

Dr. Faahim Rashid - On Working in Dental Public Health at the Municipal Level

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Dr. O'Keefe: Today I welcome Dr. Faahim Rashid and he's a dental public health specialist. He works at Peel Region in the Greater Toronto Area and he's going to talk to us about what it's like to be a dental public health specialist at the municipal level, in Canada. Welcome, Faahim. First, just give us the highlights of your professional career to date.

Dr. Rashid: Hi John, thank you for having me. So, I'm currently working in the role of dental consultant with the regional municipality of Peel, in Ontario. A little bit of background about myself, I completed my undergraduate dental degree in the Middle East back in 2003, a while ago. I went on to complete a year of internship at the same school and it was at that point in time where I'd actually joined teaching staff and I was assigned to the clinics but also had the opportunity to support students with their thesis work and things like that.

Dr. Rashid: And it's at that point in time that thoughts about my career and the future began to develop and sort of take direction. And I'll be honest, you know, clinical dentistry is great, but I wanted to focus on something rather than be a jack of all trades. So, I began to have conversations with my professors and colleagues about the possibility of specialty training, et cetera. I knew at that point that, you know, I had a strong interest in research, I wanted to pursue something further, you know, formally through a graduate program. And it's at that point in time that I actually connected with Dr. Jocelyne Feine at McGill University and she supervised me for a couple of years through a research-based master's [degree]. And that sort of opened up my eyes to, you know, um, the evidence, the research process, you know, asking the right questions and sifting and deciphered through different types of evidence and things like that.

Dr. Rashid: And it sort of opened up my vision from that point onwards. And then I came back to the Middle East, I worked there for five years. And it was at that point in time that my family and I decided we were going to move to Canada. And it was a really great opportunity to join well a second master's program, but this was the specialty training in dental public health at the University of Toronto. And, yeah, I mean I realized that dental public health was my calling. And it actually worked out really well. I had a good interaction with a number of people at the faculty. Yeah.

Dr. O'Keefe: It sounds to me is if you were exploring options for different specialty training, clinical and non-clinical. Why dental public health in particular?

- Dr. Rashid: So, yeah, that's an interesting question. Well first of all, I mean, just joining a specialty on its own I thought it was important for me simply because I wanted to focus on something. I feel like focusing on something is really important. Again, different people have different personalities and for me I just feel like focusing on something allows me to do it a whole lot better. And so, I feel like in that sense, generally I think, you know, getting into a specialty program makes sense. And then in terms of the why dental public health specifically, I mean, like I said, I enjoy clinical work. I thought that, you know, it was exciting, it was interesting, but at the same time I felt like there was a lot more that I could do on a larger scale. In terms of, you know, being attracted to the specialty of dental public health specifically, I mean it was quite amazing for me to see the kind of change that you can bring to the population as opposed to the individual.
- Dr. Rashid: You know, our role as the dental public health specialist is to focus on the dental and oral health issues in communities and populations. And I have to say that for me, being a clinician and coming into the fold of dental public health, there was a paradigm shift with respect to my own thinking. And I still remember sitting through a public health seminar course and thinking about this and rethinking it until it made sense. And so, it takes time for somebody to get to that stage where they think about things like that. I mean, as you go through your training, you know, your clinical training, you're not often talked to about how other factors impact the oral health of populations. You know, factors like the social determinants of health or people's incomes or education or things like that. And it's the responsibility of the dental public health specialist to identify those factors.
- Dr. O'Keefe: And, you know, implement policies and programs in response to them. But like I said, this is a whole new way of thinking as opposed to, you know, how you've thought about things as a clinician. And just to add to that, it's challenging to think about things like that. It's not easy. And specifically because you don't see the results of your work immediately the way you would as a clinician. Like, you're not pulling people out of pain, you're not restoring function, you can see that immediately. The impacts of the work that we do is actually seen much later.
- Dr. O'Keefe: So, you have to swap one type of patients for others, for another type of patients, right?
- Dr. Rashid: Exactly. That's right. Yeah, that's right.
- Dr. O'Keefe: Do you get to do any clinical work as part of your current role, or have you left that behind?

