



Final Report

Quantitative Research on Oral Health 2007

Health Canada

HCPOR-06-70

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Contract # H1011-060063/001/CY (Feb 6, 2007)

March 12, 2007

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- A) Survey Instrument (English and French)
- B) Banner Tables (under separate cover)

Introduction

Decima Research is pleased to present the following report to the Office of the Chief Dental Officer of the First Nations and Inuit Health Branch of Health Canada. This report summarizes the results of a telephone survey conducted to evaluate Canadians' knowledge regarding dental care and oral health.

Studies have shown that there is a link between poor oral health and other systemic diseases such as diabetes and respiratory diseases. Recent studies are also highlighting the possible connection between poor oral health and other conditions such as heart disease and premature, low birth weight babies. Certain Canadian sub-populations are more at risk of dental disease such as the elderly, Aboriginal, northern dwellers and low income groups. Research is required to assist Health Canada to better understand the connection between oral health and general health.

The goal of this research was to provide Health Canada with information to better understand Canadians' knowledge, attitudes and behaviour with regards to dental care. Specifically, the research objectives were to:

- Determine current health habits (i.e. brushing, flossing, visits to the dentist etc.);
- Measure health indicators (i.e. bleeding when flossing/brushing, mouth pain, ability to chew etc.);
- Assess awareness of the link between oral health and various diseases and the effect of certain behaviours/conditions on oral health; and
- Determine where Canadians currently receive or would like to receive information on the links between oral health and disease and the effect of specific conditions/behaviours on oral health.

This report begins with an executive summary of the key findings and conclusions of the research. Following the executive summary, the detailed study results are presented in three main parts:

1. Oral hygiene practices
2. Perceived relationship between oral health and health conditions
3. Oral health information sources

Provided under separate cover is a set of detailed banner tables that present the results for all intercept survey questions by key regional, and demographic breakdowns. For ease of reference, these tables are denoted, by question number (e.g. Q.1) throughout the detailed analysis section. In

some tables and charts the percentages may not sum to exactly 100%, due to rounding.

A detailed description of the methodology used to conduct this research is provided at the end of this report.

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Executive Summary

This report presents the results of telephone surveys measuring Canadians' knowledge, attitudes and behaviour with regards to oral health.

The following are the key results and conclusions from this research.

Oral Hygiene Practices

Canadians appear to be doing a good job of maintaining the most basic of oral hygiene practices:

- Approximately eight in ten (82%) say they brush their teeth and/or dentures at least twice a day; and
- Almost as many (78%) say they visit a dental professional at least once a year.

However, there are significantly less reporting flossing their teeth on a daily basis, this is particularly true among French-speaking Canadians and seniors.

A total of 42% of Canadians say they brush their teeth at least twice every day and floss every day. At the other end of the spectrum of personal care, 7% say they brush only once a day or less and never floss. Furthermore, 21% of Canadians brush at least twice a day but only flosses once a week or less.

The most diligent on these two personal pro-active behaviours are women and those with post-secondary education.

Men are twice as likely as women to fall into the least diligent group and those outside of census metropolitan areas, those aged 55 or older, those with household incomes under \$40,000 and those with no more than high school education are also more likely to say they brush no more than daily and never floss.

Most Canadians say they have not experienced bleeding gums when brushing or flossing in the last six months, and if they have it is on rare occasions. Students are most likely to have experienced bleeding gums in the last six months.

Perceived Relationship between Oral Health and Health Conditions

Without being prompted, gum disease is the most commonly mentioned health condition linked to poor oral health, with approximately half of Canadians citing this condition. One third of Canadians specifically

mentioned gingivitis and a handful mentioned periodontitis. Other conditions mentioned by Canadians include tooth decay and heart disease. Almost one third of Canadians cited that they did not know what kinds of diseases or health conditions could result from poor oral health.

Canadians from lower income households and those who do not have a post-secondary education are less likely to name gum disease as a condition resulting from poor oral health.

Aided awareness of the relationship between poor oral hygiene and increased risk of disease and other health conditions is moderate among Canadians. When prompted with a list of possible health conditions and impacts on oral health, half of the population agreed that medication increases the risk of developing cavities, and a similar proportion agreed that poor oral health can lead to heart disease. Overall, Canadians claim to be aware of the connection between poor oral health and heart disease; however more recall this connection when prompted (10% vs. 47% when prompted).

Oral Health Information Sources

Most Canadians also say they are aware that there is a connection between oral health and general health, however, almost half do not recall where they got their information from. While almost half cannot cite the source of their knowledge, among those who can, the most common unprompted source of information was from speaking with a dentist or picking up some information in a dental office. Television is also a common information source for learning about the connection between oral and general health.

Not only is the dental office and the television a common place to have learned about the relationship between oral and general health, upon being prompted, most Canadians feel that it is the most effective place to disseminate information to the public about oral health in general.

Other methods of information sharing that are felt to be effective include magazine advertisements, information brochures at pharmacies and information on product packaging. Advertising on TV, in magazines or online is more effective for those under the age of 55.

