Annual Report 2004-2005

Communication, Collaboration, Coordination,
Building Stronger Dental Hygiene Communities
**Link between Oral Health and Overall Health**

Access to oral health care is part of the mission statement of CDHA. CDHA’s position is that oral health care is a critical component of total health care and therefore should be a right of all Canadians.

Recent research has linked periodontal disease to heart and lung disease; diabetes; pre-mature, low-birth weight babies; and a number of other systemic diseases. In fact, if left untreated, poor oral health may be a silent contributing factor to some life-threatening diseases, which are responsible for the deaths of many Canadians.

Moreover, a number of studies have shown that the early detection and treatment of oral disease is critical to saving lives. Dental hygiene treatment of periodontal disease may reduce the need for insulin in diabetics, the risk of respiratory disease in high-risk individuals, the number of spontaneous pre-term births, and the risk of loss of life and disability due to cardiovascular disease. Dental hygienists can work with patients to develop oral health care treatment plans that manage oral infection so it does not exacerbate serious diseases.

**Need for Greater Access to Care**

In light of the benefits of proper oral health care, we find it appalling that almost 40% of the Canadian population have inadequate access to oral health services. Barriers that inhibit access to care come in various forms:

- Financial constraints (low-income Canadians, seniors on fixed-incomes, and Aboriginal peoples all face an inability to pay for care);
- Travel distance (people in rural and remote areas do not always have access to a local dental practice);
- Disabilities or residence institutions (people with disabilities and/or who live in institutions may not be able to physically access the places where care is provided).

We must work together to find ways to overcome these barriers. Access to preventive oral health care is not only a socially responsible duty but also a prudent fiscal initiative. We are all aware that both levels of government are spending great amounts of money to provide for the health care of our citizens. Fortunately, public officials are starting to recognize the importance of funding preventive measures to promote health rather than just treat illnesses. This is where an increased access to oral health care and dental hygienists will play an important role. The benefits of early detection and proper treatment of oral diseases can result in a significant cost savings.

Dental hygienists are licensed, preventive oral health care professionals who provide educational, clinical, research, administrative, and therapeutic services that support total health by promoting optimal oral health. Indeed, licensed dental hygienists, by virtue of their comprehensive education and clinical preparation, are well equipped to deliver preventative oral health care services to the public and to do their part in promoting their general health.
Measures Undertaken

CDHA has been actively involved in advocating for policy and program changes within the federal government to improve the oral health status of Canadians. One of the venues for our advocacy work has been making presentations to the House of Commons Standing Committee on Health. Our main recommendations in 2004 were the following:

- Integration of oral health with general health services
- Re-building the public oral health programs that were eroded over the last decades
- Addressing the disparity between high- and low-income Canadians and between Aboriginal peoples and non-Aboriginal peoples
- Collection of accurate data on the oral health status of Canadians
- Implementation of a Canadian Oral Health Strategy

Moving Forward Together

If improvement in the nation’s health care system is to occur, partnerships must be developed among government agencies, health care organizations, and other interested groups to educate the public on the importance of oral health and the integral role of oral health in total health.

We are encouraged by the federal government’s creation of the new position of Chief Dental Officer of Health. We believe the appointment of Dr. Peter Cooney is a landmark decision on the government’s part, which in effect recognizes the crucial important contribution oral health plays in the overall health of our citizens. It is our sincere hope that the federal government—in collaboration with provincial/territorial governments and health agencies—will develop a public awareness program designed to educate Canadians about preventive measures, including those related to disease prevention and health promotion, to improve their health outcomes.

Dental hygienists—in conjunction with other health care professionals and their professional organizations—also have a vital role to play in spearheading initiatives that will create a comprehensive system to resolve our national oral health access issues. CDHA is committed to promoting integrated action by governments, the education system, professional dental hygiene organizations, dental hygiene regulatory authorities, and the public to move toward the creation of oral health care system that improves access to oral health.

We look forward to working in constructive partnership with government at all levels, the general public, and with other stakeholders to ensure effective, long-term changes that will lead to a positive oral and total health care for all Canadians.

