Barriers to Obtaining Needed Dental Treatment for Head Start Children in WA

Leena L. Bitar, DMD
University of Washington
June 6, 2007
Introduction

- Most common chronic health problem in children
- 15% increase in dental caries among 2-5 year olds
Introduction

- Low-income children compared to high-income children have:
  - 5x the prevalence of untreated dental caries
  - Half as frequent dental visits
Introduction

Dental Caries in Washington

- Washington 3-5-year-olds (1994): 38.3%
- Washington 3-5-year-olds (2000): 41.5%
- Washington 3-5-year-olds (2005): 45.1%
Head Start

- Comprehensive child development program
- Oral health is part of health component
- Dental exam within 90 days
- Staff assists families in accessing dental care
- Dental services usually covered by Medicaid
- High rates of dental caries
Common Barriers

- Cost of care
- Lack of providers willing to treat children on Medicaid
- Arranging appointments
- Transportation
Available Services

- Head Start
- Medicaid Insurance
- Access to Baby and Child Dentistry (ABCD)
  - Improves access to care
  - Trains general dentists
  - Offers enhanced reimbursement for dental procedures
Study setting
Inclusion Criteria

- English or Spanish speaking caregivers whose children were:
  - Enrolled in Head Start centers in Pacific or Clark counties during the 2005-6 year
  - Insured by Medicaid while in Head Start
  - Diagnosed as needing dental treatment
Methods

• Head Start staff identified and recruited caregivers
• Guided telephone interviews
• Interview constructs:
  – Logistical Barriers
  – System Barriers
  – Personal Barriers
  – Child Characteristics
Constructs

- **Logistical Barriers**
  - Finding a dentist, transportation

- **System Barriers**
  - Qualities of Child’s Dental Provider
    - e.g. My child’s dentist listens carefully to me.

- **Personal Barriers**
  - Parental self-efficacy
    - e.g. I don’t have time to help brush his/her teeth everyday.
  - Parental dental anxiety
    - e.g. If you were about to have a tooth drilled, how would you feel?
Study participants

• 154 Head Start enrollees needed dental treatment (29%)
• 147 were eligible
• 110 were contacted
• 32 agreed to participate
• 30 interviews were analyzed
Analysis Plan

• Groups assigned based on Head Start data:
  – Child received no treatment (n=7)
  – Child received some treatment (n=16)
  – Child completed treatment (n=7)

• Descriptive analysis

• Open-ended questions analyzed for themes
Logistical Barriers

- Few logistical barriers reported
- Transportation: not reported as a barrier
- #1 barrier: Finding a dentist
## Systems Barriers: Dental

<table>
<thead>
<tr>
<th>Qualities of Dental Providers (Always/Usually)</th>
<th>No treatment (N=6)</th>
<th>Some treatment (n=16)</th>
<th>Completed treatment (n=7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Makes me feel welcome</td>
<td>71.4%</td>
<td>87.5%</td>
<td>100%</td>
</tr>
<tr>
<td>Shows respect for what I have to say</td>
<td>57.1%</td>
<td>75.1%</td>
<td>100%</td>
</tr>
<tr>
<td>Explains things clearly</td>
<td>57.1%</td>
<td>68.8%</td>
<td>100%</td>
</tr>
<tr>
<td>Listens carefully</td>
<td>57.1%</td>
<td>62.5%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Personal Barriers: Dental Anxiety

- No treatment: 12.86
- Some treatment: 13.00
- Completed treatment: 8.71
Personal Barriers: Self-efficacy

No treatment: 3.8
Some treatment: 4.2
Completed treatment: 4.0
Child Characteristics

• Child behavior or fear

“Her behavior puts me off on wanting to do it, [take my child to the dentist] so I postpone and procrastinate.”
Limitations

- Contacting caregivers
- Time lapse
- Number of participants
- ABCD program relatively new
Conclusion

• Some children do not complete needed dental treatment because of:
  – Previous poor experiences with dental providers
  – Personal barriers including low parental toothbrushing self-efficacy and high dental anxiety
  – Child behavior or fear
Implications for Head Start

• Expand oral health education to parents
  – Dental anxiety
  – Parental self-efficacy
• Familiarize children with dental clinic setting and dental providers
  – Field trips
  – Read books about the dentist
  – Play time
Implications for ABCD and Dentists

• ABCD program
  – ↑ Advertising

• Dentists
  – Accept Medicaid patients
  – Improve communication skills
    • Make caregivers feel welcome
    • Show respect
    • Explain things clearly
    • Listen carefully
Summary

- Addressing systems and personal barriers may help:
  - Head Start meet its oral health goals
  - Children receive the dental care they need
Acknowledgments

- Thesis committee:
  - Colleen E. Huebner PhD, MPH
  - Rebecca L. Slayton DDS, PhD
  - Penelope J. Leggott DDS, MS
- Head Start Trainee Fellowship
- U.S. Department of Health and Human Services, Health Resources and Services Administration’s Maternal and Child Health Bureau (Title V, Social Security Act), grant #T76MC00011-21-00
Thank you!
References


