



## SOHC Inc. Newsletter Spring 2023

Updated website by Objectified Software <http://www.saskohc.ca/>

The SOHC Inc. serves as a collaborative, inter-disciplinary group that addresses the needs of vulnerable populations to improve the oral health and overall health of Saskatchewan people.

In This Issue:	Page
Better Oral Health Program in Long Term Care	<a href="#">2</a>
Meet the Saskatoon Urban Oral Health Program Team	<a href="#">3</a>
New Dental Therapy Program	<a href="#">4</a>
A SMILE Book	<a href="#">4</a>
Encircling Older Adult Care Event	<a href="#">5</a>
Children's Oral Health in Saskatchewan 2018-19 Report	<a href="#">6</a>
April is Oral Health Month	<a href="#">7</a>
Activities for Kids; Oral Care for Children Resources	<a href="#">8, 9</a>
Diabetes, Healthy Heart and Tips for Seniors Resources	<a href="#">10</a>
Indigenous Languages Across Canada Census	<a href="#">11</a>
Indigenous Insight Newsletter	<a href="#">11</a>
Canada Dental Benefit	<a href="#">12</a>
CDP Only Matters if It Gets Children Into Dental Offices	<a href="#">13</a>
Mosaic Newsletter, CAPHD Membership	<a href="#">14</a>
Covid-19 Rates Among Canadian Dental Hygienists	<a href="#">15</a>
Covid-19 Among Dentists in the Community in Canada	<a href="#">15</a>
SARS-CoV-2 Infection Among Oral Health Care Workers	<a href="#">16</a>
Special Issue: Advancing the Behavioral and Social Sciences to Promote Oral Health	<a href="#">16</a>
Fluoride: Assessment for Development Neurotoxicity	<a href="#">17</a>
Building Effective Public Dental Care Programs	<a href="#">17</a>
Early School-Based Treatment Could Prevent Cavities	<a href="#">18</a>
Oral Health in a Bold Golden Frame	<a href="#">19</a>
Understanding Dental Caries as a Non-Communicable and Behavioral Disease	<a href="#">19</a>
Global Oral Health Status Report	<a href="#">20</a>
Impact of Community Water Fluoridation	<a href="#">21</a>
ADPH Leads Consensus on Child Oral Health	<a href="#">21</a>
SOHC Professional Development 2022 Links	<a href="#">22</a>
Membership and Contact Information	<a href="#">22</a>

### SOHC Inc. Annual General Meeting (AGM)

will be held *virtually* on  
Monday, May 8, 2023  
9:00 – 10:00 a.m.



[Complete Registration form here](#)

SOHC Inc. received Charitable Organization status in June 2022 and will provide tax deductible receipts for donations.

### [DONATE NOW](#)

Your donation will go towards covering the cost of dental treatment for people in need, or those who have complex life issues with no dental insurance or ability to pay for treatment. It also helps provide basic oral health care supplies to those who cannot afford to purchase them.

### APRIL IS ORAL HEALTH MONTH

\* See Pgs. 7-10 for Resources and Links







## Better Oral Health Program in Long-Term Care

Better Oral Health in Long-Term Care: Best Practice Standards for Saskatchewan (BOHLTC) aims to improve the oral health of residents living in long-term care (LTC). To support the program, the Saskatchewan Health Authority and the Health Sciences Association of Saskatchewan have recently reached agreement on a new classification of senior dental hygienist.

The Saskatoon program, which began in 2013, showed significant improvements in the oral health of LTC residents. Senior dental hygienists are pivotal to the initiative's success.

Senior dental hygienists provide prevention and treatment services that keep a resident's teeth, gums and periodontium (bone surrounding the tooth) healthy. They provide oral health education to nurses, clinicians and continuing care aides so the connection between oral systemic disease and inflammatory diseases is understood. The BOHLTC supports and mentors staff; acts as the liaison between residents, families and dentists who visit homes; and promotes the importance of oral health. This extends to acute care settings.

This partnership highlights how operational leaders, Human Resources, HSAS union and SAHO, working together collaboratively, can lead to successful outcomes that benefit our patients, clients and residents.



*Dental hygienist working with resident*





## Meet the Saskatoon Urban Oral Health Program Team

Oral health is a critical part of overall health. Healthy teeth and gums are necessary to chew properly, speak clearly and smile brightly. Oral disease is the most common chronic disease in the world today. Periodontal disease is known to impact cardiovascular disease, diabetes, dementia, obesity, cancers, rheumatoid arthritis, and pre-term/low weight babies, among others. Oral disease is preventable and is recognized as a basic human right. A person cannot be fully healthy when oral disease is present.

The Oral Health Program (OHP) team includes dental therapists, dental hygienists, dental assistants, a dental aide and consultant dentist providing the following services:

- Dental treatment, at no charge, for children, youth, and adults who can not afford, or access, dental care. The clinics are located at West Winds Primary Health Centre and White Buffalo Youth Lodge.
  - Dental assessments, referrals, education, fluoride varnish, silver diamine fluoride, ART, and dental sealants in schools, preschools, and daycares that do not meet Canadian oral health goals.
  - Fluoride varnish and education at targeted daycares, health centres and child health clinics.
  - Dental examinations, consultations, referrals, prevention and temporary treatment services for older adults at the Community Health Clinic in Market Mall.
  - In long-term care homes (LTC), Better Oral Health is available to all Saskatoon Urban LTC homes and affiliates. Staff provide dental assessments, referrals, and prevention services for residents in addition to training of LTC staff to provide assessments and daily oral care.
- [Better Oral Health in LTC - Best Practice Standards for Saskatchewan, Staff Portfolio](#)
- Population Health surveillance studies that monitor the oral health of the population. [Click here for the latest report](#)
  - Support and donations in the community for basic oral health-care supplies.
  - [Health promotion and health education resources](#) for the public.

For more information contact the OHP at **306-655-4469**.







