

Healthy People 2020 Summary of Objectives

Oral Health

Number Objective Short Title

Oral Health of Children and Adolescents

- OH-1 Dental caries experience
- OH-2 Untreated dental decay in children and adolescents

Oral Health of Adults

- OH-3 Untreated dental decay in adults
- OH-4 No permanent tooth loss
- OH-5 Destructive periodontal disease
- OH-6 Early detection of oral and pharyngeal cancers

Access to Preventive Services

- OH-7 Use of oral health care system
- OH-8 Dental services for low-income children and adolescents
- OH-9 School-based centers with an oral health component
- OH-10 Health centers with oral health component
- OH-11 Receipt of oral health services at health centers

Oral Health Interventions

- OH-12 Dental sealants
- OH-13 Community water fluoridation
- OH-14 Preventive dental screening and counseling

Monitoring, Surveillance Systems

- OH-15 Systems that record cleft lip or palate and referrals
- OH-16 Oral and craniofacial State-based health surveillance system

Public Health Infrastructure

- OH-17 Health agencies with a dental professional directing their dental program

Topic Area: Oral Health

Oral Health of Children and Adolescents

OH-1: Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth.

OH-1. Reduce the proportion of young children aged 3 to 5 years with dental caries experience in their primary teeth.

Target: 30.0 percent.

Baseline: 33.3 percent of children aged 3 to 5 years had dental caries experience in at least one primary tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-1.2 Reduce the proportion of children aged 6 to 9 years with dental caries experience in their primary and permanent teeth.

Target: 49.0 percent.

Baseline: 54.4 percent of children aged 6 to 9 years had dental caries experience in at least one primary or permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-1.3 Reduce the proportion of adolescents aged 13 to 15 years with dental caries experience in their permanent teeth.

Target: 48.3 percent.

Baseline: 53.7 percent of adolescents aged 13 to 15 years had dental caries experience in at least one permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-2: Reduce the proportion of children and adolescents with untreated dental decay.

OH-2.1 Reduce the proportion of young children aged 3 to 5 years with untreated dental decay in their primary teeth.

Target: 21.4 percent.

Baseline: 23.8 percent of children aged 3 to 5 years had untreated dental decay in at least one primary tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–2.2 Reduce the proportion of children aged 6 to 9 years with untreated dental decay in their primary and permanent teeth.

Target: 25.9 percent.

Baseline: 28.8 percent of children aged 6 to 9 years had untreated dental decay in at least one primary or permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–2.3 Reduce the proportion of adolescents aged 13 to 15 years with untreated dental decay in their permanent teeth.

Target: 15.3 percent.

Baseline: 17.0 percent of adolescents aged 13 to 15 years had untreated dental decay in at least one permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

Oral Health of Adults

OH–3: Reduce the proportion of adults with untreated dental decay.

OH–3.1 Reduce the proportion of adults aged 35 to 44 years with untreated dental decay.

Target: 25.0 percent.

Baseline: 27.8 percent adults aged 35 to 44 years had untreated dental decay in at least one permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–3.2 Reduce the proportion of older adults aged 65 to 74 years with untreated coronal caries.

Target: 15.4 percent.

Baseline: 17.1 percent of adults aged 65 to 74 years had untreated coronal caries in at least one permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–3.3 Reduce the proportion of older adults aged 75 years and older with untreated root surface caries.

Target: 34.1 percent.

Baseline: 37.9 percent of adults aged 75 years and older had untreated root surface caries in at least one permanent tooth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–4: Reduce the proportion of adults who have ever had a permanent tooth extracted because of dental caries or periodontal disease.

OH–4.1 Reduce the proportion of adults aged 45 to 64 years who have ever had a permanent tooth extracted because of dental caries or periodontitis.

Target: 68.8 percent.

Baseline: 76.4 percent of adults aged 45 to 64 years have ever had a permanent tooth extracted because of dental caries or periodontitis in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–4.2 Reduce the proportion of older adults aged 65 to 74 years who have lost all of their natural teeth.

