Bigger Better Smiles in Gippsland

There are now 30 Aboriginal professionals and health workers in Central and East Gippsland ready to promote bigger better smiles for children.

Dental Health Services Victoria recently partnered with Gippsland and East Gippsland Aboriginal Co-Operative (GEGAC) and Ramahyuck District Aboriginal Cooperative and Latrobe Community Health Service, to deliver the Bigger Better Smiles education program in Lake Tyres and Morwell communities.

Tooth decay is the most common chronic disease of childhood. As the disease progresses it can impact on general health, affect speech, cause sleep problems, self-esteem issues and impact on learning. Every child is at risk but we know that Aboriginal and Torres Strait Islander children have twice the level of decay than non-Aboriginal children (Jamieson et al, 2007).

Working with local Aboriginal organisations and communities is critical if we are to close this gap. The Bigger Better Smiles program is helping health and early childhood workers to support better oral health in young children. The training is more meaningful to participants as it was developed for people working with Aboriginal families. A participant in Bigger Better Smiles training said:

“I enjoyed it all and found it very interesting, the knowledge gained today will certainly be useful and relevant to my current practice”.

Bigger Better Smiles is an initiative of DHSVs Healthy Families, Healthy Smiles initiative, funded by the state government. The aim of the training is to provide basic oral health knowledge and discover/workshop ways to incorporate it into their current practice. A wide range of local workers attended, ranging from Aboriginal Health Workers, early childhood workers, practice nurses, a general practitioner, family support workers, teachers, maternal and child health nurses, Koori maternity services, tutors and youth workers, who either work for Aboriginal organisations or with local Aboriginal families or are Aboriginal people themselves. These workers are a trusted source of information for families and Bigger Better Smiles serves to equip participants with the knowledge and confidence to talk with families about oral health and encourage them to access dental services.

Bigger Better Smiles has now been delivered at Aboriginal Community Controlled Health Organisations (ACCHOs) in Mildura, Bendigo and Gippsland. In Gippsland, Bigger Better Smiles supports a local oral health project funded by Koolin Balit. These partnerships provide an opportunity to share a workload and resources and help build the capacity of both parties, to better address gaps and meet the needs of the local community.

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Diet for Healthy Teeth

Dental Health Services Victoria and the Dietitians Association of Australia have joined forces to develop a joint position statement exploring essential aspects of oral health and its relevance to dietitians in a range of work settings.

This position statement was the result of a working party from DAA and the Healthy Families Healthy Smiles team at DHSV. Healthy Families, Healthy Smiles adopts an approach that aims to support health and early childhood professionals to incorporate oral health into their everyday practice and/or service. These professionals and services are well placed to provide advice and support around oral health to families.

This work is important for increasing an understanding of the link between oral health and nutrition and ensuring dietitians and other nutrition professionals have the knowledge to promote oral health with their clients. Tooth decay is a diet related disease, so it makes good sense that dietitians have information to support families’ dietary choices while promoting good oral health practices.

The statement recognises oral health should be integral to the practice of dietitians and other nutrition professionals within their various work settings. The ‘Joint Position Statement on Oral Health and Nutrition,’ provides a framework for action to build the knowledge and confidence of dietitians and provides key practice options for age groups and life stages.

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Tooth brushing models

These big teeth and large toothbrush are great for demonstrating toothbrushing to groups or individuals.

Puppets, like Alexander Alligator here, also help foster a happy relaxed atmosphere when demonstrating toothbrushing.

To find local suppliers try searching the internet using terms like “mouth model”, “toothbrushing model” or “giant teeth model”

Spotlight on:
Nutrition Australia - Healthy Eating Advisory Service

The Healthy Eating Advisory Service, delivered by Nutrition Australia is pleased to announce that FREE online training modules are available now!

An online training module for Long day care cooks, directors and early childhood educators is available to support the provision of healthier food and drinks in early childhood services.

The module is free of charge and can be completed at a time and place that suits the learner. Learners will receive a certificate of completion.

The online training modules can be accessed at http://heas.healthytogether.vic.gov.au/training/training-options

For any further enquiries, feel free to contact the Healthy Eating Advisory Service team

T: 1300 22 52 88
E: heas@nutritionaustralia.org.
3 things about tooth decay you may not know

1. Tooth decay is a bacterial infection

We are told that sugar causes tooth decay and this is true, indirectly.

Tooth decay is caused by bacteria that we have in our mouths. Everyone has the bacteria that cause tooth decay living in their mouth. When you eat, the bacteria eat too, feeding on sugars. The bacteria can reproduce very quickly and forms bacterial plaque — a sticky film that coats your teeth. When sugars aren’t cleaned off your teeth, the bacteria feed on them and produce acid. This acid removes minerals in the hard outer layer of your tooth (enamel). This erosion causes tiny holes (decay) in the enamel over time.