The new Dental Therapy program will begin classes in August 2023. (Adobe Stock Photo)

## New Dental Therapy program begins classes in August 2023

The application period is open from March 22 until May 15, 2023, for the two-year Bachelor of Science in Dental Therapy direct-entry program, as well as a one-year degree option available to registered dental hygienists or internationally trained dentists. Complete information is available on the [program's admissions website](#). The program's application form will be available beginning March 22.

Click [here](#) for more information



An informative book for caregivers on pediatric oral health care; created in partnership with the community of La Loche, University of Saskatchewan and the Colleges of Nursing, Dentistry, and Medicine. Written in English and Dënësųlinë.

View/Open  
[Informative book](#)  
(28.27Mb)

[Informative book](#)  
with audio (29.63Mb)

[A Smile - audio only](#)  
(1.100Mb)

This project was completed in partnership with the community of LaLoche, University of Saskatchewan and the Colleges of Nursing, Dentistry, and Medicine.



A special thanks is extended to Connie Cheecham, Mary Ruelling and Lisa Cheecham for translation. Cover, Peter Apsit photo courtesy of grandson Peter Laprise.

Funding for this project was provided by the Saskatchewan Health Research Foundation.



Edıř ęrtı's taręıřų ęlę hól, University of Saskatchewan hól, College of Nursing hól, Dentistry chł Medicine.

Edıř ęrtı's hól Saskatchewan Health Research Foundation náyęłnı.





## Better | LTC

LIVING IN THE MOMENT

# Encircling Older Adult Care

**A Summit to Create Connections & Community  
for All Persons Caring with Older Adults**



**CARERS | COMMUNITY PARTNERS | SERVICE PROVIDERS  
STUDENTS | VOLUNTEERS | ORGANIZATIONS**

**WHO:** This event is for anyone involved in (or curious about) older adult care

We will bring together a diverse group of individuals, experts, and organizations (including for- and non-profit). This may include *long-term care, home care, preventative programs, keeping active, and health promotion activities.*

**WHY:** Build connections, learn, and strengthen the circle of older adult care

**WHEN:** 11AM - 7PM, April 25, 2023

**WHERE:** Western Development Museum, Saskatoon, SK

**GENERAL ADMISSION: FREE OF CHARGE, PLEASE REGISTER TO SAVE YOUR SPOT**

**TO REGISTER, CLICK OR COPY:** [www.betterltc.ca/encirclingcaresummit](http://www.betterltc.ca/encirclingcaresummit)  
**BOOTH & PRESENTER REGISTRATION DEADLINE: MARCH 24, 2023**



### EVENT FEATURES

- Human Library
- Networking Bazaar
- International Educated Nurses (IEN) Information Sharing
- Poster Presentations
- Micro-Learning Sessions:
  - Oral Care In Long-Term Care
  - Medications In Older Adults
  - Meals and Assistance
- CPR Course \$85 (contact us to register, space limited)

### KEYNOTES BY:

Suzanne Dupuis-Blanchard  
Jodi Hall

**INQUIRIES: BRIANNA.HAMMOND@USASK.CA  
306-202-6770**







# Children's Oral Health in Saskatchewan

## 2018-19

Saskatchewan Health Authority Oral Health Program

### Executive Summary

The Children's Oral Health in Saskatchewan Report for 2018-19 includes information to assess oral health status of children in the province.

The 2018-19 Report provides a comprehensive appraisal of the dental health of Grade One and Seven students in Saskatchewan. It is the sixth screening survey of the Saskatchewan Dental Health Education Program since its introduction in 1993-1994.

Comparisons to previous years are noted where applicable.

Read the full report [here](#)

### Highlights

- Over 24,000 students from across the province participated in dental screening for 2018-19 school year.
- Unfortunately many Grade Ones' oral health outcomes were worse in 2018-19 as compared to previous years.
- Grade Sevens' outcomes showed more promise in 2018-19.
- Most of the Canadian Oral Health Framework standards have not been met.

Brush twice a day – in the morning and at bedtime.  
Children need help brushing until about the age of 8.



Outside



Inside



Chewing surfaces

Angle brush; place half on teeth, half on gums, vibrate side to side

Brush the inside of the front and the back teeth

Vibrate back and forth

Floss once a day.

Children younger than 9 will need a parent's help.



Wrap floss around middle fingers. (about half an arm's length)



Gently guide between teeth



Move floss up and down, sliding under gumline, on both adjacent teeth





## April is Oral Health Month

What better time than to think about how you take care of your mouth? Not only is good dental health important to having healthy teeth and gums, but it may also lower your risk of chronic disease. Read on for how your health and happy smile go hand in hand.

### **Taking care of your smile**

Here are some reasons why good dental hygiene is important:

- Oral pain (such as tender, bleeding gums), infections and missing teeth can affect your ability to eat, talk and socialize. Being unable to eat can affect your nutrition, not to mention your enjoyment of food.
- Research now shows that there is a connection between poor dental health and chronic diseases like diabetes, heart disease and stroke.

### **Healthy mouth checklist: Are you doing these four things to keep your mouth healthy?**

#### **1. Make nutritious food choices, while limiting foods that are high in sugar or acid**

Foods high in [sugar](#) can cause cavities. Foods high in acid, such as pop, orange juice and lemonade can cause acid erosion of your tooth enamel. This can damage your teeth and make them soft and sensitive.

#### **2. Visit your dental professional regularly**

Regular checkups mean your dental professional can clean your teeth and check for signs of oral disease. This can prevent problems or stop small problems before they get worse.

To find a dentist in your area, contact your [provincial or territorial regulatory authority or dental association](#). Many association websites have a dentist locator or dentist directory.

#### **3. Keep your mouth clean by brushing and flossing everyday**

Use a soft-bristle toothbrush with fluoride toothpaste to brush your teeth and tongue twice a day. Don't forget to floss! When you don't floss, you miss cleaning a third of your tooth surface.

