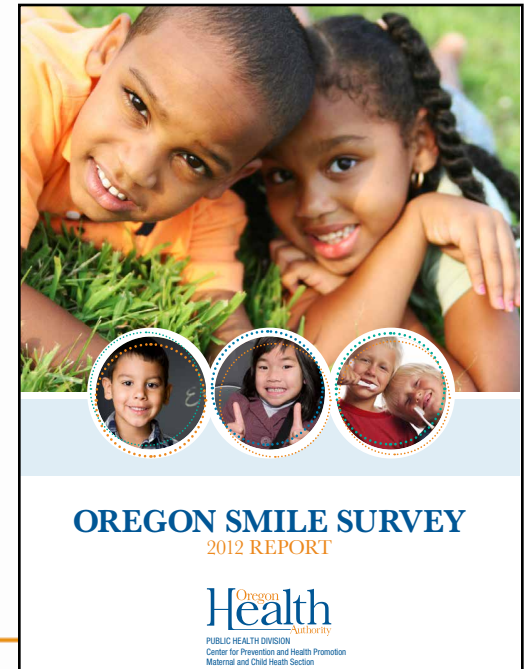


# Oregon Smile & Healthy Growth Survey

- Public health data collection tool to monitor the oral health and overweight/obesity status of Oregon children in 1-3 grades
  - Prevalence data (single point-in-time survey)
- These health problems can contribute to increased absenteeism, poor school performance, poor self-esteem, and less success later in life
- The survey is the *only* one of its kind for Oregon children
- Results help guide efforts to reduce oral health problems and childhood overweight and obesity around the state
  - Program planning and funding
  - Policy changes



# 2017 Survey Design Basics

- 7-region sampling approach versus 6 geographic regions
  - At least 17 or more schools surveyed per region
- Random cluster sampling – each school is a “cluster” of students
- Three classrooms in each school were surveyed:
  - One each of 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> grade
- Opt-out format
- Collected data during the 2016-17 and 2017-18 school years:
  - Oral health screening
  - Height and weight measurements for BMI calculation

# 2017 Survey Design Basics

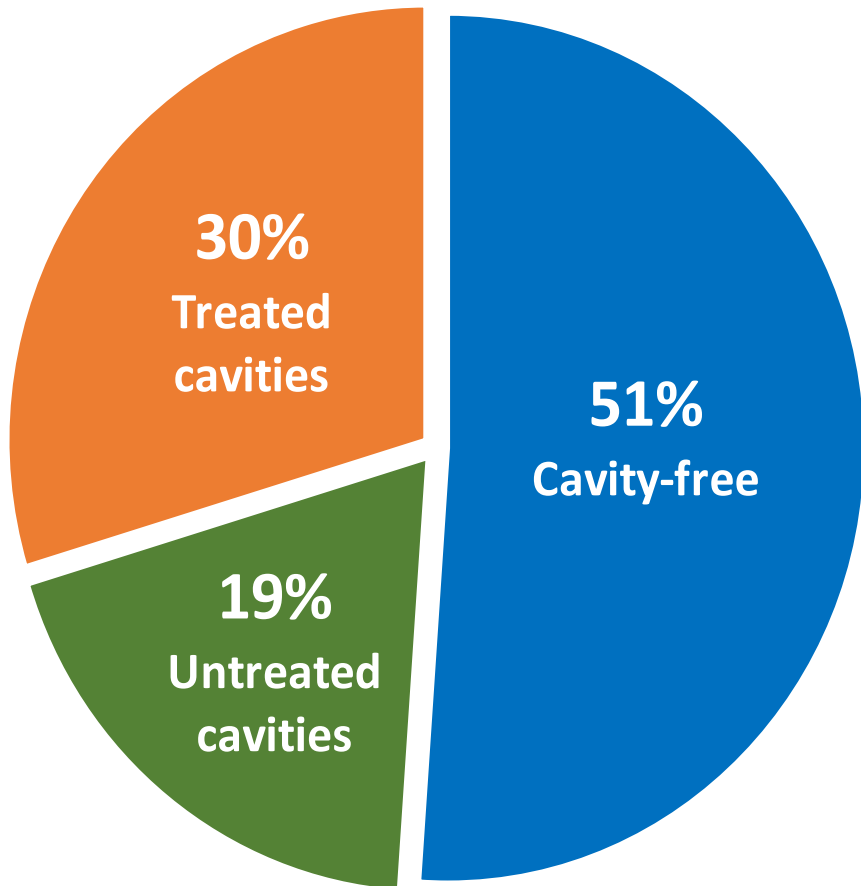
- Collaborated with Oregon Department of Education (ODE) to get some demographic data directly from them:
  - National School Lunch Program participation
  - Language spoken at home
  - Race/ethnicity
- Sample Sizes:
  - Oral health: 8,008 students
  - Healthy weight: 7,902 students
- Publications expected by summer 2019

