

Funding Program: Partners in Program Planning for Adolescent Health
Project Title: Awesome Smiles: Integrating Oral Health in Adolescent Health and Positive Youth Development
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Project purpose

As national attention to adolescent health and positive youth development has grown over the years, this attention too often ignored teen oral health. The dental professions, although just beginning to address adolescent issues, were hampered in justifying a focus on adolescent oral health because little evidence or information existed specific to the oral health needs of adolescents. Yet adolescents were and are particularly vulnerable to dental caries, the single most common chronic childhood disease. According to the Surgeon General's National Call to Action to Promote Oral Health, as well as the Surgeon General's Report on Oral Health in America, nearly 70 percent of youth ages 16-19 and 50 percent of 12-15 year olds have dental caries in permanent teeth. Additional research on dental caries revealed that the disease, though progressive and cumulative, is highly predictable and largely preventable, the result of a microbiological imbalance in the mouth. Early and continuous dental care for children is highly effective in preventing this disease and the long-term effects of untreated dental decay. From this research it became clear that adolescents represented a large and often ignored population which would benefit from not only a specific focus on oral health but also a broad-based focus from the entire maternal and child health community. Historically however, this age group has been handed off to others in the dental community. The prevailing tendency among dental professionals has been to see adolescents as too old to be treated by pediatric dentists, or too young for general dentists. This tendency, coupled with the ongoing separation between the dental and medical communities, created a population of youth that is most in need of comprehensive oral health care, but too easily forgotten.

To address these issues, HRSA/MCHB awarded the American Academy of Pediatric Dentistry (AAPD) a Partners in Program Planning for Adolescent Health (PIPPAH) grant for a five-year adolescent oral health project titled "Awesome Smiles: Integrating Oral Health in Adolescent Health and Positive Youth Development." AAPD subcontracted with the Children's Dental Health Project (CDHP), a Washington, DC-based advocacy and consulting nonprofit organization to manage the Awesome Smiles project.

Project goals and objectives

As the dental component of the PIPPAH Partnership, Awesome Smiles identified four goals and related project objectives. The goals and objectives addressed the problems of adolescent dental inattention and lack of integration by engaging the broad dental

community and partnering with other provider groups to improve organizational infrastructure and programming within and between dental organizations, and develop inter-professional activity, public awareness, and policymaker action on adolescent oral health.

The following are the 4 goals and related objectives:

GOAL 1: Promote awareness, information, and programming on adolescent oral health and positive youth development (AOH/PYD) across a spectrum of dental organizations.

Objective 1: Develop and disseminate authoritative information that is relevant and accessible to providers and policymakers.

Objective 2: Establish sustainable infrastructure on AOH/PYD within dental organizations.

Objective 3: Institutionalize a coalition of dental groups and policy/resource centers to promote programming on AOH/PYD.

GOAL 2: Actively integrate oral health in the work of other professional groups that address the needs of adolescents.

Objective 1: Enhance integration of oral health into systems of care serving adolescents through communication, shared expertise, joint education and training, and integrated programming.

Objective 2: Leverage the adolescent component of the AAPD Foundation's education campaign on oral health by targeting non-dental providers as well as the public.

GOAL 3: Reduce oral health and dental care disparities among adolescents.

Objective 1: Engage dental coalition in: addressing Healthy People 2010 "critical objectives for adolescents" and "oral health objectives."

Objective 2: Engage dental coalition in promoting enrollment and utilization of SCHIP by eligible teens.

Objective 3: Engage dental coalition in informing and improving public policies and clinical policies that hold potential to reduce disparities.

GOAL 4: Collaborate with Maternal and Child Health Bureau's Office of Adolescent Health to promote its Title V missions and key strategies including building a data and information base; improving state infrastructure; identifying and replicating best practices, policies, and partners; improving insurance coverage; and encouraging positive youth development.

Objectives: Continuously refine this project through (1) rigorous evaluation (2) responsiveness to MCHB/OAH interests and guidance.

The Awesome Smiles project made a significant number of incremental yet important steps in each of the goals and objectives. Each project goal was specifically created to achieve deliverables focused on the first tier of the MCH Pyramid of Health Services, i.e., "Infrastructure Building Services."

The Awesome Smiles project was particularly able to make significant progress in developing materials and increasing the dental community's knowledge base on adolescent oral health (Goal 1, Objective 1).

