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The Centre for Translational
Research in Public Health

Improving oral health and related health behaviours of people living with severe and multiple disadvantage in England

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National Institute
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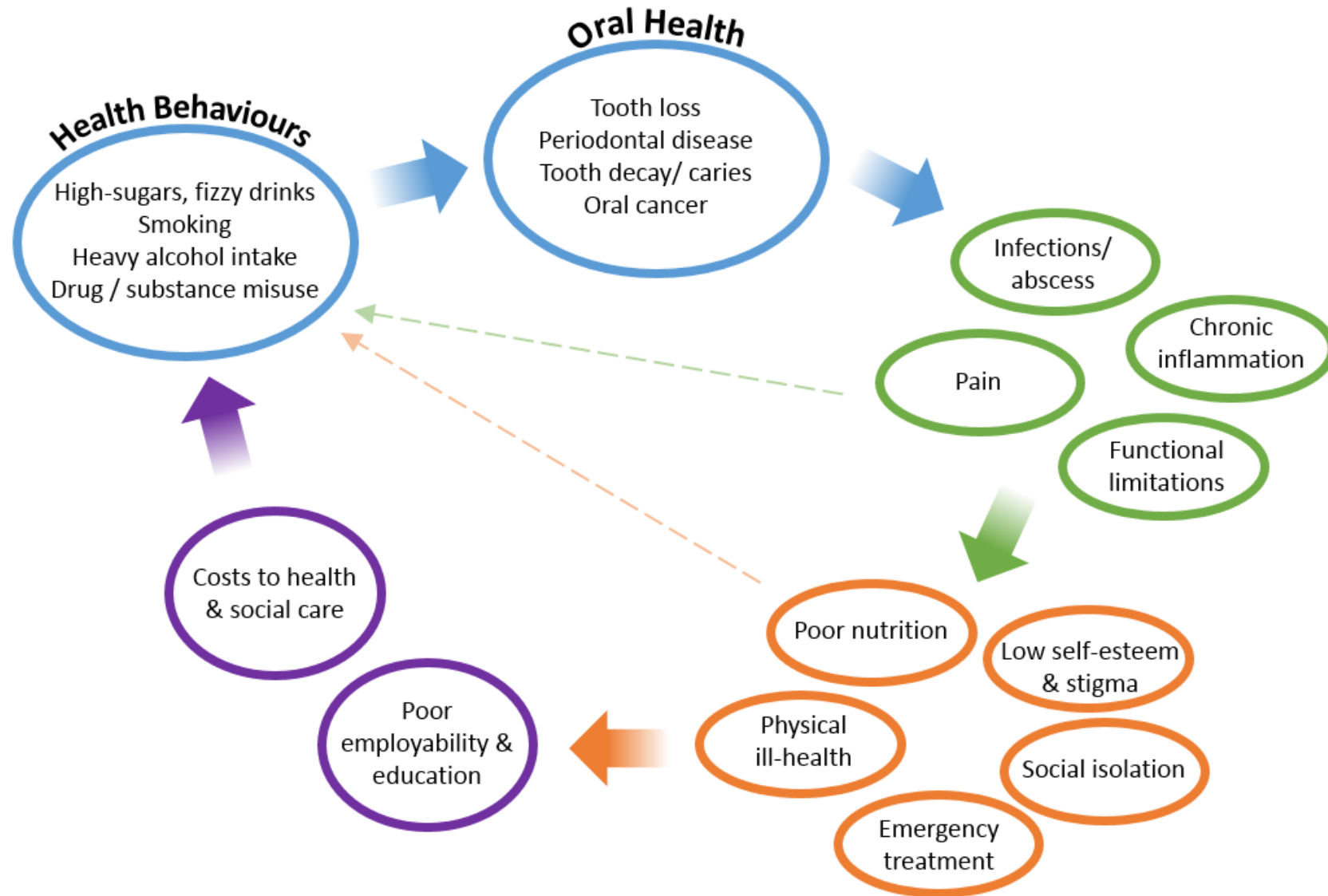


Figure 1: Interrelationship of oral health with behavioural factors in severe and multiple disadvantaged (SMD) groups, and its wider impacts on physical and mental health and health and social care

Aim of this research project

- To identify **interventions** that are **effective and sustainable** in improving oral health and related health behaviours.
- Answering the questions:
 1. What works? i.e., effective interventions
 2. How does it work? i.e., implementing, sustaining – acceptability

