
CONFERENCE ABSTRACT

A Healthy Mouth for All: involving community oral health workers to serve as a link between vulnerable groups and dental professionals.

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Introduction: The linear graded relation between (oral) health and socio-economic status (SES) is well-established and seen in all countries, including Belgium. Regarding oral health care for socially vulnerable groups, there are important barriers on both the supplier and the user sides. The program 'Ieders Mond Gezond ('Healthy Mouth for All') aims to minimize the gap between underprivileged people and dental professionals by involving employees or volunteers of poverty- or other welfare organizations as Community Oral Health Workers (COHW's). This paper aims to present the design of a two-year longitudinal study investigating the program's effect on participants' oral health status, attitude toward dental care, and healthcare consumption.

Methods: During a one-year feasibility study, employees and volunteers from welfare organizations followed a validated one-day educational program to learn how to support and assist underprivileged families in oral care. After the training, oral screenings were organized in the local organizations to screen the participants on current oral health status and oral health behavior. A process evaluation was performed by interviewing the COHW's on the referral process and access to dental care.

For the two-year longitudinal study, cluster randomization will be performed. First, 15 out of the existing 60 primary care zones in the Dutch-speaking region of Belgium will be randomly selected. All local welfare organizations in these zones will be asked to be involved in the study. They will have to appoint COHW's who will follow the one-day educational program, after which they can individually coach their clients in their preventive and curative oral health care path. After the training, oral screenings will be organized within the local organizations to find and screen participants on the primary outcome variables: current oral health status and oral health behavior. These outcome variables will be assessed yearly to evaluate evolutions, collecting quantitative data through oral examination and a self-administered questionnaire. Furthermore, the COHW's and participants will be interviewed annually to determine their attitudes toward oral health care and dental professionals. Data analyses will include linear mixed model analyses (continuous variables) and generalized mixed model analyses (dichotomous variables) to evaluate changes over time.

Results and discussion: During the feasibility study, 26 COHW's were trained, and 37 screenings were organized. In total, 467 persons were screened, of which 277 (59%) were referred to a local dentist. Besides the organized screenings, the COHW's referred 149 other clients to a local dental professional. Of all referred participants, 43% ended up seeing a dentist.

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The longitudinal study should show to what degree evolution can be seen in oral health behavior and care consumption of the participants over a two-year time period. After obtaining ethical approval, clinical data will be gathered between August 2023 and July 2025. The results will contribute to knowledge about the impact of involving community oral health workers on oral health, oral health behavior, and access to oral health care of underprivileged individuals.