Dr. Rashid: So that's an interesting question. So no, one I'm not, I'm not doing any clinical work on the side. Having said that though, I think that the work that we do as a dental public health specialist closely resembles what a clinician would do. It's just at a different level. So, so if you think about it from a clinician perspective, what do they do? They have a patient that comes in, they focus on the individual, they do their exam, they diagnose, they've come up with a treatment plan, they provide that treatment and then they schedule periodic maintenance or follow-up and things like that. And that's sort of similar to what we do as dental public health specialists. So, what we're doing is rather than focusing on the individual, our focus is the community, the population.

Dr. Rashid: How do we conduct our exams? We're actually looking at data. We're looking at surveillance data, we're looking at oral health status data. What does the health of the population look like as opposed to the individual. So, we analyze that information. That's our diagnosis. So, we're trying to figure out what's going on. We're analyzing, we're diagnosing through that information what is it? Well, we don't think about things from a treatment perspective, but what are the policies or programs that we can implement in response to what we've actually found through that analysis of the data. And then again, we do periodic evaluation after we've actually implemented those programs to make sure that they are reaching the outcomes that they need to reach or need to get to. So, it's very similar, but no, John, I've actually left my clinical work on this side.

Dr. O'Keefe: Right. At a high level you've given us some insights into what you do, the nature of your work. But at the municipal level could you paint a picture of what's a typical week for you. What are the types of things you get up to at the Region of Peel?

New Speaker: Sure. So, again, I work with the local public health unit here, and I can honestly say that before I came into public health there was this notion floating around that things moved slowly in public health. But I can unequivocally say that that's an old wives' tale. Days of course can look very, very different. Yeah, one of the things that I had to get used to [be] a continuous flow of emails throughout, be it from internal folks or external. And it usually depends on the flavor of the day. So, for example, at this point in time, because there's a lot of discussion about the new provincial seniors' dental program that's being implemented Ontario, there's a lot of back and forth discussion and emails around that.

Dr. Rashid: So again, it could change every day. There's no set schedule on any specific day. I do work closely with a great oral health management team, you know, with health promoters, community development workers, health analyst, multiple dental hygienists, dental assistants, et cetera. Some of these folks report to me and so there are management duties that I have on the job. We're also often engaging with external folks as well. So be it local dentists, you know, folks in academia, local health coalitions or different community partners, to name a

few. And of course, the public as well. At a higher level, though, in terms of my actual role, I help support community-based programs including our school dental screenings as well as our publicly funded children's programming. Our work at the PHU is more prevention focused as opposed to treatments. We're always delivering preventive services for kids in different locations, including our dental bus, you know, our fixed clinics and things like that.

Dr. Rashid: Just to give you a sense of what my work looked-like when I first came into the role and you know, a lot of students ask this too, is when you start your job, like what is it in the first year, what does that look like? And so, so for me, I was actually very focused on very particular projects. So, one of the things that I worked on for example, was developing our oral health status report for Peel. That was a very interesting way for me to start because that's what we learn to be foundation before we actually build out our programs and policies. And so, I thought it was an ideal way for me to start my career in public health, actually assessing the oral health status for our population. And I worked on other things like the evaluation of our seniors' program and, yeah, I mean there's just multiple projects happening.

Dr. Rashid: There are times also when we actually have practicum students come to us as well, so students actually trying to learn more about the field. So, it's a good opportunity for them to also sort of get a flavor of what municipal dental public health is about and sort of, you know, helping them in terms of guiding their direction in terms of their own career journeys.

Dr. O'Keefe: So, I have two questions for you based on what you've been saying just recently. If anybody is thinking of studying dental public health they're welcome to contact you? That number one.

Dr. Rashid: Absolutely. Of course, yeah.

Dr. O'Keefe: And number two, do you get to interact a lot with physicians, nurses, environmental health people or are you really so focused on the oral health issues that you don't?

Dr. Rashid: No, I think that, yeah, that's a great question. Honestly that is one of the things that I love about being a dental public health specialist in the sense that, you know, as a clinician, so if you're a clinician, there is less tendency for you to interact with folks outside of the oral health field. Whereas for us, it's almost a necessary part of the job. Like we need, we need to interact with different groups, uh, you know, across different disciplines, different stakeholders. So an example of that are, you know, we work closely with local health coalitions, we work closely with different health professions, dietitians, nurses, physicians, you know, the private dental community in terms of passing on our message that, you know, ensuring that the messaging around oral health is consistently

coming from all these different parties. I think that's the most important thing is to make sure that our messaging is consistent and even in terms of our own program planning and policy planning and implementation, we need to make sure that we're engaging with our partners as we try and make that happen as well. So, no, I mean that's, that's a super important part of our job and it's happening on a daily basis as well.

