

NOHC 2013

Oral Health of AI/AN Preschool Children

Kathy Phipps, DrPH
Epidemiology Consultant
Northwest Portland Area
Indian Health Board



Disclaimer

The findings and conclusions in this presentation are those of the presenter, who is responsible for its content, and do not necessarily represent the views of Indian Health Service. No statement in this presentation should be construed as an official position of IHS or of the U.S. Department of Health and Human Services.

Historical Perspective

- 1933 Navajo Nation
 - Very low levels of caries
- 1934 Inuit (Alaska)
 - Low levels in villages
 - High levels in towns
- 1958 Navajo Nation
 - Low in remote camps
 - High in boarding schools



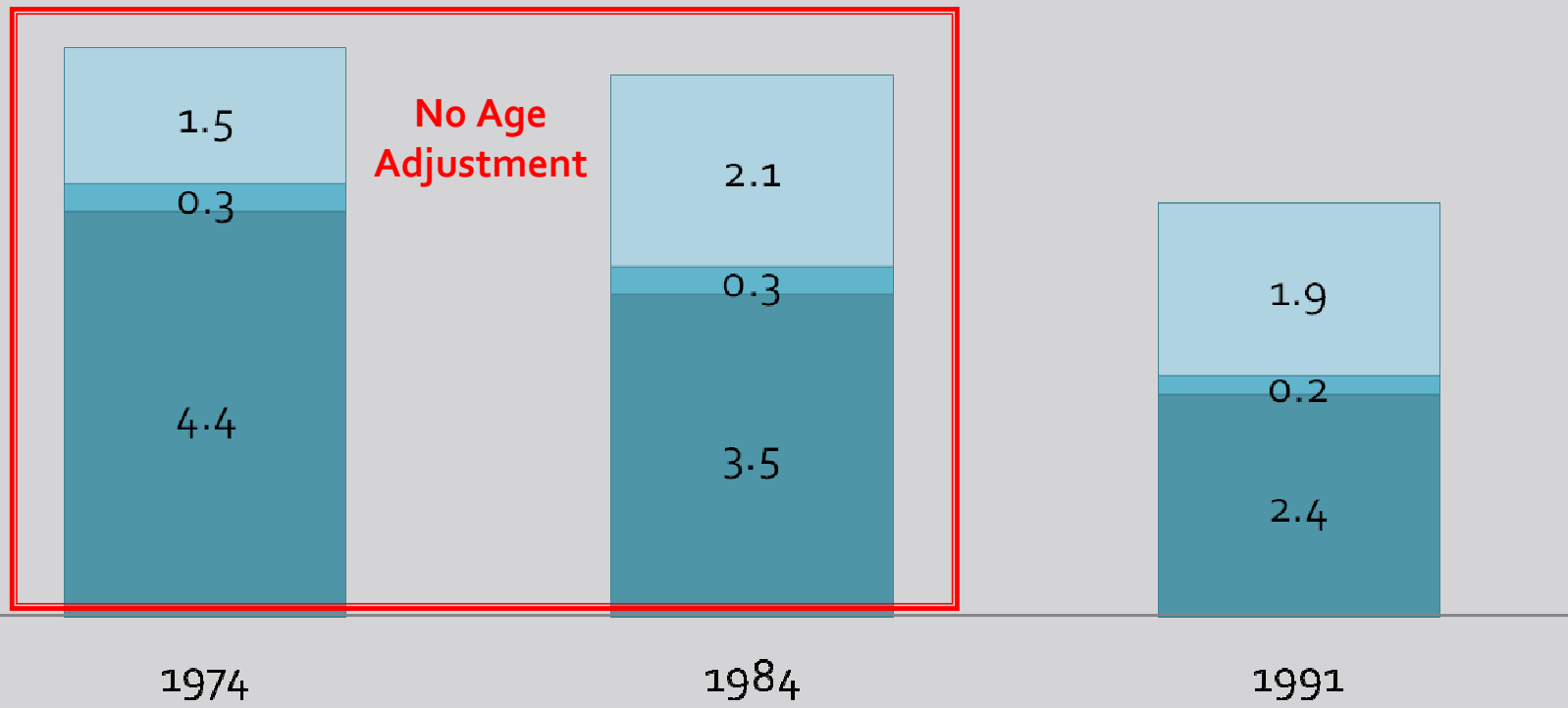
IHS Oral Health Surveillance

- 1957 – Annual monitoring of dental patients
- 1978 – Annual monitoring system terminated
- 1984 – Survey of dental patients #1
- 1991 – Survey of dental patients #2
- 1999 – Survey of dental patients #3

