## I S S U E B R I E F

# Improving the Oral Health of Colorado's Children



#### March 2012

Prepared for The Colorado Trust, Caring for Colorado Foundation and the Delta Dental of Colorado Foundation by Diane Brunson, RDH, MPH, Director of Public Health, University of Colorado School of Dental Medicine



## Executive Summary for Policymakers

Children's oral health is one of the top priorities for the nation—and Colorado. Colorado's governor has designated children's oral health as one of the state's 10 winnable battles over the next five years.

Oral disease may unnecessarily impact a child's performance in school, speech development, nutrition, self-esteem and sleep. While the contributing factors are complex, oral health disease is entirely preventable through three major areas of focus:

- Public health strategies. Proven preventive strategies—such as community water fluoridation and school-based sealant programs are underutilized.
- Access to oral health care. Too few dental providers accept publicly funded programs, and not enough are trained to treat very young children.
- Educate children and families. Families may not realize how important early dental care is or that publicly funded dental coverage exists.

Oral disease may unnecessarily impact a child's performance in school, speech development, nutrition, self-esteem and sleep.

#### THE DATA

Colorado children living in poverty face the greatest oral health challenges despite increased awareness about this issue, increased preventive measures such as fluorides and sealants, and efforts to improve access to oral health care.

Nearly 60 percent of low-income kindergartners in Colorado have suffered from tooth decay. For more than one in four of those children, tooth decay goes untreated.

Most of those kindergartners have dental coverage through publicly funded programs—Medicaid and Child Health Plan Plus (CHP+). But fewer than half use the coverage. Only one in four visited the dentist by age 1 as is recommended.

### COLORADO ACCOMPLISHMENTS

Colorado has made commendable strides in addressing children's oral health needs. In 1997, legislation authorized community water fluoridation efforts and school-based sealant programs, but did not allow state appropriations.

Local foundations have increased investments in prevention, access to care and workforce development. Public-private collaborations have expanded resources to address needs. Despite limited infrastructure, the Colorado Department of Public Health and Environment has collected and analyzed oral disease data and assessed workforce capacity.

## SOLVING THE PROBLEM: STRATEGIES FOR SUCCESS

The Colorado Oral Health Plan has been updated through 2017 to include metrics and strategies to document improvement in Coloradans' oral health, including children.

Thanks to the reorganization of the state's public health infrastructure, Colorado will be in a better position to raise awareness of the importance of oral health throughout the state.

Still, much more can be done to ensure that Colorado's children have the best oral health possible. Specific strategies for policymakers include:

- Prioritize public health strategies across all levels of state and local government. Provide education and support for community water fluoridation and school-based sealant programs.
- Encourage health care providers for children and adults to integrate oral health into their practice. Closely align oral health with early childhood programs, including Head Start; Colorado WIC (Women, Infants, and Children) programs; early childhood education and child care; home visitation; and prenatal programs.
- Expand the capacity of the dental and health care workforce as oral health provisions in the Affordable Care Act roll out in 2014. Work with the dental community to identify barriers to participating in publicly funded health programs.
  Develop strategies to increase participation. Allow all dental providers to practice to the full scope of



their education and licensure. Support primary care providers' training and provision of oral health care services.

• Build oral health infrastructure at state and local health department levels. Support dental public health infrastructure to promote dental visits by age 1 and evidenced-based public health strategies; ensure coordination and collaboration among health providers; and monitor the oral health status of Colorado's population. Ensure all children have access to oral health prevention and treatment by supporting safety net clinics, school-based health clinics and insurance coverage.

For a complete copy of this issue brief and research citations, visit www.coloradotrust.org.





