

# Challenges of the Deaf For Self-Care in Oral Health

Desafios dos Surdos para o Autocuidado em Saúde Bucal

Desafíos para las Personas Sordas en el Autocuidado de la Salud Bucal

## RESUMO

O autocuidado em saúde bucal está relacionado à autonomia e à melhoria da qualidade de vida dos surdos. **Objetivo:** Este estudo tem como objetivo compreender os desafios da população surda em relação à prática do autocuidado em saúde bucal. **Método:** Para tanto, foi desenvolvida uma pesquisa com abordagem qualitativa, utilizando dados de entrevistas com participantes de uma comunidade surda de um município brasileiro. **Resultados:** Os resultados apontam como principais desafios da população surda a dificuldade com o autocuidado com a saúde oral e fragilidades na comunicação com o Cirurgião-Dentista. **Conclusão:** Portanto, é necessário a melhor capacitação dos profissionais em Língua Brasileira de Sinais, de modo a proporcionar um cuidado mais humanizado e inclusivo.

**DESCRIPTORIOS:** Autocuidado; Línguas de Sinais; Perda Auditiva; Saúde Bucal; Inclusão Social.

## ABSTRACT

Self-care in oral health is related to autonomy and the improvement of the quality of life of deaf individuals. **Objective:** This study aims to understand the challenges faced by the deaf population regarding the practice of oral health self-care. **Method:** To this end, a qualitative research study was conducted using interview data from participants of a deaf community in a Brazilian municipality. **Results:** The findings highlight the main challenges faced by the deaf population, including difficulties with oral health self-care and weaknesses in communication with dental surgeons. **Conclusion:** Therefore, it is necessary to provide better training for professionals in Brazilian Sign Language in order to promote more humanized and inclusive care.

**DESCRIPTORS:** Self-care; Sign Languages; Hearing Loss; Oral Health; Social Inclusion.

## RESUMEN

El autocuidado en la salud bucal está relacionado con la autonomía y la mejora de la calidad de vida de las personas sordas. **Objetivo:** Este estudio tiene como objetivo comprender los desafíos de la población sorda en relación con la práctica del autocuidado en salud bucal. **Método:** Para ello, se desarrolló una investigación con enfoque cualitativo, utilizando datos de entrevistas con participantes de una comunidad sorda de un municipio brasileño. **Resultados:** Los resultados señalan como principales desafíos de la población sorda la dificultad en el autocuidado de la salud oral y las debilidades en la comunicación con el cirujano dentista. **Conclusión:** Por lo tanto, es necesaria una mejor capacitación de los profesionales en Lengua de Señas Brasileña, con el fin de ofrecer una atención más humanizada e inclusiva.

**DESCRIPTORIOS:** Autocuidado; Lenguas de Señas; Pérdida Auditiva; Salud Bucal; Inclusión Social.

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## INTRODUCTION

Oral health care practices contribute to improving people's health, including that of the deaf population<sup>(1)</sup>. Health care involves the prevention of diseases and health conditions, as well as the promotion of well-being, demonstrating the knowledge of individuals and their families to maintain vitality, cope with diseases, and overcome limitations. New forms of access to information and technologies are changing the way people care for themselves and others<sup>(2)</sup>.

The promotion of self-care constitutes an educational and empowering action that provides adequate information for health decision-making. For this, communication between professionals and patients is essential<sup>(3)</sup>. Therefore, the need for access to quality information, as well as the ability to interpret and apply it in daily life is emphasized<sup>(4)</sup>.

In the context of oral health care, the focus of this study, oral health maintenance includes brushing and flossing, the use of fluoride toothpaste, as well as dietary habits and routine visits to the dentist<sup>(5-7)</sup>. These practices are essential for the self-care of all individuals, including the deaf and hard of hearing, whose population totals 1.5 billion people world-

wide and 9 million in Brazil<sup>(8,9)</sup>.

People with mild to severe hearing loss are considered hearing-impaired and generally use spoken language to communicate. In turn, individuals with profound hearing loss are considered deaf and typically use sign language to express themselves. It is also worth noting the challenge for developing countries in promoting health, given that 80% of people with disabling hearing loss live in low-income countries<sup>(1)</sup>.

In this context, the adoption of Brazilian Sign Language (Libras), made official by the Libras Law No. 10,436 of April 24, 2002<sup>(10)</sup>, stands out. It is worth noting that the deaf constitute a distinct linguistic minority community whose defining characteristics include sign language and a pronounced visual culture, with linguistic behaviors and cultural values that enable these individuals to develop socially, cognitively, and emotionally<sup>(11)</sup>. In light of this, the importance of Libras for communication, socialization, and learning is emphasized<sup>(12-13)</sup>.

It is important to note that deafness does not imply a loss of motor skills, such as walking and holding objects, like a toothbrush and dental floss<sup>(14)</sup>. Therefore, possible inadequacies in self-care practices cannot be explained by the physical inability

to perform oral hygiene habits, but generally stem from the way these actions are taught and/or communicated by professionals, given that one of the objectives of self-care is to foster in the individual the autonomy to maintain their own health<sup>1</sup>.

Some deaf adolescents do not consider themselves capable of self-care, often requiring their parents' assistance, given that caregivers generally perform oral hygiene procedures and sometimes teach them, but do not explain the reasons behind such practices or why they are important. Such mechanisms trigger insecurity in individuals, as they will not always have the assistance of caregivers and will need to understand and practice self-care on their own during adulthood<sup>(13)</sup>.

