Oral Health 2014: Delaware

An Oral Health Literacy
Strategic Communications Plan

Developed by GBSM, Inc.
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# Table of Contents

**SECTION I: Introduction and Overview**

- Mission ................................................................. 3
- Successes to Date ....................................................... 3
- Current Challenges .................................................... 4
- Vision of Impact ....................................................... 5
- Strategic Levers, Goals and Objectives .............................. 5

**SECTION II: Communications Approach**

- Strategies ............................................................. 6
- Collaborative Structure ............................................... 6
- Critical Partners ....................................................... 7
- Stakeholders ........................................................... 7
- Target Audiences ...................................................... 8
- Research ................................................................. 10
- Message Platform ..................................................... 11
- Branding and Campaign Identity .................................... 13

- Tactics ................................................................. 14
- Action Steps ........................................................... 14
- Written Materials ...................................................... 16
- Interactive Tools ....................................................... 17
- Mass Media ........................................................... 18
- Grassroots Community Outreach .................................... 20

**SECTION III: The Path Forward**

- Sustainability and Next Steps ...................................... 21
- Campaign Funding and Costs ....................................... 22
- Measuring Success .................................................... 22
- Conclusion ............................................................. 22
SECTION I
Introduction and Background

Healthy Smile, Healthy Delaware is a culturally competent, evidence-based and mission-driven oral health literacy campaign (the “Campaign”).

Operating under the Delaware Division of Public Health Bureau of Oral Health and Dental Services (the “Bureau”), the Campaign is a concentrated and strategic expansion of previous Bureau initiatives through a diverse network of traditional and non-traditional stakeholders, as well as a strong alliance of critical partners.

Mission

The mission of the Campaign is to raise awareness about the importance of oral health and increase medical-dental collaboration to improve Delaware’s oral health and overall wellbeing.

This is not a new effort. The Bureau has long been at the forefront of the battle to improve the oral health of the citizens of Delaware. Through policy work, programming and outreach, the agency has already made significant progress in improving the oral health of Delaware residents statewide.

Successes to Date

The Bureau’s oral health programs are working. Compared to 2002, substantially fewer children have untreated decay in 2013\(^1\) and Delaware has met the Healthy People 2020 objectives for reducing the prevalence of decay experience. Among the state’s many successes and advantages are:

- In 2013, 8% fewer third grade children experienced tooth decay (47%) than in 2002 (55%).
- The number of third grade children with untreated decay (16%) improved significantly in 2013 and was reduced by nearly half from 2002 (30%).
- The number of children with dental sealants (54%) improved significantly in 2013, up 20% from 2002.
- The number of third grade children in need of dental care (16%) improved significantly in 2013, a nearly 50% reduction from 2002 (30%).

\(^1\) Delaware Smiles 2013, An Assessment of Third Grade Children
• A significant expansion of the Medicaid program, with 67% of general dentists across the state accepting Medicaid patients currently, compared to 46% in 2008 and less than 4% in 1998.

• Relatively high Medicaid reimbursement rates for dental services.

• Enhanced opportunities for low-income children to access care, including the Give Kids a Smile Day and the school sealant program.

• Existing public education campaigns, such as First Smile Delaware, the Tooth Troop and Healthy Smile, Healthy You.

• Expansion of the dental services offered at many Federally Qualified Health Centers and other non-profit providers, including La Red, Westside Health and Henrietta Johnson.

• Many willing partner organizations and passionate health care providers who recognize the importance of improving oral health.

Current Challenges

Delaware also faces several barriers to achieving optimal levels of dental care and prevention. Among the state’s biggest challenges are:

• No adult Medicaid coverage for dental services of any kind.

• A lack of education and appreciation among residents of the importance of oral health care.

• A lack of follow-up visits by patients after their initial dental exam.

• Limited or inadequate access to dental care (particularly access to specialists) in certain parts of the state, with Sussex County having the greatest need.

Overcoming these challenges and making continued progress in the fight against dental disease is a clear priority of the Bureau. Cavities are the most chronic childhood disease in the United States, and prevalent among all ages and populations, yet dental decay is nearly 100% preventable. Reducing the incidence of dental disease will give the citizens of Delaware a brighter future with fewer missed school and work days, better self-esteem and enhanced overall wellness and physical health.

Several of the challenges and barriers listed above, such as access to care, are infrastructure-related issues and thus best addressed through workforce and other systemic changes. However, many of the challenges, such as a lack of education and awareness, are best addressed through issue-focused advocacy and strategic communications.
The Bureau has already begun the process of using outreach and communications to improve oral health throughout the lifespan, and the agency has experienced initial successes with its patient education materials and programs like the Tooth Troop and First Smile Delaware.

