

healthyfamilies healthysmiles

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Healthy smiles in playgroups

Healthy Families, Healthy Smiles is working closely with the playgroup sector to support better oral health in early childhood.

Playgroups are a fun way for children to develop skills and make new friends. For parents they are a great way to meet other families and share information. The development of a new package for playgroup facilitators will help playgroups promote better oral health and because families can be involved playgroups for a number of years, there are lots of opportunities to help parents understand how to care for their child's teeth.

Consultation with the playgroup sector highlighted that facilitators are concerned about the tooth decay they see in very young children but they don't always feel comfortable or confident to offer advice to families. To respond to this a Healthy Families, Healthy Smiles working group has been established to help develop a tailored oral health promotion package especially for playgroups.

The package is being developed with an Early Childhood Services Resource Kit and will draw on that work for activities and ideas to promote good oral health. This kit will assist kindergartens, child care centres and family day care services to meet the oral health benchmarks of the Healthy Together Achievement Program.

The playgroup package will be much simpler, recognising that there is less time in a playgroup session and that families are there to have fun. The activities and practical guide will make promoting oral health easy and ensure it fits into the playgroup program.

Some of the ideas the working group is considering include an oral health information flipchart, posters, healthy snack demonstrations, songs, story time ideas, a toothbrushing demonstration kit and image-based information for families.

A training workshop will also be developed to support the package and give facilitators:

- basic knowledge and confidence to discuss oral health and visiting the dentist
- hands-on experience using the package resources and activities
- guidance on how to make their playgroup "tooth friendly".

If you have ideas to contribute for the Playgroup Oral Health Promotion kit we would love to hear from you. Email your suggestions to Jo - joanne.payne@dhsv.org.au.

We would like to acknowledge our playgroup working group partners: Karen Diacono - Victorian Cooperative on Children's Services for Ethnic Groups, Jason Doherty - Playgroup Victoria, Felicity Jackson and Leonie O'Malley - Wyndham City Council, Amanda Perry - Sunbury Community Health Centre and Margaret Rutherford - The Smith Family (Brimbank Communities for Children Project).

In this issue...

Promoting healthy teeth in playgroups.....	1
Tooth tips review.....	2
Busting the fruit juice myth.....	2
Midwives training opportunity	3
New work with more health professionals...	3
Spotlight on.....	4
Victoria's Oral Health Action Plan.....	4



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A fresh take on tooth tips

Tooth tips fact sheets provide valuable oral health information to families with young children. We have recently updated these resources to keep them relevant and make them easier to understand.

DHSV provides the Tooth Tips fact sheets through the Maternal and Child Health Service, reaching up to 80,000 families each year.

Recent changes to dietary and infant feeding guidelines prompted the review of these fact sheets. The resources also needed to be updated so that they are print friendly (when accessed via our website).

We know that 53 percent of Australians have low or limited literacy skills. This means that we need to think about the best way to present our messages so that everyone benefits.

The first phase of the review involved checking the information against the latest evidence, including the recently released Australian Dietary Guidelines and Infant Feeding Guidelines.

The next phase was finding out what professionals and consumers thought about the content and design of the fact sheets. More than 100 professionals and 40 consumers gave their opinions.

The key findings so far are:

- Concentrate on critical messages such as bottles, sweet foods, cleaning and importance of first teeth.
- Reduce the amount of text and use images to convey messages.
- Reduce duplication.
- There were mixed views on the age ranges.
- The design needs to be print friendly.
- Gaps to consider include fruit juice and strategies for dealing with resistance to tooth brushing.
- Translations into community languages.



The content is being rewritten to respond to the feedback. Mock ups of the draft will be developed so that we can talk further with our stakeholders to make sure we are on the right track.

The new sheets will be made available on our website later this year. In the meantime you can still use the existing tooth tips fact sheets at www.dhsv.org.au (under the oral health resources tab).

Busting the fruit juice myth

Parents often think they are giving a healthy drink when they give fruit juice to their children but, the truth is children do not need juice or other sweet drinks to have a well-balanced diet.

Most parents know that sweet drinks should be avoided or limited but few put fruit juice in the same category.

Experts say that fruit juice is not necessary or recommended for infants under 12 months of age but studies have found that almost one quarter of children are given juice by 6 months of age, two thirds by 12 months, and among Aboriginal children almost 90% have juice at 12 months. Too much juice can lead to overweight and obesity as well as tooth decay.

Water and milk (so long as it is age appropriate) are the best drink choices for toddlers and older children.

If parents decide to give juice to toddlers over one year the following advice should be given:

- Juice should not be put in bottles or sippy cups
- Juice should not be given at bedtime
- Juice should be limited to 120-180ml (about half a cup) per day for children aged over 12 months.

Juice is high in sugar which can lead to tooth decay. It is also quite often acidic which can wear away tooth enamel (the hard coating of teeth) leaving them more vulnerable to decay.

Whole fruit (stewed, mashed, chopped or sliced according to age) is much better than juice. It is a convenient and healthy snack that provides fibre and develops skills such as peeling and chewing.

