## Oral Health Policy Equity Tool



This document is intended to serve as a tool to support advocates, community-based organizations, organizers, and others looking to analyze oral health policies through the lenses of health equity and community engagement. Many existing policy analysis tools focus on topics like political feasibility and cost but few specifically examine how a given policy addresses existing inequities or the role of community engagement in setting a policy agenda. This tool is adapted from existing equity analysis tools and aims to be attentive to the particular power dynamics that often arise in oral health. The questions on the following pages can serve as a guide for conversations within organizations, coalitions, or other organizing spaces.

You may still want to consider using other tools alongside this one to analyze cost, political feasibility, or other important factors in evaluating whether or how to move forward with work on a particular policy. Throughout the tool, you will see specific prompts encouraging you to think about environmental factors that could contribute to the success of the policy (e.g., cost or political feasibility) and links to other tools that may supplement this one.

## Acknowledgments

As noted above, this tool has been adapted from several existing tools and was developed with support from experts and colleagues at several partner organizations. We are deeply grateful for the specific support, guidance, and feedback of:

- Pareesa Charmchi Goodwin, Connecticut Oral Health Initiative
- Mahak Kalra, Kentucky Youth Advocates
- Fatima Clark and Eileen Espejo, Children Now
- Brianna Weeks, Children's Action Alliance
- Sarah Vidrine, Whitney Tucker, and Ciara Zachary, NC Child
- Kathy Kilrain del Rio, Maine Equal Justice Partners
- Camilo Mejia and Sonni Barma, Catalyst Miami
- Gloria Medina and Gina Charusombat, Strategic Concepts for Organizing and Policy Education
- Layal Rabat, Asian Pacific Community in Action

## Acknowledgments

This tool would not be possible without the time and energy of the above individuals and organizations, as well as the existing work done on the following equity analysis tools:

- <u>Equity Impact Review</u> (from King County, Washington State)
- Race Matters: Racial Equity Impact Analysis (from Annie E. Casey Foundation)
- Racial Equity Impact Assessment (from Race Forward)
- Racial Equity Policy Tool (from Kids Count in Washington)

This product was developed with support from the DentaQuest Partnership for Oral Health Advancement, LLC.

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## **Background**

The goal of this tool is to help advocates center equity and community engagement in their oral health policy agenda-setting. Many different definitions of "equity" exist, but here, we recognize that oral health inequities have structural causes and historical roots. For additional reading and background information on oral health inequities and their structural causes, see the additional resources section.

This section offers some introductory questions to help you clarify what policy you're analyzing, how that policy will be actualized, and what your organization or coalition's overarching vision for oral health equity is. It may be helpful to return to this section (particularly question 4) as you work through the tool to ensure that you are keeping your broad goal(s) and vision(s) in mind as you proceed.

## **Introductory Questions**

- 1. What policy are you analyzing?
- 2. What is your organization's or coalition's goal in considering this policy (e.g., supporting policies that reduce inequities in access to care)?
- 3. What groups or organizations are proposing the policy? Who has been consulted in the design and development at this stage of the process?

- 4. What is the method of change that this policy (or other proposal) will take (e.g., legislative, administrative, etc.)?
- 5. Will this proposal create something new (i.e., introduce new legislation, create a new regulation or policy, authorize a new program, etc.) or is something existing being amended?
  - a. If something existing is being amended:
    - i. What background information do you have or need about the existing policy?
    - ii. Are equity and/or community engagement incorporated into existing language? If so, does this language need to be updated or improved upon? If not, how/can it be added in?

# **INTRODUCTORY NOTES**

- The Ethical Imperative of Addressing Oral Health Disparities (Journal of Dental Research)
- <u>Dental Disparities among Low-Income American Adults: A Social Work Perspective</u> (Health and Social Work)
- Oral Health Disparities: A Perspective From the National Institute of Dental and Craniofacial Research (American Journal of Public Health)
- <u>Social Inequalities in Oral Health: From Evidence to Action</u> (International Centre for Oral Health Inequalities Research & Policy)
- <u>Reducing Oral Health Disparities: A Focus on Social and Cultural Determinants</u> (BMC Oral Health)

SECTION 1

## What problem is this policy designed to solve or address?

This section will help you determine what history, data, stories, or other important information you currently have about the problem this policy is meant to solve and help you identify what other information you might need in order to evaluate its impact.

Keep in mind that, in addition to publicly available quantitative data, engagement with directly-impacted communities is necessary to best understand the oral health issues people in your community are facing and what policies will help address these issues.

The <u>additional resources section</u> offers suggestions for publicly-available oral health datasets to get you started. It may also be helpful to consider requesting non-public data from your state health department, Medicaid program or other public health agency. These data often offer more substance than publicly-available data.

