

# 0932 Comparing Child and Caregiver Oral Health Quality of Life Ratings

**H. BRODER**<sup>1</sup>, S. REISINE<sup>2</sup>, M. JANAL<sup>3</sup>, A. JOKOVIC<sup>4</sup>, D. LOCKER<sup>5</sup>, B. PRAHL<sup>6</sup>, C. BAKKER<sup>7</sup>, P.J. ALLISON<sup>8</sup>, G. CISNEROS<sup>9</sup>, S. NAIDOO<sup>10</sup>, C. MCGRATH<sup>11</sup>, M. HENNEQUIN<sup>12</sup>, E.D. REKOW<sup>13</sup>, J.T. NEWTON<sup>14</sup>, D. GIBBONS<sup>15</sup>, W.M. THOMSON<sup>16</sup>, J. BROUGHTON<sup>17</sup>, P. CHIBBARO<sup>18</sup>, and A.T.T. LEÃO<sup>19</sup>, <sup>1</sup>UMDNJ-New Jersey Dental School, Newark, USA, <sup>2</sup>UConn School of Dental Medicine, Farmington, CT, USA, <sup>3</sup>University of Toronto, Canada, <sup>4</sup>ACTA, Amsterdam, Netherlands, <sup>5</sup>McGill University, Montreal, Canada, <sup>6</sup>NYU Dental School, New York, NY, USA, <sup>7</sup>University of Stellenbosch, Tygerberg 7505 R.S.A, South Africa, <sup>8</sup>University of Hong Kong, China, <sup>9</sup>Dental Faculty of Clermont Ferrand, France, <sup>10</sup>University of Medicine and Dentistry of New Jersey, Newark, USA, <sup>11</sup>GKT Dental Institute, London, United Kingdom, <sup>12</sup>University of Otago, Dunedin, New Zealand, <sup>13</sup>NYU Medical Center, New York, NY, USA, <sup>14</sup>Universidade Federal do Rio de Janeiro, Brazil

**Objective:** In evaluating quality of life in children, it is unclear whether it is important to query children and/or the caregivers. Using the Child Oral Health Impact Profile (COHIP), children and caregiver impact ratings were compared. **Methods:** Children 10-14 years old and their caregivers were recruited from a university-based pediatric dental (n=43 pairs) and orthodontic clinic (n=37 pairs). Caregivers and their children independently completed the COHIP which recently underwent face/content validation as part of a multi-stage project to develop an assessment of children's oral health-related quality of life. It consists of 44 items assessing 5 content domains (Functional Well-Being, Emotional Well-Being, Oral Symptoms, Peer Interaction, and School). Items were rated for frequency on a 4-point scale ('never' to 'always') and relevance on a 3-point scale ('very bothersome' to 'not at all'). Item impact scores were computed by multiplying frequency by relevance ratings. Total impact and domain scores were computed as the average impact rating for all items, or for selected items, respectively. **Results:** The caregivers' age averaged 40.1 years (sd=8), and children's age averaged 11.6 years (sd=2); 30% were Latino, 30% Black and 30% White, 10% Other; 42% of the children and 24% of the caregivers were male; caregivers' mean education was 13.4 years (sd=2). Caregivers had greater frequency, relevance and impact COHIP scores than their children across patient groups (t-test: p<0.01). Pearson correlations between caregiver and child impact scores were: Functional Well-Being=-.06 (p=.59); Emotional Well-Being=-.03 (p=.83); Oral Symptoms=.28 (p=.01); Peer Interaction=.05 (p=.72); School=.18 (p=.26); and overall COHIP .22 (p=0.05). **Conclusions:** The results indicate that caregivers reported greater COHIP scores than their children in the pediatric dental and orthodontic groups, with low paired correlations across domains and overall COHIP score. Therefore independent assessments of caregivers and their children may be important in evaluating children's oral health-related quality of life.

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