



# Commission on Native Hawaiian Children - Regional Hearing - Panel 1: Physical, Mental and Behavioral Health

Presented By

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President & CEO

Hawaii Dental Service (HDS)

# Oral Health of Native Hawaiian Children

**Hawaii's children have the highest prevalence of tooth decay in the United States, particularly among Native Hawaiian and Pacific Islander populations.**



# E Ola Mau a Mau (2021)

## *Native Hawaiian and Pacific Islander Children*

- Address oral health in connection with overall health
- Increase oral health literacy and awareness
- Develop a diversified oral health workforce, including rural areas
- Invest in prevention
- Increase access to care to decrease oral health care disparities
- Implement culturally adapted programs and practices
- Systematically improve data collection relevant to Native Hawaiian oral health

# Statistics & Trends

## *Native Hawaiian and Pacific Islander Children*

1. Hawaii has the **highest prevalence of tooth decay** among third graders in the United States.
  - More than 7 out of 10 third graders (71%) are affected by tooth decay; substantially higher than the national average of 52%.
2. Almost **1 out of 4 third graders (22%) in Hawaii has untreated tooth decay** demonstrating that many children are not getting the dental care they need.
3. About **7% of Hawaii's third grade children need urgent dental care because of pain or infection.**
  - If applied to all children in kindergarten to sixth grade, more than 6,600 children in Hawaii's public elementary schools experience pain or infection due to dental disease on any given day.
4. **More than 60% of children in Hawaii do not have protective dental sealants**, a safe, simple, cost-effective clinical intervention to prevent tooth decay in molar teeth.

# Statistics & Trends (cont'd)

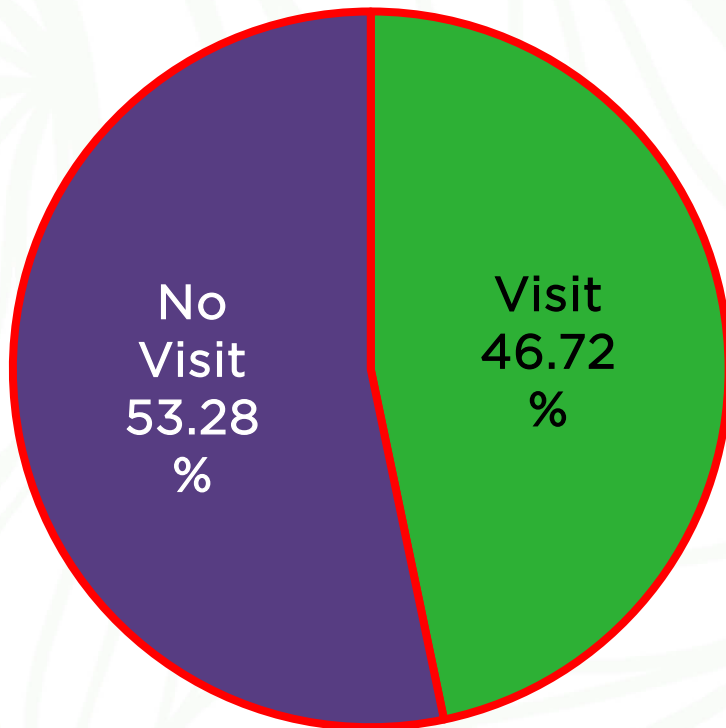
## *Native Hawaiian and Pacific Islander Children*

5. There are **significant oral health disparities by income, as well as by race/ethnicity**, among third graders in Hawaii.
  - In Hawaii, low-income, Micronesian, **Native Hawaiian**, Other Pacific Islander and Filipino children **have poorer oral health outcomes**.
6. Third graders living in **Kauai, Hawaii, and Maui counties are more likely to have experienced tooth decay** than children living in Honolulu County.
7. **Only 11%** of Hawaii's residents are **served by a fluoridated community water system** (primarily military).

