



ORAL HEALTH OF AI/AN CHILDREN 1-5 YEARS OF AGE

2018-19 IHS ORAL HEALTH SURVEY
NATIONAL, AREA AND CLINIC LEVEL RESULTS

SURVEY METHODS

- Probability sample of tribal and IHS Service Units with a dental clinic and an estimated user population aged 1-5 years of 20 or more
- Dentists, hygienists & therapists screened AI/AN children 1-5 years of age in community-based settings
 - Medical & well child clinics
 - Early Head Start, Head Start & other preschool settings
 - WIC
 - Kindergarten
 - Community events
- Dental clinic patients were not screened

DATA ANALYSIS

- Statistical analyses were performed using the complex survey procedures in SAS version 9.4
 - All analyses accounted for the stratified cluster sampling strategy
 - Confidence intervals are wide because of cluster sampling design
- Sample weights were developed using the 2017 user population estimates to produce population estimates based on selection probabilities

NUMBER OF SITES AND CHILDREN

- Screening goal:
 - 400 children per IHS Area equally divided by age – 80 per age year
 - Some IHS Areas did not meet the screening goal
- 73 IHS Service Units participated
 - 43% of the 170 IHS Service Units
 - NOTE: Some Service Units include multiple tribal programs. A total of 82 IHS/tribal programs participated.
- 9,275 AI/AN children aged 1-5 years were screened
 - Represents approximately 7% of the estimated 2017 user population aged 1-5 years (n=135,786)
 - The majority of the children screened were 3-4 years of age

NUMBER OF CHILDREN SCREENED (BLUE HIGHLIGHTED CELLS = DID NOT MEET GOAL FOR AGE)

IHS Area	Number of Service Units	Number of Children Screened					
		1 Year	2 Years	3 Years	4 Years	5 Years	Total
Alaska	5	40	42	142	203	121	548
Albuquerque	5	69	81	155	213	111	629
Bemidji	6	68	79	282	235	99	763
Billings	8	154	163	328	410	202	1,257
California	7	65	79	103	98	89	434
Great Plains	4	101	143	237	296	108	885
Nashville	6	102	116	231	236	161	846
Navajo	6	61	85	135	147	99	527
Oklahoma City	6	155	187	417	570	204	1,533
Phoenix	6	86	85	106	127	77	481
Portland	12	136	146	218	346	126	972
Tucson	2	23	40	105	183	49	400
Total	73	1,060	1,246	2,459	3,064	1,446	9,275

Screening goal: 400 children per IHS Area equally divided by age – 80 per age year

NUMBER OF CHILDREN SCREENED

- Impact of not reaching screening goals
 - Larger confidence intervals making potential changes in oral health status more difficult to detect
 - If a particular age year is underrepresented, Area and clinic results may not be reflective of the overall population



IHS NATIONAL RESULTS



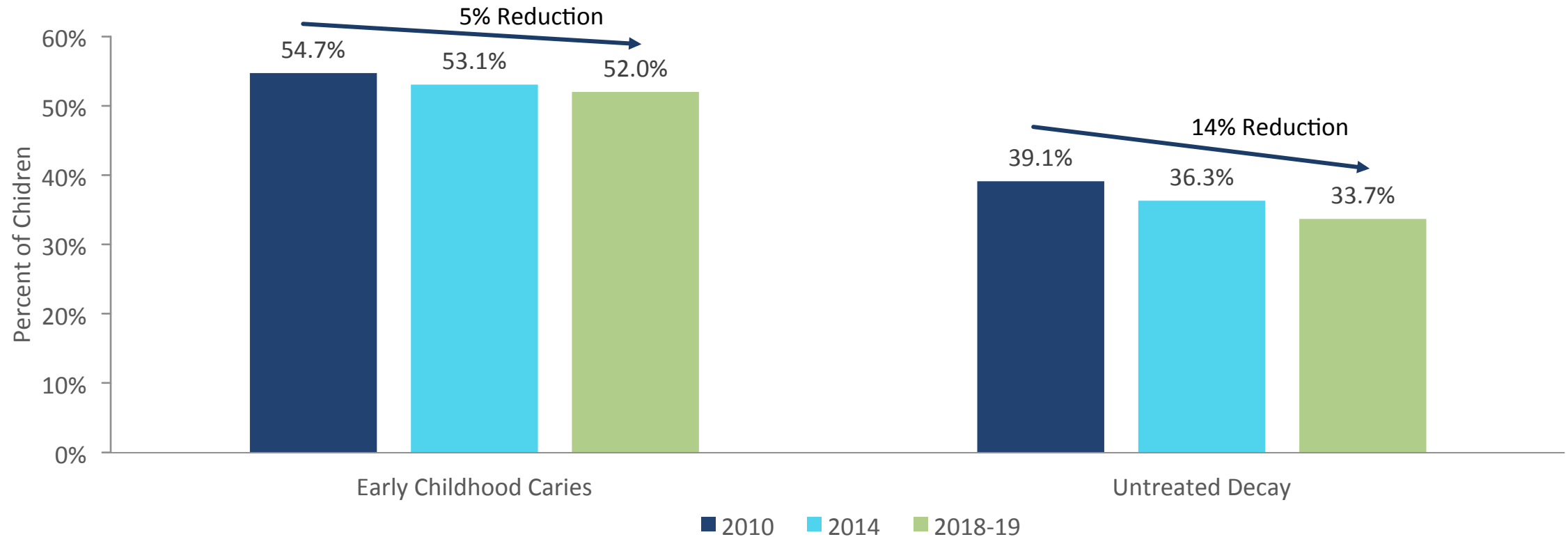
KEY FINDING #1

Since 2010, ECC has steadily declined nationally, and untreated ECC in AI/AN preschool children has significantly declined.



FINDING #1: SINCE 2010, ECC HAS STEADILY DECLINED NATIONALLY, AND UNTREATED ECC IN AI/AN PRESCHOOL CHILDREN HAS SIGNIFICANTLY DECLINED.

Percentage of 1-5 year old AI/AN children with ECC and untreated decay by survey year



Limited to the 53 service units that participated in the 2010, 2014 and 2018-19 IHS oral health surveys

FINDING #1: SINCE 2010, ECC HAS STEADILY DECLINED NATIONALLY, AND UNTREATED ECC IN AI/AN PRESCHOOL CHILDREN HAS SIGNIFICANTLY DECLINED.



**MET HEALTHY PEOPLE 2020
PERCENTAGE REDUCTION GOAL (10%)
FOR UNTREATED DECAY**



**MIRRORS NATIONAL TRENDS WITH
NON-SIGNIFICANT DECLINE IN DECAY
EXPERIENCE AND SIGNIFICANT
DECLINE IN UNTREATED DECAY***

* Fleming E, Afful J. Prevalence of total and untreated dental caries among youth: United States, 2015–2016. NCHS Data Brief, no 307. Hyattsville, MD: National Center for Health Statistics. 2018.

KEY FINDING #2

ECC, however, continues to be a serious health problem for many AI/AN preschool children, despite declining rates.

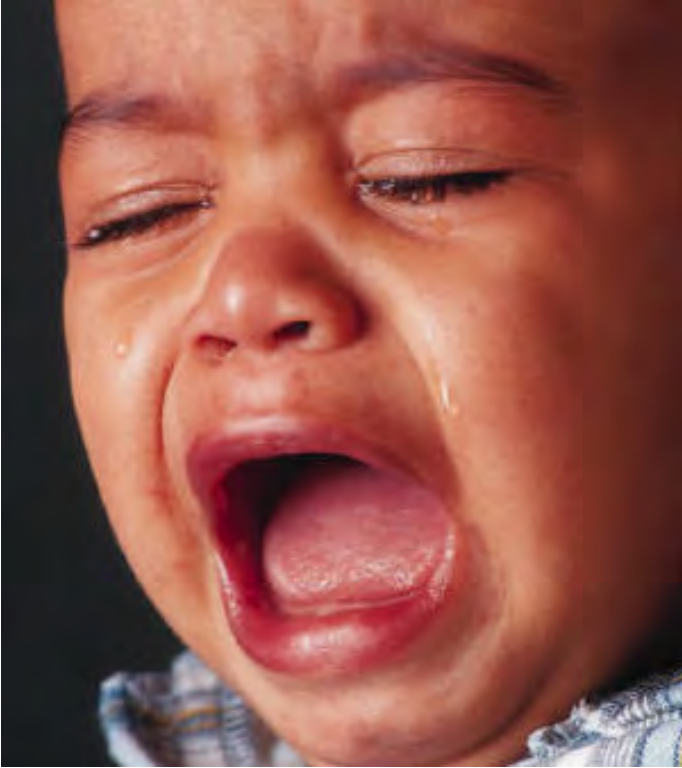


FINDING #2: ECC, HOWEVER, CONTINUES TO BE A SERIOUS HEALTH PROBLEM FOR MANY AI/AN PRESCHOOL CHILDREN, DESPITE DECLINING RATES.

