Creating an Oral Health Advocacy Toolkit

Helping Dental Professionals Become Effective Advocates

Presentation for the USCF DPH Seminar Series
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Outline

I. Events & observations that led to this project

II. The toolkit’s purpose and related activities

III. Developing the toolkit
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   c. The structure

IV. Insights from external reviewers

V. Use by Temple’s honors program

VI. Dissemination plans
Background

Developing Competencies and Curriculum in Dental Public Health Dental and Dental Hygiene Students

Ana Karina Mascarenhas (Project Director)
Kathryn Atchison (Co-investigator)
American Association of Public Health Dentistry
Background

2 of the 4 Objectives

- Develop a set of core dental public health competencies for pre-doctoral dental and dental hygiene education.
- Develop a model curriculum based on the previously determined core competencies for pre-doctoral dental and dental hygiene students.
Background

One of the eight Competencies

Communicate and collaborate with all stakeholders, to **advocate** for oral and general health
Background

Major Curriculum Themes Identified

1. Principles of Dental Public Health
2. Evidence based dentistry
3. Ethics and Dental Public Health
4. Policy and Oral health advocacy
5. Oral health promotion and prevention
6. Oral health literacy
Developing Dental Public Health Competencies and Curriculum for Predoctoral Dental and Dental Hygiene Programs

About this Project
Dental professionals are an "underutilized" workforce, when it comes to advocating for prevention and wellness in populations. This HRSA-funded project developed dental public health competencies and curriculum for use in predoctoral dental and dental hygiene programs in the US. These competencies and accompanying curriculum are to train an oral health workforce better prepared to meet the needs of the US population. By increasing the dental public health knowledge and competency of all graduating dental providers, the number of providers who can respond to the public's unmet needs and challenges, both in private practices and publicly supported clinics, will increase.

Eight Dental Public Health Competencies

1. Demonstrate the ability to incorporate ethical reasoning and actions that promote culturally competent oral health care to individuals and populations.

2. Critique, synthesize and apply information from scientific and lay sources to improve the public's oral health.

3. Describe social and health care systems and determinants of health and their impact on the oral health of the individual and population.

4. Assess risk for oral diseases and select appropriate, evidence-based preventive interventions and strategies to promote health and control oral diseases at the individual and population level.

5. Demonstrate the ability to access and describe the use of population-based health data for health promotion, patient care, and quality improvement.

6. Demonstrate the ability to communicate and collaborate with relevant stakeholders to advocate for policies that impact oral and general health for individuals or populations.

7. Develop a capacity for lifelong learning and professional growth in order to provide leadership that utilizes principles of dental public health.

8. Demonstrate the ability to participate in inter-professional care across the lifespan of people from diverse communities and cultures.

Courses
- Principles in Dental Public Health
- Oral Health Literacy and Dental Public Health
- Ethics and Dental Public Health
- Dental Public Health Policy and Advocacy
- Oral Health Promotion and Disease Prevention
- Evidence Based Dentistry

Other Resources
- Speakers Bureau
- Online CE Courses

https://www.aaphd.org/dph-curriculum
Embracing a broad definition

Advocate

“...to speak up, to plead, or to champion for a cause while applying professional expertise and leadership to support efforts on individual (patient or family), community, and legislative/policy levels, which result in the improved quality of life for individuals, families, or communities.”

Background

• It is unclear, however, whether all graduating predoctoral dental and dental hygiene students in the United States are trained in oral health advocacy and, if so, how sufficient this training is.

• For example, a 2013 study \(^1\) cited the importance of dentists promoting water fluoridation in their communities but observed that “current undergraduate dental curricula do not adequately prepare dentists” for this advocacy role.

