

Re-Defining the Specialty of Dental Public Health

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Change or die!

Alan Deutschman

Hitch your wagon to a star.

Ralph Waldo Emerson

Rozier RG. AAPHD Turns 60—Back to the Future: Whatever Became of Dental Public Health. *J Public Health Dent* 1997;57:3-4.

- Dental public health is not well prepared to assume its role in this new, complex world.
- Many programs are seriously under-developed and under-supported.
- Nearly one-half of state health agencies are affected by dwindling oral health expenditures or a total lack of such expenditures.

Rozier RG. AAPHD Turns 60—Back to the Future: Whatever Became of Dental Public Health. *J Public Health Dent* 1997;57:3-4.

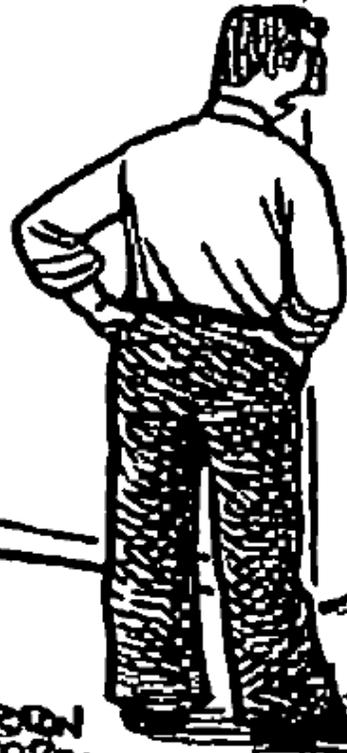
- Oral health expenditures represent less than 1 percent of all public health expenditures, averaging out to only about 38 cents per person each year.
- The dental public health infrastructure needed to protect the public's oral health through assurances that essential public health functions are being performed, whether by public or private agencies, is not universally in place.

What is the Problem?

- The DPH model
- The scope of dental public health practice
 - Is it all about:
 - Fluoride, seal, brush, and fill
 - Education
 - Financing of dental care
- Demand for DPH expertise
 - It is a commodity; undifferentiated service; everyone can do it

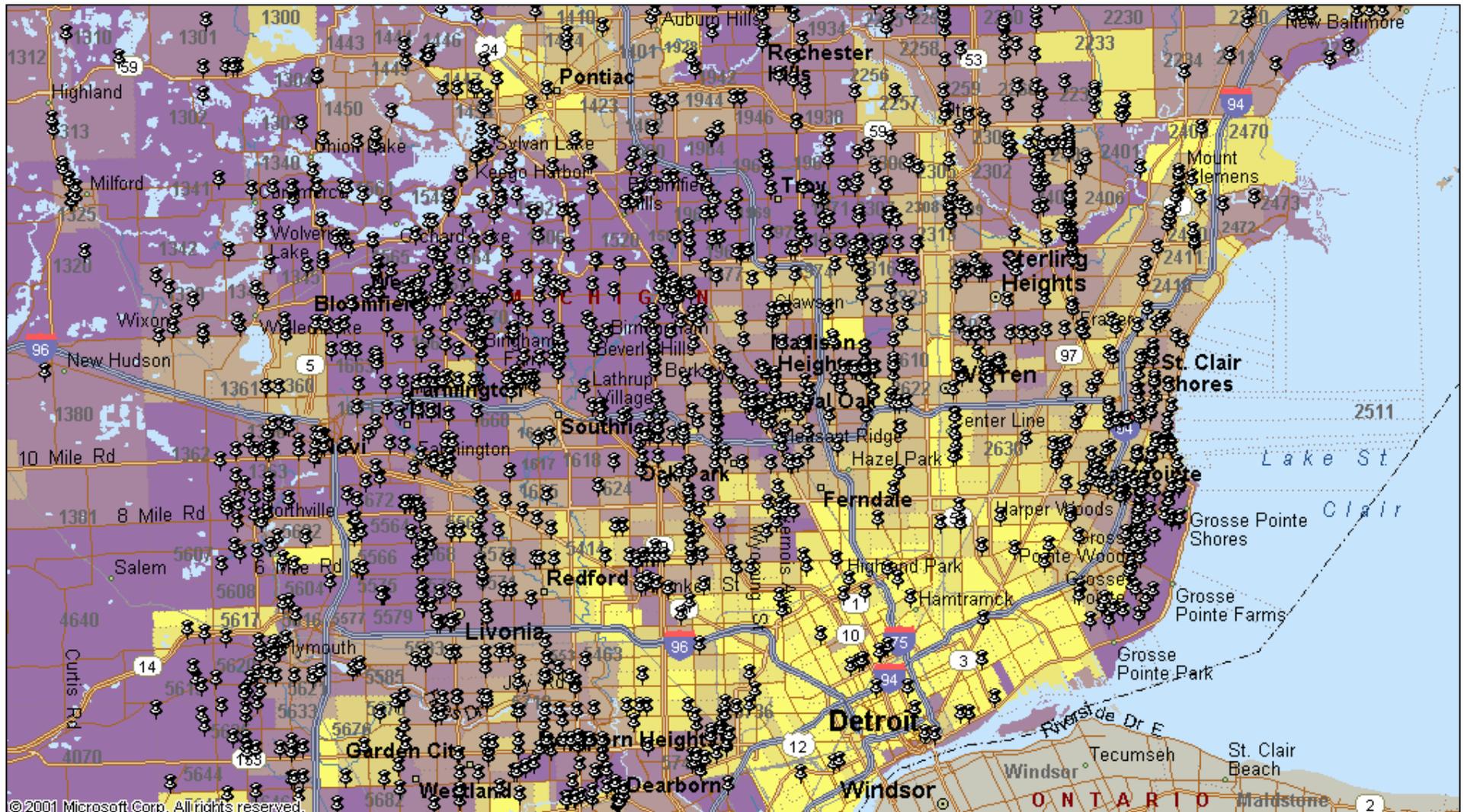
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The first step toward "thinking outside the box," people, is *getting out of the box!*



