



FROM LEFT Jan and John Owen use mascot Craig the Crocodile to demonstrate correct teeth-cleaning techniques; volunteer intern Moses Lee (now a graduate dentist) makes records while volunteer dentist Daniel Cocker examines a child's teeth; three generations of Owens – Peter, John and Ray – with the KDT helicopter.

John & Jan Owen

Creating healthier Kimberley communities, one tooth at a time

words Heather Zubek

He'd never owned a toothbrush, let alone received regular dental care. The nine-year-old's face was swollen. His chronic pain stopped him attending school. At night he kept his family awake with anguished crying.

"This lad was on a 'make-believe' waiting list," says Perth specialist orthodontist Dr John Owen AM, relating the story of one of many cases of dental neglect in the Kimberley's remote Aboriginal communities. Encounters like these have fuelled his quest to improve dental care in the North-West.

John and his wife, Jan, a dental nurse and homeopath, have been making regular, self-funded visits to the Kimberley since their passion for the region and its people was sparked in 2004. For his 50th birthday John piloted his own helicopter across the centre and around the top end, then down the coast of Western Australia.

They later returned to the Kimberley to visit schools with the Madjiti Moorna choir – a group of indigenous and non-indigenous

singers to which Jan belongs. Both times they were awestruck by the beauty of the region, but their snapshots also told another story.

Angry abscesses, rotten teeth and diseased gums do not belong in a photographic scrapbook of a trip to the North West. But these are the photos that remind John and Jan of the work that's yet to be done. "When we went up with the choir the first time [in 2009], the school [Halls Creek District High] begged us to do something, as they hadn't had a school dental service in two years," says Jan.

When they screened 133 children from Halls Creek under the age of 11, they found that 51 required urgent dental care. Another 23 required treatment within six months. "We realised we couldn't accept this situation and not do something about it," says John.

Their response has developed into a highly coordinated organisation determined to make a difference. The Kimberley Dental Team (KDT) is a not-for-profit, non-government organisation, consisting of a team of visiting volunteers from the dental profession. The team works together

with Dental Health Services Western Australia, the Centre of Rural and Remote Oral Health, University of Western Australia and Kimberley Aboriginal Medical Services, to provide additional and often urgent services to the remote communities of the East Kimberley. These are the communities that are the most disadvantaged by the health system through lack of access, limited staff and distance.

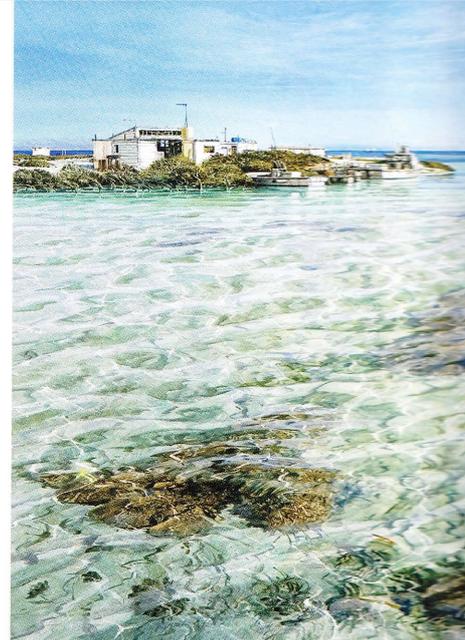
As a specialist orthodontist and dental practitioner, John has been shocked and disappointed at the state of dental health in remote communities.

"When you have young kids who are lethargic for five or six years [due to dental disease] and they have to be brought down to Perth and have as many as 14 teeth extracted under general anaesthetic, there is obviously something very wrong with the medical and dental health system," he says.

"After a while these kids think this type of pain is normal. It's not a quantum leap, knowing that antibiotics and painkillers alone don't solve dental problems, to imagine that people look for alternative substances to self-medicate their pain."

A daunting task lies ahead for this couple and their team of volunteers. "When you have advanced dental disease you can't eat properly, you can't sleep, you can't think," says John. "Often in conjunction with chronic ear infections, you can't even hear properly. How can kids be expected to learn in class when they're coping with all this?"

He says the Education Department of WA needs to take the reality on board. "The



Larry Mitchell "Abrolhos" (Detail)

department is spending money on all these wonderful classrooms with surround sound and electronic whiteboards in these communities, but many kids are in no state to learn effectively," he says. "Surely we should be working with the Health Department in getting these kids into a healthy state ready for their education."

Two trips from Perth to the North West are on the agenda for 2011. Last year 11 volunteers went in August but this year there are up to 32 volunteers, including four final-year dental students.

"We have really good relationships with the elders and they spread the word for us," says Jan. "Now we can go out to the smaller communities

Peter have helped with logistics, transport and community interaction. John's father, Dr Ray Owen OAM, in his 80s and still a practising dentist, participated in a KDT trip last year.

So what does the future hold for the Owen clan and the KDT? "I like the idea of establishing numerous independent clinics within the actual communities so that travelling retirees can volunteer," says John. "There is so much knowledge and experience travelling round Australia. It's a myth that baby boomers are going to be a drain on society. They want to be productive, and if people can have access to these clinics in the north they can spend a week or so

"When you have advanced dental disease, you can't eat properly, you can't sleep and you can't think"

with our portable dental chairs and equipment to offer screening and provide treatment. We encourage people to come into the main Halls Creek Hospital clinic to address more complex problems."

The KDT is a true family concern. Three generations of the Owen family are involved. John flies into communities, provides dental care and coordinates the professionals. Jan helps with post-operative care, incorporating simple homeopathic remedies to help manage pain and complications for patients often making a three-hour journey home over corrugated roads.

The Owens' three adult children are also involved. Dental technician David provides a free service making simple dentures, and Ashleigh and

contributing during their travels. This concept can readily apply to all professions and skills."

As for that nine-year-old they helped out in the early days, he's a different child. "We didn't recognise him when we went back up," says John. "When we saw him on that first trip he was putting up with so much pain, he looked lethargic and drawn. Once the pain was gone he looked like a young kid again, attending school and doing what young kids do.

"Indigenous health is a massive issue, but once you meet the great kids and families of the Kimberley, you know that any effort, even if it only assists one child, is worth it." 

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