product. The dental instructors can act as a guide to the students and teach them the conservation techniques they are practicing.3

Conclusion

The present study highlights that the respondents are willing to avoid pollution pertaining to their professional practice but lack the information for the same. Thus, steps should be taken to include educational modules to disseminate the information and inculcate the habit in the budding oral health care professionals and thus reducing their carbon footprint.

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TABLES AND FIGURES

Table 1: Demographic details of the respondents

	A States	Frequency	Percentage
Age group	18-20 years	102	37.1
Mean 20.93 <u>+</u> 1.248	21-23 years	173	62.9
Gender	Male	64	23.3
	Female	211	76.7
Year of study	First Year	16	5.8
	Second Year	38	13.8
	Third Year	67	24.4
	Fourth Year	50	18.2
	Intern	104	37.8

Table 2: Respondents' knowledge and opinions regarding the health impacts of health sector pollution and climate change

	Agree		Disagree	
	N	%	N	%
I am concerned about the health impacts of climate change	261	94.9	14	5.1
I am concerned about pollution stemming from the health care industry	228	82.9	47	17.1
Do you think disease burden associated with health care sector pollution is of the same order of magnitude as the disease burden associated with medical errors first reported by the Institute of Medicine (To Err is Human)	185	67.3	90	32.7
Dental professionals have a responsibility to conserve resources and prevent pollution within their professional practice	244	88.7	31	11.3

Table 3: Respondents' opinions on inclusion of pollution, climate change and health in the dental curriculum

	Agree		Disagree	
	N	%	N	%
It is important to understand this issue so I can help my patients	250	90.9	25	9.1
It is important to understand this issue, but it isn't pertinent to patient care	118	42.9	157	57.1
I feel I can learn about this issue through observation in clinical practice, not classroom-based learning	183	66.5	92	33.5
The training and testing we receive in dental school already requires a lot of my attention, there is no time to learn about this issue	103	37.5	172	62.5
I think there is a role for dental professionals in addressing this issue, but it is not my personal interest area	110	40.0	165	60.0
It is important to understand this issue because dental professionals have an important role to play in educating patients and the public about the impacts of pollution and climate change on health	216	78.5	59	21.5
Pollution and climate change should not be included in the dental professionals school curriculum	85	30.9	190	69.1

Table 4: Respondents' opinions regarding ways to promote resource conservation and pollution prevention within their professional practice and barriers to doing so

	Agree		Disa	gree			
	N	%	N	%			
Important ways for dental healthcare professionals to promote resource conservation and							
pollution prevention							
Manufactures should provide information regarding their	238	86.5	37	13.5			
product's effect on environment during and post production.							
Medical devices should be tracked to understand their	232	84.4	43	15.6			
utilization and disposal							
Evidence-based recommendations on minimizing unnecessary	199	72.4	76	27.6			
procedures and services							
Resource conservation and pollution prevention are not a	122	44.4	153	55.6			
physician's responsibility							
Important barriers that inhibit dental healthcare professionals from	n takin	g respo	nsibili	ty for			
resource conservation and pollution prevention							
Lack of education on disease burden because of health care	176	64.0	99	36.0			
pollution							
Lack of time/production pressure leading to inefficient	180	65.5	95	34.5			
utilization of resources							
Unrealistic expectations of infection risk reduction	147	53.5	128	46.5			
Resource conservation and pollution prevention are not a dental	118	42.9	157	57.1			
healthcare professional's responsibility							

(Only significant findings are tabulated)

		Male		Male Female		P
		n	%	n	%	value
Do you think disease burden associated	Agree	56	87.5%	129	61.1%	.000*
with health care sector pollution is of the	Disagree	8	12.5%	82	38.9%	
same order of magnitude as the disease						
burden associated with medical errors first						
reported by the Institute of Medicine (To						
Err is Human).						
		18-2	20 years	21-23	years	P
		n	%	n	%	value
It is important to understand this issue, but	Agree	32	31.4%	86	49.7%	.003*
it isn't pertinent to patient	Disagree	70	68.6%	87	50.3%	
Resource conservation and pollution	Agree	34	33.3%	88	50.9%	.005*
prevention are not a physician's	Disagree	68	66.7%	85	49.1%	
responsibility						
Unrealistic expectations of infection risk	Agree	39	38.2%	108	62.4%	*000
reduction	Disagree	63	61.8%	65	37.6%	
Resource conservation and pollution	Agree	34	33.3%	84	48.6%	.014*
prevention are not a dental healthcare	Disagree	68	66.7%	89	51.4%	

professional's responsibility
*Statistically significant
Pearson's Chi Square test

Table 6: Binary Logistic Regression models for relationships between personal characteristics and responses

Outcome variable	Predictor	Odds	95% CI		Sig.
	variable	Ratio	Upper	Lower	
Disagreement with the statement:	Gender				
Disease burden associated with health care	Male (Ref)	1			
sector pollution is of the same order of	Female	4.45	2.01	9.81	0.000*
magnitude as the disease burden					
associated with medical errors					
Disagreement with the statement: It is	Age Group	0.16	1.20	2.61	0.002*
important to understand this issue, but it is	18-20 years	2.16	1.29	3.61	0.003*
not pertinent to patient care	21-23 years (Ref)	1			
Disagreement with the statement:		2.05	1.04	2.44	0.0054
Resource conservation and pollution	18-20 years	2.07	1.24	3.44	0.005*
prevention are not a physician's	21-23 years (Ref)	1			
responsibility					
Disagreement with the statement:	Age Group	• ••			0.0001
Unrealistic expectations of infection risk	18-20 years	2.68	1.62	4.44	0.000*
reduction	21-23 years (Ref)	1			
Disagreement with the statement:	Age Group				
Resource conservation and pollution	18-20 years	1.88	1.13	3.13	0.014*
prevention are not a dental healthcare	21-23 years (Ref)	1			
professional's responsibility					

Figure 1: Preferences on usage of reusable or disposable medical devices

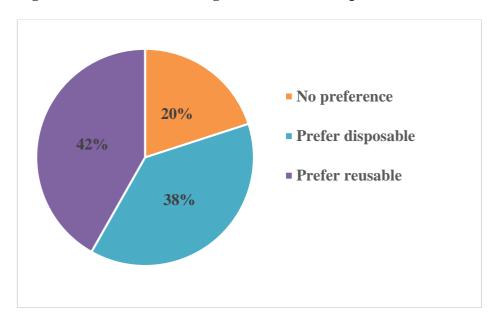


Figure 2: Factor influencing the preference of reusable or disposable medical devices

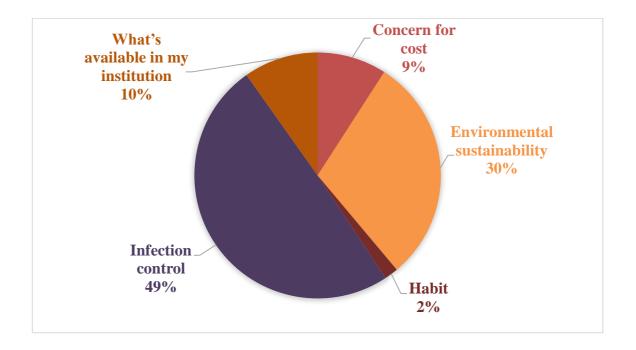


Figure 3: Opinion of the respondent whether single-use disposable medical devices reduce infection risk