Trends: 1974-1991

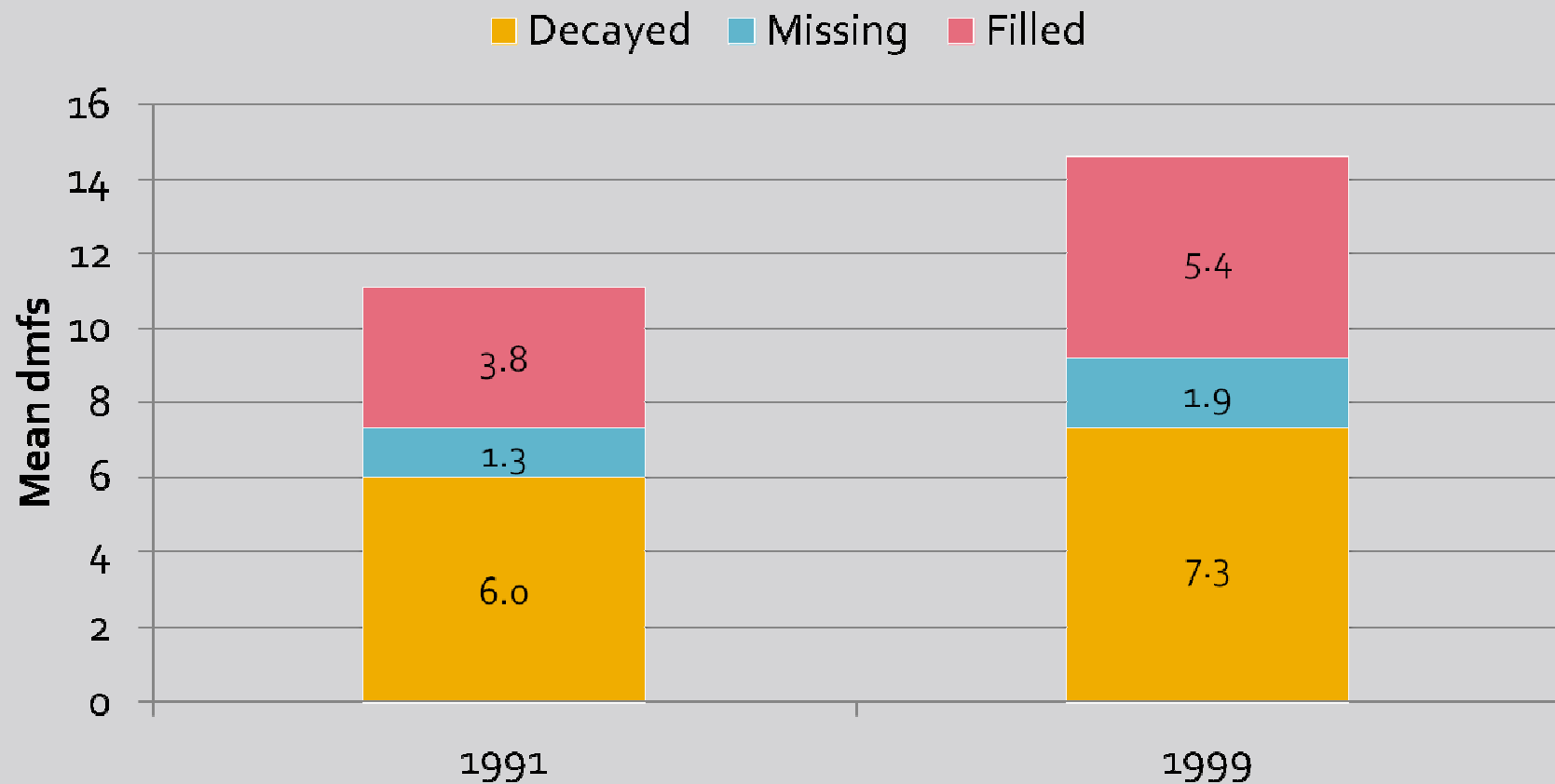
Decayed, Missing & Filled Teeth Among *0-9 Year Olds*

■ Decayed ■ Missing ■ Filled



Trends: 1991-1999

Decayed, Missing & Filled Surfaces Among *3-5 Year Olds*



ALERT: Potential Problem!



Dental patient surveys probably OVERESTIMATE the prevalence and severity of dental caries in preschool children.