DIANE THÉRIault
President, Canadian Dental Hygienists Association
In 1963, several alumnae of the School of Dental Hygiene, University of Toronto, believed it was time to organize graduate dental hygienists in Canada on a national basis. They corresponded with as many dental hygienists as possible across the country and through the combined efforts of the dental hygienists in Alberta and Ontario, an Executive was chosen with Mai Pohlak serving as the first President. The first Convention and General Meeting was held in Edmonton, Alberta, in 1964. Represented at this meeting were dental hygienists from Alberta, Manitoba, Ontario, and Nova Scotia. A provisional Constitution was adopted and Jill Dossett was elected President for 1964-65. In 1965, at the Quebec City Convention, the Board of Directors with delegates from Alberta, Manitoba, Ontario and Nova Scotia ratified the Constitution of the Canadian Dental Hygienists Association. In 1967, after two years of provisional status, the British Columbia Dental Hygienists Association Constitution was approved. In 1970, the Saskatchewan Dental Hygienists Association became the sixth Constituent Association of the CDHA, followed by the Quebec and Prince Edward Island Dental Hygienists Associations in 1972, and New Brunswick Dental Hygienists Association in 1974. In 1978, Newfoundland became the tenth Constituent Association. In 1991, the Quebec Dental Hygienists Association disbanded. The CDHA currently consists of nine constituent associations and a representative from the province of Quebec.
Government Relations and Advocacy

CDHA advocated on a number of different fronts this year, including our work directly with the federal/provincial governments and indirectly with health partners. Our advocacy work alerted government to critical oral health issues, provided direction for government decision makers on oral health matters, and clarified priority issues for government follow-up. This year we brought oral health messages to the federal government through our submission to the House of Commons Standing Committee on Finance. Oral health services were identified as the missing link in the health system. We called for a re-connection of the mouth with the rest of the body, and with the larger health system. Our recommendations focused on access to care, disease prevention and health promotion, public oral health, and health human resources.

We celebrated the outcome of our presentation—our disease prevention and health promotion message was included in the Finance Committee’s report to the House of Commons. The impact of our presentation was significant, given that the committee heard from approximately 600 organizations. The Finance Committee recommended to the House of Commons that “the federal government—working with provincial/territorial governments, the Canadian Institutes of Health Research, and health agencies—develop a public awareness program designed to educate Canadians about preventive measures, including those related to disease prevention and health promotion, to improve their health outcomes.”

CDHA also formed collaborative relationships with federal government departments and bureaucrats to ensure that our members’ voice is heard at all levels of government. Adhering to new lobbyist legislation, CDHA registered with the federal government as an active lobbyist. We also formed a collaborative relationship with Dr. Peter Cooney, the Chief Dental Officer of Health who was appointed in early 2005. This relationship is enhanced by quarterly meetings with him, to share our recommendations for improving the oral health of Canadians and to discuss members’ concerns regarding professional issues. In addition, CDHA also advocated to Health Canada for the inclusion of private colleges in the National Graduates Survey.

CDHA’s advocacy work delivered our message to the general public through the media. Five advocacy letters were sent to newspaper editors this year. Four letters supported the removal of practice restrictions for dental hygienists and outlined advantages of an alternative oral health service delivery model. The letters described how legislation enabling dental hygienists to practise without restrictions from a dentist facilitates access to oral health services. The fifth letter called for increased funding for public oral health programs in schools, long-term care facilities, and community health centres, and for basic oral health services for low-income people, persons with disabilities, and seniors. Issuing press releases is another way we reach the public with our message. Our rapid media response to current federal government issues this year focused the federal budget and the Speech from the Throne.

CDHA advocacy work with our numerous national health partners capitalized on strength in numbers. To stimulate action at the national level, we found common ground this year on a number of health issues with several national health coalitions. Active participation in the Canadian Coalition for Public Health in the 21st Century, the Health Action Lobby, and the Chronic Disease Prevention Alliance of Canada helped to create a unified voice to speak to government regarding federal spending on health and health human resources. Collaboration with these groups kept oral health and the dental hygiene profession on the broad health agenda and provided regular interaction with decision makers at the national level.

Our work with the National Literacy and Health Program assisted in an exchange of information with dental hygienists to better support their low-literacy clients, in relation to their oral health needs. CDHA also brought together a group of five national health organizations, including the Canadian Association for Community Care, Canadian
Association on Gerontology, Canadian Diabetes Association, Dietitians of Canada, and the Society of Obstetricians and Gynaecologists of Canada. This temporary coalition sent a letter to the Federation of Canadian Municipalities (FCM) requesting its support for a Canadian Oral Health Strategy with universal access to oral disease prevention and treatment services. We were successful in this effort, as the FCM showed strong support for this issue by sending a letter to the Minister of Health requesting implementation of the strategy.

