

What does research tell us about the future of dental hygiene?

Katy Battani, RDH, MS

As I began reflecting on this question, I thought to myself – research has told me repeatedly that more dental hygienists are needed to work in the public health arena in order to achieve oral health equity for future generations. However, my perspective comes from being immersed in the public health sector and I am sure that my colleagues in other specialty areas, such as academia, would say the same about the demand for qualified and passionate oral health care professionals in their respective fields. And they are correct!

Merriam-Webster dictionary defines research as “studious inquiry or examination, especially investigation or experimentation aimed at the discovery and interpretation of facts.”¹ Thorough research investigations allow for us to learn about the reality of a problem or situation in order to develop effective programs. Working within a state-level oral health program, I am continually reviewing data and conducting surveillance and research projects to identify and better understand oral health disparities, workforce issues, oral disease burden, and access and utilization trends at the state and local levels. Research data serves as the core springboard for jumping into innovative, improvement-focused solutions. However, we must first examine and appreciate the data before we can make that leap forward. Data should drive public health program development and resource allocation. Without the research data, we risk being misguided towards the inappropriate use of our resources.

Public health data also serves to steer and expand the future of the dental hygiene profession in a positive and progressive direction. As a contributor to “Advancing Dental Education in the 21st Century,” I was able to put on my researcher hat to review the factors impacting the future of the

profession. What are the challenges? What are the opportunities on the horizon? How will dental hygiene education advance to keep pace with an evolving workforce that will undoubtedly need to be prepared to expand into alternative settings with growing scopes of practice and responsibilities? Our health care system is in the midst of a transformation, largely driven by data that shines a big spotlight on rising costs and poor health outcomes. Though some oral health improvements have been made nationally, dental caries remains the most common chronic pediatric disease, almost half of all adults over age 30 have some form of periodontal disease,² and more than 50,000 new cases of oral cavity or oropharyngeal cancer will be diagnosed in 2018, with an increasing number of cases linked to human papillomavirus infections.³ Additionally, oral health disparities persist for certain groups based on race, ethnicity, socioeconomic status, gender, age, and geographic location.

As our health care system continues to evolve, I feel confident there will be increasing opportunities for dental hygienists to contribute to the triple aim of improving patient experiences, improved population health, and reduced costs of care. Dental hygienists can contribute to achieving the triple aim through expanded scope of practice especially for vulnerable populations; integration into primary care and other alternative settings such as long-term care facilities, hospitals, community-based programs, and home residences; and through leadership roles at the local, state, and national levels.

Our educational programs need to adequately prepare graduates for a variety of professional roles and employment settings. Dental hygienists need to be prepared to collaborate inter-professionally with non-dental health care providers and community program staff and in some states, acquire advanced clinical skills. Baccalaureate, master’s and doctoral degree programs in dental hygiene will be essential to prime future professionals for leadership roles in public health, academia, research, industry, administration, business, and more.

In a nutshell, I foresee a promising and exciting future for our profession as long as we continue to evolve with the larger health care system and the changing demands of the public. We do not want to be left behind, siloed away from the larger health system in our traditional clinical practice roles and settings. Rather, dental hygiene must grow and advance



to become part of the comprehensive medical and community health care team, valued as experts based on our foundation in oral health promotion and disease prevention.

Katy Battani, RDH, MS is the project manager of the perinatal and infant oral health quality improvement project for the Maryland Department of Health, Office of Oral Health and a member of the Maryland Pregnancy Risk Assessment Monitoring System. Prior to working in public health, she was a faculty member at the University of Maryland, Baltimore School of Dentistry and served as the graduate program director for the Master of Science in Dental Hygiene program.

References

1. Merriam-Webster unabridged dictionary. Springfield (MA): Merriam-Webster Inc; 2018. [cited 2018 Mar 2]; Available from: <https://www.merriam-webster.com/dictionary/research>
2. American Cancer Society. Key statistics for oral cavity and oropharyngeal cancers. [Internet]. American Cancer Society. Atlanta (GA): American Cancer Society; 2018. [cited 2018 Mar 2]; Available from: <https://www.cancer.org/cancer/oral-cavity-and-oropharyngeal-cancer/about/key-statistics.html>
3. Eke PI, Dye, BA, Wei L, et. al. Update on prevalence of periodontitis in adults in the United States: NHANES 2009 to 2012. J Periodontol. 2015May;86(5):611-22.