Vermont Department of Health
Division of Health Improvement

Agency of Human Services

December 14, 2004

Dear Colleague:

We are pleased to provide you with *Do Vermont's Children Smile: an Executive Summary of the July 2004 survey report by the Vermont Department of Health's Oral Health Initiative*.

This is an executive summary of an April 2004 survey commissioned by the Vermont Department of Health's Oral Health Initiative, funded in part by a grant from The Robert Wood Johnson Foundation and managed by the Center for Health Care Strategies.

The survey investigated the baseline oral health knowledge, attitudes, beliefs and behaviors of Vermont parents and guardians of children currently, previously or potentially eligible for Vermont's public health insurance program for children, Dr. Dynasaur.

We hope that you will review the *Do Vermont Children Smile – Executive Summary* and find the information useful in your work to increase the oral health of Vermont children.

Sincerely,

Donald Swartz, MD
Director, Division of Health Improvement
Vermont Department of Health

108 Cherry Street • PO Box 70 • Burlington, VT 05402-0070 **TEL** 802-863-7330 **FAX** 802-651-1634

DO Vermont's Children Smile?

A survey of the oral health knowledge, attitudes, beliefs and behaviors of Vermont parents.

Vermont Department of Health

An Executive Summary of the July 2004 survey report by the Vermont Department of Health's Oral Health Initiative.

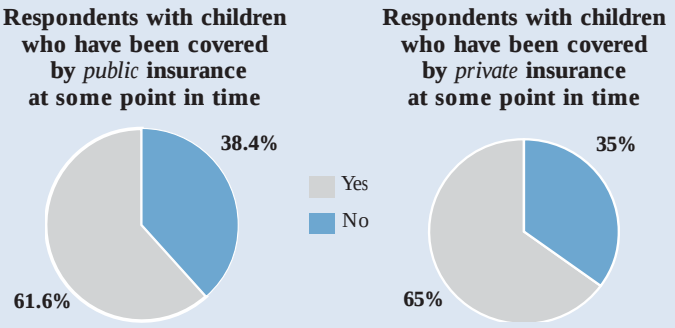
KEY FINDINGS

INTRODUCTION

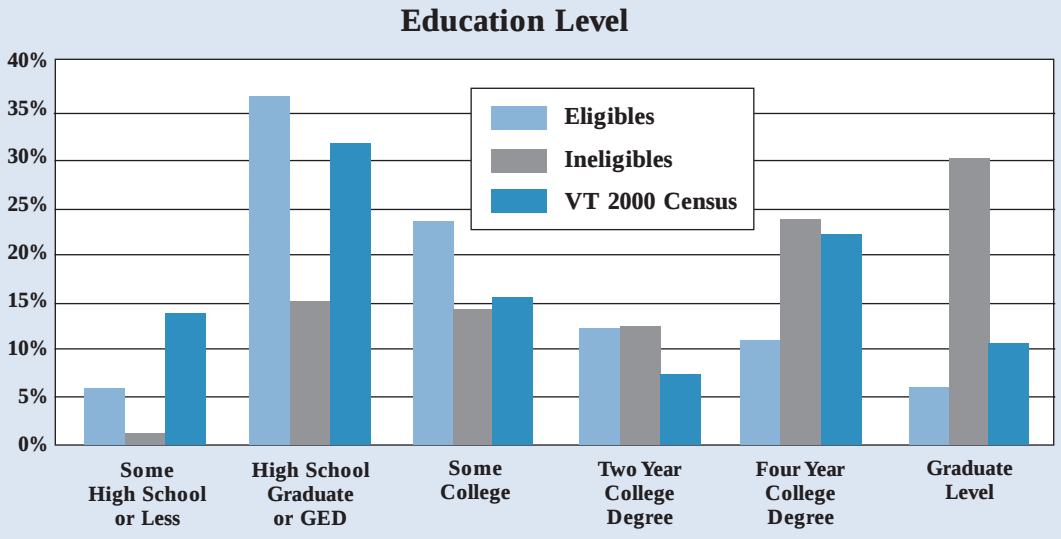
This is an executive summary of an April 2004 survey commissioned by the Vermont Department of Health's Oral Health Initiative, funded by a grant from The Robert Wood Johnson Foundation and managed by the Center for Health Care Strategies. The survey's purpose was to determine the knowledge, attitude, beliefs and behaviors of Vermont parents and guardians of children currently, previously or potentially eligible for Dr. Dynasaur, Vermont's public insurance plan for children.

▸▸ The perception that Dr. Dynasaur families are significantly different from privately insured families is unfounded. Based on common demographic characteristics such as age, education, household income and insurance status, Dr. Dynasaur-eligible families are more like than unlike the "average" Vermont family.

Vermont families move fluidly in and out of public and private insurance status.

