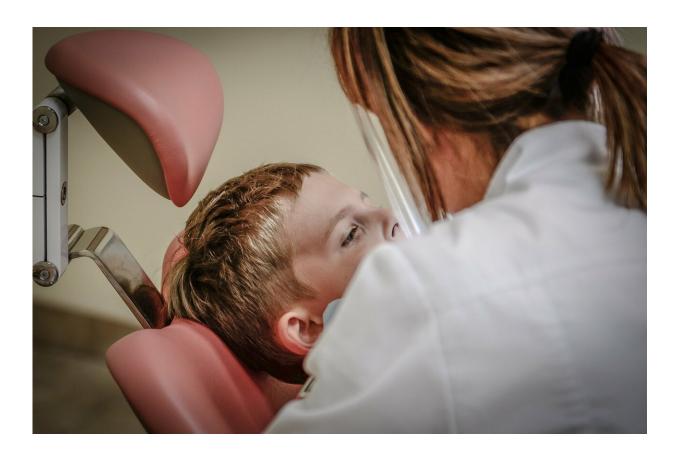


Oral health needs among youth with a history of foster care

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According to estimates from the Children's Bureau, an agency within the U.S. Department of Health and Human Services, there were 673,000 children in or entering foster care in the United States in 2019.



Data from the Minnesota Department of Human Services say that approximately 15,300 children experienced foster care in 2019. Minnesotan children of color were overrepresented compared to the general population, with Native American children 18 times more likely and Black children three times more likely to experience foster care than white children.

Most children in the foster care system have medical and dental coverage through Medicaid. However, despite mandatory state <u>dental</u> <u>coverage</u>, <u>children</u> in foster care face significant barriers to accessing oral <u>health</u> care. One of the largest obstacles is finding a dental provider who takes Medicaid or the Children's Health Insurance Program.

A new study from the University of Minnesota published in *The Journal of the American Dental Association* compared the self-identified oral health needs and access to dental care among <u>youth</u> who have and have not experienced foster care. The data was drawn from the 2019 Minnesota Student Survey, a statewide survey of public-school students in grades 5th, 8th, 9th and 11th. Youth with a history of foster care were compared to youth with no history of foster care on seven oral health indicators.

Youth were asked whether or not they had experienced five types of dental problems in the past 12 months:

- Toothaches or pain;
- Decayed teeth or cavities;
- Swollen, painful, or bleeding gums;
- Could not eat certain foods because of a dental problem;
- Missed one or more school days because of a dental problem.

If youth reported any dental problems, they were then asked if this dental health issue was treated by a dentist and when they last had an



appointment at a dental office for a check-up, exam, teeth cleaning or other dental work. Finally, they were asked about routine dental care: when was the last time they saw a dentist for a check-up, exam, or teeth cleaning or other dental work.

"To our knowledge, this study is the first in the United States to survey youth with a history of foster care about their <u>oral health care</u> needs using their own words," said study co-author Elise W. Sarvas, a clinical associate professor in pediatric dentistry at the U of M School of Dentistry. "We found that compared to their peers, youth with a history of foster care have self-identified dental needs, including issues with pain, and they have less access to a dentist to address these needs."

Specifically, the study presented that:

- Youth with a history of foster care were more likely to report each of the five dental problems and less likely to report receiving dental care, compared to their peers with no history of foster care;
- Approximately 44% of youth with a history of foster care reported at least one dental problem, compared to 32.2% of youth with no experience of foster care;
- Youth with a history of foster care had lower odds of seeing a dentist for a dental problem (58.2% vs. 71.2%) or for routine dental care (69.6% vs. 84.4%), than their peers with no history of foster care.

"There are likely a number of reasons why youth with a history of foster care have more dental problems relative to their peers," said co-author Rebecca J. Shlafer, an assistant professor in the U of M Medical School. "Compared to their peers, foster youth in this sample were more likely to report living in households experiencing poverty. "Dentists should recognize the oral health concerns of this group of kids in the context of



their special health care needs and be prepared to render appropriate care."

More information: Elise W. Sarvas et al, Oral health needs among youth with a history of foster care, *The Journal of the American Dental Association* (2021). DOI: 10.1016/j.adaj.2021.03.008

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