Oral Health is integral to the healthy physical, social-emotional and intellectual development of every child. Unfortunately, many children in America suffer from poor oral health and a lack of access to oral health care. In his 2000 report Oral Health in America, the Surgeon General noted that not only is dental caries the most common chronic disease of childhood, but that low-income children suffer twice as much from dental caries as children who are more affluent.

Current statistics indicate that 28 percent of all preschoolers between the ages of 2 and 5 suffer from tooth decay, but in Head Start programs, decay rates often range from 30-40 percent of 3-year-old and 50-60 percent of 4-year-olds. Head Start directors, program specialists, staff and parents have reported that access to oral health services is the number one health issue affecting Head Start programs nationwide.

“If the child needs it, Head Start will do it.” Janet Coscarelli, Tennessee Head Start State Collaboration Director.

Early Head Start (EHS) and Head Start (HS), along with Migrant and Seasonal Head Start are comprehensive child development programs which serve low income children from birth to three and three to five, respectively, and their families. These programs promote school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families. The Office of Head Start (OHS) provides grants to local public and private non-profit and for-profit agencies to provide these services to economically disadvantaged children and families. Services for parents and caregivers enable them to provide safe and nurturing environments for their children which support the child’s physical, social-emotional and intellectual development. Case management services can assist parents in obtaining medical and dental care for their enrolled children.

Challenges that Head Start programs face in securing access to quality dental care include those related to the availability of dental services as well as community, family and cultural factors:

- Reluctance by many general dentists to provide services for preschool-age children;
• Dentists’ lack of familiarity with HS/EHS program goals, objectives and resources;
• Transportation, language and cultural barriers;
• Educating parents about oral health and motivating them to follow up with treatment their children need.

To offer a solution to this problem, the American Academy of Pediatric Dentistry (AAPD) is partnering with the Office of Head Start (OHS) to provide dental homes to young children who may otherwise go without care. The OHS has awarded a five-year contract to the AAPD to help establish dental homes for approximately one million children enrolled annually in Head Start and Early Head Start across America. Johnson & Johnson Consumer Health Care, a long-standing supporter of Head Start, is also supporting the initiative.

The five-year project includes five key components:

• providing project leadership administration and organizational support;
• providing oral health expertise and technical advice;
• developing networks of dentists to provide access to dental homes;
• training dentists to enhance their capability to meet the oral health needs of young children and their understanding of Head Start and Early Head Start programs;
• enhancing HS/EHS oral health staff training and parent education programs.

AAPD believes that these strategic activities will complement and supplement recent HS/EHS oral health efforts and supply a critical missing component – networks of dentists capable of providing quality dental homes that meet the full range of oral health needs for HS/EHS infants and children. “Given Head Start’s long-standing emphasis on comprehensive child development services and parental education,” stated Dr. James Crall, AAPD Head Start Dental Home Initiative Project Director “this Initiative provides a ‘best case scenario’ for reducing oral health disparities in young children and establishing the foundation for a lifetime of good oral health.”

Dr. Pitts Hinson, AAPD Head Start Dental Home Initiative TN State Leader and Janet Coscarelli, TN Head Start State Collaboration Director work together with TN Head Start grantees and Tennessee dentists to ensure that every Tennessee Head Start child has a dental home and that all Head Start centers within the state have correct oral health information.

The American Academy of Pediatric Dentistry Head Start Dental Home Initiative offers members of the dental community the opportunity to develop local partnerships with HS programs. Joining a local network affords dentists the opportunity to make a difference
in the lives of needy children, alleviate unnecessary discomfort and bring healthy smiles to Early Head Start and Head Start children.

“Until we connect parents to the dental office, we haven’t accomplished what needs to be done.” Dr. Pitts Hinson

Head Start programs that work with special populations, such as Migrant and Seasonal workers and American Indians and Alaskan Natives, face particularly difficult challenges in establishing dental homes for children enrolled in their programs.

