



Oral Health Surveillance Data Chart Book

Texas Department of State Health Services
Family and Community Health Services
Oral Health Program
Office of Program Decision Support

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Preface

This chart book has the most recent oral health data available to the Texas Department of State Health Services (DSHS) as of July 2012. The data shows oral health trends and status of Texans, and the factors affecting oral health status in the state.

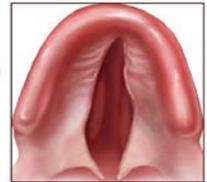
Data in this chart book covers birth defects involving the mouth; dental disease among adults, children, and pregnant women; cancers of the mouth and throat; community water fluoridation; substance abuse among youth; the dental workforce; and access to dental services.

The data is pulled from many data reporting systems on both national and statewide levels. It also spans across varying time frames. All of the data presented here is for public use.

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Birth Defects Involving the Mouth

Birth defects are a leading cause of death among babies in Texas. Babies born with cleft palate cannot eat as needed and may starve. Children with defects on their faces are at a high risk for problems with their behavior and not feeling good about themselves.



Cleft palate

To learn more, visit:

DSHS Birth Defects Epidemiology and Surveillance at
<http://www.dshs.state.tx.us/birthdefects/>

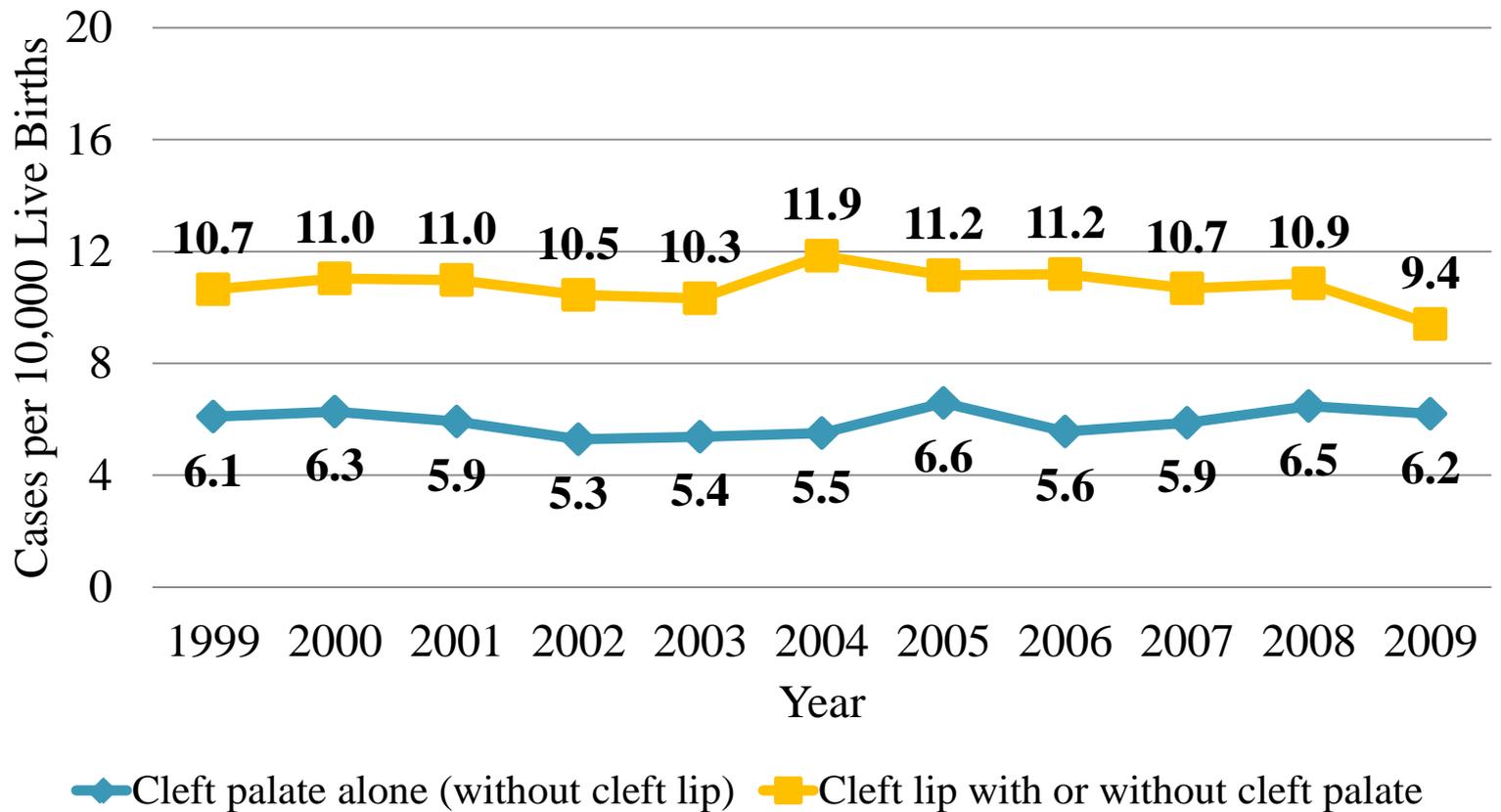
CDC National Oral Health Surveillance System at
<http://www.cdc.gov/nohss/>



