Hello. And welcome to module three, back to basics primary care, coauthored by Lisa Simon, Hugh Silk, and Carlos [? Verone. ?] Module three is designed to be presented in approximately one hour. This module continues to build from our prior modules. But it can also be taught as a standalone.

The module supplement form includes three recommended pre-readings for students to complete prior to the module session. The supplement also includes recommended metrics for evaluating whether students demonstrate the learning objectives or not after your delivery of the module and three multiple choice exam assessment questions, as examples, that correspond to the module.

These example assessment questions could be administered at the end of the module or, if you're teaching the entire series, the assessment questions from each individual module can be combined and administered as a single assessment at the end. And then, of course, you can use the evaluation metrics as a guide and develop your own assessments. To keep the session engaging, this module contains thought questions in the teaching notes to pose to your students along the way as well as a warm up activity and wrap up video.

This learning experience is meant to be an introduction only, hence the name starter kit. And while there are numerous resources and references available about the topics covered, for the purpose of this module, we've curated a small sample of high quality resources to support the learning outcomes with dental students in mind.

We encourage learners, and you as educators, to explore the literature further beyond what is contained in this module. If you wish to extend the learning experience, optional in class activities have been inserted along the way. These learning activities allow for approximately one additional hour of active learning during the module session.

This module is related to seven competencies from the global oral health competency matrix. While these competencies cannot be met through a single teaching module, this module is working toward competency based best practices in global health for dental education. We have also included four measurable learning objectives written specifically for the module.

To begin, we suggest a warm up activity to get students thinking about the definition of primary care. For this warm up activity, you can use the board and have students draw what they think primary care is.

Instead of listing or writing a definition, a drawing can help students open their thinking further and be creative in how they express their perceptions of primary care. There are no right or wrong answers for this exercise. It's merely an activity to get students thinking about what primary care looks like in practice beyond just words on a

page.

Perhaps you can begin with the think, pair, share technique. For a couple minutes, have the students think about what they might draw. Then have them discuss in pairs how they define primary care in the form of a picture. And then ask each group to draw their picture on the board that represents primary care to them.

Our students have drawn pictures that capture concepts of prevention. They've drawn a vaccine, for example. The patient provider relationship-- they've drawn two figures holding hands, a medical and dental home where they've drawn a house, early intervention, among many other example drawings. This warm up may also reveal any views or pre-existing biases that your students may have about primary care that can be addressed through the discussion during the module.

I've found that this warm up helps students feel more engaged in their learning experience about primary care by allowing them to measure their initial thinking during this exercise against the details that are revealed in subsequent slides throughout the module. As we discussed in detail in module two, the global health and development agenda presents numerous opportunities for improved oral health.

This module focuses on one example, the integration of oral health and primary care. We are narrowing the broad focus of global development down from global trends that we talked about in module 1 to the global goals and specific target for universal health coverage as we discussed in module two to universal health coverage as a central component of primary care, and, finally, the integration of oral health.

Although this module narrows the focus of global development to one highly specific component, this example is anything but small. The overall purpose of this module is to establish that the integration of oral health in primary care is a promising endeavor while also an enormous task. It requires substantial shifts in how we think about financing and payment for health care services, workforce development and scope of practice, and policy.

I should note that each of these subcomponents is in and of itself a monumental undertaking. And detailing these is beyond the scope of the module. But you can encourage your students to explore these topics further on their own following the module.

This timeline showing some highlights of world development is covered in more detail in module two. For the purpose of this module, module 3, we will discuss how key events in the timeline have led to current needs for primary care services and oral health integration, including how the global goals designed to reduce global poverty have specific links to oral health and overall health. As a reminder, this was covered in more detail in module 2 as well.

Related to poverty reduction, we highlight how poor oral health results in higher health care costs overall, so not

just dental health care costs but overall health care costs. So for example, in the United States, over \$1 billion is spent annually managing dental infections in the emergency room in hospitals.

Universal health coverage is then discussed in more detail. And we revisit the concept here in module 3, building from module 2, and then continue to develop connections to the important role primary care plays in reducing health care costs and achieving universal health coverage. This module introduces students to the declaration of Alma-Ata, including key messages from the meeting and the defined key aspects of primary care that resulted.

In module 1, we discussed the fact that patient's needs are higher and more complex today than previously. In this module, we introduce a new metric for quantifying this challenge that was published by the FDI in the Oral Health Atlas in 2015. The metric analyzes the mismatch between the high burden of oral disease and persisting shortages of oral health workforce. A key message of this new metric illustrates that, in today's evolving world, global trends are illuminating the fact that there are simply not enough dentists to treat all patients who need care globally. And that's likely to worsen as global trends continue.

So you can underscore the themes of the Declaration of Alma-Ata once again here, including a focus on prevention, addressing determinants of oral disease, and the relationship between oral health and overall health, in other words, why the integration of primary care and oral health is so needed. This graphic by Hummel, et al 2015 illustrates a natural overlap between key concepts of primary care and dental care, or perhaps more appropriately named oral health care, which includes more than just the teeth.

Have the students brainstorm in small groups where, how, and by whom the oral health services in the green and peach colors could be delivered. How will they be paid, for example? And then have the groups share their thoughts with the class. And you can go back to ideas covered in the warm up activity and discuss what this might look like in practice.

The concept of the oral health continuum brings together oral health, primary care, and universal health coverage. It ensures a people centered approach based on need for care and benefits more of the population than restrictive, expensive, curative only approaches.

To further illustrate the concept of the oral health care continuum, we conclude this module with a video we made during our work in Costa Rica. Costa Rica is known for its successful implementation of universal health coverage through a strong primary care system that includes oral health. After discussing the theoretical integration of oral health and primary care during the module, students can then see with their own eyes what this actually looks like in a country that has implemented it.

I hope you enjoy teaching module 3. To continue your students' learning experience, please consider building

rom this module and teaching our other available modules. Happy teaching.	