

An illustration of a dental clinic. A female dentist with brown hair, wearing a blue mask and a blue uniform with white stars, is treating a female patient. The patient is lying back in a blue dental chair, wearing a white top and dark pants. A dental light is positioned above the patient. The background is a light green wall with a dark blue floor. A potted plant with large green leaves is visible on the right side.

A STUDY ON CULTURAL BARRIERS INFLUENCING DENTAL CARE UTILIZATION IN KANPUR

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Introduction

- **Diverse Cultural Landscape**

India's vast cultural, linguistic, and religious diversity deeply shapes healthcare behavior.

- **Oral Health Often Overlooked**

Oral health is treated as secondary to general health in public health priorities.

- **Influence of Traditional Systems**

Belief in Ayurveda, Unani, and spiritual healing affects perceptions of dental care.

- **Access vs. Utilization Gap**

Despite technological advancements, professional dental services remain underused

- **Family-Driven Decisions**

Health choices are often collective, influenced by family and community opinions

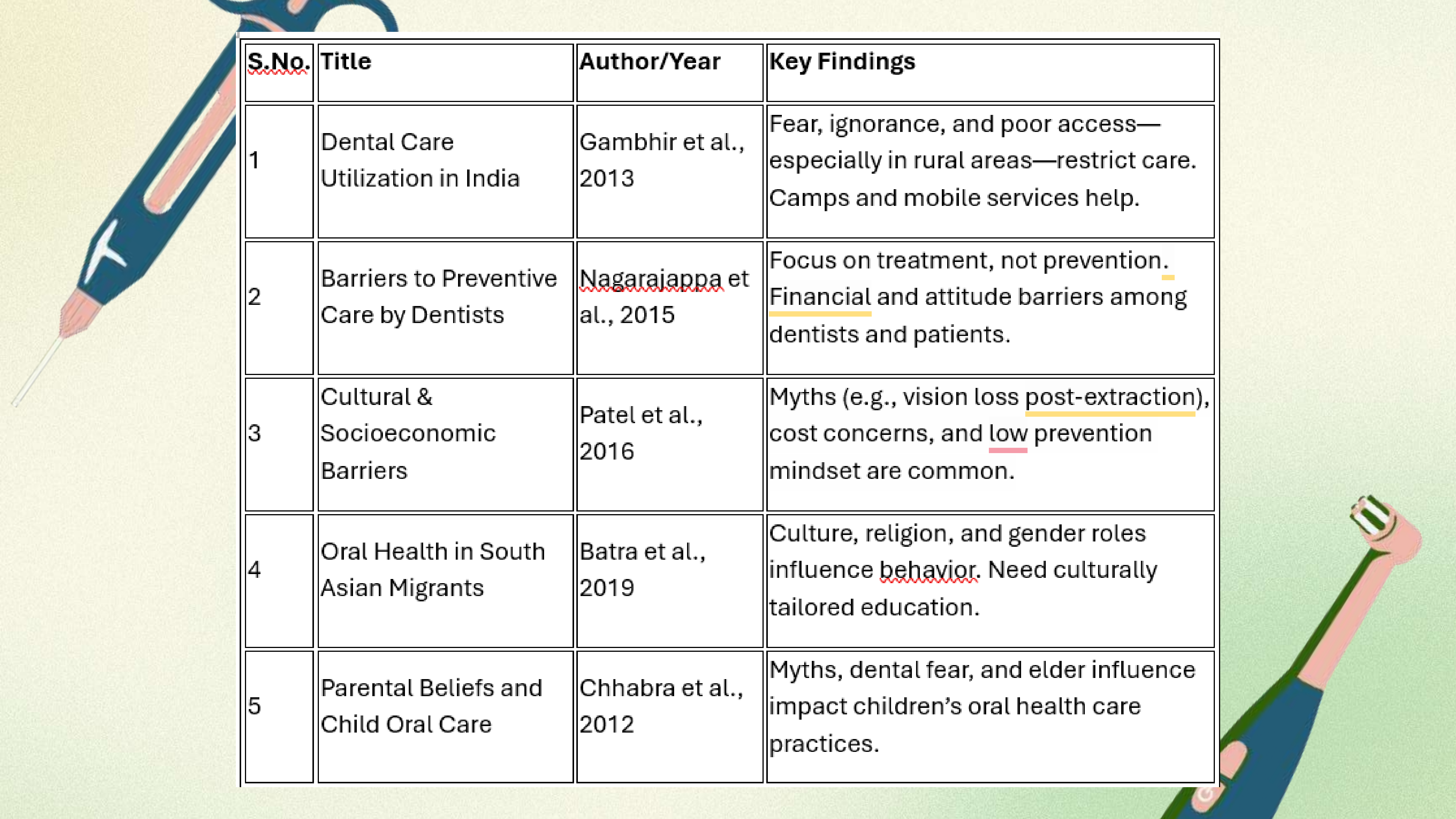


Objectives

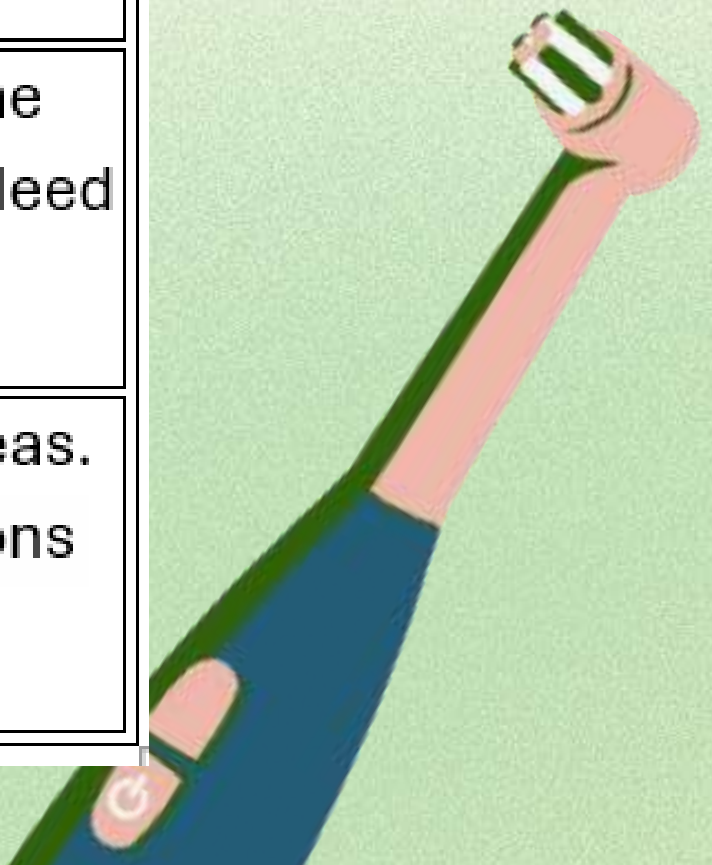
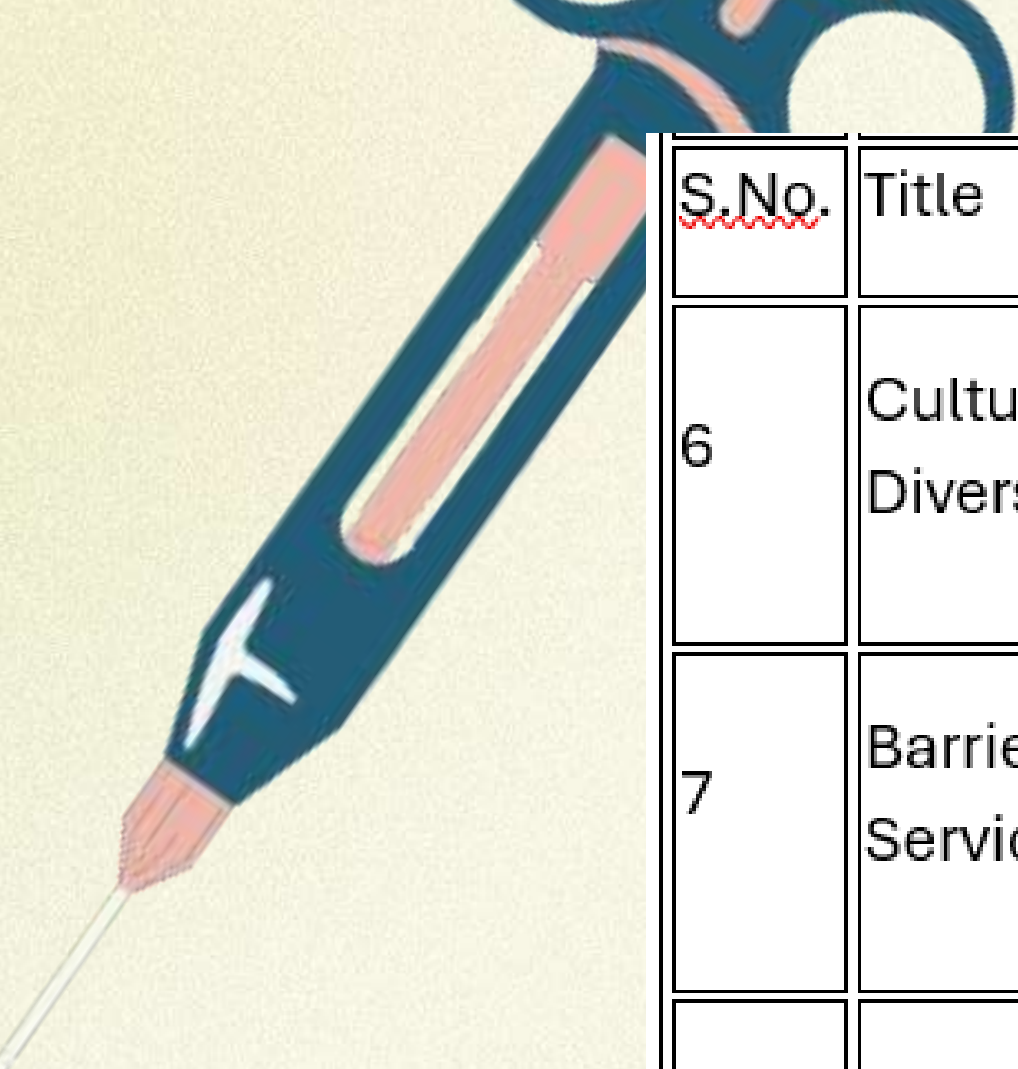
Research Question

- To assess the prevalence of cultural beliefs and misconceptions influencing dental visits.
- To examine the relationship between these beliefs and key sociodemographic factors.
- To identify barriers preventing preventive dental care among various population segments

What are the cultural beliefs that shape access to dental care in India, and how do these intersect with demographic variables such as age, gender, education, occupation, residence, and income.