Cleft lip

Oral Cleft Birth Defects

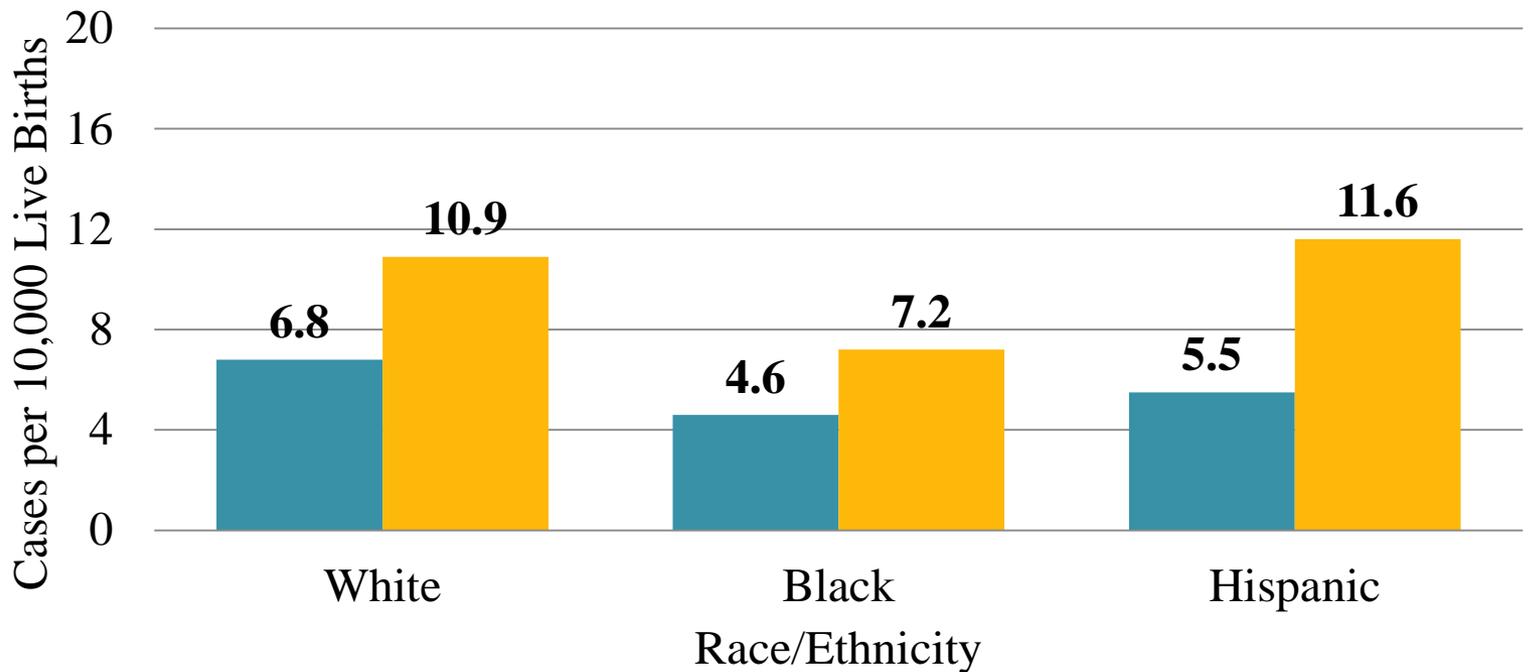
Prevalence of Oral Cleft Defects by Year,
Texas, 1999-2009



