SUPPLEMENTARY INFORMATION

Supplementary Table 1 - Search Strategy.

Database	Search (January 27th)	References
EMBASE	("health knowledge, attitudes, practice" OR "knowledge attitudes practice" OR "Knowledge" OR "Attitudes" OR "Practice" OR "Awareness" OR "Health Behavior" OR "Health Behaviors" OR "Health-Related Behavior" OR "Health-Related Behaviors" OR "Health Related Behavior" OR "Health Related Behaviors") AND ("parents" OR "parent" OR "Parent-Child Relations" OR "parental" OR "mothers" OR "mother" OR "fathers" OR "father" OR "guardian" OR "caregiver") AND (bruxism OR bruxisms OR "Childhood Sleep Bruxism" OR "teeth grinding" OR "awake bruxism" OR "Bruxomania" OR "Nocturnal Bruxism" OR "sleep bruxism")	149
LILACS	("health knowledge, attitudes, practice" OR "knowledge attitudes practice" OR "Knowledge" OR "Attitudes" OR "Practice" OR "Awareness" OR "Health Behavior" OR "Health Behaviors" OR "Health-Related Behavior" OR "Health-Related Behaviors" OR "Health Related Behavior" OR "Health Related Behaviors" OR "health knowledge" OR attitudes OR practice OR conhecimentos OR "atitudes e prática em saúde" OR conocimientos OR "actitudes y práctica en salud") AND (parents OR parent OR "Parent-Child Relations" OR "parental" OR "mothers" OR "mother" OR "fathers" OR "father" OR "guardian"or pais OR padres OR mãe OR pai OR madre OR padre OR "legal guardian" OR "tutores legais" OR "tutores legales" OR caregiver OR cuidadores) AND (bruxism OR bruxismo OR "bruxismo infantil" OR "sleep bruxism" OR " bruxismo do sono" OR "bruxismo del sueño" OR "Childhood Sleep Bruxism" OR "teeth grinding" OR "awake bruxism" OR "Bruxomania" OR "Nocturnal Bruxism") AND (db:("LILACS"))	39
Pubmed	("health knowledge, attitudes, practice"[MeSH Terms] OR "health knowledge attitudes practice"[All Fields] OR "knowledge attitudes practice"[All Fields] OR "Knowledge"[All Fields] OR "Attitudes"[All Fields] OR "Practice"[All Fields] OR "Awareness"[MeSH Terms] OR "Health Behavior"[MeSH Terms] OR "Health Behavior"[All Fields] OR "Health Behaviors"[All Fields] OR "health related behavior"[All Fields] OR "health related behaviors"[All Fields] OR "health related behavior"[All Fields] OR "health related behaviors"[All Fields]) AND ("parents"[MeSH Terms] OR "parents"[All Fields] OR "parent"[All Fields] OR "Parent-Child Relations"[MeSH Terms] OR "parental"[All Fields] OR "mothers"[MeSH Terms] OR "mothers"[All Fields] OR "mother"[All Fields] OR "fathers"[MeSH Terms] OR "fathers"[All Fields] OR "father"[All Fields] OR "guardian"[All Fields] OR "caregiver"[All Fields]) AND ("sleep bruxism"[MeSH Terms] OR "sleep bruxism"[All Fields] OR "bruxism"[MeSH Terms] OR ("bruxism"[MeSH Terms] OR "bruxism"[All Fields]) OR "bruxisms"[All Fields] OR "Childhood Sleep Bruxism"[All Fields] OR "teeth grinding"[All Fields] OR "awake bruxism"[All Fields] OR "Bruxomania"[All Fields] OR "Nocturnal Bruxism"[All Fields])	34
Scopus		103

	TITLE-ABS-KEY (("knowledge attitudes practice" OR "Knowledge" OR "Attitudes" OR "Practice" OR "Awareness" OR "Health Behavior" OR "Health Behaviors" OR "Health-Related Behavior" OR "Health-Related Behaviors" OR "Health Related Behavior" OR "Health Related Behaviors") AND ("parents" OR "parent" OR "Parent-Child Relations" OR "parental" OR "mothers" OR "mother" OR "fathers" OR "father" OR "guardian" OR "caregiver") AND (bruxism OR bruxisms OR "Childhood Sleep Bruxism" OR "teeth grinding" OR "awake bruxism" OR "Bruxomania" OR "Nocturnal Bruxism" OR "sleep bruxism"))	
Web Of Science	("health knowledge, attitudes, practice" OR "knowledge attitudes practice" OR "Knowledge" OR "Attitudes" OR "Practice" OR "Awareness" OR "Health Behavior" OR "Health Behaviors" OR "Health-Related Behavior" OR "Health-Related Behaviors" OR "Health Related Behavior" OR "Health Related Behaviors") AND ("parents" OR "parent" OR "Parent-Child Relations" OR "parental" OR "mothers" OR "mother" OR "fathers" OR "father" OR "guardian" OR "caregiver") AND (bruxism OR bruxists OR "Childhood Sleep Bruxism" OR "teeth grinding" OR "awake bruxism" OR "bruxomaniac" OR "Nocturnal Bruxism" OR "sleep bruxism") (Tópico)	44
Google Scholar	(“Knowledge” OR “Conhecimentos” OR “Conocimentos”) AND (“parents” OR “caregiver” OR “padres” OR “pais”) AND (“bruxism” OR “bruxismo”)	7930
Proquest	noft(("health knowledge, attitudes, practice" OR "knowledge attitudes practice" OR "Knowledge" OR "Attitudes" OR "Practice" OR "Awareness" OR "Health Behavior" OR "Health Behaviors" OR "Health-Related Behavior" OR "Health-Related Behaviors" OR "Health Related Behavior" OR "Health Related Behaviors") AND ("parents" OR "parent" OR "Parent-Child Relations" OR "parental" OR "mothers" OR "mother" OR "fathers" OR "father" OR "guardian" OR "caregiver") AND (bruxism OR bruxisms OR "Childhood Sleep Bruxism" OR "teeth grinding" OR "awake bruxism" OR "Bruxomania" OR "Nocturnal Bruxism" OR "sleep bruxism"))	9