<u>S.No.</u>	Title	Author/Year	Key Findings
1	Dental Care Utilization in India	Gambhir et al., 2013	Fear, ignorance, and poor access—especially in rural areas—restrict care. Camps and mobile services help.
2	Barriers to Preventive Care by Dentists	<u>Nagarajappa et al.</u> , 2015	Focus on treatment, not prevention. <u>Financial</u> and attitude barriers among dentists and patients.
3	Cultural & Socioeconomic Barriers	Patel et al., 2016	Myths (e.g., vision loss <u>post-extraction</u>), cost concerns, and <u>low</u> prevention mindset are common.
4	Oral Health in South Asian Migrants	Batra et al., 2019	Culture, religion, and gender roles influence <u>behavior</u> . Need culturally tailored education.
5	Parental Beliefs and Child Oral Care	Chhabra et al., 2012	Myths, dental fear, and elder influence impact children's oral health care practices.



<u>S.No.</u>	Title	Author/Year	Key Findings
6	Cultural Barriers in Diverse Groups	Marcus et al., 2022	Cultural norms, gender roles, and low awareness affect care. Need targeted, faith-sensitive strategies.
7	Barriers to Dental Service Use in India	<u>Yundavalli et al.</u> , 2025	Cost, fear, low education, and gender myths prevent timely care. Most seek help only during severe cases.
8	Rural Barriers in Tamil Nadu	Abirami et al., 2023	Lack of awareness and gender barriers in rural areas. Women face more challenges accessing care.
9	Dental Knowledge in <u>Narikuravars</u>	Sakthi Devi et al., 2022	Marginalized tribes show poor hygiene habits and low disease knowledge. Need education and mobile clinics.
10	Dental Myths in India	Joshi et al., 2020	Myths remain widespread in rural areas. Dentists must address misconceptions for effective treatment.

Methodology

Study Design

To investigate these cultural beliefs and their associations with demographic factors, a cross-sectional descriptive study design was utilized.

Study Setting

This research was conducted at dental outreach camps located in urban, semi-urban, and rural regions of Kanpur, Uttar Pradesh.

Study Population

The focus was on individuals aged 18 and older who attended the dental camps during the data collection phase and agreed to participate in the study.

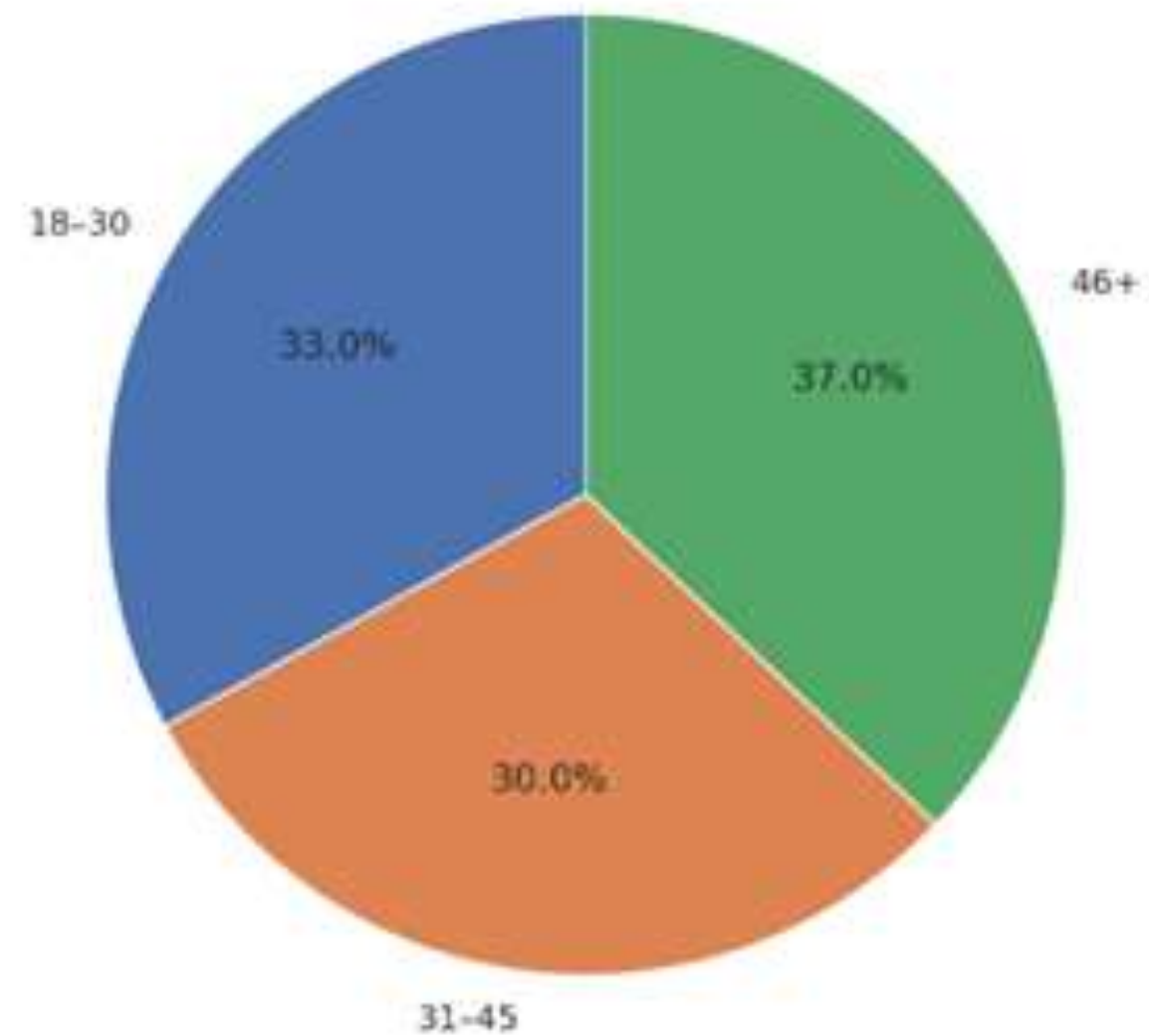
Study Tool

A questionnaire was designed for data collection.

