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Exploring barriers and facilitators to supervised toothbrushing programmes in England

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Background:

Supervised toothbrushing is an oral health promotion intervention to prevent dental caries in young children. Supervised toothbrushing programmes (STPs) improve children's oral health, are cost-effective, and reduce health inequalities. However, uptake and maintenance are fragmented with considerable variation in how they are implemented.

Objectives:

To explore barriers and facilitators of STPs in England using the Consolidated Framework for Implementation Research (CFIR).

Methods:

This qualitative study involved individual and group interviews with a purposive sample of stakeholders at five levels of implementation: 1) children (aged 2-6 years old), 2) parents, 3) nursery/school staff, 4) oral health promotion teams and 5) funders of supervised toothbrushing programmes across England. Data collection and analysis were guided by the CFIR. Ethical approval was provided by the University of Leeds Dental Research Ethics Committee (130422/KGB/351).

Results:

In total, 154 participants were recruited across the five levels. Overall, there was support for STPs from policymakers, sites and parents with the evidence-base for their effectiveness felt to be compelling. The adaptability which allowed different areas and individual sites to 'make it their own' was viewed as a facilitator. In other areas, the complexity of aligning financial support, provider organisations and sites was a barrier which was difficult to overcome. In this situation, strong leadership, effective partnership working and local champions were identified as potential facilitators.

Conclusion:

Although an apparently simple community-based oral health promotion intervention, with strong political and parental support, the implementation of a supervised toothbrushing programme can be complex requiring consideration of barriers and facilitators at different levels of implementation.

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