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Did You Know?

- Education, language, culture, access to resources, and age are all factors that affect a person’s oral health literacy.
- People with low oral health literacy are more likely to be afraid of dental visits.

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 about health. 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. A recipe for a healthy snack that can be made in a Head Start classroom or at home is also included.

Oral Health Literacy Matters

Adults with low health literacy tend to have poor health and to underuse health resources. Children whose parents have low oral health literacy tend to have poor oral health. Parents who do not understand that children’s oral health is important are less likely to take good care of their child’s teeth and take their child for dental visits. This puts children at high risk for developing tooth decay in their primary teeth and later in their permanent teeth.

Not knowing what causes oral disease and what to do to prevent or treat oral disease affects parents’ ability to take care of their own and their child’s teeth. Parents with low oral health literacy may not understand that poor feeding and eating practices can lead to tooth decay or that it is important to drink fluoridated drinking water from the tap, when it is available. Also, parents with low oral health literacy may have difficulty understanding and filling out forms or understanding treatment options or education provided by the dental office staff.
Strategies to Improve Oral Health Literacy in Head Start

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

• **Look for and deliver oral health information that is easy to understand.** Think about the following questions when preparing or delivering oral health information to parents.
  - Does the information take into account the culture, values, attitudes, practices, and languages of the parents?
  - What information do the parents need to know about oral health, and how will they use it?
  - Are the messages simple? Do they use plain language and pictures? Do the messages focus on simple actions parents can take to improve oral health?

• **Speak clearly and listen carefully.** When sharing oral health information, use the following strategies to help parents understand the oral health message(s).
  - Ask open-ended questions to gather information about oral health issues faced by parents.
  - Use a medically trained interpreter to communicate clearly with parents in their primary language. Have the translator use words and examples to make the information appropriate to their primary language and culture.
  - Check for understanding by asking the parents to restate in their own words the oral health messages shared with them or have parents show what was taught (for example, how much fluoride toothpaste to put on their child’s toothbrush).

• **Build parents’ knowledge to improve their ability to make good oral health decisions.** Many times what parents learned about health while they were in school is no longer correct. Use the following strategies to help parents become informed health consumers.
  - Share materials such as the National Center on Early Childhood Health and Wellness’s (NCECHW’s) *Healthy Habits for Happy Smiles* parent handouts that provide accurate and simple tips on oral health in English and Spanish.
  - Work with NCECHW to identify or develop new methods for finding and sharing oral health information that is appropriate for parents. These resources could include smartphone apps, videos, games, text messages, or tweets.
Cook’s Corner: Hummus Gobbler

Here is a delicious healthy snack that children can make in a Head Start classroom or at home with their families.

**Ingredients**

- 1 slice whole wheat bread
- 1 teaspoon hummus
- 1 red, yellow, and/or green bell pepper, cut into strips
- 1 carrot, cut into long and short sticks
- 1 black bean, cut in half (black olive pieces can be used as a substitute)

**Directions**

1. Use a round cookie cutter to cut the bread into 2 1-inch circles.
2. Spread hummus onto one bread circle, and cover with the other circle.
3. Put bell pepper strips around the top of the sandwich for feathers.
4. Put one long carrot stick on the bottom of the sandwich for legs.
5. Put one short carrot stick on either side of each long carrot stick for feet.
6. Put a small piece of bread crust and a strip of bell pepper on the sandwich for the wattle.
7. Put black bean halves on the sandwich for eyes.

**Safety tip:** An adult should slice ingredients. For children ages 3 to 5, cut carrots into thin strips.

**Makes 1 serving**

**Contact Us**

The National Center on Early Childhood Health and Wellness welcomes your feedback on this issue, as well as your suggestions for topics for future issues. Please forward your comments to health@ecetta.info or call 866-763-6481. Subscribe or view all issues of *Brush Up on Oral Health* on the Early Childhood Learning and Knowledge Center.

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*School readiness begins with health!*