



# **Community Outreach Scholarship Application**

Scholarship is for all Central Members and MC Dental Hygiene students (freshman and seniors)

\$750 monetary award

Award will be presented at the General Membership Meeting on 5.4.2025

Name: <u>lejaswi Laksnmi kota</u>
Address:
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COMMUNITY OUTREACH EXPERIENCE (continue on next page, labeled clearly)
Community Outreach Scholarship
Analyze the importance of community outreach programs in promoting oral health among underserved
populations in New Jersey. Explain the role of the dental hygiene professionals in facilitating these
outreach efforts and provide an example of a recent initiative supported by evidence.
Please submit your response in approximately 1000 words. Provide citations and references in APA
format.

Please Submit Application via email to <a href="mailto:CentralNJDHA@gmail.com">CentralNJDHA@gmail.com</a> by January 20, 2025 (please include scholarship name in the subject)

# The Importance of Community Outreach Programs in Promoting Oral Health Among Underserved Populations in New Jersey

Access to oral health care is essential for overall health and well-being. However, many Americans, particularly those in underserved populations, face significant barriers to obtaining basic dental care. In New Jersey, community outreach programs play a pivotal role in bridging this gap by providing preventive services and promoting oral health awareness among vulnerable groups. Dental hygiene professionals are integral to these efforts, serving as educators and care providers. This essay analyzes the importance of community outreach programs, the role of dental hygiene professionals, and highlights a recent initiative supported by evidence.

## **Barriers to Oral Health Care Access**

Underserved populations in New Jersey, including low-income families, racial minorities, and individuals without dental insurance, face significant challenges in accessing dental care. Financial constraints, lack of dental insurance, and a shortage of Medicaid-accepting providers exacerbate these issues. Nationally, about 25% of nonelderly Americans have untreated tooth decay, with even higher rates among low-income and minority populations (National Governors Association, 2014). These barriers result in disparities in oral health outcomes, including untreated cavities, infection, and systemic health complications, highlighting the need for innovative and accessible solutions (Skiba & Noam, 2001).

# The Role of Community Outreach Programs

Community outreach programs address these barriers by offering preventive services, education, and resources. Two notable programs in New Jersey are **Special Olympics New Jersey: Special Smiles** and **Share a Smile**.

**Special Smiles** focuses on athletes with intellectual disabilities, offering free dental screenings, fluoride varnish, and oral health education. Data indicates that 45.6% of athletes screened had signs of gingivitis, and 16.8% had missing teeth, demonstrating the program's role in improving awareness and access to care (Webb & Sommers, 2020). It also ensures follow-up care by referring athletes to dental providers for additional treatment.

**Share a Smile** serves uninsured or underinsured children. Through partnerships with dental hygiene programs and dental offices, children receive treatments such as sealants, fluoride varnishes, and cleanings. Those requiring further care are referred to participating pediatric dentists who provide free treatment. This initiative fosters long-term oral health by helping children establish a "dental home" (Marsh, 2012).

These programs exemplify how community outreach addresses critical gaps in care by offering immediate services and promoting sustained oral health practices.

# **Personal Experience in Community Outreach**

My personal experience of volunteering in India provided a profound understanding of the importance of community outreach for underserved populations. The initiative aimed to provide care to individuals who could not afford dental services or lacked education about oral health. One particularly impactful aspect of this effort was visiting local schools to teach

children proper brushing techniques and the importance of oral care. Engaging with children through hands-on demonstrations empowered them to take better care of themselves.

This experience reinforced my belief in the transformative power of education and outreach in promoting oral health equity. It was deeply rewarding to see children actively learning and understanding the impact of good oral hygiene practices. The lessons I learned during this experience continue to inspire my work as a dental hygiene professional and underscore the value of outreach programs.

# **Role of Dental Hygiene Professionals**

Dental hygiene professionals are uniquely positioned to lead and implement outreach initiatives. Their training equips them to perform preventive services, educate communities, and advocate for oral health. For instance, in the Community Health Centers of Benton and Linn Counties, co-located dental hygienists successfully integrated oral health services into primary care, improving outcomes and workflow efficiency (IMPLEMENTATION, 2016).

