McGill’s Commitment to Dentistry Outreach: Transforming Delivery of Oral Health Care in Quebec

When Access to Dental Care for Underprivileged People in Quebec — a report sponsored by Quebec’s Department of Health and Social Services — was released in spring 2004, it illuminated a pressing but often overlooked health care issue. The report investigated the challenges of ensuring oral health care for neglected and underprivileged communities in Quebec while also advocating the promotion of “an environment in which the provision of dental care for the underprivileged is seen as an important issue” by the dental profession.

These same concerns occupied participants at a 2-day colloquium in April 2006 (Les voix d’accès — pour un meilleur accès aux soins dentaires pour les personnes défavorisées au Québec) It brought together about 80 people, including oral health professionals, patients and representatives of organizations that provide services to Quebec’s underprivileged population, as well as academics and government officials, to discuss barriers to accessibility — and ways to overcome them.

Both the report and the colloquium grew out of the McGill faculty of dentistry’s commitment to improving oral health for people and communities with limited access to services. The report was the work of McGill dentistry professor Paul Allison, a public health researcher and the then director of Quebec’s Network for Oral and Bone Health Research, along with Chris Allington and Judiann Stern, a student and a hygienist, respectively, in the faculty of dentistry. The follow-up colloquium was organized by a McGill committee that included Drs. Allison and Christophe Bedos.

Such efforts represent a central element of McGill dentistry’s vision, as expressed in its mission statement, which asserts that the faculty “envisions a healthy and equitable society” and “is committed to the promotion of oral health and quality of life in the whole population, with emphasis on the needs of under-served communities and individuals.” The statement goes on to emphasize the need “to enable oral health professionals to attain the highest levels of competence and commitment to patients and to the community,” “to foster outstanding research, and to educate and nurture students in order to increase knowledge and improve the well-being of the population,” “to serve the population through the delivery of oral health care in hospital facilities and through outreach programs in underprivileged communities” and “to maintain a leadership role in oral health education, in scientific research and in the shaping of public health policy, with an emphasis on reducing health inequalities.” Although the latter 2 objectives explicitly stress community outreach and advocacy, all express a concern for community health and the importance of outreach, both to the professional community of dentists, through continuing education courses and other events, and to the broader community of patients.

Taking Dentistry to the Streets

In service to the patient community, McGill’s outreach efforts involve both faculty members and students. On 19 occasions during the academic year, professors Bruce Dobby and Kwong Li set up mobile clinics across Montreal, then supervise students who provide free dental services to some of the city’s most underprivileged people. The students are participating in a course, Dentistry 313: Community Clinics, but are also providing basic dental care — examinations, cleaning, fillings.
and the like — to people who would otherwise tumble through the holes in Canada’s dental health care system: street kids, homeless adults, impoverished senior citizens as well as young families struggling to get by and recent immigrants.

The program began in 1998, with a small cohort of dentists led by Dr. Michael Wiseman providing outreach services, and has since grown to become a mandatory course. By the time they graduate, each McGill dentistry student has participated in 8–10 mobile clinics.

“When I went to school, community dentistry was just a lecture,” Dr. Dobby recalls. “But our students are getting a real slice of society. They’re going to graduate from one of the best schools in North America and they’ll make good incomes, so if we can impart some sense of social awareness at the same time, they receive a more complete education.”

The clinics are coordinated with over 2 dozen referring agencies, including Le Bon Dieu dans la rue, which serves homeless youth, the Old Brewery Mission, Maimonides Geriatric Centre and the Montreal Chinese Hospital.

**Outreach at Home and Abroad**

The outreach program has won praise for its innovative efforts. In 2005, the Canadian Council for the Advancement of Education awarded it a silver medal for Best Outreach Program; in 2003, it won the Prix Qualité in partnership with Maimonides Geriatric Centre from the Quebec Association of Community Health Centres and residential and long-term care centres; and, in 2000, it received the Oral Health Promotion Award from the Canadian Dental Association.

