

## Community Dentistry and Oral Public Health I (D012638)

Course size (nominal values; actual values may depend on programme)

Credits 4.0 Study time 120 h Contact hrs 32.5 h

Course offerings and teaching methods in academic year 2018-2019

A (year)	Dutch	PDE tutorial	6.25 h
		lecture	23.75 h

Lecturers in academic year 2018-2019

Lambert, Martijn	GE36	lecturer-in-charge
De Visschere, Luc	GE11	co-lecturer
Vanderhasselt, Marie-Anne	PP05	co-lecturer

Offered in the following programmes in 2018-2019

<a href="#">Bachelor of Science in Dentistry</a>	crdts	offering
	4	A

Teaching languages

Dutch

Keywords

Health and community, health promotion, sociology, psychology, epidemiology.

Position of the course

This course is a basic course aiming to provide an overview in sociological, psychological and epidemiological aspects of health care, important to identify the role and position of the dentist in the community and in particular in health care and health promotion. These aspects are applicable in health promotion. Students have to implement them in a critical way in oral health education.

Contents

Basics of psychology  
 Basics of social sciences  
 Basics and applications of epidemiology with special attention for oral health.  
 Introduction to the science of oral health education, including basic advices on oral health (prevention of plaque - dietary counselling - use of fluorides).  
 Introduction to the tutorials

Initial competences

Secondary education

Final competences

1 The student is able to understand and illustrate concepts as health and health behaviour and disease, within the whole community as well as the way the community manages these.

2 The student got basic insights in cultural, social and environmental factors influencing the etiology and the perception on the course of the disease and the healing processes.

- 3 The student got insight in community factors (cultural -social - environment) influencing the functioning of the general health care.
- 4 The student got insight in the effects of life style and environmental factors on the preservation of (oral) health as well as on its prevention.
- 5 The student got insight in the principles and methods of oral epidemiology with respect to primary oral diseases.
- 6 The student got insight in the origin of socio-economic inequalities in oral health.
- 7 The student got insight in the principles of oral health promotion and determinants of oral health behaviour.
- 8 The student got insight in the theory-based approaches, of the planning and evaluation of oral health education.
- 9 The student got basic knowledge and skills in order to give individual oral health instructions.
- 10 The student is able to reason about the dissociation between information processes (memory, perception, attention, and interpretation) and subjective mental health.
- 11 The student is aware of the different models of stress resilience, and understands how stress could have an influence on behavior, cognition and emotion.
- 12 The student is able to employ theoretical and applied models of behavioral psychology to analyze maladaptive behavior.
- 13 The student is able to critically translate (experimental) research findings to a simulated case with the field of dentistry (evidence-based dentistry).

#### Conditions for credit contract

Access to this course unit via a credit contract is determined after successful competences assessment

#### Conditions for exam contract

This course unit cannot be taken via an exam contract

#### Teaching methods

Lecture, PDE tutorial, practicum

#### Learning materials and price

Syllabus

Psychology and Sociology applied to medicine, 2nd edition / Churchill Livingstone 2004

ISBN: 0443072957 / 9780443072956

Community Oral Health, 2nd edition / Quintessence Publishing Co.Ltd 2007

ISBN-13: 978-1-85097-162-7

Brochures

#### References

Community Oral Health, Cynthia M Pine. Quintessence books 2007.

Epidemiology in Medicine, Charles H Hennekens and Julie E Buring. Little, Brown and company Boston/Toronto 1987.

Dentistry, Dental Practice and the Community, Brian A Burt and Stephen A Eklund. W. B. Saunders Company 1999.

Patiëntenvoorlichting en mondgezondheid, M A J Eijkman, M P M A Duyx, A Ph Visser. Bohn Stafleu Van Loghum - Houtem/Diegem 1998.

Prevention of oral disease, J J Murray. Third edition, Oxford University Press - New York 1999.

Preventieve tandheelkunde, C van Loveren en G A van der Weijden. 2de volledig herziene druk, Bohn Stafleu Van Loghum - Houtem/Diegem 1996.

Behavioural sciences for dentistry, G Humphris, M S Ling. Churchill Livingstone 2000.

#### Course content-related study coaching

On appointment

Active use of the electronic eLearning platform Minerva.UGent

#### Evaluation methods

end-of-term evaluation and continuous assessment

#### Examination methods in case of periodic evaluation during the first examination period

Written examination with open questions, written examination with multiple choice questions

#### Examination methods in case of periodic evaluation during the second examination period

Written examination with open questions, written examination with multiple choice questions

#### Examination methods in case of permanent evaluation

Participation

#### Possibilities of retake in case of permanent evaluation

examination during the second examination period is possible in modified form

#### Extra information on the examination methods

The permanent evaluation is based on the presence, preparation and active participation during the tutorial sessions (4). Presence is required during the tutorials sessions.

#### Calculation of the examination mark

There are 4 parts:

- Tutorials: participation (permanent evaluation; 10%) and examination (period 15%)
- Sociology: period 15%
- Psychology: period; 20%
- Health and epidemiology: period; 40%

Students must for all components together have at least 50% (10 of 20). The final result is calculated using the arithmetic mean of all the parts.

If for one or more parts <50% is achieved, then for this part that scored less than 50% one point will be subtracted from the final result.

If this shortage is more than 10% then 2 points will be subtracted for each part that scored less than 50%.