Background

• Evidence or impact of advocacy training in dental curriculum?
  • Scarce

• A 2016 study\(^1\) of pediatric dentists:
  • Those willing to advocate for water fluoridation were more likely to have received training in advocacy during dental education (OR=2.67, 95% CI: 1.63-4.39, p<0.0001), compared to those who were not willing

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration

Bureau of Health Workforce
Division of Medicine and Dentistry

Predoctoral Pediatric Training in General Dentistry and Dental Hygiene

Announcement Type: New
Funding Opportunity Number: HRSA-17-068
Catalog of Federal Domestic Assistance (CFDA) No. 93.059

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2017

Application Due Date: January 30, 2017
Program Purpose

The goal of the announcement was to enhance clinical pediatric predoctoral dental and dental hygiene training focusing on children ages 0-5 to improve the oral health of vulnerable, underserved, and rural pediatric populations.

Applications must demonstrate how they will:

Integrate or enhance pediatric dental or dental hygiene training in the core student curriculum;
Increase or enhance clinical experiences for dental students with pediatric populations in community-based sites; and
Incorporate population health and social determinants of health into their training.
programs designed to address risk factors common to childhood obesity and dental caries
Pediatric Patient Care, Population Health, and Community Based Training (PPCT) Project for Dental Students

Predoctoral Pediatric Training in General Dentistry and Dental Hygiene

Funding Opportunity Number: HRSA-17-068
Health Resources and Services Administration
Project Director: Dr. Vinodh Bhoopathi

Funding Granted: $1,559,006 for five years (2017-2022)
HRSA FOA

One of my proposed goals:

• Prepare the next generation of Temple University School of Dentistry graduates who are able to address social determinants of health and population health principles in improving the oral health of vulnerable and underserved groups, including children under five and their families.

• Proposed 10 objectives

  ✔ One objective: Develop an Oral Health Advocacy Toolkit and coursework to provide dental students with additional public health advocacy skills.
Purpose of the toolkit

• In support of this objective, the Temple University’s Maurice H. Kornberg School of Dentistry developed this toolkit primarily for dental, dental hygiene, and dental residency programs that wish to initiate advocacy training or refine their existing courses to instill an awareness of advocacy, identify and explain its many components, and provide tools and templates to support advocacy.

• The associations and societies that represent dentists and dental hygienists are also encouraged to develop training programs that educate and train practicing dental professionals to become effective oral health advocates.
Collaboration

children’s dental health project

TEMPEL UNIVERSITY
Kornberg School of Dentistry
Developing the toolkit:
The philosophy
The 3 types of advocacy

Self-Advocacy: SPEAKING UP FOR YOURSELF

Individual Advocacy: SPEAKING UP ON BEHALF OF SOMEONE ELSE

Systematic Advocacy: SPEAKING FOR THOSE WHO CAN’T SPEAK FOR THEMSELVES
Advocacy is a set of **strategies and actions** that are used to influence a variety of audiences.
What kinds of strategies and actions?

- Writing a letter to the editor of a newspaper urging more coverage of oral health issues that affect your community
- Providing testimony to a state legislative committee about how a bill would impact dental coverage for adults
- Tweeting about the harms of frequent consumption of soda
- Talking to the local Rotary Club about unmet oral health needs
- Submitting online comments about a proposed change in federal dietary guidelines
- Participating in a rally to support funding for a new health clinic
- Speaking to parents at a local health fair about the importance of drinking fluoridated tap water rather than bottled water
Developing the toolkit:
The process
First steps: Guidelines & an online scan

- **Follow AHRQ’s guidelines** for developing and publishing a toolkit (for example):
  - **Identifying the toolkit’s target users**
  - **Using action verbs and gender-neutral words**
  - **Provide examples for how each tool or component should be used**
  - **Testing the toolkit before finalizing its content**
  - **Making it well-organized (table of contents and/or site map)**
  - **Use a consistent font, color template and style to create a cohesive look**
First steps: Guidelines & an online scan

• Follow AHRQ’s guidelines for developing and publishing a toolkit

• **Conduct an online scan** of toolkits that have focused on oral health or other health disciplines (assessing their scope and quality of content)
Our scan identified dozens of toolkits for advocacy
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Our scan identified dozens of toolkits for advocacy.
What our online scan revealed