Résumé

Le présent rapport présente les résultats d'un sondage téléphonique portant sur la connaissance, les attitudes et les comportements des Canadiens à l'égard de la santé bucco-dentaire.

Voici les principaux résultats et les principales conclusions de la recherche.

Habitudes en matière d'hygiène bucco-dentaire

Les Canadiens semblent faire un bon travail concernant les soins d'hygiène bucco-dentaires élémentaires. En effet :

- Environ huit répondant sur dix (82 %) disent se brosser les dents ou brosser leurs dentiers au moins 2 fois par jour,
- Presque autant de répondants (78 %) disent visiter un professionnel de la santé dentaire au moins une fois par année.

Par ailleurs, beaucoup moins de répondants disent utiliser la soie dentaire tous les jours, notamment les Franco-canadiens et les personnes âgées.

En tout, 42 % des Canadiens disent se brosser les dents au moins deux fois par jour et utiliser la soie dentaire tous les jours. À l'autre extrémité des comportements en matière de soins personnels, 7 % des répondants disent se brosser les dents une fois par jour ou moins et n'utilisent jamais la soie dentaire. En outre, 21 % des Canadiens se brossent les dents au moins deux fois par jour, mais n'utilisent la soie dentaire qu'une fois par semaine ou moins.

Concernant ces deux comportements proactifs, les femmes et les personnes qui ont fait des études postsecondaires sont les plus assidues.

Les hommes sont deux fois plus nombreux que les femmes à faire preuve de laxisme. Par ailleurs, les gens qui habitent à l'extérieur d'une région métropolitaine de recensement, les 55 ans ou plus, ceux dont le revenu du ménage est inférieur à 40 000 \$ et ceux qui ont tout au plus terminé leurs études secondaires sont plus nombreux à dire qu'ils se brossent les dents au plus une fois par jour et n'utilisent jamais la soie dentaire.

Au cours des 6 derniers mois, la plupart des Canadiens n'ont pas eu de saignement des gencives lorsqu'ils se sont brossé les dents ou lorsqu'ils ont utilisé la soie dentaire, ou n'ont constaté des saignements qu'en de très rares occasions. Les étudiants sont plus nombreux à avoir eu des saignements des gencives au cours des six derniers mois.

Perception du lien entre la santé bucco-dentaire et les maladies ou problèmes médicaux

De façon spontanée, près de la moitié des répondants mentionnent que les maladies des gencives sont liées à une mauvaise hygiène bucco-dentaire. Le tiers des Canadiens ont mentionné précisément la gingivite et quelques-uns, la parodontite. Parmi les autres problèmes médicaux que mentionnent les Canadiens, notons la carie dentaire et les maladies du cœur. Près d'un Canadien sur trois indique ne pas savoir quelles maladies ou quels problèmes de santé peuvent être causés par une mauvaise santé bucco-dentaire.

Les Canadiens moins bien nantis et ceux qui n'ont pas fait d'études postsecondaires sont ceux qui indiquent le moins que les maladies des gencives découlent d'une mauvaise santé bucco-dentaire.

La connaissance assistée du lien entre la mauvaise hygiène bucco-dentaire et le risque accru de maladies ou de problèmes médicaux est modérée chez les Canadiens. Lorsqu'on présente aux répondants une liste de problèmes de santé et de troubles qui pourraient être engendrés par une mauvaise santé bucco-dentaire, la moitié d'entre eux sont d'accord pour dire que la prise de médicaments peut augmenter le risque de caries et une proportion similaire de répondants sont d'accord pour dire qu'une mauvaise hygiène bucco-dentaire peut entraîner un risque accru de maladies du cœur. Dans l'ensemble, les Canadiens affirment connaître le lien entre une mauvaise hygiène bucco-dentaire et les maladies du cœur; cependant, ils sont plus nombreux à s'en souvenir lorsqu'on leur formule des suggestions (10 % spontanée par rapport à 47 % assistée).

Sources d'information sur la santé bucco-dentaire

La plupart des Canadiens disent également savoir qu'il existe un lien entre la santé bucco-dentaire et la santé générale. Toutefois, près de la moitié d'entre eux ne se rappelle pas comment ils ont obtenu cette information. Pour la moitié des répondants capables d'indiquer leurs sources spontanément, il s'agissait la plupart du temps d'une discussion avec le dentiste ou de brochures ou trousse d'information qu'ils ont prises au bureau du dentiste. La télévision est également une source d'information courante concernant le lien entre la santé bucco-dentaire et la santé générale.

Le bureau du dentiste et la télévision sont non seulement des sources d'information courantes où des Canadiens en ont appris davantage sur le lien entre la santé bucco-dentaire et la santé générale, mais la plupart d'entre eux croient qu'il s'agit également des sources d'information les plus efficaces pour informer le public à propos de la santé bucco-dentaire de façon générale.

