

3.0 IMPLEMENTATION ARRANGEMENTS

3.1 Institutional Arrangements

Implementation of the policy will be done with the involvement of various stakeholders including government ministries, departments and agencies (MDAs), Public and Private Health Facilities, Development Partners, Parliament, Dental Associations and Union, Civil Society Organizations (CSOs), Regulatory Bodies, and Training Institutions. Each stakeholder has a well

defined specific role that they are expected to play in the policy implementation process.

3.2 Implementation Framework

The policy will be implemented for a five year period running from 2022-2027. The framework specifies the objectives, related strategies, the responsible institutions and the specific time period for implementation.

A detailed National Oral Health Policy 2022 - 2027 is available at the Ministry of Health

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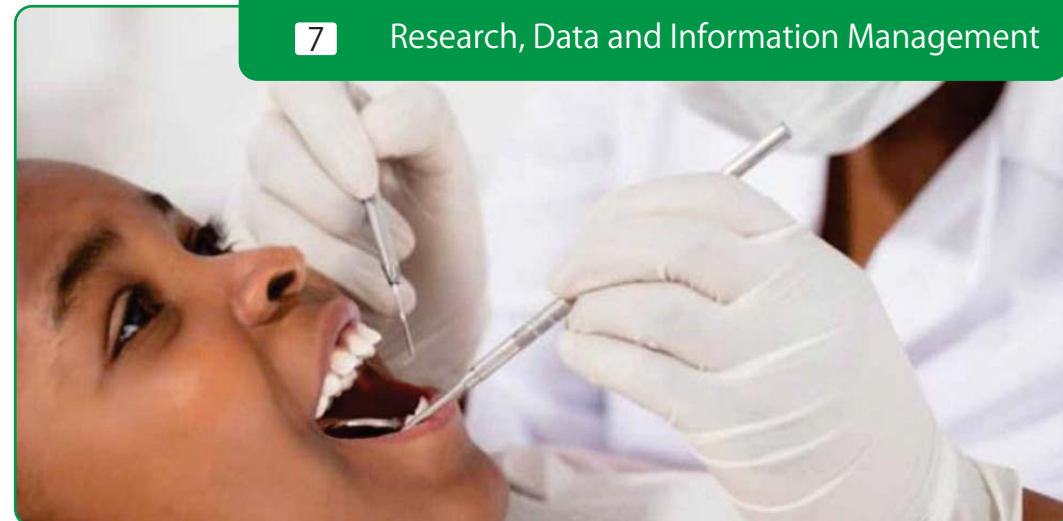
Republic of Malawi
Ministry of Health

NATIONAL ORAL HEALTH POLICY (2022 - 2027)

POLICY SUMMARY

Policy Priority Areas

- 1 Leadership and Governance
- 2 Dental Public Health
- 3 Clinical Practice and Patient Access
- 4 Human Resources for Oral Health
- 5 Infrastructure and Equipment
- 6 Oral Health Financing
- 7 Research, Data and Information Management



INTRODUCTION

The National Oral Health Policy (2022-2027) provides policy direction on the provision of high quality oral and dental health services at all levels of care in Malawi. It aims to create an enabling environment to addressing key challenges faced in the provision of oral and dental health services, which include: poor practices for prevention of oral and dental disease; inadequate numbers of trained oral healthcare personnel; an unreliable consumable material supply chain; inadequate functional dental equipment; limited generation, analysis and utilization of data; inadequate integration of oral health into the wider Non-Communicable Diseases (NCDs) agenda and poor financing for oral health services among others.

HISTORICAL CONTEXT

The delivery of oral health services in Malawi has been undertaken without a proper guiding policy framework, which has resulted in a number of challenges, including limited coordination of efforts aimed at improving oral health care. Government has been collaborating with various partners to address highlighted challenges. These efforts include: i) training of various oral health cadres and deploying them in health facilities, ii) partnering with other stakeholders to roll out interventions such as Bright Smiles Bright Futures' in 2008, which was aimed at improving school children's oral health, and the provision of oral health education and small scale treatment to under-served and vulnerable children in communities.