Target: 21.6 percent.

Baseline: 24.0 percent of adults aged 65 to 74 years had lost all of their natural teeth in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-5: Reduce the proportion of adults aged 45 to 74 years with moderate or severe periodontitis.

Target: 11.4 percent.

Baseline: 12.7 percent of adults aged 45 to 74 years had moderate or severe periodontitis in 2001–04.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-6: Increase the proportion of oral and pharyngeal cancers detected at the earliest stage.

Target: 35.8 percent.

Baseline: 32.5 percent of oral and pharyngeal cancers were diagnosed at the localized stage (stage 1) in 2007.

Target setting method: 10 percent improvement.

Data sources: National Program of Cancer Registries (NPCR), CDC; Surveillance, Epidemiology and End Results (SEER) Program, NIH, NCI.

Access to Preventive Services

OH-7: Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year.

Target: 49.0 percent.

Baseline: 44.5 percent of persons aged 2 years and older had a dental visit in the past 12 months in 2007.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

OH-8: Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.

Target: 29.4 percent.

Baseline: 26.7 percent of children and adolescents aged 2 to 18 years at or below 200 percent of the Federal poverty level received a preventive dental service during the past year in 2007.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

OH-9: Increase the proportion of school-based health centers with an oral health component.

OH-9.1 Increase the proportion of school-based health centers with an oral health component that includes dental sealants.

Target: 26.5 percent.

Baseline: 24.1 percent of school-based health centers with an oral health component included dental sealants in 2007–08.

Target setting method: 10 percent improvement.

Data source: School-based Health Care Census, National Assembly of School Based Health Care (NASBHC).

OH-9.2 Increase the proportion of school-based health centers with an oral health component that includes dental care.

Target: 11.1 percent.

Baseline: 10.1 percent of school-based health centers with an oral health component included fillings and extractions in 2007–08.

Target setting method: 10 percent improvement.

Data source: School-based Health Care Census, National Assembly of School Based Health Care (NASBHC).

OH-9.3 Increase the proportion of school-based health centers with an oral health component that includes topical fluoride.

Target: 32.1 percent.

Baseline: 29.2 percent of school-based health centers with an oral health component included fluoride rinses, varnish, or supplements in 2007–08.

Target setting method: 10 percent improvement.

Data source: School-based Health Care Census, National Assembly of School Based Health Care (NASBHC).

OH-10: Increase the proportion of local health departments and Federally Qualified Health Centers (FQHCs) that have an oral health component.

OH-10.1 Increase the proportion of Federally Qualified Health Centers that have an oral health care program.

Target: 83 percent.

Baseline: 75 percent of Federally Qualified Health Centers had an oral health care component in 2007.

Target setting method: 10 percent improvement.

Data source: Uniform Data System (UDS), HRSA, BPHC.

OH–10.2 Increase the proportion of local health departments that have oral health prevention or care programs.

Target: 28.4 percent.

Baseline: 25.8 percent of local health departments had an oral health prevention or care program in 2008.

Target setting method: 10 percent improvement.

Data sources: Association of State and Territorial Dental Directors (ASTDD); National Association of County and City Health Officials.

OH–11: Increase the proportion of patients who receive oral health services at Federally Qualified Health Centers each year.

Target: 33.3 percent.

Baseline: 17.5 percent of patients at Federally Qualified Health Centers received oral health services in 2007.

Target setting method: 90 percent improvement.

Data source: Uniform Data System (UDS), HRSA, BPHC.

Oral Health Interventions

OH–12: Increase the proportion of children and adolescents who have received dental sealants on their molar teeth.

OH–12.1 Increase the proportion of children aged 3 to 5 years who have received dental sealants on one or more of their primary molar teeth.

Target: 1.5 percent.

Baseline: 1.4 percent of children aged 3 to 5 years received dental sealants on one or more of their primary molars in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–12.2 Increase the proportion of children aged 6 to 9 years who have received dental sealants on one or more of their permanent first molar teeth.

