## Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Fast Facts

#### Oral health is linked to many systemic diseases and significantly impacts patients' quality of life

- Poor oral health linked to coronary heart disease, stroke, and respiratory disease (1)
- Poor oral health impacts social and psychological health by impacting eating, communication, and other fundamental health behaviors (1)
- Poor oral health and associated feelings of stigma or shame can yield a vicious feedback loop: Shame and stigma limit uptake of preventative services, which worsens oral health outcomes. In turn, this exacerbates symptoms and potential feelings of shame (2)

# Individuals with behavioral health disorders tend to have significantly poorer oral health outcomes than the general population. For example:

- Substance Use Disorder- linked to higher rates of tooth decay and lower rates of restorations (3)
- Depression, Anxiety, and Dental Phobia- associated with increased dental decay and greater tooth loss (4)
- Autism Spectrum Disorders- associated with higher rates of dental caries (5)
- Attention-Deficit/Hyperactivity Disorder- linked to higher rates of dental traumas (6)
- Bipolar Disorder- associated with increased dental caries, periodontal disease, and adverse oral effects from associated treatments and medications (7)
- Schizophrenia- associated with high risk of dental disease (8)

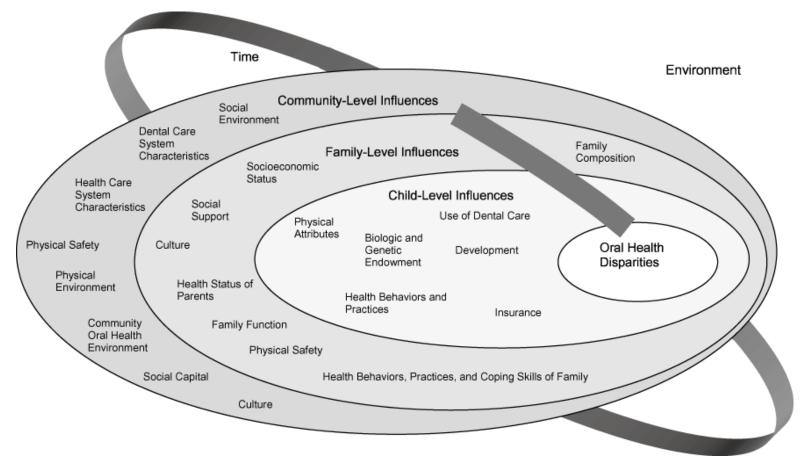
# Individuals with behavioral health conditions face barriers that reduce utilization of protective behaviors and limit access to early treatment when necessary

- Individuals with severe mental illness are more likely to demonstrate risk factors associated with poor oral health outcomes (9), such as:
  - Unhealthy diet, lack of health literacy around the impact of food, drinks, taking prescribed medications that cause dry mouth, substance use, poor oral hygiene habits, and untreated oral health disease (10)
- Socioecological factors, including income status, impact both mental health and access to care. This can negatively impact the use of protective behaviors and ability to seek dental care when necessary (11)
- In addition, individuals with certain behavioral health conditions, such as Autism Spectrum Disorder, face additional barriers limiting their utilization of preventative dental care, such as:
  - Sensory hypersensitivity, preference for rigid daily schedules, and differences in communication and social interactions (12)

# Promoting preventative oral health practices among individuals with behavioral health disorders and illnesses can significantly improve their sense of well-being and their perceived self-efficacy in performing protective behaviors

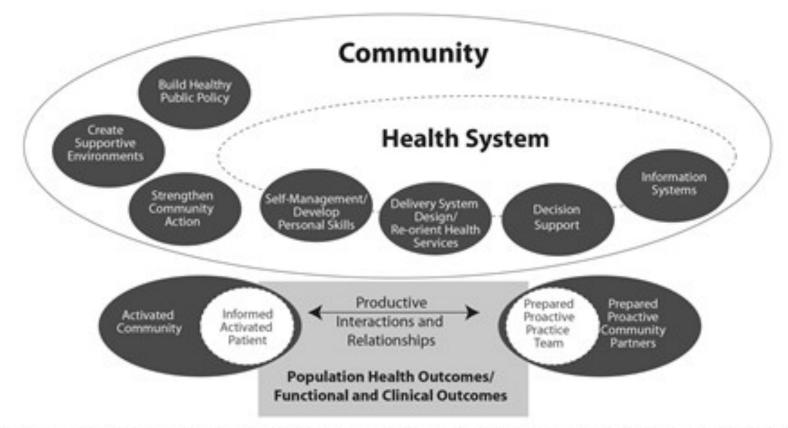
#### Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Guiding Frameworks

Oral Health disparities are driven by a wide array of community, family, and individual level factors; combatting this inequality will rely on interventions addressing the many social drivers of health that perpetuate these disparities. This American Academy of Pediatrics model (see below) highlights how complex and intersecting systems impact oral health disparities.