On-going efforts include the holding of National Oral Health Week annually in November to raise awareness and provide oral health education throughout the country.

PURPOSE

The purpose of the policy is to provide guidance for enhancing the delivery of dental and oral health care, both preventive and curative, in Malawi through addressing the identified key challenges and their underlying causes.

STRATEGIC LINKAGES

The National Oral Health Policy is aligned to National Health Policy (NHP- 2018-2030) as the overarching policy for the

- Hospitals and Health Centers) to provide emergency oral health care;
- iii. Ensuring inclusion of oral and dental health infrastructure and equipment needs in the Capital Investment Plan (CIP) for health;
- iv. Supporting procurement, installation, and equitable distribution of oral and dental health equipment;
- v. Promoting the development and implementation of facility-based equipment maintenance plans.

2.7 Research, Data and Information Management

Policy Statement 7: The Policy shall ensure the promotion of mechanisms for enhancing data generation, information management and research for oral and dental health research.

PS-7 Strategies:

- i. Enhancing the completeness, timeliness and quality of oral health data collection during routine treatment;
- ii. Building capacity of oral health professionals in oral health data analysis and reporting;

- iii. Ensuring the expansion of oral health indicators coverage and comprehensive reporting of oral health conditions in the DHIS 2;
- iv. Promoting capacity building of oral and dental health professionals in oral health research;
- v. Strengthening collaboration among public, academic, CHAM and Private Facilities in oral and dental health research;
- vi. Promoting documentation, translation and utilization of oral and dental health research findings;
- vii. Promoting periodic national oral and dental health surveys;
- viii. Establishing a center of excellence in oral health care.

- iii. Supporting local training institutions to train more oral health professional in all cadres including community workers; (Dental Surgeons, Dental Therapists, Dental Surgery Assistants, Dental Technicians, and Equipment Maintenance Engineers);
- iv. Facilitating the introduction of oral health courses/specializations not being offered in Malawi;
- v. Supporting Continuous Professional Development (CPD) for oral health professionals at all levels.
- vi. Strengthening the provision of expanded capacity to non oral health cadres to offer the WHO Basic Package of Oral Care.

2.5 Oral Health Financing

Policy Statement 5: The Policy shall ensure an enabling environment for resource mobilization and adequate financing of both preventive and curative oral health services at all levels of the health care system.

PS-5 Strategies:

- i. Developing an oral health services resource mobilization strategy;
- ii. Strengthening engagement of the

private sector to invest in oral health interventions;

- iii. Strengthening coverage of oral health conditions in available health insurance schemes;
- iv. Promoting comprehensive planning and budgeting for oral health services in public and private institutions and other stakeholders;
- v. Introducing a specific oral health budget line within the national budget framework at national, central hospital and district level;
- vi. Lobbying for introduction of tax relief on fluoride toothpaste products.

2.6 Infrastructure and Equipment

Policy Statement 6: The Policy shall ensure the availability of adequate and quality infrastructure and equipment for the delivery of oral and dental health services at all levels of care.

PS-6 Strategies:

- i. Supporting the development of standard designs for oral health infrastructure at all levels of care;
- ii. Upgrading health facility infrastructure (Rural/Community

health sector and its implementing tool, the Health Sector Strategic Plan III (HSSP-III, 2022-2030). Implementation of the National Oral Health Policy will thus contribute towards the goal of the NHP which is to 'improve the health status of all Malawians, and to increase client satisfaction and financial risk protection towards the attainment of Universal Health Coverage'. The policy is also linked to other strategic documents at national

1.0 POLICY DIRECTION

1.1 Goal

The goal of the policy is to improve the oral health of the population through provision of comprehensive, high quality and equitable dental and oral health care services and promote public awareness to all the people living in Malawi.

