



ORAL HEALTH BYTES

A Newsletter For Local Oral Health Programs



"When you see something that is not right, not fair, not just, you have to speak up. You have to say something; you have to do something." - John Lewis, lifelong champion of human rights

While oral health outcomes have improved significantly over the last few decades; racial and ethnic disparities still exist. Although preventable, disparities in the prevalence of tooth decay with respect to race, ethnicity, income, and parental education are profound. Achieving oral health equity is a priority of the Office of Oral Health and healthcare stakeholders. Local Oral Health Programs can continue to do their part in helping to identify under resourced communities and address barriers to achieve oral health equity. In the Moving California Oral Health Forward 2022-2027 Work Plan the terms Underserved and/or Vulnerable Populations appear in ten workplan activities. It is up to all of us to work with underserved and vulnerable populations in our communities and do what we can to help dismantle the barriers that keep everyone from receiving the oral health education, prevention, and treatment that they deserve. In this newsletter edition you will find resources that focus on the broad topic of oral health equity that can be helpful in our work. The OOH acknowledges that most of you are already engaged in this important work, and we look forward to hearing from you so that we can highlight your efforts and share with fellow Local Oral Health Programs.

[ADA Health Equity Resources](#)

[Improving Access to Oral Health Care for Vulnerable and Underserved Populations](#)

[5 Ways Dental Professionals Can Help Bridge the Gap in Oral Health Disparities](#)

[What Dentistry Teaches Us About Curbing Racism | TED Talk](#)





Center for Healthcare Settings

Organizations interested in advancing oral health equity typically have a clear vision for their desired impact yet may not have a precise notion of the steps necessary to achieve their goals. Logic models offer a valuable tool for anticipating the activities, resources, and partnerships necessary to improve the equity of oral health program

The Oral Health Equity Logic Model User's Guide, made possible by the DentaQuest Foundation, outlines a stepwise approach to completing a logic model for oral health equity work. Each section is dedicated to one component of the logic model, which includes examples and considerations for each step.

The guide was produced as part of the Advancing Oral Health Equity learning collaborative, which helped oral health stakeholders — including state coalitions, community-based organizations, state agencies, policy analysts, researchers, and others — examine the impact their programs have on oral health equity. Example logic models from collaborative participants are also available here to illustrate ways to use logic models to advance oral health equity.



ASTDD recommends that State/Territorial Oral Health Programs (S/TOHP) use the [ASTDD Guidelines for State and Territorial Oral Health Programs](#) to guide program planning and evaluation. Examples for each of the [Ten Essential Public Health Services to Promote Oral Health](#) are included.

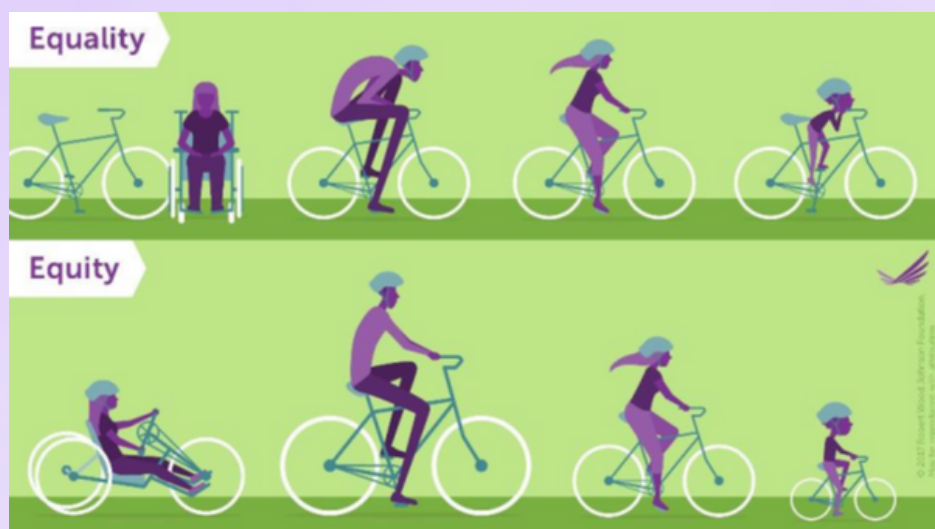
Examples under “Assess and monitor the population’s oral health status, factors that influence oral health, and community needs and assets,” include “Use an equity framework for disseminating information and consider culturally competent mechanisms for dissemination, as well as the health literacy level of the audience” and “Work with non-dental partners/advocates to identify ways to reduce disparities and improve health equity.”

