

A Conceptual Framework to Improve Oral Health for Children with Disabilities



Shiamaa Al-Mashhadani, PHD student
Peninsula Dental School, University of Plymouth

Abstract

The effect of good oral health contributes to improving general health and wellbeing and quality of life (Gallagher & Scambler, 2012). People with disabilities suffer from the same oral health diseases as the rest of the community. The National survey of children with special health care needs in the USA conducted in 2001 showed that dental care was the most commonly reported unmet service need. These children experience poorer outcomes and profound impact on their quality of life, effecting their social, emotional and physical wellbeing (Hennequin, Moysan, Jourdan, Dorin, & Nicolas, 2008). Thus providing evidence that those with the greatest oral health needs often have the least access to services.

There are many challenges facing children with disabilities such as access to dental care, availability of preventive intervention, oral health literacy and education and challenges that are pertinent to those involved in providing oral health care of the children (Gallagher & Scambler, 2012). Based on my personal experience in Dubai Health Authority (DHA) heading oral health community projects, I have observed a large gap in addressing the needs of children with disabilities and fulfilling their requirements for a quality oral health care. Therefore, in this project, I want to investigate the main barriers and facilitators of improving oral health in children with disabilities through exploring the views, experiences and opinions of parents and caregivers, dental and non dental providers involved in the care and life of the children. I am interested to see how the opinions and views of all the stakeholders compare and contrast in terms of explaining the barriers and facilitators to improving oral health. This will be done through in depth qualitative interviews in both Arabic and English providing data that will be analyzed. The proposed framework will inform the development of oral health care policies and strategic plans, suggest solutions for access to dental care and integrate oral health with general health services. Thus influencing the outcome of oral health for children with disabilities.

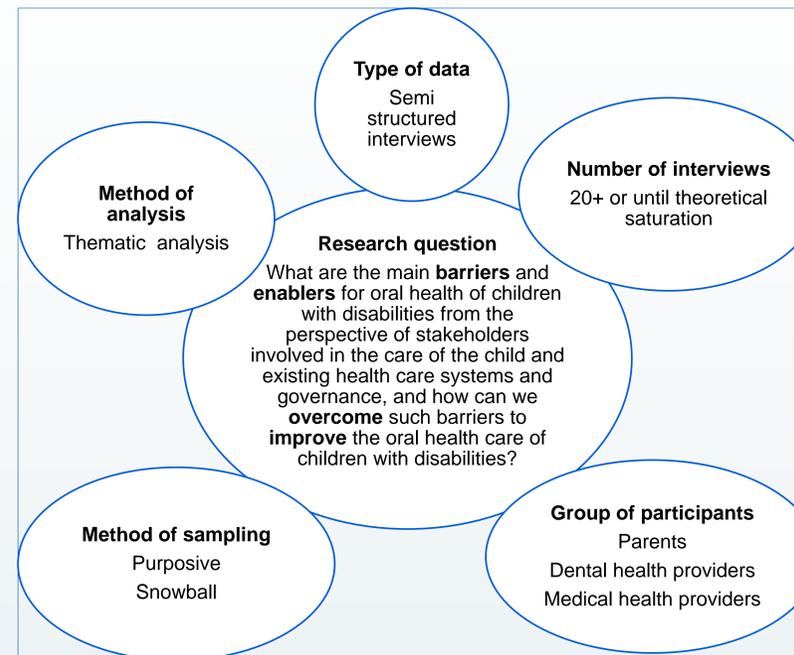
Introduction

Children with disabilities in the UAE may have poorer oral health than those without such disabilities exhibiting a higher caries prevalence, poor oral hygiene and extensive unmet needs for dental treatment (Al-Raeesi, Kowash, Hassan, & Al-Halabi, 2018; Al Hashmi, Mawlood Kowash, & Al Halabi, 2017; Ghaith, Al Halabi, Khamis, & Kowash, 2019; Jaber, 2011). Many reasons have been cited including the intake of sugar containing medications, plaque accumulation, high sugar intake, poor diet options, physical difficulties to maintain oral health habits and high cost of dental care. However, there have been no studies in the UAE focusing on the main gaps of the dental and non-dental providers or the health system (Wilson et al., 2019).