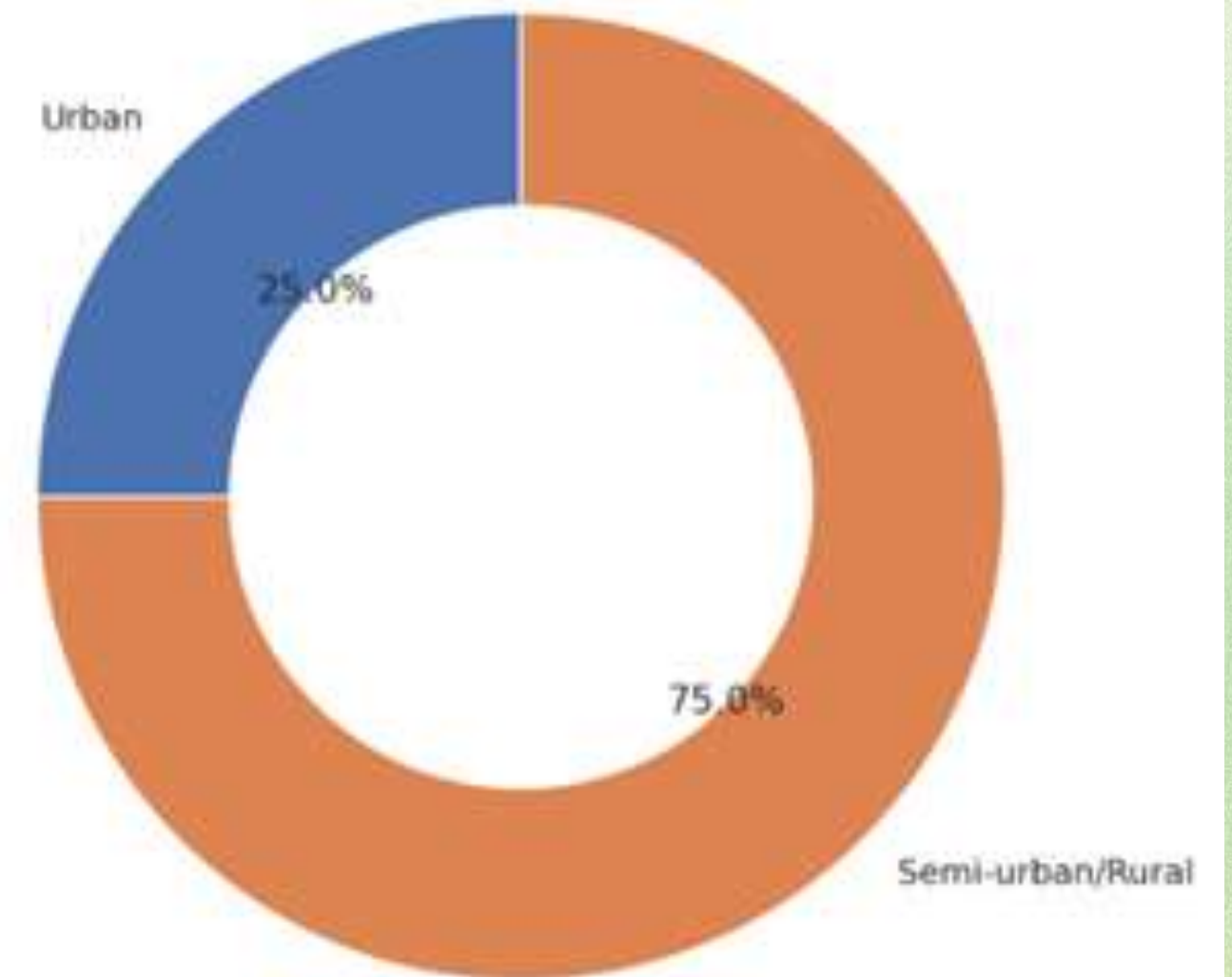
Results

Demographic profile

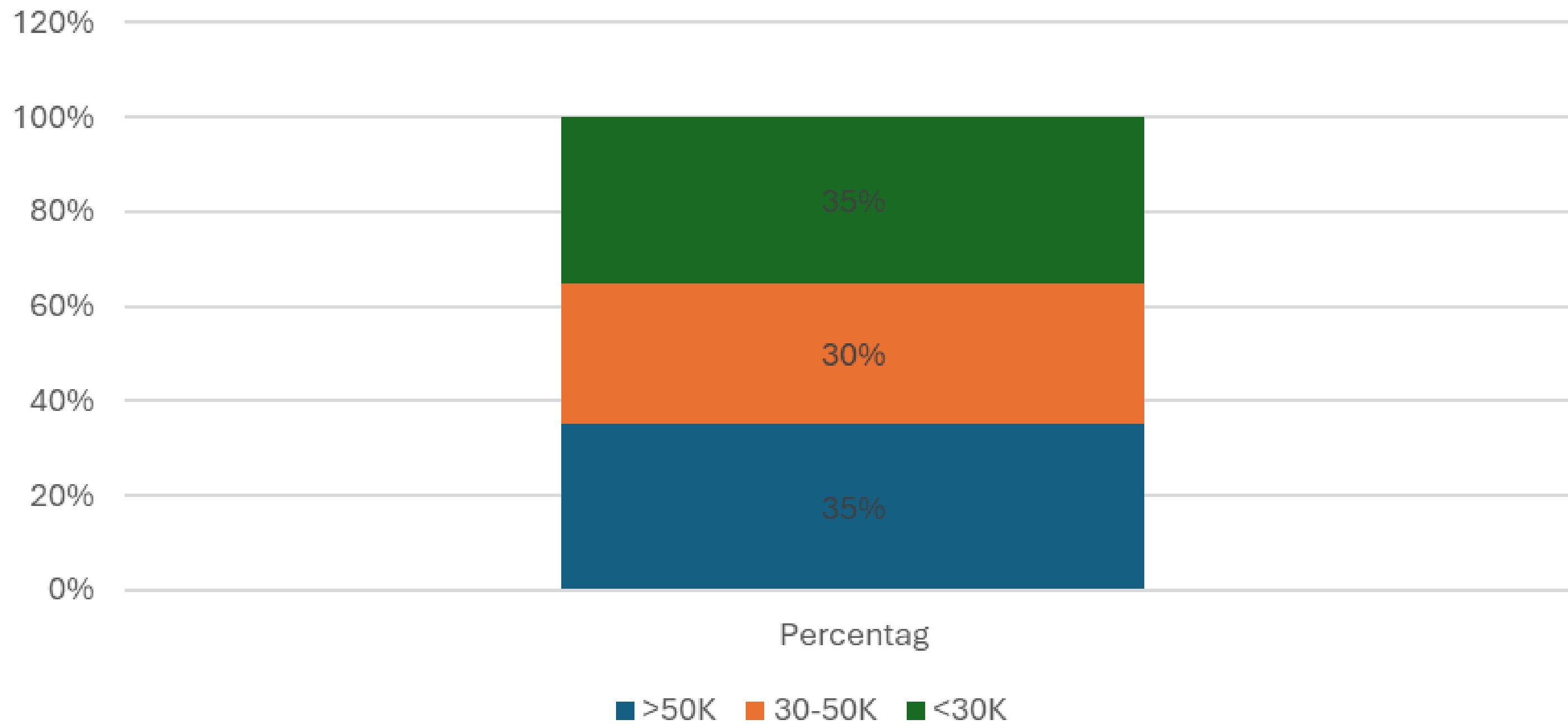
Age Distribution of Survey Participants



