

California Office of Oral Health Strategic Communications Plan

The California Department of Public Health (CDPH), in partnership with the California Department of Health Care Services, convened stakeholders to serve on the California Oral Health Plan Advisory Committee (Advisory Committee). One of the main activities was to lead the development of the goals, strategies and objectives identified in the *2018-2028 California Oral Health Plan* (COHP). The Advisory Committee convened a Communication Workgroup to lead the development of the communication aspects identified in COHP. Five key goals were identified for improving oral health and achieving oral health equity for all Californians. Communications is one of the goals, which aims to develop and implement communication strategies to inform and educate the public, dental teams, and decision makers about oral health information, programs, and policies. After releasing COHP, the Advisory Committee transitioned into the California Oral Health Partnership to implement it. While COHP covers a 10-year timeframe, CDPH, and its partners, will use COHP as a basis to develop two-year action plans providing guidance on short-term priorities.

Mission/Vision

The mission of the Office of Oral Health (OOH) is to improve the oral health of all Californians through prevention, education, and organized community efforts. To achieve these goals, OOH is providing strategic advice and leadership to oral health stakeholders throughout the state, building oral health workforce capacity and infrastructure, and implementing and evaluating evidence-based best practices in oral disease prevention. OOH's vision is Healthy Mouths for all Californians.



Purpose

Effective communication regarding COHP can empower the public, dental professionals, and decision makers about oral health information, programs and policies to improve the oral health of all Californians. COHP is strategic, adds value to stakeholders, educates target audiences, and allows collaborating organizations to yield a greater impact with limited resources. This work is possible by coordinating efforts and aligning with the ten-year timeframe identified in COHP. Resources will be leveraged with the involvement of the partners. COHP outlines the communication goals, objectives, strategies and tactics for California and is intended for a wide and diverse audience. COHP exists for use by CDPH, the Oral Health Advisory Committee, partnership organizations, program associates and others who have an interest in implementing COHP, including associated agencies, corporations and private-sector cohorts.

The Burden of Oral Health in California

Oral health is an essential and integral component of overall health throughout the lifespan and is more than healthy teeth. Oral health refers to the health of the entire mouth, including the teeth, gums, hard and soft palates, linings of the mouth and throat, tongue, lips, salivary glands, chewing muscles, and upper and lower jaws. Not only does good oral health mean being free of tooth decay and gum disease, it also means being free of chronic oral pain, oral cancer, birth defects such as cleft lip and palate, and other conditions that affect the mouth and throat. Despite the vital relationship of oral health to overall health, there are many challenges to achieving optimal oral health in the United States.



Oral diseases are highly prevalent in the various stages of life among California residents.¹ Although largely preventable, tooth decay is the most common chronic disease in children. More than 1 in 4 adults aged 20-64 years have untreated tooth decay,² and half of adults aged 45 years and older have signs of gum disease.³ Oral health disparities have been documented by socio-economic status (SES) and race/ethnicity, with higher burden of oral diseases among low-SES populations, Hispanic and African

American populations.¹ Although effective preventive measures are available, both clinical dental services and community-level interventions are underutilized. In response to the COHP, the *California Oral Health Surveillance Plan 2019-2023* provides a strategic approach for the development and implementation of California's first oral health surveillance system, including statewide indicators for tracking oral health status, priority populations, and relevant determinants, such as access to care, dental workforce, and infrastructure.⁴

Communications Goal 4: Develop and implement communications strategies to inform and educate the public, dental teams and decision makers about oral health information.

Objective 4A: Institute a process for developing and implementing a communication plan for the COHP and related reports.

Strategies: Convene Communications Workgroup

¹ Gadgil M, Jackson R, Rosenblatt N, Aleemuddin A, Peck C, Bates J. Status of Oral Health in California: Oral Disease Burden and Prevention 2017, California Department of Public Health: Sacramento, CA, 2017.

² Dye BA, Thornton-Evans G, Xianfen L, Iafolla TJ. [Dental Caries and Tooth Loss in Adults in the United States, 2011-2012](#). NCHS Data Brief, no 197. Hyattsville, MD: National Center for Health Statistics; 2015.

³ Eke PI, Thornton-Evans GO, Wei L, Borgnakke WS, Dye BA, Genco RJ. Periodontitis in US Adults: National Health and Nutrition Examination Survey 2009-2014. [J Am Dent Assoc](#). 2018 Jul;149(7):576-588.e6.

⁴ Brenes EL and Darsie B. *Oral Health Surveillance Plan 2019-2023*. Sacramento, California: Office of Oral Health, California Department of Public Health, September 2019.

Target Audience(s):

Primary: Oral Health Partnership members and their organizations; policymakers; CDPH and DHCS partners.

Secondary: Academic institutions, media; potential funders and the general public.

Key Messages

- Oral diseases are widespread in California; some populations are at high-risk and experience a disproportionate share of the oral health disease burden.
- COHP strategies will strive to improve oral health across the lifespan for California's diverse population.
- Improving oral health improves overall health, well-being and quality of life of individuals and communities, while reducing health care costs. Target audiences can champion reports such as COHP, *Status of Oral Health in California: Oral Disease Burden and Prevention 2017* report, infographics, fact sheets, and other relevant reports or publications.

Planned Channels and Materials

- Posted on CDPH and partner websites.
- Meetings and Webinars.
- Media.
- Speaking points and presentation templates.
- Legislative briefings.
- Emails and list-servs.
- Templates for local action plans based on state plan.