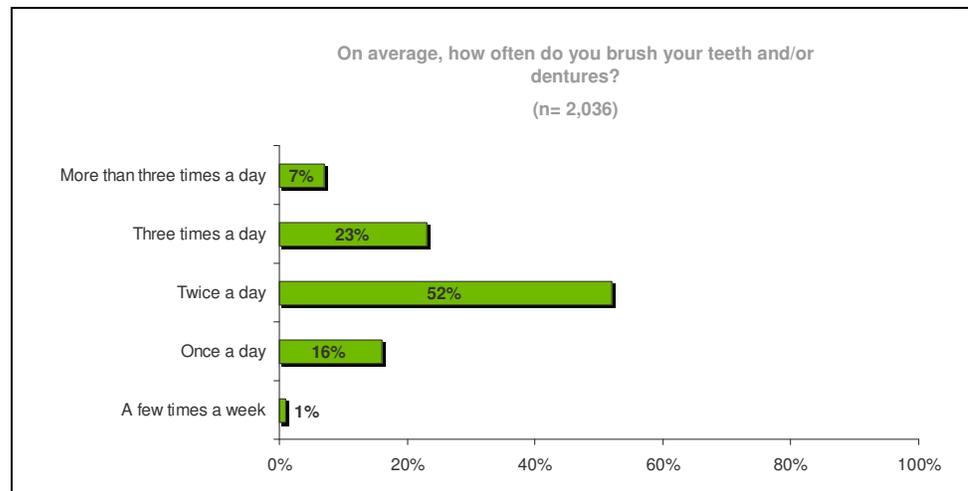
Les autres méthodes jugées efficaces pour informer le public comprennent la publicité dans les magazines, les brochures d'information à la pharmacie et l'information sur l'emballage de produits. Les publicités à la télévision, dans les magazines et en ligne sont plus efficaces chez les moins de 55 ans.

Research Findings

Oral Hygiene Practices

Most Canadians say they brush their teeth and/or dentures at least twice a day. Women are more likely than men to brush more frequently.

Approximately half (52%) of Canadians say they brush their teeth and/or dentures twice a day, while one quarter (23%) indicate brushing three times a day. Almost one in ten (7%) brush their teeth and/or dentures more than three times a day. Nearly one in five (16%) brush once a day and a fraction (1%) of Canadians brush only a few times a week. (Q1)

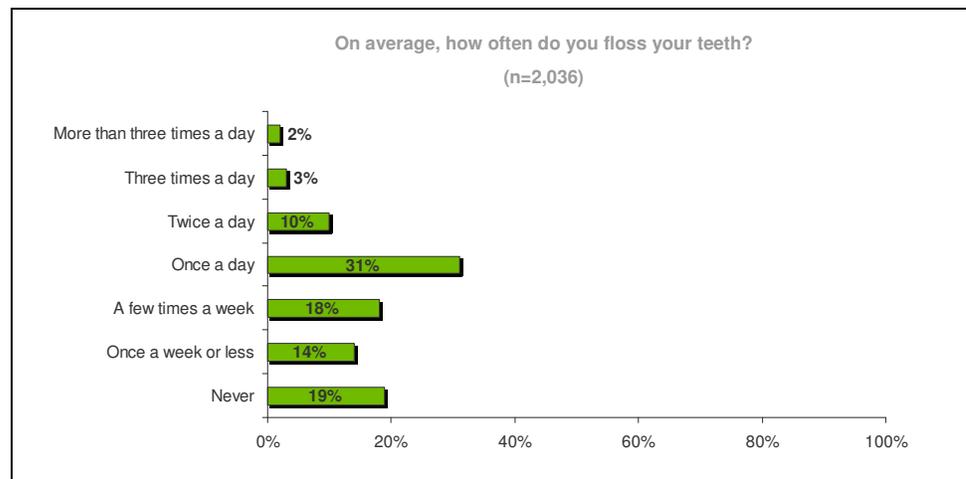


The results revealed the following significant differences between various segments of the Canadian population:

- Women are more likely than men to brush their teeth and/or dentures three times a day or more (35% vs. 24% respectively);
- Canadians between the ages of 18 – 44 (57%) are more likely than those 55 years of age and older (46%) to brush their teeth or dentures twice a day; and
- Furthermore, older Canadians (those 55 years of age and older) and Canadians who have less than a high school education are more likely to brush only once per day (23% and 22% respectively).

Nearly half of Canadians floss their teeth at least once a day. One in five admit they never floss.