Geographic Distribution of Respondents

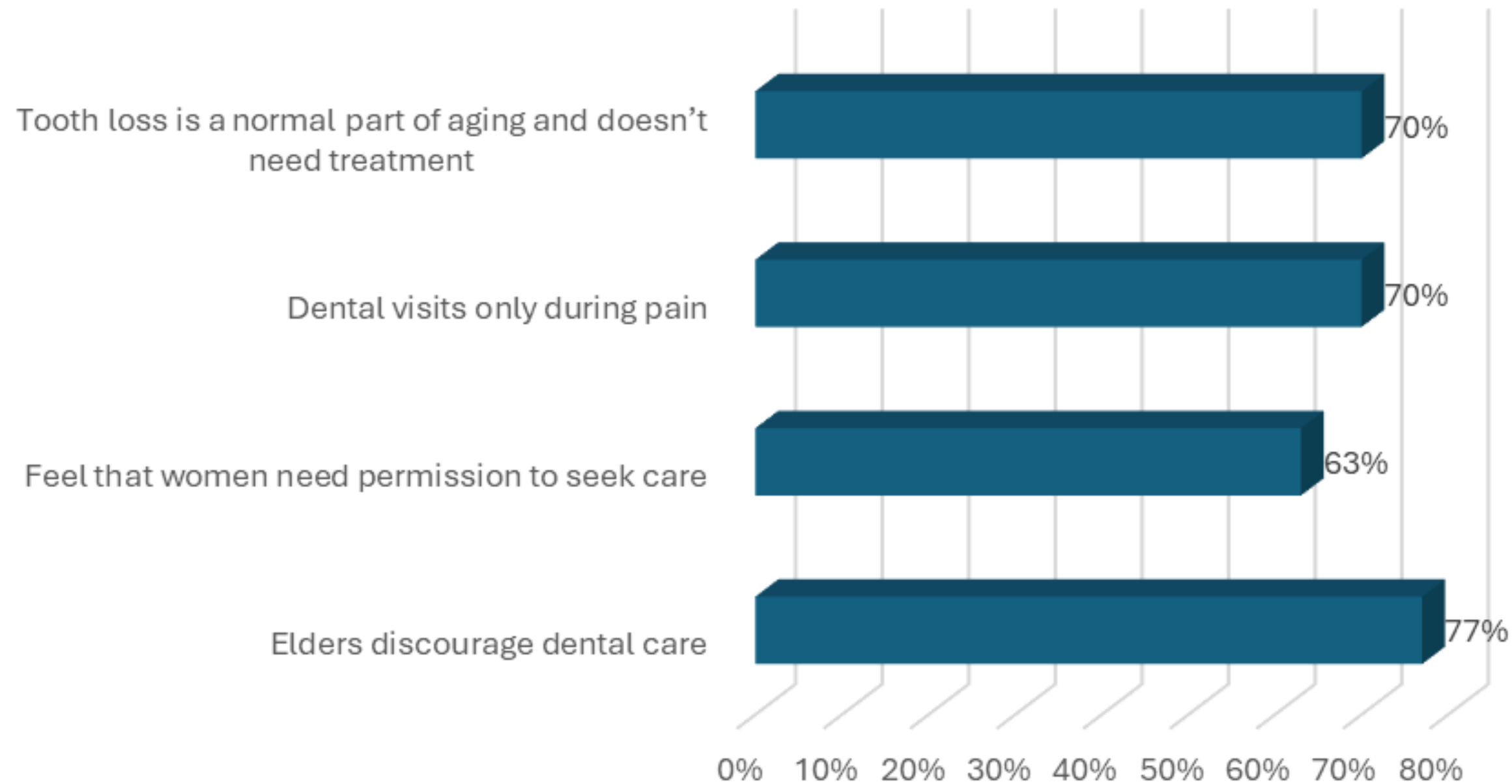


Monthly Income Distribution Among Participants