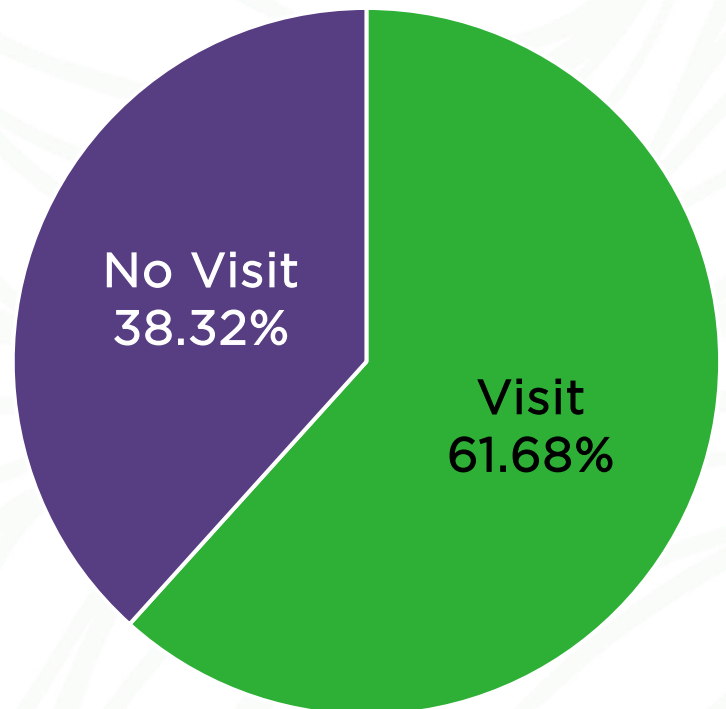


# 10 Year Averages (2013-2022): Dental Visits

Zip Codes **with 20% or More** Native Hawaiians



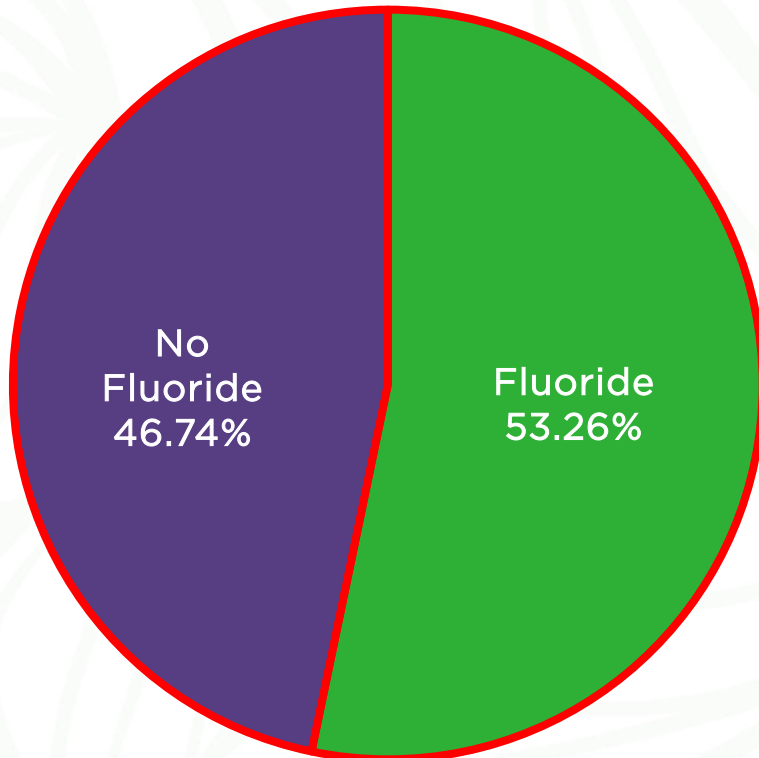
Zip Codes **with less than 20%** Native Hawaiians



