

Arkansas

Improving Oral Health Through Smiles: AR US

Public Health Problem

Although prevention and treatment for oral disease has improved, thousands of Arkansans continue to experience dental pain and dysfunction. Arkansas mirrors the nation in that oral disease remains pervasive among some population groups. Dental caries (tooth decay) continue to be a major problem for many Arkansan children, with 61% of third grade schoolchildren having experienced tooth decay and 31% having untreated decay. In addition, 34% of Arkansans older than age 65 have lost all their teeth, compared to 23% nationally.

Program Example

The Arkansas Office of Oral Health has worked with a statewide oral health coalition, supported by funding from CDC, to begin to address oral health problems in Arkansas. Smiles: AR, US.TM is a statewide partnership 40 member organizations whose mission is to improve oral health for Arkansas residents. Since it was formed in 2000, this coalition has continued to grow and has played a key role in five annual Arkansas Oral Health Summits and in developing the state oral health plan. The coalition has served the critical role of assessing needs and informing partners how they can best help implement projects likely to lead to successful health outcomes. For example, guided by this information, Delta Dental of Arkansas, the state's largest administrator of group dental benefits, has made significant financial commitments since 2002 of more than \$1 million towards projects to improve oral health education, prevention, and treatment for the state's neediest citizens. Examples of these projects include the Land of Smiles, an oral health educational DVD distributed to every elementary school in the state; Language Line Services, a free language translation service for all Arkansas dental offices; Future Smiles, a program of school-based oral screenings, dental sealants, dental health education, and partnerships with dental professionals; grants to community dental care organizations that provide care for low-income persons; and University of Arkansas College of Dentistry Scholarships (\$115,000) to ensure ongoing, quality dental care is available in the state. Delta Delta has also supported the Arkansas Mission of Mercy, which, over the past 2 years, has provided more than \$700,000 in free dental care to more than 3,000 needy people.

Implications

An effective state coalition can facilitate successful, well-funded statewide oral health prevention and treatment programs. The funds and technical support and training provided by CDC made coalition infrastructure development possible and encouraged collaboration from a diverse group of partners, including organizations that promote access to care, interfaith alliances, and dental insurers. With key partners and a solid coalition in place, the Arkansas Office of Oral Health is prepared to lead oral health infrastructure development efforts in Arkansas and serve as a model for other states.

Excerpted from *Coalitions and Partnerships in Community Health* by Frances Dunn Butterfoss (2007) Jossey-Bass, San Francisco, CA www.josseybass.com. Pages 314-316.

Colorado

Be Smart and Seal Them!

Public Health Problem

Tooth decay is the most common chronic disease of childhood, more common than asthma and hay fever. Schoolchildren in Colorado lose an estimated 7.8 million hours of class time due to oral pain and acute dental infection. Children of some racial and ethnic groups have about three times more untreated decay and missing teeth due to tooth decay, but are about one-third less likely to receive sealants. According to the 2004 Colorado Basic Screening Survey, more than half of the state's third graders had experienced tooth decay, while only 35% of students had at least one sealant on a permanent tooth. For Hispanic students, only 26% had sealants.

Evidence That Prevention Works

Dental sealants are a plastic coatings placed on the chewing surfaces of teeth, where up to 90% of the decay occurs in schoolchildren. Sealants prevent tooth decay by providing a physical barrier between the teeth and decay-causing bacteria. In its review of studies on school-based dental sealant programs, the U.S. Task Force on Community Preventive Services found that the median decrease in decay on the chewing surfaces of molars in children was 60%.

Program Example

The *Be Smart & Seal Them! Program*, supported by the Colorado Department of Public Health & Environment's Oral Health Unit (OHU), is working towards the goal of sealing all Colorado children at greatest risk of dental disease. The program specifically targets low-income second grade children in Colorado. With CDC funds, the OHU is expanding the program to include all urban schools where at least half of the student population qualifies for free and reduced lunch or rural school districts with a median income at or below 235% of the federal poverty level. Partners in this effort include Denver Health, Eastern Plains, Southwest Smilemakers, and Eagle County Smiles. During the 2007–08 school year, hundreds of elementary school-age children throughout Colorado have received dental sealants through school-based dental sealant programs, oral health screenings, fluoride varnish treatments, treatment plans and follow-up, and oral health education.

Implications

These partnerships have resulted in increased local capacity for prevention and increased sealant coverage, making it more likely that Colorado will achieve its goal of reaching those students most in need of sealants. For many of these children, this is the first time they had seen a dental provider.

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