CDHA also contributed significantly to consultations and to strategic planning sessions with eight national health organizations, providing comment on principles, critical issues, gaps, and opportunities. We acted as a key informant for the Assembly of First Nations’ review of the Non-Insured Health Benefits Program. Two of the high-priority issues included the need to have dental hygienists obtain provider status, the need to allow direct payment for services, and the need for increased funding for prevention programs. A second key informant interview took place with the Canadian Public Health Association (CPHA) to determine our interest in forming a Public Health Professional Reference Group. We participated in an Enhancing Interdisciplinary Collaboration in Primary Health Care (EICP) workshop in Toronto where we shared our ideas on draft principles and a framework for interdisciplinary collaboration in primary health care. We also assisted in planning for the future direction of several organizations, including the Canadian Association of Health Services and Policy Research (CAHSPR), the Chronic Disease Prevention Alliance of Canada, the Canadian Dental Association, and the National Cancer Institute of Canada. Our ongoing relationship with the Canadian Institute for Health Information led to our participation in a consultation on the Health Human Resources Minimum Data Set Project.

**Improving the Oral Health System through Research**

A new Research Advisory Committee was formed this year, based on a recommendation made during the development of the Dental Hygiene Research Agenda. The committee strengthened CDHA’s research work by focusing the CDHA journal more on research and evidence-based practice and by providing policy direction to position paper and conference development.

CDHA’s position papers/statements provide leadership on important oral health issues. These documents alert CDHA members, the public, and government to important oral health issues. They also provide direction on oral health matters for government decision makers, dental hygiene clinicians, organizations, and educational institutions. CDHA position papers are comprehensive reviews and critical analysis of the literature on specific topics. The framework for development of the position papers/statements includes consultation with issues experts and CDHA members.

This year, CDHA conducted two research projects on the role of the dental hygienist in tobacco cessation. First, we advanced the research on this topic with a members’ survey that indicated 80 per cent of dental hygienists felt it was their role to counsel clients on tobacco cessation. Second, we published a position paper/statement on “Tobacco Use Cessation Services and the Role of The Dental Hygienist.” Compelling evidence shows that tobacco use has a devastating effect on general health and a significant negative impact on oral health. The paper gives an overview of brief and intensive interventions and pharmacotherapies for treating tobacco addiction. It also identifies dental hygienists’ interest and success in assisting individuals to quit tobacco use; however, both cancer screening and tobacco use cessation services are found to be underutilized by dental hygienists. This paper has the potential for considerable impact on reducing tobacco use through increased involvement by dental hygienists in tobacco cessation services. The position paper’s recommendations also prompted CDHA’s involvement in two additional projects on tobacco cessation.

Knowledge translation and dissemination are important components of CDHA’s research work. The position paper on tobacco cessa-
tion was published in the *Canadian Journal of Dental Hygiene*, distributed to government departments and national health organizations, and posted on CDHA’s web site. CDHA also presented this position paper at the National Tobacco or Health conference, the largest Canadian national tobacco control conference ever. This event raised the profile of the dental hygiene profession among the 750 tobacco control and public health professionals, advocates, researchers, executive directors, senior managers, and government bureaucrats who attended the conference.

CDHA spearheaded the birth of the new Canadian Foundation for Dental Hygiene Research and Education, which was launched during our professional conference this year in Newfoundland. The Foundation’s first fundraising event, which raised nearly $21,000, was hosted at this conference.

In the spirit of collaboration, CDHA pulled together a team of researchers from across Canada to develop a knowledge synthesis research project on better practices for developing continuing education programs to enhance dental hygienists’ involvement and effectiveness in delivering tobacco cessation services. The project will examine curriculum content; continuing education principles; theories, teaching methods, and tools; and translating evidence into practice. The research team lead by the Head of Dental Hygiene program at the University of Alberta (Sharon Compton), includes three instructors at the University of Alberta (Barbara Gitzel, Laureen Best, and Dr. Steven Patterson), a public health dental hygienist from British Columbia (Kerri McCaig), a scientist from the Ontario Tobacco Research Unit (Joan Brewster), and a CDHA staff member as co-lead investigator (Judy Lux).