This story focuses on the success of one such local partnership which was developed with the assistance of AAPD Head Start Dental Home Initiative State Leader Dr. Pitts Hinson. The success demonstrated by this community is representative of successful activities throughout the United States as pediatric dentists and general dentists step out to improve the oral health of young children and Early Head Start and Head Start centers work to ensure that parents and children are empowered with the information and assistance they need to ensure a lifetime of oral health.

The Tennessee state launch for the AAPD Head Start Dental Home Initiative was held on September 29 & 30, 2008, in Nashville, TN. Planning for the launch was a joint activity involving AAPD HS Dental Home Initiative project leaders, the Tennessee State Collaboration office and the Tennessee State Leader, Dr. Pitts Hinson. During the launch members of the dental and Head Start communities received information and participated in activities that established a common knowledge base for individuals from the respective groups. The participants also engaged in a planning session for Head Start children in the state and strategies for engaging both the dental and Head Start communities in addressing these barriers were identified.

One of the participants in the Tennessee state launch was Tiffany Baker, State Health and Disabilities Coordinator for Telamon Corporation Tennessee Migrant and Seasonal Head Start. Telamon Corp. receives federal funding from OHS to operate the Migrant and Seasonal Head Start Program for 264 children of migrant and seasonal farm workers throughout the state of Tennessee. Shortly after the state launch, Ms. Baker contacted Dr. Hinson to request his assistance in finding dentists to provide dental homes for both Early and traditional Head Start Migrant and Seasonal programs in the western part of the state. According to J Davis, Executive Director of Telamon Corp., in over twenty years of Migrant and Seasonal Head Start in Tennessee, these programs had never been able to
identify dentists to provide services to all of their Head Start children throughout the state.

“The initiative is working throughout the state – not just here. The whole idea of dentists talking to each other is phenomenal – we’re seeing it work. This has changed everything. All five Telamon programs traditionally have had a hard time finding dentists. For the first time in over twenty years, all five centers have partnerships with dentists.” J Davis, State Director, Telamon Corporation.

After reviewing the information that Ms. Baker had provided, Dr. Hinson searched the roster of Medicaid dentists and the AAPD director to identify dentists near Telamon's program sites. One of the centers where Telamon needed a dental partner was located in Alamo, TN, near Academy member Dr. Chuck Hughes. Dr. Hinson had known Dr. Hughes for over twenty years – he knew the quality of his practice, his staff and their practice philosophy.

When Dr. Hinson phoned Dr. Hughes and presented his request on behalf of the Head Start center, Dr. Hughes responded with an immediate “yes”. According to Dr. Hughes, it is important to him to “give back”, and this particular project is important for our entire community. Dr. Hinson worked with Dr. Hughes and Phyllis Olley, Alamo Center Director to establish a mutual understanding of what each of the partners would be doing to make sure that all of the children in that center received the care that was needed.

After attending the state launch, Telamon leaders, along with center directors throughout the state began to make oral health a priority. They recognize the importance of each child having a dental home, but also understand that they must incorporate oral health as a priority into their center activities as well. Telamon Head Start centers have taken a comprehensive approach to oral health education and care. Tiffany Baker, State Health and Disabilities Coordinator for Telamon worked with the Education Coordinator for Telamon to assemble numerous oral health activities which the teachers can use in the classroom with minimal preparation. Each classroom incorporates one oral health activity into the curriculum each week. Parents receive oral health information during parent meetings and during one-on-one meetings with Telamon staff. The center also supplies each child and parent with toothbrushes and toothpaste. Staff also provide case management and transportation of parents and children to dental appointments.
Dr. Chuck Hughes and his staff provide a visual evaluation for children at the Alamo Migrant and Seasonal Head Start Center. According to Dr. Hughes, the evaluation at the center is a first step to a dental home for these children and serves the purposes of:

- Prioritizing children's dental needs,
- Providing an introduction to a dentist and a dental home.

