



Healthier City and Hackney Fund key priorities:
Oral Health Promotion for children and young people

Oral health is one of the four priorities for our **Healthy Ideas** grant.

What do we mean by Oral Health?

The practice of maintaining good dental care as a lifelong habit in order to maintain healthy teeth, gums and tongue: by brushing and flossing in order to prevent tooth decay and gum disease.

Topic in a nutshell

Having decayed, missing or filled teeth is not a necessary part of life; it can cause pain, sleepless nights, days off school or work, and can affect self-esteem.

Local Authorities have a statutory responsibility to provide oral health programmes and ensure sustainability in oral health improvements. Taking a blanket approach to children and young people's oral health promotion across different communities risks entrenching inequalities, so the fund would like to attract proposals on how to tailor and target to specific subgroups.

Organisations will be funded to test and develop a pilot campaign focusing on preventing poor oral health and improving practice within a communities in City and Hackney as a research project with tailored outcomes for their population group. For instance the fund would particularly welcome applications for promoting a research based pilot campaign for the Orthodox Jewish community, the Gypsy, Roma, travellers' communities, or other groups with poorer oral health outcomes.

Current estimates of UK sugar intake suggest this is around 15% of energy intake, three times the maximum recommended level¹. This high level of sugar intake, in combination with poor oral health is leading to higher levels of tooth decay across communities.

Why is this important?

Based on evidence of poor outcomes in specific communities (Public Health Outcomes Framework, JSNA) and their rates of oral health decay, responses to specific local challenges need to be addressed and tailored for specific communities.

Oral health is listed as a key non-communicable public health priority in the Hackney Joint Strategic Needs Assessment (JSNA) for children and young people's health².

In Hackney and the City of London, tooth decay is a significant problem. In addition, persistent inequalities exist with trends suggesting that dental disease is increasingly concentrated in population groups suffering social deprivation or exclusion. Socially excluded and

¹ National Diet and Nutrition Survey (2008/09-2011/12) for school-aged children (4-18 years)

² <https://hackneyjsna.org.uk/articles/children-young-people/physical-health/>

disadvantaged people suffer the effects of poor oral health with the added disadvantage of poor access to dental care and preventative services.

The 2012 dental survey of five year olds suggests that the oral health of children in Hackney got worse between 2008 and 2012, with the percentage with decay experience rising from 29.7% in 2008 to 31.4% in 2012³.

Whilst deprivation is a strong predictor of poor oral health, ethnicity can also play a part, with the last 5-year-old dental survey showing that Chinese and Eastern European children are more at risk. Five year old Asian children in Hackney had much higher rates of tooth decay (45%) compared to White children (32%). The lowest rates of tooth decay were found in Black children (23%)⁴.

In March 2014, 55% of children living in Hackney accessed dental services compared to 60% for London and 68% for England. There is wide variation in child access rates in Hackney Wards. Only 8.7% of children living in Hackney aged 0-2 years access dental services compared to 13.2% for London and 19.9% for England. Access rates are better for older children at 76.2% for 6-9 year olds and 73.7% for 10-16 year olds.

In two studies of dental health carried out in Hackney, it was found that oral health amongst five year old children from the Charedi community was significantly worse than the borough as a whole as well as the London and England averages, and a huge issue of Public health concern. A recent health needs assessment for the Orthodox Jewish community found children from this community were twice as likely as the Hackney average to have decayed teeth. The mean average of decayed teeth per child was 2.38 amongst the Charedi community compared to 1.0 for Hackney.

What are our areas of interest?

We will consider applications that propose new ways to address the topic area, but are particularly interested in the following:

- Developing and testing campaigns for children and young people in particular communities similar to the 'book and brush at bedtime' initiative⁵, using behavioural insights to ensure messages are acted on
- Programmes that support early years staff across healthcare, social care and education, providing knowledge and skills to give advice and signpost to local services.
- Social campaigns that help people celebrate positive oral health.

³ [1] Public Health England (2013). National Dental Epidemiology Programme for England: oral health survey of five-year old children in 2012

⁴ [1] Public Health England (2013). National Dental Epidemiology Programme for England: oral health survey of five-year old children in 2012

⁵ <https://www.local.gov.uk/book-and-brush-bedtime-dinosaur-douglas-london-borough-hammersmith-and-fulham>

Topics areas to avoid

- Running oral health activities already delivered locally, such as fluoride varnish programmes for children or dental surveys of 5 year old children
- Broad campaigns relating to diet, smoking or other behaviours that influence oral health