Educate Management and Employees

Another important responsibility is a dental health education program directed not only to employees, but also to management personnel. In fact, it is very important that management accept such a program before it is presented to the employees.

The education program may include the use of films, oral health classes, individual conferences, posters, pamphlets, and anatomical charts. Individual conferences are generally considered the best method.

Enlist Aid of Industrial Nurse

One of the best means of furthering dental education programs is to enlist the services of the industrial nurse. The nurse has proper background for presenting to both the employee and management the problems confronting them in a health service and also the results that will be attained by solving these problems.

The nurse employed in a plant having an in-plant dental program may also be of service in assisting the dentist in periodic oral examinations and in giving treatment and emergency care. The nurse can also assume the responsibility of following up these employees to determine if correction has been obtained.

Furthermore, the industrial nurse has a wealth of opportunities to promote oral health through education since so many of her contacts with employees are under conditions which make them receptive to health information.

Community Dental Health Programs

Participation of various groups in community dental health programs was the theme of three papers presented at the dental health section of the twenty-first annual meeting of the Southern Branch of the American Public Health Association in Baltimore, Md., April 17, 1952. These papers appear here in abbreviated form. They are being published in full in the Bulletin of the American Association of Public Health Dentists.

State Health Departments

State health department personnel can and should play the roles of assister, encourager, promoter, stimulator, and even needler in local dental health programs. They should never, however, attempt to be dictators. The following principles may be helpful as guides in promoting community programs.

1. Programs should be planned with people, not for people.
2. Inviting people to help plan a program will elicit greater response in terms of time and money than trying to "sell" them one already planned.

3. People are convinced by what they find out for themselves, not by what they are told.

4. Health programs need people who are not already overworked in other programs.

5. Every health service can be a springboard for health education.

Specific activities in which State health departments can be of assistance are described below.

Dental Health Education

Dental health education activities should be directed to four community groups: nonprofessional groups, school groups, public health workers, and dentists.

State health department personnel may be assigned to school groups to give talks, show motion pictures, consult with parents, and give clinical demonstrations. They may contact citizen groups by participating in local dental health conferences, discussing such subjects as water fluoridation, the role of carbohydrates in dental decay, and the need for more adequate dental service.

Postgraduate seminar programs conducted by the State health department can be an effective means of informing both dentists and public health workers of the latest developments in dental practice and procedures.

Preventive Dental Services

The development of topical fluoride programs and the promotion of controlled water fluoridation and carbohydrate control are the main activities in this field. One example of State health department aid is the topical fluoride treatment program recently carried out in one large school. The local PTA paid for the services of the dental hygienists, and the State health department furnished supervision and equipment.

The promotion of controlled fluoridation should be primarily a local activity, but a State health department can serve as a source of information and can provide leadership. An example is the recent dental health workshop conducted by the State dental association, in which the State dental director, the assistant director of the division of sanitary engineering, and the commissioner of health presented factual information. The proceedings of this meeting have been published and can serve as a source of information for local groups.

Remedial Dental Activities

The State health department can assist in planning, organizing, and operating dental clinics. They can furnish equipment and supply lists, aid in obtaining personnel, and provide consultant services upon request. They may also loan portable equipment for use by local dentists in operating remedial programs in schools.

Evaluation

Statistical summaries of dental findings may be very useful in demonstrating the need for a well-organized dental program. State department personnel can be of service in making such summaries by providing forms to be used as an evaluation tool.

The Dental Hygienist

The history of dental hygienists dates back to the early 1880's, when Rhein suggested that dentists undertake to train women as "dental nurses to cooperate with dentists in cleaning and polishing the teeth, massaging the gums, and applying remedial agents. . . ." In 1887, C. M. Wright of Cincinnati, Ohio, pointed out that the work of the dental hygienist is an important factor in preventive medicine. It was not until 1916, however, that legislation was passed allowing dentists to employ dental hygienists. The way was thus paved for the introduction of the dental hygienist as a licensed practitioner of prophylactic dentistry.

School Programs

One of the dental hygienist's most important roles is her part in the school health education program. Here she should be on a par with the public school teacher, teaching the children proper diet and how to have clean teeth. The hygienist, appearing in uniform, may arouse the children's interest in dental health by means of stories, rhymes, songs, plays, dramatizations, and tooth-brush drills.

If time does not permit the school dental hygienist to carry out such educational activities as English, art, music, spelling, mathematics, and provide them with information. Dental health can be correlated with many other subjects: English, art, music, spelling, mathematics, and, in high school, chemistry and home economics.

