

Dental Public Health Activity Descriptive Summary

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Oklahoma Dental Health Education Program

Oklahoma does not have mandated school health education. A 2010 Oklahoma survey found that 58% of third grade students have dental caries experience. Clearly, Oklahoma's children need our help with educational and preventive measures. Good oral health is important for all children because it affects their overall growth and development.

The Oklahoma State Department of Health (OSDH) has a dental health education program that encompasses the personnel of a state dental director, a program manager, administrative support, and ten educators. These educators predominantly provide services to children and adolescents in multicounty areas. The *Friends for Life* dental curriculum debuted in the 1970's, and subsequently had several minor edits. It became apparent that it was time for a new dental education manual.

In 2010, Friends for Life underwent major revisions and added extensive features on dental health information and dental terminology. The new Dental Health Educators Manual was developed for grades K-6, and includes three lessons for each grade level. It was distributed to the educators at an inservice training. The content may be adapted to reach pre-school, Head Start, Head Start parents, WIC clinics and adult groups. The manual is evaluated annually and edited as needed.

The revised *Friends for Life* program follows the Centers for Disease Control and Prevention's Characteristics of an Effective Health Education Curriculum, which emphasizes essential knowledge, healthy behaviors, and developing health skills. The topics include healthy eating habits, the importance of fluoride, dental safety practices, tobacco prevention, dental office personnel and equipment, and dental anatomy. Lessons are geared to the age level of the students and can be adapted by the educator to the class size and setting. The students receive toothbrushes and disclosing tablets are used to teach proper brushing techniques. In FY11, the educators instructed 30,220 children preK-12 grade.

Evaluation tools include: pre/post tests, plaque scores, and educator evaluations. Classroom teachers are encouraged to complete online evaluations using survey monkey to rate the dental educator's presentation and provide open-ended comments. In FY11, 3,631 children in grades 3-6 participated in pre/post testing and 73% demonstrated improved knowledge. The educators received a 94% rating of above average from the survey evaluation and 96% of teachers indicated they would be more likely to reinforce to their students that dental health is essential for overall health.

The OSDH modified the *Friends for Life* curriculum for the Adopt-a-Dentist program, which is a component of the Schools for Healthy Lifestyle (SFHL) initiative. The SFHL mission statement is "to promote and maintain healthy lifestyle choices in Oklahoma through preventive, community-based school health education programs for students, their families, and faculty." In FY11, 59 schools were involved, relating to 25,000 children. The <u>Adopt-a-Dentist curriculum</u> is designed for two grade groups: K-2 and 3-5. Each group consists of six lessons which may be used as independently or in conjunction with ADA classroom presentations. The Oklahoma Dental Association partners in this effort.

Costs for the Dental Health Education Program depend on the number of educators employed and available funding. For FY11, there were 10 educators and \$28,000 was spent on dental education tools and toothbrushes. The cost for SY12 is on track to be comparable. The funding is a combination of MCH Title V and state appropriations. (This cost does not include the educator's salaries, travel expenses or other program projects.)

Lessons Learned:

The Friends for Life educational curriculum supports healthy behavior, but it isn't possible to determine lasting effects of the program. For healthy behaviors to be sustained, they need to be reinforced by the student's teachers, family, and peers. The teachers are encouraged to promote oral health and parents are provided literature. Children's advocates in Oklahoma continue to support mandatory health education for middle school students, which would include an oral health module. Passage of such legislation would strengthen dental knowledge – but the effort has been unsuccessful.

Lessons and Challenges:

- Introduction of new materials and evaluation tools requires training
 - Pre/Post Test
 - Originally set to use a scanner to grade tests, but this was problematic
 - Need assistance of evaluators to learn how to gather data and make reports
 - Have to be patient and persistent consider year 1 a trial
 - Be willing to adjust
 - Survey Monkey
 - Difficult to set filters learning curve
 - Determine who has access to survey
 - Determine methods to maximize return rate of survey
 - Be willing to adjust
- Listen to the Educators that are using the manual
 - Need forum to discuss (annual in-service as well as year round feedback)
 - Be receptive to revisions
- It is difficult to gain access to schools
 - o Mandatory testing, EOIs, be familiar with school schedule
 - Establish relations with school personnel
 - Competition from other dental personnel (such as large dental service providers)
- Manual is adaptable
- There are always new resources keep current
- Lessons are guidelines many resources can complement the lessons

• Share your efforts with others – it is much appreciated

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