CDHA lent its research expertise to Health Canada’s National Review Committee for Interprofessional Education for Collaborative Patient Centred Practice Research Projects. We joined the committee in an in-depth review and synthesis of research proposals and made a recommendation for $13 million in research funding. CDHA’s contribution to the project was key to the success in changing the way that we educate health providers to work effectively in interprofessional teams within the health system.

**Public Awareness and Media Coverage**

CDHA’s mission to contribute to the health and well-being of the public is partly accomplished through our oral health awareness media campaigns for the general public. Our press releases, which reach close to 1,000 media contacts, kept the focus on oral health and the dental hygiene profession. We promoted events such as National Dental Hygienists Week, International Federation of Dental Hygienists Day, National Oral Health Month, and Listerine Gingivitis Week. Our participation in two interviews with CBC radio, one pertaining to flossing and mouthrinse and the other to the proliferation of dental hygiene products on the market, brought our message to a wide group of listeners across Canada. We were also mentioned in a Saskatchewan newspaper article on gingivitis and a *Toronto Star* article on the link between oral health and systemic health.

Flossing and brushing brochures, developed together with the School of Dental Hygiene at the University of Manitoba and GlaxoSmithKline brought important oral health educational information to the general public. The brochures highlight flossing techniques, causes of tooth abrasion and sensitive teeth, and contain an easy-to-follow diagram on placement and movement of the floss.

**Members’ Services**

An important milestone was reached this year—40 years of providing a unified voice of dental hygienists from coast to coast to coast. The 40th birthday celebrations lasted all year, with monthly member draws and prizes. We continue to recognize the vital importance of providing our members with the tools and information necessary for the profession to deliver quality services and programs.
2004–2005 Highlights - continued

Education and Web Site Services

In 2004, the 15th annual professional conference held in St. John's, Newfoundland and Labrador, expanded the horizons of over 200 delegates from across Canada. The presenters delivered a wide variety of scientific sessions on current topics such as the challenge of practising in long-term care, self-employment, best practices in dentin hypersensitivity, evidence-based decision making. Table displays and poster presentations provided a more intimate environment to meet and chat with researchers about tobacco use and aboriginal athletes, the suction toothbrush, craniofacial malformations associated with fetal alcohol syndrome, the degree-completion program and study groups. We extend sincere thanks to the conference organizing committee who gave generously of their time and creativity to make this conference a resounding success.

CDHA also put a new modern, more professional face on our journal this year with a title change to the Canadian Journal of Dental Hygiene. We also welcomed a new Scientific Editor, Susanne Sunell.

CDHA's web site grows with leaps and bounds as twice each month we add new content to the web site. This growth has been positively received by members who increased their usage this year. The total number of hits on the web site increased from 5 million to 8 million.

We proudly launched a new Student Scene section of the CDHA members’ web site. The student survival kit includes study aids and scholarship information; the research section includes a guide to researching and finding pictures and diagrams on the internet; the regulation section provides important information on what it means to be a regulated health professional; and the career section gives handy job search tips, employment statistics, and defines self-employed versus employee status.

The launch of a new web site component for continuing education courses demonstrated our on-going commitment to lifelong learning. Members showed an overwhelming interest in the new Work-Life-Balance web-based CE course, with over 200 members registered for this course during the last year. This course helped these members develop coping strategies and a personal plan of action to deal with the stress in their life.

An exciting new Professional Development Management Tool was also launched this year. This easy-to-use on-line tool allows members to track their completed and on-going continuing education activities. The information is stored in the CDHA database and members can print a summary for their records or to send it to their provincial regulatory body.

Awards

It is with great pride that we celebrate the efforts of dental hygienists across Canada through our awards program. It allows us to acknowledge the generous time and expertise of outstanding dental hygienists. It was with immense enthusiasm that CDHA presented the prestigious Distinguished Service Award to Dr. Susanne Sunell to recognize her significant contributions to the advancement of the dental hygiene profession and to CDHA at the national level. Celebrating Dr. Sunell’s exemplary activities marks her as an important role model and this strengthens the dental hygiene community.
To the Members
Canadian Dental Hygienists Association/
L’Association Canadienne des Hygienistes Dentaires

We have audited the statement of financial position of the Canadian Dental Hygienists’ Association/L’Association Canadienne des Hygienistes Dentaires as at April 30, 2005 and the statements of operations and cash flows for the year then ended. These financial statements are the responsibility of the Association’s management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Association as at April 30, 2005 and the results of its operations and cash flows for the year then ended in accordance with Canadian generally accepted accounting principles. As required by the Canada Corporations Act, we report that, in our opinion, these principles have been applied on a basis consistent with that of the preceding year.

