

Role of attendance patterns of 11-12 year old children in relation to the planning of dental services.

University of Birmingham - Inequalities in oral health: a review of the evidence and recommendations for action



Description: -

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Notes: Thesis (D.D.H.) - University of Birmingham, Dept of Dental Health, 1979.

This edition was published in 1979



Filesize: 25.105 MB

Tags: #Current #concepts #on #the #management #of #tooth #wear: #part #1. #Assessment, #treatment #planning #and #strategies #for #the #prevention #and #the #passive #management #of #tooth #wear

Young people and healthy eating: a systematic review of research on barriers and facilitators

Despite a wide search, we found few evaluations of strategies to improve nutritional labelling on foods particularly in schools or to increase the availability of affordable healthy foods particularly in settings where young people socialize. For 12-year-olds, the children of skilled manual workers had a mean DMF a little lower than the overall mean and there were significant differences between children from manual and non-manual households.

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Report of the Dietary Guidelines Advisory Committee on the dietary guidelines for Americans, 2010, to the Secretary of Agriculture and the Secretary of Health and Human Services. Dentists, patients and ethnic minorities. There were significant intervention effects for reported healthy eating behaviour but not maintained by young men and for knowledge not young women.

Psychometric evaluation of the child oral impacts on daily performances (C

Early smoking also appeared to predict educational attainment later in life. Staff members who provide counseling should have the appropriate training necessary to counsel students about eating healthfully and being active 520. This kind of prenatal exposure may also alter the sensitivity of the offspring to later environmental influences , which could predispose the offspring to a given behavioral trajectory.

Current concepts on the management of tooth wear: part 1. Assessment, treatment planning and strategies for the prevention and the passive management of tooth wear

Moreover they add additional explanatory power to models of health inequalities. Using physical activity as a punishment e. States, districts, and schools should use a systematic approach when developing, implementing, and monitoring healthy eating and physical activity policies.

Evidence summary: the relationship between oral health and dementia

Whether this association exists among iron-deficient children and adolescents without anemia is unclear 73. Health, mental health, and social services staff members can work with physical education and health education teachers, nutrition service staff members, principals, and other school staff members to establish a healthy environment and consistently promote healthy eating and physical activity messages and activities throughout the school setting 542,550,555.

Evidence summary: the relationship between oral health and dementia

Prepared by Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion The material in this report originated in the National Center for Chronic Disease Prevention and Health Promotion, Ursula E. Overweight in childhood and adolescence.

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Real-time data capture and adolescent cigarette smoking: moods and smoking

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However, participation in family nights is typically low 564,572,577. Future work should also explore how the brain integrates information from large social and physical environments, small social groups, and cognitive factors to influence tobacco use behaviors in a measurable way. Coordination of all these persons and groups facilitates greater communication, minimizes duplication of policy and program initiatives, and increases the pooling of resources for healthy eating and physical activity policies and practices 189--192.

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