2010 Oral Health Survey of AI/AN Preschool Children

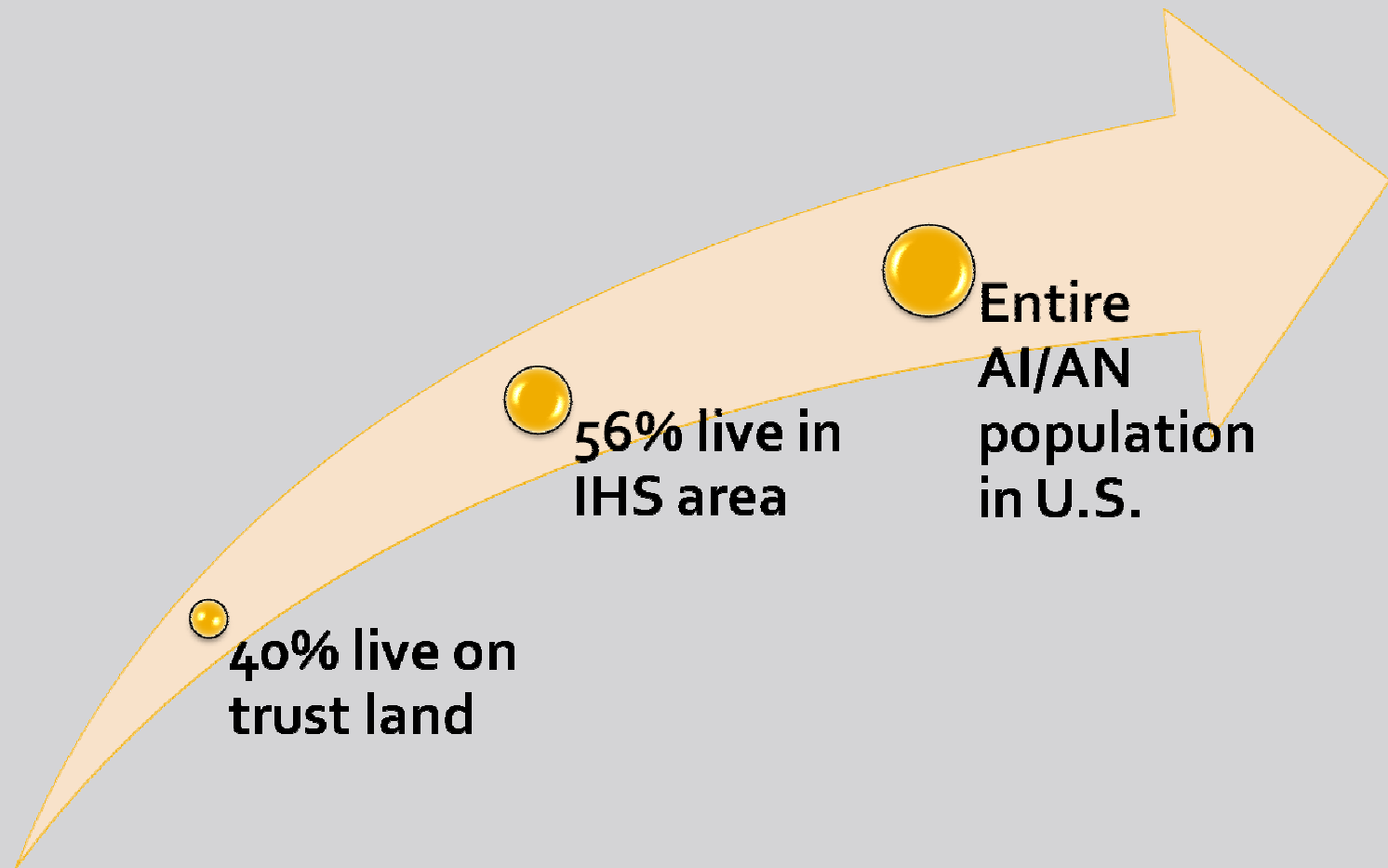


Survey Design

- Target population
 - AI/AN children 1-5 years of age who ...
 - are served by IHS and/or tribal programs or
 - live near IHS and/or tribal facilities
 - community based sample



Where do AI/AN children live?



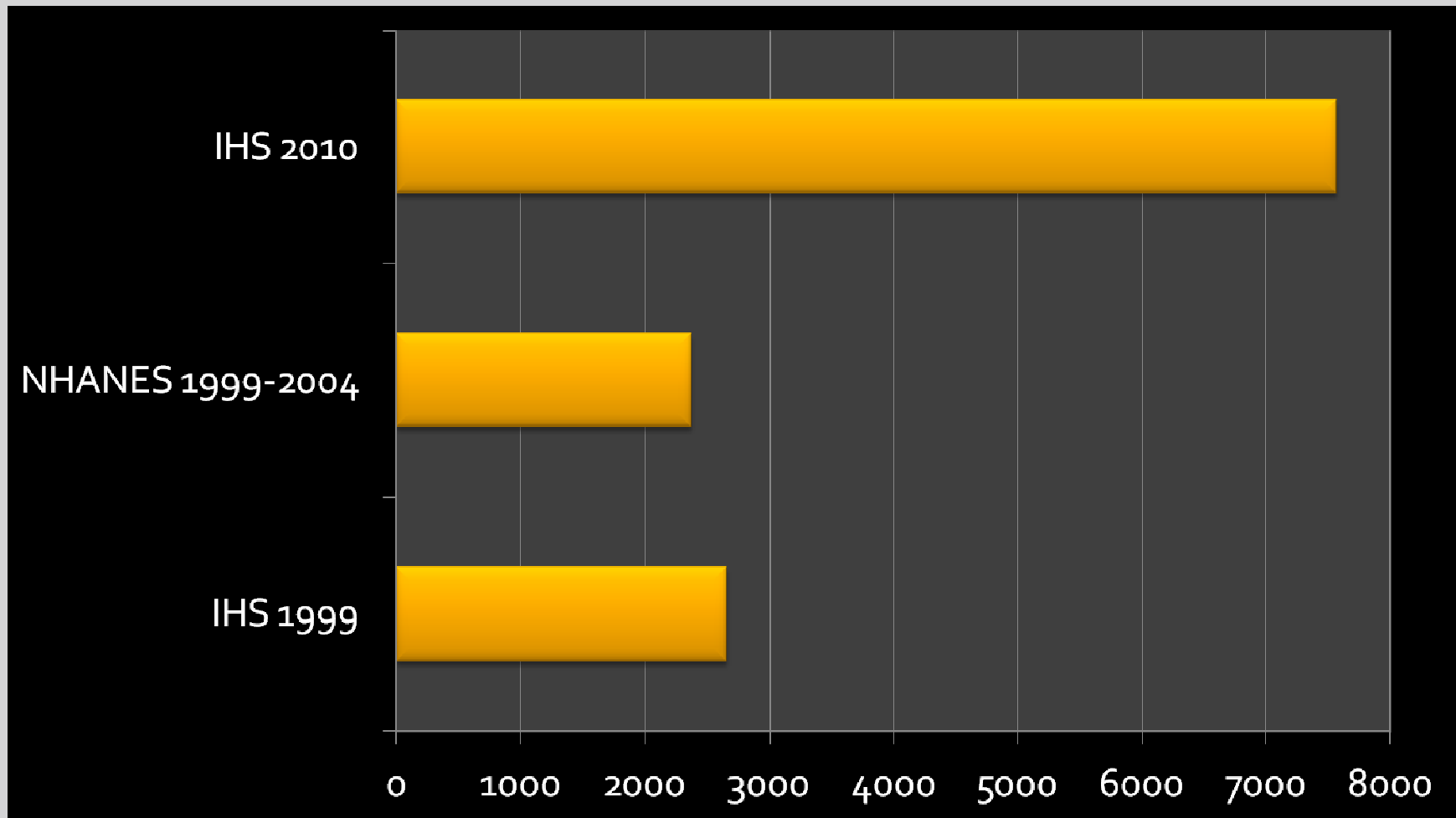
The results are not representative of all AI/AN children in the United States