McCay, Duff and Co. LLP
Chartered Accountants
Ottawa, ON
June 10, 2005
CDHA Gold Sponsorship – Oral-B

CDHA recognized Oral-B as a Gold Sponsor and a valuable CDHA partner—a committed sponsor of dental hygiene over the years. In addition to providing significant support to CDHA’s Annual Professional Conference, Oral-B generously contributed time and resources to the following areas.

Oral-B/CDHA Scholarship Awards

We wish to thank Oral-B for their on-going support of dental hygiene students with the establishment of two separate scholarships. The Oral-B/CDHA Dental Hygiene Baccalaureate Student Scholarship and the Oral-B/CDHA Dental Hygiene Diploma Student Scholarship were awarded to undergraduate dental hygiene students for their contributions to the advancement of dental hygiene within the context of their educational and volunteer activities.

Oral-B Health Promotion Awards

CDHA and Oral-B Laboratories jointly sponsored the Oral-B Health Promotion Awards, in connection with the National Dental Hygienists Week, for a total of $5,000 in prize money. The awards are designed to encourage hygienists to promote oral health in their communities. This year’s submissions demonstrated a strong dedication to community, professional excellence, and advocacy of the wellness benefits associated with proper oral care and dental hygiene. Three prizes were awarded within three categories: Wendy Taylor of Nova Scotia received an award in the individual category for her work bringing oral health education to Turkish school children and their parents; the Ottawa Dental Hygienists Society received an award in the clinic category for distributing multilingual oral health fact sheets; and the Manitoba Dental Hygienists Association received an award in the school category for their work bringing oral health awareness to some of the busiest soup kitchens in Winnipeg. The common factor that linked all three of the 2004 Oral-B Health Promotion Awards winners was their commitment to helping those in need. Across oceans, into communities, and on the street, individuals, associations, and schools brought their unique approach to oral hygiene awareness.

National Dental Hygienists Week

CDHA worked together with Oral-B to launch the “10 Questions to Ask Your Dental Hygienist” campaign. Dental hygienists across Canada posted a brochure in their offices featuring the 10 Questions, which captivated clients’ interest.

CDHA Bronze Sponsorship – Listerine/Pfizer Consumer Healthcare

This year CDHA extended our appreciation to Listerine/Pfizer Consumer Healthcare as a Bronze Sponsor of the 15th Annual Professional Conference and as a valuable CDHA partner.

Gingivitis Week

CDHA proudly announced the Listerine partnership for the first-ever Canadian Gingivitis Week held June 7–13, 2004. This high-profile, national oral health promotion reached 22.5 million Canadians. The media coverage included public service announcements on CTV, and the Comedy Network; print media coverage in Reader’s Digest, Globe and Mail, Toronto Star, and National Post. It also featured broadcast media coverage of interviews with dental hygienists and Sass Jordon; radio outreach; on-line outreach; and on-site special event participation in Vancouver, Toronto, and Montreal.

Gingivitis Week served to educate Canadians about the impact of gingivitis on overall health and also encouraged an open dialogue between clients and their dental hygienist, which raises the profile of the profession in the public eye. This event was a tremendous success and we look forward to continuing our relationship with Listerine to...
further public awareness in this important area of oral health. We also extended our thanks to Listerine/Pfizer for their support of CDHA’s professional conference.

**Tobacco Cessation**

CDHA also acknowledged Pfizer Consumer Healthcare as an important supporter of CDHA’s Tobacco Cessation strategy. This year, Pfizer funded a member poll to gain an understanding of the ways in which dental hygienists are incorporating tobacco cessation practices into their work. The poll data contributed valuable information to the development of CDHA’s tobacco cessation position paper. We look forward to building upon our partnership with Listerine/Pfizer Consumer Healthcare.