

## DOMAIN IV: Dentistry in Society

### Definition

Rather than just 'treating patients', a Dentist must be able to focus on promoting health, monitoring interventions and implementing effective strategies of care. This necessarily involves engaging with health policy, population demography and health promotion, whilst also understanding the healthcare system within which they work.

### Description

Recognising that most of dentistry is provided in a primary dental care setting, where dentists practice as members of teams in healthcare systems, it is vitally important that dentists:

- take account of the wider context within which they practice
- integrate effectively with society
- advocate both general and oral health

The undergraduate curriculum should reflect the importance of these principles and provide students with the opportunity to engage outside of dental settings. To understand populations and their health, new graduates must understand demographic changes and trends in oral health and society, which have major implications for their future patient base and care provision.

Furthermore, they must be equipped to seek to promote the general and oral health of their community and the wider population.

This population health aspect of the dental undergraduate curriculum is often labelled 'Community Dental Health', 'Dental Public Health' (DPH) or 'Preventive Dentistry'. This may be delivered by a range of dental specialties such as Dental Public Health, Community Dentistry or even specific dental specialties such as Restorative or Paediatric Dentistry.

### KEY CONCEPTS:

Evidence-based intervention 4.3.3, 4.5.3, 4.5.4

Health advocacy 4.1.4

Health strategy 4.1.1, 4.1.2, 4.5

Health systems 4.4

Inequality 4.3.7

Oral health trends 4.1.3, 4.2

## **MAJOR COMPETENCE: 4.1: Dental Public Health**

Dental public health is concerned with the 'big picture' or the strategic aspects of dentistry at population level. It has been defined as 'the science and art of preventing oral disease, promoting oral health and the quality of life through the organised efforts and informed choices of society; organisations, public and private; communities and individuals' (Gallagher 2005).

### **Learning outcomes:**

On graduation a dentist must be able to:

- 4.1.1 Define Dental Public Health and discuss its implications for dental practice
- 4.1.2 Describe effective public health strategies
- 4.1.3 Discuss diseases that are recognised public health problems
- 4.1.4 Advocate health with patients and the community including policy leaders

## **MAJOR COMPETENCE: 4.2: Population Demography, Health & Disease**

The graduate dentist must have knowledge of population demographic, social, health and oral health trends together with consideration of the implications for oral disease and its management as together, these have implications for the practice of dentistry. Wider European and global perspectives will be important given dentist and patient movement. The tools for monitoring oral health and assessing needs and their findings should be understood and the implications of findings.

### **Learning Outcomes:**

On graduation a dentist must be able to:

- 4.2.1 Describe demographic trends and discuss their implications
- 4.2.2 Describe the process of assessing population oral health needs including the use of epidemiological tools and indicators
- 4.2.3 Design a study to measure population oral health using simple tools and indices
- 4.2.4 Interpret epidemiology of oral diseases and the implications
- 4.2.5 Discuss national and global oral health trends and their implications
- 4.2.6 Discuss social and economic trends and their implications for health
- 4.2.7 Debate inequalities in health and oral health

## **MAJOR COMPETENCE: 4.3: Health Promotion and Disease Prevention**

A dentist must be able to focus on promoting health, rather than merely treating disease as it presents to them. Promotion of oral health involves recognition of the common risk factors for health and goes beyond an individual behavioural approach. Dentists must recognise that the wider determinants of health need to be tackled at policy, environment, community, clinical practice and personal skill levels. Furthermore, social inequalities in health mean that interventions proposed should be proportionate in order to achieve equitable outcomes (Marmot 2010, Marmot and Bell 2011). Online programmes and tools that identify and help to develop health strategies, are in development, and may contribute positively to the teaching experience (Sipiyaruk *et al.* 2017).

### **Learning outcomes:**

On graduation a dentist must be able to:

- 4.3.1 Describe concepts and definitions of health
- 4.3.2 Discuss determinants of health (and health inequalities)
- 4.3.3 Evaluate and apply the evidence base for health promotion
- 4.3.4 Evaluate the importance and limits of behaviour change at population level
- 4.3.5 Appraise the importance of professional advocacy for population health in achieving change
- 4.3.6 Describe inter-professional approaches to disease prevention
- 4.3.7 Discuss approaches to health promotion and disease prevention which address inequalities in health (proportionate universalism)

### **MAJOR COMPETENCE: 4.4: Healthcare Systems**

Graduating dentists should possess a working knowledge of healthcare systems, including human resources for health, most notably dentistry and the oral health workforce. It is important to gain insight to public and private healthcare systems, the policies governing systems at national and European levels and how healthcare systems serve the population, particularly vulnerable groups, or fail to do so. Knowledge of national policies and those advocated by the World Health Organisation and the United Nations will be particularly important resources, including concepts of universal health coverage and human resources for health, in order to meet sustainable development goals. Additionally, it will be important to explore how health systems are orientating towards managing risk, as well as defined disease, and examining patient experience and outcomes with an emerging emphasis on value-based healthcare.

### **Learning outcomes:**

On graduation a dentist must be able to:

- 4.4.1 Debate the organisation and delivery of oral health care in relation to equity (public and private) of access, quality and outcomes
- 4.4.2 Discuss evidence-based population health care interventions
- 4.4.3 Describe known oral health policies, wider health policy and integration
- 4.4.4 Discuss the mechanisms of delivering healthcare in general
- 4.4.5 Debate equity of care and outcomes
- 4.4.6 Describe various remuneration & payment systems
- 4.4.7 Critique examples of changes in health services at local and national levels

### **MAJOR COMPETENCE: 4.5: Planning for Health and Oral Health**

Just as dentists plan care for individual patients, students should have the chance to explore strategic planning for the health of populations. This should draw on theory and the evidence base for community and population interventions. They should have the opportunity to consider different populations and the needs of different patient groups across the life course. Planning involves planning health promotion activities and health care.

- 4.5.1 Describe the theory of planning
- 4.5.2 Provide examples of effective public health interventions

- 4.5.3 Apply the evidence-base for planning oral health promotion
- 4.5.4 Apply the evidence-base for planning oral and dental services
- 4.5.5 Discuss strategies to best use the dental team for oral health
- 4.5.6 Discuss future research needed to inform oral health promotion and dental care delivery
- 4.5.1 Discuss principles of co-production of care with local communities

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