

Establishing a Dental Home:

What Determines Age at a Child's First Dental Visit?

TROY C. HULL

Purpose: Dental caries is the most common chronic disease of childhood and is on the rise in children under 6 years of age. This disease results in substantial financial, physical, and psychological costs. Professional recommendations exist to address the rising prevalence, one of which is to establish a dental home by 12 months of age. Despite a wealth of empirical evidence behind this recommendation, it is estimated that less than 10% of children in the United States visit the dentist by age 1. The purpose of this study is to investigate factors that may be related to the low level of recommendation compliance.

Methods: Retrospective cohort study of child caregivers using a self-administered survey delivered by mail. Respondents were asked for child and caregiver demographic information, knowledge and opinion of current professional guidelines, information regarding the child's first dental visit, dental care utilization history, and psychological aspects of dental beliefs and behaviors using existing validated measures.

Results: The cohort included 342 subjects. Fourteen percent reported establishing care for their child by 12 months of age. The average age at first visit was 27 months. Fourteen percent reported knowing the current professional recommendation, and 9% thought establishing care by 12 months was the most appropriate. Thirty-seven percent received a recommendation from their child's medical provider, and 17% from a dental provider. Several potentially high risk indicators were related to early establishment of dental care by 12 months of age, including public insurance coverage, low caregiver educational attainment, marital status, and infrequent caregiver dental care utilization. Knowing the current recommendation resulted in higher compliance. There was no association between psychological measures and establishment of care by 12 months of age.

Conclusions: Establishment of care according to professional recommendations remains low even in a potentially low risk cohort. Potentially high risk characteristics were related to better compliance with current recommendations. Caregiver's dental beliefs were not related to increased utilization of dental care for their child. Medical providers appear to be the most likely source of recommendation to establish dental care for young children.

Thesis Committee:

Colleen Huebner, PhD, MPH (Chair)

Penelope Leggott, DDS, MS

Rebecca L. Slayton, DDS, PhD

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