The Robert Wood Johnson Foundation’s Response to Improving the Nation’s Oral Health

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This supplement to the American Journal of Preventive Medicine on oral health preventive measures is an important addition to the literature and will be welcomed by health planners, community organizations, researchers, grantmakers, and others who are concerned about the “silent epidemic” of oral diseases. The Surgeon General’s Report (2000) on oral health disparities has helped to raise the level of public concern that tens of millions of Americans—the poor and near poor, ethnic and racial minorities, the disabled, and those in rural areas—suffer from oral diseases but do not have access to basic preventive and restorative dental services.

Unfortunately, access and oral health disparities are likely to increase in the coming years as the population grows faster than the number of dentists. Under these conditions, effective community-level preventive measures offer the best hope for reducing oral health disparities. Brown et al. compared the number of decayed and filled tooth surfaces in children aged 6 to 18 years by family income from 1971 and 1994. Tooth decay declined for all income groups—associated with the use of ingested and topical fluorides—and especially for children from low-income families.

The three papers in this supplement provide a useful compendium on the current state of scientific knowledge on the impact and cost-effectiveness of community-level programs to prevent three important oral diseases: caries, oral and pharyngeal cancers, and sports-related craniofacial injuries. The authors’ reports provide convincing scientific evidence about the effectiveness of different community preventive interventions. They use this body of research as the basis for making their recommendations.

The reports are organized for readers with different levels of knowledge and interest in the subject. Thus, health planners will find a concise set of recommendations, and academicians will have access to a comprehensive and detailed summary of the literature on which the recommendations are based. Philanthropic organizations can use this information to develop intervention strategies, turning research into action and focusing on the systemic problems that lead to disparities in oral health status and care.

Several foundations have supported a range of activities to improve dental access among vulnerable populations. The W. K. Kellogg Foundation has made oral health a focus in all 13 sites of its national initiative to improve health care access and quality for the underserved, Community Voices. The California Endowment has expanded the capacity of grantees to deliver oral health services. The Sierra Foundation has supported several oral health projects in schools and rural communities. The United Methodist Health Ministry Fund has invested in a multi-level campaign to prevent dental disease in Kansas. The Washington Dental Service Foundation funds a public awareness and advocacy initiative to improve oral health in Washington. Some local funders have supported efforts to raise the visibility of oral health status and the disparities in access. Other foundations have focused on promoting water fluoridation, expanding prevention and treatment services, building the field of research, and exploring ways to broaden the dental workforce. Grantmakers in Health’s Issue Brief Filling The Gap: Strategies for Improving Oral Health (2001) provides a detailed description of public and private sector initiatives to address the oral health needs of the nation.

The Robert Wood Johnson Foundation (RWJF) has supported projects to improve health and health care for all Americans for over 30 years, and has recently reinvigorated its commitment to oral health. Throughout the 1970s and 1980s, the Foundation supported a variety of dental health programs. In 1972, its initial year as a national philanthropy, the Foundation launched a $4.1 million Dental Student Aid Program. Four-year scholarships and loans were offered to underrepresented minority students, women, and applicants from rural areas to encourage graduates to practice in underserved communities.

RWJF’s Dental Training for Care of the Handicapped (1973–1978) supported 11 dental schools in their efforts to develop curricula instructing dental students in the care of disabled patients. The program’s goal was to increase the number of community dentists who had the skills and competence to treat special-needs children and adults. Today, these types of train-
ing programs have been institutionalized at almost every dental school in the United States.5

In 1975, the University of Pennsylvania School of Dental Medicine received support from the Foundation for a 4-year, $2.6 million program to evaluate several methods of improving the oral health of school children in a nonfluoridated rural Pennsylvania county. While this study found a reduction in untreated dental disease, oral health education had no measurable effect. About the same time, the Foundation also provided an award of $5 million to the American Fund for Dental Health’s National Preventive Dental Care Program (1976–1980), to determine whether dental caries in children could be reduced through a comprehensive school-based preventive dental program. Among the most significant findings in this study was that about 20% of the children evaluated developed 80% of the observed dental disease.5

In the early 1980s, RWJF established the Dental Service Research Scholars Program (1982–1990) to enable dental school faculty to acquire research skills to study financing, organization, and the delivery of dental health services. Thirty scholars completed the program, among them some of today’s outstanding dental researchers and leaders. A more complete retrospective of the Foundation’s early investments in oral health can be found in To Improve Health and Health Care 2001, The Robert Wood Johnson Foundation Anthology.5

The RWJF’s most significant national program in oral health to date is Pipeline, Profession and Practice: Community-Based Dental Education, launched in May 2001 and located at Columbia University School of Dental and Oral Surgery. The Pipeline program is a $19 million initiative to expand the dental workforce to include more minority and low-income students, to improve the skills, confidence, and sensitivity of dental students in serving vulnerable populations, and to provide oral health care to those who need it most. Several elements of the RWJF program were drawn from a study funded by the Josiah Macy Jr. Foundation6 that assessed the feasibility and impact of community-based programs on the delivery of dental care to the underserved. The study’s recommendations noted the considerable promise of community-based dental education and recommended demonstration funds to assist the schools in undertaking this transformational change at their institutions.