In addition, collaboration among the PIPPAH Partner organizations – primarily involving dental experts and information – was highly successful and resulted in oral health gaining visibility and understanding among a wide variety of organizations. Through Awesome Smiles, the dental community was able to consistently maintain a focus on adolescent dental access and care through national forums, conferences, and visibility opportunities with the wider medical and public health communities. (Goal 2, Objective 1.)

In focusing on infrastructure and collaboration, Awesome Smiles was closely associated with the primary goals of the overall PIPPAH initiative. The project was designed to promote adolescent oral health in a climate of positive youth development both to the dental community and to the overall medical and social services communities. In addition, information was also solicited from the latter communities to inform decision-making among pediatric dentists as well as the dental community at large.

Other Awesome Smiles goals and objectives required a combination of time and persuasion to succeed. While mobilizing interest within professional organizations on adolescent oral health was accomplished, institutionalizing the focus within national committees, clinical guidelines etc. remained difficult. At the same time organizations agreed with the need for a focus on adolescent oral health, federal and private organizations were faced with achieving their own long-term institutional results with less available funds, and organizations new to adolescent health were increasingly reticent to embark on initiatives and programs for which they have little or no direct funding. However, the successes and models of AAPD and ASTDD in developing and sustaining high-level committees focused on adolescent oral health continue to encourage other professional dental organizations. (Goal 1, Objectives 2, 3).

In addition, the goals and objectives dealing with broader national communications strategies and change within the overall public health system required measurements of success that were more narrowly focused and incremental in nature. Significant change on a national scale often takes more time than initially considered, and the Awesome Smiles project had to rely on planting the seeds in order to achieve long-term programmatic growth (Goals 3, 4.)

Project activities

As a way of immediately institutionalizing a focus on adolescent oral health, AAPD implemented two early actions which strengthened their commitment to the project. In the project's first year, AAPD approved the addition of "adolescent" to their description of their patient base. Previously, this "tag line" read "infants and children;" the addition brought forward the underserved teen community, as the phrase was changed to "infants, children and adolescents." This is now used in all of AAPD's documents describing the pediatric dentist's patient base. AAPD also formed the Committee on the Adolescent,

which oversees guideline development and revision, training and workshop design and implementation, and other programmatic aspects of AAPD's focus on adolescent oral health and positive youth development. Two highly successful adolescent oral health symposia were held in conjunction with their annual conference including the 2006 workshop focused solely on positive youth development. These symposia continue to be planned through the coming years.

As one of Awesome Smiles' most important accomplishments, AAPD's Council on Clinical Affairs revised the Guidelines for Adolescent Health. The revised version draws heavily on information gathered from PIPPAH Partners and HRSA and added references to the American Psychological Association's publication "Developing Adolescents: A Resource for Professionals," and American Bar Association's "Judges Guide for Teens in Foster Care," and included a section on Positive Youth Development.

AAPD also formed a Dental Coalition, comprising close to fifteen of the major, national dental professional and public health organizations. While forming a professional coalition was a requirement of the grant, the organizations readily signed up and expressed excitement about the Awesome Smiles project and this opportunity to be involved. Three organizations joined after the grant had been awarded. The coalition met in Washington, DC to discuss individual projects and inter-organization collaboration that would meet the goals of the Awesome Smiles project. Also attending that meeting were national leaders including then US Chief Dental Officer Dushanka Kleinman, Indian Health Service Chief Dentist Chris Halliday, Maternal and Child Health Bureau Chief Dentist Mark Nehring, as well as Senate health advisor Bruce Lesley of Senator Bingaman's office, and PIPPAH's HRSA/MCHB Program Officer Audrey Yowell.

Seventeen of the 22 member organizations that agreed to promote adolescent oral health and positive youth development (AOH/PYD) through their organizations and membership sent representatives, generally the Executive Director or a Board representative. The two-day meeting at the American Dental Association's Washington office resulted in creation of a work plan identifying initial action steps for the coalition, what individual organizations can accomplish, and how dentistry as a profession can help adolescents attain both health and social accomplishment.

The Coalition's first goal of the work plan was to agree upon a standard, workable definition of adolescence. A subcommittee was formed, which reviewed a spectrum of organizational and medical definitions of adolescence, and finally decided to adopt the extensive definition contained in the report "A Conceptual Framework for Adolescent Health," which was a collaborative effort between the State Adolescent Health Coordinators Network (SAHCN) and the Association of Maternal and Child Health Programs (AMCHP)

The most successful outcome from the Dental Coalition's work plan happened through the Association of State and Territorial Dental Directors (ASTDD) as they formed and implemented their School and Adolescent Oral Health Committee. That committee's work plan specifically calls for collaboration with the *Awesome Smiles* project, and was

instrumental in beginning discussions with the State Adolescent Health Coordinators network.