Survey Design

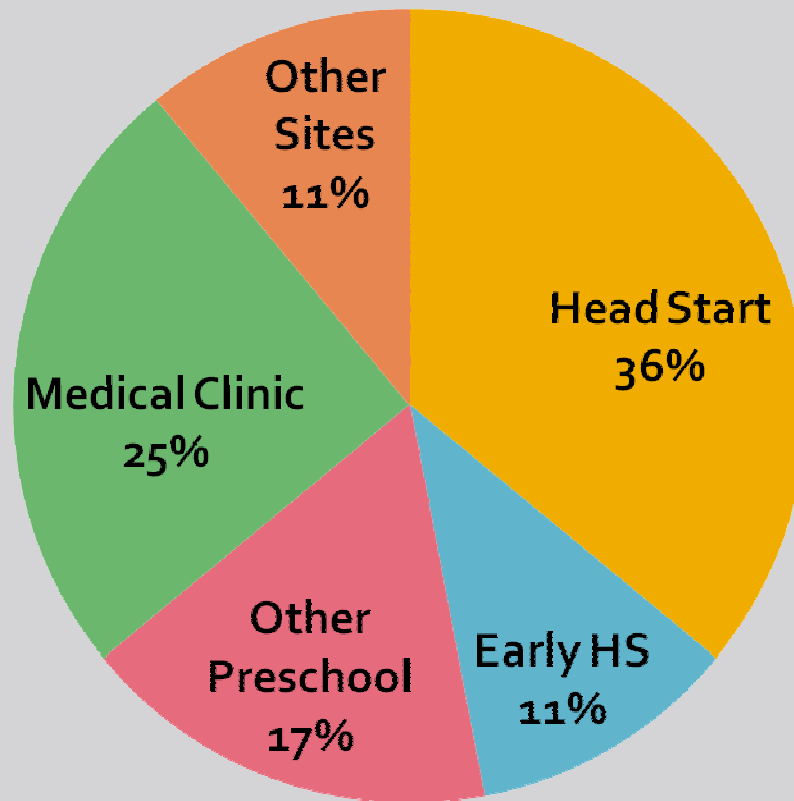
- 63 sites in 20 states
- 178 trained screeners
 - Dentists
 - Dental hygienists
 - Dental therapists



Number of 2-5 Year Olds Screened

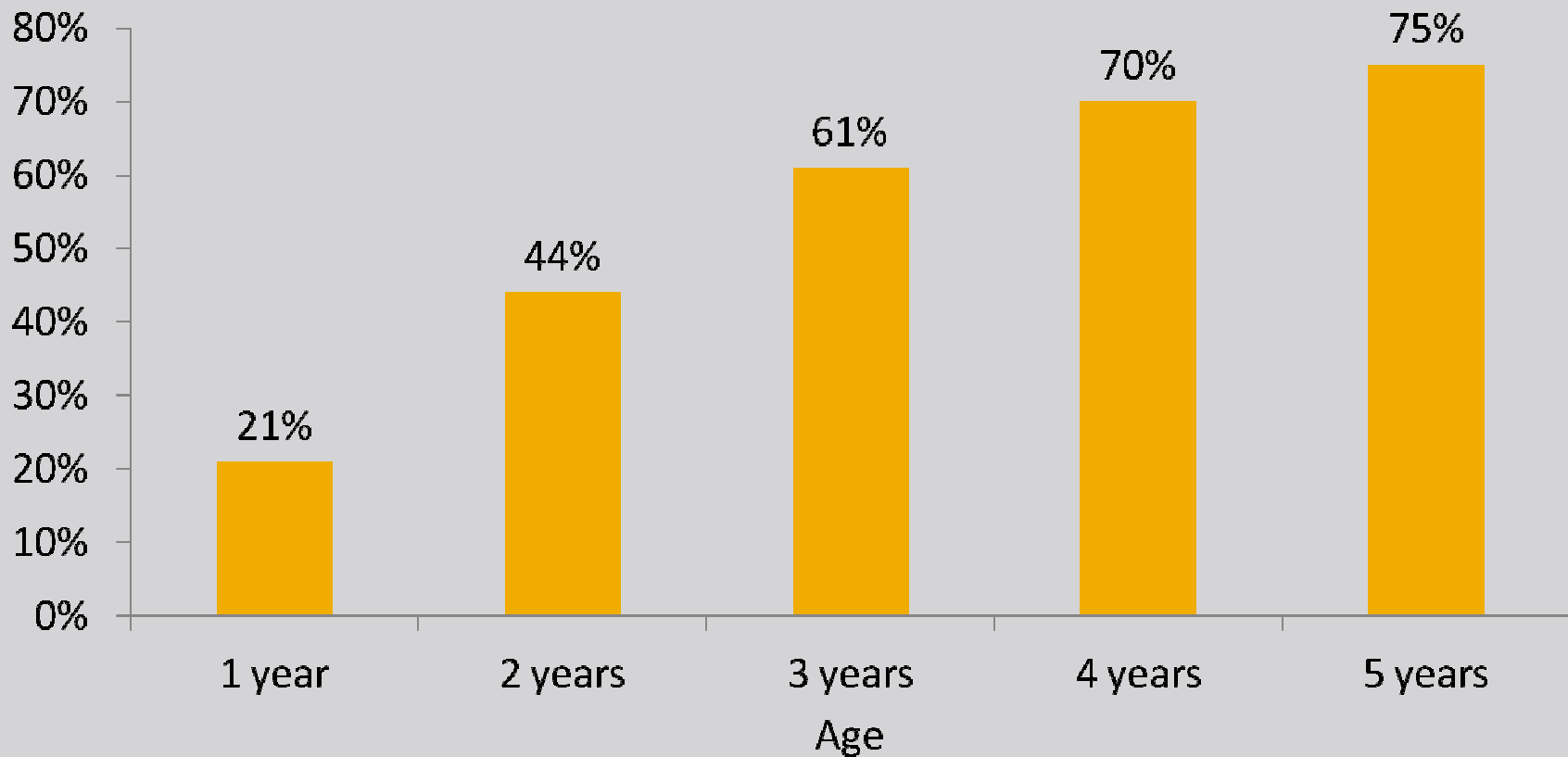


Where Were the Kids Screened?