Around the same time that the Surgeon General released the Report on Oral Health, the Robert Wood Johnson Foundation received a noticeable increase in the number of unsolicited proposals requesting funds to address the oral health needs of children, adults, elders, special needs populations, and the millions of Americans without dental insurance. Stimulated by the Surgeon General’s Report, the Macy Foundation’s study, and our own grant applicants, Foundation program staff spent about 18 months learning from dental policymakers, providers, academicians, researchers, advocates, and consumers to help chart a direction for a Foundation program to reduce dental access disparities. From these discussions and meetings, other problems with the nation’s oral health quickly emerged, including a trend showing a decline in the number of dental school graduates since the 1980s, a decline even more pronounced for minority and low-income students.

These trends generated a growing concern at the Foundation about the limited number of dentists able and willing to provide care to vulnerable populations in distressed communities, and convinced RWJF to develop a workforce program that focused first on the dental schools with its Pipeline, Profession and Practice: Community-Based Dental Education program.

Pipeline, Profession and Practice concentrates on three aspects of dental education:

- the effective recruitment and retention of low-income and minority students in dental schools,
- the establishment of community-based practice sites for senior students and residents to provide services to those most in need, and
- the development of a core curriculum in dental schools that supports service delivery in the community.

These issues are very familiar to the nation’s schools of dentistry, and a handful of schools have already begun to change the approaches they use to recruit a more diverse student body and to respond to the pressing needs of vulnerable populations. However, most dental schools have been unable to invest in the long-term strategies required to implement effective recruitment, retention, and community-based education programs. Nevertheless, dental schools have shown significant interest in the Pipeline program. Forty-two of the 55 dental schools submitted Letters of Intent for RWJF’s Pipeline program and ten schools will be selected in August 2002, each to receive five years of funding, for up to $1.5 million dollars. At least 25% of the awarded funds must be directed to recruitment and retention programs.

The W.K Kellogg Foundation has partnered with RWJF to provide an additional $1 million of support to the Pipeline program, for individual scholarships and loans targeted to the low-income and minority students who will be attending the selected dental schools. W.K. Kellogg has been a leader in philanthropic efforts to improve diversity within the health professions and has reinforced its long-standing commitment to oral health in its five-year $55 million Community Voices project.7 Pipeline, Profession and Practice is the keystone of a Robert Wood Johnson Foundation strategy to address the urgent oral health needs of the nation. While we hope the Pipeline project will stimulate change in dental workforce and community practice, RWJF sup-
ports other projects targeted to oral health in schools, in communities, and via state programs. Continuing its 30-year commitment to school-based health centers, RWJF awarded $6.5 million in 2001 to George Washington University’s Center for Health and Health Care in Schools, a national program to test and promote effective school-based health programs, including the development of school-based dental and mental health care. These school-based health centers are located in elementary, middle, and senior high schools.

Neighborhood-based dental health projects have also been a consistent component of the Foundation’s support of local health efforts. Through the Foundation’s Local Initiatives Funding Partners, several innovative community-based dental projects supported by local foundations have received RWJF matching funds. These oral health projects range in scope from providing preventive dentistry to Amish children to offering reconstructive and restorative dental care to homeless adults.

State Action for Oral Health Access is the Foundation’s most recent contribution to improving oral health. A $6 million competitive grant program, this initiative is designed to test comprehensive state approaches to reduce dental access disparities for low-income, minority, and disabled populations. Its focus will be on states that have made significant improvements in the public safety net by increasing reimbursement rates, streamlining administrative and billing procedures, and conducting patient outreach and compliance activities. Five to seven states will each be awarded three-year grants for up to $1 million to further develop state financing and purchasing strategies, to broaden provider networks, to expand the dental safety net, and to enhance consumer and provider education.

Improving oral health and dental care will require that foundations develop a balanced portfolio that considers the capacity of the dental workforce, rewards promising innovations on the state and local levels, supports efforts to extend dental services to the medically underserved, and provides the research and policy analysis required to sustain long-term and fundamental change. RWJF will continue to address each of these areas in our strategy to reduce oral health disparities for the nation’s most vulnerable populations.

References