Follow these instructions and diagrams on how to [brush](#) and [floss](#) properly.

*Check your mouth on a regular basis. If you spot any of these [warning signs](#), see your dental professional right away.*

#### **4. Avoid tobacco**

Smoking or chewing tobacco can lead to mouth cancers, gum disease and tooth loss.

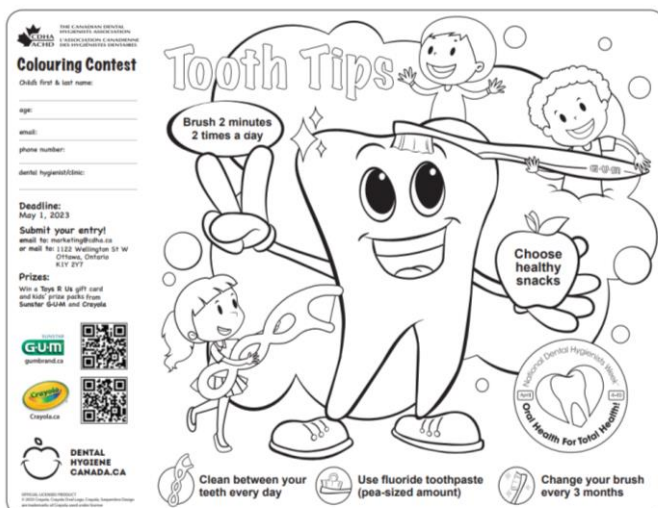
For more on tobacco and your health: [Smoking and Nutrition](#).

\* Article taken from [unlockfood.ca](#)



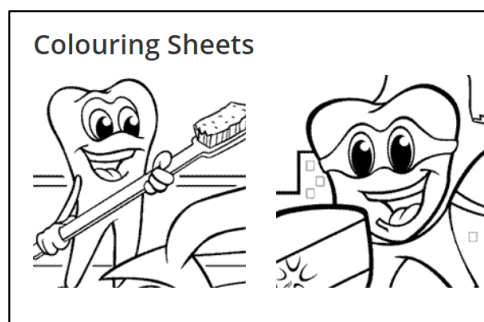
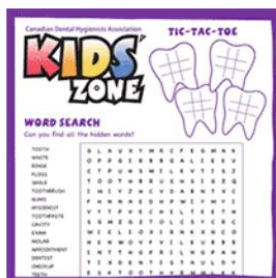
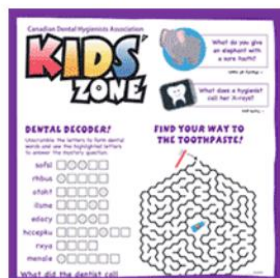


THE CANADIAN DENTAL  
HYGIENISTS ASSOCIATION  
L'ASSOCIATION CANADIENNE  
DES HYGIÉNISTES DENTAIRES



[The Canadian Dental Hygienists Association- 2023 colouring contest-](#) deadline May 1

## Activity Sheets



Dental Hygiene Canada- [Fun Stuff for Kids](#)

\*click on pictures for links

Order Your Kits Today!  
**Teacher Resources**





**DENTAL  
HYGIENE  
CANADA.CA**



**THE CANADIAN DENTAL  
HYGIENISTS ASSOCIATION  
L'ASSOCIATION CANADIENNE  
DES HYGIÉNISTES DENTAIRES**



## Oral Health Care for Children Aged 7-12

At this age, children are more capable of taking care of their own teeth. But they still need guidance and, in some cases, supervision from parents and guardians. Help them develop strong oral hygiene habits with the following gentle reminders.



- Clean between the teeth every day using floss, soft picks or a small interdental brush.



- Brush all tooth surfaces twice a day for at least 2 minutes with a pea-sized amount of fluoridated toothpaste. (Using a 2-minute timer is a fun way to make sure that every tooth is brushed!)



- Choose water over fruit juice or pop, and eat healthy snacks such as apples, raw vegetables, cheese, and plain yogurt.



### Downloads:

#### Oral health tips for kids 7-12

(PDF)



[Oral health tips for kids 0-3 \(link\)](#)

[Oral health tips for kids 3-6 \(link\)](#)





**DENTAL  
HYGIENE  
CANADA.CA**



**THE CANADIAN DENTAL  
HYGIENISTS ASSOCIATION  
L'ASSOCIATION CANADIENNE  
DES HYGIÉNISTES DENTAIRES**

Click on pictures for Resource links

## Diabetes and Oral Health

**One in three Canadians has diabetes or prediabetes.**

You may know of the relationship between poor oral health and bad breath, cavities or even heart disease, but **did you know that poor oral health can affect how well you control your diabetes?** Diabetes can even increase your risk of developing certain oral health conditions.

Signs and symptoms of diabetes include:

Increased thirst and frequent urination
 Increased hunger
 Unexplained weight loss
 Fatigue
 Slow healing sores
 Frequent infections

## A Healthy Smile Is Good for Your Heart

### How does oral health affect heart health?

When your dental hygienist reminds you to brush, floss, and rinse daily, it's not just to protect the health of your teeth. Poor oral hygiene allows harmful bacteria to grow in your mouth. These bacteria cause bad breath, sore, inflamed gums (gingivitis), and tooth and bone loss (periodontitis). They also travel through the bloodstream to other parts of your body. If these bacteria reach your heart, they can cause a serious infection called endocarditis. Bacteria in the bloodstream can also contribute to clogged arteries, which increase your risk for heart attack and stroke.

### Signs of poor oral health

- Red, swollen or tender gums
- Bleeding gums while brushing or flossing
- Gums that are separating or receding from the teeth
- Bad breath or a bad taste in your mouth
- Infection, such as pus, in the gums
- Tooth decay
- Loose teeth

### Whose heart health is at risk?

Individuals with advanced, chronic gingivitis or periodontitis
 Individuals with diagnosed heart disease or a previous stroke
 Individuals with high blood pressure, high cholesterol or who are obese
 Smokers

© 2020 CDHA/ACHD. If you would like to reproduce or republish this document, please contact us for more information.

