



Tufts dental students, with local volunteers in Santo Domingo, Dominican Republic, have a long history of traveling the world to provide oral health care.

A World of Good

New global initiative ensures service-learning trips are there for the long haul by **Helene Ragovin**

MORE THAN HALF THE PEOPLE ON THE PLANET—3.9 BILLION, most in developing countries—suffer from untreated tooth decay or severe periodontitis, according to a recent epidemiological survey conducted by the World Health Organization. In fact, untreated caries among adults was the most common condition among the 291 health problems examined by researchers with the Global Burden of Disease project.

This should come as no surprise to the scores of Tufts dentists who have traveled the globe to provide care in some of the world's most underserved regions.

Faculty and students have a long tradition of overseas service trips, whether they be recurring visits to established locations or providing aid during emergencies. The need for such care isn't going away soon.

Yet over time, this much has also become clear: The most successful service trips, for both the patients and the professionals who treat them, are those anchored by a long-term

UNEXPECTED REWARDS, ONE CHILD AT A TIME

Several years ago, my wife, Jamie [D87], a pediatric dentist, asked me to join her on a mission trip to Jamaica. As an orthodontist, I wasn't sure what I could contribute because it had been 25 years since I had done fillings and extractions. I reluctantly agreed. And so began one of the most rewarding chapters of my career.

Over the past 13 months, Jamie and I have participated in two volunteer programs in Jamaica, two in Cambodia and one in Guatemala. I feel guilty admitting it, but the truth is that you get so much more than you give. True, many of the sites we visit in Jamaica have no air conditioning or electricity, and the lines of patients

waiting to be seen seem to stretch to the horizon. In Cambodia, we rise at 5 a.m., hit the road by 6 and work nonstop, taking only short breaks until 4:30 p.m. It is often hard to recognize the anatomy of a tooth through all the decay.

I have learned that those with so much less have so much more to teach us. Last year in Cambodia, a young boy took me by the hand to show me his home. We were standing in our makeshift clinic less than a kilometer from the former Phnom Penh dump.

Like many others, this boy's family had moved to the city to earn higher wages.

The family ended up at the dump, looking

for recyclables to sell. This boy was lucky: His family had remained intact; he was attending a good school and getting solid meals. Standing on the roof, he pointed proudly to his 100-square-foot, wood- and corrugated-tin home, oblivious to the garbage and chaos that defined his neighborhood.

I have had the opportunity to work with some remarkable people who are dedicated to saving the world, one child at a time. There are a million excuses to accept our lives as they are. Luckily for me, a good-hearted and persistent wife helped me stumble upon dental volunteerism.

—JON E. GOLUB, A81, D85, DG87



Clinica Sodhadesa in San Felipe, Dominican Republic, where a Tufts team provided care this summer.



Above, Marion Herson, D12, a chief resident in the General Practice Residency program at Tufts Medical Center, treats a patient at the Sodhadesa clinic; left, a duffel bag with 35 to 40 pounds of dental supplies, typical of the load carried abroad by volunteers.



commitment, continuity of care and education. "To build trust, you have to go back to the same people and demonstrate that you're willing to work and to help develop an oral-health structure," says John Morgan, an associate professor of public health and community service and a veteran of a long-running Tufts service trip to Africa.

As the number and scope of overseas trips by faculty and students have grown, the School of Dental Medicine realized it needed a new way to manage them, says Noshir Mehta, DG73, DI77, associate dean for global relations and a professor of public health and community service.

This kind of international outreach "grew for the right reasons," Mehta says. "The students wanted to help the world, and the faculty wanted to do that, too.

"But the world is not as innocent anymore as it used to be," Mehta adds. Prompted by concerns about safety and the desire to ensure that service-learning trips meet the needs of host communities and properly support the Tufts dental curriculum, the school has established a

Global Service Learning Initiative.

A committee that includes Mehta, Robert Kasberg, associate dean for admissions and student affairs, and Mark Nehring, chair of public health and community service, will vet proposals and monitor service-learning projects, with an eye toward trips that involve long-term partnerships with institutions in the host countries and that have strategies for offering continuity of patient care. Morgan will coordinate efforts as director of global service learning; individual faculty members who lead trips will be regional or country coordinators. Before they head overseas, students will receive training about the specific locations to which they're headed, and they will be expected to report on their activities after they return. Students and faculty will continue to be responsible for funding for their trips.

The global learning initiative should not hamper such established programs as trips to Haiti, Central America and Zambia that have been led by faculty, including Morgan; David Paul, D89, associate professor of oral diagnosis and health promotion; Aidee Herman, associate clinical professor of periodontology; or Kathleen Coyne, J66, D76, assistant clinical professor of oral diagnosis and health promotion.

Sustainability, Mehta said, is key.

The trip to rural Zambia, for example, has been running since 2004. Tufts faculty and students provide care during annual or semi-annual visits, and have also developed a cadre of local oral health volunteers who continue with education and screening in their absence. The project has support from the country's ministry of health and ties to a Zambian dental school, which mentors the local volunteers.

"Those connections may take years to find and develop," Morgan says. "When you go to a place only once, it's very hard to say that you can react to random events as necessary. You have to have a base of knowledge that allows you to make decisions in an informed way. It's about developing an infrastructure and relationships that are meaningful over time."