Supplementary Table 2- Joanna Briggs classification determined by authors.

Guideline	Checklist	Classification		
		Y	N	U
Cross-sectional	1- Were the criteria for inclusion in the sample clearly defined?	When authors provide clear, well defined, namely inclusion and exclusion criteria	When no inclusion/exclusion criteria were presented	When criteria were not specified with sufficient detail
	2- Were the study subjects and the setting described in detail?	Study sample described with sufficient detail, if were in school or clinic attendance, type of selection, and time period	No description of the population details	No clear description of the population details
	3- Was the exposure measured in a valid and reliable way?	Clear description of the use of a validated questionnaire or index to measure knowledge of bruxism	No included the validity and reliability of the questionnaire	Not clear description of the method of measurement of the questionnaire
	4- Were objective, standard criteria used for measurement of the condition?	There was an evaluation consistent with the research criteria and knowledge about bruxism	The questionnaire was not described and it was not possible to know clearly which questions were asked	When no clear which methods were used to determine the the knowledge of bruxism
	5- Were confounding factors identified?	Identified confounding factor as presence of bruxism, children kind of sleep, if they sleep close to their parents, sociodemographic characteristics	No identified these confounding factor	Not clear if the study identified these confounding factor
	6- Were strategies to deal with confounding factors stated?	All confounding factors were reduced in data analysis	Confounding factors were not reduced in data analysis	Only used a subset of confounders in the analysis or did not make it clear which factors were used in the analysis.

	7- Were the outcomes measured in a valid and reliable way?	Investigate the knowledge of bruxism and determine the instrument and how was the measurement.	Did not determine the criteria for diagnosis and measurement to investigate the knowledge of bruxism	Unclear instrument used and how collected the knowledge of bruxism
	8- Was appropriate statistical analysis used?	When it was detailed which, analytical techniques were used and how specific confounders were measured. Performed regression	Did not perform regression analyzes and did not presented the statistical analysis	Not clear about the analyses and if the method used was adequate

Notes: Y: yes; N: no; U: unclear; NA: not applicable

Supplementary Table 3- Summary of descriptive characteristics of included articles (complete version).

Author, Year, Country	Study design	Participants Characteristics	Age (years)	Objectives	Questionnaire type Questionnaire validation	Pilot Study	Type of Bruxism	Bruxism Knowledge	Parent's Education	Sleep Habits (Children and Parents)	Main Findings	Main Conclusion	Financial Suport	Conflicts of Interest
Alouda *et al.,* 2017, Saudi Arabia	Cross-sectional	561 mothers Questionnaires distributed in the waiting room areas of Riyadh Colleges of Dentistry and Pharmacy in Riyadh, Saudi Arabia. **Child's Gender** Relation of gender was not incorporated in the questionnaire.	The median age of the participants was 31–40 years (*n* = 307, 55%) Children age between 4 and 10 Children median age- Not reported	To evaluate the potential effect of mothers' work status on children's bruxism status between the ages of 4–10.	**Who Answered?** Not reported **Cocktail** The questions were developed and adapted from a cocktail of questionnaires including and not limited to Weideman's Study, the sleep behavior scale by Fisher, the pediatric questionnaire, teeth grinding questionnaire and standardized questionnaire. **Questionnaire validation** No	No	Not reported The phrase "bruxism" was changed to "teeth grinding at night" to make it easier for mothers to understand.	**Self-declaration of knowledge of bruxism** 44.1% of Working Mothers (WM) and 35% of Non-working Mothers (NWM) had some form of information pertaining to bruxism. Both WM (48.7%) and NWM (48.9%) have noticed bruxism around 1–	WM constituted 73% (*n* = 388) of the total sample (*n* = 529). The majority of the participants were teachers (28.9%) followed by NWM (26.7%), administrators (19.7%), engineers (14.4%), and doctors (9.5%) Most WM worked 6 h/day (59%) followed by 8 h (35%) and 4 h	**Habits** The most common habit was drooling (n = 220, 42.3%), followed by sleep talking (n = 150, 28.3%), snoring (n = 132, 25%), colic (n = 93, 17.5%), adenoids (n = 82, 16.4%), wakes up from muscle cramps (n = 53, 10%), and sleepwalking (n = 26, 4.9%). **Hours of sleep** Not reported	The most common habit reported by parents was children grinding their teeth at night (n = 141, 34.56%), followed by nail biting (n = 136, 24.8%), and bedwetting – enuresis (n = 102, 22.37%). Report of headaches and aggression were least common at (n = 49, 9.8%) and (n = 40, 7.86%), respectively.	Although NWM were less likely to have information about tooth grinding, they were more cognizant of their child's bruxism status (29.2%). WM were more likely to have more information about tooth grinding (44.1%) also notice the sounds at night while their child slept (67.5%) and had noticed this in the past few years (42.3%).	No	No conflicts of interest