- Existing toolkits generally excluded or barely cited key components such as:
  - How to identify new partners
  - Media strategies to consider
  - Planning an advocacy campaign

- Existing toolkits rarely included worksheets or templates
Insights from external reviewers
Phase 1 of external review:

**Staff/officers at advocacy organizations**

- Advise them to share the right data and not engage in a “data dump”
- Maintain a policymaker’s trust by not rushing to answer a question before confirming it’s accurate
- Stress that the policy environment can suddenly shift so advocates must observe and adapt to these changes
- Encourage advocacy leaders to make it easy for people to participate in advocacy
Phase 2 of external review:


- Offer templates or other tools that make the toolkit more usable
- Promote a broader definition of what “advocacy” is
- Market the toolkit beyond dental/dental hygiene schools

A sign-up sheet was circulated to collect names of additional individuals who were willing to participate in a 3rd stage of review.
Phase 3 of external review: Academic reviewers

- Clarify that advocacy can occur in simple ways and need not be part of a formal campaign
- Emphasize the importance of identifying nontraditional allies
- Urge dental professionals to pursue their needs as providers in tandem with efforts to expand access to care, strengthen prevention, etc.
- Mention the importance of being familiar with state lobbying disclosure laws
Developing the toolkit: The structure
Structure of the toolkit

- **Introduction: What is advocacy?**
  - Define that advocacy can take various forms
  - Clarify that advocacy can be episodic or part of a larger campaign
Structure of the toolkit

- Introduction: What is advocacy?
- 13 Components of effective advocacy
  1. Creating a culture of advocacy
  2. Understanding the decision-making process
  3. Setting advocacy goals
  4. Knowing your audiences
  5. Choosing allies, building coalitions
  6. Developing effective messages
  7. Finding and presenting data
  8. Identifying modes and messengers
  9. Framing messages
  10. Establishing a media presence
  11. Meeting with decision-makers
  12. Mobilizing supporters
  13. Managing an advocacy campaign
Structure of the toolkit

- Introduction: What is advocacy?
- 13 Components of effective advocacy
- Tools & worksheets
  - Templates, checklists and other tools that can be used to support the 13 components
Structure of the toolkit

• Introduction: What is advocacy?

• 13 Components of effective advocacy

• Tools & worksheets

• Appendices
  ✓ ‘A’ offers additional resources to explore
  ✓ ‘B’ provides scenarios for faculty to assign or explore with their students
Pilot-testing the toolkit:
Temple’s Emerging Community Dental Student Leadership honors program
**Objective:** Foster the interests of selected dental students and develop their skills in: advocacy, community engagement/outreach and leadership – that will enhance their competencies to become effective community leaders.
Honors program

• 2 hour lecture – 14 students
• Take Home Assignments – students into groups, analyze case scenarios and apply the components of advocacy

Scenario 2: Choosing the Best Allies

Develop an advocacy goal. It can be a hypothetical goal or one that you truly feel is important. Your objective is to create a list of the individuals or stakeholders who would make the best allies for achieving your advocacy goal. Here’s how you might approach this:

1. Discuss what types of people or groups might be “natural allies” — in other words, those who would see your goal as advancing their interests or mission.

2. Conduct an online scan (search) to find the kinds of individuals or organizations that were suggested during your discussion. Look for evidence on their websites or through news coverage that their mission, goals or activities would make them view your goal as desirable.

3. Write down the assets that you believe each ally would bring to your advocacy effort. This might include the audiences they could mobilize in support or the connections they have to the decision-makers.

4. Reduce your list to no more than four (4) allies. Be prepared to provide reasons why the final choices “made the cut” but the others did not.
Plans for the toolkit’s dissemination
Dissemination strategies include:

- Promote and share at relevant conferences
- Dissemination through key stakeholders:
  - ADEA
  - ASDA
  - Other dental stakeholders
  - National Oral Health Conference
- Share with dental trade media
- Write a journal article about the toolkit’s development and vetting
- Use social media to promote it
Acknowledgement

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