

Slide 1

People's Health
An Introduction

Chapter 1

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Slide 2

Learning Objectives
Lesson 1.1: Public Health
Problems and Solutions

1. Define and relate the terms *health*, *public health*, *dental public health*, *community health*, and *population health*.
2. Identify public health problems within a community.
3. Identify public health measures or solutions; relate them to public health problems.
4. Define dental disease as a chronic public health problem with public health solutions.

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Learning Objectives
Lesson 1.1: Public Health
Problems and Solutions (Cont.)

5. Compare the components of private practice and public health practice.
6. Explain the role of the government in public health practice.

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Health, Public Health, and Dental Public Health

- The connection between people's health and community oral health will become apparent throughout the text.
 - Thinking of specific examples will enable you to envision what is meant by the topics of health, public health, and dental public health.

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Health

- Described by the WHO
 - "Health comprises complete physical and social well-being and is not merely the absence of disease."

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Public Health

- Described by the CDC
 - "The science of protecting and improving the health of families and communities through promotion of health lifestyles, research for disease and injury prevention, and detection and control of infectious diseases"

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Public Health (Cont.)

- Public health is concerned with:
 - Prevention
 - Health education
 - Recommending policies
 - Administering services
 - Conducting research
 - Limiting health disparities
- The public pertains to the community, state, or nation.
 - Public health is people's health.

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Dental Public Health

- Described by the American Association of Public Health Dentistry
 - "The science and art of preventing and controlling dental disease and promoting dental health through organized community efforts"

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Dental Public Health (Cont.)

- The form of dental practice that serves the community as the patient rather than the individual
- Concerned with:
 - Dental education of the public
 - Applied research
 - Administration of group dental care programs
 - Prevention and control of dental disease on a community basis

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Community Health

- *Public health* and *community health* are used synonymously in this text.
 - Both refer to the effort that is organized by society to protect, promote, and restore health and quality of life of the people.

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Population Health

- Defined as:
 - "The health outcomes of a group of individuals, including the distribution of such outcomes within the group"
 - An approach to health with a goal to improve the health of the entire population
- One major step in achieving this goal is to reduce the health disparities among population groups.

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Population Health (Cont.)

- The field of population health includes:
 - Health outcomes
 - Patterns of health determinants and policies and interventions

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Public Health/Private Practice

- Practice of dentistry and dental hygiene is integral to dental public health in the United States.
- Community oral health practice is unique in many respects.
 - Extends the role of the dental hygienist in private practice to include the people of the community as a whole

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Public Health Problem

- The spectrum of problems is vast and more extensive than one might first realize.
- Examples of public health problems include:
 - HPV
 - Smoking
 - Newborns born with severe disorders
 - Foodborne illnesses
 - Parasitic diseases
 - Chronic conditions

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Public Health Problem (Cont.)

GUIDING PRINCIPLES
Criteria for Identifying Public Health Problems

- 1. Public health is a discipline of the medical sciences.
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Public Health Solutions

- Examples of solutions to public health problems that most persons are familiar with include:
 - Immunizations
 - Tobacco cessation programs
 - Fluoridation of drinking water
 - Control of exposure to prevent disease
 - Seat belts and air bags in cars to prevent injuries and mortality

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Public Health Solutions (Cont.)

- These public health solutions are concerned with health promotion and disease prevention.
 - They address the problems of the community at large and are effective measures that follow seven characteristics (guiding principles).

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Guiding Principles

- Seven characteristics of public health solutions
 - Not hazardous to life or function
 - Effective in reducing or preventing the targeted disease or condition
 - Easily and efficiently implemented
 - Potency maintained for a substantial time period
 - Attainable regardless of socioeconomic status (SES)
 - Effective immediately upon application
 - Inexpensive and within the means of the community

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Dental Disease as a Public Health Problem

- Dental caries
- Public health and private practice

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Dental Caries

- Significant oral disease that is common and widespread for many Americans, especially children from minority, racial, and ethnic groups, and low-SES individuals of all ages
 - Almost 25% of adults experience some form of facial pain.
 - About 25% of adults aged 60 and older no longer have any natural teeth.

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Dental Caries (Cont.)

- The extent and severity of dental caries warrant the need for treatment and prevention programs throughout the United States.
 - Dental decay, if left untreated, continues to escalate and results in expensive surgical procedures.
 - Therefore it is important to focus on prevention of the disease.

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Dental Caries (Cont.)

- Community water fluoridation is the perfect example of a dental public health solution to the problem of dental decay.
 - Organized community efforts have brought fluoridated drinking water to more than 204 million people.
 - The results have shown a significant reduction in the amount of dental decay.