# Limitations of the Survey

- Data collected is representative of the state of Oregon and specific regions of the state
- Data only captures 6- to 9-year-old children
  - Other age groups are not included in the survey
- Screening versus Diagnosis – screening will underestimate disease
- Does *not* show the effect of any particular intervention
  - Cannot compare decay rates with community water systems with optimally fluoridated water

# 2017 Oregon Smile Survey Data

Cavities\* among children 6-9 years old,  
Oregon, Smile Survey 2017



**49%** HAD A CAVITY

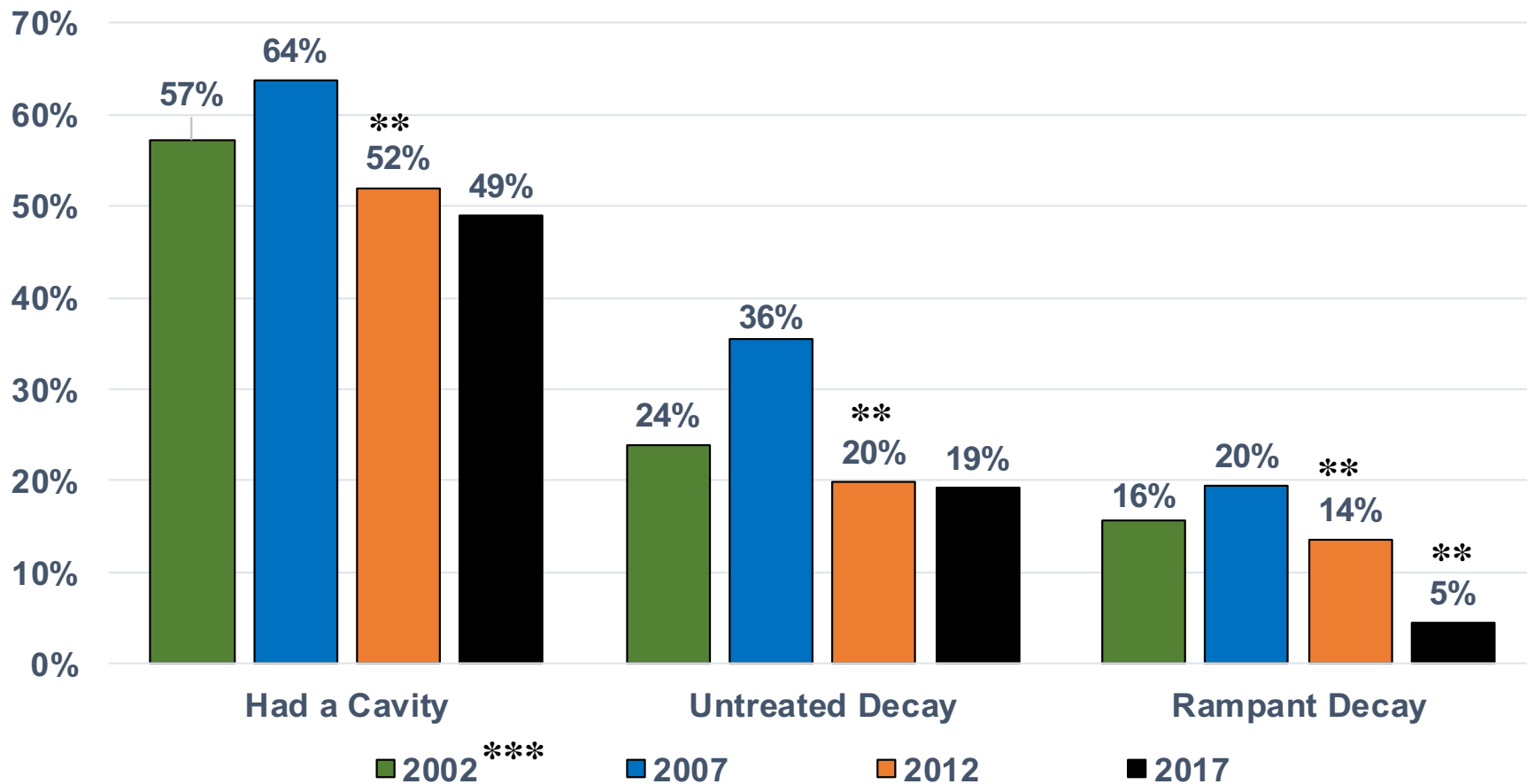
**1 in 2**  
CHILDREN AGE 6 TO 9 YEARS OLD  
HAVE ALREADY HAD A CAVITY