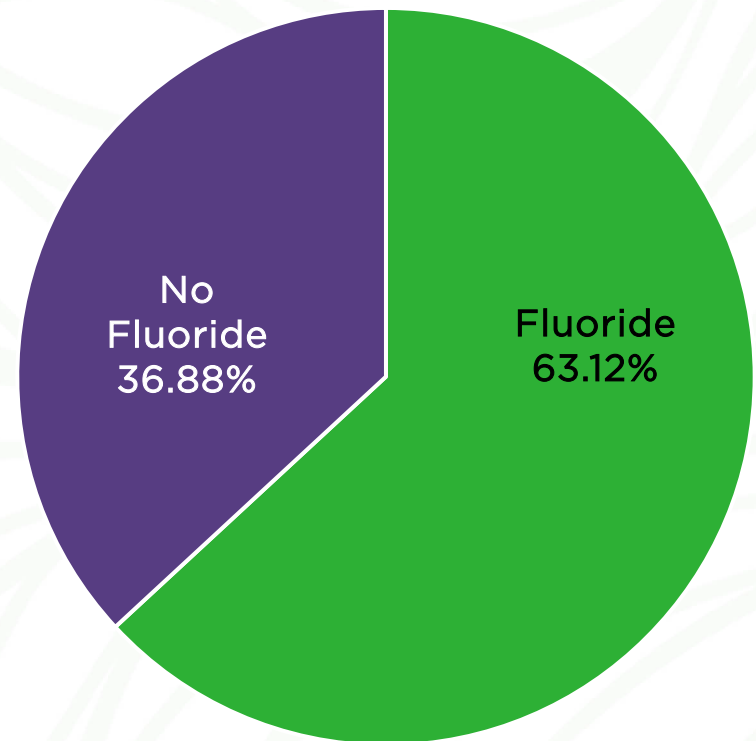
*\*under the age of 18*

## 10 Year Averages (2013-2022): Fluoride for Kids\*

Zip Codes **with 20% or More** Native Hawaiians

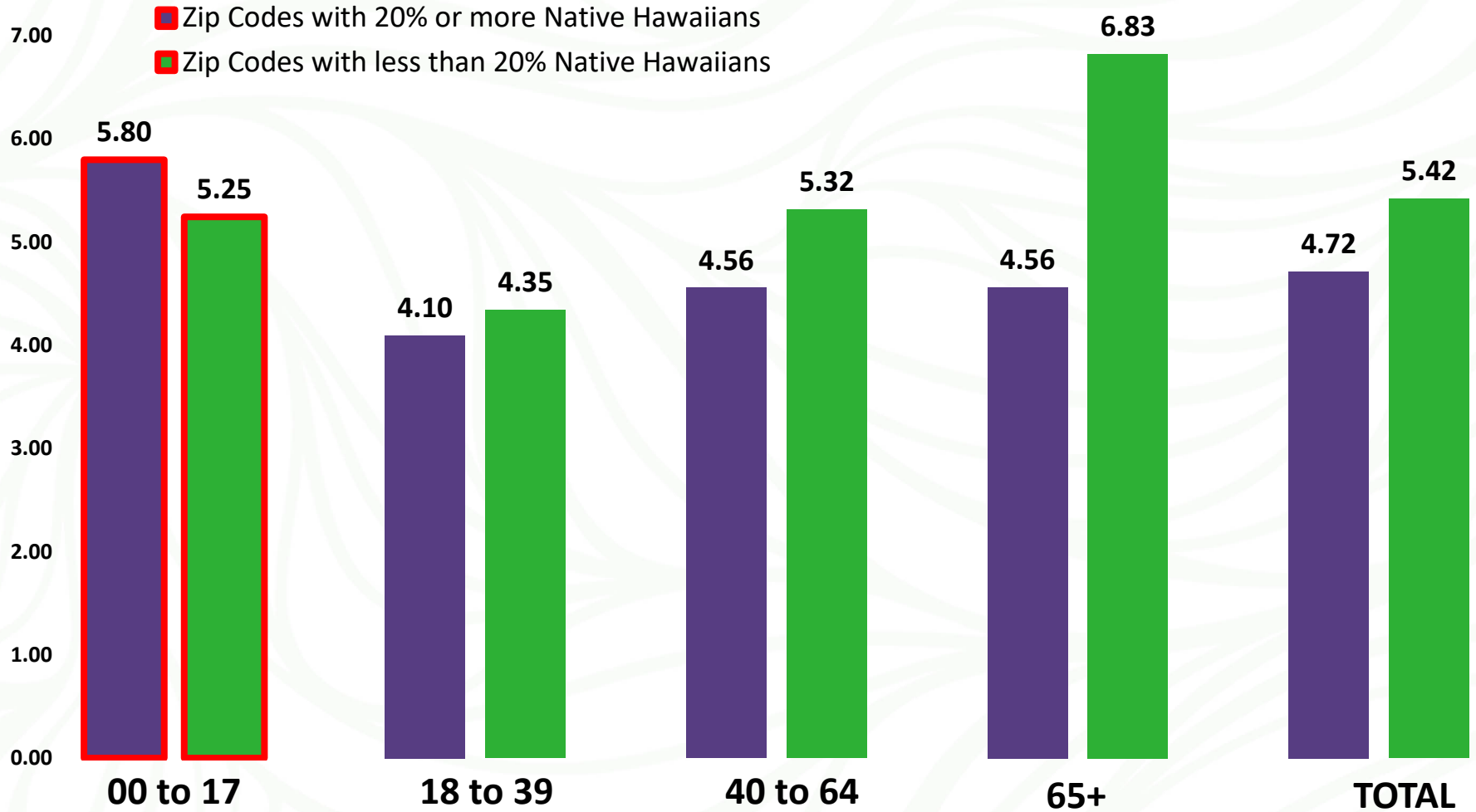


Zip Codes **with less than 20%** Native Hawaiians



# 10 Year Findings: Restorations\* Per Member

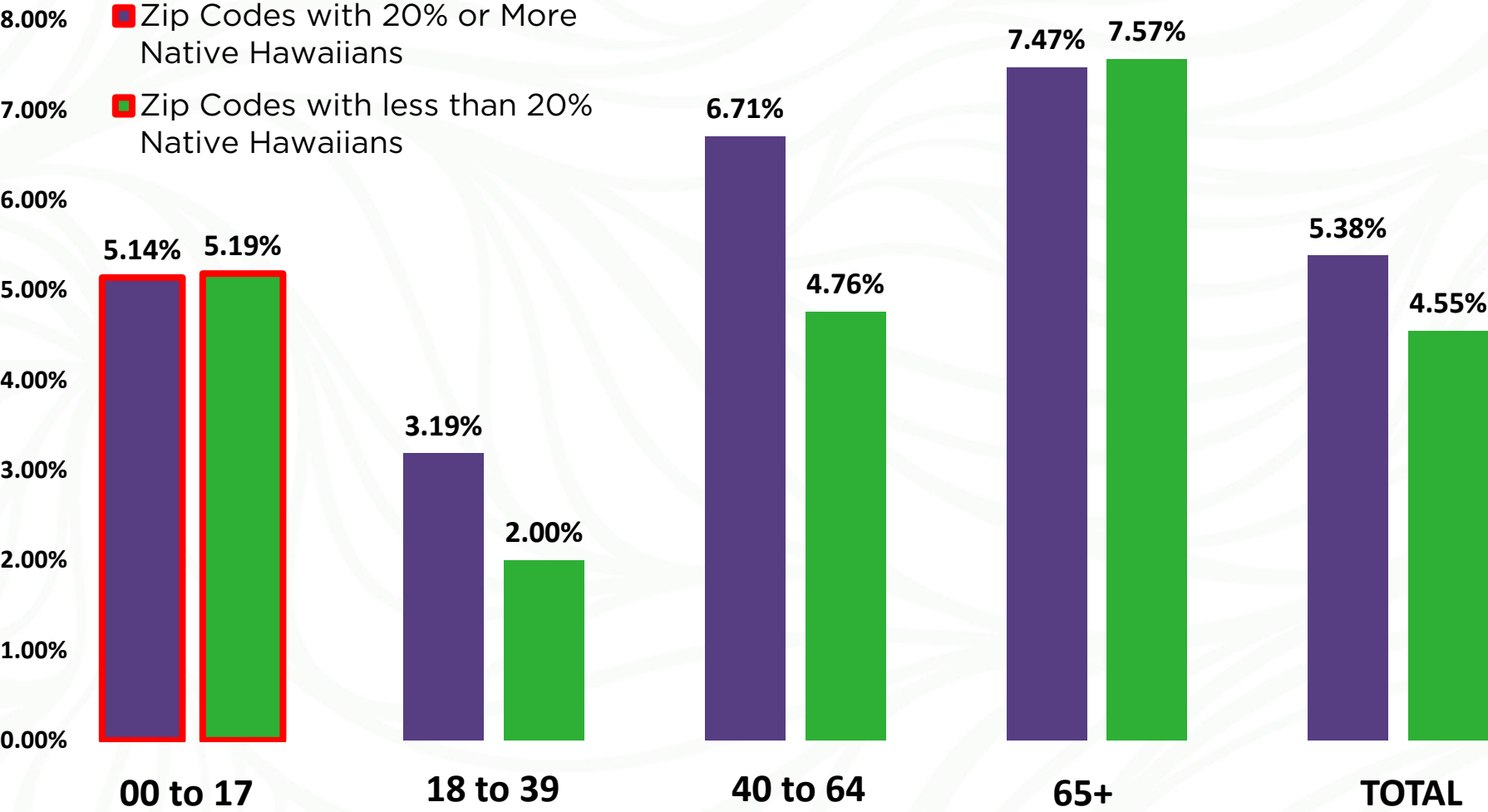