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Detroit and Suburbs: 2005 Projected Household Income by Census Tract

- \$100,655.00 to \$967,364.00
- \$77,194.00 to \$100,654.00
- \$64,865.00 to \$77,193.00
- \$56,048.00 to \$64,864.00
- \$48,648.00 to \$56,047.00
- \$41,528.00 to \$48,647.00
- \$32,890.00 to \$41,527.00
- \$0.00 to \$32,889.00

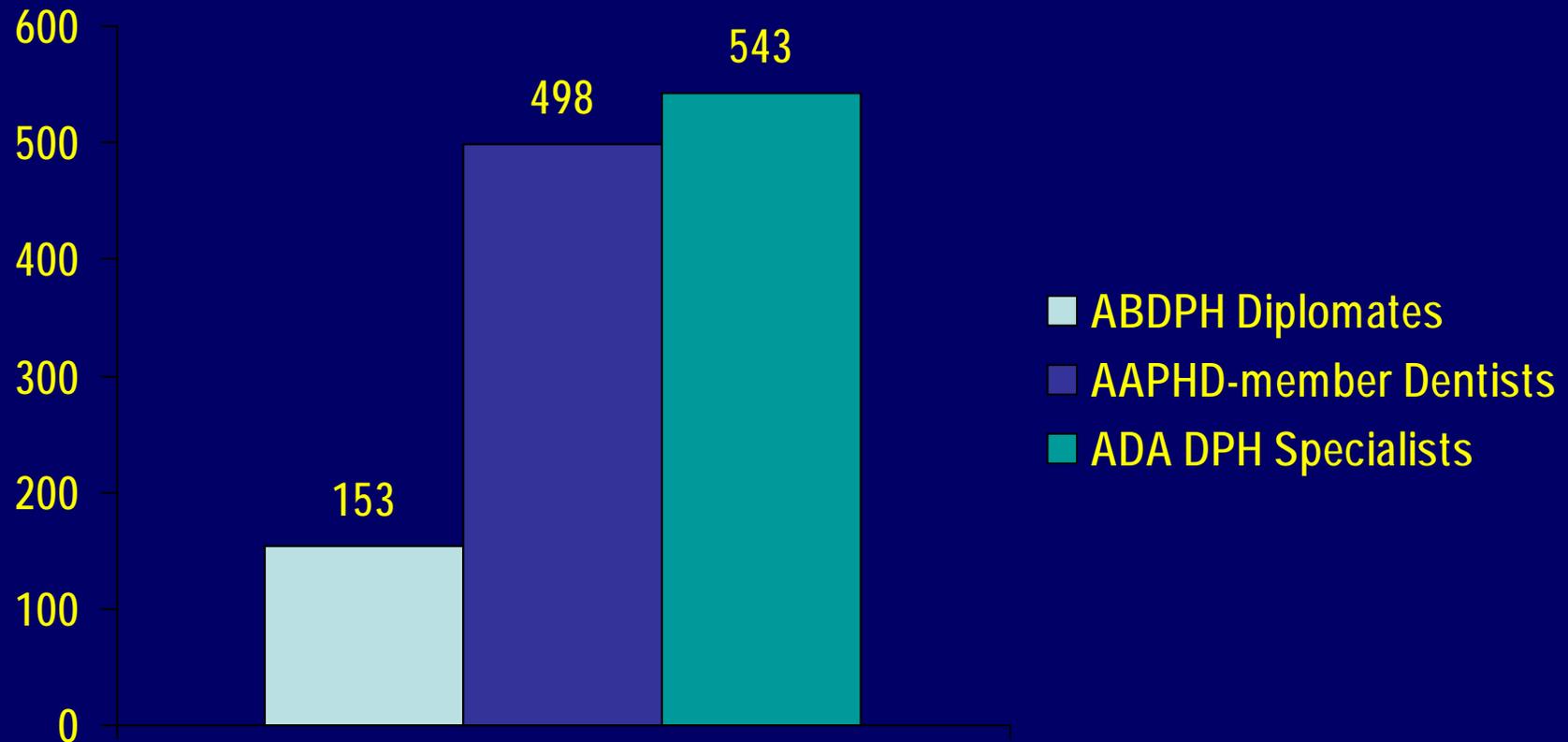
**Push pins are private
practice dentists.**