CAVITIES ARE **100%**  
**PREVENTABLE**

\* Primary and permanent teeth  
Publication expected by summer 2019

# 2017 Oregon Smile Survey Data

Oral health status,\* children 6-9 years old, Oregon,  
2002 – 2017 Smile Surveys



Publication expected by summer 2019

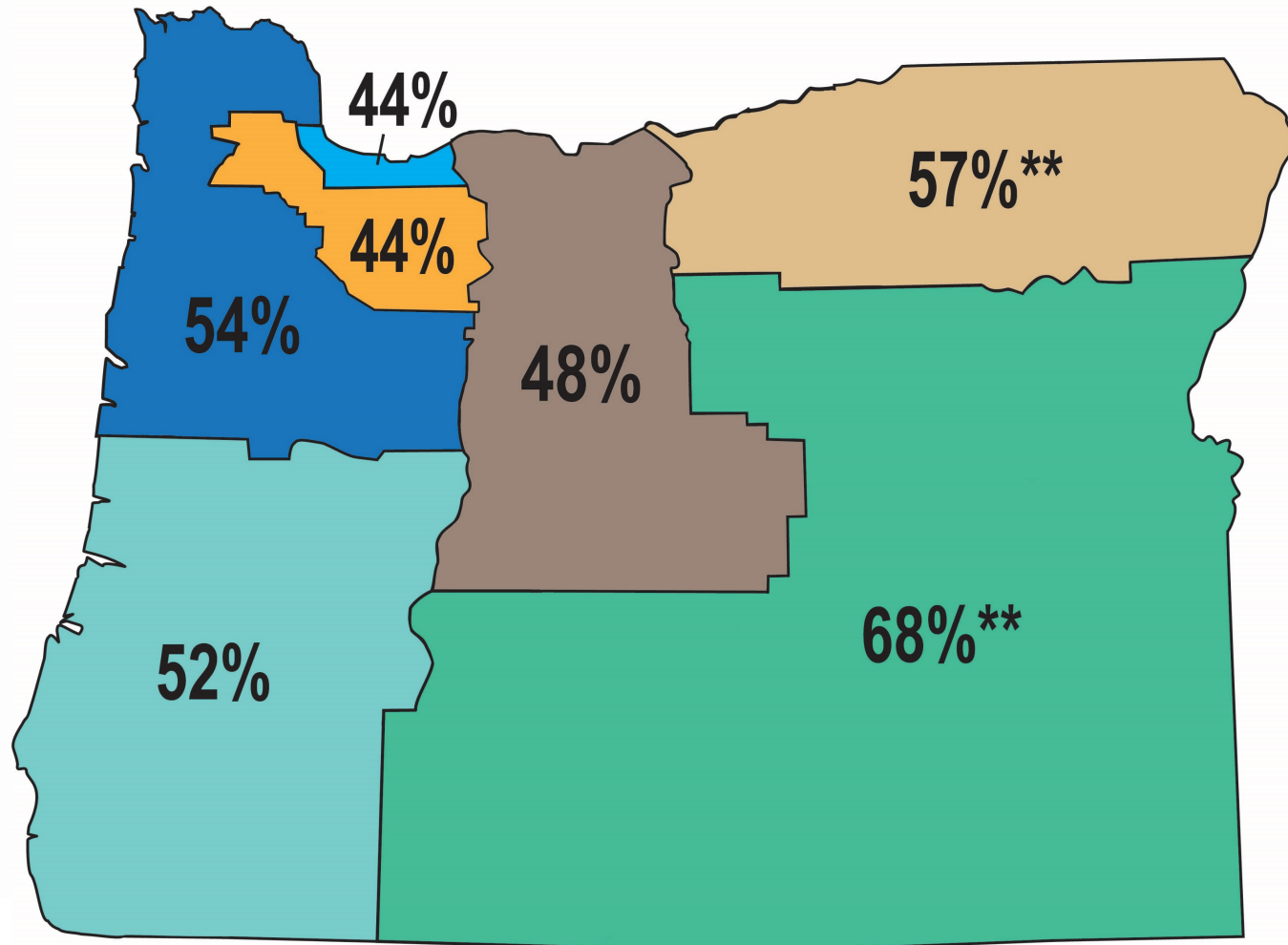
\* Primary and permanent teeth

\*\* Statistically significant change from previous survey

\*\*\* Methodology was different (opt-in versus passive)