**Planned Activities and Timelines**

- Develop and implement OOH Strategic Communication Plan with regular workgroup calls
- Develop communication plan for disseminating COHP, Oral Disease Burden Report and updated data driven Fact Sheets or Info-graphs.
- Complete by June 30, 2022.

Evaluation Methods and Measures

- Checklist for distribution and target audiences.
- Website statistics and social media traffic.
- Digital surveys of target audiences.

Lead Responsibilities: CDPH OOH and OOH Communication Workgroup.

Objective 4B: Increase the coordination, consistency, and reach of oral health messages targeted to different audiences in multiple languages and various formats.

Strategy: Gather, inventory, evaluate, support UCSF in hosting a database and promote educational materials that meet standards for credibility, effectiveness, ease-of-use, and culturally and linguistically competent.

Target Audience(s):

Primary: Local Oral Health Programs, OOH Partnership members and their organizations; community organizations and agencies representing diverse populations; CDPH and DHCS partners.

Secondary: media, potential funders and the general public.

Key Messages

- Education is critical for Californians to make decisions about oral health care and use of oral health self-care information and obtaining services.
- Information should be written in plain language and translated or developed in languages that are representative of the diverse CA population groups.

Planned Channels and Materials

- Website links to reviewed materials.
- Website links to other organizations.
- Webinars and presentations about materials and website.
- Marketing via social media and partner communication channels.



Planned Activities and Timelines

- Identify existing materials.
- Select criteria for reviewing materials
- Review materials and identify gaps where new materials are needed.
- Create database for hosting links to materials and messages.
- Create process of identifying and linking to new materials as they emerge.
- Identify partners to create new materials to fill gaps.
- Create evaluation tools to track dissemination, engagement and impact.
- Complete by June 30, 2022 and updated as needed.

Evaluation Methods and Measures

- Criteria for selecting and reviewing materials
- Plan for review of materials to target populations
- User pre-testing and feedback on website of materials
- Checklist of dissemination efforts
- Focus groups, key informant interviews, usability testing and/or other methods to determine effectiveness and relevance of outcomes of materials

Lead Responsibilities: CDPH OOH, OOH Communication and Surveillance Workgroups, University of California, Berkeley and University of California, San Francisco.

Objective 4C: Increase the number of Local Health Jurisdictions (LHJs), Community-Based Organizations (CBOs) and Federally Qualified Health Centers (FQHCs) using social media platforms to promote overall oral health wellness.

Strategies: Assess use of social media and provide guidance on the development and enhancement of existing policies and procedures for community-based organizations, LHJs, and FQHCs. Create an oral health toolkit and provide training on strategies for effective social media messaging as resources allow. Training will promote better utilization of the oral health toolkit for local target audiences such as LHJs, community-based organizations, and FQHCs.



Target Audience: LHJs, FQHCs and CBOs in California

Key Message: LHJs, FQHCs and CBOs, can use their connections to local communities to increase the flow of peer-reviewed, credible and useful information on oral health that will lead to better preventive oral health, self-care behaviors, and use of accessible oral health services.

Planned Channels and Materials

- Webinars and presentations for training.
- Appropriate types of media to promote oral health, geared to those most frequently used by groups in the communities.

Planned Activities and Timelines

- Assessment and analysis of social media use and policies.
- Identify and review existing oral health toolkits.
- Pilot the toolkit with 2-3 LHJs, CBOs and FQHCs.
- Create an oral health toolkit adapted for California.
- Develop presentations and schedule trainings via webinars and/or at meetings.
- Complete by June 30, 2022.

Evaluation Methods and Measures

- Evaluation forms for webinars, presentations and toolkit.
- Checklist and report of social media efforts by LHJs, CBOs and FQHCs
- Tracking of responses and followers of social media posts
- Examples of outcomes such as changes in behaviors or use of services

Lead Responsibilities: CDPH OOH, Social Media Contractor, Communication Workgroup

Budget: Social media contractor

Objective 4D: Develop and implement communication strategies to inform and educate the public, dental care teams, and decision makers about oral health information, programs and policies.

Strategies:

- Review effective materials and models for increasing oral health literacy.
- Implement an oral health literacy initiative for dental teams in public and private settings.

Target Audience(s):

Primary: Dental care teams in private and public settings, Policy Makers

Secondary: General public, CBOs, recipients of dental services

Key Message: Dental care teams can provide more credible and useful information on oral health that leads to increases in preventive oral health behaviors, use of appropriate oral health services, and increased understanding of procedures conducted in the dental clinic.

Planned Channels and Materials

- Website created in section 4B.
- Marketing of initiative through Partnership communication pathways.
- Guidelines, protocols and tips posted on website and included in webinars, podcasts or other presentations.

Planned Activities and Timelines

- Use materials and models reviewed in section 4B to select those most relevant for dental care teams.
- Market the initiative and solicit participating dental care teams.
- Create guidelines and options/tips of ways for dental teams to implement an oral health literacy initiative in their practices.
- Provide training for interested teams via webinars, podcasts or at meetings.
- Complete by June 30, 2022.

Evaluation Methods and Measures

- Criteria for selection of materials for dental teams.
- Evaluation forms or electronic surveys for trainings
- Review draft guidelines and options/tips by various teams
- Track results of marketing by location and type of practice
- Use patient satisfaction feedback forms to help improve OOH's materials, system, utilization, and ultimately better outcomes
- Offices document improvements in preventive behaviors, follow up or use of services in patient charts

Lead Responsibilities: CDHP OOH, Communication Workgroup