Root Cause of Health Disparities

- The gross inequality that we see in the world, both within and between countries, is not inevitable, but malleable and can be changed.
- Social factors are at the root of much of these inequalities.
- Health status should be the concern of policy makers in every sector not solely those involved in health care.

Marmot M. Lancet 2005;365:1099-1104.

“Public Health Dentists”?



Sources: ABDPH diplomate roster 3/30/05; AAPHD Online Directory 3/29/05; ADA Online Directory 3/30/05

What is Dental Public Health?

- Dental public health is the science and art of preventing and controlling dental diseases and promoting dental health through organized **community efforts**. It is that form of dental practice which serves **the community** as a patient rather than the individual. It is concerned with the dental health education of **the public**, with applied dental research, and with the administration of **group** dental care programs as well as the **prevention and control** of dental diseases on a community basis. (*Adopted May 1976*)

Dental Public Health Re-defined

- Dental public is a scientifically-based specialty of dentistry and public health that integrates knowledge and experiences from dental, behavioral, public health, educational and political sciences, with experiences from business, management, marketing, and advocacy, to promote health and oral health and provide primary, secondary, and tertiary dental care for individuals and populations.

Dental Public Health Re-defined

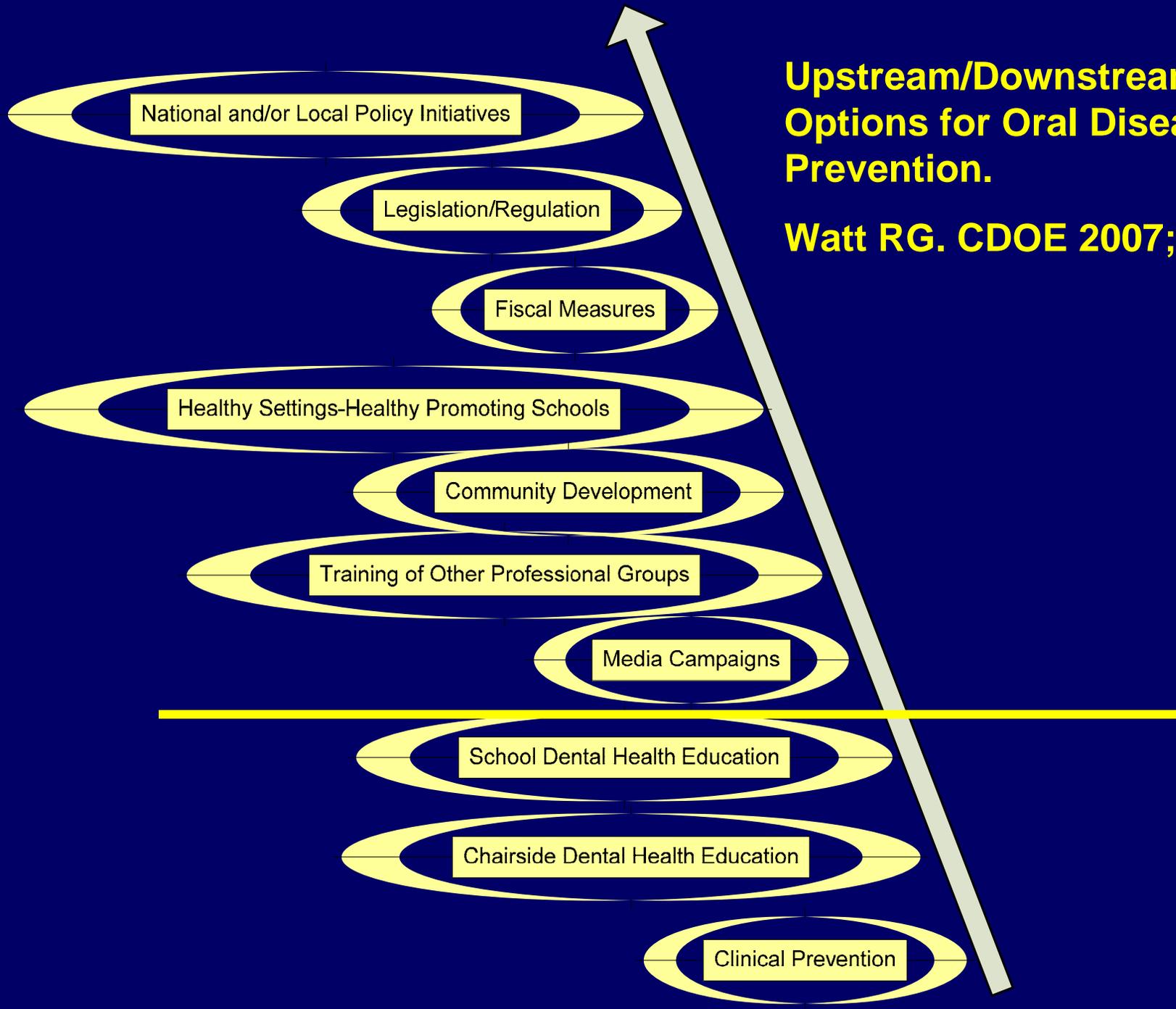
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Upstream/Downstream: Options for Oral Disease Prevention.