This cohesive, overarching communications strategy builds upon and expands the Bureau’s success with clearly defined goals, target audiences, messages and outreach approach. Defining these elements and how they work in conjunction with one another to achieve maximum impact, will enable the Bureau to be even more effective in achieving its goals.

**Vision of Impact**

Within a two-year implementation phase, the Campaign’s Vision of Impact is:

*Delaware residents will enjoy good oral health as a result of issue-focused advocacy, public awareness of the benefits of oral health, increased medical-dental collaboration and the adoption of community interventions and healthy behaviors.*
Strategic Levers, Goals and Objectives

The Campaign’s three focus areas, or Strategic Levers, were confirmed and validated during the effort’s planning phase and are as follows:

1. **Issue-Focused Advocacy:** Raise the profile of oral health issues throughout the state of Delaware
   
   a. Communicate Delaware’s overarching oral health literacy goals and gain consensus among influential traditional and non-traditional stakeholders
   
   b. Create a highly recognizable campaign that disseminates consistent, culturally competent and actionable oral health education resources

2. **Public Awareness:** Decrease the prevalence of dental disease, particularly among Delaware’s most vulnerable populations – underserved seniors and parents of young children
   
   a. Engage and educate Delaware’s citizens with consistent oral health messages both outside and inside the healthcare provider’s office
   
   b. Reach over 10,000 underserved senior citizens in Delaware over the age of 60 with accessible, evidence-based and actionable oral health information
   
   c. Reach over 10,000 underserved new and expecting parents in Delaware with accessible, evidence-based and actionable oral health information

3. **Professional Integration:** Increase medical-dental collaboration – motivate primary healthcare providers to place greater value upon oral health and its direct connection to overall health.
   
   a. Facilitate integration of consistent oral health education and distribution of actionable oral health information to over 20,000 Delaware OBGYN, pediatric, family physician and hospital patients
   
   b. Expand the number and types of medical providers that implement the Smiles for Life curriculum, as well as include oral health assessments, anticipatory guidance, preventive oral health services and dental referrals, where appropriate
SECTION II
Communications Approach

In order to achieve its goals and objectives, the Campaign will focus on education and outreach to motivate adoption of oral health practices that prevent dental disease and reduce its prevalence. Furthermore, the Campaign places a heavy emphasis on underserved, high-risk populations – particularly low socioeconomic groups, young children and seniors.

Moving forward, this communications approach will supercharge Delaware’s ability to elevate oral health awareness and improve the state’s dental health. In the following section, the implementation efforts are divided into two categories:

- Strategies, which cover the collaborative structure, critical partners, stakeholders, target audiences, research, branding and messaging
- Tactics, which include the Campaign’s specific action steps, resources, materials, interactive tools, media and community outreach techniques

STRATEGIES

Collaborative Structure

The Bureau is ideally positioned to oversee this effort. With extensive knowledge and broad relationships across various traditional and non-traditional stakeholder groups, the Bureau’s expertise will be vital in leading the Campaign’s implementation.

Critical Partners

Throughout the course of the planning phase, the Bureau has cultivated a diverse and engaged alliance of critical partners. Through the identification and development of a Design Team, the Bureau has harnessed a number of key partners to refine and build agreement of the Campaign’s overarching communications strategy and serve as ambassadors and advocates for the effort through the planning and implementation processes. Design team member organizations include:

- American Academy of Pediatrics – Delaware Chapter
- Delaware Division of Medicaid & Medical Assistance (DMMA)
- Delaware Institute for Dental Education and Research (DIDER)
- Delaware Dental Hygienists Association
• Delaware Oral Health Coalition
• Delaware Dental Society
• Delaware Head Start

**Stakeholders**

In addition to the Design Team, the Bureau has created an important Planning Team that consists of many important traditional and non-traditional stakeholders with strong community representation. The Planning Team is responsible for developing and advancing the Oral Health 2014 program vision among their constituents and member networks, as well as identifying and refining supplemental knowledge and resource areas. Planning Team members include:

• Christiana Care Health System
• Delaware Department of Education
• Delaware Developmental Disabilities Council
• Delaware State Legislature
• Delaware Maternal & Child Health
• Delaware Nursing Home Quality Assurance
• Delaware Office of Early Learning
• Delaware Technical Community College
• Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD)
• Department of Behavioral Health and Nutrition University of DE
• Governor’s Council for Exceptional Citizens
• Kids Count
• Special Olympics
• University of Delaware Center for Disabilities Studies
• Veterans Affairs Dental
• Federally Qualified Health Centers
  o La Red Health Center
  o Henrietta Johnson Medical Center
  o Westside Family Health Center
Target Audiences

As the Oral Health 2014 initiative broadens the reach of the Bureau’s previous oral health literacy initiatives to populations throughout the lifespan, care must also be taken to ensure the effectiveness and concentration of the Campaign’s messages are not diluted.