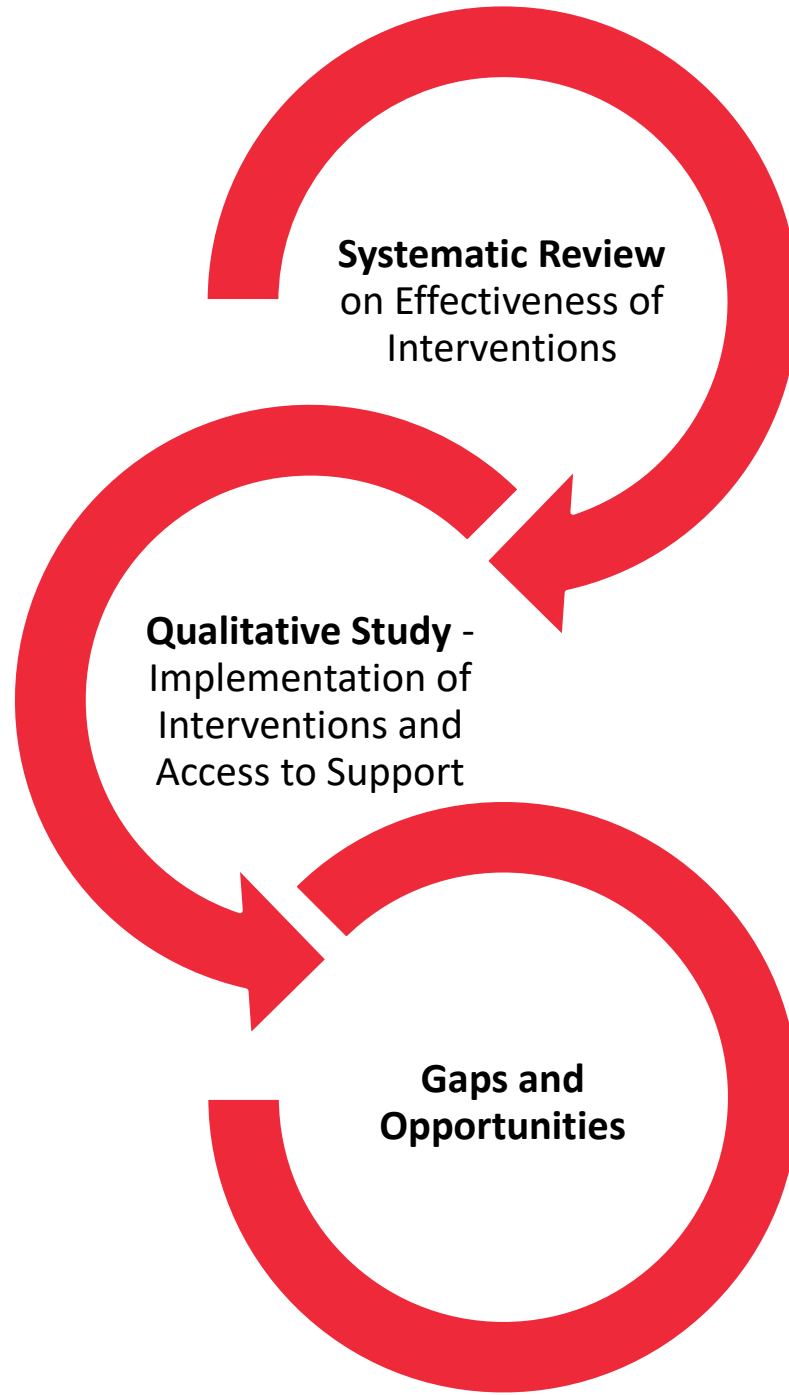
Research project developed collaboratively

- People with lived experience of SMD – Experts by Experience from Fulfilling Lives Newcastle/Gateshead
- Practice and policy stakeholders (regional and national)
 - Public Health England (now Office of Health Improvement and Disparities)
 - Public Health teams in Local Councils
 - Practitioners in NHS England, national charities (Crisis and Fulfilling Lives)



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What did we do?



What interventions are effective?

Alcohol use

Behavioural therapy
that involves housing
and employment
subject to alcohol
abstinence

Housing first model
(integrating housing
with other services)

Drug use

Behavioural therapy
that involves housing
and employment
subject to abstinence
from substance use

Assertive community
therapy (intensive
mental health program)

Combined drug & alcohol use

Behavioural therapy
that involves housing
and employment
subject to abstinence

Intensive case
management

Qualitative Study: Participants and Study Sites in England

We spoke with:



Local Authorities (commissioners, managers, frontline workers) and policy makers



Healthcare providers



Third sector (volunteer frontline workers, managers)