# 2017 Oregon Smile Survey Data

Cavity rates\* by geographic region, Oregon, Smile Survey 2017



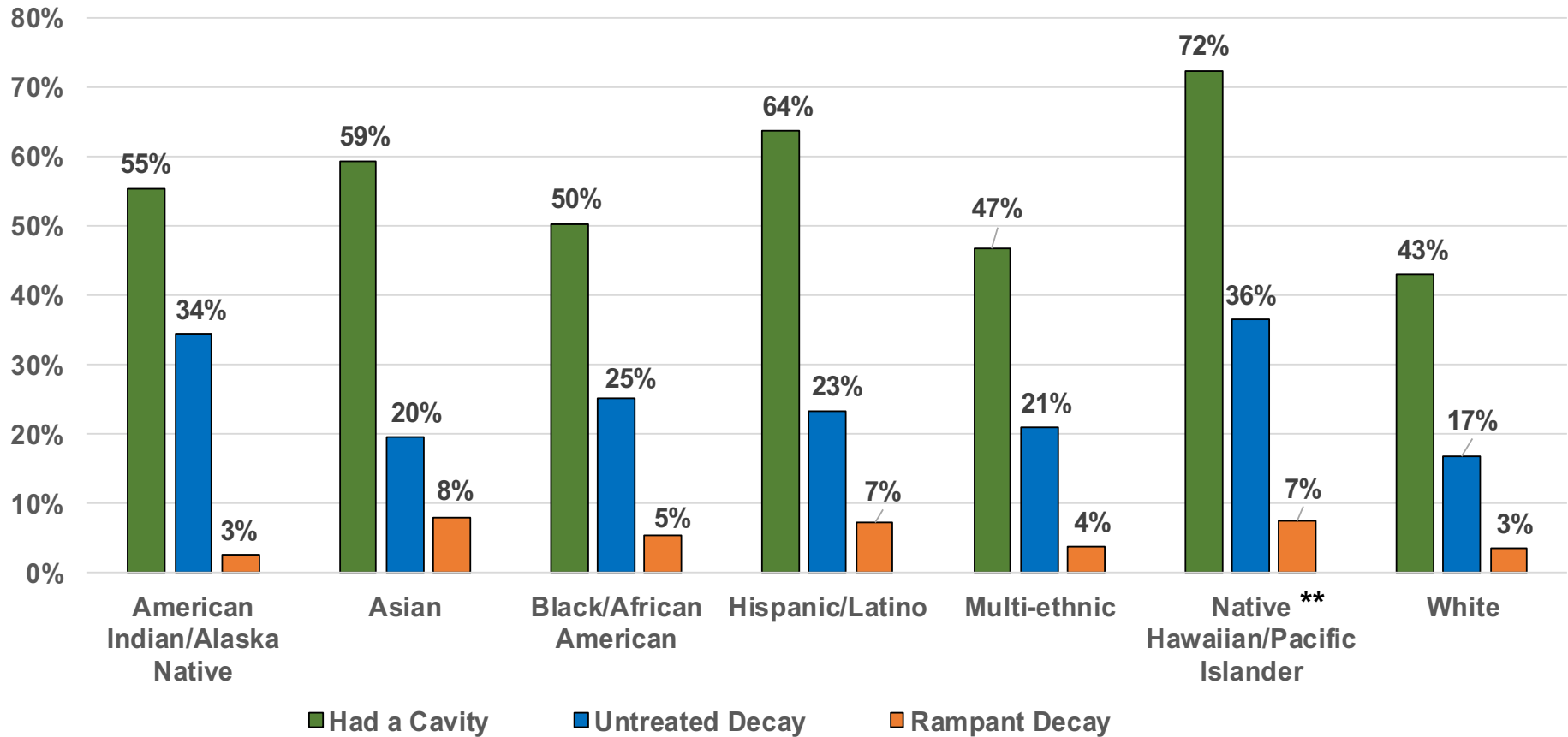
Publication expected by summer 2019

\* 6- to 9-year olds, primary and permanent teeth

\*\* Statistically different from the statewide average of 49%

# 2017 Oregon Smile Survey Data

Oral health status by race/ethnicity,\* children 6-9 years old,  
Oregon, 2017 Smile Survey



