



THE NATIONAL CENTER ON
Health



Brush Up on Oral Health

February 2013

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Did You Know?

February is National Children's Dental Health Month (NCDHM). NCDHM started as Children's Dental Health Day in Cleveland, OH, in 1941 to inform people about the importance of good oral health for young children. The American Dental Association (ADA) held the first national Children's Dental Health Day in 1949. This was extended in 1981 to the month-long celebration known today as NCDHM. For more information about NCDHM and to get materials about it, visit [ADA's website](#).

Oral Health Literacy

Oral health literacy is more than a person's ability to read. It is the degree to which a person is able to get, evaluate, understand, and use oral health information and services to make good decisions. People who have less



than a high school education or who are black or Hispanic, as well as those with limited English-speaking skills, are at high risk for low health literacy. It is estimated that only 1 in 10 adults in the United States can fully understand written material on health.* People with low health literacy are also more likely to have low oral health literacy.

This issue of *Brush Up on Oral Health* focuses on oral health literacy, why it is important, and what Head Start staff can do to improve it.

* Source: Kutner, M., Greenberg, E., Jin, Y., Paulsen, C. (2006). [*The Health Literacy of America's Adults: Results from the 2003 National Assessment of Adult Literacy*](#). Washington, DC: National Center for Education Statistics.

Does Oral Health Literacy Matter?

Children whose parents have poor oral health tend to have poor oral health too. Parents' knowledge and understanding about oral health is vital because parents are a child's first oral health provider. Parents who do not understand that it is important for young children to receive oral health care are less likely to take good care of their child's teeth. This puts children at high risk for developing tooth decay in their primary teeth and later in their permanent teeth.

Also, parents with low oral health literacy may not understand other important issues about oral health, such as how poor feeding and eating practices can lead to tooth decay or that it is important to give children fluoridated drinking water from the tap, when it's available. Not knowing what can cause oral disease and what can help prevent it affects parents' ability to take care of their own and their child's teeth.

Scheduling appointments and taking their child to the dental office can be challenging for parents with low oral health literacy or limited English-speaking skills. For example, many forms and educational handouts used in dental offices may be hard for parents to understand and fill out because the reading level is too high or the forms are not written in their native language. Also, some dental office staff may not explain treatment options or provide education to parents in a way that parents with low oral health literacy or limited English-speaking skills can understand and follow the instructions.



Improving Oral Health Literacy: What Head Start Staff Can Do

Head Start staff can help improve oral health literacy in many ways, for example, by:

- Learning more about taking care of their own oral health. There are many resources, such as [training programs](#), [curricula](#), and [brochures](#), to improve staff’s knowledge and understanding of oral health topics.
- Asking parents what they know about preventing tooth decay. This will help Head Start staff identify what parents know and focus on issues that parents need more information about.
- Serving as sources of accurate oral health information for parents.
- In collaboration with oral health providers, offering oral health trainings for parents.
- Looking for oral-health-education materials for consumers that are written in parents’ native language and are easy to understand, and reviewing these materials with parents.
- Asking parents about their experiences at dental offices. For example:
 - Did you have any trouble reading and completing the dental forms? Would you have liked to have help filling them out?
 - Did the dental office staff explain information in a way that you could understand and follow the instructions?
 - Did the dental office staff encourage you to ask questions?
 - Were translation services available if you needed them?

If the answer to any of these questions is “no,” Head Start staff can talk to the dental office staff about working together to better serve children enrolled in Head Start and their families.

Cook’s Corner: Recipes for Healthy Snacks

Here’s a delicious healthy snack that children can make as a class project or at home with their families.

Microwave Cracker Pizzas

Ingredients

- 24 whole-wheat crackers
- 3 tablespoons pizza sauce
- Pizza topping, such as diced vegetables (for example, mushrooms, olives, or peppers) or cooked and cubed beef, chicken, or ham
- 1½ cups shredded low-fat cheese



Instructions

1. Spread each cracker with ½ teaspoon pizza sauce.
2. Put pizza topping on top of sauce.
3. Sprinkle pizza topping with low-fat cheese.
4. Place crackers on a microwave-safe plate.
5. Microwave on high for 1 to 2 minutes, until cheese melts. Before serving, check to make sure that the cheese is not too hot. Safety tip: If children are too young to read or follow written directions, they are too young to use a microwave without supervision.

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