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M3 HBM Paper Health Belief Model and Dentistry Article Summary Flaer, P., Younis, M., Benjamin, P & Al Hajeri, M. . A psychological approach to dentistry for the underserved: Incorporating theory into practice. Journal of Health care Finance, 37(1), 101-108. This article explores the values and beliefs that influence the provision of dental health care services among the underserved people in United States. The study identifies the health belief model as most commonly applied theory in the study of psychosocial factors affecting the access to dental care services. The model is useful in predicting behavioral changes that influence dental care or are influenced by the dental care actions. The model not only identifies such behavioral changes but also provides explanations on the causes of the behavior changes and possible belief patterns associated with changes. According to Flaer, Younis, Benjamin and Al Hajeri (2010), HBM can be applied as a psychosocial model to understand and predict perceptions, beliefs and cognitive patterns that affect the accessibility of dental care services among the underserved populations. Application of the HBM model in this study underpins the cultural, socioeconomic and environmental factors that influence the people's ability and willingness to access dental care. Limited knowledge about behaviors that predispose individuals to dental diseases has been identified as a major contributing factor to poor dental health (Flaer, Younis, Benjamin & Al Hajeri, 2010). Other factors identified as influential in process of seeking dental care include pain and fear of advanced stages of the dental conditions. Pain and fear of worse conditions associated with the dental diseases have been found to play a critical role towards the development of the dental health belief. The two factors can as well as deter people from seeking dental care especially when a person suspects tooth removal as the

most likely intervention. At the same time, the study also establishes that the need to prevent tooth loss and prevent other conditions such as severe gum infection motivates people to seek dental care. The model further establishes that socioeconomic status of the people is another belief that influences the accessibility of dental care with a significant number of people actually believing that dental care services are for those with high family income. The study provides recommendations to deal with the decreased access to dental care including the need to offer dental services to the underserved in form of a community service. The community approach in the delivery of dental care services has been identified with other benefits other than increasing number of people gaining access to dental care including changing of dentists' attitude towards the poor and acting as a source of motivation for volunteers to engage the community in promoting general oral health (Flaer, Younis, Benjamin & Al Hajeri, 2010). It is also proposed that dental care units should collaborate with local institutions such as local schools, universities and health facilities to enhance accessibility of both knowledge and dental care services to underserved populations. Application of HBM clearly predicts and relates the dental health behaviors, revealing different patterns of beliefs with susceptibility to dental disease emerging as a major beliefs that influence the underserved people's decision to seek dental care services. Other factors influencing the behavior changes among the underserved populations identified in this study include attitudes, values, and culture (Flaer, Younis, Benjamin & Al Hajeri, 2010). In conclusion, HBM emerges to be impetus in the understanding of behavioral changes in dental care and factors that may promote or discourage people from seeking dental care. References Flaer, P., Younis, M., Benjamin, P & Al Hajeri, M. (2010). A

psychological approach to dentistry for the underserved: Incorporating theory into practice. Journal of Health care Finance, 37(1), 101-108.