**Figure 1: Conceptual model to understand oral health disparities**, Adapted from Pediatrics, Vol. 120 (3), Page e512, Copyright (c) 2007 by the American Academy of Pediatrics.(13)

Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Guiding Frameworks



Created by: Victoria Barr, Sylvia Robinson, Brenda Marin-Link, Lisa Underhill, Anita Dotts & Darlene Ravensdale (2002) Adapted from Glasgow, R., Orleans, C., Wagner, E., Curry, S., Solberg, L. (2001). "Does the Chronic Care Model also serve as a template for improving prevention?" *The Milbank Quarterly*, 79(4), and World Health Organization, Health and Welfare Canada and Canadian Public Health Association. (1986). Ottawa Charter of Health Promotion.

Figure 2: The Expanded Chronic Care Model (ECCM), used to understand how communities and health systems interact to impact care management, highlights key points where we can intervene in these systems to improve our prevention efforts for this chronic care (14)



## **Strategies Internal to Dental Health Care Offices**

| Potential Intervention  | Intervention Domain                                    | Comments  |
|---|--|---|
| <b>Connect patients and</b><br><b>caregivers to online health</b><br><b>education tools,</b> including Oral<br>Health Video Modeling  | Self-Management/<br>Develop Personal Skills            | Implicated to promote protective dental health<br>behaviors in patients with Autism Spectrum<br>Disorders; Example video linked in citations and<br>resource page (12,15)   |
| Share Toothbrush Social<br>Stories during visits to<br>promote dental hygiene<br>behavior, and model the<br>behavior to caregivers  | Self-Management/<br>Develop Personal Skills            | Implicated in promoting protective dental health<br>behaviors in patients with Autism Spectrum<br>Disorders and other special healthcare needs<br>(12,17)   |
| Provide specialized hygiene<br>tools (e.g. anti-microbial mouth<br>rinse, sodium fluoride mouth<br>rinse, saliva substitute) to<br>applicable individuals with pre-<br>disposing risk factors | Self-Management/<br>Develop Personal Skills            | Anti-microbial mouth rinses, such as<br>Chlorohexidine gluconate, are indicated to prevent<br>gingivitis (18), can be helpful to individuals still<br>building dental hygiene habits (19); sodium<br>fluoride mouth rinses can encourage enamel<br>remineralization and protect from tooth caries |
| Support and empower<br>caregivers; if a clinic can't work<br>with the caregiver, connect them<br>to an online resource or external<br>group   | Self-Management/<br>Develop Personal Skills            | Offer brief caregiver training in Toothbrush<br>Supervision; Provide video education tools before<br>and after visits to help set expectations and<br>encourage behavioral regulation (20)  |
| <ul> <li>Prioritize prevention and<br/>disease management in a clear,<br/>comprehensible patient care<br/>plan</li> </ul>   | Decision Support &<br>Create Supportive<br>Environment | Treatment plans designed to meet the special needs of the population improves patient or caregiver self-efficacy and continuity of care (21)  |

### Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Strategies and Recommendations

| Offer quiet or "low sensory"<br>hours at clinic off-hours                 | Delivery System Design/<br>Re-orient Health Services | Dental environment is a strong indicator of<br>patients' stress, anxiety and distress, particularly<br>for individuals with Autism Spectrum Disorder<br>(22,23)   |
|---|--|---|
| Hire clinicians with<br>experience and focus in<br>special care dentistry | Delivery System Design/<br>Re-orient Health Services | Having clinicians with experience and training in<br>caring for patients with special needs plays a<br>significant role in the treatment outcomes of<br>patients, including those with ASD, dental anxiety<br>(21,24)   |
| <b>Design Quiet Clinical Space</b><br>for patients with sensory needs     | Delivery System Design/<br>Re-orient Health Services | Dental environment is a strong indicator of<br>patients' stress, anxiety and distress, particularly<br>for individuals with Autism Spectrum Disorder.<br>Utilizing sensory adapted dental rooms<br>significantly increased the ability to treat patients<br>was ASD (22)  |
| Implement or Expand Mobile<br>Dental Services                             | Delivery System Design/<br>Re-orient Health Services | Studies of mobile dental services indicate<br>particularly strong implications in homebound<br>populations or those impacted by substance<br>misuse, mental health issues, or<br>homelessness.(25) Most of these studies were<br>performed outside of a US context. In King<br>County, there are mobile dental care providers,<br>but they tend to focus on dental emergencies.<br>(26)2/14/24 1:38:00 PM |

### Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Strategies and Recommendations

