Report says 1 in 5 children lacks access to care

By Fred Michmershuizen, Online Editor

A recent report from the Pew Center on the States paints a sad picture about the oral health of many children in the United States. The report, “The Cost of Delay: State Dental Policies Fail One in Five Children,” says that millions of disadvantaged children do not have access to adequate dental care.

“Millions of disadvantaged children suffer from sub-par dental health and access to care,” the report states. “This is a national epidemic with sobering consequences that can affect kids throughout their childhoods and well into their adult lives.

“A ‘simple cavity’ can snowball into a lifetime of challenges,” the report states. “Children with severe dental problems are more likely to grow up to be adults with severe dental problems, impairing their ability to work productively and maintain gainful employment.”

Leaders of two of the nation’s leading dental associations weighed in with their opinions on the report.

“We welcome the Pew organization to our longstanding fight to improve the lives of American children by helping more of them enjoy the good oral health that too many of them now lack,” said Dr. Ron Tankersley, president of the American Dental Association (ADA).

“Pew’s presenting its informa-
tion in the form of a report card makes it easy for anyone to understand that too many kids in too many states are suffering. And we face huge challenges in changing that.”

“We don’t agree with everything in the report,” Tankersley continued. “But certainly, it highlights some of the major policy areas that the ADA and state dental societies have advocated for years — things like increased Medicaid funding, school sealant programs and community water fluoridation.

“It also highlights the urgent need for reliable routine data collection so that policies are well informed and kids are not left suffering,” Halpern said.

“The Pew Center report is not all grim. It states that a number of states have access to oral health care services is clearly an issue that deserves the devotion and dedication necessary to reach a solution so no child suffers needlessly from dental pain,” Halpern said.

“The AGD is opposed to any promotion or support of an independent midlevel dental provider,’ said Dr. David F. Halpern, president of the AGD.

Dr. David F. Halpern, president of the Academy of General Dentistry (AGD), offered similar sentiments.

"Although a handful of states are leading the way in breaking down these barriers, every state must do more to put proven policies in place to ensure dental health and access to care for America’s children.

"The report does omit some policy areas that we believe are equally important to improving children’s access to care," Tankersley said. “For instance, some states have innovative programs — like student loan forgiveness and tax incentives — to help dentists establish practices in underserved areas or practice in community health centers.

"And when it comes to fixing Medicaid, money is a huge issue, but it isn’t the only issue. Patients and parents need oral-health education to help them take care of themselves and their families to prevent disease.

"Many of them need additional services, like transportation, in order to be able to get to dental appointments.

"If Medicaid did a better job of these things, treatment costs would decrease because we would be preventing more disease and treating less.”

It is also the AGD position that improvements in Medicaid reimbursements to meet the costs of service to the public, and in expansions in water fluoridation and sealant programs, are needed.

“The AGD is opposed to independent dental providers who have not graduated from dental schools performing irreversible procedures for the very reason that a provider who has not met the minimum educational requirements in dentistry might be a danger to the patient if he or she is providing the primary care.

According to the AGD, accessibility without quality echoes the "something is better than nothing" approach to care, which does not ultimately serve the public need.

Both the ADA and the AGD have worked with state and federal agencies, dental schools and other organizations to promote public funding, volunteerism and loan forgiveness for dental students working in underserved areas.

"The ADA and state dental societies have a long history as the nation’s leading advocates for oral health," Tankersley continued. "ADA members donated some $2.16 billion in free care to disadvantaged children and adults, both as individuals and through such programs as Give Kids A Smile and Missions of Mercy, in 2007 alone.

"But we’re the first to admit that we can’t do this alone, and charity is no substitute for an effective, equitable oral-health delivery system.

"We’re grateful for assistance from the Pew Center and others who are willing to lend a hand in what undoubtedly will remain a long, tough fight."