More than 5 out of every 10 AI/AN children (54%) between 1-5 years of age has ECC.

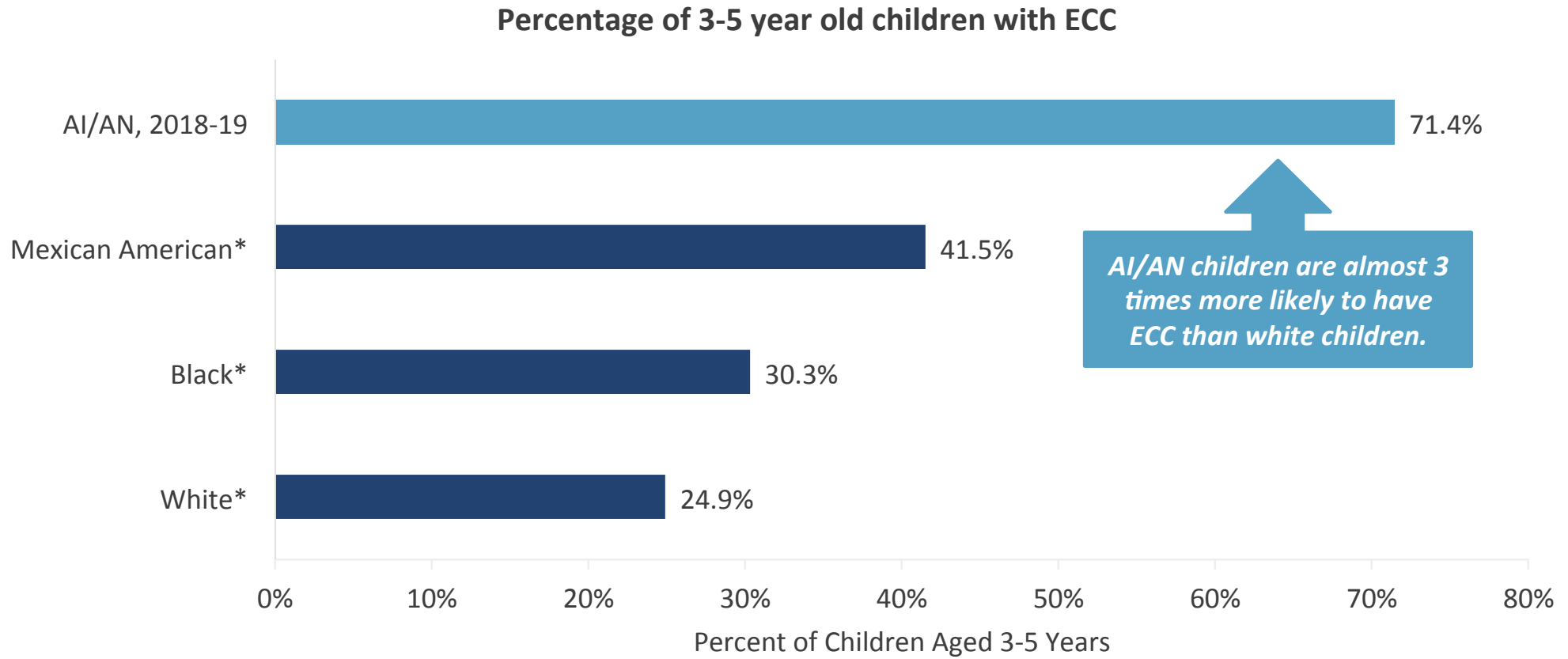


FINDING #2: ECC, HOWEVER, CONTINUES TO BE A SERIOUS HEALTH PROBLEM FOR MANY AI/AN PRESCHOOL CHILDREN, DESPITE DECLINING RATES.



- ECC can cause needless pain, suffering and infection
- ECC may affect a child's ability to eat, communicate and learn
- Many children with ECC must be treated in a hospital setting at a cost exceeding \$6,000 per child

FINDING #2: ECC, HOWEVER, CONTINUES TO BE A SERIOUS HEALTH PROBLEM FOR MANY AI/AN PRESCHOOL CHILDREN, DESPITE DECLINING RATES.



* Data Source: National Health and Nutrition Examination Survey (NHANES), 2013-14

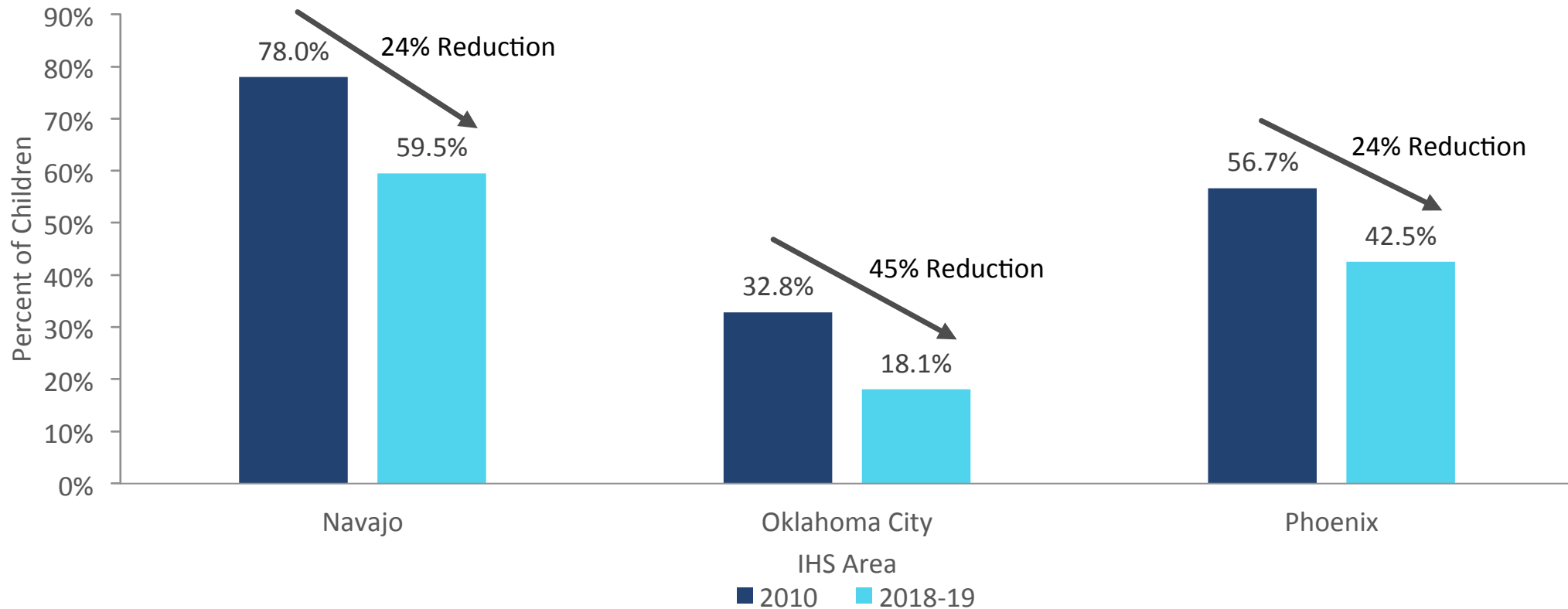
KEY FINDING #3

Some IHS Areas and programs have had dramatic, statistically significant reductions in the prevalence of early childhood caries.



FINDING #3: SOME IHS AREAS AND PROGRAMS HAVE HAD DRAMATIC, STATISTICALLY SIGNIFICANT REDUCTIONS IN THE PREVALENCE OF ECC.

Percent of 1-5 year old AI/AN children with ECC for select IHS Areas, 2010 and 2018-19



Limited to the 53 service units that participated in the 2010, 2014 and 2018-19 IHS oral health surveys

FINDING #3: SOME IHS AREAS AND PROGRAMS HAVE HAD DRAMATIC, STATISTICALLY SIGNIFICANT REDUCTIONS IN THE PREVALENCE OF ECC.

