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# Patient Attitudes to Prevention in Oral Health Questionnaire (PAPOH)

**ABOUT THE QUESTIONNAIRE**

Thank you for your interest in this questionnaire. This questionnaire aims to explore how you feel about your mouth and dental care.
It has two parts; Part 1 has 9 multiple choice questions about your oral healthcare. Part 2 has a series of questions asking about your knowledge, beliefs and attitudes towards oral healthcare and going to the dentist.
Please read each question carefully and select your answer below. The questionnaire should take between 10-15 minutes. All your answers are anonymous and we cannot link your answers with your personal identity.

## PART 1: LOOKING AFTER YOUR TEETH

The following are questions or statements about looking after your teeth and gums. Please answer them as best you can. You may find some of these tricky so don't worry if you don't know the answer.

**1) How often should you brush your teeth?** *(Single choice)*

- Once a day
- At least twice a day
- Less than once a day
- I don't think I need to
- I don't know

**2) When is the most important time to brush your teeth?** *(Single choice)*

- Before breakfast
- After breakfast
- After lunch
- Last thing at night
- After each meal
- I don't know

**3) What is the most important ingredient of a toothpaste in preventing tooth decay?** *(Single choice)*

- Whitening
- Fluoride
- That it is abrasive (gritty)
- Foam
- I don't know

**4) What amount of fluoride is recommended in toothpaste for healthy adults?** *(Single choice)*

- Approximately 500 parts per million (PPM)
- Approximately 1000 parts per million (PPM)
- At least 1350 parts per million (PPM)
- I don't know
- It does not matter to me

This questionnaire was developed by The University of Leeds and should be cited: Csikar, J., Leggett, H., Vinall-Collier, K., Whelton, H., Pavitt, S., Kang, J. and Douglas, G.V., 2022. Development and validation of an International Patient's Attitudes to Prevention in Oral Health Questionnaire. *Community Dentistry and Oral Epidemiology.*

5) **After brushing my teeth with toothpaste I should spit the toothpaste out and….(complete the sentence)** *(Single choice)*
   - Not rinse my mouth with water
   - Rinse my mouth with water
   - I don't know

6) **When is the best time to use a general everyday mouthwash?** *(Single choice)*
   - Straight after brushing
   - Just before brushing
   - At a different time to brushing
   - Instead of brushing
   - I don't know

7) **From the following options which is likely to be worst for your dental health?** *(Single choice)*1)
   - Consuming sugary products at meal times only
   - Consuming one large amount of sugary product at one time in the day
   - A small amount of sugary products spread throughout the day
   - I don't know

8) **My oral health could affect my general health** *(Single choice)*
   - Agree
   - Disagree
   - I don't know

9) **When should you start brushing a child's teeth?** *(Single choice)*
   - When they are between one -two years old
   - When they are between two-four years old
   - As soon as teeth erupt in the mouth
   - Wait until the child can brush their own teeth
   - If they are in pain
   - I don't need to
   - I don't know

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## PART 2: UNDERSTANDING HOW YOU FEEL ABOUT YOUR MOUTH AND DENTAL CARE

Please read each statement carefully and select the corresponding answer below. These questions are about your beliefs, your experiences and how you feel – there are no right or wrong answers and your answers will remain completely anonymous.

In this questionnaire when we mention ***'prevention'*** we are referring to the practice of caring for your teeth to keep them healthy; this includes how to avoid tooth decay, gum disease or erosion (tooth wear).

***Preventive advice*** includes advice about oral hygiene, diet, alcohol and smoking, as well as ~~and~~ instructions in oral hygiene techniques. It can also include any prescriptions from your dentist for you to buy toothpaste with a higher fluoride concentration.

***Preventive treatments*** are treatments given to you in the dental clinical and can include fluoride varnish, fissure sealants or scaling's done by the dentist or other employees in the clinic.

The term ***Dental Professional*** will be used in this questionnaire. This refers to a Dentist, Dental hygienist/therapist (if applicable in your country) or Dental nurse.

