This document is a press release about a state’s ranking in a national oral health report. This case study looks at the document after implementing reframing recommendations, and illustrates the importance of capitalizing on this type of media opportunity, using a strong message frame.

Opening Paragraphs:

Florida Receives an “F” on Oral Health Status of Children

For Immediate Release
Tampa, Florida, March 5, 2010 – Dental decay is the most common, chronic disease of childhood, five times more common than asthma. Left untreated, it can spread to other parts of the body and can impact a child’s ability to eat, sleep, and pay attention in school. Nationally, 51 million school hours are lost each year to dental related absences. Preventing this disease in early childhood will prevent expensive treatments, missed school and missed opportunities later in life.

According to a report released February 23, 2010 by the Pew Center on the States, Florida received an “F” on how well we’re employing proven approaches to ensure the oral health of our children. Florida met only two of eight policy benchmarks aimed at addressing children’s dental health, which were the percent of residents receiving fluoridated water supplies, and reimbursement of physician-provided dental health services. We can do better! Proper preventive care can eliminate most dental disease. “When children have access to preventive care early and often, we can stop the majority of dental disease from ever occurring” said Claude Earl Fox, pediatrician and Executive Director of the Florida Public Health Institute.
Analysis:

The opening paragraph establishes why children’s oral health is important, and establishes some of the consequences of poor oral health. The subsequent paragraph emphasizes the values of Prevention and Ingenuity (“We can do better!”). Finally, by using a pediatrician as a spokesperson, it implicitly ties the issue to overall health.

Subsequent Paragraphs:

Four solutions stand out for their cost-effectiveness and high return on investment for the children and taxpayers alike. They are: 1) school-based sealant programs; 2) water fluoridation; 3) increased Medicaid reimbursement for providers of preventive dental services, and 4) workforce models that expand the number of dental providers. Dental hygienists can serve as the primary workforce for school-based dental sealant programs. Currently, 30 states authorize dental hygienists to place sealants on children’s teeth without having an exam by a dentist. However, in Florida, they are unable to do this because of current restrictions in the law. Children in Florida deserve the same opportunity as children in other states to be healthy.

Recently, Florida Senator, Chris Smith, introduced Senate Bill 490 and Florida Representative, Pat Patterson, introduced House Bill 1469 that authorizes Registered Dental Hygienists to provide direct access to preventive care, such as placing sealants in school-based settings. These bills use the existing dental hygiene workforce in our state to increase access to oral health care for all Floridians. When policy makers, school nurses, pediatricians, business leaders and other community members work together with dental professionals, changes can occur to provide Florida residents access to much needed dental services.

Analysis:

The solutions are stated clearly and the value of Fairness Between Places is used to establish why Florida should authorize dental hygienists to apply sealants (“Children in Florida deserve the same opportunity as children in other states to be healthy.”). The press release ends on a positive note, reminding the reader that change can occur.

(Thanks to Tami Miller at the Florida Dental Hygiene Association, for permission to use this example.)