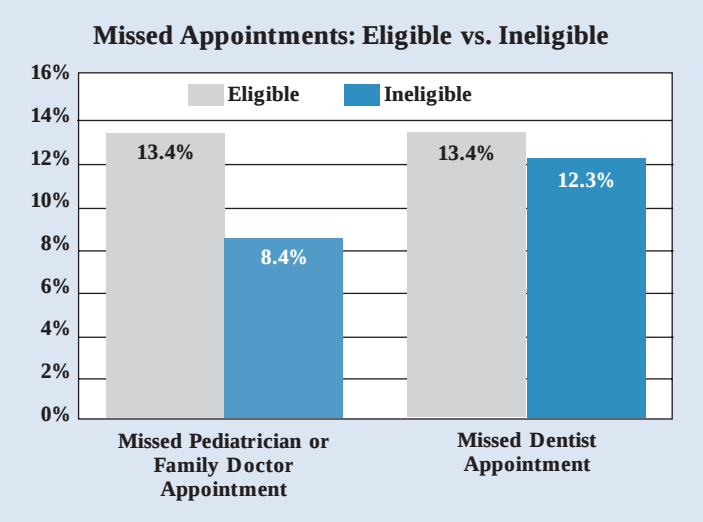


- Two out of three respondents reported that either now or at some point in the past, their children were covered by Dr. Dynasaur, Vermont's public health insurance program for children.
- Almost two out of three respondents reported that either now or at some point in the past, their children were covered by private insurance.



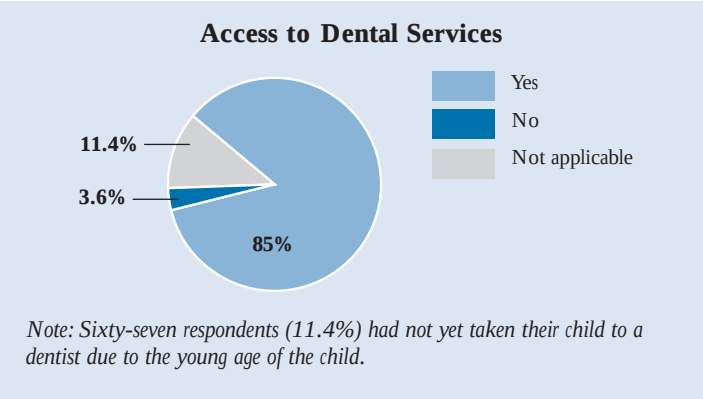
A significant number of eligible respondents (19.1%) had completed a four-year college or some level of graduate-level education. This confirms a previous focus group finding that many Dr. Dynasaur-eligible Vermont families have a higher than expected education level (VT average = 25%).

▸▸ Dr. Dynasaur-eligible families also closely resemble the "average" Vermont family in key oral health behaviors and attitudes such as appointment keeping, sense of having a dental home, and patient satisfaction.



- In contrast to anecdotal reports of a notable difference in "missed appointments/no show" behavior with physicians or dentists, no significant difference in behavior was found between Vermont families with children covered by Dr. Dynasaur and Vermont families with children covered by private insurance.

- There is no significant difference in the likeliness of having a "dental home" for their children between those eligible for Dr. Dynasaur and those who are ineligible (Eligible 95.7% vs. Ineligible 97.1%).

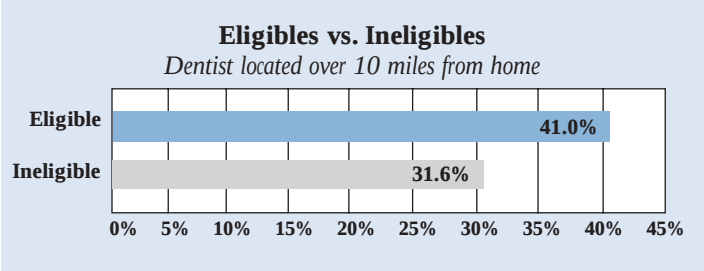


Note: Sixty-seven respondents (11.4%) had not yet taken their child to a dentist due to the young age of the child.

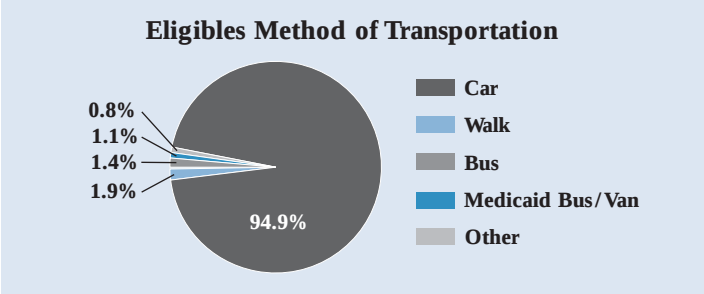
- The majority of respondents (85%) reported that they are able to access dental services for oral health care when necessary.

▸▸ Dr. Dynasaur-eligible families do significantly differ from privately-insured families in two ways: (1) the likelihood of feeling dissatisfied with their child's dentist, and (2) their need for transportation to obtain dental care for their children.

- Nine out of ten respondents agree that they are satisfied with the care their child's dentist provides. Those respondents who are dissatisfied with their child's dentist are more likely to be Dr. Dynasaur-eligible (Eligible 4.3% vs. Ineligible 0.7%).