Caries Experience

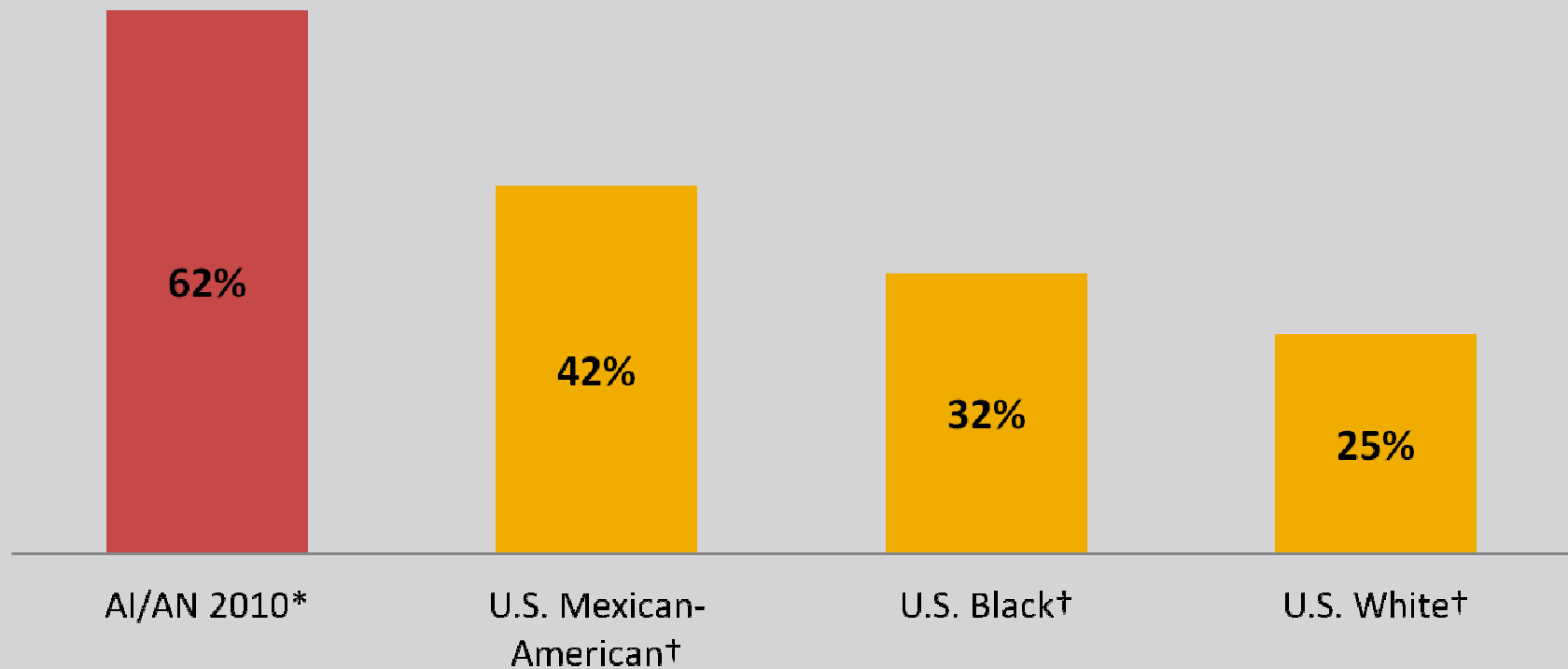
Percent of AI/AN Children with Caries Experience



Source: The 2010 Indian Health Service Oral Health Survey of AI/AN Preschool Children

Oral Health Disparities

Prevalence of Caries Experience Among 2-5 Year Olds



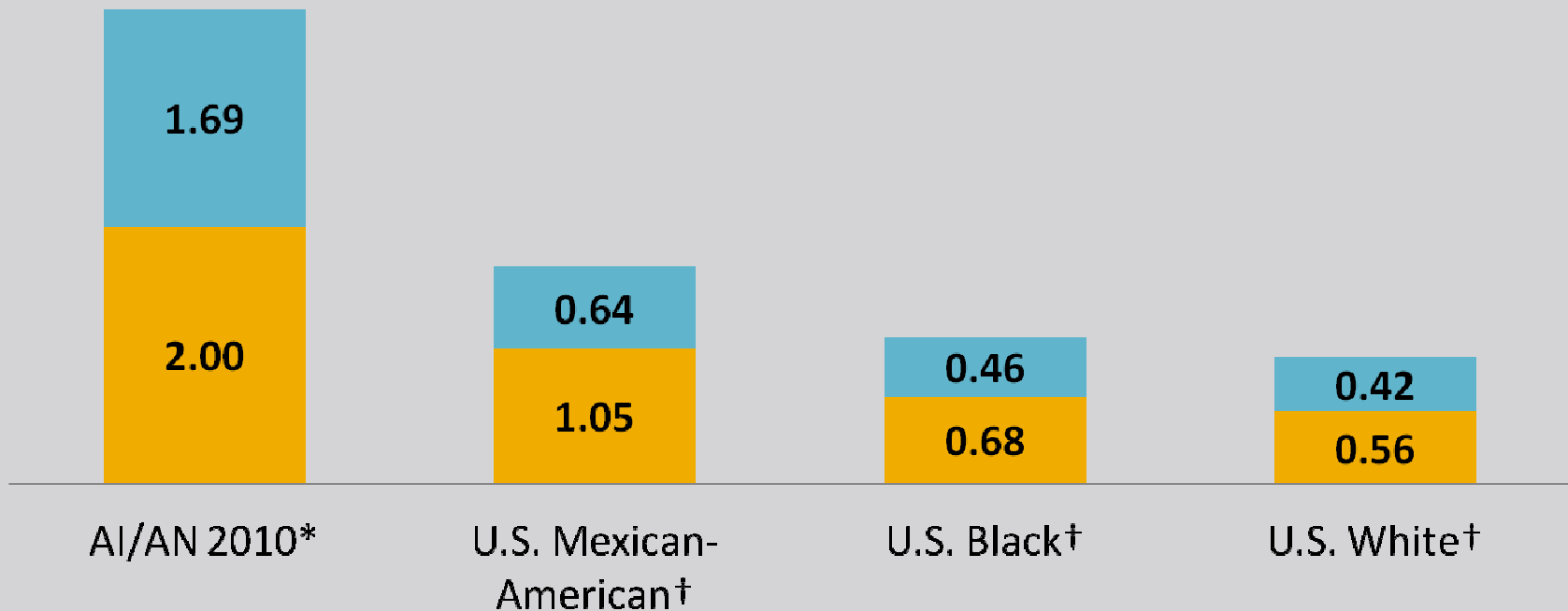
* The 2010 Indian Health Service Oral Health Survey of AI/AN Preschool Children