- IHS Areas with decreases in the *prevalence of ECC*
 - Navajo, Oklahoma City, Phoenix
 - Statistically significant decrease from 2010 to 2018-19
 - Albuquerque, Billings, California and Tucson
 - Decreases are better than national average of 5% but are not statistically significant
- IHS Areas with decreases in the *prevalence of untreated decay*
 - Albuquerque, Navajo, Oklahoma City
 - Statistically significant decrease from 2010 to 2018-19
 - Billings, California, Great Plains, Phoenix, Tucson
 - Decreases are better than national average of 14% but are not statistically significant

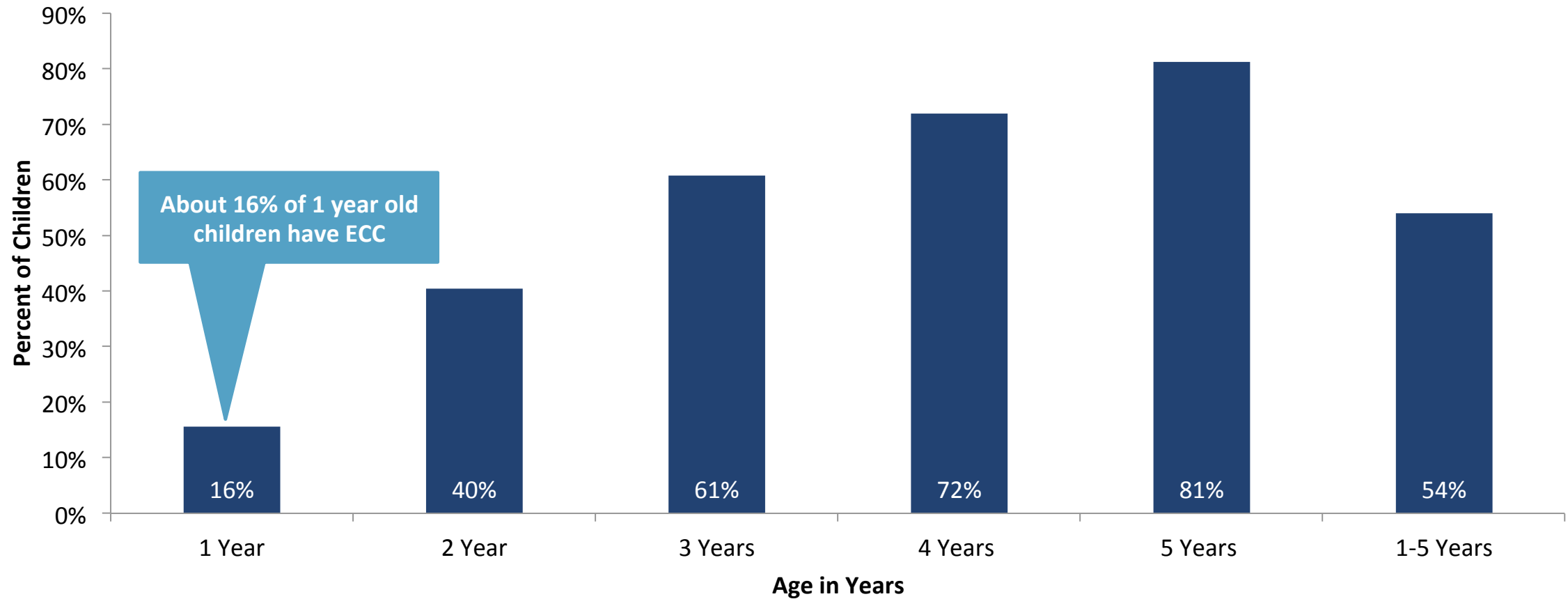
**KEY FINDING
#4**

One out of every six one-year old AI/AN children suffer from early childhood caries.



FINDING #4: ONE OUT OF EVERY SIX ONE-YEAR OLD AI/AN CHILDREN SUFFER FROM ECC.

Percent of AI/AN Children with ECC by Age, 2014



FINDING #4: ONE OUT OF EVERY SIX ONE-YEAR OLD AI/AN CHILDREN SUFFER FROM ECC.

- For primary prevention the American Academy of Pediatrics* recommends ...
 - Parent/family education on oral health care - eating healthy nutritious foods, limiting sugars, and brushing teeth with a toothpaste containing fluoride
 - First preventive visit to a dentist within six months of the first tooth erupting and no later than age 1, with preventive check-ups thereafter
 - A series of topical fluoride applications to children's teeth and fluoridated public water supplies
- Secondary prevention includes the prompt use of non-invasive ECC management techniques such as silver-ion products and interim therapeutic restorations
- Both primary and secondary ECC prevention should be a priority and fully integrated into routine medical and dental practice

* American Academy of Pediatrics. How to prevent tooth decay in your baby. <https://www.healthychildren.org/English/ages-stages/baby/teething-tooth-care/Pages/How-to-Prevent-Tooth-Decay-in-Your-Baby.aspx>. 2015.

KEY FINDING #5

While almost twice the national level, dental sealants on primary molars in AI/AN children may be underutilized.



Only 2% of 1-2 year olds and 10% of 3-5 year olds have sealants.

FINDING #5: WHILE ALMOST TWICE THE NATIONAL LEVEL, DENTAL SEALANTS ON PRIMARY MOLARS IN AI/AN CHILDREN MAY BE UNDERUTILIZED.

- Sealants reduce the risk of new decay by 76%*
- The American Dental Association and the American Academy of Pediatric Dentistry both recommend the use of sealants in primary (baby) molars*
- The IHS Division of Oral Health recommends the use of glass ionomer sealants for partially erupted teeth and pre-cooperative patients

*Wright JT, et al. Evidence-based Clinical Practice Guideline for the Use of Pit-and-Fissure Sealants. American Academy of Pediatric Dentistry, American Dental Association. *Pediatr Dent* 2016; 38(5):E120-E36

IMPLICATIONS



The oral health of some AI/AN preschool children is improving



Regardless of these improvements, AI/AN children continue to suffer disproportionately from the burden of oral disease



To address this disparity, IHS and tribal programs must continue to...

- Engage the individual, family, community, tribal leadership, plus health and social service providers
- Ensure that all AI/AN preschool children have access to age appropriate, evidence-based primary prevention strategies along with methods for managing the early stages of disease
- Ensure that if primary or secondary prevention fails, children have access to appropriate restorative dental care



NATIONAL TREND DATA – 2010 TO 2018-19

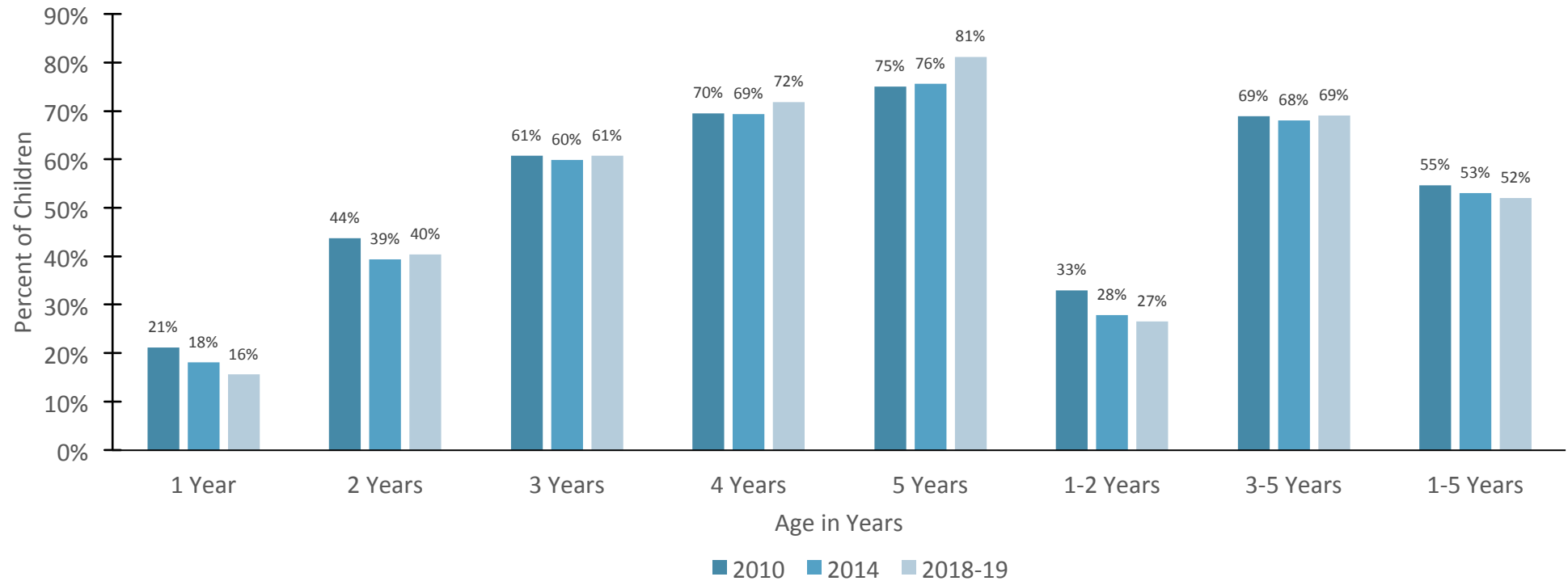
INFORMATION IN THE FOLLOWING 2 FIGURES IS LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS



