



ORAL HEALTH

PREVENTING CAVITIES, GUM DISEASE, TOOTH LOSS, AND ORAL CANCERS

2011

Success Stories

Expanding Access to Dental Sealants in Maine

Dental sealants are thin plastic coatings applied to the chewing surfaces of the back teeth, where most tooth decay in children occurs. They protect the chewing surfaces from decay by keeping bacteria and pieces of food out. A systematic review found that sealants provided in school-based programs can prevent up to 60% of tooth decay for 5 years. In Maine, 61% of third-grade students who were screened in a 2009 school survey had received dental sealants.

Providing high-quality, timely dental services can be challenging in Maine, particularly in rural areas where the distance between schools can be as much as 100 miles. In 2001, Washington County, the easternmost county on Maine's rocky coast, used a grant from the Maine Oral Health Program to expand its Washington County Children's Program (WCCP) to offer sealants to second-grade students at 17 schools. The program started with portable equipment that could be transported from school to school but was time-consuming to set up and break down. By 2003, the program was serving more than 800 students, and the concept of a mobile clinic was conceived. Funding from the Maine Health Access Foundation allowed the WCCP to buy and equip a truck—named the Tooth Ferry—to travel throughout the county.

Staffed by two dental hygienists, the Tooth Ferry brings Maine's dental sealant program to students at 28 schools in grades 2, 3, 7, and 8. During the 2008–2009 school year, the program served 2,219 students at 16 locations. Program staff also share information about other resources with school nurses and provide oral health education and preventive services to the county's Head Start center. Staff members identify children who need restorative dental care and make referrals to service providers in the community. In addition, staff members travel to Maine's blueberry fields during the summer to provide oral health services to migrant workers and their families.

The Maine Oral Health Program's ability to provide assistance to programs such as the WCCP was enhanced by CDC funding, which helps to support a state sealant coordinator.

Defending Water Fluoridation in New York

Community water fluoridation was named by CDC as one of 10 great public health achievements of the 20th century. It is an ideal preventive measure that has been shown to reduce tooth decay by about 25% in children and adults across the lifespan. Water fluoridation now reaches 72.4% of people served by community water systems. In New York State, 72.2% of people on community water systems receive optimally fluoridated drinking water.

The New York State Department of Health's Bureau of Dental Health, which receives CDC funding for preventive oral health programs, has been proactive in supporting community water fluoridation. This support includes training water plant operators and teaching community members how to address questions and challenges related to community water fluoridation.

The city of Plattsburgh has been fluoridating its drinking water since 1955. In 2008, CDC and the Clinton County Health Department (CCHD) gave the city an award for maintaining optimal fluoride levels. The positive media coverage attracted the attention of anti-fluoridation groups, which began lobbying the Plattsburgh City Council to discontinue fluoridation.

In January 2009, officials in the CCHD learned about these activities and recognized the need to educate the public about the benefits of fluoridated drinking water. They contacted the Bureau of Dental Health for relevant scientific studies on water fluoridation. The vice-president of the CCHD Board of Health was chosen to respond to opposition groups. Members of the New York State Oral Health Coalition also sent letters of support to the mayor, city council, and Board of Health.



In September 2009, the state water fluoridation specialist and a representative from the New York Rural Water Association (NYRWA) made a presentation on fluoridation to the CCHD Board of Health. The next day, NYRWA officials conducted an on-site visit to the Plattsburgh water system to answer technical questions from water plant personnel and make sure the fluoridation process was being properly implemented. CCHD staff members participated in the site visit, and in October 2009, they attended a state symposium on fluoridation.

CCHD staff members also developed a social marketing plan to educate county residents about the benefits of fluoridation. As part of this plan, a brochure promoting fluoridation was developed and distributed to community members by the county's Public Health Nursing Program, the Joint Council on Economic Opportunity, and the Special Supplemental Nutrition Program for Women, Infants, and Children. A presentation to educate community members also was developed.

During 2009, the county's directors of public health and environmental health, as well as local dentists, attended Plattsburgh City Council meetings to promote the benefits of water fluoridation. Opponents of fluoridation also provided information to city council members and the public. In November 2009, the Plattsburgh City Council voted 5 to 2 to continue fluoridating the city's drinking water.

Because of CDC support to the state Bureau of Dental Health, the state was well-positioned to help Plattsburgh address this challenge to community fluoridation and maintain the oral health benefits of fluoridation for its residents.

Promoting State Policies to Improve Access to Care in North Dakota

In North Dakota, statewide surveys have ranked dental care among the top three unmet health care needs for low-income residents. Access to oral health services is an ongoing concern for low-income, underserved, and uninsured populations in the state, as well as for members of some racial and ethnic groups. Public policies designed to increase access to oral health services can improve oral health for populations that experience health disparities in this area.

With CDC support, the Oral Health Program of the North Dakota Department of Health formed the North Dakota Oral Health Coalition, which brings together public, private, and grassroots organizations to improve the oral health of state residents. In November 2007, to identify future policy priorities, the coalition sponsored the North Dakota Children's Oral Health Conference. In 2008, the coalition set a policy agenda to support key legislation designed to increase access to dental care for underserved populations in North Dakota.

During the 2009 legislative session, the coalition's policy committee identified potential oral health champions, as well as sponsors and cosponsors in legislative committees where bills would be heard. The coalition also created an advocacy alert network and developed key messages that advocates could use when educating state policy makers on oral health issues.

Thanks to these efforts, five laws designed to improve access to dental care in North Dakota were enacted. Legislators increased Medicaid reimbursements for dental services, appropriated funds for mobile dental care services for low-income, underserved children, and set up a donated dental services program. They also set up a loan repayment program for dentists who practice in public health or nonprofit dental clinics and made it legal for dental hygienists to perform certain procedures in public health settings (e.g., schools) under general supervision.

These intensive advocacy efforts by a broad network of grassroots organizations and partners to educate state policy makers on policies that promote oral health are expected to make a major contribution to improving the oral health of disadvantaged residents of North Dakota.

Because these changes in state policy are new, it is too early to fully assess their effect. However, the increase in state reimbursements for dental services has already led to a 10% increase in the number of dentists in North Dakota who accept Medicaid. In addition, the law that allows dental hygienists to place dental sealants under general supervision will allow the Oral Health Program to implement a new school-based dental sealant program in 40 schools during the 2011–2012 school year.