

South Carolina is Improving Access to Child Oral Healthcare

Overview & Summary

Every five years, the South Carolina Department of Health and Environmental Control (DHEC) conducts a statewide dental screening to obtain a picture of the dental health of Kindergarten and 3rd grade children in South Carolina. The Statewide Oral Health Screening and Assessment (SOHSA) helps raise awareness about the connection between a healthy mouth and a healthy body, and also helps increase knowledge about preventive practices and access to dental care. The findings of the Oral Health Statewide Screening survey are utilized to evaluate the state's preventive oral health programs, determine the need for additional dental programs and describe the oral health status of South Carolina's children. Data collected in previous assessments has been utilized both at the state and community level to improve the oral health of children and to establish a baseline to determine if the efforts to improve oral health are working, and what more could be done.

Purpose: The state Oral Health Needs Assessment (OHNA) collects data that provides the state with valuable information on the status of children's oral health.

Goal: In addition to collecting data, the OHNA gives DHEC's DOH an opportunity to reach students, parents and educators with some valuable oral health information in effort to raise awareness and provide a prevention message.

Target Population: The statewide dental screening targeted children in public schools in K5 and 3rd grade. A random, stratified sample was chosen with the help of the Centers for Disease Control (CDC) to better represent the population targeted for the screenings. The sample is comprised of 76 schools in 37 school districts within 29 counties throughout the state. Trained data collectors, including the DHEC Division of Oral Health staff, school nurses, volunteer dentists and hygienists, and DHEC Dental Program partners screened 6,515 children in these schools during the 2012-2013 school year.

Outcome:

	<i>OHNA 2002</i>	<i>OHNA 2008</i>	<i>OHNA 2012</i>
<i>Sealants</i>	<i>20.3%</i>	<i>24.2%</i>	<i>31.2%</i>
<i>*Caries Experience</i>	<i>51.6%</i>	<i>47.1%</i>	<i>40.5%</i>
<i>**Untreated decay (caries)</i>	<i>32.2%</i>	<i>22%</i>	<i>12.4%</i>
<i>***Tx Urgency 1</i>	<i>20.7%</i>	<i>15.5%</i>	<i>10.3%</i>
<i>****Tx Urgency 2</i>	<i>11.4%</i>	<i>6%</i>	<i>1.4%</i>

*Caries Experience- the history if a child currently has or has had at least one tooth with a cavity -in other words if a child had at least one tooth that is filled (treated) or with a cavity (untreated)

**Untreated Decay- if a child has at least one tooth with active decay (cavity)

***Tx Urgency 1- when child has dental disease that needs treatment (within several weeks)

****Tx Urgency 2- when child has dental disease that needs immediate/urgent treatment (within 24-48 hours)

Conclusion:

The 2012 OHNA results reflect the efforts of DHEC, the SCOHACC, and their partners to increase access to child oral healthcare. These efforts include reaching the population through preventive measures, such as community water fluoridation and sealant programs. Volunteer-led clinics, oral health prevention messages via education, trainings, and outreach have taken place through established partnerships with the SC Dental Association, Head Start, childcare centers, EdVenture Children's Museum and the Columbia Marionette Theater.

Through these partnerships, DHEC and the SCOHACC have provided access to families and educated them with information to help them improve their oral health.

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