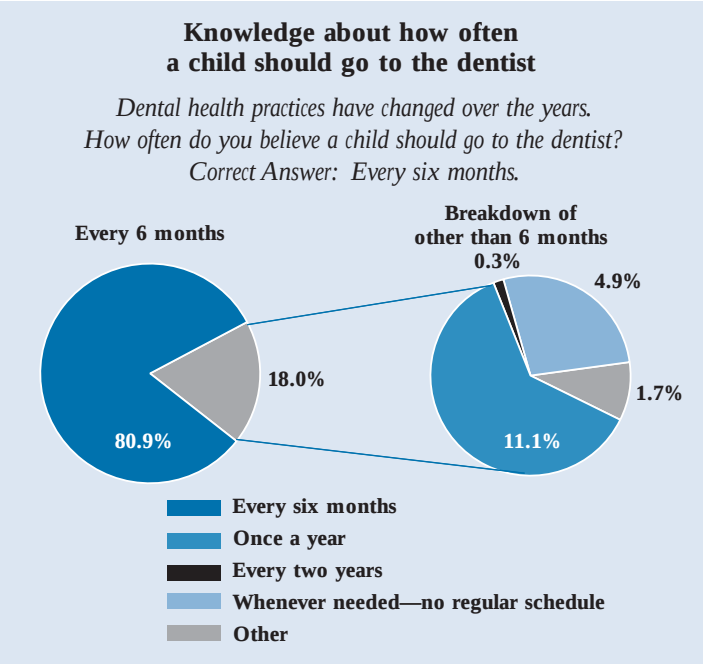


- Those eligible for Dr. Dynasaur are more likely to travel more than 10 miles for their child's dental office (41.0% Eligible vs. 31.6% Ineligible).



- Only 1% of Dr. Dynasaur-eligible respondents reported using a Medicaid bus/van for dental appointments, supporting the focus group finding that most Vermont families with children enrolled in Dr. Dynasaur are unaware of this service.

A significant percentage of Vermont families — *both Dr. Dynasaur-eligible and ineligible families* — do not have accurate preventive oral health information and education for their children.



- Although a majority of respondents understand the importance of regular dental visits for their children, statewide, one out of five respondents do not believe that children should visit a dentist once every six months.
- Over one-third (35.7%) of all respondents do not realize the importance of early teeth cleaning for their children.
- Twenty-five percent of all respondents do not understand the importance of avoiding giving their child a bottle in bed or at naptime.
- Nearly one-third (32.6%) of all respondents do not believe it is necessary to speak to their child's dentist about dental sealants to protect teeth from decay.
- Almost one out of five respondents do not understand the importance of using mouthguards when playing sports.

Methods and Process

Research Partners, of Burlington, conducted a quantitative study of Vermont families in April 2004. The study included a statewide survey, conducted by telephone, of families with children under age 18. The survey was commissioned by the Vermont Department of Health's Oral Health Initiative, which is funded by a grant from The Robert Wood Johnson Foundation and managed by the Center for Health Care Strategies.

The survey results are based on responses from a multi-stratified sample of randomly generated telephone numbers (RDD). To encourage participants to take the survey, a $10 incentive was offered to those that completed the survey. Use of this response incentive method was based on a study highlighted in the November 2003 *Issue Brief* (Mathematica Policy Research, Inc.) which found that cash incentives significantly increased survey response for lower-income populations.

Research Partners dialed 10,041 calls with 4,882 connects. Of these connects, 914 refused to participate in the survey and 1,651 were deemed "not qualified" based on two screening questions. If the respondent was not a parent of children under the age of 18 in the household they were disqualified. In addition, if the respondent was not the adult primarily responsible for taking the children to the doctor or dentist, they were disqualified. A respondent was deemed "Dr. Dynasaur eligible" if they met one of the following three criteria:

1. Their child had been covered by public insurance at some point in time.
2. Their total household income was less than $50,000.
3. Their household size compared to their household income met Dr. Dynasaur eligibility requirements.

Based on these criteria, a total of 420 surveys were classified as eligible with the remaining 166 determined to be ineligible. At the end of a three-week fieldwork period, Research Partners completed 586 surveys. For results based on 586 completed surveys, one can say with 95 percent confidence that the error attributable to sampling and other random effects is plus or minus 5 percentage points.

In addition to sampling error, it should be noted that question wording, question order and the practical difficulties of conducting any survey could introduce error or bias into the findings.

For additional information related to this report, contact Dawn Miller, Oral Health Project Director at the Vermont Department of Health,

Are Vermont's Children Smiling? A survey of the oral health knowledge, attitudes, behaviors and beliefs of Vermont parents, was prepared by the firm Research Partners, a division of Marketing Partners, Inc., for the Vermont Department of Health's Oral Health Initiative.

For more information related to this report, please contact:

Vermont Department of Health
108 Cherry Street
PO Box 70
Burlington, VT 05402-0070
1-800-464-4343
www.healthyvermonters.info/