When asked how often they floss their teeth, almost half (46%) of Canadians indicated flossing on a regular basis. More specifically, three in ten (31%) floss once a day, one in ten (10%) floss twice a day, and five percent floss their teeth three or more times a day. Two in ten (18%) indicate they floss a few times a week and slightly fewer (14%) floss once a week or less. Furthermore, one in five (19%) say they never floss their teeth. (Q2)

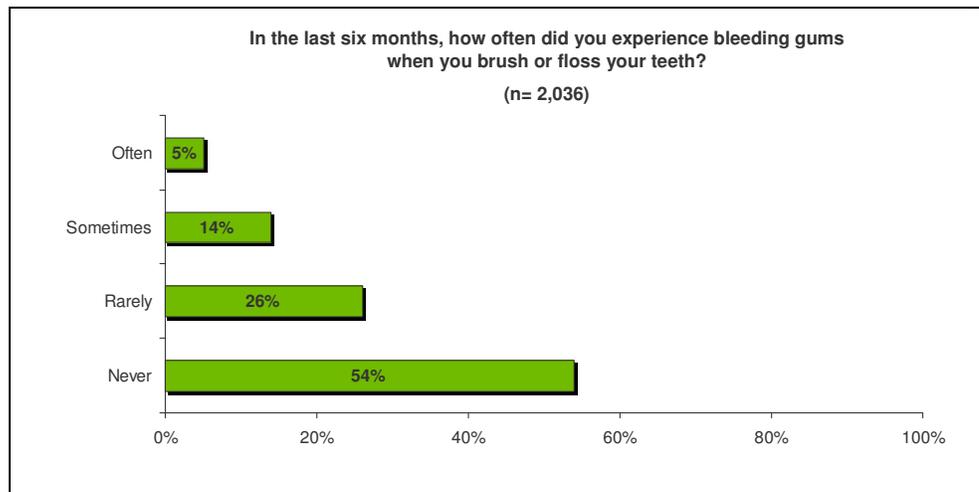


When looking at the data across demographic subgroups, some significant differences exist:

- Women are more likely than men to floss at least once a day (53% vs. 40% respectively);
- Canadians 55 years of age and older (33%), and those who have less than a high school education (30%) are more likely to say they never floss (compared to 14% of Canadians under the age of 55 and 15% of those with a high school education or higher); and
- Francophones also indicate flossing less frequently (24% say they never floss vs. 18% among Anglophones).

Most Canadians have not experienced bleeding gums when brushing or flossing in the last six months.

More than half (54%) of Canadians have not experienced bleeding gums when brushing or flossing their teeth in the last six months, while approximately one quarter (26%) have experienced bleeding on a rare occasion. One in five say that they experience bleeding sometimes (14%) or often (5%) when brushing or flossing. (Q3)



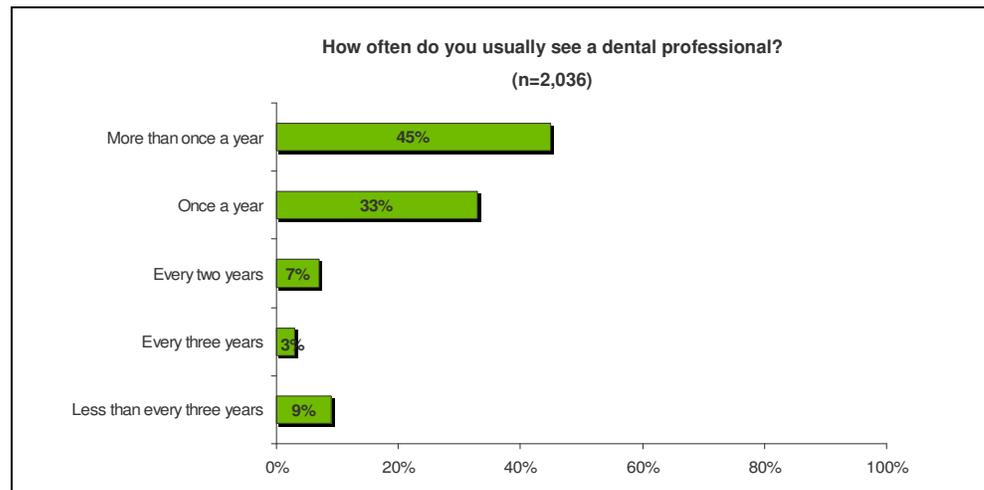
The segments of the population who are less likely to have bleeding when brushing and flossing include:

- English speaking Canadians (82% vs. 76% of French speaking Canadians); and
- Individuals who are retired (89% vs. 79% of those with another employment status). This group does not differ significantly from those who are 55 years of age and older (86%).

Furthermore, students (32%) are more likely than others (17%) to say they have had bleeding while brushing or flossing in the last six months.

Generally, Canadians are seeing dental professionals on a regular basis.

About three out of four Canadians indicate seeing a dental professional at least once a year. More specifically, nearly half (45%) visit a dental professional more than once a year and one third (33%) indicates that they go once a year for a visit. Less than one in ten (7%) see a dental professional once every two years, and even fewer go every three years (3%) or less (9%). (Q4)



The results reveal the following significant differences among segments of the Canadian population:

- Residents of Ontario and British Columbia are more likely to visit a dental professional more than once a year (53% compared to 37% of residents of other provinces and regions surveyed);
- Anglophones (48%) are more likely than Francophones (35%) to see a dental professional more than once a year;
- Canadians living in metropolitan areas (50%) are more likely than those living in more rural areas (38%) to visit more than once a year; and

Those more likely to visit a dental professional less than every three years include:

- Canadians living in a household making less than \$40,000 per year (18% vs. 5% of those make over \$40,000 annually);
- Individuals with a high school education or less (17% vs. 6% of those with more than a high school education);