*\*Crowns and Fillings*





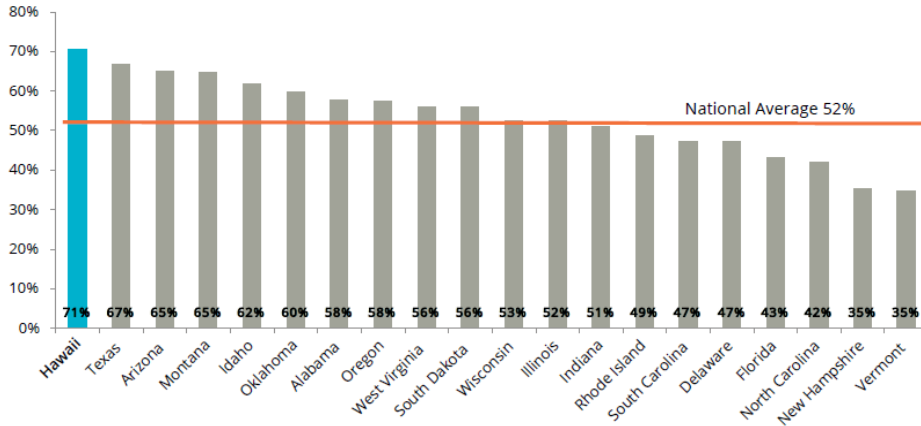
# 10 Year Averages (2013-2022): Extractions\*

*\*extractions exclude wisdoms*



- Hawaii has the highest prevalence of tooth decay among third graders in the United States. More than 7 out of 10 third graders (71%) are affected by tooth decay; substantially higher than the national average of 52%.

