

FEATURE



Our Professional Image and the “C” Word: Pandemic Reflections

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The emergence of COVID-19 has directed attention to all health professionals who courageously care for those in need during the pandemic. Oral health care services were restricted initially to emergency care as scientists struggled to acquire evidence about the virus that would support rational decision making. Dental hygiene services were considered “non-essential services” despite the increasing knowledge of the relationship between oral and systemic health.^{1,2} We are now moving forward and once again providing dental hygiene services to support the oral and general health of Canadians.

Dental hygienists have been provided with complex and evolving protocols as our regulators and associations work relentlessly to support the resumption of oral health services. Several articles in the summer issue of Oral Health Canada magazine focused on ways for dental hygienists to cope with the “new normal”^{3,4} and ways to maintain public trust.⁵ While most of the articles related to personal protective equipment and infection prevention and control protocols, there is an opportunity for us all to heed the words of Irene Woodall⁶ from over 20 years ago. Continuing to use the “C” word seems incongruent if we are to assume a role in the post-COVID-19 world as essential health care providers.

In 2014, the Canadian Dental Hygienists Association strove to develop a professional identity statement that went beyond the concept of “cleaning.” The following statement was generated to unite and motivate the profession:

However, as then-CDHA President Mary Bertone⁷ highlighted, this statement did not address the elephant in the room, namely the reality that many dental hygienists view their job as one of cleaning teeth. More importantly, this is how we have commonly articulated the care we provide to the public. As Woodall asserted, “cleaning makes our efforts sound like a cosmetic procedure—a nice frill...”⁶ It is no surprise that she questioned, “Why would anyone need two or more years of formal education to clean teeth?”

It is timely to create a new norm in how we communicate our health care services. Dental hygienists understand how critical oral health is to general health.^{1,2} Therefore, we need to incorporate that scientific evidence into how we define our knowledge and responsibilities. This mindset and approach need to be driven by dental hygienists—the challenge is to see ourselves as something else. We need to view ourselves as professionals rather than technicians. Continuing to use the “C” word is a barrier to having dental hygiene services viewed as essential by other health professionals and by the public.

Dentists also do not wish for services provided in their practices to be considered non-essential. The American Dental Association contested the statements by the World Health Organization and proposed that “‘Essential Dental Care’ be defined as any care that prevents and eliminates



infection, and preserves the structure and function of the teeth as well as orofacial hard and soft tissues.”⁸ We likely share this view of essential care, but we have been remiss in our communication.

The fee schedule includes codes for the services that dental hygienists provide, but those terms are too complex for daily communication with the public. A simple shift would be to talk about “dental hygiene care” or “oral health care.” Woodall provided us with additional guidance by suggesting we consider the following terms: assessment and preventive care, preventive periodontal care, and supportive periodontal care. Other options will likely be generated as the conversation grows.

The first step is to reflect on your own views and then to initiate a discussion in your practices about this very issue. Many of you are practice owners, so a change in language will be easy to initiate. However, the majority of dental hygienists work in private or public organizations that include a number of professions and different organizational decision-making protocols. Consensus within the profession will likely occur over time, with variations creating a nidus for ongoing dialogue. Consensus within a practice is a critical issue, and the commitment of everyone in the practice to using shared terminology is key to success.

The challenges of shifting our professional image are not unique to the dental hygiene profession.^{9,10} However, it is time to stand up and be counted as essential health care professionals. We cannot accomplish this if we continue to frame dental hygiene care from the perspective of cleaning teeth. Going forward, the new norm needs to include a better way to communicate the essential services dental hygienists provide for our communities. Can we count on your voice?

References

1. Lavigne SE, Forrest JL. An umbrella review of systematic reviews of the evidence of a causal relationship between periodontal disease and cardiovascular disease: Position paper from the Canadian Dental Hygienists Association. *Can J Dent Hyg.* 2020;54(1):32–41.
2. Lavigne SE, Forrest JL. An umbrella review of systematic reviews of the evidence of a causal relationship between periodontal disease and adverse pregnancy outcomes: Position paper from the Canadian Dental Hygienists Association. *Can J Dent Hyg.* 2020;54(2):92–100.
3. Aldridge-Earl D. Managing infection control: Pandemic challenges for the independent dental hygienist. *Oral Health Canada.* 2020;Summer:20–22.
4. Aubé M. The expanded personal protective equipment wardrobe of the dental hygienist. *Oral Health Canada.* 2020;Summer:6–19.
5. Feres-Patry K. The challenge: maintain the public trust. *Oral Health Canada.* 2020;Summer:25–27.
6. Woodall I. Let’s get rid of the “C” word in our vocabulary [commentary]. *RDH Magazine.* 1992;August:6–7.
7. Bertone M. Reflecting on our professional identity. *Can J Dent Hyg.* 2014;48(2):54–56.
8. American Dental Association. Statement on Dentistry as Essential Health Care [Internet]. August 10, 2020 [cited September 2020]. Available from: www.ada.org/en/press-room/news-releases/2020-archives/august/statement-on-dentistry-as-essential-health-care
9. Daigle A. Professional image and the nursing uniform. *J Contin Educ Nurs.* 2018;49(12):555–557.
10. Ghadirian F, Salsali M, Cheraghi MA. Nursing professionalism: an evolutionary concept analysis. *Iran J Nurs Midwifery Res.* 2014;19(1):1–10.

identity
health focused
essential care
dental hygiene care
profession
professional
ethical
competent
knowledgeable
qualified
experienced
integrity
proficient
scientific