Watt RG. CDOE 2007;35:1-11.



The Implications

- From
 - Fluoride
 - Sealants
 - Education
- To
 - Addressing the causes of inequalities and inequities in health and oral health
 - Comprehensive dental/oral care models
 - Advanced oral health promotion
 - Social and policy changes
 - ...

The Implications

- From
 - Brush, seal, varnish, and fill
- To **DPH is not a commodity**
 - Integrate oral health promotion and dental care model
 - Apply current theories in health planning, health promotion, positive behavioral change models, and implementation

Change or Die!

- Drill-and-fill will not resolve the access problem facing some segments of the US population.

Change or Die!

- Drill and fill is not the solution
- We are not going to **eliminate** oral health disparities by focusing **ONLY** on applying fluorides and sealants.

Change or Die!

- We are not going to play **AN EFFECTIVE** and **LEADING ROLE** in the debate on health policy in this country without adopting a positive **collaborative approach** founded on deep and current knowledge of public health practice.

Hitch your wagon to a star.

R. W. Emerson

The Three Revolutions in Public Health

- First era
 - Communicable disease era
 - From ancient times and continues today
- Second era
 - Chronic disease era
 - Began during the 20th century,
particularly in industrialized nations

The Three Revolutions in Public Health

- Chronic diseases are not the main concern for many who have not experienced them (dental caries?)
- Third era
 - Aims to achieve long and fruitful life, not simply the absence of disease.