Cultural Beliefs Influencing Dental Care

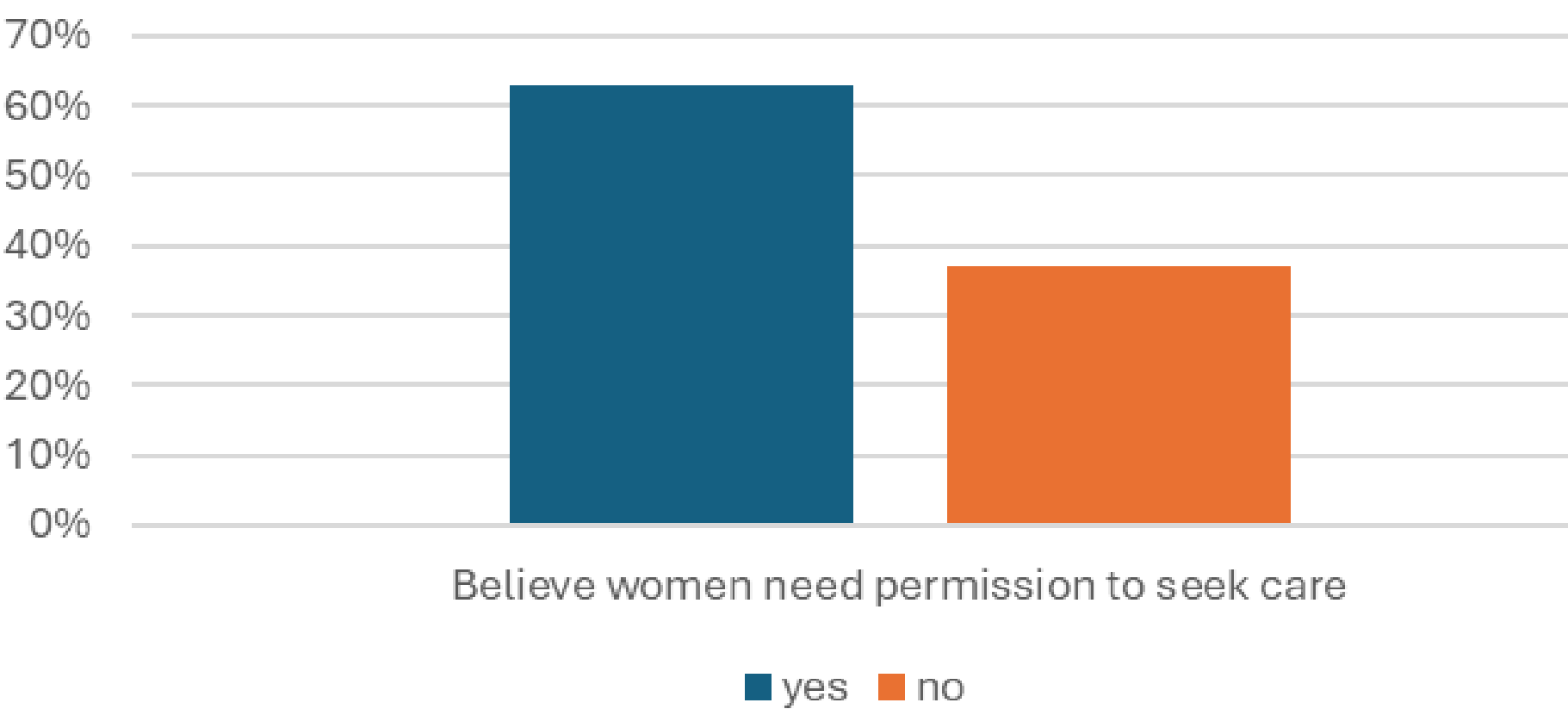
Prevalent Cultural Beliefs Impacting Dental Care Utilization



