Front Line Health Workers (FLHW) specifically include:

- Community Health Representatives (CHRs)
- Community Health Educators
- Community Health Workers (CHWs)
- Promotores(as) de Salud
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Educational Objectives

- Describe the relationship between oral health and overall health
- Describe the prevalence and impact of oral disease
- Recognize barriers to maintaining oral health
- Identify ways to integrate oral health into FLHW practice
Joining the Fight for Oral Health
Share:

– What comments or ideas from the video were most meaningful to you?
– State one take-away from the video that might help you in the work you do.
Reflecting on what it means to be healthy:

• How would you describe someone who is healthy?

• What words come to mind when you think of oral health?
Oral Health is Freedom From:

- chronic mouth and facial pain
- tooth decay and loss
- gum disease
- oral infection, sores, oral cancer
Relationship of Oral and Overall Health

State of complete physical, mental and social well-being
Not merely the absence of disease

State of physical oral well being that results in better overall physical, mental & social well-being

Health

Oral Health
The Mouth – “Gateway to the Body”

“The routine physical exam”

“The Hidden Threat”

“open wide”

Smiles for Life
A national oral health curriculum
Dental care is the most common unmet health need

Tooth decay is the most common chronic childhood disease

5X more common than asthma!

~27% of adults 20–44 years of age have untreated tooth decay

~25% of adults 60 years and older no longer have natural teeth

Photo credits: Joanna Douglass BDS DDS
Oral disease can greatly impact systemic health

Associated with increased systemic bacterial exposure

Much oral disease is preventable or at least controllable

Results in inflammation that can contribute to:
- Uncontrolled diabetes
- Cardiovascular disease
- Respiratory disease

Photo credits: Joanna Douglass BDS DDS
Oral disease extends across the lifespan

Negative impact on child speech, growth and development

Results in missed days at school and work and diminished performance

Missing teeth, pain and infection can limit food choices and worsen nutrition

Poor appearance can contribute to social isolation, lower wages and poor self-esteem

Photo credits: Joanna Douglass BDS DDS
Access to Care

• Many people have a medical home; often lack a dental home
  – Children are 2.5x more likely to lack dental coverage than medical coverage
  – Nearly 70% of older Americans currently have no dental insurance

• Affordable Care Act strengthened the availability of oral health coverage for children
  – Coverage is not required for adults
  – Many children automatically qualify for dental care under their state Medicaid plan
  – Insufficient number of dentists to care for children; fewer who accept public insurance
Barriers to Maintaining Oral Health

- **Financial**
  - Estimated 114 million Americans do not have dental insurance

- **Structural**
  - Lack of perceived need/knowledge about importance of oral health
  - Dental fear, transportation limitations, child care and work leave time issues

- **Cultural**
  - May affect diet, oral hygiene habits, and perceptions of the seriousness of tooth decay, especially the importance of baby teeth

- **Myths**
  - Safety of dental care during pregnancy
  - Safety of drinking tap water
  - Tooth loss is normal in the elderly
Medicine and Dentistry-Fragmented Delivery Systems

Seeing the Dentist and the Physician, by Age Group

111 Million

27 Million

ERs: A Costly Dental Destination

- Preventable dental conditions were the primary diagnosis in 830,590 visits to hospital ERs nationwide in 2009.
- Children accounted for nearly 50,000 of these ER visits.
- Many ER visits are made by Medicaid enrollees or the uninsured.
- These statistics are nationwide, not just for Texas.