Focus on wellness and Quality of Life

Health Promotion

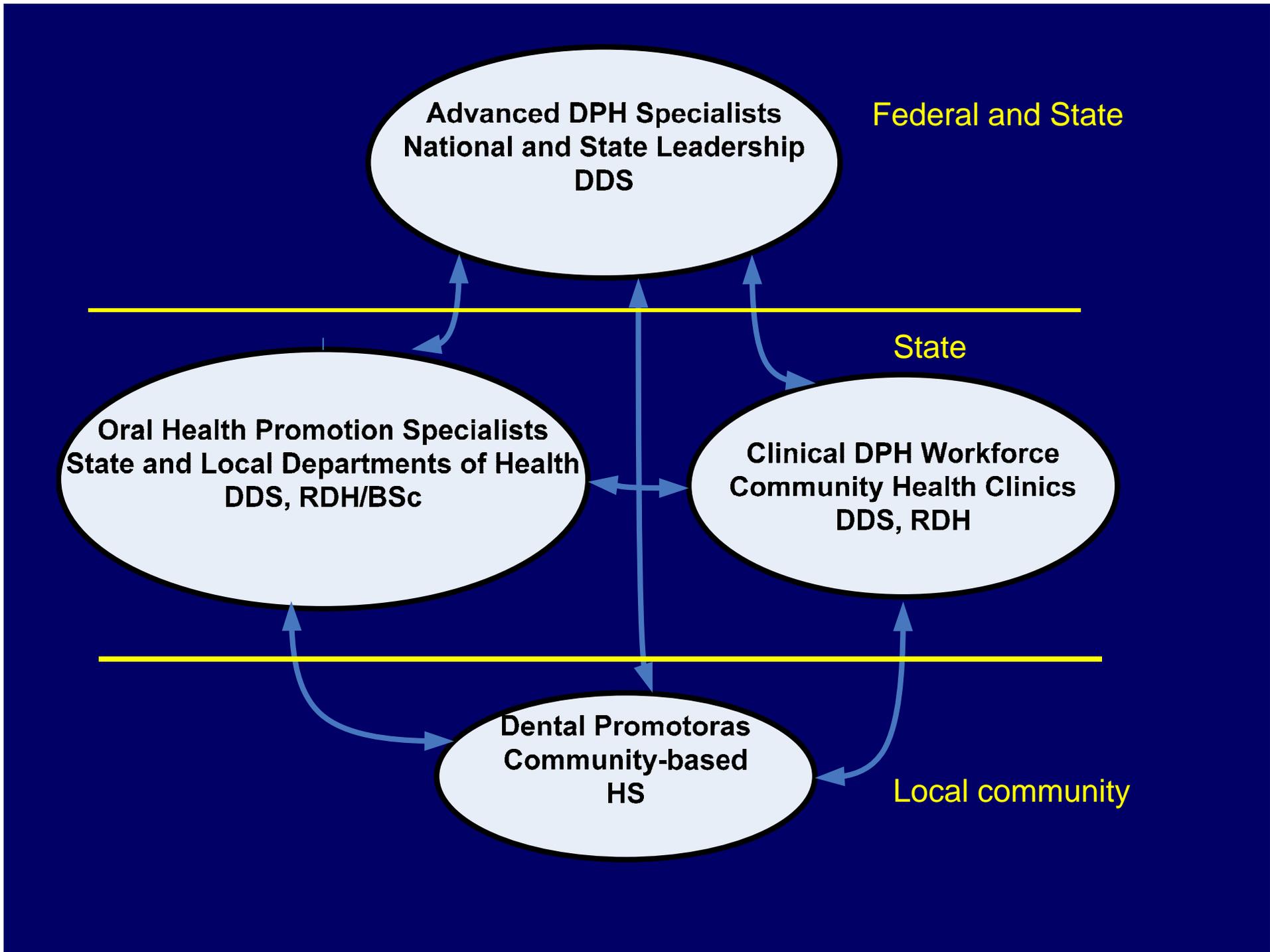
- **Health promotion is the science and art of helping people change their lifestyle to move toward a state of optimal health.**
 - Social
 - Economic
 - Behavioral change
 - Housing
 - Security
 - Standards and regulations
 - Community development
 - Education
 - Transportation
 - ...
 - ...

Oral health promotion and disease prevention could soon be the next frontier in the struggle to improve the overall health of our nation.

Mitchell DA, Lasiter SL. *AJPH* 2006;96:2093-7.