Awesome Smiles information was consistently distributed at National Oral Health Conferences from 2002-2005; these conferences bring together both the private and public sectors of the dental community and focus on the public/private partnership that benefit child (and adult) oral health across the country. Additionally, Awesome Smiles project information was also distributed informally, with experts on hand to respond to questions, at a series of roundtable presentations at 2005 National Oral Health Conference.

The project developed and presented successful and well-attended Adolescent Oral Health/Positive Health Development Symposia at the American Academy of Pediatric Dentistry annual sessions in 2005 and 2006; private practice pediatric dentists earned CEU credits through these presentations.

In order to address the lack of research on adolescent oral health, AAPD and CDHP collaborated on a pilot study involving AAPD pediatric dentist members. The resulting Maryland pilot survey on Pediatric Dental Office Policies Regarding Adolescent Patients provided information for a poster which was presented at the 2004 National Oral Health Conference in Los Angeles, CA. The survey had a response rate of 61% (53 out of 87) with 45 usable surveys totaled. Findings from the study include:

- Greater than 2/3 of responding pediatric dentists who practice in Maryland report having an upper age limit for accepting patients to their practice.
- The most commonly reported type of treatment provided to adolescent patients is basic care (100% - 45/45) followed by orthodontic treatment (73%) and cosmetic treatment (58%).
- The most common reason reported for referring adolescent patients out of the practice is that “the treatment is too complex (71% - 29/45), followed by “prefer not to treat” (24%).
- While 84% of responding practitioners reported that they can accommodate more adolescent patients, only 24% would like to see more adolescents.
- Regarding their residency training experience, 90% reported that fewer than 25% of patients were adolescents. Greater than half of respondents reported that more than half were patients with special needs.
- Almost two-thirds of respondents report having had no formal instruction in dental care for the adolescent.

- Most respondents (98%) were not familiar with “positive youth development,” although 3/4 of respondents strongly or somewhat agreed with the concept of “positive youth development.”

Information on Awesome Smiles was also distributed at the CDHP exhibit at AAPD’s 2004, 2005 and 2006 Annual Sessions.

In spite of the attention to adolescent oral health generated by the program, the lack of research dedicated to adolescent oral health continued to perpetuate the lack of “science-based” strategies undertaken during the grant. The saying “catch 22” applies -- adolescent oral health remains a low priority because the research base is almost non-existent, which also made describing the current research and literature base of adolescent oral health extremely difficult.

While Awesome Smiles generated interest in the dental community, convincing the oral health community that adolescent behaviors can present a new set of threats to oral health remained difficult, owing in large part to the lack of research.

Coordination

The AAPD/CDHP partnership and collaboration in Awesome Smiles, which started out as a subcontract from AAPD to CDHP to run the program, laid the foundation for successful collaborations with a variety of professional organizations (mostly PIPPAH Partners) as well as federal agencies and programs and state level public health initiatives.

For the most part, collaboration among PIPPAH grantees was often facilitated through familiarity – meeting face-to-face twice yearly made it easier to pick up the phone and call another partner, since we knew each other from these meetings.

Very significantly for adolescent oral health access, the PIPPAH Project enabled the dental community to have a key seat at the Institute of Medicine’s Committee on Adolescent Health Care.

Awesome Smiles achieved its first successful partner collaboration with the American Bar Association (ABA). Because the partnership eased introductions, AAPD was able to contribute valuable oral health information to the ABA “Judges’ Guide on Health for Teens in Care.” This represented the first major contribution from the dental community to one of the PIPPAH Partners, and helped judges across the country understand the need for teen dental access by focusing on dental health basic information and linking oral health and overall health. ABA continues to offer this publication on their Web site.

CDHP provided Awesome Smiles information in its exhibit at the MCH Federal/State Partnership Meeting "Building Bridges: From Research to Practice," October 2003 in Alexandria, VA. Special editions of CDHP News*Bytes on Obesity, Children with Special Health Care Needs, and Preterm/Low Birth Weight infants (mirroring topics of the meeting’s three plenary sessions) were prepared and distributed to participants.