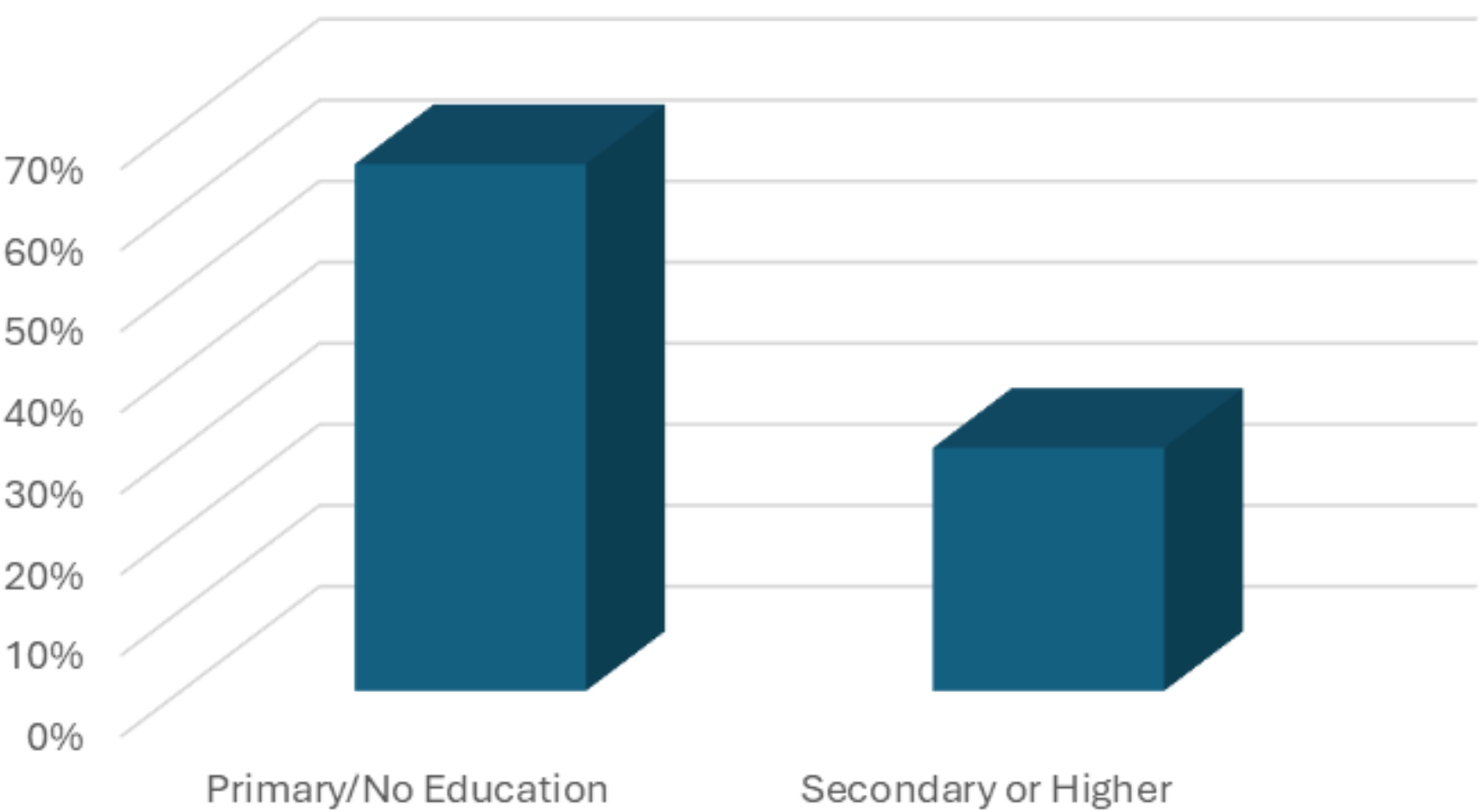
Gender variations

Role of education

Believe women need permission to seek care



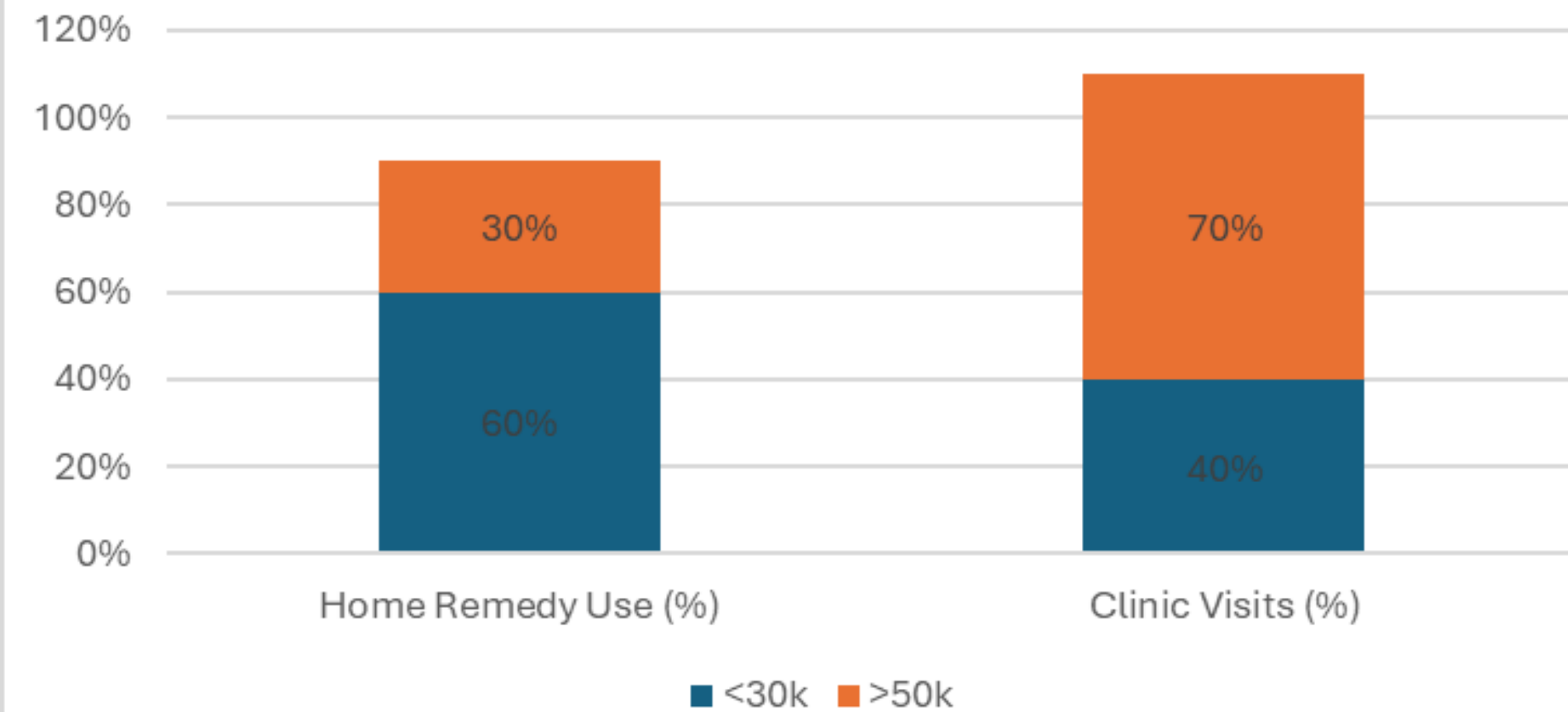
Home Remedy Usage By Education Level





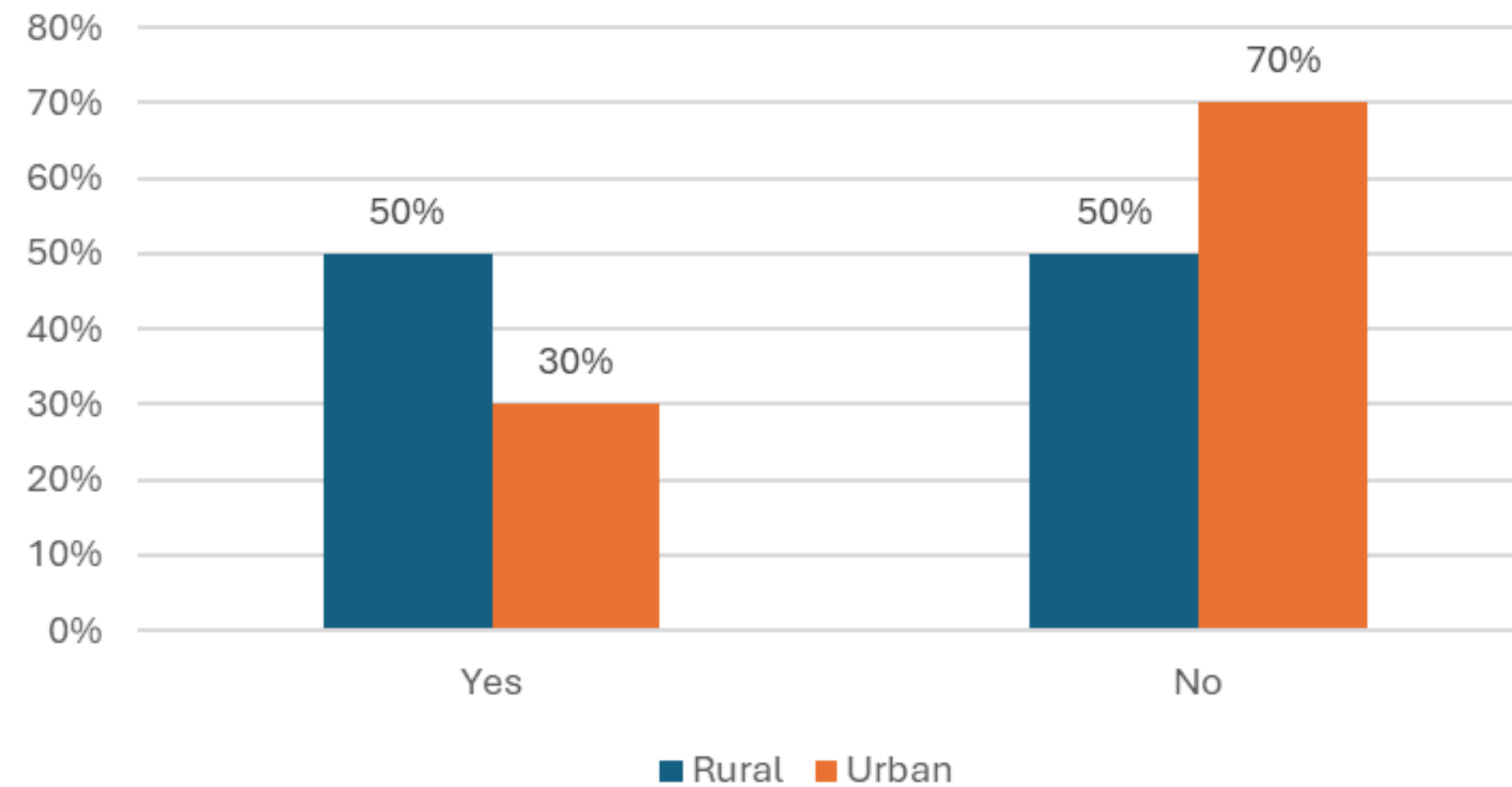
Socio-economic Disparities

Income Level and Reliance on Home Remedies



Geographic Influence

Geographic Variation in Trust for Traditional Healers



RECOMMENDATIONS



- Culturally Sensitive Outreach
- Gender-Inclusive Strategies
- Education-Focused Interventions
- Affordable and Accessible Care Models
- Incentivizing Preventive Care

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Thank you !

