



HABIT

Health visitors delivering Advice in Britain on Infant Toothbrushing

The Problem

In England, a quarter of children have tooth decay by the age of 5 years old. Tooth decay causes a multitude of problems, including pain and discomfort, problems with speech development and negatively affects educational outcomes. Children living in the most deprived communities are most likely to have decay. Tooth decay is the most common reason for a young child to have a general anaesthetic.

Tooth decay is preventable. Early-years professionals can play a critical role in supporting parents to adopting key oral health habits, such as brushing twice a day with a fluoridated toothpaste and limiting the intake of sugary food and drinks. In England, the Healthy Child Programme ensures all infants receives at least five visits from their Health Visitor between 0-24 months. Oral health is a key topic for these visits.

What did we do?

To support these oral health conversations, we co-designed the HABIT intervention with health visiting teams and parents in Bradford. The HABIT intervention is informed by behaviour change theory and includes parent facing resources and activities: six videos, each covering a different oral health topic, a leaflet, and a website as well as models of teeth and toothbrushes to facilitate toothbrushing demonstrations. Before starting, health visiting teams receive a training session to update their oral health knowledge, and practiced how to undertake effective HABIT oral health conversations with families in a standardised but flexible way.

What are the implications for policy/practice?

Our research has shown the HABIT conversations are acceptable to parents, are feasible to be delivered by health visitors and lead to the adoption of key oral health habits by parents of young children. We are in discussions to roll HABIT out as standard care for health visiting teams across Bradford.

