PRESIDENT'S MESSAGE



Transforming dental hygiene education

Dental hygiene education has begun to receive greater focus as part of advancement of the profession. In a recent visit to Dubai for an international dental conference, Mary Rose Pincelli Bologne, Treasurer of the IFDH, and I had the opportunity to meet with colleagues interested in creating dental hygiene education programmes in the Middle East. While discussions occurred relative to educating clinicians, there was also recognition that dental hygienists must be able to provide preventive awareness, education and treatment in communitybased settings. To do so requires recognition of the need to expand dental hygiene education programmes beyond the two year traditional programme to a four year programme. Other countries have begun to examine expansion of dental hygiene education as well.

In the United States, the American Dental Hygienists' Association (ADHA), in partnership with the Santa Fe Group, held a conference to discuss changes needed in dental hygiene education. Conference attendees acknowledged that the oral health of the public needs to be improved and that curricular change is imperative to meet the growing demands of the public. Discussion focused on creating a universal core curriculum that addresses oral health needs, community-based programmes, cultural competence, special needs, human services research, evidence-based practice and collaborative practice models.

Based on this symposium, ADHA is working with the Academy for Academic Leadership on curricular reform. They are collaborating with a pilot group of dental hygiene education programmes to develop domains for curriculum reform and to propose new models for dental hygiene education. Current domains being examined include: foundation knowledge, customized patient-centred care, management in healthcare systems, interpersonal communication and intra- and interprofessional collaboration, critical thinking, professionalism and research. Some programmes are creating models for baccalaureate education, while one programme has developed an entry level doctoral programme curriculum model incorporating education in six roles

of the dental hygienist: administrator, educator, clinician, advocate, researcher and public health. These models for dental hygiene education are in the early stages of development. Plans are underway to have each model presented at the upcoming ADHA Annual Session on 19 June 2014.

While the ADHA/Santa Fe Group has begun the process of making change, other countries are having similar discussions and taking steps to modify dental hygiene programmes. Perhaps the best example of change has occurred in Korea. In addition to providing four year dental hygiene education, the University of Namseoul has begun offering doctoral education for dental hygienists. This new programme offers dental hygienists the opportunity to gain greater knowledge and experience and may advance the professionalization of dental hygiene worldwide.

What does this transformation mean for dental hygiene? There are several significant facets that must be considered. First, dental hygiene as a discipline and profession is making changes in a proactive manner to improve the knowledge base of future practitioners. There is acknowledgement that dental hygienists must be better equipped to serve the public and that they must be responsible for their oversight. Further, there is growing recognition that dental hygiene has a valuable place in preventing oral disease, and this profession must lead the way in creating new methods of healthcare delivery that are both effective and sustainable. Dental hygienists are willing to be a catalyst to ensure that the new dental hygienist of the future is well-educated, capable of providing care in a variety of settings, accountable to healthcare agencies and the public, and ultimately, ensuring its relevance for the future. Witnessing and participating in this transformation should be a remarkable experience. Get involved and be part of the change!

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