To do this, the Campaign will focus on the State’s underserved and at-risk populations where historical disparities in oral health status and access to care exist – especially senior citizens and new and expecting parents. Outlined below are the key target audiences for this Campaign, including important subgroups and influencers within each audience.

- **New and Expecting Parents:** A primary Campaign target, particularly mothers, as well as expecting women. Although we will focus on low socioeconomic and minority groups, outreach to these specific populations will be balanced with the need to maintain a broad-based appeal that will engage all mothers across a range of age groups, ethnicities and geographic locations.
Vehicles to reach this audience include mass media, patient education materials, community and school-based programs.

- **Seniors:** Another primary Campaign target, particularly in Kent and Sussex counties where access to care barriers and shortages of specialized dental providers exist. Again, the Campaign will focus on low socioeconomic and minority populations while maintaining balanced outreach with broad-based appeal to all demographics and locations. Vehicles to reach this audience include mass media, patient education materials, advocacy organizations, community and faith-based programs.

- **Medical Providers:** Medical practitioners across multiple disciplines can play a key role in reinforcing the importance of maintaining good oral health. Because seniors, pregnant women, infants and young children tend to more frequently see their providers multiple times annually, there is a greater opportunity for doctors and other health care providers to communicate with these primary target groups. Raising awareness of the connection between oral health and overall health with this audience will be a critical part of the success of this campaign. Vehicles to reach this audience include trade publications and newsletters, direct mail, clinical articles and conference participation. Specific targets within this group include:
  
  o Obstetricians  
  o Family Physicians  
  o Pediatricians  
  o Nurse Practitioners  
  o Physician’s Assistants  
  o Geriatrics  
  o Birthing Centers and Hospitals  
  o Midwives, Doulas and alternative birthing practitioners

- **Dental Providers:** Although dental providers are the primary source for oral health treatment, they also see patients with the least frequency annually. Dental providers also have the greatest knowledge of the importance of good oral health, so it’s crucial to gain their buy-in of the campaign’s strategy and messages to ensure that they will be reinforced when patients are in their offices. Specific subgroups within this audience include:
  
  o Delaware Dental Society  
  o Delaware Dental Hygienists Association  
  o Front Office and Auxiliary Staff

- **Key Influencers:** Outside of practicing medical and dental providers, there are a number of other important partners that influence the adoption of new messaging and patient education throughout the state. Vehicles for reaching this audience include trade publications, grassroots
outreach, industry newsletters, direct mail and conference participation. Examples of potential target partners include:

- Delaware Dental Society Leadership
- Obstetrician and Pediatrician Society Leadership
- Public Health Leadership
- Community Organizations
- Elected Officials/Policy Makers
- State-run/Federally Qualified Health Centers
- Medicaid Case Managers
- Kids Count, Head Start, WIC and Other Early Childhood Educators
- Medical and Dental School Educators
- Delaware Developmental Disabilities Council
- Latin American Community Center
- Delaware State Chamber of Commerce

Communications Database

In addition to the aforementioned partners and stakeholders, the Campaign will continue to share evidence-based, culturally sensitive and actionable messages and resources with a growing network of more than 1,000 community organizations, dental and medical providers. The Campaign is designed to cultivate long-term and growing support from these diverse groups of critical partners, including both traditional and non-traditional stakeholders.

Research

To ensure that the Campaign’s communication efforts are as effective as possible, it is vital to have a baseline understanding of the perspectives, knowledge levels and general awareness of seniors, new and expecting parents, with a particular focus on low-income and minority populations.ii

The research should aim to provide a greater understanding of the Campaign’s target audiences in the following categories:

- **Baseline Knowledge and Behavior**: It’s important to establish a baseline level of oral health awareness and knowledge a preventive behaviors in order to measure improvements over time. Good tracking measures can be incorporated that will be used in subsequent years to gauge the success of the Campaign. These could include changes in specific oral health behaviors or changes in awareness levels.

