

Research on Oral Health in West Virginia Excerpts and Findings from Reports

Last Update in September 2006

Summary of Focus Group Findings, West Virginia Early Childhood Comprehensive Systems. A Project of the West Virginia Bureau for Public Health Office of Maternal, Child, and Family Health. August 31, 2005.

Dental care and affordability of oral health services:

Access to dental care was clearly one of the most significant concerns expressed by both parents and providers. Availability of dental services for young children is limited in much of the state and in some very rural areas such services are non-existent. **This issue was raised in fully half of the parent groups and in two-thirds of all provider groups.** Parents appear to be unaware of the importance of dental care for very young children and are also generally uninformed about practices that promote oral health in young children. Some physicians participating in focus groups indicated that they do not routinely examine young children for signs of oral health problems.

Parents are concerned about the high cost of dental services and the limited number of dentists that participate in the Medicaid and CHIP programs. Several parents reported that they could not locate a dentist close to their home and many parents take their young children some considerable distance in order to see a dentist. Providers report that many of the young children they encounter do not have any access to dental care. Both parents and providers feel that many parents of young children are unaware of the importance of oral health in young children.

The United Way of Central West Virginia Health Care Access Project, Experiences in Receiving Health Care by West Virginia CHIP and Medicaid Families, October 2004.

In this study of 101 families in the Kanawha Valley (Kanawha, Clay, Boone, Putnam Counties), access to oral health was cited as a problem for both children and adults.

Excerpts from the Report pages 14-15 regarding services for children:

The availability and use of dental services in West Virginia especially by Medicaid children is widely considered to be a problem. In national studies, West Virginia has been cited as having among the worst oral health in the nation. While some experts now recommend a dental visit as early as age one, the standard of practice in the region is to recommend a first visit at age three.

Half of all CHIP and Medicaid children included in the interviews had seen a dentist in the past year; of that number 36 percent had preventive care. For those families, whose children did not see, the following reasons were given: “no dentist

available” (6 %); “no dentist will take CHIP” (3%); “no dentist will take Medicaid” (9%); “I didn’t think it was necessary” (27%); “other” (55%). Most of the “other” explanations given for not seeing a dentist were that the child was too young. Twenty-four percent of the children in the survey were age three or younger.

For those children who saw a dentist, about one third received an appointment within one week and about half within one month.

About one-third of families with a Medicaid card had been told that the dentist was not accepting any more Medicaid patients compared with seven percent of families with a CHIP card.

Excerpts from the Report Regarding Adults page 19:

Forty-six percent of Medicaid adults had seen a dentist in the past year. While some went because of a problem, most went for routine visits and preventive care. Those who did not see a dentist said they could not afford it (64%) or did not think it necessary (20%).