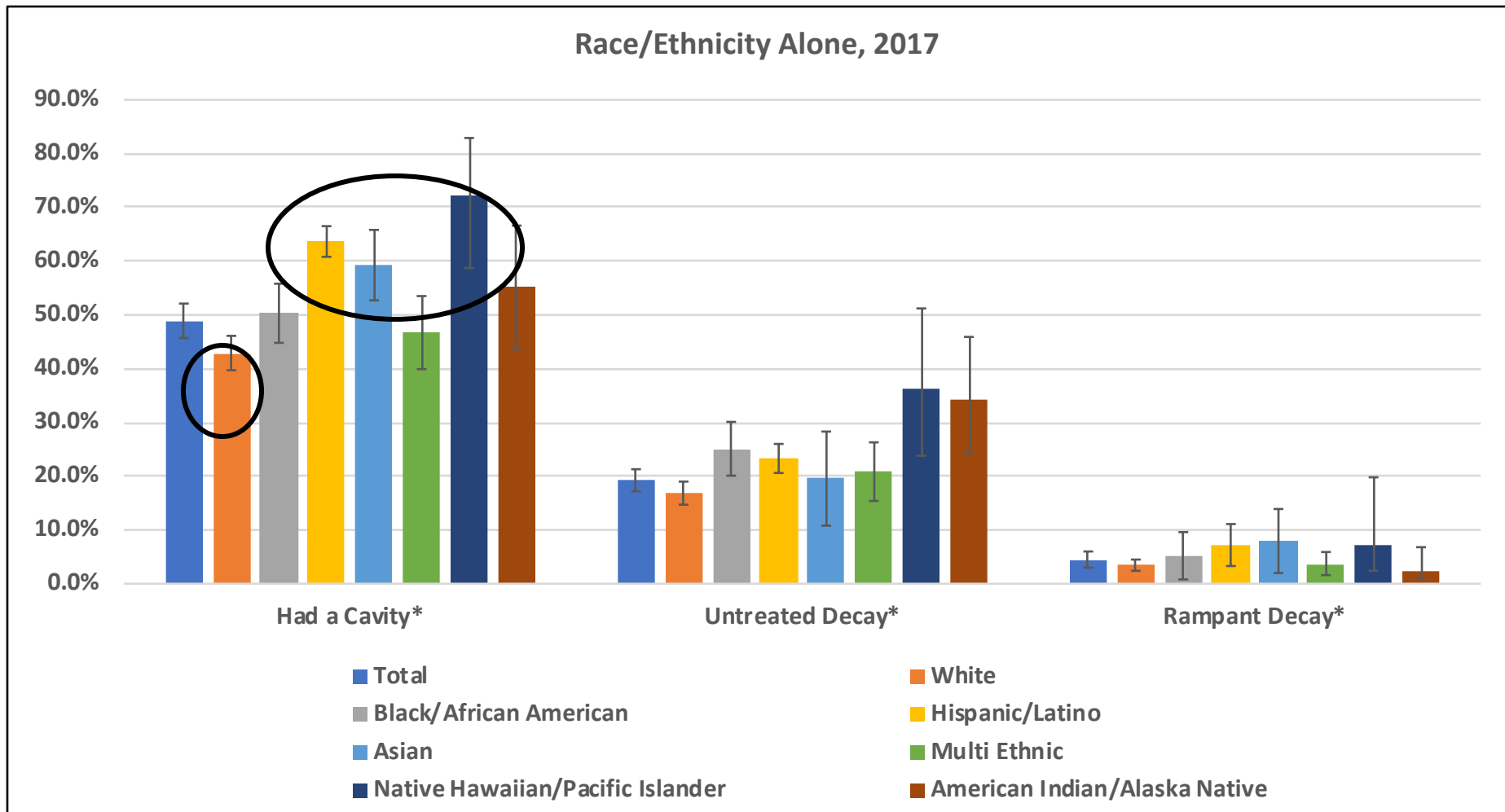
Publication expected by summer 2019

\* Primary and permanent teeth

\*\* This number may be statistically unreliable due to low sample size and should be interpreted with caution