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ii As budget allows, additional research into the perspectives of medical and dental providers would be also be valuable to test general awareness of the importance of oral health and of professional guidelines relative to children, pregnant women and seniors.
• **Perceptions and Values:** This research will also provide qualitative information on the perceptions and value of oral health, as well as the effectiveness of various oral health messages. The goal will be to bring to light the reasons behind how and when dental care is sought, and how oral health is prioritized with other healthcare. With this information, we can better understand the motivations behind specific behaviors, refine the messages that resonate most with the target audience and encourage positive behavior change.

• **Access and Barriers:** The issue of barriers and access to care is complicated and includes a wide range of issues. By gathering information about past experiences, a better understanding can be gained about how dental and follow-up care is managed. By identifying the specific barriers to good oral health practices, the Campaign can be utilized to help overcome these obstacles.

A research firm with relevant experience and expertise is best suited to assist the Bureau with this task. Based on the results of the research, the specific messaging platform and tactics will be fine-tuned so the Campaign is explicitly tailored to the findings.

**Message Platform**

Based on the input gathered thus far from previous initiatives and the planning process, there are three core themes around which the Campaign’s message platform should be built:

• Linking oral health to overall health
• Illustrating the consequences of poor oral health
• Providing the “how to” basics for desired oral care behavior

These messages will encourage target audiences to place a greater value on healthy teeth while providing them with the tools and knowledge to achieve better oral health. It is important to note that these messages should be fine-tuned following the research phase to confirm their efficacy in achieving Campaign goals.

**Linking Oral Health to Overall Health**

Making the connection between oral health and overall health is not just an idea; there is a great deal of scientific evidence to support it. General health is a top-of-mind issue for the Campaign’s target audiences.

By encouraging seniors, parents, doctors and dentists to think of oral health as part of overall wellness, it will be much easier to raise the awareness of the issue as a bigger priority. Examples of the kind of messages that can be very effective for this positioning include:
• Oral health is directly connected to overall health. Dental disease may be affected by or contribute to many conditions, such as cardiovascular disease, premature birth, low birth weight, diabetes, Alzheimer’s disease, osteoporosis, HIV/AIDS, and other immune disorders and infections.iii

• Good dental health is essential in performing such basic functions as eating, smiling, kissing and talking without pain. The self-confidence that comes from a healthy smile goes a long way towards helping people lead happy, productive lives.

The Consequences of Poor Oral Health

An obvious progression of the overall health message is that there are consequences to having poor oral health. Instead of using scare tactics, it is much more compelling to illustrate that there is a long-term cost associated with not caring for our mouths. The following messages illustrate some of the consequences of poor oral health among our target audiences:

• Cavities are more than just painful. They can affect a child’s development, self-esteem, ability to eat properly and learn.

• In adults, painful cavities and oral disease affect job performance and causes people to miss work. In fact, dental-related absences from work have totaled more than 164 million work hours for U.S. adults in one year.iv

• Dental diseases affect individuals, their family, the community and society as a whole. Oral health problems can affect a person's ability to maintain a job or get promotions and can contribute to lowered academic achievement and goals.v

“How-to” Basics

Because oral health is so widely overlooked, there is a lot of misinformation on the best way to care for our teeth and mouths. For seniors, new and expecting parents, it’s crucial that how-to messages are evidence-based, simple, actionable and empowering. The following messages have been proven to be successful as part of a similar campaign.vi

• Cavities are the most common chronic childhood disease in the United States and they are nearly 100% preventable. You have the power to prevent cavities.

iii Mayo Clinic, Oral health: A window to your overall health, 2011
v NIDCR/CDC, Dental, Oral and Craniofacial Data Resource Center
vi Healthy Teeth Happy Babies Campaign, Maternal Child Health Association ‘Emerging Practice, 2011.’
Because the germs that cause cavities are passed from caregiver to child, it’s important that the whole family is taking care of their teeth.

Cavities are not inevitable. By taking a few easy steps, it is possible to make huge strides in the battle against dental disease.

- Do not share spoons, forks, or cups, and don’t clean pacifiers with your mouth.
- Only put formula, milk or water in a baby bottle – no juice, or sweet drinks.
- Everyone in the house should brush twice daily and floss.
- Children should see the dentist before their first birthday.
- Everyone in the family should see the dentist for preventive check-ups twice a year.

**Branding and Campaign Identity**

A strong brand identity will be developed for the Campaign. A traditional brand strategy will be utilized in order to ensure successful message recall across all target audiences.

The primary goals of a brand strategy are to define the identity of the brand, to convey the desired tone and feel of the Campaign, and to ensure consistency, both visually and in messaging, across all forms of communication. It should be clear that all communication materials, whether written or online, are part of the same overarching campaign.