NATIONAL TRENDS IN DECAY EXPERIENCE BY AGE, 2010 TO 2018-19

LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

Percentage of AI/AN Children with Decay Experience by Age, 2010-2018



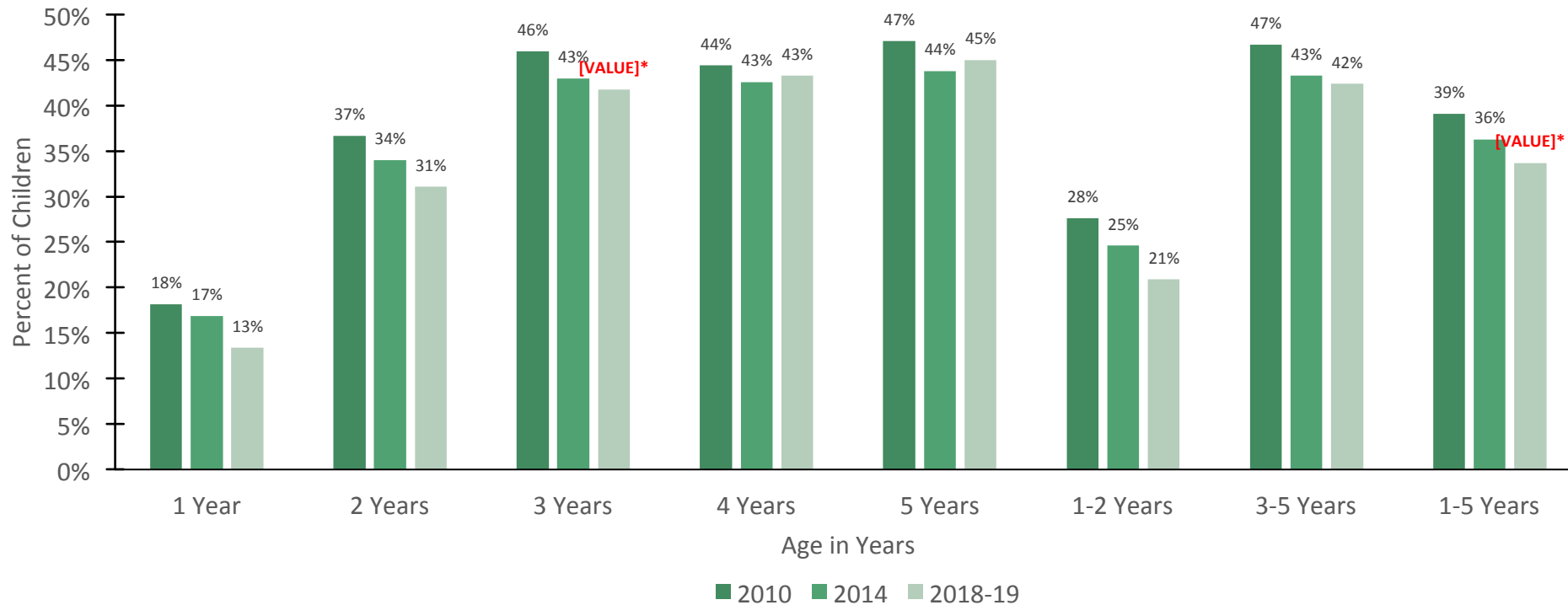
* Statistically significant difference, $p < 0.05$

Data is from the 53 service units that participated in the 2010, 2014 and 2018-19 surveys

NATIONAL TRENDS IN UNTREATED DECAY BY AGE, 2010 TO 2018-19

LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

Percentage of AI/AN Children with Untreated Decay by Age, 2010-2018



* Statistically significant difference, $p < 0.05$

Data is from the 53 service units that participated in the 2010, 2014 and 2018-19 surveys

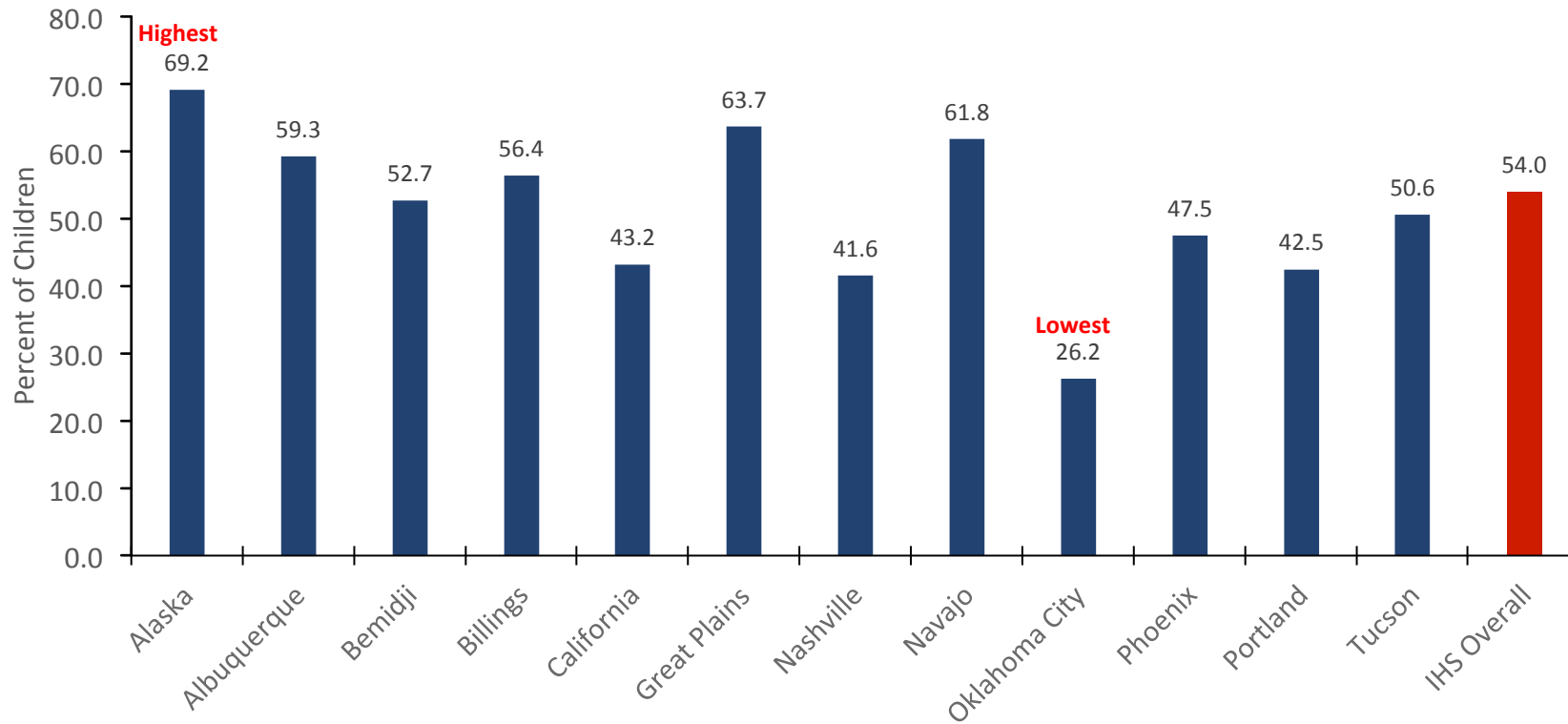


IHS AREA SPECIFIC RESULTS

ADOS ARE ENCOURAGED TO REDACT IHS AREA, FACILITY AND TRIBAL NAMES IF SHARING THIS PRESENTATION THROUGHOUT THE AREA OR WITH OUTSIDE ORGANIZATIONS