Hygienists also play a key role in data collection and analysis, which is vital for understanding population health trends. Webb and Sommers (2020) emphasize that integrating dental and medical records can uncover patterns of disease and guide targeted interventions. This interprofessional collaboration aligns with value-based care models and initiatives such as Healthy People 2020, which recognizes oral health as a critical public health indicator (National Governors Association, 2014).

Marsh (2012) highlights that dental hygienists with strong community service values are more likely to volunteer their expertise in underserved communities. By fostering a professional culture that prioritizes service and empathy, dental hygiene professionals ensure that outreach initiatives are impactful and sustainable.

#### **Recent Initiative: School-Based Sealant Programs**

School-based sealant programs are a notable example of community outreach. These initiatives target children in low-income communities, providing preventive services directly at schools. Sealants can prevent up to 80% of cavities in molars, which are most prone to decay (National Governors Association, 2014).

Research from similar programs in Oregon shows that dental hygienists applying sealants without supervision maintain high-quality standards while significantly increasing access for underserved children. These programs reduce logistical barriers and bring essential care directly to children who need it most (IMPLEMENTATION, 2016).

### Conclusion

Community outreach programs such as **Special Olympics New Jersey: Special Smiles**, **share a Smile**, and school-based sealant initiatives play a vital role in promoting oral health among underserved populations in New Jersey. By integrating preventive services, education, and advocacy, these programs address significant gaps in access to care. Dental hygiene professionals are central to these efforts, leveraging their expertise to deliver equitable and effective care.

My volunteering experience in India further solidified my commitment to community service. Witnessing the transformative impact of outreach efforts on children's understanding of oral hygiene highlighted the importance of providing accessible education and care to underserved populations. As New Jersey continues to confront challenges in dental care access, fostering collaboration and promoting community service among dental hygienists are crucial strategies for addressing oral health disparities. With sustained investment, New Jersey can build a healthier future for its underserved communities.

#### References

- IMPLEMENTATION. (2016). Oral health integration: Field-testing and implementation guide. Retrieved from <a href="https://www.smilesforlifeoralhealth.org/wp-content/uploads/2020/01/Guide-Oral-Health-Integration-Qualis.pdf">https://www.smilesforlifeoralhealth.org/wp-content/uploads/2020/01/Guide-Oral-Health-Integration-Qualis.pdf</a>
- Marsh, L. A. (2012). Dental hygienist attitudes toward providing care for the underserved population. *Journal of Dental Hygiene: JDH, 86*(4), 315–322.
- National Governors Association. (2014). Expanding access to oral health care: The role of dental hygienists. Retrieved from <a href="https://www.nga.org/">https://www.nga.org/</a>
- Skiba, R. J., & Noam, G. G. (2001). Immigration under Trump: A review of policy shifts in the year since the election. New Directions for Youth Development, 2001(92), 7–16. <a href="https://doi.org/10.1002/yd.23320019203">https://doi.org/10.1002/yd.23320019203</a>
- Webb, A., & Sommers, S. (2020, November 1). Dentistry, data, and population health: Why dental hygienist's matter. RDH Magazine. Retrieved from <a href="https://www.rdhmag.com/career-profession/article/14187021/dentistry-data-and-population-health-why-dental-hygienists-matter">https://www.rdhmag.com/career-profession/article/14187021/dentistry-data-and-population-health-why-dental-hygienists-matter</a>

#### TLK

\*Well-thought out, organized, and written (minor APA ref and format errors)

\*Impressive volunteer experience with underserved populations internationally

\*\* Recipient-Present Award Certificate and \$750 check, PHOTO OP??? Announce at 5.4.25 GM meeting

\*\*\*\*\*\* no idea how I all of a sudden ended up with all of this blue marking\*\*\*\*\*\*\*

\*\*\*\*\*Great candidate for continuing education, continuing equitable COS initiative participation, professional

My vote