Policy and Advocacy Efforts by Oral Health Professionals to Reduce SSB Consumption and Prevent Obesity

Session II: What We Can Do
Ankit Sanghavi, B.D.S., M.P.H.
Co-author: Nadia Siddiqui, M.P.H.
November 3, 2016
Washington, DC

Disclosure and Presentation Support

The author and co-author have no financial or other conflicts of interest to disclose

This presentation was supported by a grant from the Robert Wood Johnson Foundation
Over the past three decades, the consumption of fruits and vegetables in the U.S. has decreased and the consumption of sugar sweetened beverage (SSB) has steadily increased. While public health programs and policies in recent years have gained momentum to reduce SSB consumption, significant knowledge gaps remain on the most effective national, state, and local policy and economic vehicles. It is also less clear what role individuals and organizations in other health sectors, especially oral health, are playing to help curb SSB consumption.

Volume → Value

An opportunity for intersectoral collaborations in all aspects of healthcare and public health. Oral health professionals are in prime position to play a key role in the fight against obesity. This review represents an important first step toward understanding which types of oral health efforts would be more applicable and effective in informing policy development and advocacy efforts to reduce SSB consumption and prevent obesity among children.
**Objective**

* To identify and synthesize existing evidence of efforts by oral health professionals and organizations to reduce SSB consumption and advance childhood obesity prevention through policy and advocacy
* How to leverage, replicate these efforts?

**Methodology**

* Scoping review - allows for large scale accumulation of literature, and mapping of the evidence there in, eliminating methodological bias to determine the extent of the research themes and gaps for future research efforts
* Two-step strategy:
  - Systemic review of peer-reviewed literature
  - Web-based review of oral health organizations
Systematic Review of Peer-Reviewed Literature

Three broad descriptors to categorize search terms
* Provider
* Topic
* Population

Web-Based Review of Oral Health Organizations

* A selective search of relevant websites
* Search terms for identifying additional websites
* Search terms for identifying content
### Inclusion Criteria

<table>
<thead>
<tr>
<th>Factor</th>
<th>Criteria</th>
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<tbody>
<tr>
<td>Language of publication</td>
<td>English</td>
</tr>
<tr>
<td>Years published</td>
<td>2000-2016</td>
</tr>
<tr>
<td>Country</td>
<td>United States</td>
</tr>
<tr>
<td>Age group</td>
<td>0-12 years</td>
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<tr>
<td>Search categories and terms</td>
<td>Oral health, childhood obesity, SSB consumption, policy and advocacy efforts.</td>
</tr>
<tr>
<td>Author backgrounds</td>
<td>Oral health provider, professional, organization, association</td>
</tr>
<tr>
<td>Type of data sources</td>
<td>* Peer-reviewed research</td>
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<td></td>
<td>* Professional guidelines</td>
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<td></td>
<td>* Clinical &amp; policy guidelines</td>
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<td>* Advocacy tools</td>
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<td>* Literature reviews</td>
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<td>* Intervention evaluations</td>
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<td>* Technical commentary</td>
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<td>* Policy statements</td>
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* Peer-reviewed literature – 30 unique citations identified

* Of these, 5 met the inclusion criteria

* A common theme **weight measurement** followed by **nutrition counseling** in the pediatric dental office.
Summary of Peer-Reviewed Literature

* Framing and Messaging of Obesity Prevention in Oral Health Settings
  - It’s not what children eat that causes dental caries, but rather how and when they eat it.
* Emerging Guidelines and Interventions for Obesity Prevention in the Oral Health Setting
  - Oral health care professionals (OHCP) are uniquely positioned and provide an ideal setting to provide basic weight screening and oral health education.
* Impact of Oral Health Interventions and Other Empirical Evidence
  - Pediatric dentists identified obesity as a major health concern and healthy weight intervention in pediatric dental office encourages better food choices.

Web-based review of oral health organization websites—6 publications identified and included in the review

- Valuable insights in identifying existing tools, policies, and guidelines that encourage limiting SSB consumption and obesity prevention efforts by oral health professionals
- No published literature to support the efficacy or effectiveness of these guidelines and policies
Summary of Web-Based Review

- **Establishing the Role of Oral Health Professionals in Obesity Prevention**
  - Clinical guidelines and policy statements to support nutritional counseling in pediatric dental office, and support future research efforts.

- **Oral Health Improvement and Obesity Prevention in the School Setting**
  - Policy and guidelines to integrate oral health education in school nutrition curricula including limiting SSB consumption.

- **Emerging Tools for Advocacy and Education**
  - The drink pyramid, a graphical tool to educate young children and parents about healthy drink choices.

Limitations

- The review was time-specific and may not have identified all existing activities
- Does not evaluate the quality of the literature reviewed
- Organizations and coalitions may have programs that advocate for healthy eating and reducing SSB consumption but they may not be writing about it or sharing their activities
- Reviewing a webpage one time is only a snapshot of the group’s activities and is unlikely to find all of their efforts
The review of the literature found
* Limited evidence of policy and advocacy efforts by oral health professionals
* No evidence to support the effectiveness of existing policies and guidelines

However, of the work that does exist, our review suggests
1. Oral health professionals have a role in SSB consumption and obesity prevention
2. Promising interventions exist but require more research
   a. Child Dental Visits –
      i. Nutrition counseling
      ii. Education
      iii. Linking to other providers
   b. School-based programs
   c. Public/Community programs
3. Opportunity to leverage existing efforts by oral health associations and organizations at the local, regional, and state level
Moving Forward

Opportunities to Consider
* The ‘5210 model’ by FDA Food Plate
* Soda-taxations efforts
* Increasing water intake in schools
* Intersectoral collaboration