

# healthyfamilies healthysmiles

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## Improving Aboriginal Oral Health

The Healthy Families, Healthy Smiles team and Dental Health Services Victoria (DHSV) Aboriginal Community Development Worker, Rebecca Crawford, are partnering with services that support Aboriginal communities to help them to promote better oral health for Aboriginal people.

Traditionally, Aboriginal and Torres Strait Islander people had good oral health. However, changes in lifestyle have led to significantly poorer oral health being common in Aboriginal communities. On average, Aboriginal children have twice the level of tooth decay and greater levels of untreated decay compared to non-Aboriginal children.

Good maternal oral health influences the oral health of babies. This makes the Koori Maternity Service (KMS) an important partner for DHSV. So far seven midwives from five KMS sites have completed an online oral health education program. A further two midwives from another two KMS sites are undertaking the training. The midwives will be trained to advise and support pregnant Aboriginal women about oral health at the first antenatal visit.

A pilot education program for Aboriginal Health Services is also under development and a partnership has been established with Mallee District Aboriginal Service (MDAS). The education program aims to build knowledge, skills and confidence to integrate oral health promotion across the service. The project will also consider access to culturally appropriate oral health resources. If successful, the program could be adapted for other Aboriginal health services.

Dr Wendy Bissinger, the representative from the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) on our project reference group, has provided invaluable advice to support the project.

The Early Childhood Educators' working group is also busy developing an oral health promotion resource kit for early childhood educators. The group recently recruited two new members to represent the Aboriginal Early Years sector. Stacey Brown, CEO from Yappera Children's Service, and Ward Garwood, Senior Policy Officer, Aboriginal Early Years Services Branch from Department of Education and Early Childhood Development. We welcome these new members with confidence that there will be a great outcome for Aboriginal communities with their input and support.

We also welcome Rebecca Crawford to her new role as Aboriginal Community Development Worker at DHSV. Rebecca brings a wealth of experience in engaging and partnering with Aboriginal communities and organisations.

Together with our partners, Healthy Families, Healthy Smiles is committed to improving the oral health of Victorian Aboriginal communities.

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Rebecca Crawford, Aboriginal Community Development Worker, DHSV



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# The new Child Dental Benefits Schedule has arrived

The Child Dental Benefits Schedule will make dental care for children more affordable for eligible families.

On the 1 January 2014 the Department of Health launched the Child Dental Benefits Schedule (CDBS). The CDBS provides basic dental services for children aged 2-17 years and replaces the Teen Dental Plan. Children of families who receive either the Family Tax Benefit Part A (FTB-A) or a relevant Australian Government payment are eligible for benefits capped at \$1,000 per child over two consecutive calendar years.

Services that are covered include: examinations, x-rays, cleaning, fissure sealing, fillings, root canals, extractions and partial dentures. Benefits do not cover orthodontic or cosmetic dental work and cannot be paid for any services provided in a hospital operating theatre. Services can be provided through public or private dental clinics.

There are more than 60 public dental clinics located throughout metropolitan Melbourne and rural Victoria. The CDBS is available at all Victorian public dental clinics. Children still have priority access, which means they get the next available appointment and there are no out of pocket expenses for eligible children. Families can visit [www.dhsv.org.au](http://www.dhsv.org.au) or call 9341 1000 to find their local public dental service.

If receiving care from a private dentist it is important families let the provider know they are eligible for CDBS when they make the appointment. This is also a good time to check if the provider bulk bills and to ask about their fees and the CDBS. Families can confirm their child's eligibility and balance amount by accessing their

Medicare online account at [my.gov.au](http://my.gov.au) or by calling the Medicare general enquiries line on 132 011.

For more information about the Child Dental Benefits Schedule go to [www.dhs.gov.au](http://www.dhs.gov.au).



## Victorian Child Oral Health Survey (VCOHS)



Dental Health Services Victoria (DHSV) is leading a first of its kind survey to assess the dental health of Victorian children. This survey will provide valuable information to inform child oral health policy development for Victoria. Information from this survey will be used to provide evidence about regional variations in prevalence of dental disease, describe outcomes from children's dental services and assess Victoria's child dental health programs.

The VCOHS involves conducting dental examinations with up to 6000 randomly selected Victorian children aged three to 14 years and parent questionnaires with their families. The state-wide oral health survey has commenced and will be launched in March 2014.

and will be conducted by the department and DHSV in partnership with the Australian Research Centre for Population Oral Health (ARCPHO), University of Adelaide.

The survey is a key initiative under the Victorian Government's *Healthy Together Victoria - Action plan for oral health promotion 2013-2017*. It is also receiving funding support from the National Health and Medical Research Council through a Partnership Project Grant administered by ARCPHO.

# The importance of family oral health: preventing the spread of bacteria

It's important that every family member take care of their oral health.