							2 times a week. **Definition of bruxism** Not reported	(6%), respectively.	**Kind of sleep** Not reported **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Not reported				
Alves *et al.,* 2019, Brazil	Cross - sectional	103 parents or caregivers with children between three and twelve years old. Most participants were mothers (63.1%). Conducted at the	Mean age was 34.17 (± 9.55) years among the caregivers and 7.36 (± 2.34) years among the children.	To evaluate knowledge on bruxism among caregivers of children treated in a pediatric dentistry clinic.	**Who Answered?** Mother: 63.1% Father: 17.5% Grandparent: 7.8% Other: 11.7% **Questionnaire Type** Questionnaire designed by Serra-Negra *et al.,* 2013 based on the criteria of the American Association of Sleep Medicine.	Yes	Not reported	**Self-declaration of knowledge of bruxism and definition of bruxism** The percentage of those who said they know what	Not reported	**Hours Of sleep** The percentage of hours slept and children who had bruxism was more than eight hours (16 (61.5%)) and up to eight hours a night 38.5%). The prevalence of children	**Etiology** 74.8% were unable to say what led to bruxism and 16.5% associated bruxism with emotional factors Seventeen caregivers (16.5%) and 26 children (25.2%) had bruxism.	67 % know what is bruxism Child's sex, child's sleep and the search for help were significantly associated with bruxism (p = 0.034, 0.013 and < 0.001, respectively) The prevalence of bruxism	Not reported	Not reported

pediatric dentistry clinic of the Ceuma University in the city of São Luís (northeastern Brazil). **Child's Gender** Female: 56.3% Male: 43.7%		**Questionnaire validation** Yes	Bruxism was 67%. Of these, 52.4% defined it correctly. 95.5% of the participants defined the parafunctional habit correctly	who did not have bruxism and slept hours more than eight hours was 49.3% and less than eight hours 50.7%. P=0.283 **Does your child sleep well?** Children with bruxism were reported to sleep better (57.7%) than children without bruxism (42.3%). (p= 0.013) **Kind of Sleep** Children with bruxism 80.8% were reported to have restless sleep, while 19.2% slept	Bruxism was more prevalent in the boys. Among the children with this parafunctional habit, help was sought for 11.5%.	was 25.2% among the children and 16.5% among the caregivers Knowledge among caregivers about bruxism is insufficient, especially regard to the etiology of bruxism.

		normally (p= 0.06) **Sleep Alone** Of the children who have bruxism, 19.8% slept alone and 80.8% slept with someone. **Parents/ Guardians with bruxism?** Among the 17 caregivers with bruxism, six also had children with bruxism.

Caliskan *et al* ., 2020, Turkey	Cross - sectional	265 parents (159 were female and 106 were male) in the waiting room during their children's appointments in the Faculty of Dentistry of the Mersin University, Mersin, Turkey the majority of 54.7% of the children were male and 45.3% were female. **Child's Gender** Female: 45.3% Male: 54.7%	Parents (60.8%) were between the ages of 31-40 and only 2.6% were over 51 years old. The age of the children ranged from 6 months to 16 years with a mean age of 8.15±2.71 years and	To evaluate the knowledge of parents about bruxism in their children at the pediatric dentistry and oral surgery clinics in the Faculty of Dentistry of the Mersin University, Mersin, Turkey.	**Who Answered?** Not reported **Questionnaire** Modified from a questionnaire that was validated by Serra-Negra *et al.,* 2009.	Yes	Awake and Sleep Bruxism Bruxism: nocturnal yes=57, no=181 ; awake yes=19, no=2	**Self-declaration of knowledge of bruxism** Not reported **Definition of bruxism** Only 8.3% of the parents were able to correctly define bruxism Most of the parents stated that bruxism was caused by dental problems and emotional factors (33.6% and 32.8%), and that tooth clenching	Most parents had completed Primary School (38.9%), Middle School (12.8%) and High School (26.4%). 21.9% finished the University.	**Hour of sleep** 19.2% of children slept up to eight hours a night and 79.2% eight or more than eight hours. **Kind of Sleep** 6% of parents reported that their children slept restless, while 96.3% slept normal. **Sleep Alone** 66.4% of children slept alone and 33.6% slept with someone. **Parents/ Guardians with bruxism?** Yes: 17.7%	Most of the parents stated that bruxism was caused by dental problems and emotional factors (33.6% and 32.8%), and that tooth clenching and grinding would negatively impact the health of children (%77.4).	It was observed that some parents had inadequate knowledge about bruxism in children and this was mostly related to the educational background of the parents.	Not reported	Not reported