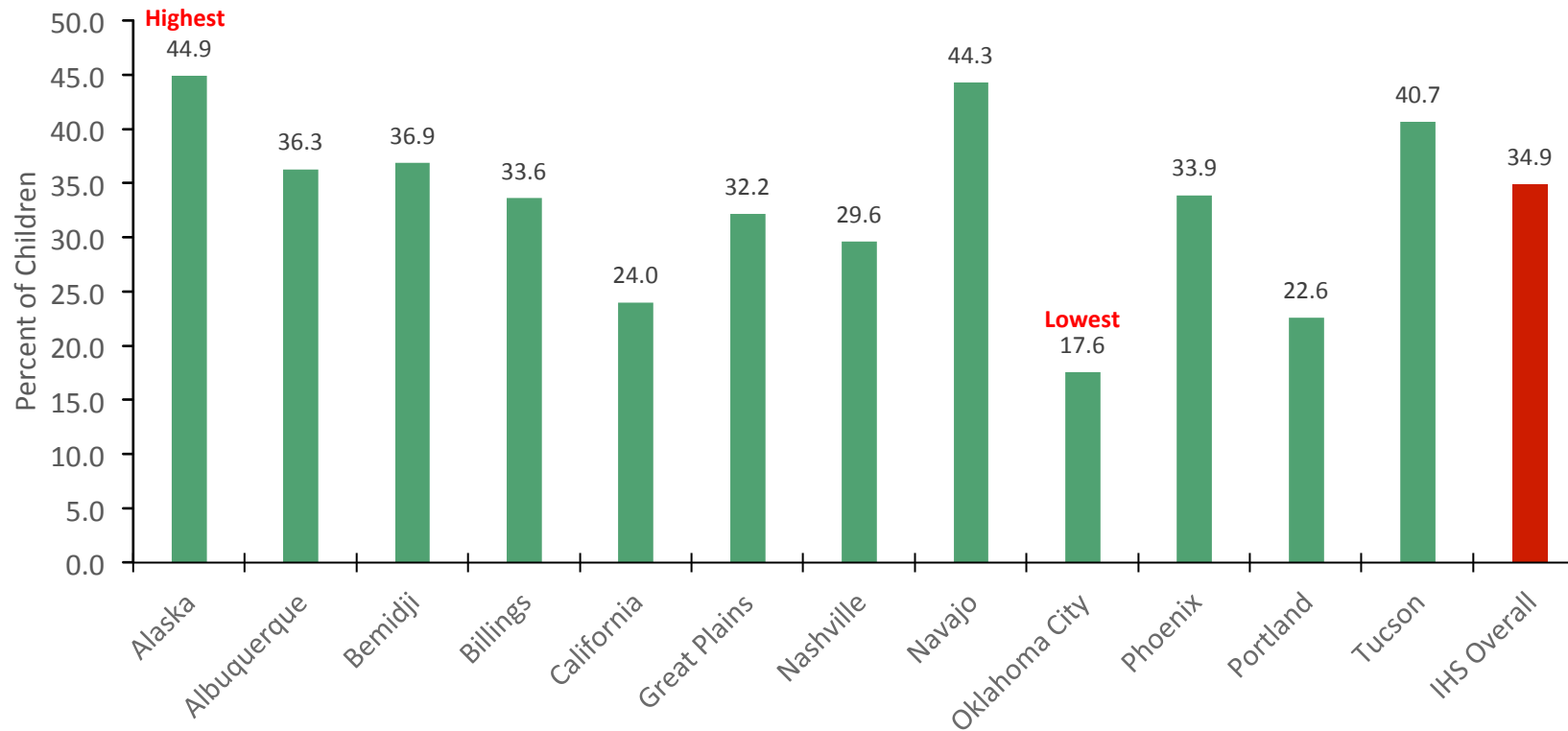
PREVALENCE OF DECAY EXPERIENCE BY IHS AREA, 2018-19 INCLUDES ALL CLINICS THAT PARTICIPATED IN THE 2018-19 SURVEY

Percentage of 1-5 Year Old AI/AN Children with Decay Experience by IHS Area, 2018-19