Studies on oral health self-care among the deaf population have been found in the literature<sup>(1-13)</sup>, but with approaches distinct from this proposal, which is grounded in the premise of a culturally unique community with specific needs and potential for self-care and the care of others, such as a family member. In light of the above, this study aims to understand the challenges faced by the deaf population regarding the practice of oral health self-care.

## METHOD





the necessary oral care in a humane manner<sup>(19)</sup>.

## DISCUSSION

Successful dental care requires effective communication between the patient and the professional in order to understand the main complaints and medical history, as well as to develop and explain the appropriate treatment plan for the case in question. Therefore, dialogue is essential to establish a connection and promote harmony in the treatment process. For this reason, the use of communication aids is fundamental<sup>(19)</sup>.

In this sense, the dental professional must be flexible to adapt to different situations, capable of building a bond of trust and promoting a sense of security during treatment, as well as empowering the patient regarding oral health care, regardless of their circumstances<sup>(20-21)</sup>.

Furthermore, the content analysis led to the definition of the following categories of analysis:

### Self-perception, importance, and oral health care

Participants perceived their oral health as good (36%), fair (54%), and normal (10%). Meanwhile, 37% reported experiencing bad breath and pain.

Overall, participants recognized the importance of oral health in controlling dental caries and tartar, as well as in preventing “bad breath” and gum inflammation.

The importance of oral health care was emphasized, with toothbrushing being the most common practice among respondents (100%), occurring two to three times a day. The study by Silva *et al.* 2020<sup>(20)</sup> involving individuals with hearing impairments also found the same frequency of toothbrushing habits, although it was noted that this was not being done effectively, which is related to the pa-

tient’s level of knowledge regarding proper oral hygiene procedures. This demonstrates the need to improve communication regarding preventive care between the patient and the healthcare team<sup>(20)</sup>.

### Facilities and difficulties

With regard to oral health care resources, key factors include access to preventive tools such as toothbrushes, toothpaste, and dental floss, as well as the availability of online videos featuring a Brazilian Sign Language interpreter, which helps viewers understand oral hygiene instructions.

Regarding advertisements for dental products, such as those aired on television, it was noted that the amount of visual information, such as photos and videos, is sometimes excessive, which hinders the interpreter’s ability to convey the full context, thereby limiting the deaf person’s learning.

In turn, regarding the difficulties, the communication barrier between the professional and the deaf person was highlighted. On this issue, Gupta<sup>(21)</sup> emphasizes the need to overcome communication barriers to allow broader access to dental care.

Among the factors hindering professional-patient interaction, the following stood out: the dentist’s lack of proficiency in Brazilian Sign Language (Libras), the use of masks by the professional—which prevents many deaf individuals from lip-reading—and the need for an interpreter to accompany them during appointments.

Consequently, many deaf individuals reported feeling fear and anxiety during dental care, a finding also noted by Alkadhi<sup>(19)</sup> in his study, in which he emphasized that communication between patient and professional negatively impacts the dental visit. Regarding anesthesia, the dentist often fails to explain what is happening, and the patient is caught

off guard during the procedure. Additionally, they highlighted the lack of explanations and details regarding the diagnosis and prescription, as well as the rushed nature of the care. Among the causes of communication breakdowns between dentists and the deaf is the limited understanding these professionals have of Libras<sup>(25)</sup>.

Furthermore, the simplistic and often childish manner in which many professionals communicate with the deaf was noted, which hinders the adequate sharing of information.

The interviewees suggested improving communication, particularly through the widespread adoption of Libras by healthcare professionals or the hiring of interpreters in public settings. Naseribooriabadi *et al.*<sup>(23)</sup> emphasized that poor communication between most healthcare professionals and the deaf contributes to the population’s lack of knowledge about health and disease processes.

In this sense, the quality of life of these patients is more easily compromised by a lack of autonomy during consultations and by the feeling of dependence on a sign language interpreter. Santos<sup>(25)</sup> and colleagues corroborate this finding by stating that communication difficulties between healthcare providers and deaf patients are the greatest impediment to dignified patient care.

Since the deaf constitute a culturally unique community, with needs and potential for self-care and care for others, the importance of autonomy is emphasized to effectively promote equity, em , and self-sufficiency among this population, not only in the health sector but in all aspects of life<sup>(23-24)</sup>.

## CONCLUSION

This study identified communication with the dentist as the greatest challenge for the deaf regarding oral health self-care. Difficulties in con-

ducting dental care interfere with the deaf patient's understanding of instructions and, consequently, with the quality of care provided.

In this context, although deaf individuals possess the physical and motor skills to perform daily oral hygiene care, dental visits and guidance are essential for maintaining health, and this aspect is compromised due

to communication difficulties.

Furthermore, there is a clear need to improve the training of dental surgeons in the use of Brazilian Sign Language (Libras), particularly those working in the Unified Health System, in order to ensure that the specific needs of this population are met and to guarantee equity in healthcare.

Furthermore, it is worth highlight-

ing the importance of professional interpreters in the healthcare setting, as they facilitate better professional-patient interaction, overcoming communication barriers and ensuring that guidance is understood.

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