Percent of 3rd Graders with Tooth Decay Experience by State



State data source: Centers for Disease Control and Prevention, Oral Health Data, 2012-2015  
National data source: National Health and Nutrition Examination Survey (NHANES) 2005-2010

**Hawaii needs more primary prevention programs.**

This suggests that *Hawaii needs more primary prevention programs*, which may include parent and caregiver education, dental sealants and topical fluoride applications. Hawaii is the state with the lowest percent of its population served by fluoridated water (11% vs. 75% nationally). Because of this, Hawaii's children must access fluoride from other, more costly, sources if they are to receive the tooth decay prevention benefits of fluoride.

**Native Hawaiian Children – Decay Experience Percentage: 80.4 (76.7 - 84.2)%**



# The HDS Foundation

- Dentist by One
- Seal Away Decay
- Gear Up Mouthguards
- Kupuna Smiles



DELTA DENTAL

**HDS**  
Hawaii Dental Service

**HDS  
Tooth Fairy  
Fun Day**

**Sunday, February 26**  
Hawaii Children's Discovery Center | 10 am to 2 pm

2. Almost 1 out of 4 third graders (22%) in Hawaii has untreated tooth decay demonstrating that many children are not getting the dental care they need.



**Native Hawaiian Children** – Untreated Decay Experience Percentage: **28.5 (22.3 - 34.6)%**

Develop services/policies that encourage use of the dental care system and increase access to dental care.

Hawaii mirrors the national average of untreated tooth decay (22% and 23% respectively). Substantial treatment is being performed by Hawaii's dentists to offset the much higher prevalence of disease in the state. While this is encouraging, expensive treatment and transportation costs for children living on neighbor islands continue to mount, costing individuals, families, and the State considerably more time and money. More focus on prevention is needed.

# Dental Benefits for Native Hawaiian Underserved Communities

HDS retains and builds select supplemental networks with medical partners and as the state Medicaid third-party administrator (TPA).

- HDS Employer-based Plans and Individual (and Family) Plans
- HDS Supplemental Medicaid Network
- **HDS Medicaid – State TPA for Child/Adult Medicaid (Med-QUEST)**



# Total Health Plus

## Supplemental Benefits

HDS offers Total Health Plus to select employer groups and individual dental plan members diagnosed with or have a history of:

- Diabetes
- Cancer
- Oral Cancer
- Stroke and Heart Problems
- Kidney Failure
- Medical Risk for Cavities
- Organ Transplants
- Sjögren's Syndrome
- Pregnancy



## Total Health Plus

supplemental benefits designed for members in need of extra care

3. About 7% of Hawaii's third grade children need urgent dental care because of pain or infection. If applied to all children in kindergarten to sixth grade, more than 6,600 children in Hawaii's public elementary schools experience pain or infection due to dental disease on any given day.



**Native Hawaiian Children – Need Urgent Care**  
Percentage: **6.5 (2.1 - 10.9)%**

Develop community-based screening and referral programs that include a case management component so that children in need have better access to dental care.

Complete diagnostic dental examinations data was not available, and instead is based on dental screenings. This is a quick look inside the mouth with a dental mirror, without x-rays and the more advanced diagnostic tools. Some problems were likely missed and actual findings underestimate the number of children needing care.

**Dentist by One**

**Infant & Child Dental Referral**

This referral card can be used for children of any age.

Today's Date: \_\_\_\_\_  
 Child's Name: \_\_\_\_\_  
 Child's Birth Month/Year: \_\_\_\_\_

Referred by: \_\_\_\_\_  
 Office phone: \_\_\_\_\_  
 Please check one:  
 Physician     Lactation Specialist  
 Dentist        Teacher / Daycare  
 Nurse          Other: \_\_\_\_\_

Please select at least one:  
 This child needs a dental home for regular checkups.  
 This child is being referred for a specific issue:

Notes:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**First Tooth = First Dental Visit**  
 Call to schedule an infant /child dentist visit

Doctors and dentists recommend you take your baby to the dentist before their first birthday.

- Baby teeth are important!
- Baby teeth help your child to chew, speak, and smile
  - Cavities on baby teeth can be painful
  - Cavities on baby teeth can transfer to permanent teeth

Give your child a great start to a lifetime of healthy teeth by making that first appointment!