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Dental Caries (Cont.)

- Dental disease still exists as a public health problem of the twenty-first century.
 - More community dental health education needs to be performed with the implementation of additional dental health promotion and prevention programs.

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Dental Caries (Cont.)

- Dental disease is a dental public health problem of universal prevalence that can be alleviated, and even prevented, with future public health measures.
 - Dental professionals, both in public health and private practice, must work together to educate the community and to provide the necessary programs to treat and prevent further disease.

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Public Health and Private Practice

- Programs to treat dental disease can be conducted on a community (public health) or individual (private practice) level.
 - On the community level, the dental professional treats the community as a patient rather than as an individual.
 - The community oral health steps parallel steps conducted in the private practice.

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Public Health and Private Practice (Cont.)

- Evaluation of the treatment is similar to the program appraisal and should occur during the implementation and at the end of the treatment or operation.
 - This comparison should help the private practice hygienist become comfortable with the concepts of community program planning, implementation, and evaluation.

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Government's Role in Public Health

- Government agencies
- National initiatives
- Core functions of public health

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Government Agencies

- Formal public health programs generally fall under the aegis of the government.
 - Both prevention and delivery of services are concerns within the programs developed by government agencies.

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Government Agencies (Cont.)

- The Department of Health and Human Services (DHHS) has jurisdiction of the federal government's role in participating in dental health-related activities.
 - Goals for 2014–2018
 - Strengthen health care
 - Advance scientific knowledge and innovation
 - Advance the health, safety, and well-being of the American people
 - Ensure efficiency, transparency, accountability, and effectiveness of DHHS programs

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Government Agencies (Cont.)

The organizational chart for the Department of Health and Human Services (DHHS) shows the following structure:

- Department of Health and Human Services (DHHS)
 - Centers for Disease Control and Prevention (CDC)
 - Division of Field Epidemiology and Prevention Control (DFEPC)
 - Division of Laboratory Systems (DLS)
 - Division of Population Sciences (DPS)
 - Division of Prevention Control (DPC)
 - Division of Public Health Practice (DPHP)
 - Division of Surveillance and Control (DSC)
 - Division of Training and Education (DTE)
 - Agency for Healthcare Research and Quality (AHRQ)
 - Center for Healthcare Quality and Patient Safety Research (CHQPSR)
 - Center for Healthcare Delivery and Services Research (CHDSR)
 - Center for Healthcare Equity Research (CHER)
 - Center for Healthcare Innovation Research (CHIR)
 - Center for Healthcare Policy and Law (CHPL)
 - Center for Healthcare Workforce Studies (CHWS)
 - Food and Drug Administration (FDA)
 - Center for Drug Evaluation and Research (CDER)
 - Center for Food Safety (CFS)
 - Center for Tobacco Products (CTP)
 - Center for Veterinary Medicine (CVM)
 - Health Resources and Services Administration (HRSA)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Indian Health Service (IHS)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Medicare and Medicaid Services (CMS)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - National Institutes of Health (NIH)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Public Health Service (PHS)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Transparency, Administration and Policy (TAP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)
 - Division of Health Services and Programs (DHSP)

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Government Agencies (Cont.)

- At the state level, public health agencies have been charged with the task of developing oral health programs within their states.
- These programs:
 - Increase awareness of oral health issues
 - Promote sound oral health policy development
 - Support initiatives for the prevention and control of dental disease

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Government Agencies (Cont.)

- At the local level, dental programs vary throughout the nation.
- Examples may include:
 - Local community health centers providing services for low-income families
 - School-based programs providing oral health education on and disease prevention services to children
- As a result of a decline in funding at all levels, there has been less involvement at this level in recent years.

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National Initiatives

- National oral health initiatives have the common goals of:
 - Promoting oral health
 - Improving the quality of life
 - Eliminating oral health disparities

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National Initiatives (Cont.)

- The 2000 Surgeon General's Report *Oral Health in America* is a 300-page document with a focus exclusively on oral health issues.
 - The major message of the report is that oral health is essential to the general health and well-being of all Americans and can be achieved by all Americans; however, there are profound and consequential disparities within the U.S. population.

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National Initiatives (Cont.)

- Several federal, state, and local initiatives developed in response to the Surgeon General's Report, including:
 - *Healthy People 2010*
 - *A National Call to Action to Promote Oral Health* (2003)
 - *Healthy People 2020*

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Healthy People 2020

- A comprehensive set of disease prevention and health promotion objectives that contains an oral health focus area and oral health objectives
 - Every 10 years, the U.S. Department of Health and Human Services (DHHS) leverages scientific insights and lessons learned from the past decade along with new knowledge of current data, trends, and innovations.