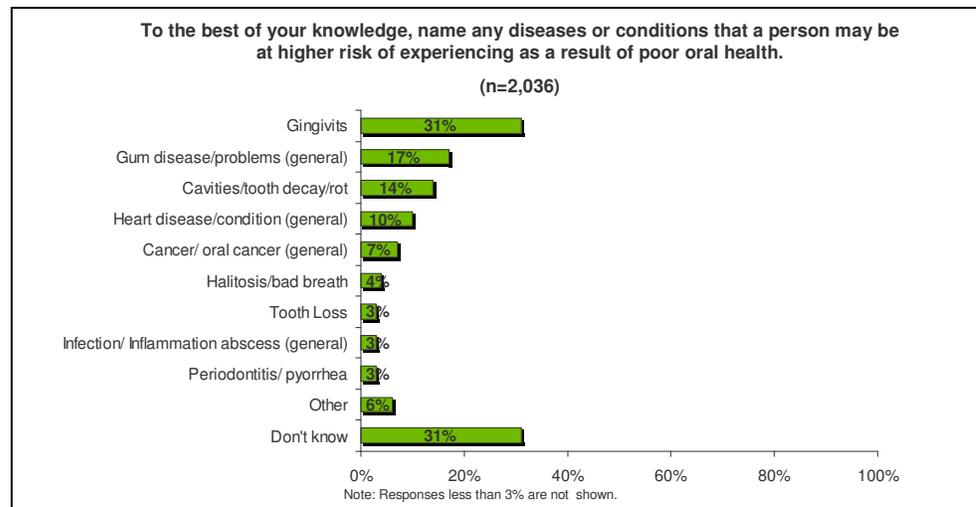
- Canadians 55 years of age and older (15% vs. 7% of those between the ages of 25 – 54); and
- Retirees (17% vs. 6% of those who are currently employed or a student).

Perceived Relationships between Oral Health and Health Conditions

Without being prompted, participants were asked to list any diseases or conditions that they thought a person may be at higher risk of experiencing as a result of poor oral health.

Gum disease is the most commonly mentioned health condition resulting from poor oral health.

Half (51%) of Canadians name gum disease as a condition that results from poor oral health, with one in three (31%) specifically mentioning gingivitis and a few (3%) mentioning periodontitis as types of gum disease. Approximately one in ten believe that poor oral health may result in tooth decay (14%) or heart disease (10%). Furthermore, 7% believe that a person with poor oral health may be at higher risk of cancer and slightly fewer (4%) believe that halitosis may be a result. Similar proportions believe that tooth loss and infection are health conditions experienced due to poor oral health. Of particular note, one in three Canadians cannot name a disease or condition that may result from poor oral health. (Q5)



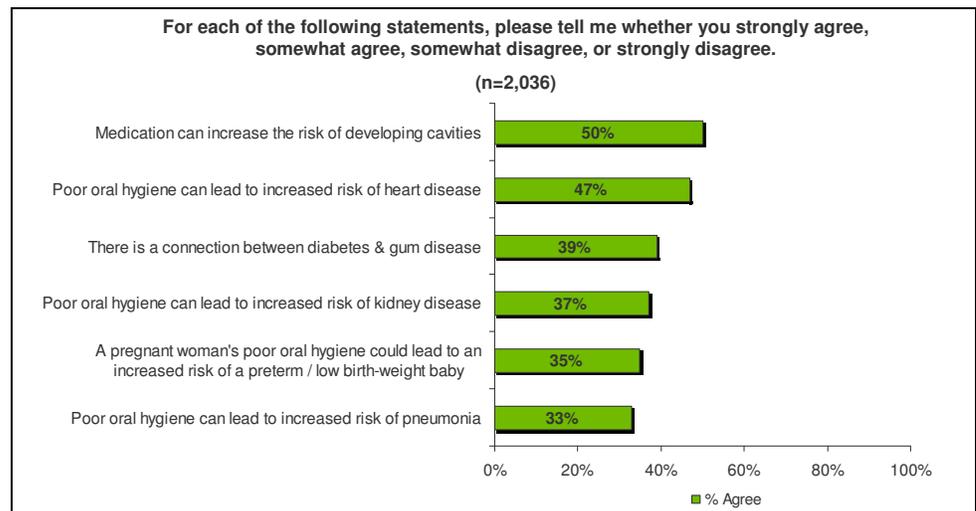
* Participants were able to name more than one condition or disease and therefore responses do not sum to 100%.

The results indicate that there are some segments of the population that are less likely to indicate gum disease (including gingivitis) as a condition resulting from poor oral health. These segments include:

- French speaking Canadians;
- Older Canadians (55 and over);
- Lower income households; and
- Lower educated individuals.

Canadians are moderately aware of the relationship between poor oral hygiene and increased risk of disease and other health conditions.