**At the first check-up, the dentist will:**

- Check your child for cavities or problems
- Show you how to clean your baby's teeth
- Discuss how sharing germs can cause cavities
- Discuss how your choices about sugar affect cavities
- Talk about nursing and other infant issues

**Cavities on baby teeth can grow quickly!**



**To find a dentist, see map on back**



# Referral & School-based Programs

## Our Oral Health Initiatives



As part of this program, we have an **Infant & Child Dental Referral sheet** for pediatricians to refer parents (during well child visits) to take their child to the dentist by their first birthday.

**HDS Participating Pediatric Dentists**

**Central**

- (Q) AIEA PEDIATRIC DENTAL Aiea 808-488-0100
- (Q) ANAHEA PEDIATRIC DENTAL Aiea 808-487-1000
- CLYDE WICHROM DDS MS INC Aiea 808-484-4659
- (Q) DENTISTRY FOR KIDS Pearl City 808-484-8881
- (Q) HAWAII FAMILY DENTAL Milani 808-423-7888
- HONULU SMILES Milani 808-445-6272
- (Q) KIDSHINE DENTAL GROUP Pearl City 808-374-8421
- (Q) OAHU PEDIATRIC DENTISTRY Pearl City 808-201-9956
- (Q) PEDIODONTIC ASSOCIATES Aiea 808-407-7933

**North Shore / Windward**

- (Q) KAHUOUI MEDICAL CENTER Kahaloa 808-388-3819
- (Q) KB CHUN AND SONS Kaha 808-261-8813
- (Q) KUII PEDIATRIC DENTISTRY Kaha 808-261-5354
- Kaneohe 808-235-3434
- (Q) KUII OLAUOHA HEALTH CENTER Kaha 808-293-2537
- (Q) PAUL TIM DOD Kaneohe 808-235-0550

**Leeward**

- (Q) CHILDREN'S DENTAL ASSOCIATES Waiapu 808-680-0097
- (Q) HAWAII FAMILY DENTAL Ewa Beach 808-883-9100
- (Q) HAWAII FAMILY DENTAL Kapolei 808-460-7945
- (Q) HAWAII KEHU DENTAL Kapolei 808-944-1038
- (Q) KEHU DENTAL Ewa Beach 808-680-9411
- (Q) KIDSHINE DENTAL Kapolei 808-374-8421
- (Q) LEENAHAW PEDIATRIC DENTISTRY Waiapu 808-495-0367
- (Q) WAIANAE COAST CORP Waianae 808-697-3496
- (Q) ALLOHA SMILES DENTAL Kapolei Blvd 808-688-9231
- (Q) CHILDREN'S DENTAL ASSOCIATES (King Street) 808-594-9889
- (Q) DENTISTRY FOR CHILDREN Punahoa St. 808-949-8411
- (Q) FIRST SMILES Woodlawn Dr 808-988-2636
- (Q) HAWAII FAMILY DENTAL Ala Moana Blvd 808-748-0973
- (Q) HONOLULU KEHU DENTAL Kapolei Blvd 808-944-1402
- (Q) KAHUI PALAMA HEALTH CENTER N.King St. 808-843-7520
- (Q) KONOIA KAHUI VALLEY (KNO) N.School St 808-791-9428
- (Q) PEDIATRIC DENTAL GROUP Kapolei Blvd 808-593-8828

**Kaimuki / Kahala**

- BLUE WHALE CHILDREN'S DENTISTRY GAYN UCHIDA DDS Waiolae Ave 808-735-BLUE (2583)
- CLYDE WICHROM DDS MS INC Waiolae Ave 808-739-0878
- (Q) DIAMOND HEAD CHILDREN'S DENTISTRY Honolulu Ave 808-715-4805 (5477)
- (Q) HAWAII PEDIATRIC DENTISTRY Waiolae Ave 808-737-0076
- (Q) PEDIODONTIC ASSOCIATES Waiolae Ave 808-735-1733

**Honolulu**

(Q) ACCEPTS MEDICAID/QUEST

See website at [HawaiiDentalService.com/DentistByOne](http://HawaiiDentalService.com/DentistByOne)

**Call Today!**

This is a list of HDS participating pediatric dentists who see babies.

Locations that accept Medicaid/QUEST are marked with (Q).

Or HDS Medicaid/CCMC can help you find a QUEST dentist. **808-792-1070**.

In addition to this list, many general dentists also see young children.

For a general/family dentist, visit our website to search for a dentist at [HawaiiDentalService.com/findadentist](http://HawaiiDentalService.com/findadentist), click the advance filter "Treats Children Under Age 1" or call HDS Customer Service at **808-529-9248**.





4. More than 60% of children in Hawaii do not have protective dental sealants, a safe, simple, cost-effective clinical intervention to prevent tooth decay in molar teeth.

