14th September 2017



GENERAL REPORT ON THE WRINGLEY ORAL HEALTH PROJECT IN GHANA

Target beneficiaries: 129,183 children reached as of July 2017

Introduction

Oral health is a critical component of health and must be included in the provision of health care. Studies indicate that development of cavities in milk teeth (baby teeth) increases the risk of tooth decay in permanent teeth. As such establishing good oral care routine early in life is vital to development of strong and healthy teeth.

In Ghana, it is estimated that about 40 percent of children aged 12 and below suffer from tooth decay, missing, stained teeth and bad breath. Poor oral care among children remains a matter of concern. Worst still, oral health education and sensitization especially in deprived communities has been low.

The introduction of the Oral health project in 2013 sponsored by Wrigley came as a timely intervention to reduce risks of poor dental care as well as improve quality of life, self-esteem and academic performance of children in deprived communities.

Activities

The project instills in children good oral care practices by providing the following services:

- Educate children and parents on the importance of regular brushing of teeth, at least twice daily
- Distribute to schools, information, education and communication (IEC) materials such as posters, leaflets, charts which teachers use to reinforce the need for maintaining good dental care.
- Provide counselling to children who have dental problems
- Refer children who have serious dental issues for treatment
- Distribute to children free tooth pastes and brushes as incentive package

Our Success Story

The project has reached out to a total of 129,183 children in selected deprived communities in all the ten regions of Ghana since its inception in October 2013.

The table below gives a breakdown of the number of children reached out to within a certain time period.

DURATION	BENEFICIARIES
Oct 2013-Oct 2014	16,374
Nov 2014	2,870
Jan 2015-Dec 2015	25,751
Jan 2016-Dec 2016	46,282
Jan 2017-Jul 2017	37,906
Total	129,183

The project has impacted greatly in the lives of the beneficiaries. Many of them have imbibed the regular brushing of teeth at least twice a day, morning before meals and evening after meals.

Observations/Lessons

A number of issues have been linked to the problem of poor dental care in the children.

Whilst acknowledging that, knowledge about oral health related sicknesses and the need to adopt healthy oral care habits from infancy is gradually taking root among the educated in the Ghanaian society, traditional beliefs and inherited practices which make children vulnerable to dental diseases still exist in rural areas. Some still use plantain stalks and concoctions for cleaning their teeth.

Negligence and ignorance on the part of parents and care givers of 'when' and 'how' to brush teeth properly makes it extremely difficult to transmit the habit of regular brushing of teeth to children.

Due to poverty, parents are unable to regularly provide brushing materials for their children. Again related to poverty, children lack nutrition necessary for formation and development of strong and healthy teeth.

Oral health is intertwined with other medical conditions. For example mental health and oral health are cyclically related. Children with mental conditions lack the 'normal' understanding of

the importance of maintaining good oral care. Such children most likely suffer from poor selfcare and neglect which results in poor oral care.

Conclusion

Oral health education most especially in deprived communities is essential to promoting and maintaining the overall health and well-being of children. When children have access to the right oral health education, they are more likely to develop healthy habits that will prevent the occurrence of poor dental health and its associated consequences. It is therefore important to channel resources to provide education on oral health.

Written by

Mispah M. Mamah

Oral Health Project Coordinator

Photo Gallery