At the request of the American Bar Association, and for their 11th National Conference on Children and the Law, CDHP identified and contacted a dental professional with experience in the foster care system to participate and present information on dental needs in foster care at a day-long pre-conference session in Washington, DC. The Awesome Smiles project arranged for Sue Bishop, a Nebraska public health dentist, to be a panelist at this workshop. Dr. Bishop presented information on the dental aspect of foster care and participated in a role-playing session focusing on the various roles non-legal professionals and the social/medical/psychological community can play in supporting foster care, especially in the courtroom.

Awesome Smiles project staff provided consulting services and technical support to the Children's Hospital National Medical Center (CNMC) Dental Department and TASA (Teens Against the Spread of AIDS program), helping them develop a proposal to fund an adolescent oral health project. The proposal received an AETNA Foundation regional health disparities grant to the project will worked toward developing an effective referral system for adolescents who need dental health services and are too old for the Children's Hospital program, as well as provide in-hospital oral health education for adolescents treated throughout the hospital. The Dental Department/TASA partnership visibility was enhanced through an article in the Healthy Mothers, Healthy Babies "Monday Morning Memo." CDHP also provided technical assistance to Children's Hospital National Medical Center for a second adolescent oral health grant proposal.

CDHP staff presented information on adolescent access to dental care and the elimination of disparities at the American Nurses Foundation's PIPPAH Implementation Task Force meeting on July 30, 2003.

Additional coordination/collaboration activities over the five years of the Awesome Smiles project included:

- CDHP and AAPD also worked with AMCHP to start a dialogue between the State Adolescent Health Coordinators and the network of State Dental Directors.
- AAPD, CDHP and the American Dietetic Association collaborated to include a presentation on obesity and oral health at the 2005 AAPD Annual Session in Orlando, FL;
- CDHP represented the oral health community at meetings of the National Coordinating Committee meetings on School Health and Safety;
- The Awesome Smiles project leadership and staff promoted HP 2010 oral health objectives at November 2003 National Adolescent Health Network meeting in Washington, DC.

AAPD and CDHP also entered into discussion with leadership at the Centers for Disease Control and prevention on introducing a specific adolescent oral health objective into the NIAH 21 Critical Objectives.

While the Dental Coalition organizations were engaged at the outset, many of the organizations were understandably concerned with their own strategic plans, and it was difficult to maintain a focus on adolescent health at the decision-making level in most of the organizations. Consequently, the Awesome Smiles project focused on two key organizations – the grantee (AAPD) and the state dental director organization (ASTDD) – to be models for the rest of the Dental Coalition in creating an institutional focus on adolescents. AAPD and ASTDD made significant progress in focusing on adolescent oral health, through dedicated committees and multiple professional learning opportunities. The scope of organizational change requires that small gains be made, which take much time in working with organizational bureaucracies. The dental community’s lack of data on adolescent oral health played into the difficulty of making long-term organizational change across the Dental Coalition, as it is difficult to make a case for adolescents if the data is lacking. The adolescent oral health literature review, the foundation for a renewed focus on adolescent research, also experienced barriers in completion, as it has been difficult to report on trends and clinical data without specific studies in the peer-reviewed literature. Work begun in the five years of the PIPPAH Project will take additional years to fully reach the project’s goals.

Publications/Products

Awesome Smiles project staff initially pursued development of an Awesome Smiles logo, so that the dental aspect of adolescent health could be branded and identified easily. The logo has now been included in 15,000 CDHP brochures, as well as on the AAPD and CDHP Web sites, on publications developed by CDHP including fact sheets, and the CDHP exhibit, which prominently features the ongoing AAPD/CDHP collaboration in programs and advocacy.

The Awesome Smiles project gained a substantial online presence at CDHP’s Web site, with links to PIPPAH Partners and Dental Coalition organizations. The section’s resources also include: a full project description, a monograph on Positive Youth Development with links to HRSA/MCHB’s “Towards a Blueprint for Youth” and HHS’s National Youth Summit information; and direct access to APA’s “Developing Adolescents: A Reference for Professionals,” AMA’s PIPPAH Bookshelf, the AMCHP/SAHC Conceptual Framework for Adolescent Health, and CDHP News*Bytes. A Resources page was also developed, linking professionals to a wide variety of clinical policy, advocacy/public policy, and youth development web sites. CDHP added links to the National Initiative to Improve Adolescent Health, the “21 Critical Objectives,” and the Healthy People 2010 dental goals mentioning adolescents to the Awesome Smiles Web site section. In addition, CDHP continued to highlight these adolescent objectives in all aspects of the Awesome Smiles project, particularly at PIPPAH Partner and other HRSA grantee meetings. As mentioned above, information about NIIAH and Healthy People 2010 has been disseminated at key dental meetings, including AAPD, ASTDD and AAPHD.