The Pew Center on States
PEW Center State Report

**WA:** A study found that a trip to the ER was the first “dental visit” for 1 in 4 children.

**CA:** > 83,000 ER visits for preventable dental problems in 2007.

**KS:** Hospitals reported more than 17,500 dental-related ER visits in 2010.

**NY:** The average charge per ER dental visit for young children rose 30% in five years.

**CA:** > 83,000 ER visits for preventable dental problems in 2007.

**IL:** Nearly 77,000 dental visits to metro Chicago’s hospitals from 2008 – 2011.

**ME:** Dental disease was the leading reason for ER visits by Medicaid enrollees and uninsured young people.

**IA:** 10,000+ dental-related ER visits cost taxpayers almost $5 million in 2007.

**FL:** There were 115,000+ ER visits in 2010 for dental problems.
Oral Health Data Resources in Texas

- Texas Department of State Health Services (DSHS) Texas Health Care Information Collection (THCIC) - http://www.dshs.texas.gov/thcic/default.shtm
- Texas DSHS Oral Health Program (OHP) - https://www.dshs.texas.gov/dental/
Health Disparities vs. Health Equity

http://interactioninstitute.org/illustrating-equality-vs-equity
Underserved populations experience disproportionate barriers to oral health access and care

- Non-Hispanic Blacks, Hispanics, American Indians and Alaska Natives have the poorest oral health
- Mexican American and Black, non-Hispanic children aged 2–4 years and aged 6–8 years have the greatest disparities
- Non-Hispanic Blacks, and Mexican Americans aged 35–44 years experience untreated tooth decay nearly 2x more than white, non-Hispanics

CDC, Division of Oral Health
http://www.cdc.gov/oralhealth/oral_health_disparities/index.htm
Oral Health Inequities

• Children and adolescents
• Homeless populations
• Low-income populations
• Uninsured
• Older adults
• People with special health care needs
• Pregnant women and mothers
• Racial/ethnic minority groups
• Rural and urban populations
The Opportunity for Change

Collective Impact

A National Call to Action to Promote Oral Health

U.S. Department of Health and Human Services
Bridging the Gap

Frontline Health Workers and Oral Health

Dentists
Dental Hygienists
Public Health
Nurses
Physician Assistants

Front Line Health Workers
Why Front Line Health Workers?

- Rapidly expanding health workforce
- Strong connections to community and trusted agents for community change
- Champions for health equity and social justice
- Focus on prevention, social determinants of health, and community specific needs
CHW Linkages in the Medical Neighborhood

Peer Support in the Patient Centered Medical Home and Primary Care:
Conference Report 2015
Patient Centered Primary Care Collaborative
**Medical Team**

| Help the primary care team understand what the patient is experiencing outside the clinic that affects health of individual and community |
| Identify the need for and facilitate linkages with social services and other community services to address social determinants of health |
| Provide specific services such as helping families complete advanced care plans, end-of-life, insurance enrollment, etc. |
Front Line Health Workers

Reach vulnerable and underserved populations

Deliver culturally-sensitive counseling

Educate/empower patients to improve health

Coordinate care to reduce costs

Patient Navigation

Coordinate dental care

- Arrange transportation
- Register for Medicaid and other safety net resources
- Provide support for other personal access barriers: language fear/anxiety, etc

Clients
Activate Communities

Work in partnership with communities to:

- Assess & identify needs
- Set goals and benchmark marks
- Identify community leaders
- Support leadership development and action

Image: John Hain. Public domain, Pixabay
Working Together

• A chance for dialogue, learning, leadership and change in promoting oral health

• An opportunity to create the vision
Collective Wisdom

• 3 Rotations/Rounds of Questioning
  – Talk with someone with each of 3 different colors of paper, skipping your own color (20 minutes)
    • Each person asks their partner the question on their paper; takes notes on their response (6 minutes each round, 3 minutes each question)

• Groups convene to summarize responses (10 minutes)

• Larger group convenes for report back and discussion (15 minutes)
Front Line Health Workers

Take Home Messages

1. Oral health is a health crisis
2. Oral health outcomes and disparities are part of a larger social and systemic issue
3. Oral health is the gateway to the body
4. Dentists and the larger medical system are only part of the solution...FLHWs are needed
5. Oral health is about you...we need FLHWs and other community leaders to bridge the gap
What can I do to make a difference?

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.

-- Margaret Meade
Discussion

Questions?
Comments?