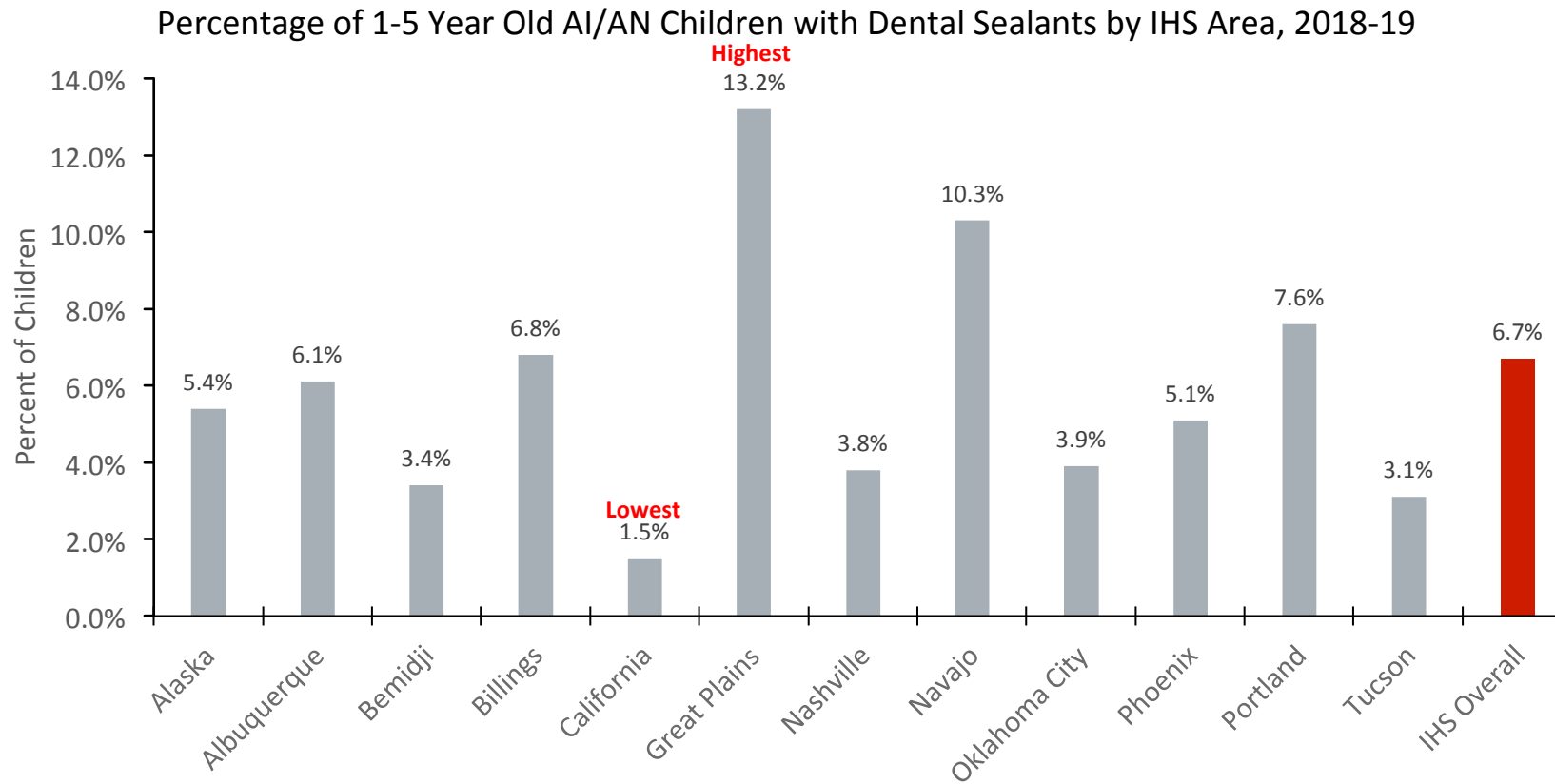


PREVALENCE OF UNTREATED DECAY BY IHS AREA, 2018-19 INCLUDES ALL CLINICS THAT PARTICIPATED IN THE 2018-19 SURVEY

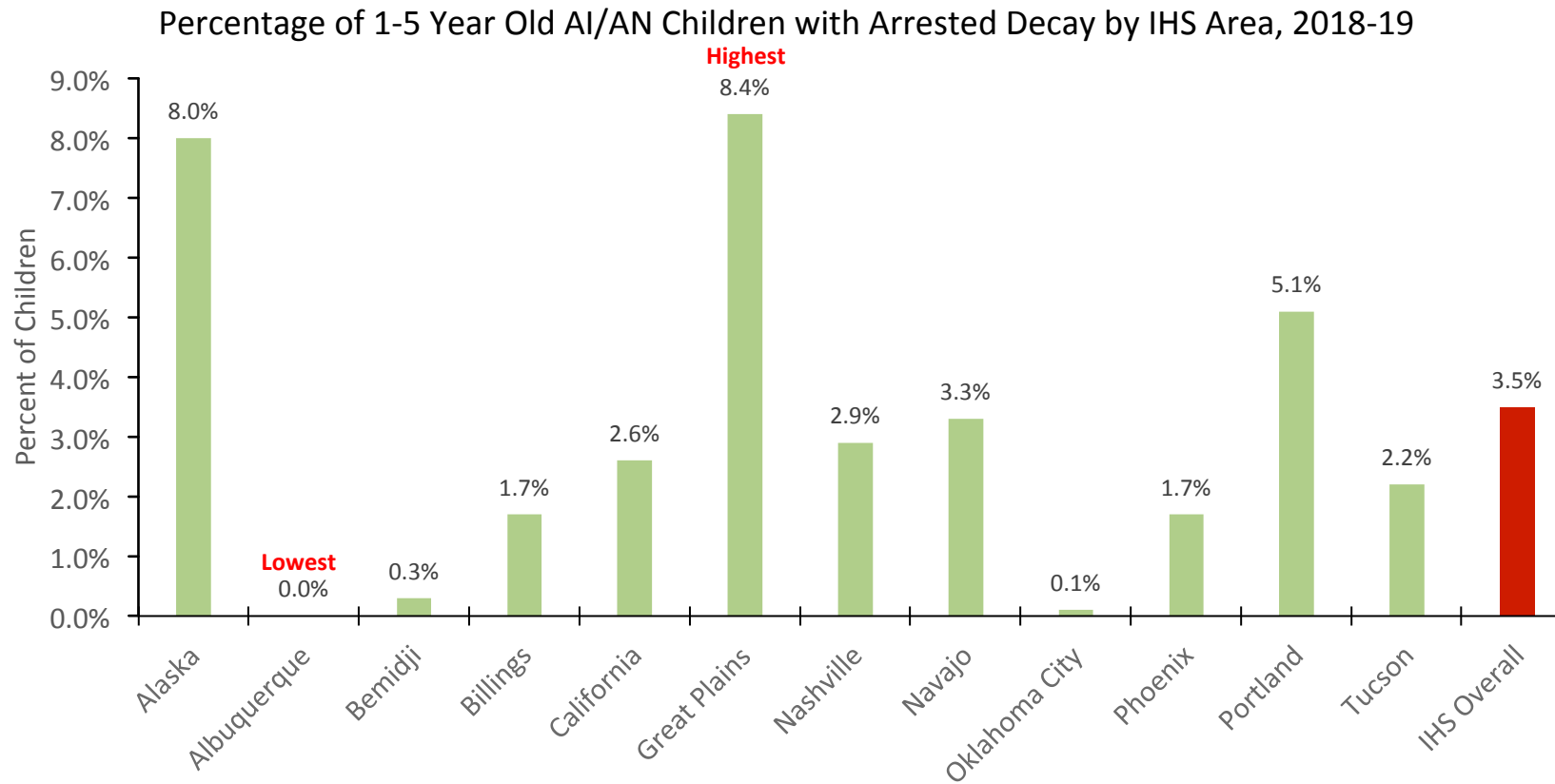
Percentage of 1-5 Year Old AI/AN Children with Untreated Decay by IHS Area, 2018-19



PREVALENCE OF DENTAL SEALANTS BY IHS AREA, 2018-19 INCLUDES ALL CLINICS THAT PARTICIPATED IN THE 2018-19 SURVEY



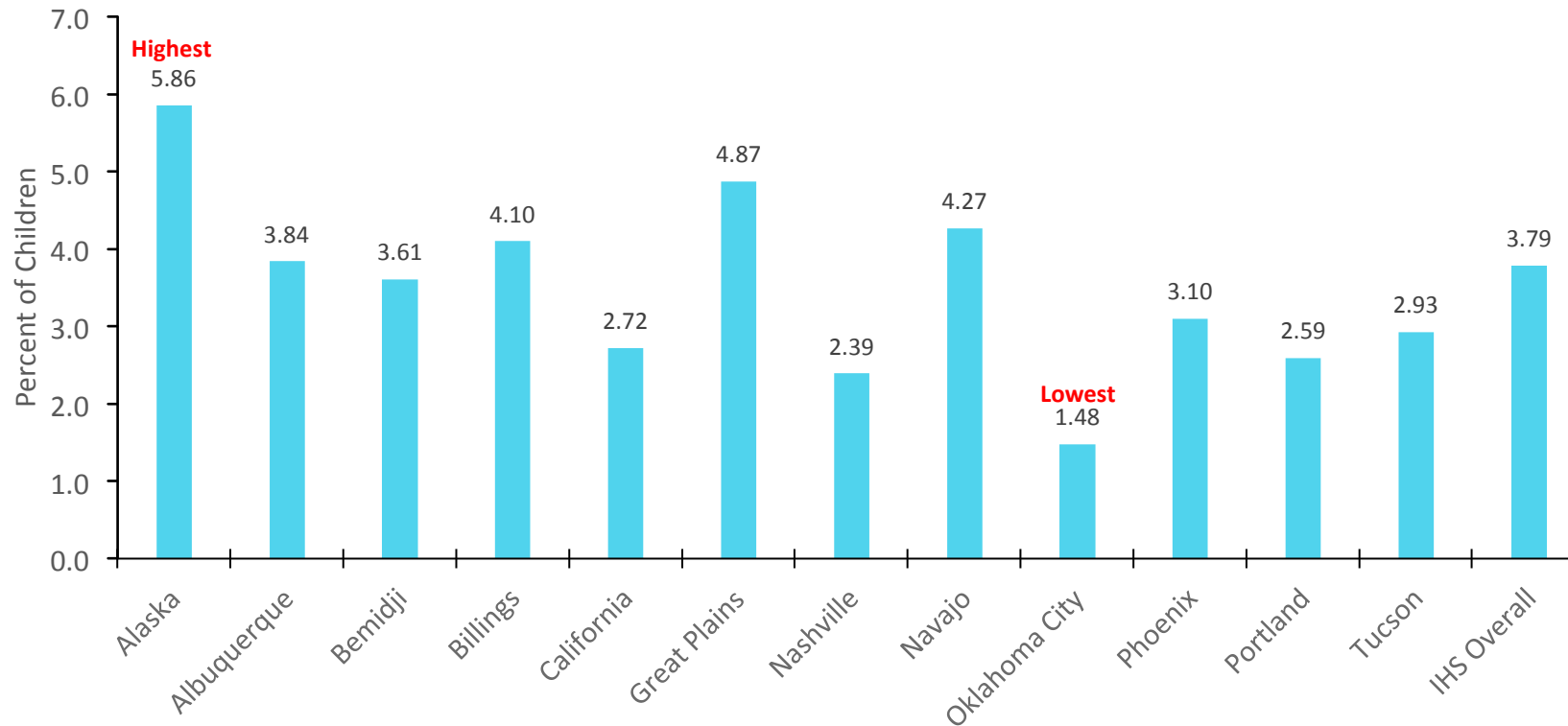
PREVALENCE OF ARRESTED DECAY BY IHS AREA, 2018-19 INCLUDES ALL CLINICS THAT PARTICIPATED IN THE 2018-19 SURVEY



MEAN NUMBER OF DECAYED, MISSING, FILLED TEETH (DMFT) BY IHS AREA, 2018-19

INCLUDES ALL CLINICS THAT PARTICIPATED IN THE 2018-19 SURVEY

Mean Number of Decayed, Missing, Filled Primary Teeth (dmft) by IHS Area, 2018-19