But the program is not resting on these laurels. Currently, when patients need extractions or radiographs, they are referred to 1 of the outreach program’s sessions at McGill’s 40-seat student clinic at Montreal General Hospital, where dentistry students receive the bulk of their practical training. But sometimes these patients need even more complicated treatments, such as root canals or partial dentures, which currently lie outside the scope of the outreach clinics. This year, the program began to offer outreach patients access to complicated restorative dentistry treatments at the Montreal General clinics.

“It’s a natural evolution,” says Dobby. “We want to provide more complex services to the most vulnerable sectors of the community, who, under the current way in which dentistry is funded, have no way to get treatment.”

The commitment to public service can carry professors far abroad. In February 2007, professors Véronique Benhamou and Gerard Melki led a team, including 3 fourth-year dentistry students, to Peru where, over 5 days in the remote community of Shanao, they treated 458 patients — carrying out over 2,540 procedures without running water, with electricity provided by a single generator and in temperatures that reached 35°C. The mission, which was sponsored by Kindness in Action, an organization that brings dental care to impoverished communities in Central and South America as well as Asia, reflects the level of interest that community outreach holds for McGill students and their professors.

**A Better Understanding of the Community**

For some faculty members, outreach is an intrinsic part of their research. Dr. Christophe Bedos has developed connections with Quebec’s main professional bodies, the Order of Dentists of Quebec (ODQ) and the Order of Dental Hygienists of Quebec (ODHQ), and with such anti-poverty groups as the Collectif pour un Québec sans pauvreté and ATD Quart Monde to explore the relations between dentists and patients on social assistance — relations that are often strained, as each side misinterprets the intentions of the other.

“The two worlds are often in conflict,” says Dr. Bedos, whose research looks for ways to help bring them into harmony.
Dentists would like to help the patients, but do not understand their behaviours and believe they are not interested in their dental health; on the other side, welfare recipients sometimes think dentists are just money makers, thinking about their own interests.

Recently, he filmed interviews with people talking about their experiences of poverty, health and oral care. The end result was a DVD entitled À l’écoute les uns des autres (listening to one another). Available from the faculty of dentistry as of January 2008, the video will serve as a teaching and consciousness-raising tool.

“The DVD is aimed at changing misunderstandings between dentists and patients. When you hear people talking about their lives, you start to understand their situations,” Bedos explains. “The next step is to use the knowledge we’ve gained in this process. We would like to offer professionals access to these videos, so we’re developing ways to use the DVD in continuing education programs. And we would also like to implement the teaching of these issues in schools.”

Cross-cultural issues are also important. Recently, Dr. Bedos and one of his master’s students, Ms. Mei Dong, studied perceptions of oral illness among Chinese immigrants in Montreal and demonstrated the extent to which western and traditional notions coexist or interact for these patients. Their study concludes that dental professionals need to develop an understanding of acculturation processes and the ways in which oral health care is understood by immigrant communities if they are to provide “culturally competent care” and, thus, win the confidence of these patients. Similarly, Dr. Jacques Véronneau, who has also worked with immigrant groups in Montreal, is currently involved in a project with the Cree Nation focusing on the prevention of early childhood caries in the James Bay region, a project which also involves assessing community attitudes and beliefs regarding oral health care.

McGill’s commitment to community outreach is already transforming the way oral health care is delivered in Quebec. After the 2006 colloquium, Dr. Paul Allison formed an ad hoc committee with representatives of the ODQ and the ODHQ, which then submitted a plan to the Department of Health and Social Services, recommending a set of initiatives in education, service provision and advocacy, along with the hiring of a coordinator to bring these ideas to fruition. So far, the government has not acted on the recommendations, but the ODQ has begun to explore ways to improve access to services for the elderly and the ODHQ has been working with advocacy groups to enhance services for people with disabilities.

“Promoting access to dental care is an important part of fighting poverty and inequality,” Dr. Bedos stresses. “I don’t think it’s too strong to say that it is part of social justice.”

THE AUTHOR

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