## Oral Care Tips for Seniors and Their Caregivers

Seniors are living longer than ever, and many are keeping their natural teeth. While regular appointments with a dental hygienist are essential for maintaining oral health, so is daily mouth care.

### Getting Started: Know the 3 Cs

Condition	Causes	Consequences
Gum disease	Dental plaque build-up on the teeth	Swollen, red, painful or bleeding gums
Periodontitis	Untreated gum disease	Bad breath, receding gums, tooth sensitivity, tooth loss
Tooth loss	Cavities, periodontitis	Difficulty speaking and eating, low self-esteem, social isolation
Exposed roots	Tobacco use, tooth clenching or grinding, aggressive or inadequate toothbrushing	Cavities, tooth sensitivity
Dry mouth (decreased saliva production)	Aging, medications, cancer therapy, diabetes, alcohol and tobacco use, dehydration	Cavities

But poor oral health doesn't just affect the teeth and gums. In some cases, it can have life-threatening consequences.

### Links Between Oral and Overall Health

- Mouth pain or loss of teeth can make it harder to eat properly, leading to malnutrition.
- Bacteria found in the mouth, when inhaled into the lungs or airways, can cause aspiration pneumonia.
- Periodontitis can cause blood sugar to rise, making it harder to control diabetes.
- Periodontitis increases the risk for heart disease, stroke, and diabetes.





Statistics  
Canada

Statistique  
Canada

# Indigenous languages across Canada

Release date: March 29, 2023

Indigenous peoples have consistently stressed the importance of language as the primary tool to share and communicate culture, world views and values to future generations (Assembly of First Nations, 2019). The right to language was outlined in Article 13 (1) of the United Nations Declaration on the Rights of Indigenous Peoples: "Indigenous peoples have the right to revitalize, use, develop and transmit to future generations their histories, languages, oral traditions, philosophies, writing systems and literatures, and to designate and retain their own names for communities, places and persons" (United Nations, 2007).

## Highlights

- Approximately 237,420 Indigenous people in Canada reported they could speak an Indigenous language well enough to conduct a conversation in 2021, down by 10,750, or 4.3%, from 2016. This is the first decline since comparable data started being collected in 1991.
- The number of Indigenous people reporting an Indigenous language as the language they first learned at home in childhood continues to decline. There were 184,170 Indigenous people with an Indigenous mother tongue in 2021, down 14,120, or -7.1%, from 2016.
- The number and share of Indigenous language speakers who learned their language as a second language continue to rise. Over one-quarter (27.7%) of Indigenous language speakers in 2021 learned it as their second language, up from 24.8% in 2016.
- With over 70 Indigenous languages being spoken across Canada, there is a diversity of experiences across the country. While most Indigenous languages experienced declines, some experienced a revitalization with large proportional growth. For example, the number of Indigenous speakers of Haisla, Halkomelem, Heiltsuk and Michif all grew by a third (33.3%) or more since 2016.



## Indigenous insight

NEWSLETTER

### National Newsletter Winter 2023

Ce bulletin est aussi disponible en français.

The Indigenous liaison program supports Indigenous communities in making the best possible use of Statistics Canada's information and services.

To subscribe to this newsletter, send an email to the regional advisor in your area.

**Contents:**

- 2021 Census of Population
- Indigenous Peoples Survey: Update

**Recent Releases**

- Changes to acute-care hospitalizations among Indigenous children and youth: Results from the 2006 and 2011 Canadian Health and Environment Cohorts
- Racialized Canadians are less likely to find as good jobs as their non-racialized and non-Indigenous counterparts early in their careers
- Indigenous-owned businesses in Canada: confronting challenges, forecasting growth
- Victimization of men and boys in Canada, 2021
- Labour market impacts of COVID-19 on Indigenous people living off reserve in the provinces: March 2020 to August 2021

**The Learning Corner**

Indigenous Statistical Capacity Development Initiative: Training to Build Your Statistical Capacity

### 2021 Census of Population

2021 Census products provide statistical information about the population, age, sex at birth and gender, type of dwelling, families, households and marital status, Canadian military experience, income, language, Indigenous peoples, housing, immigration, place of birth and citizenship, and commuting as measured in the Census Program.

Information within the Census Program web module is organized into broad categories, as follows:

- Topics** offers links to the comprehensive suite of 2021 Census standard products associated with each of the 2021 Census of Population releases.
- Data products** offers data for a wide range of standard geographic areas, available in the Census Profile, Data tables, Census Program Data Viewer (CPDV) and in the Focus on Geography Series (FOGS). The Data products page presents access to historical census information and release-related features.
- Data tables** offers a variety of data tables for the various census topics that have already been released, and also offers data tables that contain the data quality indicators related to most questions of the 2021 Census questionnaire.
- Analytical products** offers a variety of analytical products for the various census topics that have already been released.
- Reference materials** covers various aspects of the census and are intended to support the use of census data,
  - Guide to the Census of Population* (from the October 26, 2022 release)
  - Education Reference Guide* (from the April 27, 2022 release)
  - Community Reference Guide* (from the April 27, 2022 release)
  - Labour Reference Guide* (from the April 27, 2022 release)
  - Instruction in the Minority Official Language Reference Guide* (from the August 17, 2022 release)
  - Language Reference Guide* (from the August 17, 2022 release)
- Census learning centre** contains a collection of short videos to help users of census products better understand the various Census of Population concepts.
- Census of Population concept videos** These videos are a reference source for users who are new to census concepts or those who have some experience with these concepts but may need a refresher or would like to expand their knowledge.