Because Healthy Smile, Healthy Delaware has several recognizable predecessors, an updated identity will be created to leverage the strong existing awareness and materials of the Healthy Smile, Healthy You initiative. A graphic designer will be retained to freshen and enhance the existing visual elements.

Once the brand identity is clearly defined, general brand guidelines will be created to protect that identity and ensure consistency. This guideline will cover all aspects of how the brand might be represented. This includes but is not limited to the following:

- Logo (including color, size, location on document)
- Tagline (including color, size and location relative to the logo)
- Photos (including size, location, resolution, subject)
- Font (including type, size, color)
- Letterhead
- Header or Footer Art
- Website Address

Summarized below are some initial considerations for supplementing the brand identity:
• The brand should convey a warm, non-clinical approach that will resonate with mothers statewide and is differentiated from the other local health campaigns and provider communications.

• While materials should convey the gravity of oral disease, the brand identity must avoid causing outright discouragement by also focusing on positive messages.

• The goal of the brand should be to leave the reader with a feeling of empowerment, because dental disease is highly preventable – more so than almost any other health issue.

**Tactics**

Now that the overarching communications strategies, target audiences and messaging have been clearly defined, we can move into tactical implementation action steps and resources. The tactics recommended here are designed to create layers of consistent communications across all audiences.

**Action Steps**

Specific and unique tactical activities have been developed within each strategic lever. The following actions are designed to clearly identify the steps necessary to achieve the goals and objectives within the lever areas:

**Issue-Focused Advocacy:** Raise the profile of oral health issues throughout the state of Delaware

• Conduct outreach that builds strategic alliances and expands Delaware's oral health literacy network by 10%

• Institutionalize a consistent, evidence-based, culturally competent and actionable oral health message platform among a network of over 1,000 interdisciplinary providers

• Refine and solidify the definition of Delaware's at-risk oral health populations and geographic areas

• Conduct outreach and raise oral health awareness and cultural competency among policymakers

• Conduct outreach and raise oral health awareness and cultural competency among private funders

• Facilitate an Oral Health 2014 kickoff event with over 50 key stakeholders and policy makers
• Branding: Create new campaign name and logo to reflect an expanded target population beyond pregnant women and new parents

• Develop bilingual senior citizen, adult and adolescent oral health education materials in the same style and format as the existing infant and prenatal educational materials

• Integration of DPH oral health training materials into the Delaware Oral Health Coalition website and distribution to a network of over 1,000 interdisciplinary providers

Public Awareness: Decrease the prevalence of dental disease, particularly among Delaware’s most vulnerable populations – underserved seniors and parents of young children

• Conduct outreach and provide at least 5,000 pieces of oral health education materials to community and early childhood care organizations

• Develop of baseline oral health literacy survey questionnaire to gauge current public perceptions, obstacles and opportunities regarding oral health in Delaware

• Conduct outreach and provide at least 5,000 pieces of oral health patient education materials to Delaware AARP and other aging-focused organizations

• Develop and offer oral health article for Delaware AARP chapter newsletters

• Develop and pitch oral health related news releases and media advisories

• Develop and pitch thought leadership opinion editorials to Delaware media

• Identify influential journalists, media outlets and pursue potential partnerships

Professional Integration: Increase medical-dental collaboration – motivate primary healthcare providers to place greater value upon oral health and its direct connection to overall health

• Identify key partners for participation in oral health literacy events

• Provide medical partners with a dental provider referral list

• Develop and offer clinical oral health and cultural competency articles to Delaware medical professional association newsletters

• Conduct outreach and provide at least 5,000 pieces of oral health patient education materials to Delaware Obstetricians and Gynecologist offices
• Conduct outreach and provide at least 5,000 pieces of oral health patient education materials to Delaware AAP chapter and state pediatric offices

• Conduct outreach and provide at least 5,000 pieces of oral health patient education materials to DAFP members and physician offices

• Conduct outreach and provide patient education materials to Delaware Academy of Physician Assistants (DAPA) members

Written Materials

The Bureau will develop a set of written materials aimed at communicating key messages to each of the target audiences. While each piece of collateral will have a specific focus and goal, they should always maintain a consistent look and feel, as determined by the Campaign’s brand standards.

Parents

The following materials should be used to educate parents. These materials aim to increase awareness on the importance of oral health, improve at-home behaviors and remove some of the barriers to care.

• **Basic Oral Health Education Cards**: These simple patient education cards, available in both English and Spanish, aim to reach seniors, new and expecting parents with the most basic messages about oral health. The messages will be brief, relevant and empowering, and cards can be used by providers to explain in the simplest of terms why dental care is important. These materials can be made available at doctor and dentist offices, clinics and hospitals.

