Annual Meeting Kicks Off the Awards’ Show Season

**ASTDD Receives Exemplary Service Award**

Dr. William R. Maas presented the Chief Dental Officer’s Exemplary Service Award to the Association of State and Territorial Dental Directors at the National Oral Health Conference in Seattle. The award was presented on the 50th Anniversary of the Association. The commendation, presented during the annual PHS luncheon, recognized the Association’s significant contributions to the mission of the Chief Dental Officer. Kathleen Mangskau, incoming President, accepted the award on behalf of the Association.

**Gerry Beverley Honored with Distinguished Service Award**

Ms. Gerry Beverley, Director of Program Sales and Marketing for Stone Pharmaceuticals, a Division of Medical Products Laboratories, received the 1998 ASTDD Distinguished Service Award. Ms. Beverley and Medical Products Laboratories are dedicated supporters of the ASTDD Annual Meeting/National Oral Health Conference. Ms. Beverley has assisted several state and local oral health programs with their fluoride self application programs.

**Dr. Flanders Receives Outstanding Achievement Award**

Dr. Raymond Flanders is the 1998 recipient of the ASTDD Outstanding Achievement Award. The award is given to a current or former state dental director who has made major contributions to ASTDD and toward improving the public’s oral health on a state level.

Dr. Flanders is the former director of the Illinois Division of Oral Health. He retired from practice in 1996. Dr. Flanders served on the ASTDD Executive Committee and developed the new member activities, including the new member packet and the new member orientation at the annual meeting. He also chaired the Oral Injury Prevention Committee and was actively involved in the development of Illinois’ “Project Mouthguard.”

Dr. Flanders was honored for his dedication to ASTDD because he always made time to assist with Association projects and activities to improve oral health for every citizen.

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Association of State and Territorial Dental Directors -- 1997-98

President
Kathleen Mangskau, RDH, MPA
Director, Oral Health Program
North Dakota State Department of Health
600 East Boulevard Avenue
Bismarck, ND 58505-0200

President-elect
Donald Altman, DDS, MPH
Chief, Office of Oral Health
Arizona Department of Health
1740 West Adams, #010
Phoenix, AZ 85007-2670

Secretary-Treasurer
Diane Covington, RDH, MPH
Director, Oral Health Program
CO Dept. of Public Health and Environment
4300 Cherry Creek Drive South
Denver, CO 80246-1530

Immediate Past President
M. Dean Perkins, DDS, MPH
Chief, Bureau of Dental Health
Missouri Department of Health
P.O. Box 570, 930 Wildwood
Jefferson City, MO 65102

Directors
A. Conan Davis, DMD, MPH
Director, Division of Oral Health
Alabama Department of Health
201 Monroe Street
Montgomery, AL 36130

Harry Goodman, DDS, MPH
Office of Oral Health
Maryland Dept. of Health and Mental Hygiene
201 W. Preston St., 3rd Floor
Baltimore, MD 21201

Warren R. LeMay, DDS, MPH
Bureau of Public Health
1414 E. Washington Avenue, Rm 223
Madison, WI 53703-3044

Editor
Lynn Douglas Mouden, DDS, MPH
Associate Chief, Bureau of Dental Health
P.O. Box 570, 930 Wildwood
Jefferson City, MO 65102

Historian and Parliamentarian
William C. Maurer, DDS, MPH

Committee Chairs
Fluorides
Warren LeMay, DDS, MPH

School Health
Jacqueline Tallman, RDH, MPA

National Oral Health Data, Surveillance Project
Don Altman, DDS, MPH

Tobacco and Oral Cancer
Michael Morgan, DDS, MPA

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BRFSS
Harry Davis, DDS, MPH

Abuse and Neglect Prevention
Lynn Douglas Mouden, DDS, MPH

President's Liaisons
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Rebecca King, DDS, MPH

American Public Health Association
Diane Covington, RDH, MPH

Association of Community Dental Programs
Robert Jones, DDS

National Alliance for Oral Health
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National Network for Oral Health Access
Diane Covington, RDH, MPH

AMCHP
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American Dental Hygienists' Association
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Awards and Necrology
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Constitution and Bylaws
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Annual Meeting:
Program and Local Arrangements
C. Michael Fitzgerald, DDS, MPH
Harry S. Goodman, DMD, MPH

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Diane Covington, RDH, MPH

Resolutions and Reference
J. Steven Cline, DDS, MPH

Nominating Committee
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C. Michael Fitzgerald, DDS, MPH
Judith A. Feinstein, MSPH

Committee of States
Harry Davis, DDS, MPH
Challenges, Change, and Opportunity:
ASTDD Celebrates 50 Years

Kathy Mangskau, RDH, MPA, President, ASTDD

The 1998 ASTDD Annual Meeting and National Oral Health Conference/National Dental Sealant Conference marked the fiftieth anniversary of our Association. Over the past fifty years, ASTDD has faced many challenges, grown significantly, and changed with the times. And now, we have tremendous opportunities to impact oral health in the next millennium. One theme that has remained constant over the years is the importance of partnering and collaboration at the federal, state, and local levels. The benefits achieved by combining resources and skills provide compelling reasons for professionals and organizations to work together. These effective synergies are created by active member participation and involvement. I encourage all members to become actively involved in our organization by participating on a committee. We need your involvement for ASTDD’s continued growth and success.