1. What information do we currently have to describe the issue? What data are available (e.g., public health data, data on coverage or access to care, survey data, key informant interviews, community health needs assessment(s))? Is information disaggregated by race, ethnicity, income, or other relevant demographic factors? What, if any, disparities exist?

**Note:** In addition to quantitative data sources, consider qualitative avenues of collecting information, including conversations with members of affected communities, as quantitative data may not fully reflect the lived experiences of some populations.

2. What other questions about the problem/issue need to be answered and can we get data/information to answer them (i.e., have other states or communities attempted to address this issue or implement similar policies)?

- 3. What additional information do we know about the broader social, historical or political context<sup>1</sup> for this proposal (i.e., are there historical injustices around this issue and does this policy seek to address them)?
- 4. If this policy is implemented, how will we know it is successful and what information/data do we need to collect to measure its success<sup>2</sup>?

**Note:** Consider developing a community review panel or other channels for ensuring that data you plan to collect is both ethical and paints a clear picture of the impact the policy will have on affected communities.

¹ It may be helpful to come back to political feasibility here. The political context for this particular proposal, as well as any history around how similar proposals have fared or what political dynamics came up in the past, can be important in understanding the best way to communicate about and advocate for this policy, if you decide to move forward on it.

<sup>2</sup> Cost may be a relevant factor here, particularly if the policy you're analyzing seeks to increase access to care. It may be helpful to build in measures for assessing cost vs. benefits, as increasing access to care often also increases costs in the short term (but can decrease costs over the long term).

- CDC Oral Health Data: This interactive tool provides fast facts on dental visits and oral health outcomes for children and adults, nationally and by state. Data can be sorted by race/ethnicity.
- **CDC** Oral Health Data Tools: This interactive tool offers additional CDC data on state water fluoridation and sealant programs.
- **CDC** <u>Chronic Disease Indicators</u>: This interactive tool provides data on 12 oral health indicators and can be sorted by race/ethnicity and gender.
- Healthy People 2020 Oral Health Indicators: This interactive tool provides data on 33 oral health indicators included
  in the Healthy People 2020 objectives. Data can be sorted by race/ethnicity as well as income and health insurance
  status.
- National Institute of Dental and Craniofacial Research Oral Health Data and Statistics: This resource provides data on several oral health outcomes and access to care measures and can be sorted by age.
- **CMS Form 416 Data:** The CMS-416 Form is used to measure the performance of state Medicaid and CHIP programs and includes annual state-reported data on dental and oral health services provided to children and adolescents.
- State Basic Screening Surveys: The Association of State and Territorial Dental Directors maintains a list of states that have utilized the Basic Screening Survey to collect data on the oral health status of preschool and school-aged children as well as older adults. You may need to contact your state health department or oral health program to gain access to recently collected data.
- CDC Pregnancy Risk Assessment Monitoring System (PRAMS): PRAMS includes data on a number of pregnancy-related health indicators, including access to oral health care during pregnancy. State-level data are available from the CDC.

**SECTION 1:** What problem is this policy designed to solve or address?

# **SECTION 1 NOTES**

SECTION 2

## Who is the target population for this policy?

This section will help you identify which groups will be most directly impacted by the policy you're analyzing as well as other groups who may be affected more indirectly. Keep in mind that understanding how particular populations may be affected by a policy usually requires connection with and relationship to people in those communities.

Section 4 will help you take stock of your organization's community engagement practices and build out a plan for deepening them, if necessary. In this section, it may be helpful to understand the demographics of your state, local communities, and the population(s) your organization serves or focuses on. The additional resources section offers some background information on which groups are most impacted by lack of access to dental care and oral health inequities.

- What groups will be directly impacted by this policy? How, specifically, might marginalized populations be affected (e.g., people of color, tribal communities, LGBTQ+ populations, low-income communities, people with disabilities)?
- What other groups or related populations might be impacted (e.g., if the target population is immigrants, are undocumented people included)?

3. Does the target population of this policy align with the target population that your organization or coalition works with or serves?

- <u>Disparities in Oral Health</u> (CDC): This resource provides a general overview of oral health disparities and can offer a starting point for thinking about which groups may be most affected by disparities and by the particular policy you're analyzing.
- Anti-Immigrant Policies are Hurting Children's Oral Health (Children's Dental Health Project): This blog provides an example of how specific policies can harm the oral health of immigrant communities, offering an example of how you might think through how the policy you're analyzing could impact different populations.

# **SECTION 2 NOTES**

SECTION 3

## How does this policy address inequities or reduce disparities?

This section will help you more closely examine the potential equity implications of the policy you're analyzing, with particular attention to how explicitly equity is considered and any unintended consequences the policy might create. The goal of this section is to help you consider the real impact of this policy, particularly on already marginalized populations, and identify how likely this policy is to move you toward the overarching oral health equity goal(s) you identified in the background section.