† National Health and Nutrition Examination Survey, 1999-2002

Oral Health Disparities

Number of Decayed and Filled Teeth Among 2-5 Year Olds

■ Decayed ■ Filled



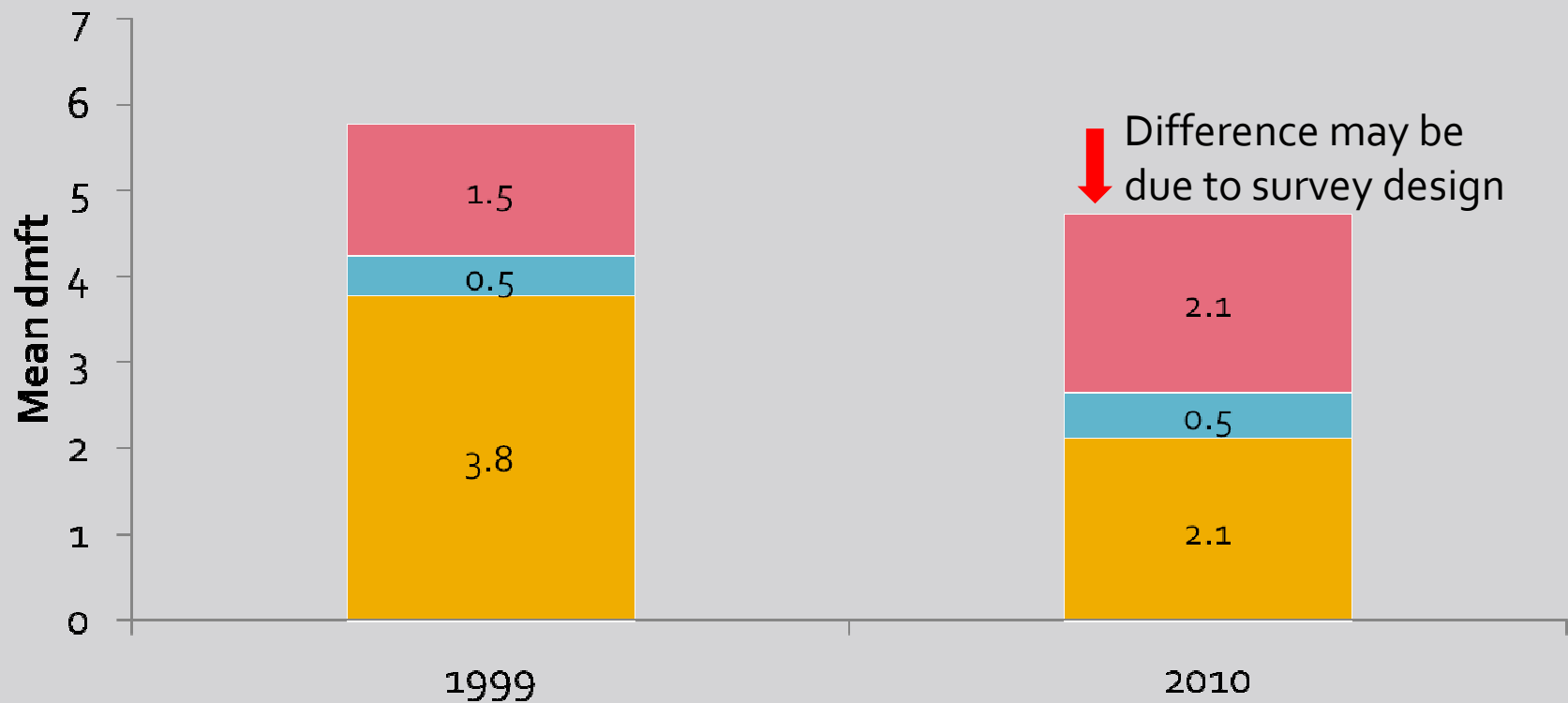
* The 2010 Indian Health Service Oral Health Survey of AI/AN Preschool Children

† National Health and Nutrition Examination Survey, 1999-2002

Has Oral Health Improved?

Decayed, Missing & Filled Teeth Among *3-5 Year Olds*

■ Decayed ■ Missing ■ Filled



Trends: Need Consistent Data

- What oral health data is collected on a regular basis in young children?



