

ADEA Women's Health The Evolving Science Symposium

Working Group Report 2012

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Background and Introduction

In March 2012 during the ADEA Annual Session Orlando, Florida, the ADEA Women's Affairs Advisory Committee held a working group symposium. The meeting brought together several leaders in dental education and research. Dr. Janine Austin Clayton, Acting Director, ORWH, NIH introduced the program. The ADEA Survey on Women's Health in Dental School Curriculum, An Update 2012 was presented along with individual presentations from: Dr. Paula K. Friedman (B.U.): Curriculum Challenges Implications for IPE; Dr. Connie L. Drisko (GRU): A New Research Paradigm for Women's Health Research; Dr. Henri Roca (Greenwich Hospital): Integrative Medicine and Women's Health. Following the presentations were group discussions covering: science of women's health across a lifespan, women's health promotion and strategies for implementation.

Learning Objectives

1. Strategies that will promote and build interest in women's health across a lifespan.
2. Resources and policies that contribute to the science base for women's health research.
3. How IPE (Interprofessional Education) initiatives may be used to advance women's health curriculum changes.

Three working groups were led by:

Drs. Sharon C. Siegel (Nova Southeastern), Karen P. West (UNLV), and Professor Pamela Zarkowski (UDM). Dr. Joseph F. West, Consultant served as the facilitator.

Summary of Working Group Discussions

I. Women's Health Across a Lifespan

What can be done in dental education and practice to promote the science of women's health across a lifespan?

One of the first recommendations from the group was for ADEA to host more forums and communicate through schools, student groups and associations to build interest on women's health issues. Such forums could make issues relevant across disciplines and lead to work with curriculum developers to mark time to cover specific areas of women's health. Webinars can serve as instruction tools on women's health and highlight best practices and establish collaborations to build content and presentation for webinars (e.g. can use YouTube, online instruction, etc).

- Questions related to women's health should be on the National Board exams.
- Have webinars on women's health across the lifespan with the proper depth and information integrated into courses.
- Dental clinics need to have information and resources for patients on topics related to women's health.
- Focus on specific topics in women's health, build cases studies to include in curriculum in specific courses. Encourage research and clinical practice skill building related to specific areas.

What can ADEA do to improve the women's health competency of dental faculty?

To improve the women's health competency among dental faculty ADEA should encourage women's health competency in dental schools in all specialties. There needs to be a more concerted push for dental schools to 'buy' into women's health competency and integrate into curriculum. At ADEA meetings (e.g. Annual Session) hold educational forums and presentations specifically focused on women's health with materials and website links for downloading resources. Third party payer issues need to be resolved (e.g. pay for nutrition) related to covering prevention, counseling and intervention for women.

- Develop consortium on women's health to collaborate across academic institutions including medicine and public health.
- The consortium would develop a central website or accessible database of teaching, best practice and research-related resources on women's health across the lifespan.
- Focus on cultural and gender competency knowledge and communication in dental schools and dental practice.
- Encourage dental faculty to engage community clinics where other practitioners are centered on women's health.

II. Women's Health Promotion

What strategies should be used to communicate women's health to practitioners?

ADEA can play a key role by disseminating information on women's health to dental schools with specific examples and recommendations for curriculum inclusion. ADEA can also encourage all faculty and schools to host teaching forums and instructional seminars on women's health (e.g. weekends, summer). ADEA can make women's health a part of the Annual Session agenda (i.e. speaker time; call for abstracts and presentations on women's health).

- Continuing education credits on women's health and interdisciplinary practice.
- Distribute (emails, on website) monthly, bi-monthly or quarterly newsletter highlighting research, commentary, narrative, curriculum ideas or faculty working on women's health in dentistry or applicable from other disciplines.
- Organize a 1-2 day series/session of presentations, curriculum development workshops and forums on women's health.
- Use social media (e.g. Facebook, You Tube) to communicate to practitioners, researchers, faculty and students.

What strategies are recommended for the advancement of women in research careers?

National Institutes of Health and other major funders can continue to encourage young women to become investigators, and eventually principal investigators, through training and other grants. ADEA can help facilitate an information exchange between women investigators and researchers to

encourage collaboration and co-authorship. ADEA can help women faculty learn to better manage competing responsibilities and interests (e.g. family, practice, research, faculty mentoring). ADEA can continue to push for incentives to initiate and build research careers (e.g. tuition forgiveness, stipends, conference attendance and presentation support).

- Make mentoring connections between students, young investigators and senior researchers; encourage research teams.
- Begin early with educating young women in high school and undergraduate on dentistry and the role they can play in improving women's health.
- Organize research training sessions for students and young investigators at Annual Session or other ADEA meetings.
- Dental schools can encourage and/or facilitate faculty and students to research and become engaged in solutions pertaining to local women's health issues and clinical needs.

III. Strategies for Implementation

The science of women's health is interdisciplinary. How can IPE (interprofessional education) initiatives advance curriculum change with regard to women's health?

ADEA can help facilitate the development of a repository of information on research, teaching techniques and practice related to women's health. An ADEA based IPE interest group that invites researchers and practitioners to come together to discuss women's health across the lifespan can spur recommendations on curriculum change. The interest group will help develop a framework for IPE and core competencies in practice, research and education for addressing women's health. The group also recommended that such a group would help develop models that can be integrated into the curriculum or learning environment (e.g. workshops, forums and webinars) and that ADEA can disseminate the models to schools. Specific IPE benchmarks and outcomes related to women's health across the lifespan should be established.

What clinical disciplines are most likely to contribute to curriculum changes regarding women's health across lifespans?

The group recommended that the conversation about women's health issues across the lifespan be extended across disciplines. For example, a symposium or collaborative of professionals from dental hygiene, pharmacy, osteopathic medicine, complementary and alternative medicine and public health can outline an IPE framework. ADEA should continue to seek revisions to CODA increase interest in addressing women's health in academia. Dental schools should look for creative ways to increase service learning experiences community-based experiences bringing attention to women's health issues. Work across disciplines to strengthen funding streams to enhance programs and research.

Attachments:

Working Group background documents included the Research Recommendation Areas from ORWH Strategic Plan and Dental Curriculum Strategy for Implementation (Attachments A and B).