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Healthy People 2020 (Cont.)

- Reflects assessments of major risks to health and wellness, changing public health priorities, and emerging issues related to our nation's health preparedness and prevention
 - Provides a framework to address risk factors and determinants of health and the diseases and disorders that affect our communities
 - Oral health is included with objectives and guidance for reaching the new 10-year targets.

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Promoting and Enhancing the Oral Health of the Public: HHS Oral Health Initiative 2010

- Purpose was to improve the nation's oral health by realigning existing resources and creating new activities in an attempt to maximize outputs.

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Advancing Oral Health in America

- This report described the continuation of the problems of oral disease status and disparities in the population.
- Reinforced the association of oral diseases and complications with medical diseases and conditions

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Improving Access to Oral Health Care for Vulnerable and Underserved Populations

- This treatise highlighted the problems of disparities and suggested strategies to improve access to oral health care.

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Learning Objectives

Lesson 1.2: Public Health Services

- 7. Identify core functions of public health and the essential public health services; relate the essential services to the core functions.
- 8. Identify the current issues and limitations of dental public health.
- 9. Describe the future potential and challenges of dental public health.

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Core Functions of Public Health

- Federal, state, and local programs have been charged to improve the health of the people through assessment, policy development, and assurance.
 - These core public health functions were identified in an Institute of Medicine (IOM) report in 1988; reinforced in 2003.

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Core Functions of Public Health (Cont.)

STICE 1-3 Core Functions of Public Health Agencies at All Levels of Government

Representation

Public health agencies represent and communicate public health issues, policies, and programs to the public. They also represent the public to other government agencies, the private sector, and the media. Public health agencies also represent the public in the development of public health policies and programs.

Policy Development

Public health agencies develop and implement public health policies and programs. They also monitor and evaluate the effectiveness of these policies and programs. Public health agencies also develop and implement public health policies and programs that are based on the best available scientific evidence.

Regulation

Public health agencies regulate public health issues, policies, and programs. They also monitor and evaluate the effectiveness of these regulations. Public health agencies also develop and implement public health regulations that are based on the best available scientific evidence.

Assessment

Public health agencies assess public health issues, policies, and programs. They also monitor and evaluate the effectiveness of these assessments. Public health agencies also develop and implement public health assessments that are based on the best available scientific evidence.

Education

Public health agencies educate the public about public health issues, policies, and programs. They also monitor and evaluate the effectiveness of these education efforts. Public health agencies also develop and implement public health education efforts that are based on the best available scientific evidence.

Research

Public health agencies conduct research on public health issues, policies, and programs. They also monitor and evaluate the effectiveness of this research. Public health agencies also develop and implement public health research that is based on the best available scientific evidence.

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Core Functions of Public Health (Cont.)

- Ten essential public health services have been identified to represent the activities that all communities should undertake.
 - Considered to be vital to achievement of healthy people in healthy communities

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Core Functions of Public Health (Cont.)

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Future of Dental Public Health

- What needs to be done
- Going in the right direction
- Common goal

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What Needs to Be Done

- Over the years, the number of dental public health programs at federal, state, and local levels has declined as a result of tight budgets and diminishing resources.
 - Dental disease persists as a public health problem that can be alleviated and, possibly, eliminated.
 - The knowledge exists, but because of restraints and a lack of resources, this knowledge is not being applied toward the goal of communities free from dental disease.

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What Needs to Be Done (Cont.)

- Pew Charitable Trusts Dental Policy reports that data from 2013 indicate that dental care is one of the greatest unmet needs among children in the U.S.
 - To solve this problem, PEW advocates for:
 - Ensuring that coverage from Medicaid and CHIP leads to real care
 - Increasing the number of oral health professionals who can provide high-quality dental care to low-income children
 - Authorizing dental therapists to extend dental care to underserved populations

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What Needs to Be Done (Cont.)

- It is the responsibility of dental health professionals to emphasize the connection of oral health to people's general health to the policymakers of our nation.
 - Recent public health reports continue to stress the importance of increasing the priority given to oral health by health planners.

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What Needs to Be Done (Cont.)

- Developing alliances with other healthcare professionals can influence oral health in two ways.
 - Dental professionals can affect the lives of patients from a total health perspective.
 - Other healthcare professionals can become aware of the effect of oral health on the systemic conditions they are treating and vice versa.

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What Needs to Be Done (Cont.)

- *"Be Part of the Change" Campaign*
 - Interprofessional collaboration
 - ADHA and Oral Cancer Foundation partnered in an effort to spread awareness of oral cancer to help early detection by dental and medical practitioners.

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What Needs to Be Done (Cont.)