Under “Communicate effectively to inform and educate people about oral health and influencing factors and educate/empower them to achieve and maintain optimal oral health,” we suggest “Working with groups and church assemblies representing people of color to communicate oral health equity issues.”

The two examples under “Mobilize community partners to leverage resources and advocate for/act on oral health issues,” are to “Engage community members to develop or enhance oral health coalitions and interact with other constituencies and groups with a vested interest in addressing oral health issues, to reduce oral health disparities,” and “Develop solutions and embrace the concepts of health equity and provide leadership to achieve oral health equity.”

The example under “Assure an adequate, culturally competent and skilled public and private oral health workforce,” is to “Provide/link to training in cultural competency and health equity.”

The [Guidelines](#) and suggested examples may be a tool local oral health programs find useful.





Recognizing that lifelong habits are formed in childhood, [Smile, California](#) offers a variety of materials designed to reach parents about preventive services available through the Medi-Cal Dental Program and about caring for their children's teeth and gums. Materials include a series of "[fotonovelas](#)" (short pieces that tell simple stories using illustrations or photographs accompanied by text bubbles) designed to educate the Medi-Cal member audience about important childhood oral health milestones and preventive care. The pieces, titled [First Tooth](#), [First Birthday](#), [First Dental Visit](#) and [Seal Today to Prevent Decay](#), are culturally tailored to multi-generational Latin American families, which have one of the highest enrollment rates in Medi-Cal. In 2020, 21% of adults and less than half of all children utilized their available Medi-Cal dental benefit.

[Smile, California](#) is intentional about providing culturally and linguistically relevant information for its Medi-Cal member audience. [All materials](#) aim to be informative, easy to understand and engaging. All are ADA compliant and available for download. Several materials are available in more than seventeen languages. More recently Smile, California debuted a piece developed in collaboration with the Department of Aging: [A Healthy Smile Never Gets Old](#), a dental care brochure designed specifically for seniors. This month the campaign will debut [Don't Wait Until It Hurts to See the Dentist](#), a video that features a Medi-Cal member discussing the adulthood consequences of him not having adopted healthy dental care habits at an early age. This new video aims to be empathetic to one's upbringing yet empowering with the reminder that Medi-Cal includes dental benefits.

[Smile, California](#) collaborates with oral health professionals and community leaders across the state to support health equity through a variety of initiatives and services through prevention, education, and community outreach and events. Visit the [Partners & Providers](#) page to view and download an array of materials and resources made especially for you to assist members of your community with questions regarding Medi-Cal dental benefits and how to access care in various languages.



COHTAC Updates & Oral Health Equity Resources

COHTAC would like to thank everyone who responded to our needs assessment survey – we had a 93% response rate, which is phenomenal! We will be using the findings from this survey to design communities of practice and inform trainings and resources. Some of your highest reported needs include guidance on school oral health programs and KOHA, strategic planning (e.g., SWOT analysis, billing), and how to increase stakeholder engagement (e.g., dental providers, advisory committees). These will all be addressed in upcoming trainings and resources. In the meantime, you are always welcome to [email us](#) for more direct technical assistance.