The Awesome Smiles project also allowed for the development of and dissemination of News*Bytes, a bi-weekly email “clipping service” that identifies the latest information on

child and adolescent oral health access and how that information is presented to the general public through the news media. Coupled with the project's ongoing focus on adolescent oral health, this publication has been an important part of the five-year PIPPAH project. News*Bytes has been in circulation since February 2002, and now has a direct subscriber base of close to 300 individuals, who have received over 150 issues with approximately 9500 news articles and reports. Many of these individuals forward the newsletter to between 2 to 5 colleagues, and each issue is posted to various listservs, expanding the user base exponentially. News*Bytes not only covers oral health trends as reported by the media, but keeps the issue of infant, child and adolescent oral health and dental access consistently visible to other PIPPAH partners and the medical and public health communities. It communicates the most current policy, program, research and clinical information on infant, child and adolescent oral health, and includes in its subscriber base the Robert Wood Johnson Foundation, CDC, NIH, the National Governor's Association, the National Rural Health Association, Families USA, and state public health departments. A database of all news articles contained in News*Bytes was created and generates reports documenting how the public understands all aspects of infant, child and adolescent oral health.

Additional publications created through and with help from the Awesome Smiles project include:

- AAPD extensively revised their Adolescent Guidelines and integrated PIPPAH-Partner adolescent info and Positive Youth Development; the guidelines are available at AAPD's Web site.
- Dental Clinics of North America published a journal edition specifically on Adolescent Oral Health. Edited by the Vice-Chair of AAPD's Committee on the Adolescent, created through the project, the acknowledgements cite Awesome Smiles as a driving force behind the volume.
- The first literature review on adolescent oral health research was drafted.
- Fact sheets on 1) positive youth development and 2) *Awesome Smiles* project activities, were developed and posted at www.cdhp.org.
- A PowerPoint presentation on clinical aspects of adolescent oral health for any clinician or non-dental professional to use was created.
- "Oral health" added to one of the National Initiative to Improve Adolescent Health's (NIAH's) four goals. This was a notable success, as the NIAH "21 Critical Objectives" did not include any of the Healthy People 2010 objectives on dental health.
- Information contributed to ABA's Policy Compendium on Confidential Adolescent Services.

- AAPD nutrition policy/guidelines to AMA's resource guide on obesity/nutrition/physical activity.
- ABA teen pregnancy and foster care article.
- e-adolescence newsletter – featured Awesome Smiles info.
- An article on the PIPPAH initiative in the February 2002 edition of ADA News featured a quote from CDHP on AAPD's Awesome Smiles project.

Dissemination/utilization of results

As mentioned above, a major focus for Awesome Smiles was supporting adolescent infrastructure development at AAPD and ASTDD. AAPD's Committee on the Adolescent has the professional authority to develop policies and guidelines, and in fact completed such a review in its first year of existence. With support from Awesome Smiles, ASTDD, the professional association for state dental public health personnel, has initiated and grown its school health committee, with a focus on adolescents. The Adolescent Oral Health Symposium at the AAPD Annual Meeting was the first-ever continuing education session dedicated to adolescent oral health and positive youth development. The ASTDD School and Adolescent Health Committee survey and the development of a database on adolescent oral health public and private programs will provide two sources for identification of best practices.

CDHP compiled online information from 12 Dental Coalition organizations and contributed the information to the NIAH 21 Critical Objectives matrix, in addition to organizational membership information for the "companion document" promotion matrix. The matrix listing of dental resource information included recommendations, policy statements, poster and PowerPoint presentations, initiatives, public health campaigns, policy and clinical guidelines, issue briefs and fact sheets, publications and

Project information was disseminated over the five years through exhibits at the National Oral Health Conference (2002-2006), the AAPD Annual Sessions (2003-2006), and numerous other HRSA, dental community and public health conferences.

Evaluation

While policies and guidelines at a number of dental coalition organizations were slow to materialize due to changing priorities and key staffing changes, two strategic groups made great progress in institutionalizing adolescent oral health and positive youth development in their governance and programming. The Association of State and Territorial Dental Directors' (ASTDD) School and Adolescent Oral Health Committee approached completion of State Profiles for School and Adolescent Oral Health, as well as solidifying the Committee's charges and ongoing work plan. In addition, the AAPD Committee on the Adolescent is now a fully functioning group, capable of independent action while relying on the wealth of resources offered by the PIPPAH Project. AAPD's symposium on adolescent oral health held in 2005 has paved the way for additional, similar symposiums in the coming years. CDHP's monitoring of and technical assistance

for these two committees has been time-intensive to start; with these successes, it is clear that these committees are functioning on their own, and further technical assistance can be given to other key dental coalition organizations as they embark on institutionalizing Awesome Smiles into their work plans.

