

Service Learning: Bringing Awareness to Interventions Needed within the Aging Community

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Using service-learning activities in a dental hygiene program allows students to experience oral health promotion within a local, community setting. The students provide non-surgical periodontal treatment to a variety of populations, including elderly individuals with limited access to these services. The School of Dentistry's dental hygienist program at Virginia Commonwealth University utilizes service-learning activities to allow students to expand their clinical experience. Working off-campus under direct supervision of a dentist, students complete needed oral healthcare services. During my senior year in the dental hygiene program, I had an opportunity to participate in a service-learning activity that profoundly highlighted poor oral health conditions within the elderly population.

Assisted-living facilities offer a variety of therapeutic options addressing residents' medical needs. Medical professionals work directly with residents to improve their quality of life. Services offered to residents include exercise programs, arts, crafts, and health monitoring. These services encourage creativity, socialization, and continued learning. In a collaborative effort to meet dental needs, students from Virginia Commonwealth University extended dental hygiene services to help residents maintain and improve their periodontal health.

During one of my visits to the assisted-living facility, I was deeply saddened by the lack of daily attention given to residents' oral health, mainly removal of food through brushing. Medical conditions such as dementia challenge the caregivers and the residents. Many of these residents are unable to recognize the need for dental attention. If caregivers attempt to offer routine dental care, the residents can become agitated, causing safety risks to the caregiver and the resident. When oral care is not provided, residual food debris accumulates.

Heavy plaque and calculus accumulations make it difficult to assess the health of residents' periodontal pockets. A caregiver would have to brush residents' teeth prior to performing periodontal assessments, including probing depths. In an effort to share my experience with fellow students, I suggested through a blog that they brush the residents' teeth prior to recording those assessments. The levels of plaque and food debris are a hindrance to providing oral hygiene during the appointed treatment time. Sadly, many residents refused much-needed dental x-rays and treatment. While working in this facility, I began to ask myself: Who could make a difference in these residents' lives? Are community members aware of the problems associated with dental care in assisted living facilities? If they were aware of these challenges, would members of the community collaborate with individuals in oral healthcare to make the necessary changes? What types of changes are necessary to make a difference?

Multi-level modifications are necessary to improve the oral healthcare of the aging population in these facilities. The primary level must explore behavior modifications and interventions with the residents' direct caregivers or certified nursing assistants (CNAs). A helpful intervention would be to offer a continuing education course on oral hygiene practices, specifically in residents with dementia or organic brain syndrome. At the academic level, prior to certification, students could complete a presentation on obstacles to providing oral health for all types of patients and how to overcome those obstacles. The lesson should include topics such as oral cancer screenings, brushing techniques, and overall oral healthcare challenges within the

specific patient population. On a larger scale, community and statewide awareness is necessary to improve dental conditions in assisted living facilities.

Education and awareness empower change. Service learning provided me with a wealth of education and the awareness I need to make a difference. There is an urgent need for dental intervention within our communities, and discussing and demonstrating proper dental care is one way I can offer to help at the ground level. Through service learning, I have found compassion for the geriatric patient with altered mental acuity and have been humbled by the opportunity.

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