We also want to highlight and commend all the work LOHPs do to improve oral health equity. Implementing [toothbrushing in early education and childcare centers](#) and school oral health programs advances oral health equity by bringing evidenced-based practices (e.g., toothbrushing, sealants, establishing dental homes) to all of California’s children. The data we collect with KOHA helps to track health status, identify disparities, and measure our progress as we work to create a more equitable oral health landscape in California. These examples align with the [CDC’s approach to “paving the road to health equity”](#) (see figure with examples). Here are a few resources on the [COHTAC website](#) we wanted to emphasize to address oral health equity:

- Newly updated and redesigned school oral health programs pages: [KOHA](#), [KOHA resources](#), [SCOHR](#), [Results-Based Accountability \(RBA\)](#).
- [Resource center](#) – filter by any topic you’re interested in (including [health equity](#))
- [Webinar on best practices for outreach to BIPOC communities](#)

[Webinar: Advancing Equity Through Grantmaking](#)

On Thursday, March 16 CareQuest held a webinar, Advancing Equity Through Grantmaking. You can access the recording [here](#). Every year, CareQuest Institute awards more than \$14 million in grants rooted in its commitment to health equity and the intentional engagement of communities most often harmed by the existing oral health system. How does that funding make a difference? Join a panel of experts on Thursday, March 16 at 1 p.m. ET for a webinar on how grantmaking plays a crucial role in improving oral health in historically marginalized communities. Participants will also learn about the grantee application process, including a short demonstration and answers to common questions.



LOHP Spotlight: Alameda County

The Alameda County Office of Dental Health (ODH) strives to achieve oral health equity for all Alameda County residents with a multi-pronged approach. This includes partnerships with community-based organizations and by providing dental care coordination to ensure access to dental care. ODH Family Support

Care Coordinators (FSCC) provide the following services: help finding a dentist, scheduling, and following up on dental appointments, oral health education, Medi-Cal enrollment assistance, and referrals to community resources. ODH was the first to develop a care coordination training program for its Dental Transformation Initiative project Healthy Teeth Healthy Communities.



ODH provides oral health educational materials and resources through the ODH website Alameda County Office of Dental Health and by engaging with residents at community events. Continuing education trainings for dental care providers are provided through ODH's unique Community of Practice program to encourage providers to see underserved priority populations.

ODH provides gap coverage for families with children who are uninsured or underinsured within Alameda County for preventive care and dental treatment needs at no cost through the Healthy Smiles Program. ODH Clinical Program provides dental services to children at schools with high percentages of underserved students and to children and pregnant people at WIC sites. ODH is collaborating with UCSF DPH program to launch the toothbrushing program at early childcare centers in Alameda County. In 2023 ODH continues outreach and oral health equity efforts by participating in the Black Joy Parade and the Student Mental Health workshop organized by the Public Health Commission.

In 2022, ODH served 5,902 residents through our various programs, distributed resources at 13 outreach events and provided 277 dental professionals with continuing education courses. FSCC's supported 2,548 residents through care coordination services. Clinical staff provided 626 children with oral health education and preventive dental services. Dr. Shakalpi Pendurkar, Alameda County Dental Health Administrator, has served as Co-Chair for the State Oral Health Equity workgroup since 2021 and brought forward a resolution for special healthcare needs population that was unanimously adopted by the California Dental Association's (CDA) House of Delegates. This resolution will lead to the first ever policy on SHCN patients by the CDA and improve care for SHCN patients.



OOH Staff Spotlight: Vinay Shukla

Hi, I am Vinay Shukla. I have been with the Office of Oral Health (OOH) for three years as the Budget and Contract Manager. I am responsible for analyzing, calculating, maintaining, and assisting LOHP's Fiscal Year Budgets. In addition, I review and process quarterly invoices along with monitoring the 5-year grant cycle.

I am grateful for this position. This role has provided me the opportunity to build working partnerships with my counties and to better understand how funding is

applied to various aspects of oral health. Providing dental care to children is important and it's great to see how the counties implement programs and activities. OOH does a wonderful job guiding both OOH and LOHP's staff in their continued effort and goals to improve oral health care.

I was born in the Bay Area, grew up in Elk Grove, and am currently living in downtown Sacramento with my wife. I graduated from Sacramento State University with a bachelor's degree in Business/Finance. Working with numbers and Excel spreadsheet is something I really enjoy and has helped me with my career, specifically in budgets.

I love spending time with family and friends, listening to music and attending concerts, traveling, exercising, sports and watching all genres of movies. I am also an avid Lego and watch collector.

California Department of Public Health is a nationally accredited health department—mobilizing communities and institutions to transform policies and systems towards a culture of equity, antiracism, healing and health for all people and our planet.



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