AREA SPECIFIC TREND DATA – 2010 TO 2018-19

INFORMATION IN THE FOLLOWING 3 TABLES IS LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

ADOS ARE ENCOURAGED TO REDACT IHS AREA, FACILITY AND TRIBAL NAMES IF SHARING THIS PRESENTATION THROUGHOUT THE AREA OR WITH OUTSIDE ORGANIZATIONS

TRENDS IN DECAY EXPERIENCE, 2010 TO 2018-19
SOME IHS AREAS HAD A SIGNIFICANT REDUCTION IN DECAY EXPERIENCE
LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

IHS Area	Prevalence of Decay Experience by Survey Year (1-5 Yrs)			
	2010	2014	2018-19	% Decrease 2010 to 2018-19
Alaska	60.4	74.8	63.6	-5.4%
Albuquerque	67.7	67.6	61.1	9.7%
Bemidji	44.9	45.2	52.9	-17.7%
Billings	60.9	58.2	56.4	7.3%
California	53.2	48.1	46.2	13.2%
Great Plains	58.6	60.1	58.0	0.9%
Nashville	41.4	44.4	42.3	-2.1%
Navajo	78.0	68.4	59.5	23.8%*
Oklahoma City	32.8	23.8	18.1	44.7%*
Phoenix	56.7	62.8	42.5	25.0%*
Portland	50.1	47.5	49.6	1.1%
Tucson	56.5	58.3	50.6	10.3%
IHS Overall	54.7	53.1	52.0	4.9%

* Statistically significant difference, p<0.05

Data is from the 53 service units that participated in the 2010, 2014 and 2018-19 surveys

A negative number means that there was an increase between 2010 and 2018-19

TRENDS IN UNTREATED DECAY, 2010 TO 2018-19
SOME IHS AREAS HAD A SIGNIFICANT REDUCTION IN UNTREATED DECAY
LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

IHS Area	Prevalence of Untreated Decay by Survey Year (1-5 Yrs)			
	2010	2014	2018-19	% Decrease 2010 to 2018-19
Alaska	41.8%	58.7%	40.2%	3.9%
Albuquerque	52.2%	41.0%	36.6%	29.9%*
Bemidji	32.1%	31.0%	37.8%	-17.6%
Billings	39.9%	35.0%	33.6%	15.8%
California	36.5%	32.2%	24.9%	31.8%
Great Plains	43.8%	31.7%	32.1%	26.7%
Nashville	29.7%	28.4%	30.6%	-3.0%
Navajo	60.0%	49.4%	40.8%	31.9%*
Oklahoma City	25.5%	12.9%	10.8%	57.7%*
Phoenix	35.7%	53.8%	29.5%	17.2%
Portland	32.4%	25.6%	28.3%	12.6%
Tucson	49.0%	45.6%	40.7%	17.0%
IHS Overall	39.1%	36.3%	33.7%	13.9%*

* Statistically significant difference, p<0.05

Data is from the 53 service units that participated in the 2010, 2014 and 2018-19 surveys

A negative number means that there was an increase between 2010 and 2018-19

NUMBER OF CHILDREN SCREENED BY SURVEY YEAR
LIMITED TO THE 53 SERVICE UNITS THAT PARTICIPATED IN THE 2010, 2014 AND 2018-19 SURVEYS

IHS Area	Number of Children Screened by Survey Year (1-5 Yrs)		
	2010	2014	2018-19
Alaska	385	178	339
Albuquerque	737	737	416
Bemidji	801	853	701
Billings	1,682	1,330	1,257
California	373	351	359
Great Plains	570	516	478
Nashville	449	946	713
Navajo	472	624	440
Oklahoma City	674	1,323	1,360
Phoenix	571	423	425
Portland	557	777	455
Tucson	361	551	400
IHS Overall	7,632	8,609	7,343

Data is from the 53 service units that participated in the 2010, 2014 and 2018-19 surveys



RESULTS – PORTLAND AREA CLINICS

WARNING: CLINIC DIFFERENCES MAY BE DUE TO DIFFERENCES IN THE AGE DISTRIBUTION OF CHILDREN SCREENED OR SMALL SAMPLE SIZES

ADOS ARE ENCOURAGED TO REDACT IHS AREA, FACILITY AND TRIBAL NAMES IF SHARING THIS PRESENTATION THROUGHOUT THE AREA OR WITH OUTSIDE ORGANIZATIONS

PORTLAND AREA CLINICS NUMBER OF CHILDREN SCREENED

Clinic /Tribe	1 Year	2 Years	3 Years	4 Years	5 Years	TOTAL
Clinic 67	0	5	6	40	13	64
Clinic 68	10	10	10	10	10	50
Clinic 69	12	11	11	10	11	55
Clinic 70	10	5	8	11	0	34
Clinic 71	8	13	24	19	5	69
Clinic 72	5	5	5	5	5	25
Clinic 73	12	18	9	12	2	53
Clinic 74	11	19	18	58	51	157
Clinic 75	1	1	9	17	3	31
Clinic 76	13	6	5	31	5	60
Clinic 77	47	41	39	38	3	168
Clinic 78	6	10	12	11	9	48
Clinic 79	1	2	50	70	5	128
Clinic 80	0	0	12	14	4	30
Portland Area Total	136	146	218	346	126	972
IHS Total	1,060	1,246	2,459	3,064	1,446	9,275

PORTLAND AREA CLINICS ORAL HEALTH STATUS OF CHILDREN SCREENED

Warning: Clinic differences may be due to differences in the age distribution of children screened or small sample sizes.

Clinic/Tribe	Decay Experience (%)	Untreated Decay (%)	Dental Sealants (%)
Clinic 67	65.5	19.9	0.0
Clinic 68	28.0	20.4	42.1
Clinic 69	43.3	21.3	13.8
Clinic 70	28.7	12.7	0.0
Clinic 71	36.2	27.5	2.1
Clinic 72	29.0	19.7	7.3
Clinic 73	10.8	7.2	9.2
Clinic 74	56.3	29.9	11.7
Clinic 75	59.8	22.7	4.5
Clinic 76	52.4	25.0	7.3
Clinic 77	20.0	8.4	0.6
Clinic 78	71.2	36.7	0.0
Clinic 79	61.0	36.6	3.9
Clinic 80	52.2	41.5	8.5
Portland Area Total	42.5	22.6	7.6
IHS Total	54.0	34.9	6.7



ADDITIONAL DATA TABLES

2018-19 IHS ORAL HEALTH SURVEY OF AI/AN CHILDREN 1-5 YEARS OF AGE

PERCENT OF AI/AN CHILDREN WITH DECAY EXPERIENCE, UNTREATED DECAY, ARRESTED DECAY, SEALANTS AND NEED FOR DENTAL CARE BY AGE, 2018-19

Variable	1 Year (n=1,060)		2 Years (n=1,246)		3 Years (n=2,459)		4 Years (n=3,064)		5 Years (n=1,446)		1-5 Years (n=9,275)		2-5 Years (n=8,215)		3-5 Years (n=6,969)	
Decay Experience (95% CI)	15.6		40.4		60.8		71.9		81.2		54.0		63.6		71.3	
	8.3	22.8	32.4	48.4	54.6	66.9	66.0	77.9	78.6	83.8	49.0	59.0	58.9	68.3	67.2	75.3
Untreated Decay (95% CI)	13.4		31.1		41.8		43.3		45.0		34.9		40.3		43.4	
	7.6	19.2	25.4	36.8	36.4	47.2	36.9	49.6	41.1	49.0	31.2	38.7	36.8	43.9	39.4	47.3
Arrested Decay (95% CI)	1.3		4.8		4.1		3.5		3.9		3.5		4.1		3.8	
	0.0	2.7	2.2	7.3	1.3	6.9	1.4	5.6	1.8	6.0	1.8	5.2	2.0	6.1	1.7	6.0
Primary Molar Sealants (95% CI)	0.8		3.0		7.1		8.2		14.2		6.7		8.1		9.8	
	0.0	1.8	1.4	4.7	4.4	9.8	5.8	10.6	9.5	18.9	4.8	8.6	5.8	10.5	7.1	12.5
Early or Urgent Care* (95% CI)	13.9		30.9		40.8		42.4		44.7		34.5		39.7		42.6	
	8.4	19.3	25.0	36.8	35.2	46.4	35.9	48.9	41.1	48.3	30.8	38.1	36.0	43.4	38.5	46.7
Urgent Care* (95% CI)	2.1		4.9		6.7		6.5		10.2		6.1		7.1		7.8	
	0.5	3.8	2.4	7.5	4.1	9.3	4.5	8.5	6.4	14.0	4.4	7.8	5.2	9.0	5.8	9.8

