

Dental Public Health Activity Descriptive Summary

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The Early Childhood Caries Prevention Program in Palau

Early Childhood Caries (ECC) is a significant public health problem in Palau. An overwhelming majority of children experience tooth decay by the time they enter preschool. An open mouth survey in 1998 of first year Head Start children showed that nearly 80% of children ages 3-5 years of age experience dental caries, the average number of decayed teeth per child was nearly seven, and 5% of children in this age group required general anesthesia to treat or remove painful or infected carious teeth. All of this oral health data were shared with key health managers in 1999.

In response to this growing problem, the Division of Oral Health (DOH) has systematically developed a prevention program in collaboration with the Maternal and Child Health Unit (MCH) under the Ministry of Health. The strong support by Palau's MCH managers and staff became the absolute key to success for further development of a collaborative ECC Prevention Program in Palau. In 2001, the Palau ECC Prevention Program became more formalized with the adoption of the Palau Oral Health Improvement Plan that became a part of the National 5-Year MCH Strategic Plan. This plan developed with input from a broad range of individuals and health care providers in the National MCH Planning Committee and Family Health Conference. The core ECC Prevention Program involves integrating preventive oral health services into all regular prenatal and postnatal care programs. The program promotes the idea that oral health is an important component to overall health and all efforts are made to integrate oral health into broader public health initiatives. An important aspect of the program is improving the awareness of the public and collaborating with others to encourage healthy, responsible parenting and lifestyles. There are five key components of the ECC Prevention Program:

1. Improve oral health preventive services targeting young children,
2. Improve oral health preventive services targeting pregnant women and new mothers,
3. Improve the oral health awareness of the community,
4. Improve oral health surveillance, and
5. Improve the capacities of health professionals to provide preventive oral health services.

Both health and process outcomes are being monitored by an oral health surveillance system to evaluate the success of the ECC Prevention Program. Final surveillance data is still yet to be collected and processed to assess the outcome and success of the ECC Prevention Project.

As of 2017, early childhood caries amongst children ages 3-5 has declined by about 20%. Dental hygienists rotate monthly to provide oral health education and fluoride varnish to pregnant mothers and mothers at the MCH clinic.

Preventive and restorative treatment is still ongoing in all elementary schools in Palau as well as in Head Start programs. Extraction under general anesthesia for children has been nil since our last report.

The DOH is working in collaboration with the Head Start Program and public health nurses to conduct parent training on the importance of primary teeth and their role as well as how to keep primary teeth cavity free. Oral health education for elementary school children is also ongoing. While betel nut

chewing among elementary students has declined by about 50%, cigarette smoking has increased among high school students.

Lessons Learned:

1. We still need to continue to improve and strengthen oral health preventive on early childhood as well as elementary school children.
2. Improve collaboration with tobacco cessation program on targeting high school students.
3. Improve oral health surveillance system.
4. Lack of funding (grants to support our activities).
5. Need to hire and train more oral health personnel.

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