

**February 3, 2020**

**House Education Committee**

**Testimony in support of HB 4127**

**Chair Doherty, Vice Chairs Alonso Leon and Helt, and Members of the Committee**

For the record my name is Dr. Jennifer Clemens. I am the Interim President and Dental Director for Capitol Dental Care (CDC). We are a dental care organization that provides care to Oregon Health Plan (OHP) beneficiaries, through contracts with coordinated care organizations across the state.

I am testifying today in support of all three sections of HB 4127. However, I particularly want to address the first section entitled "Curriculum Requirements Related to Oral Health."

As a dentist, I was dismayed to learn two years ago from my middle-school aged daughter that her health class did not contain any education on oral health and its importance in overall health. As a result, I researched it and discovered that oral health is not currently included in Oregon's standards for health education in K-12. All of us at Capitol Dental Care are very excited that it is included in HB 4127.

There are many reasons and much data to support including oral health in the overall health education standards. Among those are the following points:

- Children who have dental caries are 12 times more likely to have restricted activities or miss school due to pain from this condition than are children who do not have dental caries. Dental pain is associated with difficulty eating, sleeping, playing, and concentrating – all of which can have a negative impact on a child's ability to learn.

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- Dental caries is one of the most prevalent diseases of childhood. In the US, dental decay occurs 5x more frequently than asthma and 7x more frequently than hay fever.
  - Oral health education in schools is effective. Children who attend schools that include oral health in the curriculum have lower incidences of decay and dental trauma than children who attend schools that do not address oral health.
  - Dental caries in childhood are associated with more severe oral health problems in adulthood and with other conditions over the lifetime, such as poor nutrition, speech impairments, psychological problems, cardiovascular disease, diabetes, cancer and death. People with dental disease are more likely to experience depression, lack of confidence, and difficulty obtaining employment, and self-report a lower quality of life than do people with healthy mouths.
  - Children and adults don't intuitively know how to care for their mouths; this is something that must be taught and practiced.
  - Oral health behaviors developed at a young age are more sustainable.

In addition, one of a series of reports from the World Health Organization, entitled "Oral Health Promotion: An Essential Element of a Health-Promoting School," provides a wealth of information on the importance of oral health education in the schools, especially in Section 2. You can find it at [https://www.who.int/oral\\_health/media/en/orh\\_school\\_doc11.pdf?ua=1](https://www.who.int/oral_health/media/en/orh_school_doc11.pdf?ua=1)

I would like to thank you for the opportunity to testify before you today on HB 4127. Capitol Dental Care looks forward to your support of the bill.