							and grinding would negatively impact the health of children (%77.4).		No: 79.6%				
Clementino *et al.,* 2017, Brazil	Cross-sectional	148 parents/ guardians of children aged 3–12 years awaiting treatment at the paediatric dentistry clinics of the State University of Paraiba in the city of Campina Grande, Brazil 77% of the participants were mothers, followed by grandfather/ grandmother (9.5%)	52% of children were younger than 7 years and 48% had 7 years or more. Parents and caregivers mean age was Not reported	To evaluate the prevalence of sleep bruxism and associated factors among children aged 3–12 years, reported through parental perception	**Who Answered?** Mother: 77.0% Father: 8.8% Grandfather/grandmother: 9.5% Other: 4.7% **Questionnaire** A validated questionnaire (Serra-Negra *et al*. 2013; Tavares-Silva *et al.* 2016) was created based on the criteria of the American Association of Sleep Medicine (AASM 2005; Serra-Negra et al. 2010). **Questionnaire validation** Yes	Yes	Sleep Bruxism	**Self-declaration of knowledge of bruxism** 64.2% of parents did not know the meaning of bruxism and 35.8% did. **Definition of bruxism** Not reported	Not reported	**Hours of Sleep** Of the children who had bruxism, 38% slept up to eight hours a night and 30.5% slept more than eight hours a day **Kind of Sleep** 30.2% of parents with children with bruxism reported that their children	Girls were statistically associated with this parafunctional habit, unadjusted: p=0.020 (1.095–4.536.) adjusted: p= 0.014 (1.060–1.664) The present study showed that sleep bruxism was more prevalent among older children (7–12 years). Restless sleep was statistically	Most parents/guardians did not know the meaning of bruxism. The prevalence of sleep bruxism in a Brazilian child population was high and was associated with gender and having restless sleep	Not reported	Not reported

Child's Gender Female: 51.4% Male: 48.6%			slept well, while 50% reported that they did not sleep well. Of the children who had bruxism, 19.1% had restless sleep and 41.1% had normal sleep **Sleep Alone** 34.5% of children with bruxism sleep with someone and 31.1% sleep alone. **Parents/ Guardians with bruxism?** Of the children who had bruxism, 30.2% had bruxism. Of the children who didn't	associated with the occurrence of sleep bruxism.

									have bruxism, 69.8% had bruxism.				
Ferreira, 2019, Brazil and Carvalho, 2019, Brazil	Cross-sectional	94 Parents/guardians of children from 05 to 12 years old, with and without self-reported bruxism, assisted at the Infant Internship Clinics located in the Department of Dentistry of the Centro Universitário Doutor Leão Sampaio-UNILEÃO **Child's Gender** Not reported	61.7% of guardians were between 19 and 36 years old and 38.3% were between 37 and 68 years old. Regarding the age of the children who are being treated at the clinic, 75.5% of the children were between 6 and 13 years old and 24.5% between 1 and 5 years old.	To analyze the knowledge of parents and/or guardians about bruxism, in children assisted at the UNILEÃO school clinic, to find out how bruxism is interpreted by them	**Who Answered?** Mother 69.1% Father 18,1% Grandparents 4,3% Others 8,5% **Questionnaire** A questionnaire prepared by a team of researchers from the Federal University of Minas Gerais (Serra-negra *et al.,* 2013) based on the criteria of the American Association of Sleep Medicine (Orvalho et al., 2003, Serra-negra *et al.,* 2013). **Questionnaire validation** Yes	Yes	Not reported	**Self-declaration of knowledge of bruxism** 68.1% of the parents stated that they did not know what bruxism is, and 94.7% of the researched guardians never sought help due to bruxism. **Definition of Bruxism** It was observed that before the explanation 9.6%	Not reported	**Hours of sleep** 11.7% of children sleep less than 8 hours a day and 88.3% sleep eight hours or more a day. **Kind of sleep** 84% of children sleep well and 54.7% of children are restless during sleep **Sleep alone** 26.5% of children sleep alone in their room and 73.4% sleep with someone **Parents/ Guardians**	Most children have a satisfactory amount of sleep sleeping eight hours or more a night, however, a considerable portion of surveyed parents also reported that children are agitated during sleep, A small part of the guardians interviewed stated that they did not have bruxism, however, after the interviewer gave a clear and detailed explanation of what bruxism is, the percentage of guardians	Most of the guardians of the children assisted at the UNILEÃO pediatric dentistry clinic did not really know what bruxism is.	Not reported	Not reported