• **Resource Guide**: This booklet will provide a comprehensive how-to guide for finding a dentist and scheduling an appointment. The goal of this tool is to eliminate some of the access barriers by making it easier and more convenient for parents to locate a provider. Information will include contact information for dentists by county, office locations in a map format, public transit options, office hours, and details on which dentists accept Medicaid and pediatric patients. This guide will also explain how to make an appointment and will stress the importance of keeping your appointment. The guide will be distributed through pediatricians, dentists, family practices, community resource organizations and state clinics, thus providing an easy way for providers to refer their patients to a dentist.

• **Family Oral Health Brochure**: Unlike the education cards that target a specific patient population, this brochure will target all families with messages about the importance of good oral health (e.g. linking to overall health and development), the power of prevention and oral hygiene basics. The brochure is intended to be both inspiring and informative, appealing to a
range of seniors and families with children of all ages. Because the brochure will have a more general focus, it can be distributed by partner organizations, as well as during the grassroots outreach activities described below (e.g. festivals, special events, churches, after-school programs, etc.).

Providers

We recommend developing the following written materials for communicating with providers:

- **Clinical Articles for Doctors and Dentists:** Clinical articles can help to educate providers on the importance of oral health and encourage them to adopt practices that improve the oral health of their patients. Because medical and dental providers are receptive to communications written by their peers, we recommend developing several clinical articles authored by high-profile members of the Delaware medical and dental community. The collateral could be mailed to providers statewide and distributed at professional association meetings and speaking engagements. Topics could include:
  
  - The medical provider’s role in preventing dental disease.
  
  - The importance of oral health care during pregnancy and the role of the prenatal health care provider.
  
  - Anticipatory guidance recommending that children first be seen by age one, as well as the important things to cover in early childhood dental visits.
  
  - Best practices for incorporating Medicaid patients into a dental practice, including operational strategies for using auxiliary staff, as well as strategies for attracting Medicaid patients and reducing no-show appointments.

Interactive Tools

Developing complementary web-based tools is a critical part of magnifying the reach of the campaign, as well as reinforcing the messages among all audiences. We recommend the following interactive tools:

- **Campaign Website:** We recommend developing a Campaign website to serve as a communications anchor point, providing a place where people can go to find more in-depth campaign information. Not only will the website provide access to all Campaign tools, resources and information, but it also enables the Bureau to enhance their engagement with Campaign partners and other providers, who can provide links to the website in their respective communications. Further, the website can help to remove existing barriers by making it more convenient to find a dental provider. The website should have a simple, easy-to-remember URL
web address, distinct sections for providers and parents, and bilingual information for Spanish-speaking patients.

- The parent and seniors sections of the website will provide an interactive version of the patient education materials, including basic oral health information and a dental provider locator function. Providing an online database of dentists, including office locations, hours and contact information, will make it more convenient to get dental care, thus removing access barriers. Also available on this site should be links to additional relevant information and resources online.

- Having a section of the site dedicated to partner organizations and medical/dental providers will enable the Bureau to become a go-to resource for accurate, professional and relevant patient education resources online. The website should also allow providers to order patient education materials through an online order form. The provider locator function should be included in this section of the website and promoted as an easy-to-use tool for a medical provider who needs to refer patients for dental care.

- **Social Media**: As the Campaign grows, consideration should be given to utilizing social media platforms, including YouTube, Facebook and Twitter, which could be integrated with the Campaign website. Social media tools can create a dynamic dialogue with the public and enhance strategic partnerships, thus helping to further increase awareness and engagement.

  - It is important to note that in order to be effective, social media platforms require frequent updates (3-5 times per week) and can be a fairly labor-intensive outreach tool. Linking to the social media feeds of other relevant oral health groups is one way to help minimize staff workload while still maintaining regular updates.

**Mass Media**

Mass media is one of the most broad-reaching communications tools. While an effective campaign should not rely solely on this tactic, mass media has proven to be highly effective in generating awareness and swaying perception. Within mass media there are both paid mediums, such as advertising, and unpaid mediums, such as editorial coverage generated through media relations. Below are recommendations on the most effective ways to utilize mass media in this campaign.

