

Healthy Teeth Happy Babies

Location: Colorado
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 Category: **Emerging Practice**

BACKGROUND

Early childhood dental disease is the most chronic childhood disease in the U.S. and is evident in high numbers in Colorado, yet this disease is nearly always preventable.

- 1/3 of Colorado's children live in low-income households (less than 200% of federal poverty level).
- 14% of one year olds have untreated decay.
- 32% of Head Start kids aged two to five have untreated dental decay.
- 46% of kindergarteners have had cavities and/or fillings.
- 57% of third grade children have had cavities and/or fillings.
- 80% of dental disease occurs in 20% of the population with disproportionate incidence in low-income kids.
- An estimated 7.8 million school hours are lost in Colorado due to oral health pain and infections.
- Few low-income children have regular access to a dentist—only 11% of dentists in Colorado take Medicaid, and lower reimbursement rates are likely to make that number decrease further.

PROGRAM OBJECTIVES

The campaign's goals are to educate new and expecting parents in metro Denver about the connection between parent/baby dental health and motivate preventive behavior change, especially in high-risk (low-income/Hispanic) populations.

Key objectives for new and expecting parents include:

- Increasing preventive behaviors, such as not sharing utensils or cups, not putting sweet liquids in a bottle, wiping a baby's gums daily, asking for an oral health risk assessment at the 6-month check-up, etc.
- Institutionalize the core values of the infant/prenatal dental health movement.

TITLE V/MCH BLOCK GRANT MEASURES ADDRESSED

#13: Percent of infants and children, ages 1 through 17 years, who had a preventive dental visit in the last year.

Overall goals and key objectives for medical providers and community organizations:

- Increase awareness of American Academy of Pediatric Dentistry (AAPD) guidelines for children to receive an oral health risk assessment at six months of age from a pediatrician, family physician or community clinic; and to see a dentist and establish a dental home by age one.
- Increase OBGYN awareness of the importance of prenatal dental health and increase the number of providers who educate pregnant patients about the potential to transmit cavity-causing germs.
- Institutionalize the core values of the infant/prenatal dental health movement.
- Establish AAPD and American Dental Association (ADA) guidelines as the credible resource for information regarding the recommended age for children to see the dentist and guidelines for treatment during pregnancy.

Overall goals and key objectives for dental providers:

- Raise awareness of AAPD guidelines for children to see a dentist and establish a dental home by age one.
- Increase the number of general dentists in metro Denver seeing patients by age one and who take Medicaid; and the number treating pregnant patients and educating them about parent/baby dental health.
- Increase awareness that seeing children under the age of three is profitable and a great way to engage auxiliary staff.
- Establish AAPD and ADA guidelines as the credible resource for current information regarding the recommended age for children to see the dentist and guidelines for treatment during pregnancy.
- Gain buy-in among the general dentist and hygienist community to see children under the age of three.
- Institutionalize the core values of the infant/prenatal dental health movement.

TARGET POPULATION SERVED

The Healthy Teeth Happy Babies campaign focuses on new and expecting parents across Colorado; however advertising and research are focused on metro Denver, especially in high-risk (low-income/Hispanic) populations. The population of metro Denver is approximately 2.7 million and, according to the U.S. Census Bureau 2005-2009 American Community Survey, an estimated 5.6% of metro Denver women (age 15-50) had a birth in the past 12 months. Therefore, the campaign estimates an approximate sample size of roughly 300,000 new and/or expecting parents in metro Denver.

PROGRAM ACTIVITIES

The Healthy Teeth Happy Babies campaign has used a dynamic combination of community-based social marketing (CBSM) principles to educate the target population and empower them to improve their family's dental health. The CBSM concept has been applied through the following methods:

- Annual research to establish a baseline, identify obstacles, and measure progress
- Partnerships with community/state organizations, clinics, dental, and other healthcare providers
- Print, broadcast, and transit advertising
- Patient education
- Community outreach
- Media/social media relations

The campaign has been an evolution of grassroots community-based social marketing practices that have been adjusted and enhanced based on research and experience. The campaign conducts interviews with key stakeholders and peers at the beginning of each campaign year and at key milestones to refine and improve specific tactics and programs within the overall initiative.

PROGRAM OUTCOMES/EVALUATION DATA

In 2006, the campaign commissioned random sample phone survey research with mothers of children (age 0-2) in the seven-county Denver metro area to get a baseline understanding of perceptions about the importance of good oral health for infants and pregnant mothers and how to raise awareness about these issues. Similar research was then collected each following year to track the campaign's effectiveness on awareness and adoption of behavior changes within the target population. In addition, data from Delta Dental of Colorado insurance claims for infants (age 0-3) were analyzed. The campaign also tracked the amount of patient education materials requested by medical, dental and other healthcare providers throughout Colorado.