Brushing twice a day helps to reduce the number of bacteria.

2. How often you eat and drink is just as important as what you eat and drink

It’s not only what we choose to eat, but how often, that triggers tooth decay.

We know that every time we eat (or drink), bacteria converts sugary food to acid and that acid attacks the tooth enamel (a process is called demineralisation).

Let’s take this a step further.

Your body’s natural defence is saliva. Saliva acts to dilute and neutralise the acid and provides minerals to remineralise and harden the tooth.

Our teeth go through this natural process of losing minerals and regaining minerals all day long. (The Stephan Curve, shown below, shows the effect of eating and drinking on the pH in your mouth in a graphical form.)

If acid damage occurs frequently and saliva doesn’t have enough time to do its job, over many months the tooth can become weak and break down, leading to a hole or cavity.

If you only eat three meals a day, with no sugary snacks or drinks in between, the bacteria only has three opportunities to produce acid, so there is minimal damage to your teeth.

The more time you allow between meals and snacks, the safer your teeth are. Give teeth a rest between meals and snacks (for around 2 hours), to allow teeth to remineralise and repair the damage caused by plaque acids.

The best control is proper brushing to reduce the plaque, sugars and bacteria and leaving enough time between eating (or sweet drinks) episodes.

3. Saliva is your secret weapon

You might be surprised to learn that saliva is actually the first line of defence when it comes to dental health.

Saliva is an important part of a healthy body. It is mostly made of water. But saliva also contains important substances that your body needs to keep your teeth strong.

Saliva is important because it:

- naturally washes away residual food during the period between meals
- helps neutralize acid from food to keep demineralization at a minimum
- contains minerals that help your enamel rebuild after being attacked by acid

You make saliva when you chew. The harder you chew, the more saliva you make. Chewing sugar free gum can help.

The Stephan Curve shows the effect of eating and drinking on the pH level in your mouth. This Stephan Curve (above) shows the potential damage that regular snacking and/or constant drinking from a sippy cup, could cause.

Source: www.kidsdental.ca
The new National Oral Health Plan

The goal of Healthy Mouths, Healthy Lives: Australia’s National Oral Health Plan 2015–2024 is to improve health and wellbeing across the Australian population by improving oral health status and reducing the burden of poor oral health. Oral health is fundamental to overall health, wellbeing and quality of life. A healthy mouth enables people to eat, speak and socialise without pain, discomfort or embarrassment.

Despite improvements over the last 20-30 years, there is still evidence of poor oral health among Australians. Four out of ten young children (42%), and two out of three older children (64%) have experienced tooth decay; a prevalence five times higher than asthma for these age groups. (Australian Bureau of Statistics. National Health Survey: Summary of Results, 2007-2008. Catalogue no 4364.0. Canberra: Australian Bureau of Statistics; 2009.)

The National Oral Health Plan aims to set the national direction and provide a framework for collaborative action in oral health over the next 10 years. The National Oral Health Plan envisages greater oral health promotion; expanding the reach of water fluoridation; improving access to dental care especially targeting priority populations; aligning and integrating the provision of dental care across the public and private spheres and across jurisdictions; and utilising workforce capacity effectively.


Healthy Little Smiles in action

Putting what we know into practice isn’t always easy. Early childhood educators from Matron Swinton Childcare in Warrnambool share their experience of the Healthy Little Smiles workshop to show how they are making a difference to the oral health of children in their care.

Back in our June 2015 newsletter we shared news of the pilot of the Healthy Little Smiles Resource Kit and the education workshops that the Healthy Families, Healthy Smiles team had delivered to early childhood professionals. Early childhood educators from Matron Swinton Childcare in Warrnambool took part in the workshop in April 2015 and a few months later, shared with us one of the changes they had made to their day-to-day practice.

As part of the workshop, we explain the tooth decay process and discuss risk factors. Educators learn why children who are put to bed with a bottle are at a higher risk of tooth decay. At the end of the workshop, in the action planning session educators at Matron Swinton Childcare recognised this was a behavior that they wanted to help change – both in the service and at home.

The educators decided that they would change the settling routine for the babies’ room and stop babies being given bottles when put to bed - with positive results! They reported that all children had adapted to the change in routine and were settling well. They also talked to parents about what they were doing so that they could encourage the routine to be continued at home.

Putting babies to bed with a bottle can cause tooth decay.

When we sleep there is less saliva in the mouth (saliva helps protect teeth by diluting and neutralising acid). So when babies fall asleep with a bottle, milk stays in contact with the teeth. The lactose (milk sugar) then feeds the bacteria on our teeth causing an ‘acid attack’ which over time can weaken the tooth and lead to decay.