Fluoride and Education for Young Children

Problem Statement
After 39 dental screenings were performed during 2007, 7% of the children had urgent needs (severe decay). 25% of the children were at moderate risk with decay. The remaining children were low risk.

Parents of young children are often unaware that their child has dental decay. Through parent and child education materials (take home pamphlets and onsite video) we hope to motivate parents to bring their children into the dental clinic at regular intervals for checkups and fluoride applications.

Objectives
1. Provide fluoride varnish as needed for their risk category to 85% of the children seen in the initial screenings by the end of 2007.
2. Provide educational materials appropriate to their child’s risk category for at least 50% of the parents of the children screened.

Activities
Biannual screenings and fluoride applications for low risk children. Higher risk children will receive quarterly applications. Parents will receive education on “Parent Day” at the Early Learning Center. Many of the children will receive education at the dental clinic and / or the Early Learning Center.

Resources
$78.00/box of 30 Duro-Flor
$48.00/ box of 24 Toothbrushes
$300/50 kits Home Care Kits for Infants (infant – toddler toothbrushes, non-fluoridated toothpaste, pamphlets, sippy-cup)
$190.00/year Disposables (gloves, masks, 2x2 gauze)
$300.00 1. Dudley Goes To Camp Brush and Floss Video (for classroom presentation) + Dudley workbooks for the children (Available through ADA)
2. Prevention Video Series – for adult education on “Parent Days”

Evaluation
The number of children that receive fluoride varnish applications will be the primary evaluation tool. Also measured will be the number of children initially screened with moderate to severe decay that have their treatment completed at the dental clinic. Finally, the number of parents educated at “Parent Day” will provide insight to the parent’s dental knowledge and attitudes. This information will be used in planning future interventions.