

Smile Survey 2015-2016

The Oral Health of Washington's Head Start and ECEAP Children

During the 2014–2015 and 2015–2016 school years, the Washington State Department of Health's Oral Health Program conducted its fifth assessment of the oral health status and treatment needs of children throughout the state. For the 2015–2016 Smile Survey, more than 13,000 kindergarten and second- and third-grade children in 76 public elementary public schools and more than 1,400 preschool children from 47 Head Start and Early Childhood Education and Assistance Program (ECEAP) programs were screened.¹ The Smile Survey was previously conducted in 2010, 2005, 2000, and 1994, and the results have been used to advance policies and programs that help children achieve better health. This fact sheet discusses the oral health findings for children ages 3 to 5 in the Head Start and ECEAP programs.

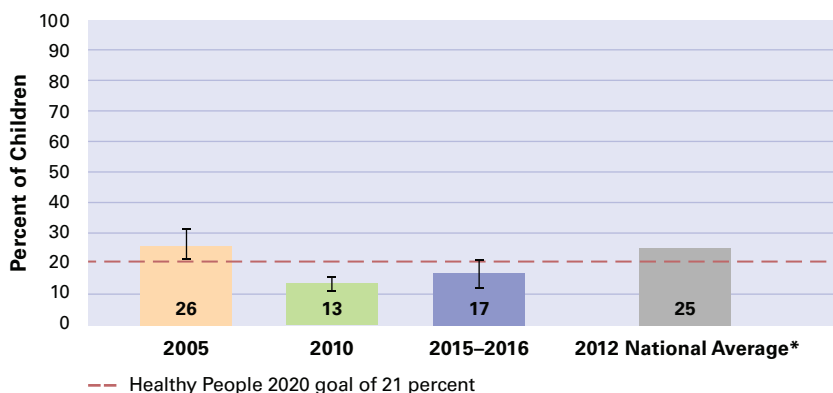


HIGHLIGHTS OF SURVEY RESULTS

Smile Survey findings showed that Washington's oral health policies and programs held the gains reached between 2005 and 2010 in ensuring that Head Start/ECEAP preschool children receive needed dental treatment. However, tooth decay is still a major health concern for this young age group and disparities remain for tooth decay and untreated decay.

Figure 1: Untreated Decay

Head Start/ECEAP Preschoolers
(2005, 2010, and 2015/2016 WA Smile Survey)



*National average is specific to low-income 3- to 5-year-olds while Healthy People 2020 goal is for all 3- to 5-year-olds regardless of family income level.

Untreated Decay

The survey found that the rate of children with untreated decay (17 percent) continued to be much lower than the 2005 rate of 26 percent, but had not significantly changed from 2010 (13 percent). Washington proved to be doing far better than both the national average (25 percent)³ and the Healthy People Objective (21 percent) for the rate of untreated decay in children ages 3 to 5. (See Figure 1. Note that the national average is specific to low-income 3- to 5-year-olds, while the Healthy People 2020 goal is for all 3- to 5-year-olds, regardless of family income level).

Decay Experience

Findings revealed that more than four out of every 10 preschool children in Head Start and ECEAP programs had experienced tooth decay (also called "caries experience"), and of those, nearly half were affected by rampant tooth decay.² Washington continued to do better than the national average of 49

percent, but progress is needed to meet the Healthy People 2020 target of three in 10 (30 percent) or fewer 3- to 5-year-olds with any decay experience (See Figure 2).

Oral Health Disparities

Significant disparities were evident for children of some racial and ethnic groups compared with white children in Washington’s Head Start and ECEAP preschools. For example, children of Hispanic, American Indian/Alaska Native, or Asian descent had much higher rates of decay experience than white children.⁴ Also, American Indian/Alaska Native preschool children had more than double the rates of untreated tooth decay. However, children who are black or multiracial had statistically similar rates of decay experience as white children (Figure 3).

