Oral Health and the Aboriginal Child: A Forum for Community Members, Researchers and Policy-Makers



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he Oral Health and the Aboriginal Child forum was held June 7–8, 2007, at the Manitoba Institute of Child Health in Winnipeg, Manitoba. The focus of this event was the oral health of young Aboriginal Canadians. While most Canadian children experience little or no dental caries during early childhood, a shocking number of children still suffer extensive tooth decay. This disparity is most apparent in Aboriginal children from

both urban and remote First Nations and Inuit communities where the prevalence of early childhood caries (ECC) is high.¹⁻⁶

Forty-two community members, researchers and policy-makers from across Canada attended this invitation-only workshop to develop and improve national collaborations among child oral health and health researchers, Aboriginal communities and oral health policy decision-makers. The event was supported by a number of organizations, universities and companies including 3 institutes of the Canadian Institutes of Health Research (CIHR), namely the Institute of Human Development, Child and Youth Health, the Institute of Musculoskeletal Health and Arthritis, and the Institute of Aboriginal Peoples' Health.

Objectives of the forum

- Explain differences in how the ethics of research are perceived by academic researchers and collaborating Aboriginal community partners, and how child oral health research should be conducted that would be considered ethical by both groups.
- Explain how the social determinants of health influence Aboriginal children's overall health and, more specifically, their oral health and demonstrate how these "causes of the causes" could be integrated into oral health promotion programs.
- Describe current successes in the prevention of ECC and innovations in the promotion of improved oral health in young Aboriginal children. In addition, explain the gaps in existing research strategies and projects focused on child oral health.
- Demonstrate how research on early childhood oral health could be integrated into the larger framework of research focused on the health of Aboriginal children and families.
- Explain how successful preventive and oral health promotion initiatives influence health policy decisions by government and what factors in addition to research evidence shape early childhood oral health policy decisions.
- Develop a framework for participatory early childhood oral health research involving Aboriginal communities.
- Develop a collaborative network between early childhood oral health researchers and Aboriginal communities with the goal of developing Canadian research capacity and collectively applying for national grant funding.

Day 1

The forum began with presentations by 4 experts in Aboriginal health. Dr. Kue Young, professor and TransCanada PipeLines Chair in Aboriginal Health and Wellbeing from the University of Toronto, spoke on health disparities in the Northern regions. Ms. Jane Gray, a Mi'gmaq from Quebec who is national coordinator of the First Nations Regional Longitudinal Health Survey (RHS), Assembly of First Nations, gave an overview of the 2002/03 RHS. Dr. Marion Maar, assistant professor at the Northern Ontario School of Medicine contrasted Aboriginal and academic perspectives on research values and ethics and described how one Aboriginal community took action to make research work better for them. The final speaker, Dr. Peter Cooney, Chief Dental Officer of Canada, Health Canada, reviewed the current status of children's oral health in Canada. He discussed the role of his office in terms of access to care and reviewed the federal government's involvement in oral health care.



Dr. Rosamund Harrison presents Dr. Peter Cooney, Chief Dental Officer of Canada, with a framed logo of the forum.

The presentations were followed by group discussions on the following topics:

• Making child oral health a priority

Concepts discussed included the need for increased awareness about children's oral health and its importance to children's general health and well-being; the incorporation of ECC prevention into the daily practices of other health professionals; developing better ECC prevention strategies; building family knowledge about young children's oral health; and informing chiefs and councils about the importance of making evidence-based policy decisions.

• Oral health for the family and the community

Key ideas that emerged from this discussion included the need to make oral health a *family issue* by incorporating oral health into other government initiatives and programs like childhood immunization programs, and to make oral health a *community issue* through health fairs and integrated, multidisciplinary efforts with other health professionals, local media, elders and key community members. The outcomes of such programs must be measured.

• Child oral health research — together we can do it hetter

Discussion focused on the many challenges and personal misunderstandings researchers face when working with Aboriginal communities. Proposed solutions included building a relationship of trust, communicating at every stage of the research process and involving Aboriginal youth in research projects.

• Understanding the goals and measuring the outcomes of research

This discussion focused on the need to change negative generational attitudes toward dental care; to develop Aboriginal-driven research agendas; to qualitatively explore Aboriginal belief systems about issues such as child dental health, the importance of primary teeth and dental treatment under general anesthesia; and to pursue research about the daily social realities of remote, northern communities.

Honouring beliefs

This group discussed how to develop and conduct oral health research that honours and integrates traditional Aboriginal beliefs about health, disease and healing.

Strategies for incorporating the wisdom of elders into planning and conducting oral health research were examined. Key points included: the changing role of elders, revival of traditions and ceremonies, acknowledging each community's uniqueness and dissemination of information to communities.

