American Dental Hygienists’ Association
National Dental Hygiene Research Agenda
Revised March 2007

A. Health Promotion / Disease Prevention:
Studies in this category include those that are concerned with health maintenance and disease prevention; public health policy, advocacy and legislation; and development, validation and testing of instruments, strategies and mechanisms that demonstrate effectiveness.

1. Assess strategies for effective communication between the dental hygienist and client

2. Identify, describe and explain mechanisms that promote access to oral health care, e.g., financial, physical, transportation

3. Validate and test assessment instruments/strategies/mechanisms that increase health promotion and disease prevention among diverse populations

4. Investigate how diversity among populations impacts the promotion of oral health and preventive behaviors.

5. Investigate the effectiveness of oral self-care behaviors that prevent or reduce oral diseases among all age, social and cultural groups

6. Investigate how environmental factors (culture, socioeconomic status-SES, education) influence oral health behaviors

7. Identify optimal time periods for interventions that influence pathology, function and oral wellness.

B. Health Services Research:
Studies in this category are designed to improve the quality of health care, reduce its cost, address patient safety and medical errors, and broaden access to essential services. It includes evidence-based information on health care outcomes, quality, and cost, use and access.

1. Identify how public policies impact the delivery, utilization, and access to oral health care services.
2. Investigate how alternative models of dental hygiene care delivery can reduce health care inequities.

3. Evaluate strategies dental hygienists use to effectively influence decision-makers involved in health care legislation (e.g., to provide direct access to dental hygiene care, autonomy and self-regulation of dental hygienists).

4. Assess how third parties influence access to and utilization of dental hygiene services.

5. Evaluate strategies that position and gain recognition of dental hygienists as a primary care providers in the health care delivery system.

6. Determine the cost-effectiveness of various oral health interventions (e.g., fluorides, sealants, mouth guards), in reducing or preventing oral diseases/conditions.

7. Determine the cost-benefit of various oral health interventions (e.g., fluorides, sealants, mouth guards), in reducing or preventing oral diseases/conditions.

8. Determine if differences exist in patient outcomes and costs for a given oral condition when services are provided by dental hygienists vs. others.

9. Identify factors that predict supply, demand and need for dental hygiene services.

10. Determine the effect of availability, cost and payment source of dental hygiene services on patient outcomes.

11. Develop valid and reliable measures of quality dental hygiene care.

12. Assess the impact of dental hygiene services on the outcomes of care for patients with special needs.

13. Assess the impact of increasing access to dental hygiene services on the oral health outcomes of underserved populations.

14. Determine the extent to which dental hygienists’ working in collaborative practice settings with other health professionals or organizations improves the cost-effectiveness and quality of health care outcomes.

C. Professional Education and Development:
Studies in this category are concerned with educational methods, curricula, students and faculty; recruitment and retention of students and faculty; and, promoting graduate education and career path options.
1. Evaluate the extent to which current dental hygiene curricula prepare dental hygienists to meet the increasingly complex oral health needs of the public

2. Investigate how other health professions have established the masters and doctoral levels of education as their entry level into practice

3. Identify the factors that affect recruitment and retention of faculty

4. Assess how educators are socializing students to research

5. Investigate the extent to which new research findings are incorporated into the dental hygiene curriculum

6. Validate and test measures that evaluate student critical thinking and decision-making skills

7. Investigate curriculum models for training and certification of competency in specialty areas (e.g., anesthesiology, developmentally disabled, forensics, geriatrics, hospital dental hygiene, oncology, pediatrics, periodontology, and public health)

8. Critically appraise current methods of evaluating clinical competency (dental hygiene graduation competencies, standardized national board testing, clinical board examinations)

9. Validate measures that assess continued clinical competency

D. Clinical Dental Hygiene Care:
Studies in this category address the dental hygiene process of care (assessment, diagnosis, treatment planning, implementation and evaluation); decision-making and clinical reasoning; and data management systems.

1. Assess the use of evidence-based treatment recommendations in dental hygiene practice.

2. Assess how dental hygienists are using emerging science throughout the dental hygiene process of care.

3. Investigate the links between oral and systemic health.

4. Investigate how dental hygienists identify patients who are at-risk for oral/systemic disease.
5. Investigate how dental hygienists use emerging science to reduce risk in susceptible patients (risk reduction strategies).

6. Develop and test interventions to reduce the incidence of oral disease in special at-risk populations (diabetics, tobacco users, cardiac patients and genetically susceptible)

7. Assess which combinations of patient examination data can best be used to guide clinical decision-making.

8. Monitor the effectiveness of preventive measures (e.g., sealants, fluorides) in different patient populations.

9. Identify effective strategies for educating hygienists in how to evaluate research studies used to guide evidence-based practice.

E. **Occupational Health and Safety:**
   Studies in this category focus on the practitioner, as well as the patient, exposure to risks; compliance and prevention issues; behavioral issues; and workforce recruitment and retention.

   1. Investigate the impact of exposure to environmental stressors on the health of the dental hygienist (aerosols, chemicals, latex, nitrous oxide, handpiece/instrument noise)

   2. Investigate how work-force stressors influence career satisfaction (ethical dilemmas, interpersonal relationships, communication, time management, etc.)

   3. Investigate methods to decrease errors, risks and or hazards in health care and their harmful impact on patients.