**Media Relations**

An effective media relations strategy can deliver unpaid editorial coverage of oral health issues with high levels of credibility. In the case of this Campaign, the targeted media outlets can be grouped into two categories: consumer-focused outlets that reach parents and trade outlets focused on the medical, dental or community resource audiences.
• **Consumer-Focused Outlets:** This includes mom/parent blogs, parenting magazines, prenatal publications, local community newspapers or television stations. Potential article topics include:

  o **The Power of Prevention:** An article about the widespread nature of dental disease, the effect it can have on childhood development and the easy at-home behaviors that parents can adopt to prevent decay.

  o **Cavities are Contagious:** We cover our mouths with our elbow during cold and flu season so that we don’t spread germs, yet cavities are caused by germs, too. This article would provide information on the habits we can adopt to protect our family from cavity-causing bacteria.

  o **Oral Health Myths and Facts:** This article aims to bust common oral health misconceptions and explain when a child first needs to see a dentist, how to tell if your child has cavities and when a visit to the dentist is necessary.

• **Trade Outlets:** This includes publications targeted at health care and dental professionals, as well as trade society publications, newsletters, email blasts and conference programs. Articles to pitch include:

  o **Why Teeth Matter:** This article provides information on the important role of a medical provider in promoting good oral health by linking it to other childhood developmental issues like self-esteem, learning, and other chronic diseases.

  o **Fluoride Varnish 101:** This article would aid in the expansion of the fluoride varnish program at pediatric and family practices by explaining the basics of the procedure and the significant impact that it can have on children’s oral health.

**Seasonal Media Campaigns**

Using seasonal milestones is an important aspect of all forms of mass media, paid or unpaid. These milestones can provide an opportunity to connect oral health issues to broader coverage of an annual event, thus bringing added attention to the Campaign during strategic times of the year. Here are some good times of year to tie oral health messages to annual milestones through both earned and paid media.

• **January:** This is the time of year when we make resolutions, primarily related to health and starting new healthy habits. As a result, it’s a great time to encourage parents to cut out juice and soda, since it’s good for teeth and cuts calories.
• **February:** National Children’s Oral Health month is a great time of year to conduct media outreach with strategic partners to share messages that focus on prevention and behavior change.

• **Back to School:** This is a time when families are getting organized and ready for fall schedules – a great time to pitch dental check-ups along with getting school physicals and immunizations up to date.

• **Halloween:** Just before and after Halloween is generally a good time to pitch stories about the consequences of sugary treats.

• **Cold & Flu Season:** In October and November families are on high alert to keep infectious illnesses like the cold and flu at bay. This is a good time to talk about the little-known fact that cavities are contagious and that cavity-causing bacteria can be unknowingly passed from parent to child.

Reviewing the editorial calendars of target media outlets is another good way to identify upcoming coverage opportunities that can best be tied to the messages of the Campaign.

**Grassroots Community Outreach**

Grassroots outreach utilizes word-of-mouth, face-to-face communications and has proven to be a very effective strategy for motivating behavior change in public health education campaigns. While large-scale tactics like mass media advertising can create widespread public awareness, grassroots techniques ingrain messages on a deeper level through direct contact with individuals via trusted community resources.

For this Campaign, grassroots outreach will rely heavily on strategic partnerships with other health-related and community resource organizations that have strong existing relationships within local communities. This is especially important for reaching low-income and minority populations. By working with partner organizations that have already established a baseline level of trust and rapport with target populations, the Bureau will be far more effective in its outreach efforts.

Grassroots outreach can take several forms. Outlined below are three different levels of grassroots engagement (one or more of these methods may also be combined). Depending on the type of partner organization, the organization’s role in the community, and the group’s willingness and receptivity to help share messages about oral health, the Bureau can determine the appropriate level of engagement for each specific partner group.

• **Providing Resources:** At this level, the Bureau will simply identify advocates within partner organizations to distribute basic Campaign materials to the group’s respective members or
stakeholders. Alternatively, the Bureau can provide content and articles for an organization’s existing communication vehicles, such as websites, blogs, newsletters or bulletins, thus enabling target audiences to receive oral health messages from a highly trusted source. No training is required for this type of outreach – partner organizations need only to be willing to distribute the materials and messages. This method is a good fit for organizations such as community centers, churches, recreation centers and after-school programs.

- **Event Participation/Speaking Engagements:** This strategy involves hosting a booth at pre-selected community events, health fairs, trade shows and festivals, or sending a guest speaker to give a presentation to a partner organization. Festivals and events are an excellent opportunity to engage families in conversations about their oral health in a fun and interactive setting. We recommend having the Bureau send trained staff members or volunteers to the state’s best-attended festivals and to distribute items such as educational materials, toothbrushes and toothpaste. For presentations, a staff member or trained volunteer would give a prepared talk with key Campaign messages that are appropriately tailored to the partner group’s audience.