1.2 Outcomes

The policy is expected to facilitate the achievement of the following outcomes:

- i. Improved population oral health;
- ii. Improved quality and accessibility of oral and dental health services for all;
- iii. Increased awareness of dental and oral health care amongst the general public and policy makers;

level such as: Malawi 2063 (MW2063), which is the country's long term vision, and its first ten (10) year implementation plan (MIP-1), The Public Health Act, The Constitution of Malawi, other health sector policies and international agreements such as the WHO Oral Health Resolution (May 2021), The Lancet Series on Oral Health, the Minamata Convention of Mercury and the Sustainable Development Goals (SDGs).

- iv. Increased use of evidence in decision making processes for oral health and dental care.

1.3 Objectives

The objectives of the policy are to:

- i. Strengthen leadership, governance and financing for oral and dental health services;
- ii. Strengthen public awareness and delivery of preventive oral and dental health services as part of the wider NCD approach;
- iii. Enhance the delivery of quality curative services for oral health at all levels;
- iv. Improve the availability and equitable deployment of all cadres of oral and dental health care workers;

- v. Strengthen resource mobilization and financing of oral and dental health services;
- vi. Ensure the availability, accessibility and quality of oral health infrastructure and equipment;

- vii. Promote oral and dental research and use of evidence in oral and dental health.

The policy has identified the following as priority areas of focus:

2.0 PRIORITY AREAS

2.1 Leadership and Governance

Policy Statement: The Policy shall ensure the promotion of mechanisms for effective leadership and governance for oral and dental health services at all levels.

PS-1 Strategies:

- i. Building leadership and management capacities of oral health professionals for effective decision making at all levels;
- ii. Establishing a functional Oral and Dental Health unit within MoH;
- iii. Developing clear scope of practice for all cadres of oral and dental healthcare workers;
- iv. Supporting the development / review of laws and regulations relating to oral and dental health practice;
- v. Ensuring a conducive environment to effective collaboration, coordination and oversight of oral

- and dental health services;
- vi. Facilitating the introduction of clearly articulated Fitness to Practise (FtP) process for oral healthcare workers;
- vii. Designing procedures to ensure an effective supervisory system for provision of oral and dental health services.

2.2 Dental Public Health

Policy Statement 2: The Policy shall ensure effective implementation of interventions aimed at enhancing public awareness, prevention, surveillance, and control of oral and dental diseases.

PS-2 Strategies:

- i. Developing a national preventive dentistry strategy for enhancement of oral health;
- ii. Increasing availability of oral health information to the general public and community involvement in oral health

- interventions for improved public awareness;
- iii. Integrating oral health care into NCD agenda to address key risk factors for oral diseases as part of the common risk factor approach;
- iv. Strengthening prevention of dental conditions in settings such as schools and the wider communities;
- v. Strengthening surveillance activities for early detection, prompt treatment and reporting on oral and dental health problems.

2.3 Clinical Dental Practice and Patient Access

Policy Statement 3: The Policy shall ensure that quality and adequate oral and dental health services are accessible at all levels of care to all Malawians.

PS-3 Strategies:

- i. Promoting access and equitable care of patients with dental pain in line with the Essential Health Package and WHO Basic Package of Oral Health Care;
- ii. Developing/revising guidelines and standards on relevant aspects of oral health service provision;
- iii. Ensuring reliable supply chains of appropriate drugs (e.g. local anesthetic) and consumable materials to support delivery of oral and dental care;
- iv. Strengthening the provision of quality restorative dentistry;

- v. Facilitating delivery of mobile oral and dental health services (such as mobile, truck-mounted dental surgeries) in remote and rural environments;
- vi. Promoting use of mercury free material for dental restorations.

2.4 Human Resources for Oral Health

Policy Statement 4: The Policy shall ensure the availability of adequate professional dental staff and up-skilled oral healthcare workers of all cadres at Public, CHAM, and Private Facilities and in the communities.

PS-4 Strategies:

- i. Ensuring adequate recruitment and equitable deployment of oral and dental health workers to the various Public, CHAM and Private Facilities;
- ii. Ensuring periodic review of oral health cadre establishment and regular workforce planning;