							of those responsible answered having bruxism, after the interviewer's explanation 20.2% started to report having.		**with bruxism?** Not reported	who were unaware of the parafunctional habit increased considerably.			
Gurunathan et al., 2024 India	Cross-sectional	1065 parents, either fathers or mothers of children between 3 and 12 years **Child's gender** Female: 48.5% Male: 50.5%	1,065 participants, of which 467 (43.8%) had children of 3–6 years of age and 598 (56.2%) participants were parents of kids of 7–12 years. Parent's mean age: A total of 61 (5.7%) parents were between 21 and 30 years of age, 834 (78.3%) parents were	Assessing the knowledge, attitude, and practice of parents regarding bruxism in their children	**Who Answered?** Mother: 65.6% Father: 34.2% Other: 0.2% **Questionnaire** The survey was conducted online using Google Forms, and a window period of 3 months was given for submission of responses. **Questionnaire validation** The face validity and content validity were assessed by a team of six experts.	No	Not reported	**Self-declaration of knowledge of bruxism** Not reported **Definition of bruxism** Most of the participants knew that bruxism is clenching or grinding the teeth tightly, 521 (48.9%), 309	5.0% had completed middle school, 15.4% had completed high school, 74.8% were graduates, and 4.8% were not educated.	**Hours of Sleep** Most of the parents (73.8%) reported that their child slept for 8–10 hours, 18.3% reported 5–7 hours, and 7.9% reported greater than 10 hours. **Kind of Sleep** Most of the kids slept normally 63.4%. 21.2% were restless, and 15.4% were having	The findings show that the knowledge of parents on the condition has to be improved.	The knowledge of parents about the condition is not sufficient. 48.9% of the participants knew what bruxism was.	No	No conflicts of interest

	31–40 years of age, and 99 (9.3%) were >41 years.	(29.0%) thought it was repeatedly closing and opening the mouth like shivering, and 235 (22.1%) thought it was chewing motion during sleep.	disturbed sleep **Sleep Alone** Most of the kids did not sleep alone 68.2%, 13.9% sometimes slept alone, whereas 17.9% always slept alone. **Parents/ Guardians with bruxism?** The majority of the parents, 542 (50.9%) said that none of their family members had the condition, 309 (29.0%) said that their family members had the condition, and 214 (20.1%) were not aware if their family

										members had the condition.				
Hafiz *et al.,* 2021, Saudi Arabia	Cross-sectional	One thousand five hundred eighty-four parents of children aged between 6-10 years old. Of these, 1,499 who agreed to participate in the study. **Child's Gender** Female: 45% (n = 675). Male: 55% (n = 824	The children's ages ranged from 6-10 years, where 30.4% were six years old. Mean age of 7.89 years Parents mean age- Not reported	To assess the parental awareness about bruxism in children in Saudi Arabia.	**Who Answered?** Not reported **Questionnaire** The electronic survey was distributed using the institution's social media platforms. **Questionnaire validation** Yes	Yes	Not reported	**Self-declaration of knowledge of bruxism** The assessment of knowledge towards bruxism among parents shows that 37.5% of parents were aware of what bruxism is, 34.7% were doubtful, and 27.8% were not aware of it, which is statistical	Not reported	**Hours of sleep** Among children who had bruxism, 46.5% slept more than 8 hours and 42.1% slept up to eight hours a night **Kind of sleep** Among the children who had bruxism, 64% slept restlessly and 39.5% slept normally **Sleep alone** Among children who had bruxism,	The parent-reported prevalence of bruxism among their children was 45.7%; additionally, 12.9% reported that more than one child in their household was affected by bruxism 8.5% of fathers and 8.3% of mothers reported having the problem of bruxism.	Inspite of that almost 38% of the participants in this study reported knowing what bruxism is, 91.5% of the respondents defined bruxism properly by choosing the correct definition in the questionnaire.	Not reported	No conflicts of interest

			ly significant (p<0.0001).	52.7% slept with someone and 45.3% slept alone
			47.5% have claimed to know what bruxism is.	**Parents/ Guardians with bruxism?**
			Definition of Bruxism	Father: 5.8% Mother: 83.9%
			A higher proportion (91.5%) of parents reported the definition of bruxism as “when a person clenches hard on their teeth, making an audible sound which can be heard by others.”	

Kasimoglu *et al.,*2020, Istambul	Cross-sectional	Parents of 367 children who enrolled in the Department of Dentistry at the Faculty of Dentistry at Istanbul University between November 2017 and April 2018 were included in the study. **Child's gender** 48.8% of the children were girls and 51.2% were boys.	25.6% of the children of parents participating in the study are in the period preschool (0-7 years old) and 74.4% of them are aged school (7 years and over). Parents and children mean age: Not reported	Assess knowledge and attitudes of parents about bruxism in their children and young people	**Who Answered?** Not reported **Questionnaire** The parents answered a questionnaire consisting of 52 questions and the results were recorded. **Questionnaire validation** No	No	Not reported	**Self-declaration of knowledge of bruxism** 38.7% of the parents stated that they knew the definition of "bruxism". they have stated. Parents stated that 29.4% of the children had bruxism (108 children), 45.5% did not have bruxism, and 25.1% reported that they had no idea about this issue	Not reported	**Hours of sleep** Not reported **Kind of sleep** Not reported **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Of the children who had bruxism, 24.1% of mothers and 14.8% of the fathers had bruxism. Of the children who didn't have bruxism, 10.8% of mothers and 4.8% of fathers had bruxism.	The incidence of bruxism in mothers or fathers whose children have bruxism (24.1% and 14.8%, respectively) was statistically significantly higher than that of parents whose children had not bruxism or who had no idea about bruxism in their children.	38.7% of the parents knew the definition of "bruxism".	Not reported	No conflicts of interest