From left, Franz Compere, director of the Clinica Sodhaidesa in San Felipe; Jamie Holden, D12; Marion Hernon, D12; Kimberly Kocak, D14, and Mark Schlam, D14.



David Paul, D89, associate professor of diagnosis and health promotion, with a Dominican family.

Marion Hernon, D12, and Kimberly Kocak, D14, at the San Felipe clinic during the Tufts volunteer service trip.



A MOBILE CLINIC FOR SAN FELIPE

When David Paul, D89, and his dental health-care team arrived in Santo Domingo Norte, a rural village in the Dominican Republic, in August, it was hot and humid—"like walking into a steam bath," Paul says. But they knew to expect that.

They also knew that the tiny dental clinic at the modest medical center where they would treat patients over the next week would be worlds apart from what they were used to back in Boston. "The first time you're in any new site, it's always a challenge," says Paul, a veteran of 21 health-care service trips overseas. The clinic had minimal supplies, and existing infection-control measures were not up to U.S. standards. But armed with 200 pounds of their own supplies and instruments, the group set about training the local nurses, physicians and clerical staff on what needed to be done and prepared for the 25 to 35 patients a day who would come for comprehensive exams, treatment plans, hygiene instruction, fluoride treatments, extractions and other care.

Paul, two predoctoral students—Mark Schlam and Kimberly Kocak, both D14—and two general practice residents—Ernest "Jamie" Holden and Marion Hernon, both D12—treated patients at the Clinica Sodhaidesa as the first step in an ambitious project to bring more oral health care to the entire San Felipe region, comprising 12 communities and 20,000 residents, the majority of whom live in poverty. The clinic will be the home base for a new mobile dental clinic that will likely go into service in spring 2014.

The mobile clinic is part of the We Are One project of the Nashoba Valley Massachusetts Rotary Club and the Santo Domingo Innovator Rotary Club. The clubs raised more than \$50,000 to retrofit a recreational vehicle that will be staffed by Dominican dentists and visiting Rotary volunteers.

Currently, many patients walk six to eight hours, from home and back, to come for care at the Sodhaidesa clinic, which is part of an NGO run by Franz Compere, a



Haitian physician, Paul said. "A mobile dental clinic should help to eliminate some of that hardship," he says. The organization already has had success with a mobile medical van.

Patients at the 24-hour clinic are charged on a sliding scale; all the care provided by the Tufts team was free.

The mobile dental clinic will help assure that the San Felipe project remains sustainable, Paul says. "It can be used on a regular basis when we're not there," he says. "This type of project has a very strong history of being well-used, and well-received."

During the trip, Paul also met with the dentist from the Dominican Ministry of Health who oversees San Felipe; he agreed to form a partnership with the Nashoba Valley Rotary so that the mobile clinic can be used for outreach programs.

The goal is for the dental clinic to depend less on volunteers and more on local manpower. "This is the type of thing where we hope to push ourselves out of a job eventually," says Paul.

—HELENE RAGOVIN

The Next Generation of Dental Educators

Career fellowships aim to cultivate new faculty

IT'S A GENERATIONAL PARADOX. AS THE 78 MILLION AMERICANS BORN in the decades after World War II—the baby boomers—reach their 60s and 70s, they'll need more health-care services than ever, just as their peers in those fields begin to retire in droves. The next generations will scramble not only to provide those services, but also to educate and train enough new professionals to take care of their parents and grandparents.

Dental schools are already feeling the crunch. There were 369 unfilled faculty positions at 53 dental schools during the 2007–08 academic year, according to an American Dental Education Association (ADEA) survey. If current trends continue, there could be as many as 900 faculty vacancies by the end of this decade, according to a 2011 report in the *Journal of Dental Education*.

That's why ADEA and the American Association for Dental Research in 2006 began offering yearlong fellowships so that students can test-drive academic dentistry. This year, three Tufts students were among the 10 selected nationwide for the Academic Dental Career Fellowship.

Yusuf Bhatti, D14; Irina Dragan, a student in the combined master's and postgraduate programs in periodontology; and Courtney Michelson, D14, will each conduct original research while getting teacher training in the clinics and classrooms at Tufts.

The Tufts fellows will work closely with their faculty mentors. Dragan's mentor is Paul Stark, professor of public health and community service. Michelson will work with Yun Saksena, DI00, an associate clinical professor of diagnosis and health promotion and Bhatti will work with Wanda Wright, an assistant professor of public health and community service.

The fellowship should give the trio a taste of daily life in a university setting, Wright says. "That perspective, hopefully, will prepare them to pursue academic careers," she says.

Dragan has been interested in a career that combines research and clinical work since she was a dental student in Romania. As the only dental resident nationwide to receive the fellowship this year, she's particularly eager to hone her teaching skills. "I had great teachers who mentored me and gave me such valuable advice," she says. "They helped me become the person I am today."

Michelson's research project might help shed light on why there's a faculty shortage in the first place. She is developing two surveys, one aimed at current Tufts faculty to determine how and why they ended up where they did. The other questionnaire will assess current Tufts dental students' attitudes about research and teaching. "A lot of students don't even think about a career in academic dentistry," Michelson says. "Does it have to do with [the amount of their] student loans? Or are they not even interested?"

—JACQUELINE MITCHELL