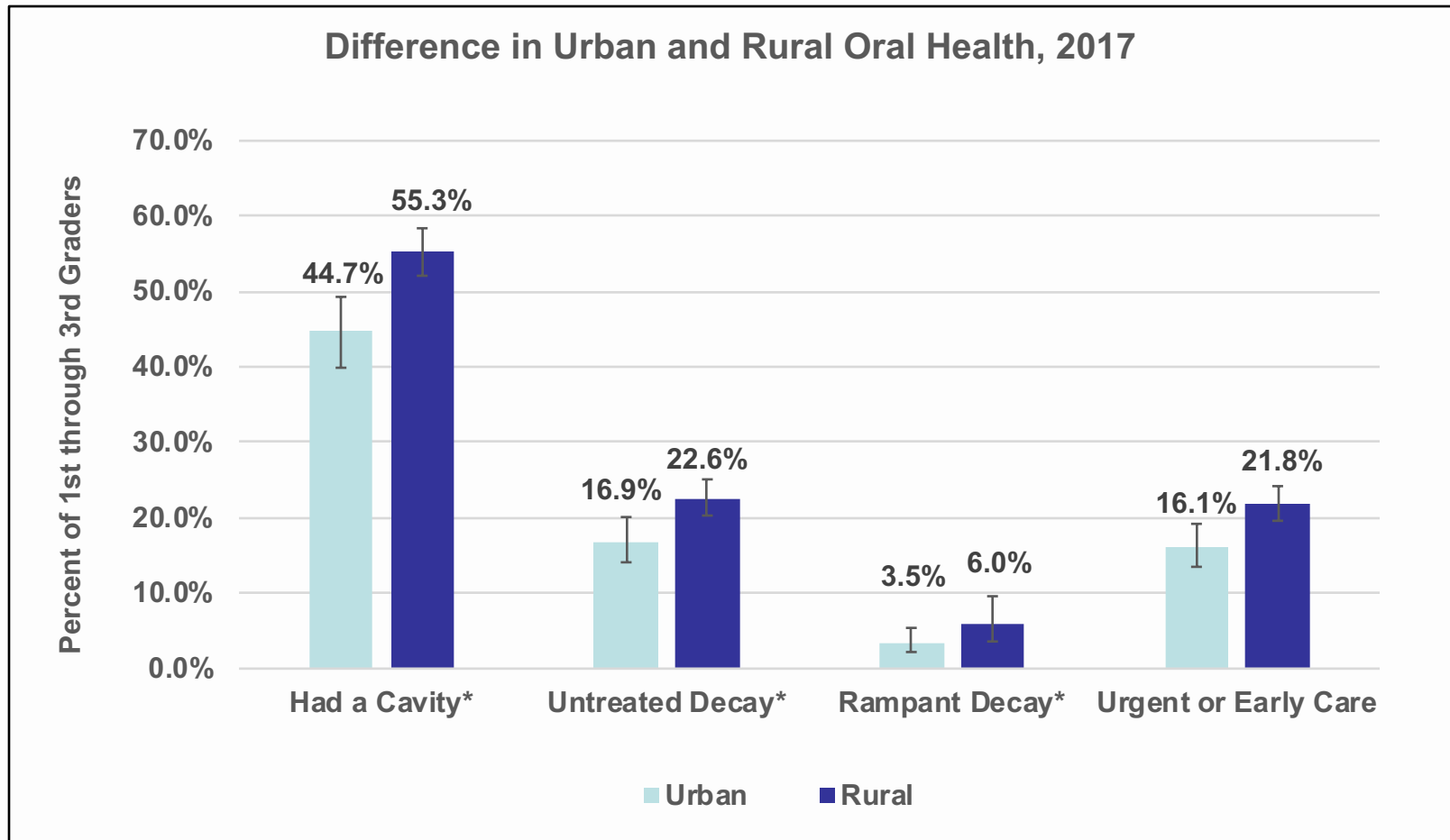


# 2017 Oregon Smile Survey Data



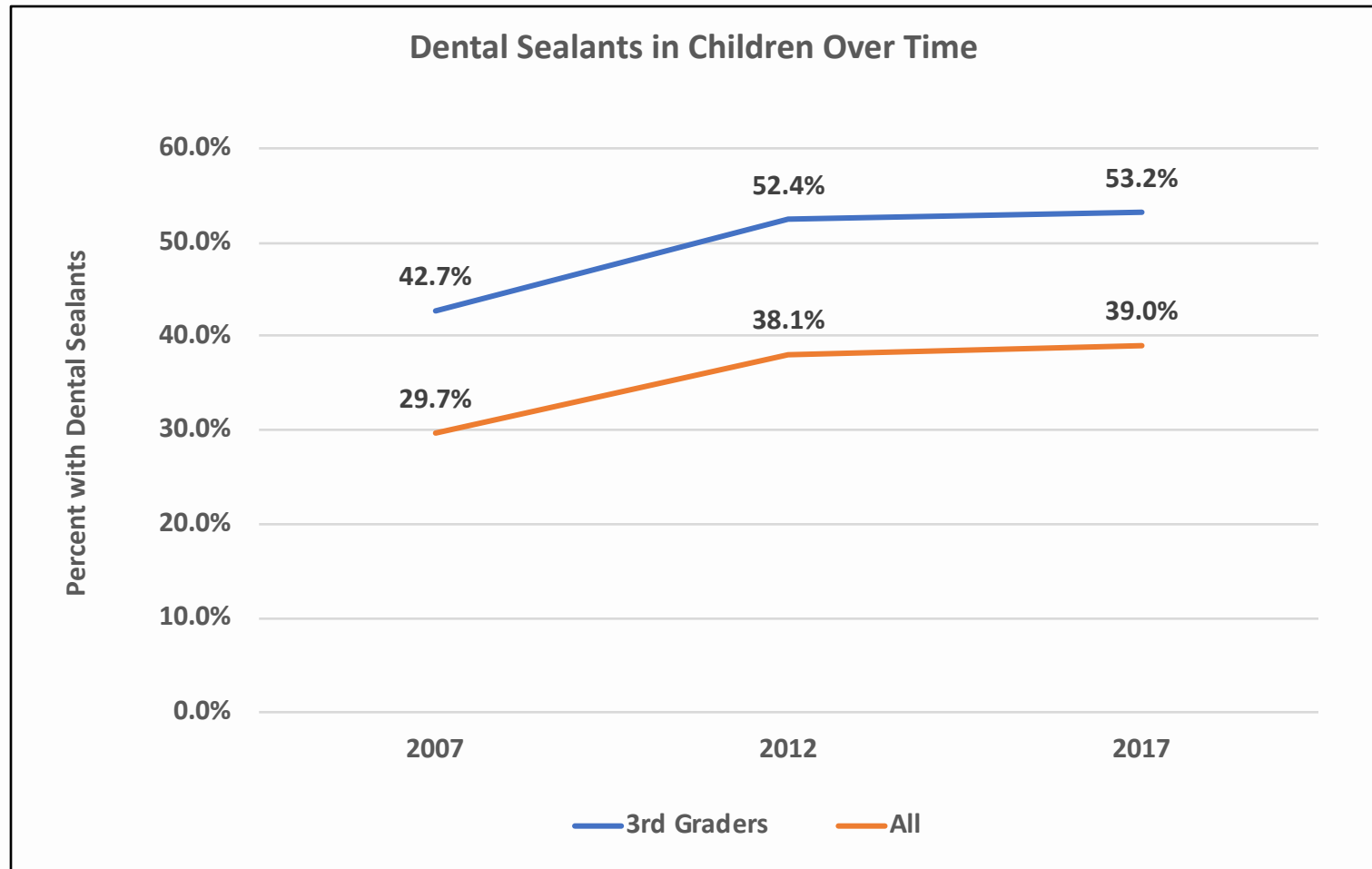
Publication expected by summer 2019

# 2017 Oregon Smile Survey Data



Publication expected by summer 2019

