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Progress in Community Health Partnerships: Research, Education, and Action, Volume 12, Issue 1, Spring 2018, pp. 1-2 (Article)

Published by Johns Hopkins University Press

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Building Capacity in the Sikh Asian Indian Community to Lead Participatory Oral Health Projects

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What Is the Purpose of This Study?

- To increase understanding of Sikh Asian Indians as an immigrant group with a unique cultural, linguistic, and social profile.
- To demonstrate the importance of local data in prioritizing the health needs of community members.
- To detail how UNITED SIKHS, a community-based organization serving the Sikh Asian Indian community, was able to strengthen its ability to lead participatory oral health projects.

What Is the Problem?

- Oral health conditions such as dental caries (cavities) and gingival and periodontal (gum and bone) diseases are largely preventable.
- The burden of oral diseases is higher in groups such as racial/ethnic minorities, immigrants, and non-English speakers than in more advantaged groups.
- Many immigrant groups, including Sikh Asian Indians, lack access to dental care because they do not have dental insurance and cannot afford to pay the cost of dental services themselves.

What Are the Findings?

- Fewer than one-half of Sikh Asian Indians (43%) reported ever receiving a check-up or a screening by a dentist.
- Even among Sikh Asian Indians who had seen a dentist, only one-half (50%) visited a dentist in the past year.
- Most Sikh Asian Indians were born in India (96%–98%, depending on the survey). and speak Punjabi as their primary language (76%–90%, depending on the survey).
- Most Sikh Asian Indians lacked both health insurance (71%) and dental insurance (80%).
- Nearly two-thirds of Sikh Asian Indians have a regular doctor (65%), but only about one-third (35%) have a regular dentist.
- Very few Sikh South Asians have ever smoked cigarettes or use other tobacco products (about 1%).

Who Should Care Most?

- Community-based organizations, government agencies, and services providers supporting immigrant groups, especially those that serve Asian communities.
- Dental schools, medical schools, and schools of public health that engage in community-based service delivery and community-based participatory research.
- Policymakers who work to cover immigrant populations with public insurance options.

Recommendations for Action

- Collaborate with community partners to enhance culturally competent service delivery, including integrated primary care and oral health care screening in community settings.
- Disseminate study findings through social media and community networks.