Half (50%) of Canadians agree that the risk of developing cavities increases when using medication, and a similar proportion (47%) associate poor oral hygiene with increased risk of heart disease. Almost two in five Canadians agree that there is a connection between poor oral health and diabetes (39%), kidney disease (37%) and preterm or low birth-weight babies (35%). One third (33%) agree that poor oral hygiene can lead to increased risk of pneumonia. (Q6 – Q11)



* The statement "Poor oral hygiene can lead to increased risk of kidney disease" was included in this battery of statements as a benchmark to determine the number of people who would respond in the affirmative. Currently there is no connection between poor oral health and kidney disease.

Of note, Anglophones are more likely than Francophones to agree with all six statements. Those living in Quebec are more likely than those living in the other provinces to think that there is no connection between poor oral health and the following conditions:

- Pre-term or low birth-weight babies (57% vs.32% respectively);
- Pneumonia (50% vs. 37% respectively); and
- Heart disease (50% vs.29% respectively).

Results of the data reveal that Canadian women are more likely than men to agree that:

- Medication can increase the risk of developing cavities (56% vs. 44% respectively); and
- Poor oral hygiene can lead to increased risk of heart disease (52% vs. 41% respectively).

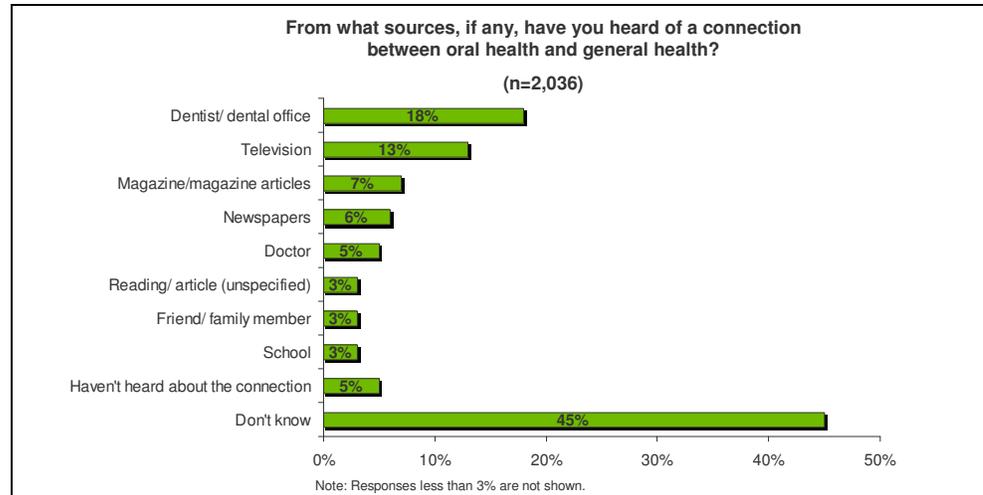
Compared to Canadians that brush, floss and visit a dentist on a regular basis, those with poor oral hygiene practices (those who brush and floss once a day or less and visit a dental professional less than once a year) are more likely to disagree that there is a connection between poor oral health and heart disease (29% with good oral hygiene vs. 46% with poor oral hygiene disagree respectively).

Oral Health Information Sources

Without being prompted, the most frequently cited source of information about the connection between oral health and general health is the dentist or the dental office.

When asked about the sources from which they remember hearing of a connection between oral health and general health, the most common response was the dentist or the dental office (18%). Television is also a common resource of information with 13 percent citing it as a source. Less than one in ten Canadians mentioned magazines (7%), newspapers (6%) or their doctor (5%) as a source of information on the connection between oral and general health. Slightly fewer (3%) indicated learning about this connection by reading an article, through a friend or family member or at school. (Q12)

Although most¹ Canadians are aware that there is a connection between oral health and general health, a good number (45%) do not recall where they received this information.



The segments of the population that are more likely to recall learning about the connection between oral and general health at the dentist’s office include:

- Women (20% vs. 16% of men);
- Homemakers (32% vs. 18% of those with other employment status);
- Those living in households making at least \$40,000 per year (22% vs. 11% of those making less than \$40,000 per year); and
- Canadians with a post-secondary education (21% vs. 14% of those with a high school education or less).

Canadians 45 years of age and older are more likely to have learned about the connection between oral and general health through newspapers than those under the age of 45 (8% vs. 3% respectively).

