Improving Oral Health in Head Start: Parent Engagement and Motivational Interviewing

Webinar for National HSSCO Network
Monday, November 1, 2010
1:30 to 3:00 PM EST
Welcome
Presenters

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Agenda

- Welcome and Introductions
- Tools for Engaging Families
- Family Education Flip Chart
- Motivational Interviewing
- Additional Tools Being Used by HSSCOs
- Questions, Discussion
Introductions

- Overview of Oral Health Priority
- Introduction of Speakers
- Introduce tools for engaging families
  - family education flip chart
  - staff training - motivational interviewing
Improving Oral Health in Head Start: The Massachusetts Experience

Nancy Topping-Tailby, MHSA Executive Director

Deidre M. Callanan, RDH, MPH, Oral Health Services Coordinator
The Family Oral Health Guide
Background

Individuals from the MA public health and dental provider communities joined forces with the Head Start community to address health disparities and barriers to care resulting in high rate of dental disease in MA HS children.
Need to Educate Families

Health Managers Survey

- Many parents do not prioritize dental care or follow through with scheduled appointments
- Wanted educational resources for families, especially in different languages

Focus Groups with Family Service Staff

- Asked for a “toolkit” to use in talking with families about the importance of routine oral health care and how to minimize tooth decay
- Also described a need for multi-lingual materials
DentaQuest Foundation

In collaboration with local, state, and national partners, the DentaQuest Foundation works to reduce health inequities, highlight prevention, foster civic engagement, and influence systems that promote oral health beyond the clinical setting. We connect key stakeholders, raise awareness, and support solutions. The DentaQuest Foundation is the philanthropy of the DentaQuest family of oral health companies.
• Developed template
• Field tested by 10 programs
• Many revisions
• Extensive feedback from parents and staff in the pilot

KEEP YOUR CHILD’S TEETH HEALTHY!

- Start to brush as soon as the first tooth appears.
- Stand or sit behind your child.
Implementation of the Oral Health Guide

- Hired graphic design artist
- Obtained copyright
- Distributed to programs during ongoing oral health/curriculum training
How to Access the Guide

Can be downloaded in English and 10 languages from:
www.massheadstart.org

- √ Spanish
- √ Portuguese
- √ Portuguese Cape Verde
- √ Chinese (Traditional)
- √ Vietnamese
- √ Khmer
- √ Arabic
- √ Haitian-Creole
- √ Russian
- √ Somali
The Family Oral Health Guide as a National and International Resource

- MHSA website
- MCHB library
- Distributed through the Oral Health Alert
- Downloaded nationally & internationally
- Private and community dentists,

Head Start community, Depts. of Public Health, Colleges & Universities
What Families Learned

- Importance of going to dentist when pregnant
- Start early
- Early Childhood Caries is a disease
- Germs are spread through sharing drinks & other items
- Juice has sugar
- Medicine can contain sugar
- Don’t rinse after brushing
Lessons Learned

- Need a trusted group of expert advisors and a leader to bridge different opinions
- Balance the messaging
- Use a designer
- Maintain validity
- Importance of copyright
- Multi-lingual materials are key
- Everything takes longer than expected
The Connecticut Experience

Deb Clement, Chairperson, CT HSA
Grace Whitney, Director, CT HSSCO
CT Replication

- Sept. 2008 Launch
- Cavity Free Kids Training
- CFK Training Follow-up with Action Planning
  - Teaching Kits
Teaching Kits for Implementing Cavity Free Kids

For each classroom:
- 1 curriculum spiral key ring
- 1 felt board activity cut outs
- 1 tooth brush
- 2 finger puppet germs

For each family worker:
- 1 family education flip chart binder
- 1 stuffed animal with tooth brushes

Statewide distribution:
- 600 classrooms
- 250 family service staff and family advocates
- 25 partners/oral health educators

Implementation follow-up:
- Survey Monkey
Massachusetts to Connecticut

Joanna Douglass BDS, DDS
Region 1 Oral Health Consultant
Connecticut Context

- Received Cavity Free Kids training at State launch
- Desire to expand to all CT programs
  - Shortened version
  - MA experience
  - Motivational interviewing
- Program
  - One day training
  - Submission of implementation plan by programs
  - Grantee status report at 6 months
  - Follow-up training (which included motivational interviewing)
  - Implementation materials
Motivational Interviewing

A Potential Solution to a Persistent Problem
Results. Attitudes about the importance of children’s oral health among parents and pregnant women were mixed. Staff members voiced responsibility for children’s oral health but frustration in their inability to communicate effectively with parents. Parents in turn perceived staff criticism regarding how they cared for their children’s oral health. Gaps were noted in the oral health activities of EHS programs. Participants expressed confusion regarding the application of Head Start oral health performance standards to EHS. The need for culturally sensitive, hands-on oral health education was highlighted.
Motivational Interviewing (MI): A Potential Solution

- Conventional communication/education
  - Delivery of information
  - Persuasion
  - Assumption people will change their behavior because it is sensible/logical/required!

- A different way to communicate
  - Open ended questions
  - Active listening
  - Engaging the parent to find the answers
It's very important you brush his teeth. You just need to make sure you hold him still and get it done.

I just can’t manage to brush his teeth, he won’t let me.
That must be frustrating. Tell me what happens.

I just can’t manage to brush his teeth, he won’t let me.
Connecticut’s Experience

- Mini one hour, informal workshop
- Background information
- Discussion/examples of ways to re-frame conversations using MI techniques
- Focus on dental specific examples
Brief Conversations: Motivational Interviewing Style

The ZOE Project
Cathy Cole, MSSW, LCSW

Motivational Interviewers Network of Trainers, Inc

www.cathycoletraining.com
The ZOE Project

- Developed via the University of NC Gillings School of Global Public Health; grant funded
- Contact: Leslie Zeldin, MSUP, MPH
  leslie_zeldin@unc.edu
- One day introductory training to staff at all EHS locations
- One day advanced training to select interested staff
- One day training for smaller selected staff for ongoing reinforcement and teaching of MI
What is MI?