PIR: Program Information Report

- Grantees are required to submit PIRs for Head Start and Early Head Start
 - Descriptive and service data
- Limitations to PIR data
 - Reported by staff
 - May not be accurate – is reviewed during audits

No data source is perfect!

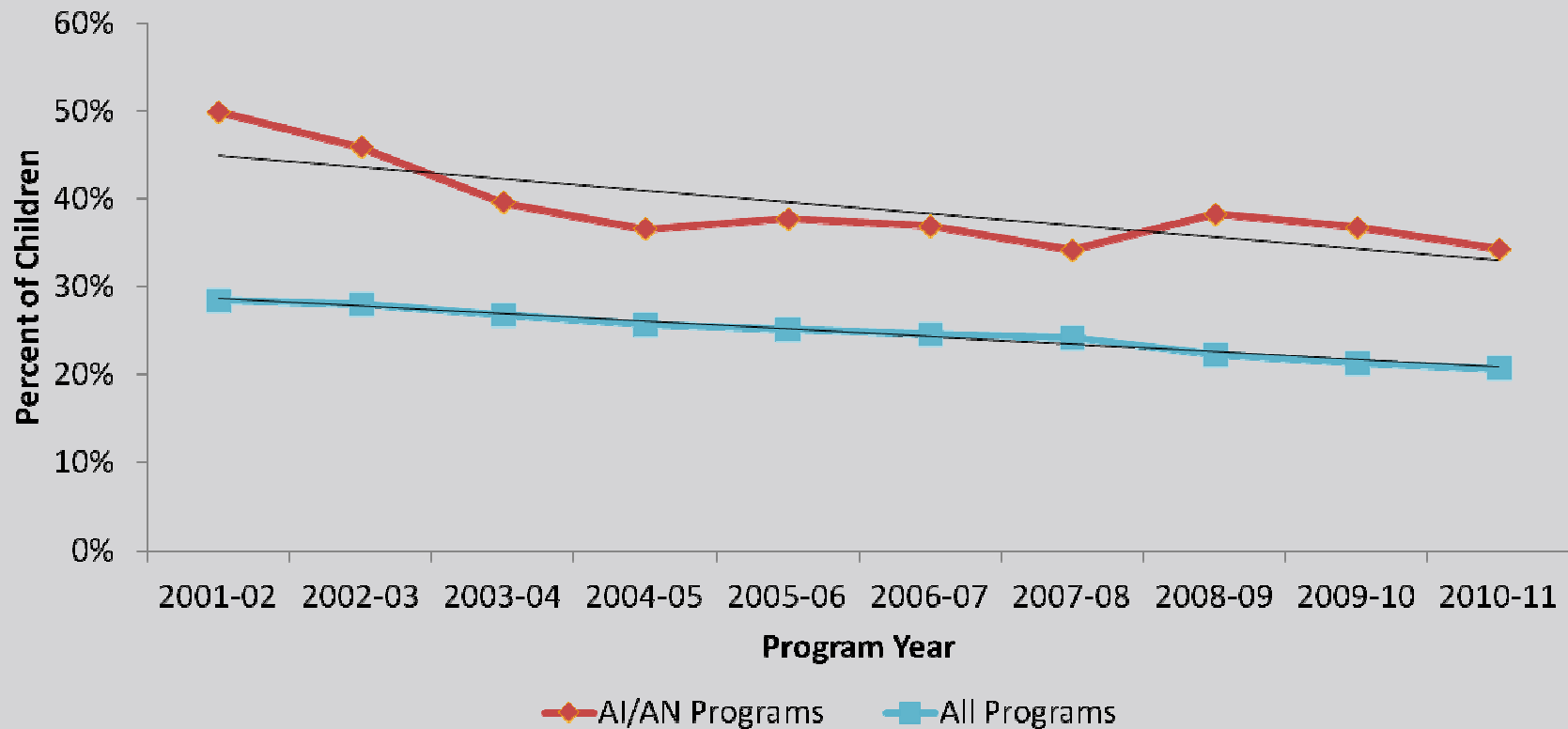
	(1) # of children at enrollment	(2) # of children at end of enrollment year
C.17 Number of children with continuous, accessible dental care provided by a dentist		
		# of children at end of enrollment year
C.18 Number of children who received preventive care since last year's PIR was reported		
C.19 Number of all children, including those enrolled in Medicaid or CHIP, who have completed a professional dental examination since last year's PIR was reported		
a. Of these, the number of children diagnosed as needing dental treatment since last year's PIR was reported		
1. Of these, the number of children who have received or are receiving dental treatment		
b. Specify the primary reason that children who needed dental treatment did not receive it:		Select one primary reason (X)
1. Health insurance doesn't cover dental treatment		
2. No dental care available in local area		
3. Medicaid not accepted by dentist		
4. Dentists in the area do not treat 3 – 5 year old children		
5. Parents did not keep/make appointment		
6. Children left the program before their appointment date		
7. Appointment is scheduled for future date		
8. No transportation		
9. Other (please specify):		

PIR Data: 2001-2010

	Program Year (% Yes)									
	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11
American Indian/Alaska Native Programs (Region XI)										
Received dental exam	76.8%	75.2%	76.3%	74.7%	81.4%	82.3%	82.4%	79.2%	78.8%	82.5%
Needs treatment	50.0%	45.9%	39.6%	36.6%	37.7%	36.9%	34.2%	38.3%	36.8%	34.3%
All Head Start Programs (Regions I-XII)										
Received dental exam	87.9	86.8%	87.0%	88.1%	86.5%	88.5%	88.8%	88.0%	88.0%	88.6%
Needs treatment	28.5%	28.0%	26.8%	25.7%	25.2%	24.6%	24.2%	22.3%	21.3%	20.7%