Dr. O'Keefe: If I was to just summarize what I'm picking up from your general discourse here, you just find this whole discipline intellectually very stimulating.

Dr. Rashid: Absolutely. Absolutely. There's always so much to think about. In fact, it's interesting that you bring that up because one of the things that I was involved with early on with Peel was a program which we had, well, it was a pilot program that we had implemented to improve the oral health of adults on social assistance with the hope of making them more employable. You know, people sometimes say that people in public health are not innovative, like there's no opportunity to innovate, but really there is. There is that opportunity to do a little bit differently, of course provided that you get the support from the people that you work with. You know, there is an opportunity to innovate and to try things that are different. And so, it is, it is very intellectually stimulating and it's exciting.

Dr. O'Keefe: And is that what you like best about it?

Dr. Rashid: Absolutely. I think, well, well, first it's just, it's a challenge, right? You're always in these different situations, different scenarios where you have to try and think outside of the box to try and sort of come up with a solution. Like it's always a challenge because the situations they're always so different. But yeah, I mean, in terms of what I like about it, I think the ability to interact with so many people outside of the oral health field, I think in itself is very exciting.

Dr. O'Keefe: Wow. If somebody wants to embark on a career in dental public health, have you got any advice about practical initial steps to take to find the right program, to find if it's the right specialty for that person? Give us some advice.

Dr. O'Keefe: Absolutely. Yeah, I think we've all been in that position, right? Even in fact before getting into our undergrad programs, we're often thinking about, is this the right career choice for me? And, yeah, absolutely it's super important to think about that before you embark on a specialty. I think the most important thing to do, and this is something that I did as well, is you need to have the conversations with people. You have to do that. So, be it people who are, you know, either delivering the program. So, you know, if the plan was to get into a dental public health specialty program, then obviously have the conversations with people within the program, the professors, the lecturers, if you have the

opportunity, the students within the program. And of course, going beyond that, looking at people who are currently in the field.

Dr. O'Keefe: And you have to remember with dental public health specifically, when you come out of a specialty training program there is an opportunity for you to get into different roles. It's not just one role that you come into, right? So, you could be a dental consultant, you could be working in academia, you could be working at the municipal, the provincial, the federal levels of government. It could look very different. And people are open to having the conversations with you about what it's like to be in that specific role. So, I would say make sure you have the conversations. Try and study it a little bit so you understand what is the breadth of or the scope of positions that you can actually get into after you get into dental public health and have the conversations with people so that it allows you to make a more informed decision.

Dr. Rashid: And another thing I would say is, and this is with any specialty, not necessarily just dental public health, but I guess more so dental public health, leadership is important. I think that it's an important competency. Well it's a competency that's important in all facets of life, but with dental public health specifically, I think it is super important because there is this responsibility as a specialist, wherever you're working, of guiding the association or the organization or, you know, the government that you're working with through oral health issues. And then, you know, providing your expert opinion on how to resolve some of these things. Leadership is an important part of that in terms of getting your message across, the communication and all of that. And it's not, it's not something you learn overnight. You don't learn, you know how to become a better leader through a course at UofT. It's not that easy. It takes time to do that. So, it's not an overnight thing, but you need to think about that too as you come into the fold of dental public health because it becomes a very important competency, specifically for this, for this specialty. So, think about that as well before you decide to embark on the journey in terms of, you know, coming into dental public health.

Dr. O'Keefe: Any final word of advice?

Dr. Rashid: No, I mean, of course I'm available to have a chat with anybody who's interested in dental public health. I've had a few years of experience working at the municipal level and have obviously engaged with quite a few people working at the province as well as at the federal levels. I'm happy to provide any sort of advice that I kind can. I'm absolutely open to that.

Dr. O'Keefe: From the evidence of this conversation, you're a most passionate, articulate, reflective dental public health specialist. And from what I know of you, you are true to your word. You're very approachable. Dr. Faahim Rashid, thank you so much for taking your time today to speak with us.

Dr. Rashid: Thank you for having me, John. I appreciate it.