

A BILL ENTITLED

Initial draft

Inclusion of Oral Health Education in the Voluntary Maryland Public School Curriculum for Grades Kindergarten through Twelve

FOR the purpose of encouraging the State Board of Education to promote awareness in the public schools through use of the kindergarten through grades 12 curriculums, that is to include the incorporation of a one (1) hour minimum each year of oral health education.

Whereas, on February 25, 2008, a 12 year-old Maryland boy named Deamonte Driver died from untreated tooth decay.

Whereas, ignoring oral health problems can lead to needless pain and suffering, causing devastating complications to an individual's well-being, with financial and social cost that significantly diminishes quality of life and burden American society.

Whereas, over 108 million children and adults lack dental insurance, which is over 2.5 times the number who lack medical insurance.

Whereas, oral diseases and tooth decay are progressive and cumulative and become more complex over time.

Whereas, dental caries (tooth decay) is the single most common chronic childhood disease – five (5) times more common than asthma and seven (7) times more common than hay fever.

Whereas, over 50% of five to nine year-olds children have at least one cavity or filling, and that proportion increases to 78% among 17 year-olds.

Whereas, tobacco-related oral lesions are prevalent in adolescents who currently use smokeless (spit) tobacco.

Whereas, 51 million school hours are lost each year to dental-related illness.

Whereas, pain and suffering due to untreated diseases can lead to problems eating, speaking and attending to learning.

Whereas, employed adults lose more than 164 million hours of work each year due to dental disease or dental visits.

Whereas, oral-facial pain, as a symptom of untreated dental and oral problems and as a condition in and of itself, is a major source of diminished quality of life. It is associated with sleep deprivation, depression, and multiple adverse psychosocial outcomes.

Whereas, safe and effective measures exist to prevent the most common dental diseases-dental caries and periodontal diseases.

Whereas, there are a variety of ways to access oral health education products and materials for the classroom from toothpaste and toothbrush manufacturers, health care facilities and insurance companies, local health departments and the Maryland Department of Health and Human Services - Office of Oral Health (Maryland State Oral Health Plan) to aid with the incorporation of oral health education during school hours and education at home.

Whereas, *Code Red: The Oral Health Crisis in Your Classroom*® *Empowering the Teacher to Teach Oral Health Education*, is made readily available and is an effective curriculum resource for teachers to help make the incorporation of oral health education lessons a seamless effort in routine classroom instruction.

Many people consider oral signs and symptoms to be less important than indications of general illness. As a result, they may avoid or postpone needed care, thus exacerbating the problem. If we are to improve the state of Maryland's capacity and as well that of the nation, to improve oral health and reduce health disparities, we need to enhance the public understands of the meaning of oral health and the relationship of the mouth to the rest of the body. The dissemination of these invaluable, prevention messages needs to include the incorporation of oral health education in the kindergarten through grade 12 public school curriculums.

Article – Education

The State Board shall encourage the county boards to promptly include the incorporation of oral health education in the kindergarten through grade 12 public school curriculums.

- (A) ON OR BEFORE JANUARY 1, 2013, THE STATE BOARD SHALL BEGIN INCORPORATING ORAL HEALTH EDUCATION IN THE PUBLIC SCHOOLS TO EDUCATE STUDENTS ABOUT ORAL HEALTH.**
- (B) A CURRICULUM INCLUSION DEVELOPED UNDER SUBSECTION (A) OF THIS SECTION SHALL INCLUDE EDUCATION ON ORAL DISEASE PREVENTION AND DENTAL HEALTH PROMOTION.**
- (C) THE INCLUSION OF ORAL HEALTH EDUCATION IN THE PUBLIC SCHOOL CURRICULUM SHALL BEGIN IN KINDERGARTEN THROUGH GRADE 12.**

Article – Family Law

Article – State Government

THE GOVERNOR SHALL PROCLAIM THE INCORPORATION OF ONE HOUR OF ORAL HEALTH EDUCATION IN THE VOLUNTARY PUBLIC SCHOOL CURRICULUM FOR STUDENTS IN KINDERGARTEN THROUGH 12TH GRADES.