							Definition of Bruxism Not reported							
Laganà *et al.*, 2021, Albania	Cross-sectional	100 parents and 310 children (173 females and 137 males), from 6 to 12 years old (mean age 8.9 years). The participants were attending the "Ndre Mjeda" school of Tirana (Albania). **Child's gender** Not reported	The sample was between 6 and 12 years of age with a mean age of 8.9 years (SD = 2). Parents mean age- Not reported	To assess parental awareness about sleep bruxism in children and its relations with general health.	**Who Answered?** Not reported **Questionnaire** The questionnaire was designed by one of the investigators. **Questionnaire validation** Yes	No	Sleep Bruxism	**Self-declaration of knowledge of bruxism** 46.5% of parents had no information about the phenomenon of bruxism. **Definition of Bruxism** Not reported	Regarding mothers, 36.1% completed high school, 45.8% university and 16.8% had a postgraduate degree. Regarding fathers, 51.6% completed high school, 32.6% university and 12.9% had a postgradu	**Hours of sleep** Not reported **Kind of sleep** Not reported **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Only 16.5% of parents grind their teeth, compared to 41.3% of children	The results showed that 41.3% of the sample was affected by bruxism, where in particular, males ground their teeth more than females (56.3% vs. 43.7%)	46.5% of parents had no information about the phenomenon of bruxism. 12.9% of cases, the male parent had a higher education level than the female parent, but both parents replied "YES" to the question, "Do you have information on night grinding?" in only 52.9% of cases.	No	No conflicts of interest

									ate degree					
Prado *et al.*, 2019, Brazil	Cross-sectional	1325 parents/caregivers of children awaiting treatment or under treatment at paediatric dental clinics from seven universities from all five regions of Brazil (north, northeast, central-west, southeast,and south). **Child's gender** Female: 50.3% Male: 49.7%	Questionnaires were completed mostly by mothers (72.0%) and mean age of parents/caregivers was 35.5 years (SD = 9.7). The percentage of male (49.7%) and female (50.3%) children participating in the study was very similar and children's mean age was 7.1 years (SD = 2.4).	to identify the factors associated to a greater knowledge about what SB is and the occurrence of Sleep Bruxism (SB) among children, reported by parents/ caregivers.	**Who Answered?** Mother: 72.0% Father: 13.2% Grandfather/grandmother: 7.8% Other: 6.9% **Questionnaire** A self-administrated questionnaire based on a previous study and based on Sleep Bruxism criteria of the American Academy of Sleep Medicine (AASM) was used for data collection. **Questionnaire validation** Yes	No	Sleep Bruxism	**Self-declaration of knowledge of bruxism** In all five regions, many parents/caregivers did not know what SB is (51.4%-63.2%). **Definition of Bruxism** Among those who said they knew	Not reported	**Hours of sleep** Not reported **Kind of sleep** Child sleeps well Yes=1052 (79,5%) No=272 (20,5%) **Sleep alone** **Sleep alone** Yes= 396 (29,9%) No= 929 (70,1%) **Parents/ Guardians**	The percentage of children whose parents/caregivers reported possible SB was 24.0% in general. A total of 27.5% of parents/caregivers and 40.6% of children had/have history of possible SB, considering the total sample. There were no differences of SB prevalence between regions.	There is a lack of knowledge of parents about SB. SB among children, parents' interest in receiving more information and their location were factors associated to their knowledge.	Yes (CAPES, CNPq, FAPEMIG, PRPq/UFMG)	No conflicts of interest

			what SB was, 83.9% reported the correct definition according to the AASM criteria When analysing only the data of parents/caregivers who defined bruxism correctly, according to the AASM definition, 40.5% of participants from total sample did not know what causes SB	**with bruxism?** 15.4% of parents/care givers self-reported possible SB

Prasanna and Ravindran , 2020, India	Cross - sectional	100 parents of children attending the OPD of the Department of Pediatric and Preventive Dentistry **Child's gender** Not reported	Among the respondents, 42% were females and 58% were males. The mean age of the respondents was 33 years. Children mean age- not informed	To pursue research on assessing the knowledge and awareness of habit and habit breaking appliances among parents.	**Who Answered?** Not reported **Questionnaire** A pretested, closed ended questionnaire comprising the following sections formed the Survey instrument. **Questionnaire validation** No	No	Not reported	**Self-declaration of knowledge of bruxism** 71% were aware of bruxism **Definition of Bruxism** Not reported	Not reported	**Hours of sleep** Not reported **Kind of sleep** Not reported **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Not reported	Most of the parents knew about the adverse oral habits like thumb sucking, mouth breathing, and bruxism but were not aware of tongue thrusting habits.	71% was aware of bruxism.	Not reported	No conflicts of interest
Serra-Negra *et al.,* 2013, Brazil	Cross - sectional	277 statements of informed consent were distributed and 221 parents/guardians agreed to participate in the study (79.8%). A questionnaire was applied in the waiting room during	221 parents/guardians, aged between 22 and 68 years (mean of 36.6 years) participated in the present study. The age of the children ranged from 5 to 11 years with a mean age of 7.6 years.	to collect information on the parents' knowledge about bruxism to promote educational activities for families of pediatric patients in dental waiting rooms.	**Who Answered?** Mother: 84.2% Grandparents 8.1% Father: 5.8% Others: 1.9% **Questionnaire** The questionnaire was designed by a team of researchers based on the criteria of the American Association of Sleep Medicine	Yes	Not reported	**Self-declaration of knowledge of bruxism** Among all of the participants, 210 reported knowledge of bruxism (95%).	Not reported	**Hours of sleep** Among children who had bruxism, 61.3% slept more than eight hours and 38.7% slept up to eight hours a night **Kind of sleep**	According to the parents/guardians, bruxism was present in 48% of the children, in 40.2% of the fathers and in 76.6% of the mothers A majority of the participants reported having sought	Parents/guardians are aware of bruxism, although there are a number of distorted concepts that must be clarified.	Not reported	Not reported