While additional organizations were slow to fully incorporate AOH/PYD, this does not mean ignored the project. Another key organization – the American Association of Orthodontists – continued to pledge its support of the Awesome Smiles program. The Awesome Smiles project resources will continue to be available online for any organization to use.

The inability to conduct both a major continuing education session and a dental coalition meeting in Year 4 resulted in a setback in regard to building widespread support for adolescents within the dental profession. The Dental Coalition were encouraged throughout the five years of Awesome Smiles to: include an article on Adolescent Oral Health/Positive Youth Development and what it means for their members in one of their newsletters; and pursue development of a workshop on AOH/PYD to be held at their annual conferences.

Continuing face-to-face PIPPAH Partner meetings and opportunities to work with other organizations continued to be of prime value in sharing information and promoting the Awesome Smiles project.

Ongoing discussions with the Office of Adolescent Health were key in raising the visibility of oral health through the National Initiative to Improve Adolescent Health and in collaborations being planned between AAPD, CDHP and NAHIC.

Project impact, future plans and sustainability

Awesome Smiles was able to produce great successes in the first five years, but not without challenges. Without HRSA/MCHB investment through the PIPPAH initiative, which made the Awesome Smiles project possible, these challenges may not have been addressed for a long while, if at all.

The project's greatest impact has been on AAPD and ASTDD, organizations which invested committee action in a focus adolescent oral health. A critical and vital impact was also made on the National Initiative to Improve Adolescent Health, which started out minus a focus on oral health as there was no measurable HP 2010 dental objective in the 21 Critical Objectives. Through ongoing, consistent work by both the Awesome Smiles staff and the leadership of NIAH, adolescent oral health is now included in the NIAH logic model, and continues to be an important interest of a number of former and current PIPPAH Partners.

It is important to note that, without funding, it is difficult to continue all of any project's goals and objectives as fully as when it had funding, and Awesome Smiles is no exception. However, through five years of steady collaboration and capacity building

during the funded part of the project, Awesome Smiles made a significant and important contribution toward making adolescent oral health and positive youth development an integral part of key dental organizations, PIPPAH Partners, HRSA/MCHB, and the medical community.

The dental community's involvement, through CDHP, in the Institute of Medicine's Committee on Adolescent Health Care is one a very important benefit of the Awesome Smiles project, and provides a sustained activity that continues on after the project ended. Awesome Smiles project staff was first made aware of this committee through one of the final PIPPAH Partner meetings, and noticed that the IOM committee had not yet included a focus on oral health. Project staff suggested to IOM staff that Dr. Burton Edelstein, founding director and board chair of CDHP, be considered for the committee, and soon afterwards he was confirmed for the project. Dr. Edelstein continues to bring a focus on adolescent oral health to this important national committee.

AAPD Committee on the Adolescent continues to develop materials, review research, plan continuing education sessions, and consult with additional AAPD committees to ensure that the focus on adolescent oral health begun by the Awesome Smiles project continues at AAPD. The committee has an extensive plan for programming and communication on adolescent oral health in collaboration with pediatric dentists and past and current PIPPAH Partners.

AAPD was asked by a current PIPPAH Partner (the American College of Preventive Medicine) to be a part of their ongoing medical coalition.

ASTDD's School and Adolescent Oral Health Committee also continues to build partnerships to integrate oral health to school and adolescent health, and to collaborate on efforts to improve the general health of school age children and adolescents.

Annotation

Enhancing attention to adolescent issues by dental professionals, integrating oral health with general health and healthcare for teens, reducing disparities in oral health, and promoting the mission of the MCHB/Office of Adolescent Health are the goals of this project. Proposed activities include developing a knowledge base, developing a professional organization infrastructure on adolescents, creating sustainable intra- and inter-professional coalitions, and improving the public's awareness and engagement in oral health for adolescents. Materials and activities to improve attention to adolescent oral health and positive youth development include print and electronic publications, meetings and conferences, inter-agency programming, identification and dissemination of best practices, and evaluations of these efforts.

Key Words

Adolescent Oral Health, Positive Youth Development, Consortia, Professional Education in Adolescent Health, Public Policy, Public-Private Partnership.