* Information on treatment urgency was missing for 96 children

MEAN NUMBER OF DECAYED, ARRESTED, MISSING AND FILLED TEETH (DMFT) AND MEAN PERCENT OF ERUPTED TEETH WITH DECAY EXPERIENCE AMONG AI/AN CHILDREN BY AGE, 2018-19

Variable	1 Year (n=1,060)		2 Years (n=1,246)		3 Years (n=2,459)		4 Years (n=3,064)		5 Years (n=1,446)		1-5 Years (n=9,275)		2-5 Years (n=8,215)		3-5 Years (n=6,969)	
Decayed Teeth (95% CI)	0.26		0.94		1.60		1.60		1.63		1.55		1.81		1.98	
	0.26	0.73	0.94	1.68	1.60	2.44	1.60	2.27	1.63	2.32	1.32	1.78	1.57	2.05	1.71	2.25
Arrested Teeth (95% CI)	0.04		0.14		0.13		0.11		0.12		0.11		0.12		0.12	
	0.00	0.07	0.06	0.22	0.05	0.21	0.04	0.18	0.04	0.19	0.06	0.15	0.07	0.18	0.05	0.18
Missing Teeth (95% CI)	0.03		0.30		0.48		0.76		1.06		0.53		0.65		0.77	
	0.00	0.05	0.05	0.55	0.31	0.66	0.50	1.03	0.80	1.31	0.38	0.67	0.47	0.84	0.59	0.95
Filled Teeth (95% CI)	0.03		0.49		1.50		2.63		3.36		1.60		2.00		2.50	
	0.00	0.06	0.31	0.67	1.14	1.85	2.21	3.05	3.04	3.68	1.39	1.82	1.74	2.26	2.18	2.81
dmft (95% CI)	0.59		2.25		4.13		5.44		6.51		3.79		4.58		5.36	
	0.29	0.88	1.53	2.97	3.44	4.82	4.71	6.17	6.03	6.99	3.30	4.28	4.04	5.13	4.83	5.89
Percent of Teeth* (95% CI)	3.9		11.8		20.7		27.3		33.6		19.5		23.4		27.2	
	1.9	5.9	8.1	15.6	17.2	24.1	23.6	30.9	31.1	36.1	16.9	22.0	20.6	26.1	24.5	29.8

* Percent of erupted primary teeth with decay experience. One 1-year old child did not have any teeth and is excluded.

PERCENT OF AI/AN CHILDREN 1-5 YEARS WITH DECAY EXPERIENCE, UNTREATED DECAY AND ARRESTED DECAY BY IHS AREA, 2018-19

IHS Area	Number Screened	Decay Experience			Untreated Decay			Arrested Decay		
		Percent	Lower 95% CL	Upper 95% CL	Percent	Lower 95% CL	Upper 95% CL	Percent	Lower 95% CL	Upper 95% CL
Alaska	548	69.2	50.2	88.2	44.9	34.1	55.8	8.0	0.0	16.9
Albuquerque	629	59.3	50.1	68.6	36.3	31.5	41.1	.	.	.
Bemidji	763	52.7	43.9	61.4	36.9	28.9	44.9	0.3	0.0	0.8
Billings	1,257	56.4	50.3	62.6	33.6	28.1	39.1	1.7	0.0	3.4
California	434	43.2	27.3	59.2	24.0	18.2	29.8	2.6	0.0	6.2
Great Plains	885	63.7	56.0	71.4	32.2	31.1	33.4	8.4	0.0	17.4
Nashville	846	41.6	21.5	61.6	29.6	14.8	44.3	2.9	0.0	6.1
Navajo	527	61.8	52.5	71.1	44.3	30.7	57.8	3.3	1.9	4.8
Oklahoma City	1,533	26.2	14.2	38.3	17.6	5.8	29.5	0.1	0.0	0.3
Phoenix	481	47.5	34.6	60.4	33.9	23.1	44.8	1.7	0.6	2.8
Portland	972	42.5	28.1	57.0	22.6	14.2	31.0	5.1	0.2	10.0
Tucson	400	50.6	45.5	55.8	40.7	40.3	41.0	2.2	0.4	4.0
Total	9,275	54.0	49.0	59.0	34.9	31.2	38.7	3.5	1.8	5.2

PERCENT OF AI/AN CHILDREN 1-5 YEARS NEEDING DENTAL CARE BY IHS AREA, 2018-19

IHS Area	Number Screened	Early or Urgent Dental Care			Urgent Dental Care		
		Percent	Lower 95% CL	Upper 95% CL	Percent	Lower 95% CL	Upper 95% CL
Alaska	534	42.4	30.5	54.3	5.3	1.7	8.9
Albuquerque	629	36.8	31.8	41.9	8.7	4.8	12.7
Bemidji	761	35.5	28.7	42.2	1.9	0.9	2.9
Billings	1,253	34.2	29.6	38.8	7.0	4.2	9.8
California	431	22.5	17.6	27.3	3.1	2.2	4.0
Great Plains	880	34.3	31.6	37.0	10.3	0.2	20.4
Nashville	840	31.1	13.5	48.7	2.1	1.2	2.9
Navajo	474	43.2	30.3	56.0	7.6	4.5	10.6
Oklahoma City	1,529	16.4	4.5	28.4	3.9	0.5	7.3
Phoenix	481	34.8	23.6	45.9	7.0	2.8	11.1
Portland	970	23.0	14.6	31.4	3.5	0.1	7.0
Tucson	397	40.0	38.8	41.3	12.6	3.0	22.2
Total*	9,179	34.5	30.8	38.1	6.1	4.4	7.8

* Information on treatment urgency was missing for 96 children

MEAN NUMBER OF DECAYED, ARRESTED, MISSING OR FILLED TEETH (DMFT) AND MEAN PERCENT OF ERUPTED TEETH WITH DECAY EXPERIENCE AMONG AI/AN CHILDREN 1-5 YEARS BY IHS AREA, 2018-19

IHS Area	Number Screened	Decayed, Arrested, Missing or Filled Teeth (dmft)			Percent of Teeth with Decay Experience		
		Mean	Lower 95% CL	Upper 95% CL	Mean Percent	Lower 95% CL	Upper 95% CL
Alaska	548	5.86	3.80	7.92	30.5	19.7	41.3
Albuquerque	629	3.84	2.87	4.81	19.7	14.6	24.7
Bemidji	763	3.61	2.80	4.42	18.4	14.3	22.5
Billings	1,257	4.10	3.43	4.77	21.1	17.7	24.5
California	434	2.72	1.25	4.20	13.9	6.3	21.6
Great Plains	885	4.87	4.18	5.55	25.0	21.4	28.5
Nashville	846	2.39	0.77	4.01	12.2	3.9	20.6
Navajo	527	4.27	3.39	5.15	22.0	17.7	26.4
Oklahoma City	1,533	1.48	0.76	2.19	7.4	3.9	11.0
Phoenix	481	3.10	2.02	4.17	15.9	10.3	21.5
Portland	972	2.59	1.60	3.58	13.2	8.1	18.3
Tucson	400	2.93	2.92	2.94	15.2	15.1	15.3
Total	9,275	3.79	3.30	4.28	19.5	16.9	22.0

PERCENT OF AI/AN CHILDREN 1-5 YEARS WITH DENTAL SEALANTS ON PRIMARY MOLARS BY IHS AREA, 2018-19

IHS Area	Number Screened	Dental Sealants on Primary Molars		
		Percent	Lower 95% CL	Upper 95% CL
Alaska	548	5.4	1.4	9.5
Albuquerque	629	6.1	0.0	12.4
Bemidji	763	3.4	1.8	5.1
Billings	1,257	6.8	1.9	11.6
California	434	1.5	0.2	2.7
Great Plains	885	13.2	10.7	15.7
Nashville	846	3.8	1.8	5.8
Navajo	527	10.3	3.9	16.7
Oklahoma City	1,533	3.9	0.0	11.1
Phoenix	481	5.1	1.3	8.9
Portland	972	7.6	2.4	12.8
Tucson	400	3.1	0.1	6.0
Total	9,275	6.7	4.8	8.6