their children's appointments at the pediatric dentist in the Faculty of Dentistry of the Federal University of Minas Gerais. **Child's gender** Female: 65.2% Male: 77 34.8%	**Questionnaire validation** Yes	**Definition** 95.5% classified the parafunction correctly.	Among the children who had bruxism, 73.6% had restless sleep and 26.4% had normal sleep. **Sleep alone** Among children who had bruxism, 56.6% slept with someone and 43.4% slept alone. **Parents/ Guardians with bruxism?** Father with bruxism: 40.2% Mother with bruxism: 76.6%.	help to clarify the problem (97.6%). In terms of the type of help sought, doctor was the most common (54.4%), followed by mystics (26.5%). Only 39 sought help from dentists (19.1%)

Suguna and Gurunathan, 2020 India	Cross-sectional	Parents of children with (experimental, *n* = 36) and without Sleep Bruxism (control, *n* = 36) from different regions of Chennai The research site is not clearly described **Child's gender** Female 47.2% Male 52.7%	A total of 72 children aged group of 6–12 years. Parent's age Not reported	To evaluate the quality of life (QoL) of children with SB by means of a generic scale, in addition to the association of sociodemographic characteristics.	**Who Answered?** Mother: 58.3% Father: 27.8% Others: 13.9% **Questionnaire** The Quality of Life (QoL) of children with SB was evaluated by using the Portuguese version of the Oral Health Impact Profile (OHIP-14) questionnaire. **Questionnaire validation** Yes	No	Sleep Bruxism	**Self-declaration of knowledge of bruxism** Of the children with bruxism, 27.8% of the parents knew what bruxism was. Among children who did not have bruxism, 16.7% of parents knew what bruxism was. **Definition of bruxism** Not reported	Not reported	**Hours of sleep** Not reported **Kind of sleep** Not reported **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Not reported	Males presented with higher association with this parafunctional habit. The QoL of children with SB appears to be worse than that of children without SB.	Most parents/caregivers were unaware of the meaning of bruxism, which may have led to an underestimation of the prevalence of this parafunctional habit.	No	No conflicts of interest

Tavares Silva *et al.,* 2016, Brazil	Cross-sectional	134 guardians of patients who sought treatment at the pediatric dentistry clinic of UFRJ **Child's gender** Not reported	A total of 134 parents/guardians (37.6 ± 10.6 years old) and their children (7.4 ± 3.3 years old) participated in the study.	To assess the knowledge of parents/guardians about the nocturnal bruxism present or not in their children/adolescents (patients) at the pediatric dentistry clinic in the Dental School of the Federal University of Rio de Janeiro (UFRJ).	**Who Answered?** Mother: 68.7% Father: 14.2% Grandparents: 13.4% Other: 3.7% **Questionnaire** Questionnaire previously used by Serra-Negra *et al*., 2013. This questionnaire was prepared within the criteria of the American Association of Sleep Medicine. . **Questionnaire validation** Yes	Yes	Sleep Bruxism	**Self-declaration of knowledge of bruxism** Not reported **Definition of bruxism** Considering the entire sample, only 38.1% of parents/guardians correctly answered the question about the definition of bruxism.	Not reported	**Hours of sleep** Among children who had bruxism, 45.16% slept up to eight hours a night and 54.833% slept more than eight hours **Kind of sleep** Among the children who have bruxism, 70.96% had restless sleep and 29.03% had normal sleep. **Sleep alone** Not reported **Parents/ Guardians with bruxism?** 11.9% Parent/guardian with bruxism	There was no significant difference, however, between the presence or absence of bruxism, and hours of sleep ($p = 0.377$) and type of sleep ($p = 0.191$) of children. Moreover, an association was found between childhood bruxism and bruxism in their parents ($p = 0.002$).	Guardians in this study had a great lack of knowledge about bruxism, with 61.9% reporting incorrect answers about the definition, added to the fact that 73.9% did not know what can cause bruxism. The knowledge of guardians about the definition of the disorder is statistically associated ($p < 0.0001$) with the presence of bruxism in the child. Those parents/guardians of children with bruxism affirmed with more	FAPERJ	No conflicts of interest

