



Research Brief

The Kinship Oral Health Project: Advocating for Utilization of School-Based Dental Services to Decrease Disparities in Oral Health Experienced by Children in Kinship Families

USING KINSHIP FAMILIES EXPERIENCES AND STORIES ABOUT THE BARRIERS AND HEALTH AND RACIAL DISPARITIES THEY FACE WHEN ASSESSING DENTAL SERVICES, THE KINSHIP ORAL HEALTH PROJECT ADVOCATES FOR THE UTILIZATION OF SCHOOL-BASED DENTAL SERVICES (SBDS), AN EVIDENCE-BASED STRATEGY FOR DECREASING DISPARITIES.

Key Findings

Children living in kinship families experienced long wait periods for appointments, dentists who were not “kid-friendly,” issues with insurance coverage, and unmet oral needs.

Kinship caregivers experienced barriers related to money, accessibility, transportation, finding a dentist, and missing work when accessing dental services for the children in their care.

Kinship families experience health and racial disparities when accessing dental services such as being treated differently, lack of quality of care, and lack of cultural sensitivity.

SBDS's are more common in rural areas and are more likely to be used in urban areas.

Children in suburban areas are most likely to have unmet oral healthcare needs.

Findings from this study demonstrate both the need and impact SBDS's can have on decreasing the health and racial disparities children of kinship families experience in accessing prompt and appropriate quality dental care services that are provided with cultural humility and respect.

About this Study

The Ohio Federation for Health Equity and Social Justice (OFHESJ) is a nonprofit organization in Ohio dedicated to creating health equity and eliminating health disparities. With support and funding from CareQuest Institute for Oral Health OFHESJ proposed to evaluate and advocate for the inclusion of School-Based Dental Services (SBDS) in Ohio with a focus on children in kinship families. The Kinship Oral Health Project (KOH), entailed a three phase mixed method project that gathered data from kinship caregivers across the state of Ohio to influence state and federal policy towards the expansion and inclusion of SBDS's. In partnership with Ohio Grandparent Kinship Coalition (OGKC) and in collaboration with three agencies from across the state Butler County Educational Service Center (BCESC), and Ohio University College of Health Sciences and Professions (CHSP), and The Area Office on Aging of Northwest Ohio–The Kinship Navigator Program, OFHESJ recruited kinship caregivers to learn about their and the children in their care's experiences with oral health care. Phase I of the project included 179 surveys completed by kinship caregivers. The survey included questions regarding demographics, oral care habits, dental care received, SBDS's, and unmet oral needs. To gather more in depth information, OFHESJ facilitated focus groups with 43 caregivers who had completed the survey to ask them about barriers to dental care services and SBDS's. Phase III entailed the collection of kinship caregivers stories; storybanking. Story-banking connects a human experience to real life issues which impacts public policy. With the aid of its collaborators, OFHESJ collect the oral health stories of 103 kinship caregivers across Ohio. Data collected was analyzed and synthesized to create a policy paper and advocacy toolkit.

Conclusion

The expansion and support of SBDS's is necessary to ensure that, in the face of increasing health and education challenges (15) children in kinship families are receiving quality dental healthcare. Based on the findings of KOH the authors, whom are kinship experts and include kinship caregivers, community advocates, providers, and researchers, offer the following:

- The inclusion of SBDS's are an efficient and effective pathway for education policy to create meaningful practices that are reliable, evidence-based, and impactful for children in kinship families.
- SBD's need and should be integrated into schools at the local, district, state, and national levels.
- The benefits of SBD's exceed the costs.
- More state and national funding is needed to create, support, and expand SBDS.
- Programs that enhance school-based healthcare provider reimbursements can remove barriers to SBDS implementation.
- Creating incentive programs to schools and dental care providers who collaborate to implement and sustain SBDS's would also be beneficial.
- Schools can expand SBDS's by partnering with existing dental care clinics.
- A special focus on implementation and utilization of SBDS's in suburban areas is needed.
- Together with kinship caregivers, schools can create powerful partnerships to promote and advocate for SBDS's at the district and state level

About the researchers

Dr. Nancy Mendoza is an Assistant Professor at The Ohio State University College of Social Work. Dr. Ian Zapcic is a recent PhD graduate and Ashura Hughley is a current PhD student at the College of Social Work at The Ohio State University. Dr. Elinam Dellor is an Assistant Professor at The Ohio State University College of Social Work with expertise in health disparities among child welfare-involved families. Ron Browder is the President of the Ohio Federation for Health Equity and Social Justice (OFHESJ) and is a kinship provider. Lisa Stafford is owner of How about That! Consulting and has been an active partner of OFHESJ since its inception.

Contact information: Mendoza.794@osu.edu



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