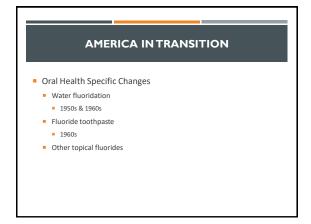
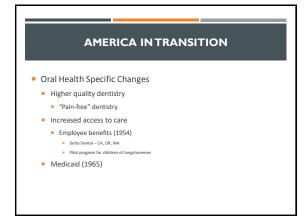
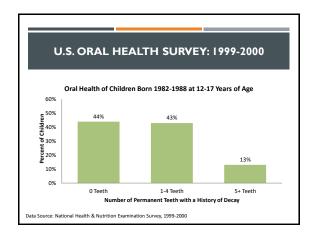
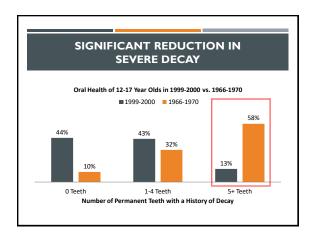


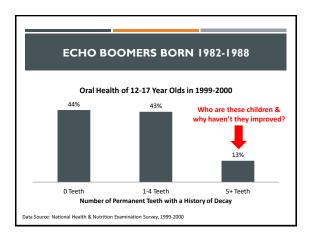
Economic/Social Changes Higher standard of living More universal education Improved housing Medicaid Urbanization Unionization









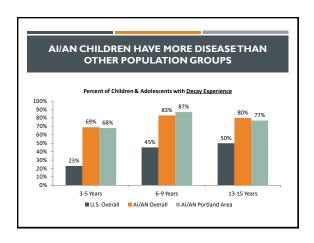


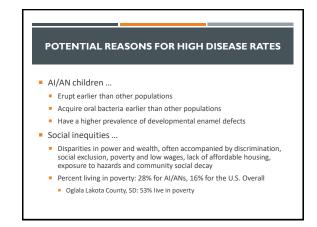
CHILDREN AT HIGH-RISK OF DECAY Low-income Low parental education Racial/ethnic minorities Recent immigrants

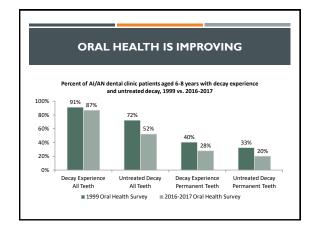
HOW ORAL HEALTH IS MONITORED INSCRIPTION INSCRIPTI

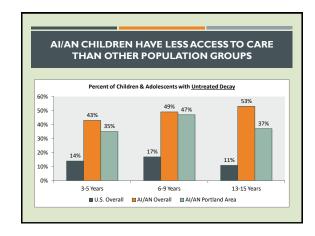
Survey populations to date Children – community based samples Adolescents and adults – clinic based sample Having community based samples is very important because the oral health of clinic users may be different from the community as a whole Survey timeline 2010 2011 2012 2013 2014 2015 35+ Years 2016-2017 6-8 Years

Regardless of age, AI/ANs have more dental disease and less access to care than other populations in the United States Dental caries is a significant health problem for AI/ANs Periodontal disease is a significant health problem for AI/AN adults Many AI/ANs are not getting the dental care they need Portland Area has less untreated decay than IHS overall Early prevention, before the age of two, is essential to reduce the prevalence of dental caries in AI/AN children Dental sealants are an essential preventive strategy but the appropriate children and teeth need to be targeted

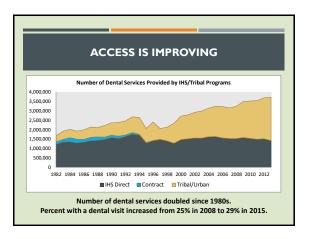


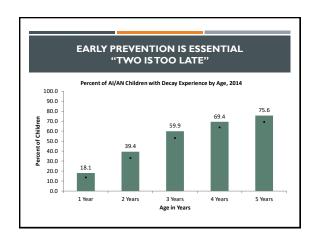


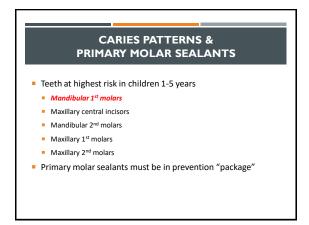


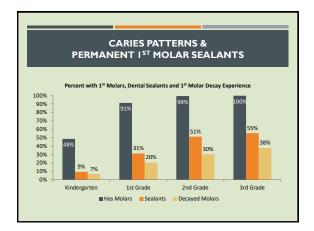


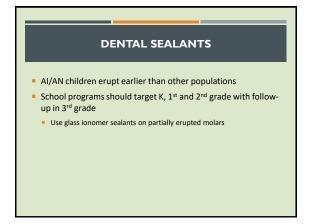


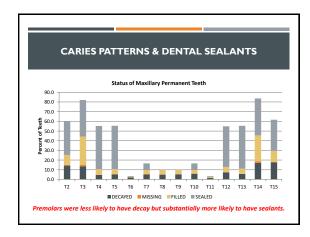


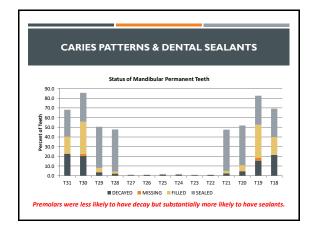












CARIES PATTERNS & DENTAL SEALANTS

- Focus additional efforts on sealing permanent molars
- Question to consider ...
 - Is it cost effect to seal premolars?