This may also be a good time to pause and do a quick scan of existing research or literature to determine if similar interventions have had an impact on oral health disparities and otherwise help you collect information about the likelihood of this policy improving oral health equity. The <u>additional resources section</u> includes sources to help you find research and reports.

- Has the policy been crafted with inequities or disparities in mind or is it assumed that such an outcome will occur as part of the broader policy?
- 2. What specific aspects of the policy seek to address or reduce inequities?
- 3. What evidence do we have that reduced inequities will occur (a quick search of existing research literature may provide some insights here)?
- 3. Are there any additional outcomes or unintended consequences for directly impacted communities and how might the policy be changed to minimize or eliminate any negative consequences (i.e., might this policy inadvertently increase costs for some people, place additional burden on parents/caregivers, or create separate systems for already marginalized people)?

**Note:** Consider the ways that this policy might intersect with other issues or policies facing affected communities.

3. What impact might this policy have on other aspects of well-being for the target population (e.g., overall health, economic mobility, income, education, housing, etc.)?

- <u>Google Scholar</u>: This search engine can be used to find peer-reviewed journal articles, other academic research, and reports.
- PubMed: This search tool compiles citations for scientific research articles.

# **SECTION 3 NOTES**

SECTION 4

How are you following the leadership of directly-impacted communities?

This section will help you think about your organization's community engagement practices and start building out a plan for deepening them, if necessary. **Keep in mind that authentic community engagement involves long-term relationship building with communities and community-based organizations.** 

If you identify, in this section, that your organization does not have the necessary relationships with directly impacted groups to answer the questions sufficiently, you may need to consider ways of connecting with the already stated needs, projects, and priorities of community groups. In some cases, this could require shifting your own organizational priorities or tactics to ensure community needs and voices are centered.

- 1. Have stakeholders from affected marginalized populations been meaningfully involved in the development of this proposal? Who may be missing from the table and why?
- What is your plan for consulting directly impacted groups? What about those who may be indirectly impacted?

**Note:** This may include consulting directly with impacted groups or partnering with community-based organizations/community organizers who work directly with communities. **Section 5** offers more detailed questions to help you address this.

3. Have affected communities raised this issue and have they proposed their own policy solutions?

- <u>Dental Therapy Advocacy: Community Engagement Guide</u> (Community Catalyst): While this resource includes information specific to dental therapy policy, it also includes community engagement guidelines and recommendations for advocates and funders that can be applied more generally to a variety of oral health policies.
- Racial Equity Tools <u>Community Engagement Resources</u>: This site compiles a variety of community engagement tools, guides, and resources.

# **SECTION 4 NOTES**

SECTION 5

## Who is already working on this issue?

This section will help you build on the community engagement groundwork you set in <u>section 4</u> by offering opportunities to dig more deeply into your organization's current relationships. It also offers an opportunity to think more about what groundwork may have already been done on this particular policy area or on other policies/programs to address the issue you've identified.

The goal of this section is to help you ensure that communities are meaningfully represented in your oral health agenda-setting work and that you don't unintentionally interrupt or counteract work that is already happening at the community level.

- Do you have existing relationships with members of (or organizations that meaningfully represent) directly or indirectly impacted populations?
- 2. Can you connect with community partners to better understand the work that's already been done to understand or address this issue?

- 3. Have you consulted community members about how they want to be engaged on this issue (e.g., being involved in advocacy and campaign work, sharing their story publicly, sharing their story for inclusion in materials, etc.)?
- 4. Who are potential partners who are not currently engaged on this issue (for local proposals, think about statewide impact and whether there are other areas around the state or country where this policy is applicable)?

# **SECTION 5 NOTES**

### SECTION 6

## What is the current level of support for this policy?

This section will help you understand is the level of community support for the policy you're analyzing.

If you decide to work on this policy, this section can also help ground your work in the political history of similar campaigns and ensure you're following the expertise of communities on how similar policies have impacted peoples' lives or movement building work in the past.

- 1. What do directly and indirectly affected communities have to say about this policy (i.e., have they attempted to advance policies of this sort and what problems or opposition have they encountered)?
- 2. Where do policymakers or decision makers stand (i.e., are they aware of the problem and have they considered or opposed similar policies)?<sup>1</sup>

What other special interests hold power that may facilitate or impede this policy (e.g., state dental association, dental hygiene association, Medicaid agency, other child/health/disability advocates, etc.)?

**Note:** There may be other special interest groups or influential groups to consider depending on the context of your state.

<sup>1</sup> This question begins to get at political feasibility, although that is not the main focus of this tool. It may be helpful to consult other tools focused on cost and political feasibility (some examples included under "additional resources" in the conclusion/next steps section below) if you your analysis around equity and community engagement leads to an initial determination to move forward with this policy.