Future Workforce

- Oral health Promotion Workforce (DDS, RDH, RN, Social Workers, others)
 - Community health workers (Promotoras)
 - Community-based oral health promotion specialists
 - Community-based DPH clinical dentists and hygienists (NNOHA)
 - Advanced dental public health specialists
 - Epidemiology
 - Health management and policy
 - Strategic planning and social marketing
 - Program development and implementation
 - Policy and advocacy
 - Evaluation
 - Economics
 - Health promotion
 - (with a certificate in dental public health sciences)



Re-defining DPH

- Increase numbers of potential members and students; expand the base.
- Serve different needs with different levels of expertise.
- Provide career paths for current and future members of the DPH community.
- Develop an integrated dental care model from communities to clinics.

Re-defining DPH

- New challenges for CODA and AAPHD
- ... but
- ... I have a concern
- ... let's think of all the negatives
- ... the ADA will not support it
- ... the ADHA will not support it
- ...

Nothing will ever be attempted, if all possible objections must first be overcome.

Samuel Johnson

ADA and AAPHD

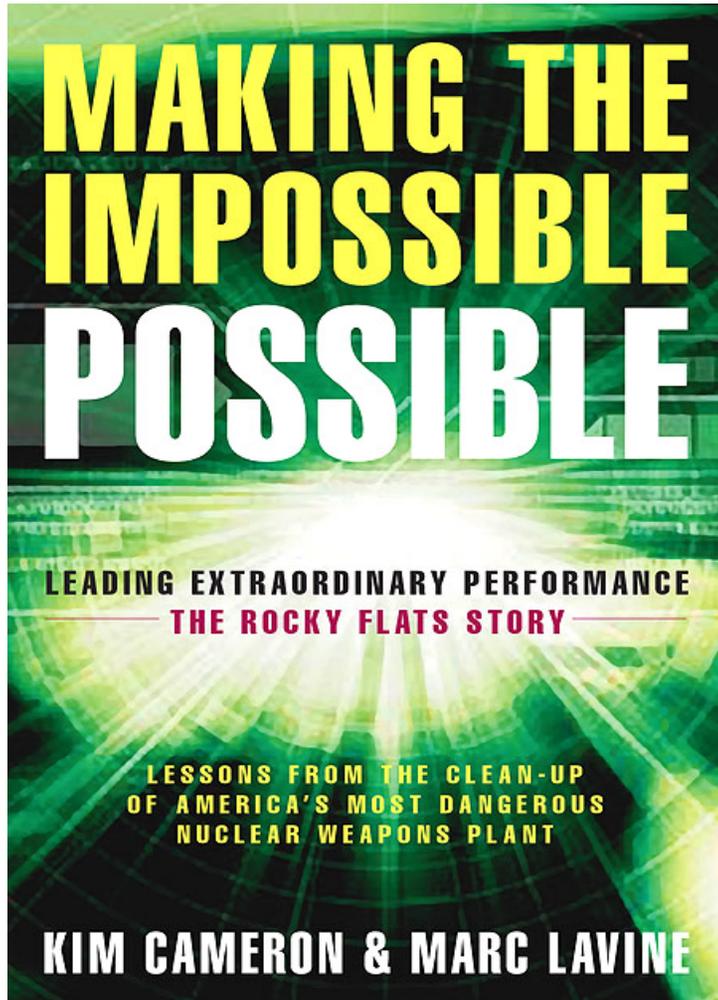
- Dental public health dentistry stands as the dental conscience of the nation.
 - Abraham Kobren, ADA Past President

Reported by Gary Rozier in J Public Health Dent 1997;57:3-4.

ADA and AAPHD

- Promotion of oral health is a key mission of the ADA.
- Dental public health specialists and other dental public health professionals have and will continue to receive the support of the ADA in their mission to promote oral health and improve access to dental care.
- Public health dentistry stands as an important partner in the current national quest to improve oral health and access to dental care.

Dr. Kathleen Roth, ADA President



- Rocky Flats (Colorado)
 - Cleanup was estimated to cost \$36 billion and takes 70 years.
 - “Bankrupt” organizational culture
 - Actual cost was \$6 billion and the clean-up took 10 years.
 - The impossible was made possible by adopting the abundance approach for change rather than a deficit approach.



Rocky Flats, a former nuclear plant located just 16 miles northwest of Denver, Colorado, is now a refuge in the US Fish and Wildlife Refuge System..

Challenges are Opportunities



The policy of being too cautious is the greatest risk of all.

Jawaharlal Nehru