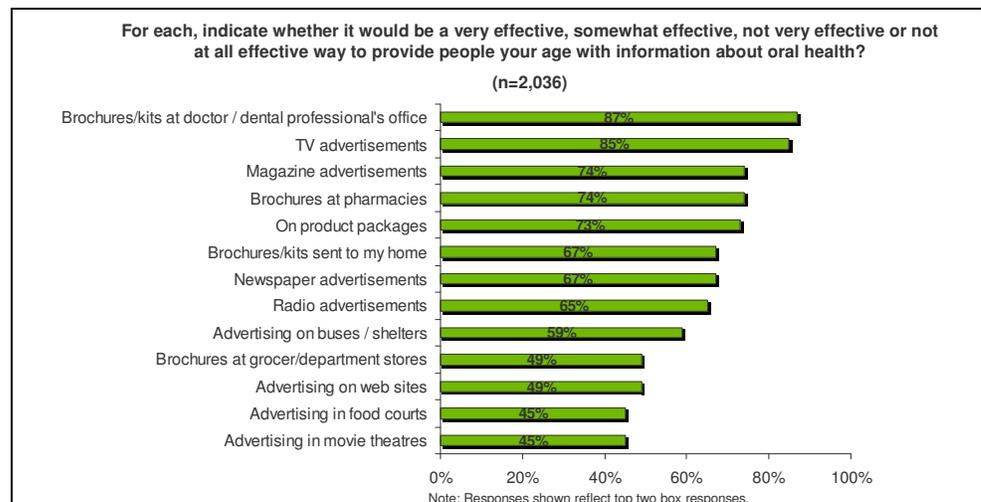
¹ 80% of Canadians agreed that there was a connection between poor oral health and at least one condition mentioned in Q6, Q7, Q9, Q10, Q11.

A doctor or dental professional’s office is the most effective resource to provide information on oral health.

Participants were read a list of potential information sources and were asked to rate each one in terms of its effectiveness to disseminate information about oral health. (Q13 – Q25)

Canadians indicated that brochures or information kits at the doctor or dental professional’s office (87%) would be the most effective way to provide information about oral health, with TV advertising (85%) being the second most effective method. Approximately three quarters feel that advertising in magazines (74%), information brochures displayed at pharmacies (74%) and information on product packages (73%) are effective sources of information on oral health. Furthermore, seven in ten believe that brochures or information kits delivered to their home (67%), newspaper advertisements (67%) and radio advertisements (65%) are effective sources of information on oral health, and six in ten (59%) indicated that advertising on buses and bus shelters would be effective. Half of Canadians (49%) believe that displaying brochures in retail stores or online advertising is an effective way to provide information on oral health.

Advertising in food courts (45%) and in movie theatres (45%) are the least effective ways to provide people with information about oral health.



Canadians under the age of 55 are more likely than those 55 years of age and older to believe the following sources are effective in disseminating information on oral health:

- Television advertisements (88% vs. 78% respectively);
- Magazine advertisements (76% vs. 68% respectively);
- Information on product packages (77% vs. 65% respectively); and
- Online advertising (54% vs. 38% respectively).

Furthermore, younger Canadians, aged 18-24 are more likely to believe that advertising on buses or in bus shelters is an effective method of disseminating information on oral health (76% compared to 57% of those 25 years of age and older).

Methodology

Data Collection

Data for this survey were collected using the teleVox, Decima’s national omnibus survey.

A total of 2,036 surveys were completed – 1,566 in English and 470 in French. The approximate margin of error for a random probability sample of this size is $\pm 2.1\%$ at the 95% confidence level. Data collection for this study was conducted on February 15th through February 26th 2007, using CATI (Computer Assisted Telephone Interviewing).

Respondent Qualification

Interviewers must adhere to quotas to ensure that an accurate representation of male and female respondents, 18 years of age or older, are obtained within each region.

All interviewing across the country is conducted by fully bilingual interviewers. The language of interview is “as it falls” on a national basis, which means that the respondent has the opportunity to complete the interview in either English or French, which ever they prefer.

Sampling

Each week a random sample is generated and the quotas are disproportionately allocated by region as follows:

Region	N=1000	
	Interviews	Error interval
Atlantic	100	+/- 9.8%
Quebec	250	+/- 6.2%
Ontario	325	+/- 5.4%
Manitoba/Saskatchewan	100	+/- 9.8%
Alberta	100	+/- 9.8%
British Columbia	125	+/- 8.8%
Total Canada	1,000	+/- 3.1%

Within the regional quotas assigned for Quebec, Ontario and British Columbia, CMA (Census Metropolitan Area) quotas are instilled to maintain an adequate number of completed interviews in Canada’s three largest markets; Toronto, Vancouver and Montreal. The data is weighted in tabulation to replicate actual population distribution by age and sex within region according to the 2001 Census data.

Sampling Techniques

The Decima TeleVox uses the most up-to-date and accurate sample available on the market. Every Canadian household that has a telephone number has an equal chance of being selected for the study. New exchanges are added monthly.

Quality Control

Decima Research experience and expertise in public opinion and market research extend to the quality and standards of the Decima TeleVox. Interviews are conducted by experienced staff who are thoroughly briefed by supervisors to ensure a complete understanding of the questionnaire content and flow. Detailed interviewing instructions form the basis for all briefings and are strictly adhered to, guaranteeing quality and efficiency in results.

APPENDIX A: Survey Instrument (English and French)

Oral Health Questions for Decima

1. On average, how often do you brush your teeth and/or dentures?
 - a. More than three times a day
 - b. Three times a day
 - c. Twice a day
 - d. Once a day
 - e. A few times a week (not every day)
 - f. Never

2. On average, how often do you floss your teeth?
 - a. More than three times a day
 - b. Three times a day
 - c. Twice a day
 - d. Once a day
 - e. A few times a week (not every day)
 - f. Never

3. In the last six months, how often did you experience bleeding gums when you brush or floss your teeth?
 - a. Often
 - b. Sometimes
 - c. Rarely
 - d. Never

4. How often do you usually see a dental professional?
 - a. More than once a year
 - b. Once a year
 - c. Every two years
 - d. Every three years
 - e. Less than every three years

5. To the best of your knowledge, name any diseases or conditions that a person may be at higher risk of experiencing as result of poor oral health. Any others?

