# THE SMILE SURVEY

### ESSENTIAL DATA ON CHILDREN'S ORAL HEALTH STATUS IN WASHINGTON

The <u>Smile Survey</u> is a public/private partnership that includes the Washington State Department of Health (DOH), the Washington Office of Superintendent of Public Instruction, local health jurisdictions (LHJs), dental providers, and funding and planning support from <u>Arcora Foundation</u>. Usually conducted every five years, dental providers perform screenings on children in pre-k, kindergarten, second and third grade in communities across the state. The data provides a point in time look at rates of treated and untreated decay, including rampant decay, and application of dental sealants, as well as trends over the history of the survey. DOH and a number of LHJs collect and analyze the data and publish the results. For example, here are the <u>2015-16 Washington State Smile Survey</u> and the <u>2015-16 King County Smile Survey</u> results.

The Smile Survey started during the 2022/23 school year and will conclude in the 2023/2024 school year. This handson data collection activity will provide much-needed insight into the current oral health status of Washington children, including the impacts of the pandemic and access to dental care. If your school is selected to participate in this important survey, the DOH Oral Health Program and Arcora Foundation appreciate your approval and your support.

## IMPACT OF THE SMILE SURVEY

The Smile Survey (the Basic Screening Survey in Washington) is the most comprehensive source of children's oral health surveillance data in our state, and is a go-to resource for policy-makers, the State Board of Health and oral health programs like <u>Access to Baby & Child Dentistry</u> (ABCD), <u>Local Impact Networks</u>, and the medical-dental integration initiative <u>MouthMatters</u>.

The Smile Survey gathers data on children from a diversity of racial and ethnic identities, income levels, and geographies. The Smile Survey reports disaggregate data by age, race/ethnicity, language spoken at home, and family income. The most recent Smile Survey showed positive trends in a number of areas. For example, untreated decay declined significantly among preschoolers and third graders from low-income households and among all racial and ethnic groups when compared to the 2005 Smile Survey.

#### **BIG DROPS IN UNTREATED DECAY**

HEAD START PRESCHOOLERS

**DOWN 35%** 



# DECAY DECREASED AMONG EVERY MAJOR RACIAL/ETHNIC GROUP SINCE 2005\*



American Indian/ Alaskan Native

15%

Hispanic 2%

However, the 2016 results also point to persistent inequities: Hispanic and American Indian/Alaskan Native children had a 50% higher rate of decay compared to their white peers, and third grade children from low-income households had twice the rate of rampant decay as children from higher-income households, as two examples. This Smile Survey data informed <a href="SHB 2905">SHB 2905</a> from the 2020 Legislative Session, which directs additional outreach funding to local ABCD programs with the goal of addressing racial and ethnic inequities.

#### **HEALTH DISPARITIES ARE WIDESPREAD**



50% HIGHER
Hispanic and American
Indian/Alaskan Native
children have a 50% higher
rate of decav.\*

\*Compared to White children

**2X** 

Third grade children from low-income households suffer from rampant decay at twice the rate of children from higher-income households.