PIR Data: 2001-2010

Percent of Head Start Children with a Dental Exam that Needed Dental Treatment

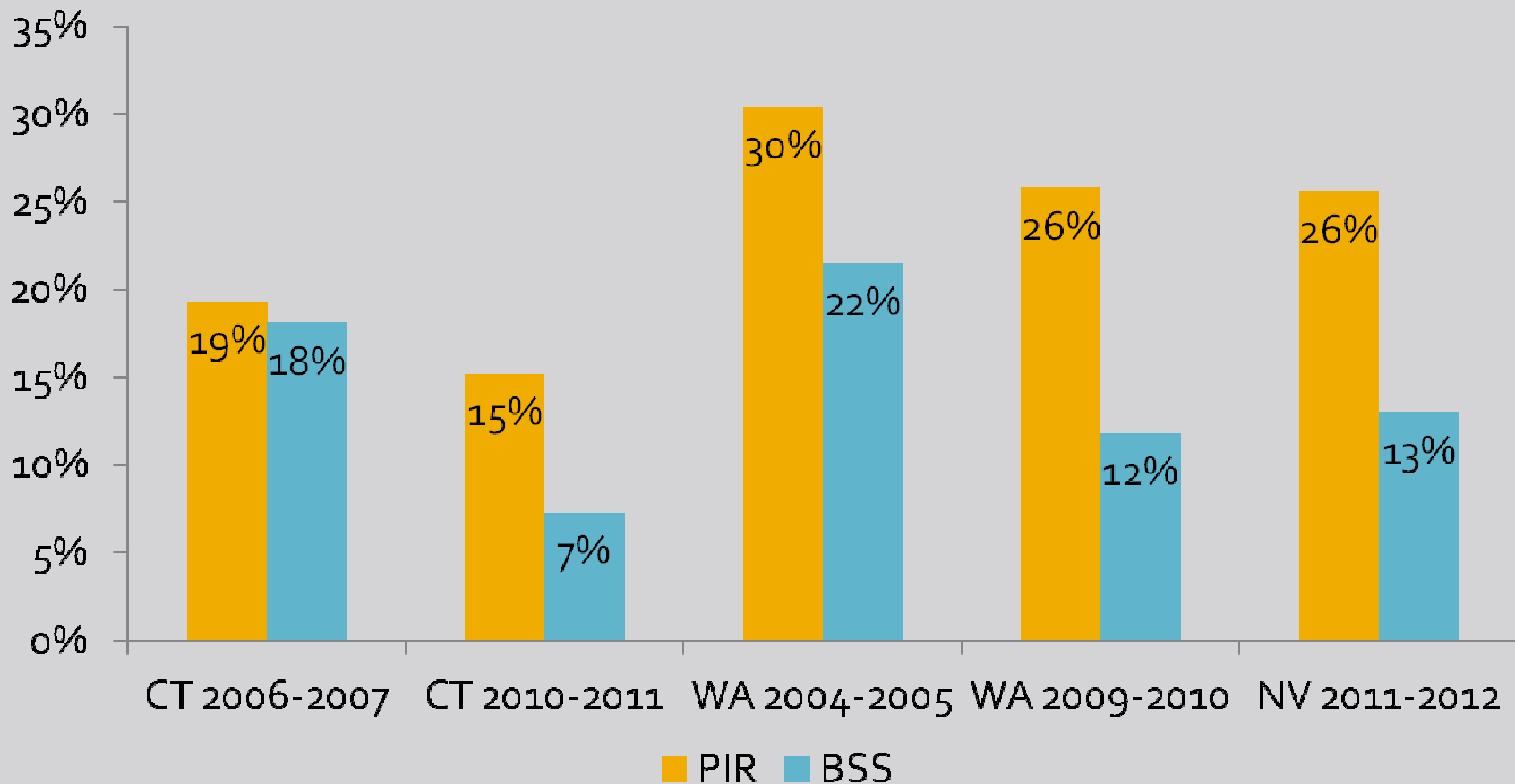


IHS Survey vs. PIR

- Percent needing dental treatment
 - IHS survey = 41%
 - PIR data = 34%
- For AI/AN children PIR data may underestimate treatment needs

PIR vs. BSS – Data from 3 States

Percent of Head Start Children Needing Dental Care



Potential Reasons for Difference

- PIR usually based on in-office exam
 - May detect more caries than BSS
- If BSS was done at end of school year, care may have already been completed
- Inaccurate reporting

Recommendations for PIR

- Standardize forms across all Head Starts
- Collect presence of treated & untreated decay
 - Decay experience can be compared to BSS

HEAD START DENTAL REPORT

To be completed by dental provider and returned to the parent/guardian or Head Start
for every dental visit

Child's Name: _____ Child's DOB: _____

Date of Visit Being Documented: _____

Dental Home

1. Will this dental office or clinic be able to act as this child's dental home? No Yes

Definition: A dental home is a source of oral health care that is comprehensive and continuously accessible that includes treatment, referral and coordination with dental specialists when appropriate.

Child's Current Oral Health Status

2. Does this child have any teeth that have already been treated for decay including fillings, crowns or extractions because of decay? No Yes

3. Does this child have any teeth that have untreated decay? No Yes

Purpose of Today's Dental Visit

4. Examination No Yes

5. Preventive services (cleaning, fluoride, sealants) No Yes

6. Dental treatment (fillings or extractions) No Yes

Future Care Needed

7. Does this child need additional treatment appointments? No Yes

IF YES: Approximate number of appointments needed: _____

Date and time of next appt: _____

Additional Problems/Concerns for the Attention of Head Start Staff

Provider's Signature and Contact Information

Print Provider's Name

Provider's Phone

Provider's Signature

Date

Questions or Comments?