Follow-up work is another important duty of a school dental hygienist. It is often not enough to send notices home to parents notifying them of dental corrections their child needs; it may also be necessary to make visits to the home. In addition, notices to parents complimenting them on the condition of their child's mouth when corrections have been made, or even if no corrections are needed, may be advisable.

The school dental hygienist should also include in her program the topical application of sodium fluoride. Not every pupil can be given these treatments in a school year, but one or perhaps two grades can be selected for the treatments. Since these treatments are recommended at the ages of seven and ten, the grades selected will probably be two and five. Some hygienists find that they can treat only one student at a time, but others find the "multiple chair" technique can be applied effectively. That is, while the fluoride solution is drying for the necessary 3 minutes on one patient, treatment can be begun on a second and then on a third patient.

Community Activities

The dental hygienist should let it be known in the community that she is available to address groups such as the P.T.A. and service clubs on dental health. Seeking their aid and cooperation in promoting local dental health programs is most important.

The dental hygienist should also maintain close contact with the dental profession. The cooperation of the dentists in the community is very necessary to the success of a dental health program.

Dental Hygienists in Pennsylvania

At present there are 143 dental hygienists employed in the public schools of Pennsylvania, in 132 districts. The dental health programs in these 132 districts include activities in education, prevention, and correction. However, there are many additional districts that have a corrective clinic and a sodium fluoride program but do not employ a dental hygienist.

On the staff of the Pennsylvania Department of Health are six dental hygienists, who are classified as dental health educators. The duties of four include contacting the public school dental hygienists at least once every year to advise and aid them. Of the other two, one is responsible for the department's sodium fluoride program, and the other handles the preschool dental program.

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**The Dental Profession**

The "Principles of Ethics" of the American Dental Association contains the following provision, which indicates the role the dental profession should play in State and local dental health programs:

"The dentist has the obligation of providing freely of his skills, knowledge and experience to society in those fields in which his qualifica-

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tions entitle him to speak with professional competence. The dentist should be a leader in his community, especially in all efforts leading to the improvement of the dental health of the public.”

Leadership by the dental profession is almost always an essential element in a successful community dental health program—leadership in studying and analyzing dental health problems and the resources needed to solve them; leadership in the establishment of facilities for the continuing education of dentists in matters concerned with the dental health of the public in general and dental health of children in particular; leadership in procuring the cooperation and active support of other professional and civic organizations; and leadership in the adoption of community plans which are best suited to the needs of the community.

As an illustration of what the dental profession is doing to supplement the work of State and local health departments, some of the activities of the State dental societies in California and Tennessee are outlined.

California

The California State Dental Association’s dental health education committee, composed of about 140 members from all sections of the State, produces and distributes a large volume of educational material. During Children’s Dental Health Week last year, for example, 263,000 dental health leaflets were distributed through the various component societies. Members of the committee are also instrumental in obtaining the assistance of local civic organizations in community dental health projects.

In promoting fluoridation of public water supplies, the California State Dental Association has found that one effective method of obtaining local approval is the organization of a citizen’s committee. Such a committee, working with the dental society, can procure the support of interested community organizations.

Another activity which had unusual success was the bitewing X-ray demonstration at the 1951 California State Fair. Bitewing X-ray inspections were given to 2,983 children, and the demonstration and accompanying exhibit were viewed by an estimated half million people. For the X-ray examination, a double film pack was used. One copy of the film was sent to the parents, who were urged to take it to a dentist for interpretation, and the second copy was used for statistical analysis.

The Southern California State Dental Association, also, has an extensive dental health education plan. One of its main purposes is to encourage dental practitioners to participate in educational activities in their own communities. The association has produced a series of transcriptions for use in radio and in schools and a film which is used not only in California but in most of the other States as well. About 150,000 pamphlets are distributed annually, and plans are under way to send 300,000 pamphlets to the members of the society for use in dental reception rooms and for other dental health education purposes.

Tennessee

Since 1949, the Tennessee State Dental Association has held annual dental health workshops, attended by nonprofessional as well as professional persons. Accomplishments of these workshops include (1) establishing of dental clinics in five communities, (2) reopening of the school for dental hygienists at the University of Tennessee College of Dentistry, (3) establishing of dental services in general hospitals, (4) opening of dental clinics in health centers, (5) purchase of mobile dental units by three counties, and (6) plans for a number of fluoridation projects.

The Tennessee association works closely with the State department of education for the development of more effective dental health instruction in schools and with the State department of health in many of its activities.