Data Source: Texas DSHS Birth Defects Registry.

Oral Cleft Birth Defects

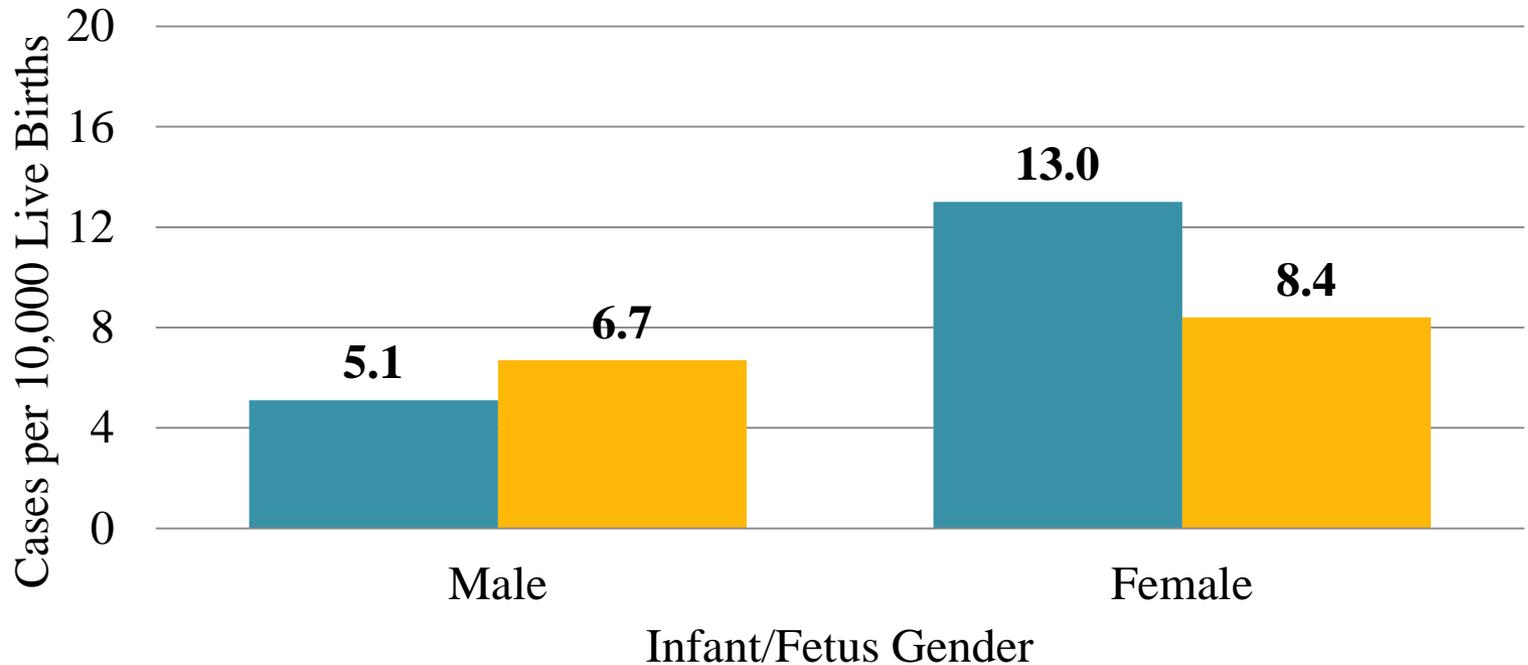
Prevalence of Oral Cleft Defects by Race/Ethnicity,
Texas, 1999-2009 Combined



