

# Wisconsin Dental and Oral Care Health Information Project: Outreach to Amish and Mennonite Communities

## Summary

### Goal

In alignment with the NLM mission to improve access, use, and understanding of health information for a priority health need, the Wisconsin Stakeholder Advisory Group (SAG) proposes to improve dental and oral care hygiene and preventive care with the Amish and Mennonite communities located in the counties of Chippewa and Clark counties.

### AIM

D R Moon Memorial Public Library in Stanley, Wisconsin, will develop a dental and oral health information print resource tailored to the Amish and Anabaptist communities in consultation with the local bishops. Content will be sourced from NIH, NLM, and other reliable resources and repurposed for cultural relevance, age-appropriateness, and ease of comprehending. All materials will include the sponsored agency funding statement and will be shared with NNLM.

### Evidence of Need

Amish and Old Order Mennonite communities are a growing population across the United States with recorded settlements in 32 states yet primarily concentrated in Pennsylvania, Ohio, and Indiana. According to the Young Center for Anabaptist and Pietist Studies, the estimated United States Amish population totals 377,275. ([Amish Population, 2023](#)), a 2.5 percent growth rate from 2022 (367,929) and an 8.6 percent increase from 2020 (344,670). Wisconsin boasts the fourth largest Amish population in the U.S. numbering more than 24,920 individuals.

Plain communities, as often described, live a traditional, rural way of life detached from electricity, technology, and other modern conveniences. They also selectively divest themselves of the nation's public health and educational systems. Their closed society restricts access to government resources such as Medicare and Medicaid as well as private insurance tending to distrust the American medical and pharmaceutical industries as large-scale, profit-oriented organizations. At the same time, Amish may accept hospital or foundation support and personal donations when faced with enormous bills ([Anderson et al 2020](#)).

Their knowledge of science and medicine is limited. For example, their formal, yet parochial, education ends at eighth grade ([Young Studies, FAQ](#)) and they safeguard any new information from interlopers. However, they actively seek health information from family and friends and heed endorsements of health practices and remedies from Amish-produced periodicals and books ([Anderson et al 2020](#)).

Health disparities primarily exist in Amish communities due to religious customs and beliefs (Adams, et al, 1986). They fail to prioritize preventive care and attend to medical matters only when their health concerns interfere with their daily activities. They also tend to be fatalistic willing to suffer, accept, or submit to God's will ([Heima et al 2017](#)). However, they are not without concern and compassion for one another. Amish churches may operate hospital aid programs or set aside money for members in need of medical assistance.

Health disparities also exist due to logistical barriers such as transportation: long distance travel via horse and buggy is slow and hiring a driver is an extra layer of inconvenience and cost ([McCrea 2022](#)).

Despite these perceived and real barriers to health, a recent study indicates that the Amish are seeking affordable, quality care within their own communities. Their priority health needs include prenatal and childbirth care, care of children, and dental care ([McCrea 2022](#)).

Research has shown that Amish children have high levels of untreated tooth decay: 4-fold higher (88.6 percent) compared to the national average for 3- to 5-year-olds ([Heima et al 2017](#)). What factors could be contributing? Living in rural areas, the Amish drink well water, which is not fluoridated, and children typically do not take fluoride supplements. Most of all, Amish parents simply are unaware of the actual state of their teeth, and they don't want to travel for preventive care. Lack of fluoride and poor dental care is evident in visibly poor dentition of many of the children and adults. Another potential cause for poor dentition has been contributed to high carbohydrate diets within the community.).

A print information resource addressing these concerns and instructing adults and children to brush regularly with fluoride toothpaste may be a simple and pragmatic preventive measure to an otherwise costly, painful, and disruptive dental emergency visit for an abscessed tooth. The adage is, "An ounce of prevention..."

Because building trust with this population takes time, the Stanley public library is well-positioned to introduce health and wellness information to the Amish living in Clark and Chippewa counties. Elizabeth Miniatt, director of library services, has been working closely with the community for years. She defers to the Amish community to instruct her on what is acceptable and appropriate reading material, and because of her approachable and respectful demeanor, she is considered a trusted information ally. A print resource created by the library and vetted by the Amish community leaders will inform adults, parents, and children of the importance of dental and oral preventative care. Ultimately, the information resource will be a first step toward education and improvement of an identified health need within the community.

What are some other barriers that a dental and oral health information project potentially can reveal? It might serve as a call to action. According to the Rural Health Information Hub (RHI Hub), 36 out of 72 counties experience a shortage of dental care providers. Additionally, Wisconsin only has a single dental school, and the state licensing department does not allow dental therapists, who are mid-level practitioners, to practice preventative and restorative dental care.

With a shortage of dental service providers in many rural areas, the Wisconsin Dental Association and the state medical schools might offer up their expertise and knowledge to solve supply and demand. For health care providers wanting to provide care to the Amish, they will need to excel in the areas of trustworthiness and communication skills and consider providing care in proximity to the Amish community.