Molar Tooth with Before and After Dental Sealants



BEFORE



AFTER

**Native Hawaiian Children - Dental Sealants**  
Percentage: **35.7 (31.8 - 39.7)%**

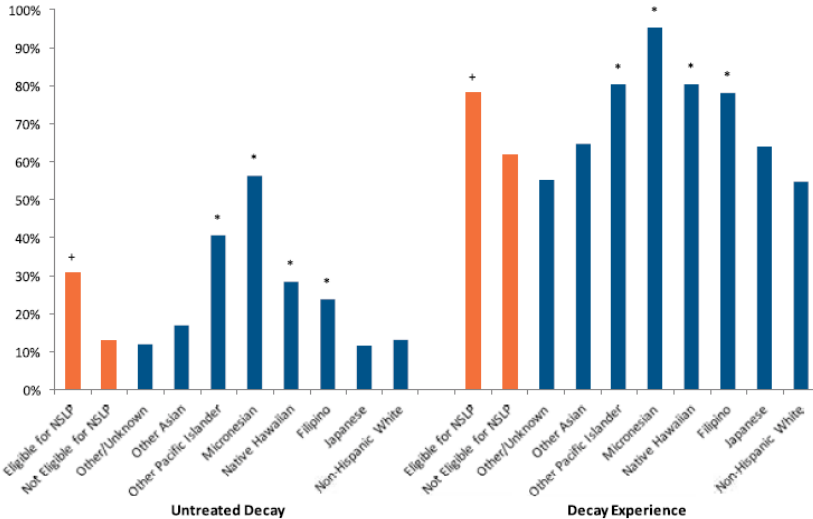
Increase access to preventive dental sealants by providing education on the importance of sealants and developing school-based sealant programs.

Sealants can be applied in a dentist's office or through school-based sealant programs that generally target children in second grade. School-based sealant programs are especially important for reaching children from low-income Native Hawaiian families who are less likely to receive private dental care.



5. There are significant oral health disparities by income, as well as by race/ethnicity, among third graders in Hawaii. In Hawaii, low-income, Micronesian, Native Hawaiian, Other Pacific Islander and Filipino children have poorer oral health outcomes.

Percent of Hawaii's 3rd grade children with untreated decay and decay experience by eligibility for the National School Lunch Program (NSLP) and race/ethnicity, 2014-2015



Develop community-based prevention programs, screening and referral services, and restorative dental care programs that target the highest risk populations.

Children eligible for NSLP are significantly more likely to have decay experience and untreated decay. In Hawaii, Native Hawaiian and Other Pacific Islanders (and lower-income children and racial/ethnic minorities) are not getting the benefit of early preventive services and are less likely to access a dentist for restorative treatment.

**Native Hawaiian Children - NSLP Eligible Percentage: 70.3 (62.8 - 77.9)%**



# HDS Foundation Grants

## Grants (10+ Years)

**Over \$12.6M to 120  
nonprofit organizations -  
400,000 lives impacted**

Waimanalo Health Center \$500,000

Aloha Medical Mission \$210,000

Hamakua Health Center \$200,000

American Heart Association \$164,920

Kokua Kalihi Valley Health Center \$150,022

Molokai Community Health \$149,988

UH Foundation Hawaii Keiki \$133,447

Community Clinic of Maui \$126,700

Na Lei Wili Area Health - Kauai \$112,690

Lanai Community Health \$50,000

Waianae Coast Health Center \$40,288

## Hui No Ke Ola Pono

**\$616,000 over 8 years**

Hui No Ke Ola Pono (on Maui) is one of five Native Hawaiian Health Systems that provide dental services, education and outreach, and target their services to the Native Hawaiians, although they serve others in the community.

### Highlights:

- As a private, nonprofit community clinic, they accept Medicaid patients.
- HDSF grants total more than \$616,000 over the past 8 years. The majority of funding supported a pilot program for Virtual Dental Home (VDH) services (teledentistry) over three years.
- Populations served through VDH are WIC (Women, Infant & Children federal program), Early Head Start (under age 3), Head Start (preschool) and Hale Makua (long-term care home).

# HDS Community Giving

## Charitable Giving

**Over \$1.1M to nonprofit organizations**

**HDS Gear Up with Mouthguards for Student Athletes** (All Public, Private, and Charter Schools, Boys & Girls Club of Hawaii, Motiv8 Foundation, UH Manoa, etc.) \$300,000+

**Hawaii Academy of Science** \$340,000 (over 3 years)

**Iolani Aina Informatics** (Genetics, Genomics Program - in partnership with Public Schools of Hawaii Foundation) \$500,000 (over 5 years)