**Winter 2023:**  
This newsletter is available in [English](#)  
Ce bulletin est aussi disponible en [français](#)

**Spring 2023:**  
This newsletter is available in [English](#)  
Ce bulletin est aussi disponible en [français](#)



## Indigenous insight

NEWSLETTER

### National Newsletter Spring 2023

Ce bulletin est aussi disponible en français.

The Indigenous liaison program supports Indigenous communities in making the best possible use of Statistics Canada's information and services.

To subscribe to this newsletter, send an email to the regional advisor in your area.

**Contents:**

- First Nations people, Métis and Inuit in Canada

**Recent Releases**

- Study: Online harms faced by youth and young adults: The prevalence and nature of cyber victimization
- Police-reported crime in rural and urban areas in the Canadian provinces
- Study: Rising prices and the impact on the most financially vulnerable: A profile of those in the bottom family income quintile

**The Learning Corner**

Indigenous Statistical Capacity Development Initiative: Build Your Statistical Capacity

**Did You Know?**

Research to Insights: Consumer price inflation, recent trends and analysis

**You May Also Like**

Commuting in Canada during the COVID-19 pandemic: What changed from 2016 to 2021?

### First Nations people, Métis and Inuit in Canada

In 2021, the Census of Population counted more than 1.8 million (1,897,350) Indigenous people in Canada, making up 5% of the country's total population. The Indigenous population grew by 9.4% from 2016 to 2021.

**First Nations population**  
1,048,405  
Growth (2016 to 2021): +9.7%

**Métis population**  
624,220  
Growth (2016 to 2021): +6.3%

**Inuit population**  
70,545  
Growth (2016 to 2021): +8.5%





Government  
of Canada

Gouvernement  
du Canada

## A Guide to the

## Canada Dental Benefit



Tooth decay is the most common, but preventable, childhood chronic disease both in Canada and around the world. Oral diseases frequently begin in the preschool years which is why it is so important to establish good oral hygiene behaviours in those early years.

The Government of Canada has implemented the interim **Canada Dental Benefit**, which is designed to provide some financial support to help Canadian families access dental care. With this benefit, families can start addressing some of the basic dental care that their young children need while the Government continues its plans to develop a long-term Canadian dental care program.

### WHAT is the benefit?

The interim Canada Dental Benefit provides payments **up to \$650** per eligible child under 12 years of age, per year for two years.

**\$650**

if the family's  
adjusted net  
income is  
under \$70,000

**\$390**

if the family's  
adjusted net  
income is between  
\$70,000 and  
\$79,999

**\$260**

if the family's  
adjusted net  
income is  
between \$80,000  
and \$89,999

The benefit can  
be used for any  
dental care  
provided by any  
regulated dental  
professional.



### WHO can apply?

Parents/Guardians who:

- ✓ Have a child under 12 years of age, who does not have access to private dental care insurance.
- ✓ Have an adjusted family net income under \$90,000 per year.
- ✓ Have filed last year's income tax return—for more information on how to file a return, visit [Canada.ca/doing-your-taxes](https://Canada.ca/doing-your-taxes).
- ✓ Receive the Canada Child Benefit for each eligible child.
- ✓ Have or will have dental care expenses for each eligible child that have not been fully reimbursed under another federal, provincial or territorial government program.



### HOW can you apply?

Canada Revenue Agency (CRA) **My Account** will be the quickest, easiest and most secure way to apply for the Canada Dental Benefit. If you don't yet have a CRA My Account, you can register at [Canada.ca/my-cra-account](https://Canada.ca/my-cra-account).

You will need to **provide information** on the dental care visit, including the name of your child's dental care provider(s) and your employer information.

If you apply online and are signed up for **CRA direct deposit**, you can receive your payment within five business days!

If you're unable to apply for the Canada Dental Benefit online, **call 1-800-715-8836** to get your application started.

Make sure you have your Social Insurance Number, address, date of birth and a copy of your income tax return from last year.



### WHEN can you apply?

Parents can apply **starting December 1, 2022**, for dental care received by their eligible child back to October 1, 2022, so long as their child will still be under 12 on December 1. For the second payment, parents can apply starting July 1, 2023.

Visit [Canada.ca/dental](https://Canada.ca/dental) for more information, or call 1-800-715-8836



Government  
of Canada

Gouvernement  
du Canada

Canada

## Canada Dental Benefit

### How do families apply?

• **Online:** Visit the [Canada Revenue Agency application page](https://Canada.ca/dental)

• **By phone:** Call the CRA contact centre at 1-800-959-8281

• **Video demonstration of the application process:** [CRA walkthrough](https://Canada.ca/dental)

## Canada Dental Benefit

Smile!  
It is here.



For kids **under  
12 years old**



For families  
with an adjusted  
net income  
**under \$90,000  
per year**



For those who  
**don't have  
access to  
private dental  
care insurance**

Find out more at [Canada.ca/dental](https://Canada.ca/dental)  
or 1-800-715-8836



Government  
of Canada

Gouvernement  
du Canada

Canada

Visit [Canada.ca/dental](https://Canada.ca/dental) for more information,  
or call 1-800-715-8836





## healthydebate

### Canada's dental program only matters if it gets children into dental offices



The Canadian government recently committed to implementing a national public dental program. When fully implemented, the dental plan will provide coverage to those under 18, seniors and people with disabilities although the scope of services is yet to be determined.

As a first step, in December 2022 the government launched an interim Canada Dental Benefit that will be offered for two years, giving the government and health-care professionals time to design the full program. The interim benefit is available to low-income families (below \$90,000 per year) with children 12 years old and younger who do not have access to dental insurance. Families can collect a [maximum of \\$650](#) per child per year if they have incurred dental-care expenses or plan to during the year. This benefit is an important first step, although it may not cover all treatment costs for low-income families, especially those who have avoided the dentist for a long time.