## Implementation Plan

### Timeline

#### Preliminary Scoping

##### October 2023:

- Library staff general meeting to discuss project goals and timeline.
- Library director identifies potential dental clinic partners to provide free dental health supplies (toothbrushes, floss etc).
- Library director conducts research to identify potential illustrator partners to provide booklet art.
- Outreach staff discuss the program with several Elders/Bishops at regular monthly visit to gain initial feedback before starting.

##### November 2023:

- Library outreach staff meeting to discuss Amish/Old Order Mennonite feedback.
- Library director contacts potential partners to provide free dental health supplies.
- Library director reaches out to illustrator prospects (local artists, UWEC students, community artists).
- Outreach staff discuss the program with several Elders/Bishops at regular monthly visit to gain initial feedback before starting.
- AHEC staff contacts potential dental student author prospects.

##### December 2023:

- Library outreach staff meeting to discuss Amish/Old Order Mennonite feedback.
- Library director finalizes dental clinic partners to provide free dental health supplies (toothbrushes, floss etc)
- Library director finalizes illustrator partner.
- AHEC staff finalizes author partner.

- Outreach staff complete verbal agreement with Elders/Bishops at identified pilot school locations to participate in program.

### **Contract Performance Period**

#### **January 2024:**

- Outreach staff meeting to discuss Amish/Old Order Mennonite feedback.
- AHEC staff finalizes author partner.
- Library director finalizes illustrator partner. Library director meets with illustrator and author partners to discuss project goals and timeline.
- Library director uses initial feedback gathered from staff and Elders in discussions with author and illustrator to develop the resource.
- Outreach staff complete verbal agreement with Elders/Bishops at identified pilot school locations to participate in program.

#### **February-March 2024:**

- Author, illustrator, and graphic designer develop content and art pages in communication with library director.
- Outreach staff share initial mock-ups with Elders to gain more feedback and direction.
- Library staff generally meet to discuss the project and feedback.

#### **April 2024:**

- Library staff general meeting to discuss project.
- Library director uses Amish/Old Order Mennonite feedback to finalize the resource with author, illustrator, graphic designer.
- Library director works with graphic designer and production company to finalize resource publishing details.
- Library outreach staff participate in “train-the-trainer” session with author.
- Resource production is completed.
- Library Director submits Final Activity Report

### **Phase II – Pending approval of an additional \$3,000**

#### **August - October 2024**

- Outreach staff share resource with the Elders/Bishops of pilot schools for continued approval.
- Outreach staff give booklet to scholars and teachers of intended pilot schools
- Outreach staff conduct dental health demonstrations in each school or work with Amish teachers for “train-the-trainer” instruction
- Library staff general meeting to discuss program and feedback.

- Library Director
  - Analyze Pilots I & II activities and evaluation data.
  - Write and submit Final Project Report to NNLM

### **November 2024 – April 2025**

- Present subaward project as part of the Region 6 Webinar Speaker Series
- Submit for conference papers and posters or journal or book chapter (Optional)

## Evaluation Plan

According to NNLM procedures:

- Subawardee(s) can use the IRB approved NNLM Training Survey for program evaluation provided by their regional library, office, or center (ROC)
- The ROC will work with subawardee(s) to submit activity reports using the NNLM approved data reporting system. No identifiable health information will be collected from participants. Only participant numbers and zip codes are to be reported.
- A Final Report will be submitted to the NNLM Region 6 office by or before May 30, 2024.

## Project Personnel

### **Project Director**

Name: Elizabeth Miniatt

Address: 154 E 4<sup>th</sup> Ave, Stanley WI 54768

Daytime phone: 715-644-2004

**Job Title & Organization:** D.R. Moon Library-Director

### **Education:**

Bachelors of Arts-Communication Studies – UW-Eau Claire

Masters-Library and Information Science – UW-Milwaukee

### **Background:**

Background in small, rural communities and public libraries. Research interests include the concerns of these communities and their members-bridging the divide between rural populations and library resources, increasing technological and

digital literacy, providing employment assistance, etc.

**Role:**

Elizabeth is the project director and director of the D. R. Moon Memorial Library. Her background in communications provides a solid foundation to communicate effectively with the diverse stakeholders in this program; the Amish/Old Order Mennonite community, the outreach librarian, the NNLM staff, the illustrator and author, the production company, graphic designer, the library board, and the broader community. Her education in library and information science as well as experience with rural communities, including the Amish/Old Order Mennonites, provides her with the information and resources needed to serve the various communities for which the library is responsible. She will coordinate the production and refinement of the booklet resource and facilitate communication and collaboration between the various stakeholders.