- A conversational style that involves asking, listening, and responding
- A conversational style that focuses on collaborating on a common goal
- A conversation style that allows the other person to set the path for improvement/change
- A conversation style that allows for you to know what information will help the most
Definition of MI

MI is a collaborative, goal oriented method of communication with particular attention to the language of change. It is intended to strengthen a person’s motivation for and commitment to a target behavior change by eliciting and exploring an individual's own arguments for change.

Miller and Rollnick, ICMI 2010 evolving definitions
Likely Correct Assumptions

- Parents want the best health for their children
- Parents are very busy and need to know why dental health or other child development matters are important but don’t want to be lectured
- Parents want practical advice when they want it and would like support for their efforts
Likely Correct Assumptions

- You want to be helpful to parents
- You are busy
- You want good health for their children
- You don’t want to be overbearing
- You would like to know you are doing your part in helping children thrive
What Guides MI?

- **Spirit**
  - Collaboration
    - Expertise vs expert
  - Learning from the parent
    - What does the parent know and need?
  - Autonomy
    - Parent will make the decision

- **Processes**
  - Engaging
    - Connecting; understanding
  - Focusing
    - What is important?
  - Eliciting
    - Parent says why and how with staff input
  - Planning
    - Miller and Rollnick, MINT Forum 2010
What are we listening for?

- Desire for change: ‘I want to take care of my daughter’s teeth.’
- Ability: ‘I can figure this out!’
- Reasons: ‘Taking care of the baby teeth will make for healthy permanent teeth.’
- Need: ‘She already has one cavity.’
- Commitment: ‘I will start tonight to brush her teeth and not put her to bed with a bottle.’
- Focus on change talk
What will get in the way?

- The *righting reflex*
  - You want the best outcome for the parent and the child
  - You know lots of information that can help
  - You will be inclined to provide that information/direct/tell what to do

*before:*

- Learning what the parent needs to know
- Learning what will be helpful
A Possible Conversation

‘Hi Mrs. Jones; how is it going with brushing Janie’s teeth?’
(agenda and open question)

‘You know, they are just baby teeth so I just do it when I can but she’ll get more teeth later and then I’ll pay attention.’

‘You don’t think it is important to brush baby teeth all the time.’
(reflection)

‘Right….it’s just one more thing to do.’

‘If it’s okay, I’d like to tell you why brushing those baby teeth is important.’ (responding and asking permission)

‘Okay’….and then listens to you say 2-3 **brief** points about this after which you ask:

‘So if you were going to use this and try to brush more often, what would you want to know from me that would help?’
(learning)

‘How do I do this? She does not want to cooperate.’

‘I can give you some ideas that might work; then I want to hear from you what you think.’ (autonomy)
Another Conversation

- ‘Hi Mrs. Smith, how did it go with trying to brush Jim’s teeth twice a day?’ (agenda setting and open question)
- ‘He just hates it, squirms and I just need to get on with my day or get him to bed so I can cook dinner.’
- ‘It is a challenge to get those teeth brushed!’ (reflection)
- ‘Yes, I mean I know it is important; I read all the handouts but it is just so hard.’
- ‘You learned more by reading.’ (affirmation)
- ‘Yes, but I just don’t know how.’
- ‘I can share some tips and we can talk about what might work for you.’ (autonomy)
- ‘Great!’
- You share 1-2 brief ideas and then ask ‘What do you think might work for you?’ (learning)
- ‘I can try the singing idea; he likes me to sing to him; I’ll try that tonight.’
The Brief MI Guide

- Resist the ‘righting reflex’ by asking an open question to set the direction
- Understand the concerns of the parent
- Which can only happen if we listen after we ask
- Empower parents with practical, tailored information and notice their efforts and successes
In Conclusion

Learning how to do brief conversations in MI style can help you be:

- Focused
- Informative
- Practical
- Supportive
- Non pushy
- Non judgmental
- A partner in change
References

- Motivational Interviewing, Preparing People for Change, Guilford 2002
- Motivational Interviewing in Health Care, Guilford 2007
- www.motivationalinterview.org
The ZOE Project
The ZOE Project

What is “The ZOE Project?”

- A North Carolina oral health initiative for Early Head Start programs, designed to eliminate early childhood caries (Zeroing Out Early childhood tooth decay)
- Funded by a 5-year grant from NIH (2008-2013)
- Administered by The School of Public Health at UNC, Chapel Hill

ZOE Project Implementation

- Staff training to provide oral health preventive services for children
- Oral health education for parents based
- **Staff training in motivational interviewing**
- Linkage of EHS children with health providers in the community who offer preventive dental services
- Incentives for parents who participate in ZOE
Expected Outcomes of The ZOE Project

- Improve access to preventive dental services for EHS children
- Improve the oral health of EHS children
- Help EHS staff meet HSPS for oral health
- Help EHS staff effectively communicate oral health information to parents
- Improve parents’ knowledge and skills in taking care of their children’s oral health
- Provide evidence of effectiveness of dental interventions in EHS that can be extended to other early education and child care programs, including Head Start
Additional Tools/Models

The Iowa Experience

The Tennessee Experience

The Oregon Experience
Questions/Discussion
Resources

- Flip Charts on MA HSA website
  www.massheadstart.org

- Motivational interviewing
  www.motivationalinterview.org

- AAPD
  www.aapd.org