

WASHINGTON STATE



COALITION FOR ORAL HEALTH

Dec. 6, 2010

STATEMENT of SUPPORT for SCHOOL-BASED SEALANT PROGRAMS in WASHINGTON

To Whom It May Concern,

The Washington State Oral Health Coalition supports school-based sealant programs as an effective and a proven means of delivering preventive oral health care to public school populations. Founded in 1993, our organization has defined its dual mission as "promoting the importance of oral health and advocating for oral health care for all of Washington's residents." Support for school-based sealant programs fits well within this mission because the evidence-based results of these programs show improved oral health outcomes for individuals as well as expanded access to care for whole groups (e.g., the school-aged child Medicaid population in Washington State).

The Coalition bases its support for school-based sealant programs on state law enacted by the Washington Legislature along with the evidence of such programs' efficacy gathered and published by the Centers for Disease Control (CDC) and the American Dental Association (ADA). According to all three organizations – one elected public entity, one appointed public entity, and one private entity – school-based sealant programs are a safe and effective means of providing the preventive oral health care to which thousands of school-aged children in our state have no other access. These programs offer an effective means of preventing not only cavities but also future restorative costs to taxpayers.

The Washington State Legislature passed SUBSTITUTE SENATE BILL 6020 (SSB 6020) during its Regular Session in 2001. SSB 6020 established the legal framework for the creation of independent school-based sealant programs. The law was careful to provide for program tracking through oversight and regular provider reporting requirements for the new school-based sealant programs.

Since 2001, evidence of the positive outcomes generated by school-based sealant programs has continued to mount. As reporter Jennifer Garvin notes, "School-based sealant programs are an effective public health approach to preventing caries, according to a November article in The Journal of the American Dental Association (JADA) that reinforces the evidence that such programs help improve the oral health of children, especially those from vulnerable populations." (*Evidence indicates sealants improve children's oral health – Jennifer Garvin American Dental Association News, Nov. 3, 2009*) Moreover, Garvin's article reinforces the evidence that such programs help improve the oral health of children, especially those from vulnerable populations, explaining, "Dental sealant programs typically target schools that serve large populations of low-income children and focus on sealing newly erupted permanent molar teeth. They work in collaboration with local dentists, dental associations, school nurses, administrators, public health clinics and parents."

The Centers for Disease Control (CDC) report, *Surveillance for Dental Caries, Dental Sealants, Tooth Retention, Edentulism, and Enamel Fluorosis – United States, 1988 – 1994 and 1999 – 2002*, added further evidence to the case for school-based sealant programs. Dr. Barbara Gooch, DMD, Division of Oral Health, National Center for Chronic Disease Prevention and Health Promotion, CDC Dental Officer and the report's lead author wrote, "School-based dental sealant programs increase sealant use and reduce tooth decay. Although we have evidence that dental sealants provided in school programs can prevent about 60 percent of tooth decay in sealed permanent posterior teeth, this preventive intervention is underused, especially in children from low-income families."

Nationally, one in five children from low-income families currently has sealants and are nearly twice as likely to have decay in their permanent teeth, according to the CDC report.

A report just released by the General Accountability Office (GAO), *Efforts Under Way to Improve Children's Access to Dental Services, but Sustained Attention Needed to Address Ongoing Concerns* (Nov. 2010), raised additional concerns about the apparent lack of access to oral health care experienced by children from low income households. In a statement about the report, the National Health Law Program (NHLP) pointed out, "available national data show that in 2009, less than 37 percent of children in Medicaid received any dental services under that program and that several states reported rates of 30 percent or less."

Added the CDC's Dr. Gooch, "Our overall national goal is to decrease the burden of disease. Prevention is key as is working together. "We all have to work together in this country to maximize opportunities to prevent dental disease. We have to maximize prevention."

The Washington State Oral Health Coalition supports school-based sealant programs and encourages local school districts to collaborate with public health jurisdictions and dental professionals in order to build the kinds of community-based partnerships that will improve access to preventive oral health care and resulting oral health outcomes for the school-aged Medicaid population in Washington State.

Best regards,

Cyndi Newman, Chair

Washington State Oral Health Coalition