**Amish Liaison**

Name: Colleen Danielson

Address: 12107 Cty Hwy H, Stanley WI 54768

Daytime phone: 715-644-2266

**Job Title & Organization:** D.R. Moon Library-Outreach Librarian

**Education:**

Grades 7-12 Broad-Field Social Science, B. S. from Mount Senario College Ladysmith, WI

K- 12 Master Degree in Reading from the University of Wisconsin, Eau Claire, WI (Reading Specialist-317).

**Background:**

Colleen has 29 years in education, 17 of which were as a Reading Specialist. In recent years the opportunity to work in close harmony with the folks in the Amish/Old Order Mennonite Community has been presented and Colleen has found they are very interested in having their scholars increase their reading, writing and math skills to compete in their ever-changing world. Colleen has always been interested in providing reading experiences to people of all ages. Reading provides unlimited opportunities to explore avenues of entertainment and educational pathways. Reading and comprehension are the most important tools

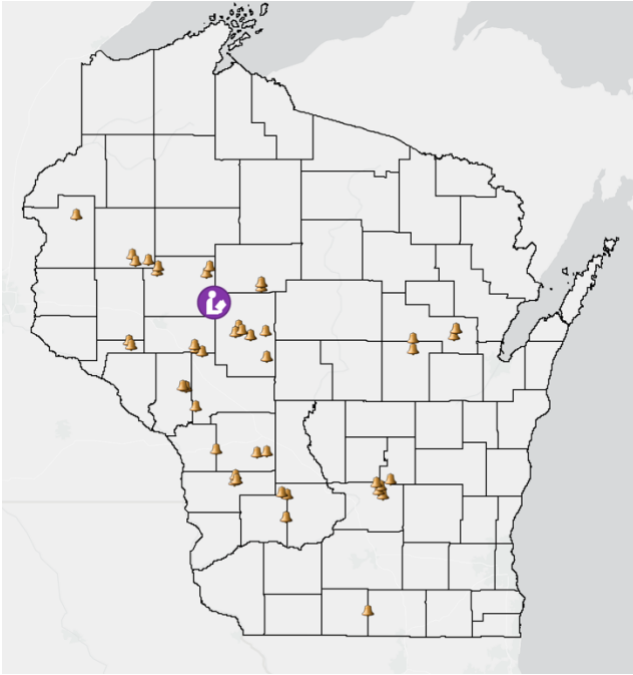
in the educational toolbox.

**Role:**

Since community and tradition play important roles in the Amish/Old Order Mennonite, the welfare of the community ranks above individual rights and choices. Communal wisdom accumulated over decades, is valued more than the opinion of one person. Colleen has had prior experience working directly with Amish/Old Order Mennonite community. Her experience as an educator and Reading Specialist gives her a unique opportunity to return the favor and help the Amish/Old Order Mennonites to address the challenges they want to solve.

As the Outreach Librarian, Colleen serves as the primary liaison between the Amish and Old Order Mennonite elders and the library. Colleen presents and discusses the direction of library outreach efforts and gathers feedback and input from the elders to take back to the library. This feedback will be used to refine the project and create a resource that will be acceptable to the Amish and Old Order Mennonite communities.

## Appendix A



[State map of Wisconsin](#) D R Moon Public Library, Stanley WI and the location of Amish schools throughout Wisconsin.



Photo: Amish school located in Greenwood, Wisconsin (Google Maps)



Inputs	Outputs	Short Term outcomes	Intermediate Outcomes	Long Term Outcomes
<p>-Time</p> <p>-Money: budget from NNLM is \$10,000</p> <p>-look for additional partners on grants/funding</p> <p>-Partners: consider if we need to ask on a volunteer basis or stipend</p> <p>-library systems to host educational seminars on dental options in local communities</p> <p>-County health department partnerships</p> <p>-Marquette University and Wisconsin Academy of General Dentistry - work with students to help support workshops, ask high school students in community to volunteer during program event</p> <p>-research/resource development on how to improve access</p> <p>-Space (virtual, in person)</p> <p>-Staff</p>	<p>Examples:</p> <ul style="list-style-type: none"> <li>• Trainings e.g. How to discuss dental health in your community, what kind of issues are prevalent.</li> <li>• Publications e.g. pamphlets on appointment scheduling, low-cost dental care, participating locations, partner offerings etc.</li> <li>• Events e.g. feature local dental health professionals out in the community and at the library, programs like “Dental health beyond brushing and flossing”</li> </ul> <p>-Evaluation of participation – survey of behavior changes and knowledge</p>	<p>-Increase public library staff knowledge and comfort/familiarity with dental health and local dental programs</p> <p>-Increase student knowledge and comfort/familiarity with dental health and local dental programs</p>	<p>-Public libraries provide programs and outreach focused on improving dental education and access for community members</p> <p>-Participation in program</p> <p>-Organizational partnerships formed between public libraries, local health clinics and departments, high schools, and universities.</p>	<p>-Increased community exposure to dental health education</p> <p>-Increased use of preventative dental care</p> <p>-Increase dental health knowledge in the community</p>

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