While Healthy Families, Healthy Smiles focuses on the oral health of children 0 - 3 years and pregnant women, we also recognise that it's important for all family members to take care of their oral health. A key factor in maintaining good oral health is reducing the bacteria (mutans streptococci) in the mouth that contribute to tooth decay. Regular brushing is the best way to remove plaque and bacteria.

Interestingly, babies are not born with the bacteria mutans streptococci in their mouths. Research shows that when the transmission of these bacteria to a baby is delayed, the risk of tooth decay and poor oral health is minimised. The family member most likely to pass on the bacteria to a baby is the mother. Bacteria can be transmitted via saliva, eating utensils and toothbrushes.

There are a few really simple things that everybody can do to help minimise bacteria being transferred to babies:

- If you're pregnant have a dental check-up before baby is born.
- Everyone uses their own eating utensils
- Clean and sterilise baby feeding bottles, teats and dummies
- Avoid cleaning dummies with your own saliva or mouth
- Everyone brushes their teeth twice a day
- Use fluoride toothpaste appropriately
- Everyone uses their own toothbrush
- Everyone has regular dental check-ups and children have an oral health assessment by age 2.



## Partnering with dietitians

The dietary risk factors that contribute to poor oral health share many commonalities with other general and chronic health conditions. Dietitians are a unique professional group with a sound understanding of diet related disease and illness. Tooth decay is a diet related disease, so it makes good sense that dietitians have the right information to support families' dietary choices and their impact on oral health.

High sugar diets and eating patterns that include frequent and prolonged intake of food and drinks high in sugar are key contributors to poor oral health. Many of the common foods and drinks that Australian families and their children consume have hidden sugars that can make a huge difference to the oral health of all family members. In addition to this, eating patterns of families and especially children have changed considerably over time. Frequent and prolonged intake (grazing) of high sugar foods and drinks is a major contributing factor to tooth decay and tooth erosion.

Dietitians are well placed to recommend healthy food and drink choices which promote oral health and referral to an oral health professional as part of the nutrition care process with families.

A presentation about oral health was made to the Dietitians Association Australia's (DAA) Public Health Community Nutrition Interest Group in Melbourne during their October 2013 meeting. This meeting has led to further discussions with the DAA relating to oral health and how we can support this professional group. A joint oral health position statement is planned for this year as a collaborative project between the DAA and Dental Health Services Victoria. We believe that this is the beginning of a great partnership that will further contribute to good oral health for all Victorians.



# Timely recognition for a researcher who values the role midwives play in women's health.

Congratulations to our partner Dr Ajesh George.

Victorian midwives are benefiting from the work of Dr Ajesh George who has just been presented with the Ingham Institute Early Career Researcher Award for his efforts establishing Australia's first online midwifery initiated oral health program. Dr George, an oral health professional from the Centre for Applied Nursing Research, University of Western Sydney, received the award in the collaboration category for his study 'A Midwifery Initiated Dental Service'.

The study question is about the effectiveness of a midwifery intervention (involving oral health education, assessment and referrals to easily accessible dental clinics) compared with no midwifery intervention, in improving pregnant women's oral health status, uptake of dental services, oral health knowledge and quality of oral health.

So far results have shown that the women receiving the oral health promotion material at the first antenatal visit with a midwife who has completed the initiated oral health training, are more likely to access dental care. Dr George's research is the first of its kind in Australia. Dental Health Services Victoria is honoured to be partnering with Dr George to offer the Midwifery Initiated Oral Health Education Program to Victorian midwives who conduct the first antenatal care booking visit.



Dr Ajesh George

## Evaluation update

The Australian Population Health Improvement Research Strategy for Oral Health (APHIRST – Oral Health) unit at Dental Health Services Victoria have been quite busy behind the scenes with designing and conducting the evaluation of Healthy Families, Healthy Smiles (HFHS). In the past year they have been talking to many of our stakeholders. They are interested in finding out what impact the HFHS initiative has had on the capacity of health and early childhood professionals, services and settings to promote the oral health of children aged 0-3 years and pregnant women in Victoria.

Importantly, they want to hear from you and your organisations about all things Healthy Families, Healthy Smiles - success and challenges, your thoughts and ideas about what works and what needs work, and incorporating oral health into your practice. This evaluation will help inform improvements in the initiative as it continues into the future and oral health promotion practice.

To do this (APHIRST- Oral Health) are conducting surveys, workshops and focus groups with key stakeholders and professionals that have participated in training and development programs. They have already begun to collect information from a range of stakeholders involved in different aspects of the initiative.

The response from our stakeholders so far has been fantastic. On behalf of the HFHS team and APHIRST – Oral health we would like to extend a huge thank you to those who have assisted the evaluation through participating in surveys, workshops and the distribution of training evaluation surveys.

We look forward to catching up with you all about being involved in the HFHS evaluation as it unfolds. For more information about the evaluation of HFHS you can contact Adina Heilbrunn at [adina.heilbrunn@dhsv.org.au](mailto:adina.heilbrunn@dhsv.org.au).

## get in touch

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