- **Hands-On Training:** This method is most appropriate for organizations that are already working extensively with target populations on health-related issues. Examples include Medicaid case managers, prenatal educators and non-profit organizations that conduct regular face-to-face outreach with low-income parents and pregnant women (e.g. La Esperanza, First Steps, Children and Families First, Sussex Child Health Promotion Coalition, etc.). The Bureau would train advocates from these groups on oral health basics and core Campaign messages and then teach them how to integrate these messages into their regular outreach activities with a customized curriculum. Although this level of outreach is likely the most labor intensive, it also has the potential to be the most impactful in reaching target populations on a deeper, more meaningful level.

**SECTION V**

**Path Forward**

**Sustainability and Next Steps**

The Campaign is designed to cultivate long-term and growing support from critical partners and key traditional and non-traditional stakeholders. By offering all materials, resources and training at no cost, the Campaign presents limited barriers to initial engagement and sustained involvement.

Outlined below are the next steps for moving the campaign from the planning phase into implementation:
• **Continue with Basic Outreach Activities:** Continue with existing Campaign activities such as free card offer mailings to dental and healthcare providers and community partners, along with trade-media outreach to medical and dental publications.

• **Lay Campaign Groundwork:** Refine the brand identity and Campaign messaging; determine the specific tactics to be implemented based on budget and research; initiate development of Campaign website.

• **Materials and Database Development:** Develop all Campaign materials, including web-based tools and written collateral; compile a full database for targeted partners, as well as a comprehensive media list; identify key local conferences, events and organizations for speaking engagements.

• **Campaign Launch:** Launch the Campaign with a coordinated effort including earned media, website launch, direct-mail and email card offer, strategic partner engagement, and grassroots outreach.

• **Monitor Progress and Measure Success:** Continually monitor the progress of the Campaign and make adjustments as necessary to enhance impact; use metrics described below to measure the success of the campaign every one to two years.

**Campaign Funding and Costs**

To maximize effectiveness, the tactics described here will need to be tailored to the funding that is available for Campaign implementation. Costs for this effort can vary widely, depending on the amount of work delegated to third-party contractors, as well as the specific tactics that are ultimately selected for implementation. Coming out of the research phase, the Bureau must coordinate closely with the hired consultant team to determine top campaign priorities depending on available funding.

Below are general estimates of the potential contractor costs associated with implementing the launch of the campaign. It is important to emphasize that these are rough estimates only and can vary depending on the specific contractor and tactics that are selected.

**Initial Research and Surveying**

The cost for the initial research would be determined through an RFP process. A budget of $25,000-$40,000 should be expected for this effort. Going forward it will be important to factor in the cost of annual or bi-annual research to measure the ongoing success of the Campaign.

For any budget level, the research contractor should work with the Bureau to determine the most appropriate, cost-effective strategy to be implemented based on budgetary constraints.
**Measuring Success**

Measuring the Campaign’s success on an ongoing basis is critical. This enables the Bureau to determine if the Campaign is indeed making an impact and achieving its goals. Ongoing tracking also allows the Bureau to demonstrate the campaign’s success in improving Delaware’s oral health and to justify future funding. The expense of measuring success is well worth the benefit of knowing that the Campaign is indeed making a difference – or, if not, how to make necessary adjustments to ensure success in the future.

We recommend utilizing several metrics for measuring the success of the Campaign:

- Conduct initial baseline research at the outset of the Campaign, as well as follow-up surveying, to measure oral health awareness levels and behaviors of Delaware’s citizens. Baseline responses can then be compared to the subsequent data gathered. A follow-up survey will be conducted one year after the Campaign’s initial launch and at least every two years moving forward.

- The University of Delaware’s “Dentists in Delaware” report provides comprehensive data on a range of metrics related to oral health within the state. There are several metrics in this survey that can be used to analyze the impact of the Campaign. For example, average weekly patient encounters can gauge whether patient numbers are increasing, and the average age of the youngest pediatric patients treated by Delaware dentists can measure whether messages on seeing children before the age of one are making a difference.

- The Delaware Oral Health Survey of Third Grade Children also analyzed several metrics that can be used to gauge Campaign effectiveness, including percentage of children with untreated decay, average amount of decay and percentage of children who had been to the dentist in the past year, among others. Ongoing tracking of these measurement tools can be utilized to determine whether the Campaign is achieving its goal of decreasing the prevalence of dental disease among children.

**Conclusion**

This campaign marks a momentous endeavor for the Bureau, and the strategies described in this plan have the potential to make a significant impact in the fight against dental disease. Through the implementation of this strategic communications plan, the Bureau will continue and elevate its record of success and become even more effective in improving the oral health of Delaware’s citizens.