For each of the following statements, please tell me whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree. The first is...

6. There is a connection between diabetes and gum disease.
7. Medication can increase the risk of developing cavities.
8. Poor oral hygiene can lead to increased risk of kidney disease.
9. A pregnant woman's poor oral hygiene could lead to an increased risk of a preterm or low birth-weight baby.

10. Poor oral hygiene can lead to increased risk of pneumonia.
11. Poor oral hygiene can lead to increased risk of heart disease.
12. Oral health refers to the condition of one's teeth or dentures, tongue, gums, lips and jaw joints. From what sources, if any, have you heard of a connection between oral health and general health?

I am going to read you a list of potential sources of information for providing information on oral health. For each, I would like you to tell me whether it would be a very effective, somewhat effective, not very effective or not at all effective way to provide people your age with information about oral health.

13. Advertising in movie theatres
14. Advertising in shopping mall food courts
15. Advertising on buses and on bus shelters
16. Advertising on web sites
17. Brochures and information kits sent to my home
18. Brochures and information kits available at my doctor/dental professional's office
19. Brochures at pharmacies
20. Brochures at grocery/department stores
21. On product packages
22. Magazines advertisements
23. Newspaper advertisements
24. Radio advertisements
25. Television advertisements

Questions sur la santé bucco-dentaire – Décima

1. En moyenne, à quelle fréquence vous brossez-vous les dents ou brossez-vous vos dentiers?
 - a. Plus de trois par jour
 - b. Trois fois par jour
 - c. Deux fois par jour
 - d. Une fois par jour
 - e. Quelques fois par semaine (pas tous les jours)
 - f. Jamais

2. En moyenne, à quelle fréquence utilisez-vous la soie dentaire?
 - a. Plus de trois par jour
 - b. Trois fois par jour
 - c. Deux fois par jour
 - d. Une fois par jour
 - e. Quelques fois par semaine (pas tous les jours)
 - f. Jamais

3. Au cours des 6 derniers mois, à quelle fréquence vos gencives ont-elles saigné lorsque vous vous êtes brossé les dents ou lorsque vous avez utilisé la soie dentaire?
 - a. Souvent
 - b. Parfois
 - c. Rarement
 - d. Jamais

4. À quelle fréquence consultez-vous un professionnel de la santé dentaire?
 - a. Plus d'une fois par année
 - b. Une fois par année
 - c. Tous les deux ans
 - d. Tous les trois ans
 - e. Moins souvent qu'aux trois ans

5. À votre connaissance, quelles maladies ou quels problèmes peut entraîner une mauvaise hygiène bucco-dentaire? Y en a-t-il d'autres?

Veillez indiquer si vous êtes fortement en accord, plutôt en accord, plutôt en désaccord ou fortement en désaccord avec chacun des énoncés suivants. Commençons par...

6. Il y a un lien entre le diabète et les maladies des gencives.
7. La prise de médicaments peut augmenter les risques de caries.
8. Une mauvaise hygiène bucco-dentaire peut entraîner un risque accru de maladies rénales.

9. Une mauvaise hygiène bucco-dentaire pendant la grossesse peut entraîner un risque accru d’avoir un bébé prématuré ou de faible poids à la naissance.
10. Une mauvaise hygiène bucco-dentaire peut entraîner un risque accru de pneumonie.
11. Une mauvaise hygiène bucco-dentaire peut entraîner un risque accru de maladies du coeur.
12. La santé bucco-dentaire fait référence à l’état des dents, des dentiers, de la langue, des gencives, des lèvres et de la mâchoire d’une personne. Où avez-vous entendu parler d’un lien entre la santé bucco-dentaire et la santé générale?

Je vais vous lire une liste de sources d’information potentielles sur la santé bucco-dentaire. Pour chacune de ces sources, j’aimerais que vous me disiez si, selon vous, il s’agit d’une façon très efficace, plutôt efficace, pas très efficace ou pas du tout efficace d’informer les gens de votre âge sur la santé bucco-dentaire.

13. Publicités au cinéma
14. Publicités dans l’aire de restauration d’un centre commercial
15. Publicités dans les autobus et sur les abribus
16. Publicités en ligne
17. Brochures ou trousse d’information envoyées à la maison
18. Brochures ou trousse d’information disponibles au bureau du médecin/du dentiste
19. Brochures dans les pharmacies
20. Brochures dans les épicerie/les magasins
21. Renseignements sur l’emballage des produits
22. Publicités dans des magazines
23. Publicités dans les journaux
24. Publicités à la radio
25. Publicités télévisées

APPENDIX B: Banner Tables (under separate cover)