The 1998 meeting had record breaking attendance and an exceptional program. A special thanks to Mark Siegal, National Oral Health Conference Planning Chair; Nancy Carter, National Dental Sealant Conference Planning Chair; Beth Hines, Local Arrangements Chair; and all the exhibitors, sponsors, and presenters who helped make the conference a success. Conference attendees were swayed into networking opportunities at a wonderful reception at the Seattle Space Needle and took a walk down memory lane at the banquet celebrating fifty years.

The theme of the 1998 conference “Science and Policy: Responding to Change” focused on evidence-based dental care, medical management of dental caries, managed care, coalition building, use of fluorides, health surveillance and information dissemination, and current sealant research and technologies. It is a challenge to embrace change and develop and implement evidence-based practice and performance measures. The evidence of success in public health programs lies in the outcomes.

It is truly an honor for me to serve as your president during the coming year. These are exciting times filled with opportunities to advance dental public health. Through a cooperative agreement with the Division of Oral Health at CDC we are working to strengthen oral health programs’ ability to enhance oral health by preventing and controlling disease. We have our first national office in Washington, D.C. and are developing conferencing capabilities available to all states through our ASTDD WebBoard. The revised “Guidelines for State and Territorial Oral Health Programs” have been widely distributed to assist state programs in assessment, planning, implementation and evaluation activities. ASTDD is working to support and build oral health capacity and infrastructure in states.

Our meeting next year will be held in Washington, DC in March of 1999. We will be holding some joint sessions with the Association of Maternal and Child Health Program Directors. Local Arrangements Chair, Harry Goodman, and Program Chair Mike Fitzgerald have planning efforts underway. I look forward to seeing you in DC in 1999 and encourage you all to become active in our Association.

Thanks to all the members, committees, and officers who have contributed to advancing dental public health over the past 50 years. We need the same dedication and commitment for the next 50 years.

Mark Your Calendars - Save the Date!
Dentists C.A.R.E. Conference (Child Abuse Recognition and Education) is set for July 31 - August 1, 1998 in Chicago. The conference, sponsored by the ADA’s Council on Access, Prevention and Interprofessional Relations, is supported by HRSA, MCHB and the ADA Health Foundation. The program includes presentations on child abuse recognition, ethics, forensics, family violence as a public health problem and dealing with child protective services. For more information or registration materials, contact the ADA at 312-440-2879.
Family violence: an intervention model for dental professionals

Family violence is a public health problem that dramatically affects individuals, families and communities. According to Susanna Short, MSW; Jamie C. Tiedemann, MS; and Daniel E. Rose, DDS, domestic violence is the number one cause of emergency room visits by women.

In Northwest Dentistry, September-October 1997, the authors point out that though dental professionals frequently see the results of family violence during patient visits, they have not been trained to provide intervention and referral services.

Studies have shown that most injuries in domestic violence are found in the head and neck areas, which are clearly visible to the dental team. The family dentist may be the only person with the opportunity to see victims separately from their abusers. Therefore, say the authors, the dental professional should create a safe office environment where intervention is possible.

They suggest the following steps:
- Train all staff members on family violence intervention.
- Have literature on family violence available in the waiting area and in private areas such as restrooms. Literature should contain appropriate referral numbers, including those of advocacy programs and emergency shelters.
- Display a certificate in the office stating that staff have been trained in family violence intervention. Include a statement such as, “This office is a safe place to talk about family violence.”
- Include questions about family violence on your initial intake form.

The authors also include some intervention basics:
- Assure the patient of confidentiality.
- Actively listen.
- Acknowledge that disclosure is painful for the patient.
- Provide the patient with options and resources.
- Document the problem in the patient's chart.
- Plant a seed for follow-up.
- Never minimize the importance of the information given and never discuss the abuse in front of the perpetrator, say the authors.
- Do not give advice or dictate appropriate responses.
- Because the risk of physical injury or death is so high, it is critical to respect the wishes of the patient in calling or sending material.
- Never contact a patient or leave a voice message without the individual’s explicit permission, the authors caution. Doing so places the victim in an extremely dangerous position.

Diane Covington Appointed to ADA Committee

Diane Covington was recently named to the American Dental Association’s National Fluoridation Advisory Committee (NFAC). The NFAC provides expertise and guidance on fluoride issues for the Association’s Council on Access, Prevention and Interprofessional Relations (CAPIR). Ms. Covington joins ASTDD members Dr. Jim Sutherland of Louisiana and Dr. Lynn Mouden of Missouri, CAPIR Vice-chair and chair of the NFAC since 1996.

Other members of the NFAC are Mr. Tom Reeves, representing CDC; Dr. Michael Easley, ADA spokesman on fluoridation; Dr. Herschel Horowitz, formerly of NIDR; Dr. Ernest Newbrun, professor emeritus at UCSF; Dr. Pete Crawford, a private practicing dentist from Clearwater, Florida; and a representative from NIDR.

Pediatric dentistry and public health

An award of more than $900,000 will fund a new University of Iowa College of Dentistry program combining pediatric dentistry with a public health focus. According to The Dental Link, Fall 1997, the five-year training grant from MCHB will support a three-year residency program leading to pediatric dentistry certification and a master’s degree in dental public health. The program aims to produce pediatric dentists who are advocates for public health issues, particularly those important to populations with special health care needs. Another goal is to provide curriculum models and other resources to pediatric dentistry programs across the country. Continuing education, consultation and technical assistance to practitioners will also be part of the University of Iowa program. The MCH grant will fund two pediatric dentistry residents each year.