Findings from Partners:

Oral Health of American Indian and Alaska Native Children Served by Region XI Tribal Head Start Programs

During the 2014–2015 program year, Indian Health Service and Tribal health clinics screened 477 preschool children attending Region XI Head Start programs that serve American Indian and Alaska Native (AI/AN) children in Washington State. Oral health findings between the two programs identified a similar rate of decay experience and untreated tooth decay between AI/AN children attending Tribal Region XI and non-Tribal Washington State Region X Head Start/ECEAP programs⁵ (Figure 4).

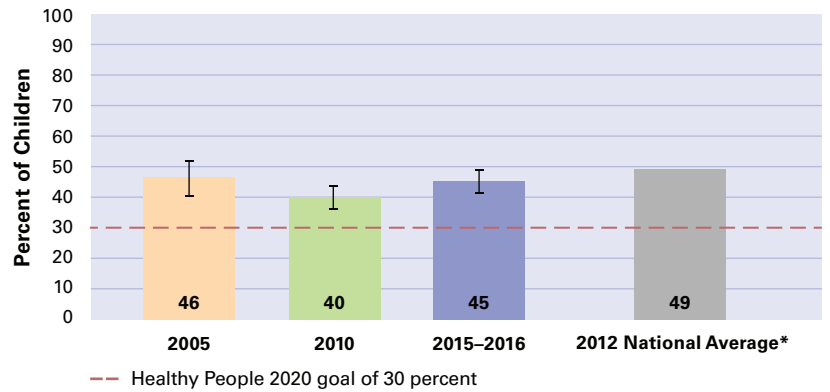
Figure 4: Oral Health Indicators for American Indian/Alaska Native Children

Head Start Children Attending Regions X and XI Preschool Programs in Washington

Decay Experience	Untreated Decay	Rampant Decay (Severe)	Needing Treatment	Urgent Need
Indian Health Service Region XI Tribal Head Start Oral Health Survey 2014				
64%	36%	No data	34%	10%
Non-Hispanic AI/AN Children in Region X Head Start/ECEAP programs DOH 2015–2016 Smile Survey (n= 39)				
66% (58-73)	38%	34% (28-41)	*	*

* Data suppressed due to high rate of standard error

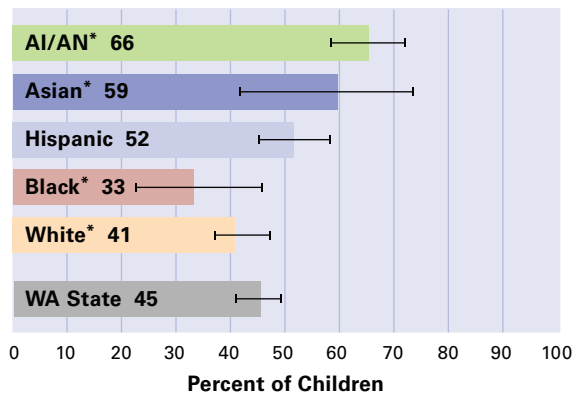
Figure 2: Caries Experience, All Teeth
Head Start/ECEAP Preschoolers
(2005, 2010, and 2015/2016 WA Smile Survey)



*National average is specific to low-income 3- to 5-year-olds; while Healthy People 2020 goal is for all 3- to 5-year-olds regardless of family income level.

Figure 3: Caries Experience

Head Start/ECEAP Preschoolers by Race/Ethnicity
(2015/2016 WA Smile Survey)



(AI/AN = American Indian/Alaska Native)

* Non-Hispanic

¹For elementary school information, see *Smile Survey 2015-2016: The Oral Health of Washington’s Elementary Children*.

²For this survey, rampant decay was noted with the presence of seven or more teeth that had ever had decay or had been extracted due to decay.

³NCHS data brief, no 104. (Hyattsville, MD: National Center for Health Statistics, 2012), available online at <https://www.cdc.gov/nchs/data/databriefs/db104.pdf>.

⁴Survey participants who were children of Pacific Islander descent were too few (n=7) to report their results.

⁵The small number of AI/AN children in DOH’s Smile Survey sample resulted in high rates of standard error (high RSE) for urgent and non-urgent treatment needs, so the data are not shown.