For handy hints and more information visit www.betterhealth.vic.gov.au.

Did you know?

Children only need half an orange to get their daily requirement of vitamin C – but it takes three or four oranges to make one glass of juice.



More oral health training for midwives

After the success of the pilot oral health training for midwives, Healthy Families, Healthy Smiles is recruiting more midwives to improve oral health during pregnancy.

Healthy Families Healthy Smiles and the Centre for Applied Nursing Research, University of Western Sydney and their partners are preparing for a second round of oral health training for midwives. We are hoping to offer at least three more rounds of the education program between now and early 2015.

There is an important policy impetus for midwives to add oral health to their skills as the new National Clinical Practice Guidelines: Antenatal care - Module 1 has now incorporated oral health promotion as part of the first antenatal booking visit. Midwives delivering antenatal care need to understand the impact of the physiological changes of pregnancy on oral health and the association between poor oral health and pregnancy outcomes. Refer to the 'Spotlight on...' article overpage for a link to the new guidelines.

The Midwifery Initiated Oral Health education program prepares the midwife to incorporate oral health into the antenatal booking visit with the use of two simple questions for oral health assessment and referral. As one midwife said: "...it's amazing that oral health hasn't been brought into antenatal care before now in this more structured fashion. I feel very passionate about it now".

Midwives working in antenatal care at public hospitals and in Koori Maternity Services in the following areas will be prioritised based on identified needs in these locations:

- the Department of Health regions of Loddon Mallee, Gippsland and Grampians
- the local government areas of Greater Dandenong, Frankston, Monash, Knox and Brimbank.

We encourage midwifery managers to take part in the training to update their own skills and to support change in practices to include oral health into the booking visit. The evidence-based content will also be of interest to midwifery clinical educators and lecturers.

For more information and to register an expression of interest visit www.dhsv.org.au/midwives/eoi/



Expanding our work with other health professionals

Planning is underway to develop new projects and to partner with more health professionals to support better oral health for families.

In Australia, few children see a dental professional before the age of two but families regularly see other health care workers. These professionals are well placed to deliver oral health advice to parents when they need it. Studies also support that these workers can be as effective as specialised oral health promoters.

Recently, the Healthy Families, Healthy Smiles team completed needs assessments for building oral health promotion capacity among:

- General practitioners, Practice Nurses and Refugee Health Nurses
- Pharmacists
- Aboriginal health practitioners
- Dietitians.

The reports will be considered by the Project Reference Group and Management Group to identify future directions for work with these professional groups. A number of opportunities have been identified including:

- develop or contribute to existing professional development activities and resources
- provide content to relevant newsletters and other publications
- strengthen referral pathways between health professionals and dental services.

An evaluation of the Teeth Manual used by Maternal and Child Health Nurses is also planned to help identify further support their needs for promoting oral health.



Healthier smiles for Victorians

The Government has released a state wide action plan to improve the oral health of all Victorians.

Minister for Health David Davis launched the *Healthy Together Victoria – action plan for oral health promotion 2013-2017* on 27 May 2013 at Ashwood Children's Centre.

The action plan is a state-wide plan to improve the oral health of all Victorians. The plan focuses on five main action areas - partnerships and settings, oral health literacy, prevention and early intervention programs, workforce development and oral health information and research. The plan provides a framework for whole-of-sector partnerships necessary to strengthen the oral health promotion system.

It is widely accepted that good oral health is important for general health and wellbeing and that oral diseases place a considerable impact on individuals, families and the community. The burden of oral disease comes from four main conditions: tooth decay, gum disease, oral cancer and oral trauma.

While there has been a reduction in the extent of tooth decay amongst children over the last 30 years, it is still five times more prevalent than asthma and, among under-fives dental issues are the third most common preventable reason children are admitted to hospital.

Moderate or severe gum disease is the fifth most common health problem, affecting over a third of Victorian concession card holders and over a quarter of non-cardholders.

This plan will help broaden the scope of existing prevention work, and will include programs in early childhood centres and schools, residential aged care and disability settings as well as in a wide range of health services.

The plan also includes key state-wide oral health promotion initiatives, new interventions and actions in the five main action areas.

For more information or to see the plan visit:
www.health.vic.gov.au/prevention/initiatives/oralhealthpromotion.

Pictured above: Minister for Health David Davis with DHSV's CEO, Dr Deborah Cole.

Spotlight on:

Antenatal Care Clinical Practice Guidelines

The recently released Clinical Practice Guidelines - Antenatal Care Module 1 are designed to support Australian maternity services to provide high-quality, evidence-based antenatal care to healthy pregnant women.

The guidelines recognise the importance of good oral health during pregnancy and recommends including oral health in the first antenatal visit.

This is an important step as each year the evidence builds as to the association between oral health and pregnancy, as well as how oral health is linked to overall health and well-being.

With the new clinical guidelines, hospitals now have a policy framework in which to review and update their own booking visit guidelines, to include oral health promotion.

To access the guidelines or for more information visit
www.health.gov.au/antenatal.



get in touch

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