[Read the full article](#)

***The planned program will only improve the oral health of children if they actually visit oral health-care provider.***





Canadian Association of Public Health Dentistry  
Association canadienne de la santé dentaire publique



## IN THIS ISSUE

- 2 President-elect announcement  
Political Action Committee (PAC) Update
- 3 New Dental Therapy Program
- 4 2022/2023 Membership Survey Highlights
- 5 CAPHD 2022 Virtual Conference  
Call for Submissions  
New CAPHD website
- 6 CAPHD 2022 Award Winners
- 7 Comments from the Canadian Society for Disability and Oral Health on The Interim Canada Dental Benefit And the Proposed National Dental Care Program



Dr. Keith Da Silva

As always, it is an honour and privilege for me to be a part of the Canadian Association of Public Health Dentistry (CAPHD), which serves as the voice of dental public health in Canada. As I enter my second year as President, I reflect on the fact that the CAPHD has never been more relevant and important for oral health care in Canada. With the launch of the Canadian Dental Benefit, and the ongoing development of a more comprehensive Federal Dental Plan, the CAPHD and our members remain actively engaged at all levels.

This past year also saw a commitment to a new dental therapy program and the launch of the next Oral Health Component of the Canadian Health Measures Survey, both of which are critical to our work and long overdue. These changes around us, whether political, social, scientific, economic, or otherwise, require that we continue to help our profession navigate through new landscapes which will undoubtedly have a profound impact on the communities that we serve.

In this newsletter, we provide a brief glimpse of some highlights from the year, as well as a snapshot of some of the amazing work being done by our members. A special thanks to all our committee members who have contributed to this edition of the newsletter. As we move ahead into 2023, I look forward to what will be another productive year for all of us and hopefully a chance to meet again face-to-face as we move forward with the planning for an in-person annual conference!

Sincerely,

Keith Da Silva, DDS, MSc, FRCD(C)  
President, Canadian Association of Public Health Dentistry

Read the full Mosaic Newsletter [here](#)

## Welcome to the 2023/24 Membership Year!

It's an exciting time for dental public health in Canada! Let's continue to have a strong unified voice to advocate for healthy public policies and oral health equity.

**Membership Benefits:** [The 2023 Spring issue](#) of MOSAIC is now available.

Active members will continue to have access to the members-only portal of the website as well the CAPHD Listserv. Stay tuned for more information regarding the upcoming CDSS/CAPHD Joint Conference and special rates for CAPHD delegates!

To ensure uninterrupted access to your membership benefits, renew today: [www.caphd.ca/membership](http://www.caphd.ca/membership)







## COVID-19 incidence and vaccination rates among Canadian dental hygienists

Oral health care settings potentially carry a high risk of cross infection due to close contact and aerosol-generating procedures. There is limited evidence of the impact of COVID-19 among dental hygienists. This longitudinal study aimed to

- 1) estimate COVID-19 incidence rates among Canadian dental hygienists over a 1-year period; and
- 2) estimate vaccination rates among Canadian dental hygienists.

**Methods:** A prospective cohort study design was used to collect self-reported COVID-19 status from 876 registered dental hygienists across Canada via an online baseline survey and then 6 follow-up questionnaires delivered between December 2020 and January 2022.

[Read full report](#)

### PRACTICAL IMPLICATIONS OF THIS RESEARCH

- This project is the first of its kind to establish a prospective cohort of dental hygienists in Canada and to report the extent of the impact of COVID-19 on Canadian dental hygienists.
- The incidence of COVID-19 among dental hygienists practising in the community in Canada is reported to be lower than in the general population.



## The incidence of COVID-19 among dentists practicing in the community in Canada

A prospective cohort study over a 6-month period

**Background:** Oral health care settings carry a potentially high risk of causing cross-infection between dentists and patients and among dental staff members due to close contact and use of aerosol-generating procedures. The authors aimed to estimate COVID-19 incidence rates among Canadian dentists over a 6-month period.

[Read the full report](#)



## Prevalence of SARS-CoV-2 infection among oral health care workers worldwide: A meta-analysis

Globally, the new coronavirus disease 19 (COVID-19) pandemic has produced significant numbers of infected people and deaths. In 2020, approximately 100,000 health care workers worldwide were believed to have been infected with SARS-CoV-2 because of the occupational risk and the scarcity of protective equipment.

The oral health care workers (OHCWs) are part of the frontline in the struggle against COVID-19, being at a higher occupational risk related to the acquisition of transmissible diseases due to characteristics of professional practice. The aerosol generated during dental interventions is an important source of transmission of several vi-ruses, including SARS-CoV-2. The viral transmission occurs through the oral, nasal and ocular mucosa contact with the droplets generated by dental aerosol, which contains saliva, subsequently exposing patients and colleagues.

[Read full article](#)

**Community Dentistry and Oral Epidemiology special issue on  
Advancing the behavioural and social sciences to promote oral health**

[illegible]

[Access the full issue](#)





## **Fluoride: Assessment for Developmental Neurotoxicity**

The National Toxicology Program (NTP) conducted a systematic review to assess scientific studies on fluoride exposure and potential neurodevelopmental and cognitive health effects in humans. The report underwent two peer reviews by the National Academies of Science, Engineering, and Medicine (NASEM). Both times, the NASEM committee stated that NTP had not adequately supported its conclusions that fluoride should be classified as a cognitive neurodevelopmental hazard for humans.

Based on the [NASEM review](#), the NTP removed the hazard classification of fluoride and made additional changes, resulting in two draft documents,

- 1) an NTP Monograph on the State of the Science that considered research published through May 2020, and
- 2) a manuscript on the meta-analysis of the data that considered research published through November 2021.