When considering political feasibility, we encourage advocates to continue centering community needs. For example, if the political climate in your state makes this policy seem infeasible—because of lack of support from key policymakers or other political barriers—consider what groundwork needs to be set to increase feasibility (e.g., targeted outreach or messaging campaigns, direct actions, grassroots organizing) and who you might partner with to invest in that work, rather than abandoning work on a policy that has strong support in directly-impacted communities because the current political environment may create barriers.

# **SECTION 6 NOTES**

## Conclusion/ Next Steps

Now that you've reached the end of the guiding questions section, you can start to review your answers, decide what additional information you need to collect, and ultimately make a decision about whether or how to move forward on this policy.

This section will help you synthesize the information you've collected so far, and think about the viability of this policy in the context of your state's policy environment, your organization's priorities, and your broader vision for health equity.

- How does this policy fit into your organization's broader policy agenda for health equity? Could this policy become a component of broader efforts?
- 2. What else needs to happen to move toward oral health equity?
  - a. Are there other policies that, in combination, could strengthen the impact of this one or that might complement well?<sup>1</sup>
  - b. If so, are there other organizations you can partner with to advance these multiple priorities?

3. If members of the target population for this policy are not currently at the table, how will you get their input before moving forward on this issue?

CONCLUSION

<sup>&</sup>lt;sup>1</sup> Cost analysis could be helpful here, especially in thinking through the long term cost savings that may be associated with multiple, coordinated policies with a similar aim.

## Initial Determination

Through discussing the above questions, you have likely answered some questions, raised other questions or concerns, and/or uncovered some areas where more research or information is needed. This section will help you make an initial determination about moving forward with work on this policy.

If you determine that this policy is worth perusing through the lenses of equity and community engagement, you may also want to consider additional environmental factors that could contribute to the success of this policy (e.g., cost, feasibility). Several outside tools and resources have been flagged throughout the body of this document in places where it may be most helpful to think about these other factors. These and several other resources are also included under additional resources at the end of this section.

- What is your initial determination about your organization's or coalition's level of support for this policy? Some options may include, but are not limited to:
  - We support this policy and plan to add it to our policy agenda or otherwise center it in our work
  - We support this policy, but are likely to play a supporting, rather than a leadership, role
  - We will not directly support this policy, but we will not advocate against it
  - We do not support this policy and will advocate against it

Which questions were you unable to answer and/or where do you need to collect more information in order to be able to answer certain questions? What other organizations, groups, or communities do you need to engage with to get the information you need?

### **Additional Racial Equity Tools**

- <u>Racial Equity Impact Assessment</u> (The Annie E. Casey Foundation and Race Forward): This
  document provides an overview of racial equity impact assessments and includes several
  sample questions that can be used to evaluate how a policy or key decision might affect
  different populations.
- <u>Equity Impact Review</u> (King County, Washington): This tool outlines a framework for conducting an equity impact review process and includes helpful questions for analyzing equity and community engagement in a proposed policy or other action.

### Additional Racial Equity Tools (cont'd)

- Racial Equity Policy Tool for Child and Family Public Policies (Kids Count in Washington): This policy tool is specific to Washington State and to policies that are targeted toward children, specifically. However, it includes many helpful questions that can be generalized or applied to other specific populations to analyze whether and how a policy addresses equity.
- Health Care Coverage and Financing for Children with Special Health Care Needs: A Tutorial to Address Inequities (Center for Innovation in Social Work and Health): This tool is specific to children with special health care needs and provides background information on inequities among this group. Module 3 (how can policies and programs improve inequities in your state, linked above) provides questions that can be generalized or applied to other populations to analyze equity in policies. The full tutorial is available <a href="here">here</a>.

### Tools to Analyze Cost and/or Political Feasibility:

- Policy Analysis (Centers for Disease Control and Prevention): This general tool provides background information on policy analysis and questions that can be used after a problem has been identified to assess possible solutions. Resources include <u>key questions</u> and <u>table</u> that can be filled in.
- <u>Cost Estimates Search</u> (Congressional Budget Office): This resource provides cost estimates on existing bills. This tool can be useful in estimating how much the policy you're analyzing may cost, based on other, similar policies and/or in comparing the proposed cost of the current policy (if you know it) to existing bills.
- <u>Guidebook for Policy Consensus Tool</u> (Children's Dental Health Project): This tool includes sample questions and templates to help coalitions and groups come to consensus on oral health policy agendas.

Your feedback is important to us! We would appreciate hearing from you about your experiences using the Oral Health Policy Equity Tool and any comments or suggestions you have to improve it. Please take our anonymous survey to share your feedback!

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