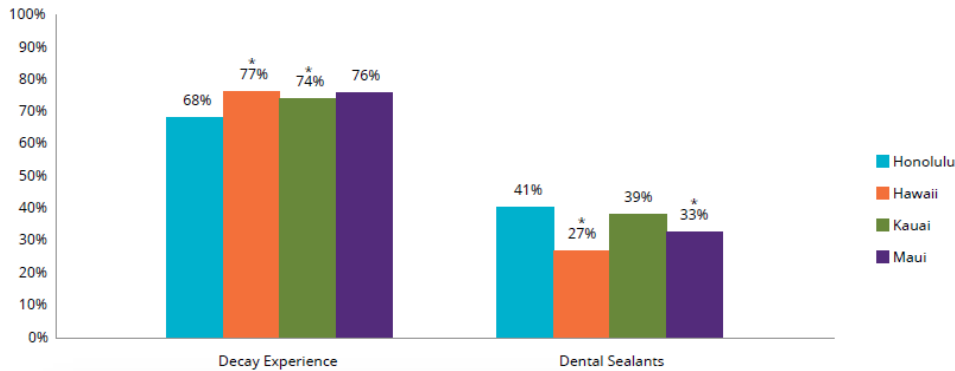
## HDS Giving Day

**\$700,000 to nonprofits in December 2022**

Kids Hurt Too Hawaii \$50,000  
Domestic Violence Action Center \$50,000  
Lanakila Pacific Foundation \$25,000  
Olelo Community Television \$25,000  
Haku Collective \$25,000  
Kipuka O Ke Ola \$50,000  
Ma Ka Hana Ka Ike Building Program \$25,000  
Kumano I Ke Ala O Makaweli \$25,000  
Molokai General Hospital \$25,000  
Ohana Pacific Foundation \$25,000  
Our Kupuna \$50,000  
Maunalua Fishpond \$50,000  
Lalakea Foundation \$25,000  
& others...

## 6. Third graders living in Kauai, Hawaii, and Maui counties are more likely to have experienced tooth decay than children living in Honolulu County.

Percent of Hawaii's 3rd Grade Children with Decay Experience and Dental Sealants by County 2014-2015



Increase access to teledentistry, improve retention of rural dentists, and provide better dentist reimbursement for Medical Assistance programs.

Children living in Kauai, Hawaii, and Maui Counties have less access to preventive oral health care.

Developing better incentives and fees for Medicaid services to build networks in rural areas and developing dental industry pipelines to retain more dentists to move to or stay in Hawaii is key.

# Partnerships & Advocacy

- **Teledentistry.com** - Increases access to care, minimizes ER inundation.
- **HDS JABSOM Endowment** - John A. Burns School of Medicine (JABSOM), will integrate oral health into the medical school's core curriculum.  
  
**Dr. Matthew Oishi** is the oral health director, a newly established part-time faculty position funded with a **\$2.25 million endowment from Hawaii Dental Service.**
- **Active member of Hawaii Oral Health Coalition** in support of pro-oral health legislation (e.g., Adult Medicaid, Sugar-Sweetened Beverage Fee, etc.)



# Impact of Good Oral Health

**Public perception is largely that tooth decay is an insignificant occurrence. If left untreated, however, poor oral health has major consequences on children:**

- **Pain:** Tooth decay can cause acute or chronic pain. Many children are not aware that teeth are not supposed to hurt.
- **Infection:** Infected teeth are reservoirs of bacteria that flood the rest of the body, leaving the child prone to many other childhood infections, including ear and sinus infections. Development of secondary infections, in more severe cases, may require emergency care or hospitalization.
- **Nutrition problems:** Chronically painful and infected teeth make chewing and swallowing uncomfortable and difficult. Children with dental disease often do not get the nutrition they need to grow.
- **Tooth and space loss:** Chronic childhood tooth decay often results in the early loss of “baby” teeth. This can result in space loss due to movement of remaining teeth into the space, leaving insufficient room for the adult teeth to come into the mouth.
- **Sleep deprivation:** Children with chronically painful teeth have trouble getting a good night’s sleep.
- **Attention problems:** Children with infected and painful teeth have a hard time relaxing, sitting still, and paying attention in class.
- **Slower social development:** Disfigured or missing teeth can lead to difficulties speaking and can negatively affect a child’s self-esteem. When a child’s front teeth are damaged or missing in their very crucial early years of development, they often can’t form words correctly.
- **Missed school days:** Children with infected and painful teeth miss more school days than other children, disrupting their educational and social experiences. One study demonstrated that children between 5 to 17 years of age in the United States missed 1,611, 000 school days due to acute dental problems – an average of 3.1 days per 100 students.
- **Missed work hours:** Parents are more likely to miss work because of their child’s dental problems.
- **Increased costs of dental care:** As tooth destruction progresses, the treatment costs for families and the State increase considerably, leaving many Native Hawaiian families choosing between their health or the increased expense (i.e. pulling a tooth instead of filling it).
- **Poor overall health:** Dental disease impacts overall health and children with poor oral health often have poor overall health.





# Mahalo

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