## **Strategies for Collaboration with External Health Care Providers**

| Potential Intervention   | Domain   | <u>Comments</u>  |
|--|--|--|
| Integrate oral health screening<br>into primary care and mental<br>health assessments process;<br>provide referral if necessary  | Delivery System<br>Design/ Re-orient<br>Health Services &<br>Information Systems                 | Other health providers, such as mental health<br>professionals and primary care doctors, can be trained to<br>assess basic dental health using standardized checklists.<br>Additional research suggests that promoting dental care in<br>a patient's medical home can reduce anxiety before<br>appointments and encourage protective behavior. (5)               |
| Cross-train with other medical<br>professionals, including mental<br>health professionals and<br>occupational therapists, on<br>providing supportive care to<br>patients | Delivery System<br>Design/ Re-orient<br>Health Services  | Train other health providers to help patients plan and<br>reinforce protective daily behaviors, focusing on<br>psychoeducation and health promotion. Provide training to<br>these providers to increase self-efficacy in discussing oral<br>health (1,5,10)  |
| Coordinate on patient care with<br>patients' existing therapist to<br>encourage patient-centered care  | Delivery System<br>Design/ Re-orient<br>Health Services &<br>Prepared Proactive<br>Practice Team | There is no one size fits all intervention that will help all<br>patients with special needs. Coordination between<br>multidisciplinary teams facilitates patient-centered care; it<br>allows clinicians to adequate prepare and strategize for<br>visits. This relies on the expertise of patients' existing care<br>teams and promotes continuity of care (20) |
| Consult with prescribers<br>(physician/psychiatrist)<br>regarding medication regimen<br>and potential drug interactions  | Informed Active<br>Patient & Prepared<br>Proactive Practice<br>Team                              | Psychotropic medications can cause side effects, such as<br>dry mouth, that can negatively impact oral health. In<br>addition, medication can interact with other commonly<br>prescribed medications, such as NSAIDS (19)  |
| Contract with Occupational<br>Therapists (OT) to plan<br>modifications to dental<br>environment and protocol   | Delivery System<br>Design/ Re-orient<br>Health Services  | OT can advise the clinic on how best to facilitate participation during and before the visit (20)  |

### Promoting Preventative Oral Care for Individuals with Behavioral Disorders Resources for Patients

# **Future Directions for Systems Change and Advocacy**

| Potential Intervention   | Domain   | Comments   |
|--|--|--|
| Pilot dental health education programs in<br>King County, especially programs<br>targeting individuals with special<br>healthcare needs      | Self-Management/<br>Develop Personal Skills<br>& Informed Active<br>Patient & Create<br>Supportive Environment | Preventative dental education is indicated for patients<br>with many different disorders, including<br>schizophrenia, severe mental illness, and autism<br>spectrum disorders. Programs like these can increase<br>prosocial behavior and increase protective habits.<br>(8,15,23)   |
| Bolster dental accreditation standards to<br>ensure increased competency in special<br>care for new dentists                                 | Delivery System Design/<br>Re-orient Health<br>Services & Prepared<br>Proactive Practice Team                  | Make dental curricula in the state more patient-<br>centered, require more clinical experience, and<br>encourage students to gain clinical experience in<br>community-based clinics (27)   |
| Further research on gaps and needs in<br>oral health system for providing care for<br>individuals with a mental and/or<br>behavioral illness | Information Systems  | Special care dentistry, as a field, needs a comprehensive review of "best practices"; while researchers are keenly aware of the disparities, there is less research on successful interventions (27)   |
| Support the Expansion of Dental<br>Therapy Services in Washington State  | Delivery System Design/<br>Re-orient Health<br>Services  | Dental therapists has been named as a key solution<br>to the workforce shortage in oral health; communities<br>with increased access to dental therapists had fewer<br>extractions. Dental therapists have been working on<br>tribal lands in WA since 2017, and in 2023 they were<br>authorized to work in dental clinics (28,29) |

### Promoting Preventative Oral Care for Individuals with Behavioral Disorders Resources for Patients

### **Resources to Explore and Share with Patients**

#### **Access Services**

King County Public Health: Online Hub for Dental Health Support, including resource list and public support services

Swedish Healthcare Systems: List of Reduced Cost Dental Services in King County

Washington State Dental Association: Directory of Special Needs Dentists in WA

Dental LifeLine: Low-Cost Services for Veterans

King County Public Health: Mobile, Walk In Medical Care and Dental Services for People Living Homeless

University of Washington (UW) Center for Pediatric Dentistry: Preventative and restorative services for children with special needs

#### **Support Protective Behavior**

YouTube Video on Tooth Brushing Modeling

University of Washington: Dental Fact Sheets for Parents/Caregivers of Children with Special Needs

University of Washington: Oral Health Guidance on Children with Special Healthcare Needs and their Parents

Washington State Department of Health: Oral Health Fact Sheet for Individuals with a Variety of Special Needs

Washington State Department of Health: Oral health promotion cards and brochures to hand out to patients with special needs

#### Promoting Preventative Oral Care for Individuals with Behavioral Health Disorders Key Literature

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