												vehemence that this condition harms the general health of their children when compared with parents/guardians of children without bruxism (p = 0.06).		
Us and Us, 2021, Turkey	Cross-sectional	The questionnaires answered by the parents, clinical examination was performed on all the children by one of the authors in order to diagnose SB. The study population were outpatients who were admitted to the Esenler Gynecology and Pediatric Hospital,	OOf the patients included in the study (n=500), 53.4% (n = 267) were males and 46.6% (n = 233) were females, with an average age of 9.17 ± 2.09 (9.14 ± 2.08 for males and 9.21 ± 2.0 for females). Thirty-four of the patients were immigrants (6.8%)	To evaluate the relationship between sleep habits and SB in school-aged children, and the second aim is to evaluate the parent's awareness of sleep habits and bruxism.	**Who Answered?** Not reported **Questionnaire** The study questionnaire consisted of two prepared parts. In the first part of the questionnaire, sociodemographic data were included. In the second part of the questionnaire, the Children's Sleep Habits Questionnaire (CSHQ) was completed for the screening of sleep habits and sleep disorders	No	Sleep Bruxism	**Self-declaration of knowledge of bruxism** Most parents were not aware of bruxism and its consequences (94.5%) Therefore, it was shown that parents have limited knowledge about	The mothers' education level at or below primary education level (≤ 8 years) (OR: 1.80, 95% CI: 1.080–2.990, p = 0.023) and family income level of minimum wage and/or below (OR: 5.842, 95% CI: 1.696–20.122, p	**Hours of sleep** Among the children who had bruxism, 90% sleep a certain amount of time, 84.3% sleep the same amount each day, 13.1% sleep very little. **Kind of sleep** Among children with bruxism, 78.7% sleep restlessly	SB was detected in 160 (32%) of the 500 children included in the study, and the frequency was significantly higher in males (p = 0.01) and immigrants (p = 0.02). Male gender (OR: 1.683, 95% CI: 1.044–2.714, p = 0.033) and being an immigrant (OR: 3.026, 95% CI: 1.230–7.443, p =	Parents of children with SB have inadequate knowledge and awareness pertaining to SB.	No	No conflicts of interest

		Department of Pediatrics **Child's gender** Female: 46.6% Male: 53.4%			**Questionnaire validation** Yes			Sleep Bruxism. **Definition of bruxism** Not reported	= 0.005) increased the risk of bruxism in the child The SB rate was found to be 34.4% in those with a mother of education level at or below primary education level (≤ 8 years), and 22.5% in those whose mothers had an education > 8 years.	and move a lot during the night, 93.7% grind their teeth and 26.8% talk during the night. **Sleep alone** Not reported **Parents/ Guardians with bruxism?** Not reported	0.016) statistically significantly increased the risk of bruxism in a child.			
Yildirim *et al.,* 2022, Turkey	Cross - sectional	Parents of patients aged 4-7 years who applied to Istanbul Yeni Yüzyÿl University Faculty of Dentistry, Pedodontics Clinic.	A total of 72 children aged 4-7 years, 34 (47.2%) girls and 38 (52.8%) boys, were included in the study. The mean age of the children was 6.33±0.75.	To determine the presence of bruxism and to evaluate the frequency of bruxism and family awareness in children aged 4-7 years after clinical examination and parental reports.	**Who Answered?** Mother: 75% Father: 23.6% Grandparents: 1.4% **Questionnaire** Parents were asked to fill out a form containing demographic information such	No	Not reported	**Self-declaration of knowledge of bruxism** Only 8.3% of the parents have bruxism	Not reported	**Hours of sleep** Not reported **Kind of sleep** Not reported **Sleep alone** Not reported	It was observed that 48.6% of the children participating in the study had bruxism There was no significant relationship between gender	Only 43.1% of parents had knowledge about bruxism. 33.3% of the parents whose child has bruxism answered "no" to "Does your child have	No	No conflicts of interest

Child's gender Female: 47.2% Male: 52.8%	. Parents mean age- Not reported	as children's age and gender, and a questionnaire consisting of questions questioning their knowledge and awareness of bruxism **Questionnaire validation** No	and only 43.1% are knowledgeable about bruxism. While 72.2% of the parents did not know about the causes of bruxism, 18.1% stated that the reason might be stress. 68.1% of the parents who participated in the study stated that they did not know whether bruxism had an effect on health. Likewise, 86.1% of them do not have information about	**Parents/ Guardians with bruxism?** Yes: 8.3% No: 91.7%	and the presence of bruxism (p>0.005) statistically significant difference was found between the response of the parents to the question of whether your child has bruxism and the presence of bruxism in the child (p0.005). No significant correlation was observed between the presence of bruxism in the parent and the presence of bruxism in the child (p=0.675)	bruxism?" These data show that the awareness level of parents about bruxism is quite low.

	what can be done for the treatment of bruxism	
	Definition of bruxism	
	Not reported	

Note: Working Mothers (WM), Non-working Mothers (NWM), American Academy of Sleep Medicine (AASM), Oral Health Impact Profile (OHIP-14), Quality of Life (QoL), Sleep Bruxism (SB)