



STATE OF MARYLAND

DHMH

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Maryland Department of Health and Mental Hygiene

201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

**2012 SESSION  
POSITION PAPER**

**BILL NO: SB 867**  
**COMMITTEE: EHE**  
**POSITION: Support**

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**TITLE:** State Department of Education – Oral Health Education – Certification and Monitoring

**BILL ANALYSIS:** Senate Bill 867 requires county education superintendents to certify that oral health education is taking place in their schools on or before a certain date each year. It also requires the State Department of Education to provide support for oral health education to be conducted at the county level and develop a process to monitor implementation of such education. Finally, it requires the State Department of Education to issue an annual report to the Governor and General Assembly containing information relating to the implementation of oral health education in the State.

**POSITION AND RATIONALE:** The Department of Health and Mental Hygiene (the Department) supports SB 867 because oral health education as part of the school health education curricula is a critical strategy in helping children prevent oral disease and achieve optimal oral health. Oral health education builds students' knowledge, skills, and positive attitudes about oral health and motivates them to improve and maintain their health, prevent disease, and reduce risky behaviors. Oral health education curricula and instruction can help students learn skills they will use to make healthy choices throughout their lifetime and result in positive changes in behavior that lower their risk for oral disease. It is especially important to expose children at a young age to oral health education since awareness of the importance of oral health is generally lacking, especially among high-risk, low-income populations.

The fundamental mission of schools is to provide the knowledge and skills children need to become healthy and productive adults. Promoting healthy and safe behaviors among students is an important part of this mission and can increase a student's capacity to learn, reduce absenteeism, and improve physical fitness and mental alertness. Oral health education is an essential part of this paradigm and not only impacts children's health but also their ability to learn and be productive in school.

When children have poor oral health, their ability to learn is affected. An estimated 51 million school hours per year are lost because of dental-related illness. Students at ages 5 -17 years miss more than 1.6 million school days due to acute dental problems. Children distracted by dental pain may be unable to concentrate and learn, complete school work and score well on tests. Poor oral health has been related to decreased school performance, poor social relationships and less success later in life.

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When children's acute dental problems are treated, and they are no longer experiencing pain, their learning and school-attendance records improve.

Currently there is no requirement that county public schools include oral health as part of their health education curriculum. SB 867 rectifies this critical void and empowers the Maryland State Department of Education to assure, assist, and monitor that oral health education is an integral component of school health education classes at the county level in compliance with state education standards. The integration of timely and evidence-based oral health education into county public school teachers' health curricula as described in SB 867 is in line with the Department's goal to assure that Maryland children are both healthy and academically successful.

There is no fiscal impact to the Department.