**1) From the following list of dental professionals, whose role do you feel it is to provide preventive advice and treatment?** *(can tick more than one option: Multiple choice)*

- Dentist
- Dental hygienist
- Dental Nurse
- I don't know

**2) Would you feel satisfied with your care if you were to receive preventive care from the:**

| | Yes | No | I don't know |
|---|---|---|---|
| Dentist | | | |
| Dental hygienist | | | |
| Dental nurse | | | |

**3) Please read the following statement, and indicate below whether you agree or disagree with it: On average my dental check-ups are rushed** (Disagree, Agree, I don't know)

**4) To what extent do the following statements motivate you to care for your teeth and gums**

| | Motivational | Indifferent | Demotivating |
|---|---|---|---|
| The dental professional taking the time to explain things to me | | | |
| The feeling of being respected by the dental professional | | | |
| Advice being specifically personalised to me | | | |
| Advice from the dentist rather than from another dental professional in the team | | | |
| Advice being given firmly | | | |
| Trusting the dental professional | | | |
| Having experience of pain in my mouth | | | |
| Preventing future oral disease | | | |
| Avoiding expensive treatments | | | |
| Aesthetic reasons | | | |

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**5) Where do you currently get your preventive advice from?** *(optional, free text response)*

| |
|---|
| |

**6) At the dental check-up does the dental professional give you advice about the following?**

| | Yes | No | Not Applicable | Can't remember |
|---|---|---|---|---|
| How to clean your teeth | | | | |
| Smoking | | | | |
| Consuming foods or drinks that contain sugar | | | | |
| Consuming sugar free fizzy drinks | | | | |
| Alcohol consumption | | | | |
| The link between your oral health and general health | | | | |

**7) Would you like to receive more advice about the following?**

| | Yes | No |
|---|---|---|
| How to clean your teeth | | |
| Smoking | | |
| Consuming foods or drinks that contain sugar | | |
| Consuming sugar free fizzy drinks | | |
| Alcohol consumption | | |
| The link between your oral health and general health | | |

**8) Please read the following statement, and indicate below whether you agree or disagree with it:**

- Keeping my teeth and gums healthy is a high priority for me (Agree, Disagree, I don't know)
- My dental professional knows enough about me to provide personalised advice about my teeth and gums (Agree, Disagree, I don't know)

**9) Has your dental professional ever shown you how to brush your teeth?**

Yes No I don't remember

*If you answered yes, please answer the following three questions below.*
*If you answered No and I don't know please proceed to the next question*

**a) Did it change how you brushed?** Yes No I Don't remember
**b) Did you learn something new?** Yes No I Don't know
**c) Do you feel that you can brush your teeth better now?** Yes No I Don't know

**10) Do you check how much fluoride is in your toothpaste?** *(Single choice)*

- Yes
- No
- I did not know there were different amounts of fluoride in toothpaste.
- No, and I do not use fluoride toothpaste

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**11) How would you like to receive information about how to keep your teeth and gums healthy?**

| | Yes | No |
|---|---|---|
| Sent to me before an appointment | | |
| Displayed in the waiting room | | |
| Given to me verbally by the dentist | | |
| Given to me verbally by the hygienist/therapist | | |
| Given to me verbally by the nurse | | |
| Sent to me after an appointment | | |

**12) Please read the following statement, and indicate below whether you** Disagree, Agree, don't know or don't pay

- The cost of a dental check-up influences how often I attend a dental appointment
- The cost of a dental treatment influences the treatment I will choose
- I think that dental check-ups are expensive

**13) Please read the following statement, and indicate below whether you:** Agree, Disagree or don't know

- I believe that I have a good understanding of how to look after my teeth and gums
- Looking after my teeth and gums is just as important to me as my overall health
- Avoiding poor oral health is within my control

**14) How long does your own routine dental check-up usually last?** *(Single choice)*

- Up to 5 minutes
- 6-15 minutes
- 16-25 minutes
- 26 minutes+
- Can't remember

**15) How long would you like your own routine dental check-up to last?** *(Single choice)*

- Up to 5 minutes
- 6-15 minutes
- 16-25 minutes
- 26 minutes+
- I don't care as long as it is done well

## Thank you for completing this questionnaire

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