[Read the full article](#)



ResearchGate



## **Building effective public dental care programs: The critical role of implementation evaluation**

There are significant income-related inequities in oral health and access to oral health care. Public dental programs generally aim to increase access to oral healthcare for individuals with financial barriers through government payments for appointments. Low engagement from both oral health care providers and intended patients are common challenges in delivery of public dental programs and are impediments to program impact and outcomes. Still, these programs rarely address the systemic issues that affect the experiences of intended users. This accentuates the importance of monitoring of program delivery to refine or adapt programs to better meet needs of service providers and users. As such, specifying program goals and developing a related monitoring strategy are critical as Canada begins to implement a national public dental program. Drawing on an example of a pediatric public dental program for children from low-income families or with severe disabilities in Ontario, Canada, this article illustrates how an implementation and evaluation framework could be applied to measure implementation and impact of the national program.

[Read full article](#)





## [Easy School-Based Treatment Could Prevent 80% of Kids' Cavities: Study](#)



Cavity prevention program in Bronx elementary school Photo: ©Sorel, courtesy NYU Photo Bureau

ResearchGate

WEDNESDAY, Feb. 22, 2023 (HealthDay News) -- Children can be spared cavities, and possibly painful dental work, with a simple treatment that is brushed onto the teeth, a new clinical trial finds.

[The study](#) tested the effects of the topical treatment, called silver diamine fluoride (SDF), in 47 New York City elementary schools. The researchers found that a single SDF application was as effective as standard dental treatments in preventing cavities and keeping existing cavities from worsening for two years.

[Read the full article](#)

### Key Takeaways

- An inexpensive liquid that is brushed onto teeth can prevent cavities, new research shows
- The liquid, called silver diamine fluoride (SDF), could be applied by nurses, making it ideal for school health programs
- SDF is widely used by pediatric dentists but awareness among general dentists is said to be lacking





## Oral health in a bold golden frame

This could be witnessed in the context of the WHO's first ever Global Oral Health Status Report, published in November 2022.<sup>2</sup> The key messages of the presented data and information are robust and bold: 'The report's clear conclusion is that the status of global oral health is alarming and requires urgent action by all stakeholders on global, regional, national and local levels. Frequently reported by global media, the publication has already reached one of its key objectives – the raising of awareness

Read the [editorial](#)

'Seeing oral health take the centre stage was a watershed moment.'

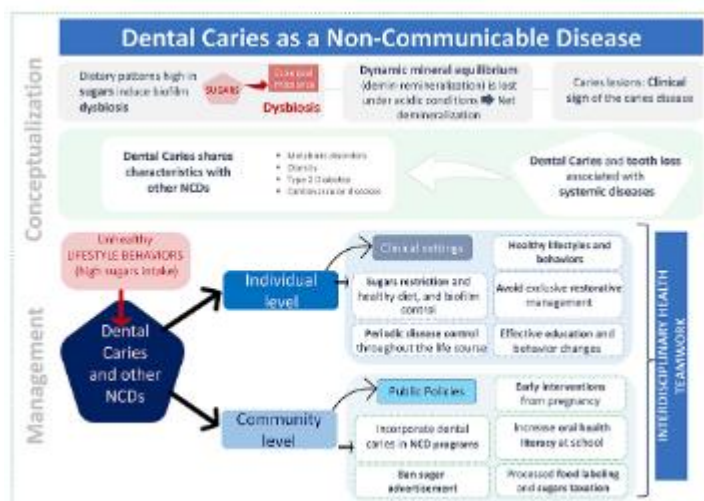


## Understanding dental caries as a non-communicable and behavioral disease: Management implications

New paradigms in caries conceptualization have emerged during the last decades, leading to intense debate and discussion on how to approach the disease, both from a preventive and a therapeutic perspective. Among many new ideas, research discoveries and technologies, one major concept can be

highlighted that created a deep frontier between the old and the new paradigm in caries conceptualization; the non-communicable nature of the disease, firmly associated with behaviors and lifestyles. This article synthesizes the conceptual construction of dental caries as a non-communicable disease (NCD) based on the current evidence and discusses the appropriate management of the disease in this context.

[Read full article](#)







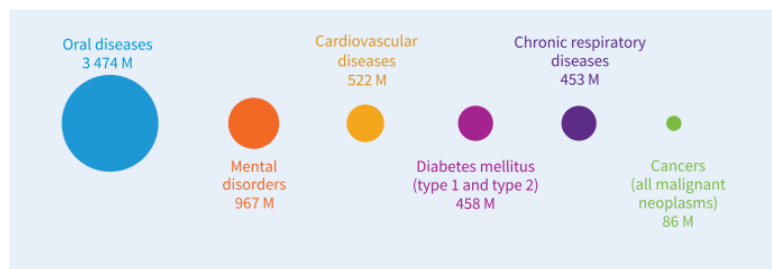
Oral health is integral to general health and supports individuals participating in society to achieve their potential. Yet oral diseases are the most widespread noncommunicable diseases affecting almost half of the world's population (45% or 3.5 billion people worldwide) over the life course from early life to old age.

WHO's Global oral health status report (GOHSR) provides the first-ever comprehensive picture of oral disease burden and highlights challenges and opportunities to accelerate progress towards universal coverage for oral health. This includes introducing oral health profiles of countries based on the latest available data from the Global Burden of Disease (GBD) project, the International Agency for Research on Cancer (IARC) and global WHO surveys. It emphasizes the global impact of oral disease on our health and well-being and highlights stark inequalities, with a higher disease burden for the most vulnerable and disadvantaged population groups within and across societies.

The GOHSR is part of WHO's series of data reports and an important milestone in the larger process of mobilizing political action and resources for oral health. Nearly 20 years after the publication of The World Oral Health Report 2003 and in alignment with the landmark [WHA 74.5 Resolution on oral health \(2021\)](#), the GOHSR will serve as a reference for policy-makers and provide orientation for a wide range of stakeholders across different sectors; and guide the advocacy process towards better prioritization of oral health in global, regional and national contexts.

[Read the full report](#)

Fig. 2 Comparison of estimated global case numbers for selected NCDs



Note. Data are for all ages and both sexes from GBD 2019; oral diseases do not include lip and oral cavity cancer (4). A standard method has been applied to incorporate the latest UN population estimates.