- Affordable Care Act (ACA), aka *Obamacare*
 - Passed in 2010
 - Estimated 11 million to 24 million children and nonelderly adults will gain access to dental coverage by 2018.
 - Gaps remain for low-income adults.
 - Changes will continue to be needed to address certain provisions of the ACA that are aimed at improving the dental public health infrastructure.

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Going in the Right Direction

- Although the dental profession must continue to seek changes to move toward improved oral health of the public, it appears that progress is being made to meet the goals of dental public health.
 - *Healthy People 2020* identified oral health as one of the 12 leading health indicators.
 - Water fluoridation was identified by CDC as one of the 10 most important public health accomplishments of the 20th century.

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Going in the Right Direction (Cont.)

- The American Dental Association (ADA) held a first-ever Access to Care Summit in the summer of 2009.
 - It laid the foundation for a common vision to begin to improve access to oral health care for underserved people.
 - At the conclusion of the summit, the participants identified areas within which to focus future efforts.

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Going in the Right Direction (Cont.)

- Areas included:
 - Workforce development strategies
 - Reorganization of the dental delivery system
 - Financing models
 - Population-based prevention strategies and strengthening the public health infrastructure
 - Improving oral health literacy through social marketing
 - Collaboration between the medical and dental communities
 - Developing metrics for measuring and defining access
 - Building a sustainable infrastructure for communication and collaboration

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Going in the Right Direction (Cont.)

- To meet these goals, the ADA launched a program in 2013, Action for Dental Health (ADH).
 - Designed to give dental care to underserved populations, strengthen and expand the public/private safety net, and bring disease prevention and education to communities

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Going in the Right Direction (Cont.)

- Long-Term Care Dental Campaign
 - Began in 2014 by the ADA
 - Designed to assist state dental associations to create successful initiatives and to train more dentists to serve at long-term care facilities as care providers, advisors, and dental directors

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Going in the Right Direction (Cont.)

- ASTDD
 - Sustains policy development and disease prevention programs through its support of oral health surveillance
- American Dental Education Association (ADEA)
 - In 2011, cosponsored initiative to develop core competencies for ICP to prepare all health professionals to be able to function successfully in a collaborative model

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Going in the Right Direction (Cont.)

- ADHA
 - In 2004, became first national oral health organization to propose a new oral health provider (Advanced Dental Hygiene Practitioner [ADHP]) in an attempt to serve underserved populations

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Going in the Right Direction (Cont.)

- Significant changes in workforce models are taking place to address the access to care problem.
 - The number of states that allow the public to have direct access to oral healthcare services of a dental hygienist in at least one practice setting rose from 28 states (2008) to 37 states (2014).

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Going in the Right Direction (Cont.)

- In 2005, the ADHA adopted an updated version of the six roles of the dental hygienist.
- In 2013, the ADHA, the ADHA Institute of Oral Health, and the Santa Fe Group collaborated to hold the symposium *Transforming Dental Hygiene Education: Proud Past, Unlimited Future*.

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Common Goals

- The goal of dental public health is optimal oral health for all citizens and universal access to comprehensive dental care.
 - Both dentists and dental hygienists, with this goal in mind, have entered the field of public health by accepting employment within programs that include health promotion, community disease prevention, and provision of dental care to selected groups of people.

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Common Goals (Cont.)

- Dentists become recognized specialists in the field of dental public health through specialty certification with the American Board of Dental Health.
 - In most states, dental hygienists have no required formal or specialty education to work within this field in the community, although some have pursued advanced degrees in public health or community health.
 - Further education prepares dental hygienists to work with underserved populations who continually face barriers to health care.

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Common Goals (Cont.)

- Competencies for graduate education for dental hygienists were developed jointly by ADHA and ADEA.
 - Proficiencies are based on the recognition that further education prepares the dental hygienist to meet the challenges of working with underserved populations that continually face barriers to health care.
 - Advanced education has been suggested for dental hygienists filling the expanded roles of alternative workforce models.

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Summary

- An understanding of people's health includes learning the basic terminology to define health, public health, dental public health, community health, and population health.
- People's health is the health of the public living within a community, state, or nation.
- Identifying public health problems and solutions provides dental hygienists with the knowledge to explore this field of health further and a means by which they might become involved.

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Summary (Cont.)

- The government's role in people's health is mentioned briefly as an introduction to the programs to be discussed in more detail in future chapters.
- Comparison of private practice with community oral health practice demonstrates the similarities and prepares dental hygienists for the planning, implementation, and evaluation phases that constitute public health programs.

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Summary (Cont.)

- As health care providers with many roles and responsibilities, dental hygienists have a calling and a duty to serve the community in which they live.

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Questions?

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