Homeless

Substance users

Offenders

People experiencing SMD

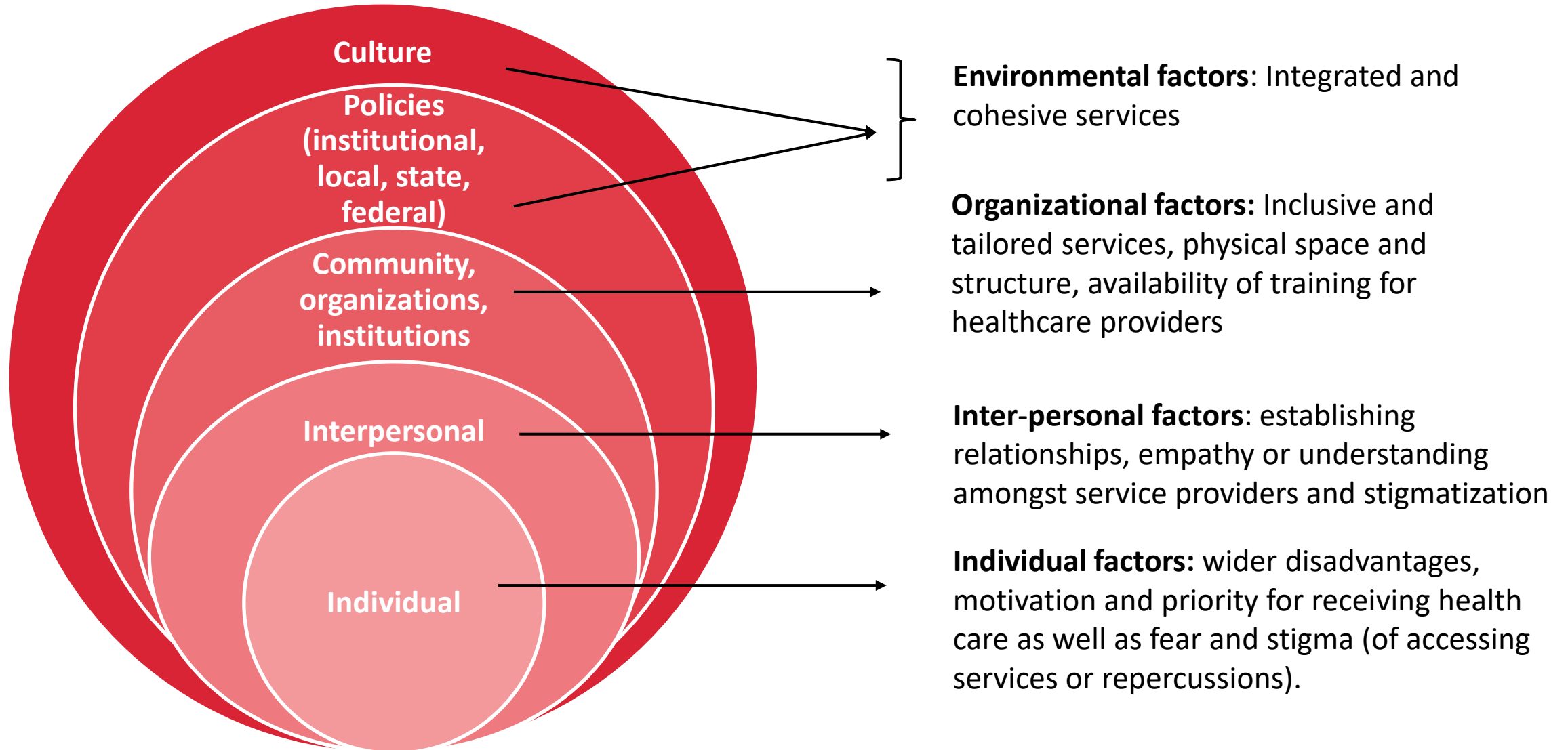


Northeast (Newcastle, Gateshead)

London

Plymouth

Implementing interventions – what matters




What people
experiencing
SMD said

What service
provider said


“you’d eat your sweet stuff...and then the years of taking drugs and the chaos, you didn’t attend appointments. I don’t think many of us started with bad teeth, I think it was just the lifestyle we led and the predicaments we were in, it impacted on our health and teeth.”

“There’s many competing issues that is presented from homeless or substance user. Their needs are complex and sometimes it’s about will they still be alive the following day? And sometimes their dental healthcare is not a priority.”


Gaps and Opportunities




Studies on what works for substance use were over a short period, and with high drop-out rates



All studies in the review were from USA



Limited evidence on what works for improving oral health or diet people experiencing severe and multiple disadvantage



cost-effectiveness of interventions



Better inclusion in studies



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Thank You

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