As part of this comprehensive approach, the Alamo center invited both Dr. Hinson and Dr. Hughes to attend one of their advisory council meetings. The advisory council is composed of community leaders representing all of the organizations with which the local center collaborates, including the public school district, public health and many other organizations. This offered the opportunity to share the importance of oral health to the broader community as well as engender enthusiasm among the Head Start staff. None of the members of that advisory council were aware of the importance of oral health in young children and its impact on the child’s ability to learn and grow. As Ms. Olley reported, “Dr. Hinson told the board about caries and Deamonte Driver, the Maryland child who died from complications related to an infected tooth. No one present had heard of caries and everyone at the meeting became dedicated to making sure that the dental needs for the children in their county would be met.”

Phyllis Olley of the Alamo center worked closely with Dr. Hughes’ office staff to develop a plan for the provision of dental services to the Alamo Head Start children. On August 4, 2009, Dr. Hughes visited the Alamo Center to provide visual evaluations for all of the children enrolled at the center. That day, 100% of the children came to school; the center even sent the bus to pick up one child whose mother had just given birth and was not able to bring him to the center that day. Dr. Hughes reported that, although he had seen Head Start children in his office, he had never gone to a Head Start center. After the exams, he commented on going to the center, “I think we’re going to love it – all the children are being well taken care of – their oral hygiene was very good, they are getting the dental work completed and are getting educated about oral health.” It was clear
from the children’s behavior that they had been well prepared for his visit and that they are brushing their teeth each day at Head Start. Daily tooth-brushing is a part of the National Head Start Health Performance Standards. The children’s enjoyment of the age-appropriate oral health activities was also evident throughout the day.

According to Dr. Hughes, this is the first step in a three part plan to engage the children and their siblings in a dental home. After Dr. Hughes completed the evaluations at the center, he met with the parents during a parent meeting to provide basic information about oral health and oral hygiene and also to make it more comfortable for them to come into the office. The children will all be seen in his office for additional evaluation and for treatment as needed.

His enthusiasm was mirrored by Ms. Olley who says she is grateful to Dr. Hughes for his services to the center and parents and for the role that Drs. Hinson and Hughes are playing in the community as a part of the Advisory Council. Seeing the children in the Head Start center has many advantages, including the peer-to-peer interaction of the children. Dr. Hughes made the visit fun by talking to the children about the exam and by letting them look at his equipment so that they would feel more comfortable. The more reluctant children were able to watch as the bolder ones were examined. All came away feeling good about their visit.
Letting the kids see and touch equipment such as lights and gloves helps take the mystery out of seeing the dentist.

The successful partnership between Alamo Migrant and Seasonal Head Start Center and Dr. Hughes is only the beginning of this success story. As a result of their participation in the Advisory Council meeting, the entire county is making a commitment to oral health. At the forefront of the movement to ensure all the county’s children attain optimal oral health is Kelsie D. Henning, Coordinator of School Health for Crockett County Schools. After hearing Drs. Hinson and Hughes speak at the meeting, he decided to “hit the ground running” in an effort to improve the district’s children’s oral health status in order to decrease absenteeism and increase student performance.

During his tenure as Health Coordinator, Mr. Henning had already made many changes in the district to improve the health of its children. He initiated school breakfast programs, increased exercise during school and worked with school health educators to improve nutrition and increase healthy behaviors in school-aged children. Once he heard the message of oral health, he immediately partnered with Dr. Hughes to implement a school oral health program. Beginning with this school year, Dr. Hughes will be visiting the public schools and providing oral evaluations to pre-kindergarten, kindergarten, second, fourth, sixth and eighth graders. Additionally, school health educators will be implementing an oral health curriculum in all grades throughout the county.

According to Mr. Henning, “Participating in the Advisory Council and hearing Dr.
Hinson has been very positive for the district. In Crocket County we want to be in the forefront of dental health. We will be providing more information for parents, waiting for the children with dental screenings and getting them into care.” Education leaders in Crocket County have taken on the mantra that “everyone needs this information” and are looking forward to the positive outcomes that this collaboration will bring.

The momentum created around oral health in Crocket County fits well with the philosophy of Head Start. According to J Davis, “So many times practices developed in Head Start have had a major impact on society. For our families, being a part of the community is important and this project has provided an opportunity for our families to have a positive impact in the community. This is huge.”

For more information about the AAPD Head Start Dental Home Initiative, please visit our website at www.aapd.org.