Target: 28.1 percent.

Baseline: 25.5 percent children aged 6 to 9 years received dental sealants on one or more of their first permanent molars in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–12.3 Increase the proportion of adolescents aged 13 to 15 years who have received dental sealants on one or more of their permanent molar teeth.

Target: 21.9 percent.

Baseline: 19.9 percent of adolescents aged 13 to 15 years received dental sealants on one or more of their first permanent molars and one or more second permanent molars in 1999–2004.

Target setting method: 10 percent improvement.

Data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH–13: Increase the proportion of the U.S. population served by community water systems with optimally fluoridated water.

Target: 79.6 percent.

Baseline: 72.4 percent of the U.S. population served by community water systems received optimally fluoridated water in 2008.

Target setting method: 10 percent improvement.

Data source: CDC Water Fluoridation Reporting System (WFRS), CDC, ONDIEH, NCCDPHP.

OH–14: (Developmental) Increase the proportion of adults who receive preventive interventions in dental offices.

OH– 14.1 (Developmental) Increase the proportion of adults who received information from a dentist or dental hygienist focusing on reducing tobacco use or smoking cessation in the past year.

Potential data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH– 14.2 (Developmental) Increase the proportion of adults who received an oral and pharyngeal cancer screening from a dentist or dental hygienist in the past year.

Potential data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

OH-14.3 (Developmental) Increase the proportion of adults who are tested or referred for glycemic control from a dentist or dental hygienist in the past year.

Potential data source: National Health and Nutrition Examination Survey (NHANES), CDC, NCHS.

Monitoring, Surveillance Systems

OH-15: (Developmental) Increase the number of States and the District of Columbia that have a system for recording and referring infants and children with cleft lips and cleft palates to craniofacial anomaly rehabilitative teams.

OH- 15.1 (Developmental) Increase the number of States and the District of Columbia that have a system for recording cleft lips and cleft palates.

Potential data source: Annual Synopses of State and Territorial Dental Public Health Programs, Association of State and Territorial Dental Directors (ASTDD).

OH- 15.2 (Developmental) Increase the number of States and the District of Columbia that have a system for referral for cleft lips and cleft palates to rehabilitative teams.

Potential data source: Annual Synopses of State and Territorial Dental Public Health Programs, Association of State and Territorial Dental Directors (ASTDD).

OH-16: Increase the number of States and the District of Columbia that have an oral and craniofacial health surveillance system.

Target: 51 (50 States and the District of Columbia).

Baseline: 32 States had an oral and craniofacial health surveillance system in 2009.

Target setting method: Total coverage (all 50 States and the District of Columbia).

Data source: Annual Synopses of State and Territorial Dental Public Health Programs, Association of State and Territorial Dental Directors (ASTDD).

Public Health Infrastructure

OH-17: Increase health agencies that have a dental public health program directed by a dental professional with public health training.

OH-17.1 Increase the proportion of States (including the District of Columbia) and local health agencies that serve jurisdictions of 250,000 or more persons with a dental public health program directed by a dental professional with public health training.

Target: 25.7 percent.

Baseline: 23.4 percent of States (including the District of Columbia) and local health agencies that served jurisdictions of 250,000 or more persons had a dental public health program directed by a dental professional with public health training in 2009.

Target setting method: 10 percent improvement.

Data source: Annual Synopses of State and Territorial Dental Public Health Programs, Association of State and Territorial Dental Directors (ASTDD).

OH-17.2 Increase the number of Indian Health Service Areas and Tribal health programs that serve jurisdictions of 30,000 or more persons with a dental public health program directed by a dental professional with public health training.

Target: 12 programs.

Baseline: 11 Indian Health Service Areas and Tribal health programs that served jurisdictions of 30,000 or more persons had a dental public health program directed by a dental professional with public health training in 2010.

Target setting method: 10 percent improvement.

Data source: Indian Health Service, Division of Oral Health.