[For more information on oral health country profiles and related materials](#)





## Impact of community water fluoridation on systemic health excluding oral health- An evidence review

In 2015, the Health Research Board (HRB) Evidence Centre published an evidence review titled [Health effects of water fluoridation](#). The review question in the 2015 publication was “What is the impact, positive and/or negative, on the systemic health of the population (excluding dental health) for those exposed to artificially fluoridated water between 0.4 and 1.5 parts per million (ppm)?”.

The 2015 review established that there was no definitive evidence that showed an adverse impact on general health due to water fluoridation at optimal levels (0.4–1.5 ppm). However, it is essential, and required by legislation, to continuously monitor and evaluate the evidence in order to ensure that no new adverse safety issues are present. The 2015 review suggested that the impact of fluoridated water on thyroid function, as well as on bone health (including cancer), required monitoring and reassessment.

For these reasons, the 2015 review is now being updated to incorporate the most up-to-date evidence published between 1990 and 2021.

[Read the full report](#)

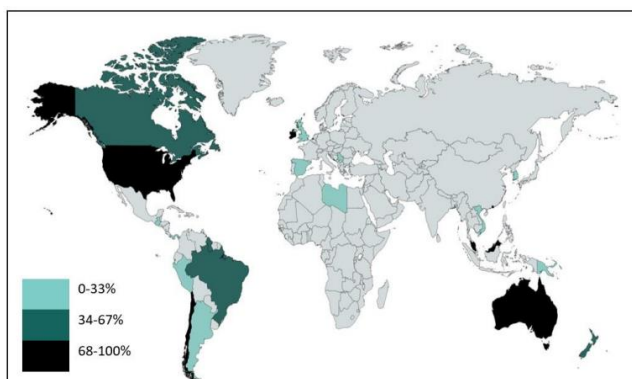


Figure 2 Proportion of the population receiving government-regulated fluoridated water

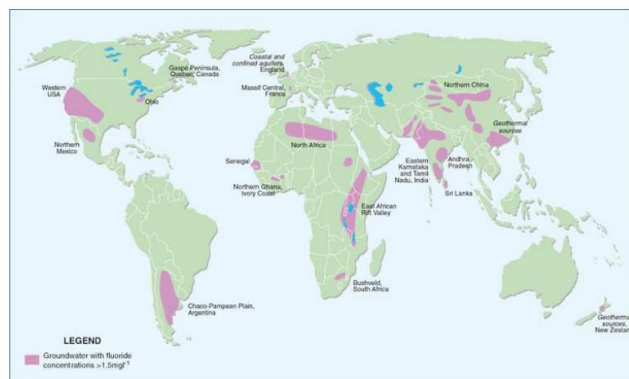


Figure 1 Map of documented occurrences of high fluoride in groundwater ( $\geq 1.5$  mg/L, equivalent to  $\geq 1.5$  ppm)

## ADPH leads consensus on child oral health

March 30, 2023

**The Government must act urgently to reverse the increasing inequality in child oral health in England.**

Last week, a [survey](#) of oral health in five-year-old children, produced as part of the National Dental Epidemiology Programme, found that in 2022, over 35% of children in areas of deprivation experienced dentinal decay in comparison to only 13.5% in more affluent areas.

With tooth decay the leading cause of hospital admissions for five-to-nine-year-olds, there is a significant, and preventable, knock-on cost to the NHS.

[Read the article](#)







## SOHC Inc. Professional Development 2022 links



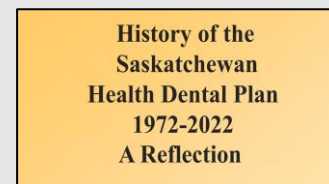
**SMILE for Good Oral Health, Nutrition for Dental Caries-**  
Carrie Verishagen  
[PDF](#)



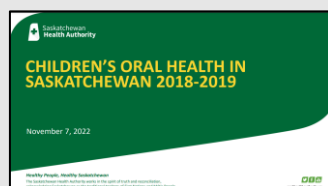
**Understanding the Canada Dental Benefit-**  
Dr. Keith Da Silva  
[PDF](#) [Live Stream](#)



**Dental Care in Canada-**  
Dr. Brandon Doucet  
[PDF](#) [Live Stream](#)



**History of the SK Health Dental Plan-**  
Leslie Topola  
[PDF](#) [Live Stream](#)



**Children's Oral Health in SK 2018-2019-**  
Gwen Sawicki  
[PDF](#) [Live Stream](#)



**Health & Wellness Day-**  
Dean Lefebvre  
[PDF](#) [Live Stream](#)



**Human Papillomavirus (HPV)-**  
Dr. Peter Spafford  
[PDF](#) [Live Stream](#)

### Consider Becoming a Member of SOHC Inc.

Join the diverse membership of the Coalition to make a positive difference for the future of Saskatchewan residents!

Membership runs January through December annually.

#### Organization Levels:

- \$150 – Business/For Profit Organization
- \$100 – Non-Profit Organization
- \$50 – Individual
- Free- Students (full-time)

For Business/For-profit and Non-profit organizations, the fee will cover up to 5 members.

[Download the Application Form](#)

### Contact Us

Lena Ens  
Administrative Coordinator  
Saskatchewan Oral Health Coalition

#### Contact Info:

[sohadmin@saskohc.ca](mailto:sohadmin@saskohc.ca)

#### Our Website:

[www.saskohc.ca](http://www.saskohc.ca)

**Saskatchewan Oral Health Coalition Attention SOHC Inc Admin Coordinator**

### SOHC Inc. Directors

Leslie Topola  
Susan Anholt (Treasurer)  
Kellie Watson (Chairperson)  
Meagan Kachur  
Shelby Hamm  
Dr. Parviz Yazdani

#### Contact Info:

[sohadmin@saskohc.ca](mailto:sohadmin@saskohc.ca)