Year	Special needs Population group	Dental caries prevalence	Mean dmft	Mean DMFT	Gingivitis
(Jaber, 2011)	Autistic (n=61) Control(n=61)	77.0%	0.80+0.2 0.3+0.3	1.6+0.64 0.6+0.29	97.0%
(Al Hashmi et al., 2017)	Cerebral palsy (n=83) Control(n=125)	-----	4.04+5.46 2.69+3.00	2.83+2.86 2.16+2.89	-----
(Al-Raeesi et al., 2018)	Thalassemia major (n=38) Control (n=76)	68.4% 48.7%	0.89 +0.31 0.7+0.46	0.21+0.42 0.13+0.34	44.7%
(Ghaith et al., 2019)	Down syndrome (n=106) Control(n=125)	-----	3.32+4.62 2.16+2.86	2.16+2.89 3.32+4.62	-----

Methodology

Qualitative In-depth interviews will be used to answer my research question, to better define the main barriers and enablers of oral health care that children with disabilities face, and more detailed information about the participants thoughts and opinions on how they interpret the best ways to improve oral health care services.

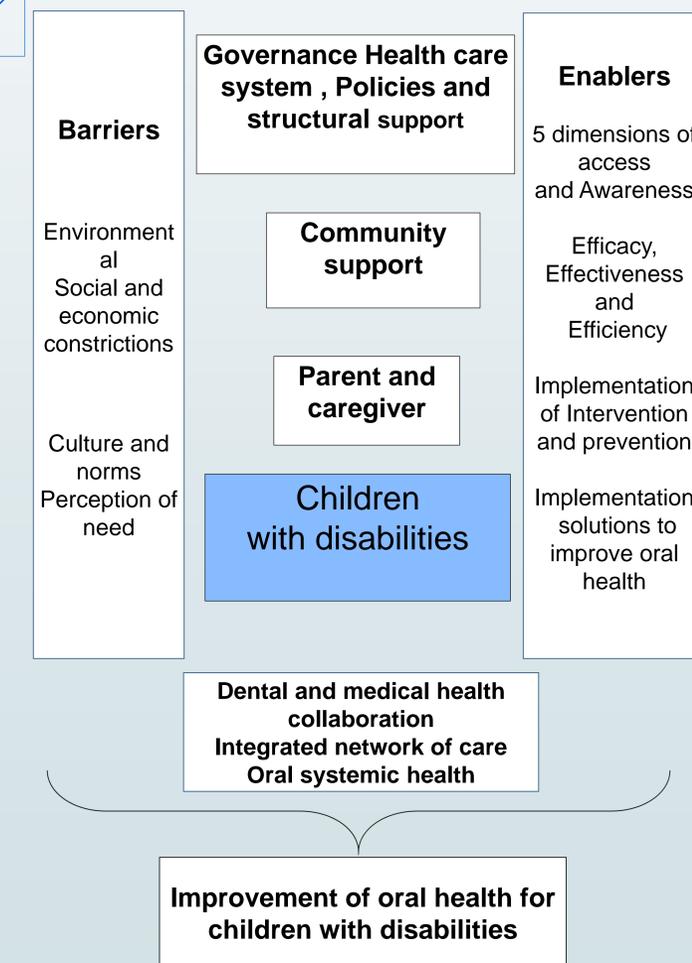


I will use this method to ask participants about, their experiences and expectations related to oral health care service provided for children with disabilities, the thoughts they have concerning the service operations, processes, and outcomes, and about any changes, they perceive because of receiving or providing the service.

Considerations to design the framework in the project

- The proposed conceptual framework will incorporate stakeholders opinions and views involved in the Childs' life.
- It will provide information on the assessment of the need of oral health care by understanding the perceptions of the stakeholders, the health care system and governance system.
- It will help to identify options for improving oral health by reviewing potential solutions and processes and considering their appropriateness, keeping into consideration the particular circumstances.
- A better understanding of the role of stakeholders in the framework.
- Further determine the aspects of facilitators to oral health for children with disabilities

- This coherent framework will hopefully help in:
 - influencing oral health policies and programs for the disabled children,
 - how oral health systems will be designed and operationalized
- Connect factors and frameworks with the results of the analysis and the new emerged themes of the study to develop the conceptual framework,
- keeping into consideration the aspects of the cultural, social, economic and health differences and similarities that are unique to the participants and the system in Dubai.



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