Results among 2010 phone survey respondents showed improvements in awareness and behavior change:

- Awareness that cavity-causing germs can be passed from mother to infant has increased from 26% to 79%.

- Of those who heard the message, more than half changed their behavior: 91% stopped sharing items; 86% brushed or flossed; 79% stopped cleaning pacifier with their mouth; 77% stopped putting sweet liquids in the bottle.
- Respondents in the target audience are much more likely to change behavior as a result of hearing campaign message: 60% of Latina respondents reported changing behaviors; 66% of respondents with high-school education or less reported changing behaviors; 58% of respondents with income less than \$30,000 reported changing behaviors.

Delta Dental of Colorado claims analysis show from 2007 to 2010, infants (age 0-3) accessing dental care in metro Denver increased from 26.7% to 30.2%. In the same period, average annual restorative dental charges per visit decreased in metro Denver for infants (age 0-3) while preventative charges increased. Additionally, during the first four years of the campaign, over 700 partners requested a total of more than 450,000 patient education cards.

PROGRAM COST

The annual Healthy Teeth, Happy Babies budget averages \$250,000. Of that amount, an average of \$100,000 is allocated towards advertising, \$30,000 for research and the remainder is used for program implementation and hard costs (such as patient education materials). Given the public education focus of this campaign, it is not possible to determine a cost per client.

ASSETS & CHALLENGES

Assets

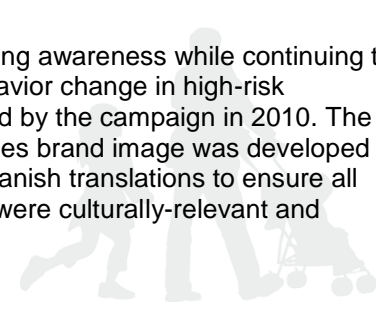
The Delta Dental of Colorado Foundation's commitment to improving infant dental health was key securing funding for this initiative, as well as several other programs that focus on the Foundation's mission to Eradicate Tooth Decay in Colorado's Children.

Challenges

The population of new and expecting parents is constantly renewing, so efforts must be sustainable to maintain awareness and change behavior as more new and expecting parents cycle into the target population. Also, the high-risk (low-income/Hispanic) population can be difficult to reach due to a variety of factors including language and immigration documentation barriers.

Overcoming Challenges

The challenge of maintaining awareness while continuing to implement preventive behavior change in high-risk populations was addressed by the campaign in 2010. The Healthy Teeth Happy Babies brand image was developed with a special focus on Spanish translations to ensure all messages and strategies were culturally-relevant and



appropriate for the target audience. In fact, the name 'Healthy Teeth Happy Babies' was originally created in Spanish as 'Dientes Sanos Niños Felices' and was then translated back to English.

LESSONS LEARNED

Over the past five years, the campaign's strategy has constantly evolved to maximize effectiveness. If the campaign was to be recreated, the most significant change would be to place a greater emphasis on direct parent interaction from the beginning, in addition to communicating with parents through their trusted healthcare providers.

FUTURE STEPS

The campaign began in 2006 and was approved for funding from the Delta Dental of Colorado Foundation for a fifth year in March 2011. The issue of prenatal and infant oral health has become a movement in Colorado that has gained a remarkable amount of momentum over the past five years; because of this, the initiative will continue on multiple levels.

COLLABORATIONS

The campaign has hundreds of partners in the medical, dental and other healthcare provider fields. The campaign also partners with initiatives that share the same goal of improving the oral health of Colorado's children, such as Cavity Free at Three (CF3), Kids In Need of Dentistry (KIND), The Children's Hospital Dental Clinic, Salud Family Health Centers and many more.

PEER REVIEW & REPLICATION

The Healthy Teeth Happy Babies campaign was selected for two presentations at the 2011 National Oral Health Conference. Interest in replication has been expressed and campaign staff is currently in the contract approval process for replicating the practice in the state of Delaware.

RESOURCES PROVIDED

Numerous resources have been developed as a result of the Healthy Teeth Happy Babies campaign, including patient education materials, dental kits, countless articles and videos and several online tools. The campaign website is the most comprehensive source for information and resources about the initiative, including an online order form for educational materials, a blog, access to care information and separate sections for Providers, Parents and Spanish Speakers. Other online tools include a campaign YouTube channel, Facebook page and Twitter account, all of which can be accessed from the website.

Campaign site: www.HealthyTeethHappyBabies.com

Key words: Oral Health, Health Promotion, Health Education, Prenatal Care

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