# 2017 Oregon Smile Survey Data



Publication expected by summer 2019

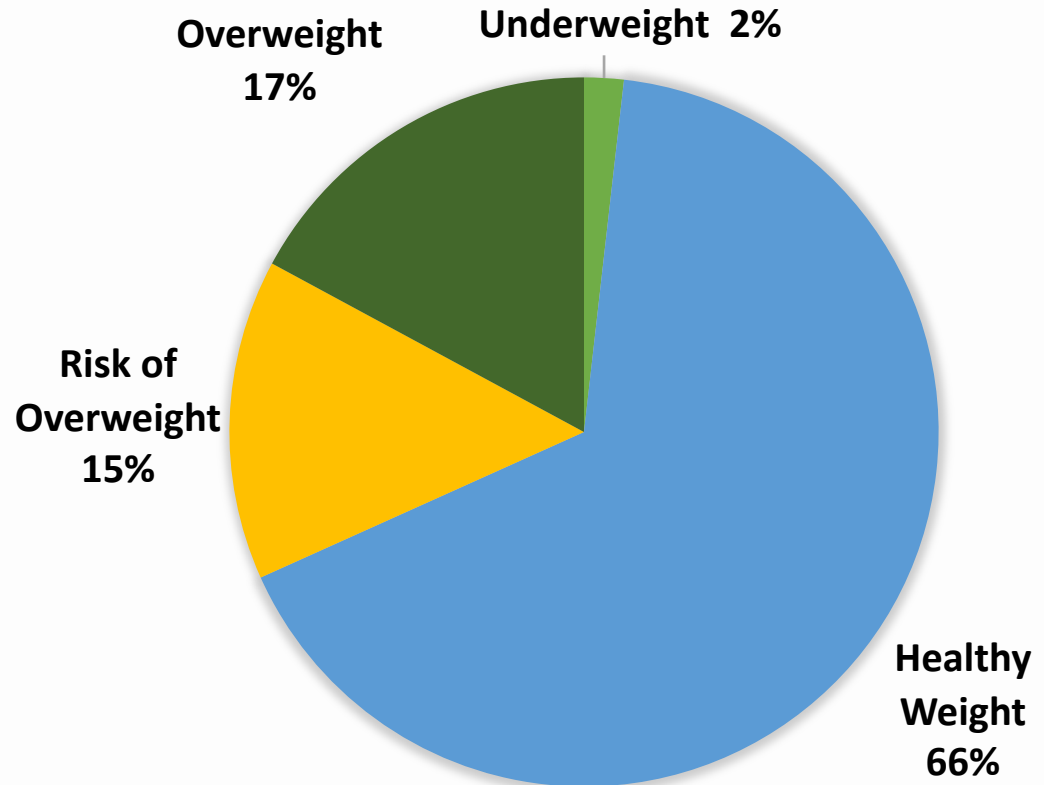
# 2017 Healthy Growth Survey Preliminary Data

> 95th percentile  
– Overweight

85th to < 95th  
percentile – Risk  
of overweight

≥ 5th to < 85th  
percentile –  
Healthy weight

< 5th percentile –  
Underweight



BMI-for-age, Oregon 1st - 3rd Graders