Day 2

On the second day, each member of the forum's steering committee presented research they were involved in that focused on Aboriginal child oral health. Dr. Herenia Lawrence described a researchcommunity partnership that addressed children's oral health inequalities in the Sioux Lookout Zone of Northwestern Ontario, provided an overview of the strategies for preventing oral diseases in these young children and highlighted the most recent strategy, "Baby teeth - keep them beautiful with fluoride varnish," which was recently evaluated for its effectiveness and feasibility. Dr. Rosamund Harrison reported on a research project in the interior of British Columbia. She described her role as a non-Aboriginal researcher from outside the community, how the project "stood up" in the context of recent CIHR guidelines related to Aboriginal research, how the project could have been organized differently given what we "know now," and her views on future directions for such research. The presentation by Dr. Robert Schroth discussed barriers to moving research evidence into policy, the benefits of collaboration, how community development can be used to improve child oral health, and the benefits and history of a multiagency, multidisciplinary and intersectoral collaborative partnership in Manitoba. Finally,



Participants of the Oral Health and the Aboriginal Child forum.

a presentation was given on research conducted by Dr. Sabrina Peressini on Manitoulin Island, Ontario, which explained how a qualitative research methodology could aid our understanding of how to improve Aboriginal child oral health. The presentation discussed how grounded theory can be used to explore some of the individual and community factors that influence the choices of primary caregivers regarding infant and childfeeding and rearing practices.

Key recommendations

• Disseminate the proceedings

Distribute the forum proceedings to supporters, institutions and organizations likely to have an interest in the forum's deliberations, i.e., Canadian dental and medical faculties, Aboriginal organizations, organized dentistry, health departments, pediatricians' groups, regional health authorities and Aboriginal health centres. Because Internet access can be problematic in remote Aboriginal communities, a CD-ROM will be made available upon request.

• Establish a clearing house

Locating information relating to Aboriginal early child oral health is difficult and time-consuming. This is especially true in Aboriginal communities. Attendees suggested creating an easily accessible catalogue of resources, information, protocols, data, clinical trials and "lessons learned" from previous research and oral health promotion projects (successful or not). This online research repository or clearing house could be accessed, for example, via the websites of existing Aboriginal organizations.

• Nurture and enhance collaboration and partnerships

Develop and nurture the relationships formed at the forum. Attendees suggested expanding the steering committee to include a broader representation of interested parties from Aboriginal communities, the health professions and government. A recommendation was made to have a follow-up meeting in an Aboriginal community to give Aboriginal people the opportunity to share their stories about early childhood oral health and oral health in general.

• Develop an Aboriginal Oral Health Research Network

Forum participants recommended the creation of an Oral Health and the Aboriginal Child Research Network to develop an integrated and collaborative research environment for Aboriginal communities, researchers and policy-makers for trial and demonstration projects with a goal of improving Aboriginal child oral health. The following basic guiding principles were established:

- involve the Aboriginal groups often overlooked in research, particularly urban Aboriginals and the Métis⁷
- adhere to the May 2007 CIHR Guidelines for Health Research involving Aboriginal People⁸
- include traditional knowledge in research protocols
- develop a 3-year plan for the network that will include research grant proposals
- consider innovative research methodologies such as qualitative research and participatory action research

- determine how to properly share results with communities and then advocate on their behalf once the research is complete
- include research focusing on the determinants of health, including the social determinants
- link with other disciplines and professions so that future research is, or continues to be, multidisciplinary
- Build Aboriginal research capacity

Community partnerships will require an interactive process with active and conscious participation of both researchers and research "users" throughout the research process, moving away from the simple dissemination of findings to a united effort from the beginning of project undertakings. In addition, a mentoring program for young Aboriginal scholars who are interested in child and community oral health research should be established. At the organizational level, linkages with the Aboriginal Capacity and Developmental Research Environment program or other pediatric health research institutes should be explored.

• Highlight the importance of oral health to overall child health

A theme that emerged throughout the forum was the importance of oral health and its essential role in overall child health. Research that highlights the importance of oral health to overall child health should be undertaken on such topics as timely access to dental care for Aboriginal children and collaboration with early childhood and prenatal nutrition programs (e.g., Aboriginal Head Start, Canada Prenatal Nutrition Program).

Conclusion

It is imperative to develop a national research strategy that will ultimately reduce the burden of dental caries experienced by Aboriginal preschool children. Forum attendees confirmed that Aboriginal child oral health is a priority and an essential part of general child health and well-being, and that collaboration on a research strategy is required from community members, local decision-makers, researchers, dental and other health professionals and government policy-makers.

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The full forum proceedings can be viewed online at: www.mich.ca/