B. PROJECT OVERVIEW

Project Name:  Earlier Is Better
HWPP Project Number:  20111-06

Without exceeding this one (1) page, briefly describe your project and partnership.

Dental caries is the most common preventable disease of childhood. Research indicates early intervention to prevent oral disease can reduce the onset of dental caries and oral disease burden throughout childhood. As a result of dental caries, more than 51 million school hours are lost annually due to mouth pain. Since 2003, the American Academy of Pediatrics has recommended all children receive a caries risk assessment by six months of age and a dental exam by one year of age. Earlier Is Better is the next logical step in improving the oral health of children in Wisconsin. Statewide Head Start survey data collected in 2009 showed three year old children enrolled in Head Start had a caries experience rate of 25%, and by five years of age that rate nearly doubled.

While broad efforts have focused on improving access, attention must also be given to informing parents/caregivers of the value of early oral care and the critical role they can play. Earlier interventions among parents/caregivers are necessary in order to lower the current oral disease burden of young children. The proposed project, Earlier Is Better, will provide Parent Oral Health Education Toolkits (POHET) to pregnant women and parents/caregivers of infants and toddlers enrolled in Wisconsin’s Early Head Start (EHS) program. The goal of Earlier Is Better is to reduce the dental caries experience of Wisconsin EHS children through evidence-based prevention and educational intervention. Earlier Is Better program objectives include: 1) improving the existing partnership, 2) documenting parents/caregivers behavior change after implementation of POHET, 3)increasing the number of EHS children with a dental home, and 4) reducing the number of children with caries experience.

EHS provides support to over 2,400 low-income infants and toddlers and 240 pregnant women in Wisconsin. By utilizing existing EHS parent educators/home visitors and dental professionals to deliver consistent oral health education, Earlier Is Better will lower current dental caries experience by the time children reach the age of three years and enroll in Head Start. The partnership includes community stakeholders from the Healthy Teeth = Healthy Kids and Making Milwaukee Smile projects previously funded by HWPP in addition to new partners with similar goals. Each partner has demonstrated a capacity and ability to execute Earlier Is Better through previous efforts. Children’s Health Alliance of Wisconsin maintains strong relationships with relevant organizations and officials throughout Wisconsin in the early childhood field, school systems, public health and dental community. The Medical College of Wisconsin will lead the evaluation of the project and brings expertise in program design and measurements. Dr. Christopher Okunseri, Associate Professor at Marquette University School of Dentistry, has done similar work in Minnesota and will provide consultation to the partners on Earlier Is Better. Given the new focus of early intervention, the Wisconsin Head Start Association (WHSA) was a natural and eager partner, bringing a wealth of knowledge and expertise with home-based parent educators/home visitors to the project. The partnership also added the Wisconsin Division of Public Health’s (DPH) Oral Health Program to the collaboration. DPH has lead efforts to complete a statewide oral health survey of Head Start children and anticipates completion of a new survey during the proposed funding period. In addition, the partners have had successful meetings with the Wisconsin Dental Association (WDA) and look to add them as a partner upon approval by their leadership. More than 85% of the state’s licensed dentists are members of WDA, and their partnership will increase connections between children and dental providers.

POHET innovatively augments existing oral health curriculum delivered by EHS, by including reinforcement messages such as tooth brushing models, flipcharts, a red flag checklist, goal setting magnet and take-home education materials. In addition, Earlier Is Better will create a mechanism for evaluating the impact of the education delivered. Utilization of parent educators/home visitors within each community to conduct home-based oral health education and influence EHS participant actions can be readily modeled and duplicated. Thus, individual knowledge change becomes the impetus for lasting behavior change. By utilizing existing systems of EHS to incorporate components of POHET, Earlier Is Better will strengthen the sustainability of improved oral health in EHS.