■ Cleft palate alone (without cleft lip) ■ Cleft lip with or without cleft palate

Oral Cleft Birth Defects

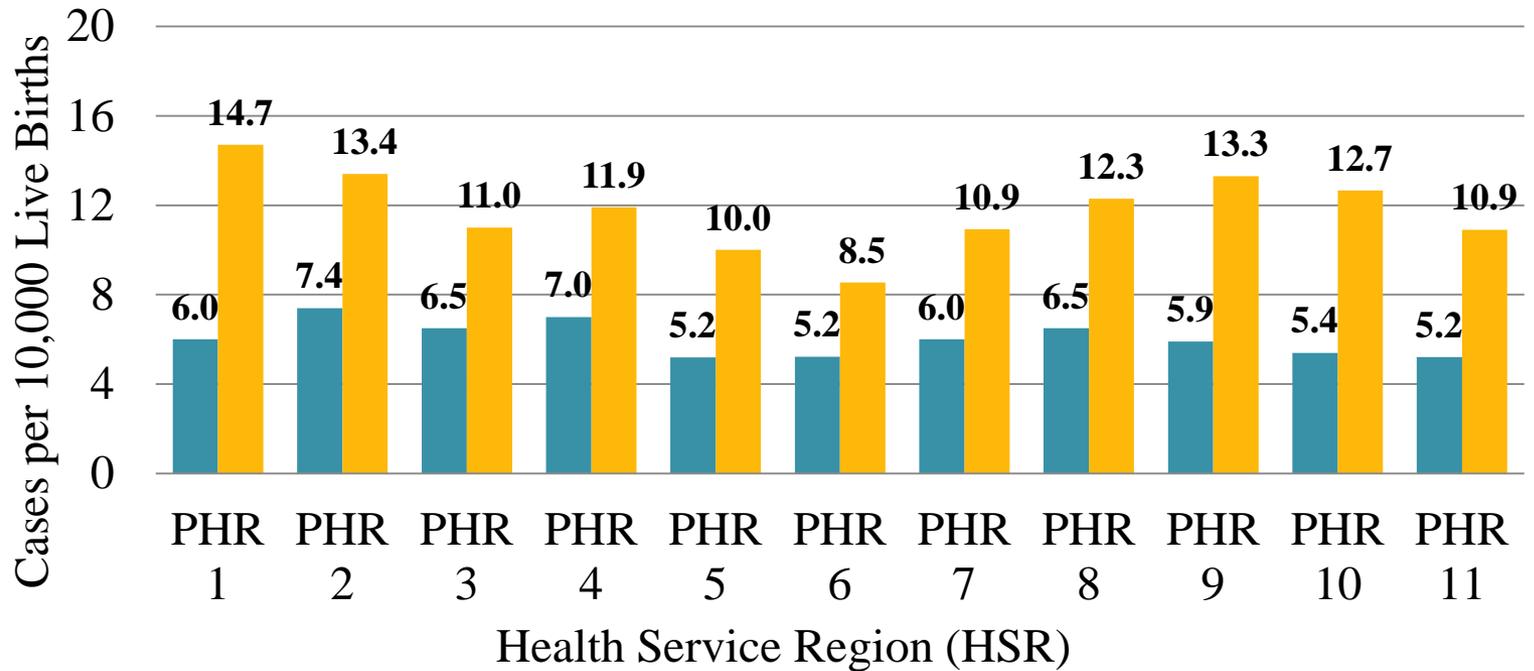
Prevalence of Oral Cleft Defects by Gender, Texas, 1999-2009 Combined



- Cleft palate alone (without cleft lip)
- Cleft lip with or without cleft palate

Oral Cleft Birth Defects

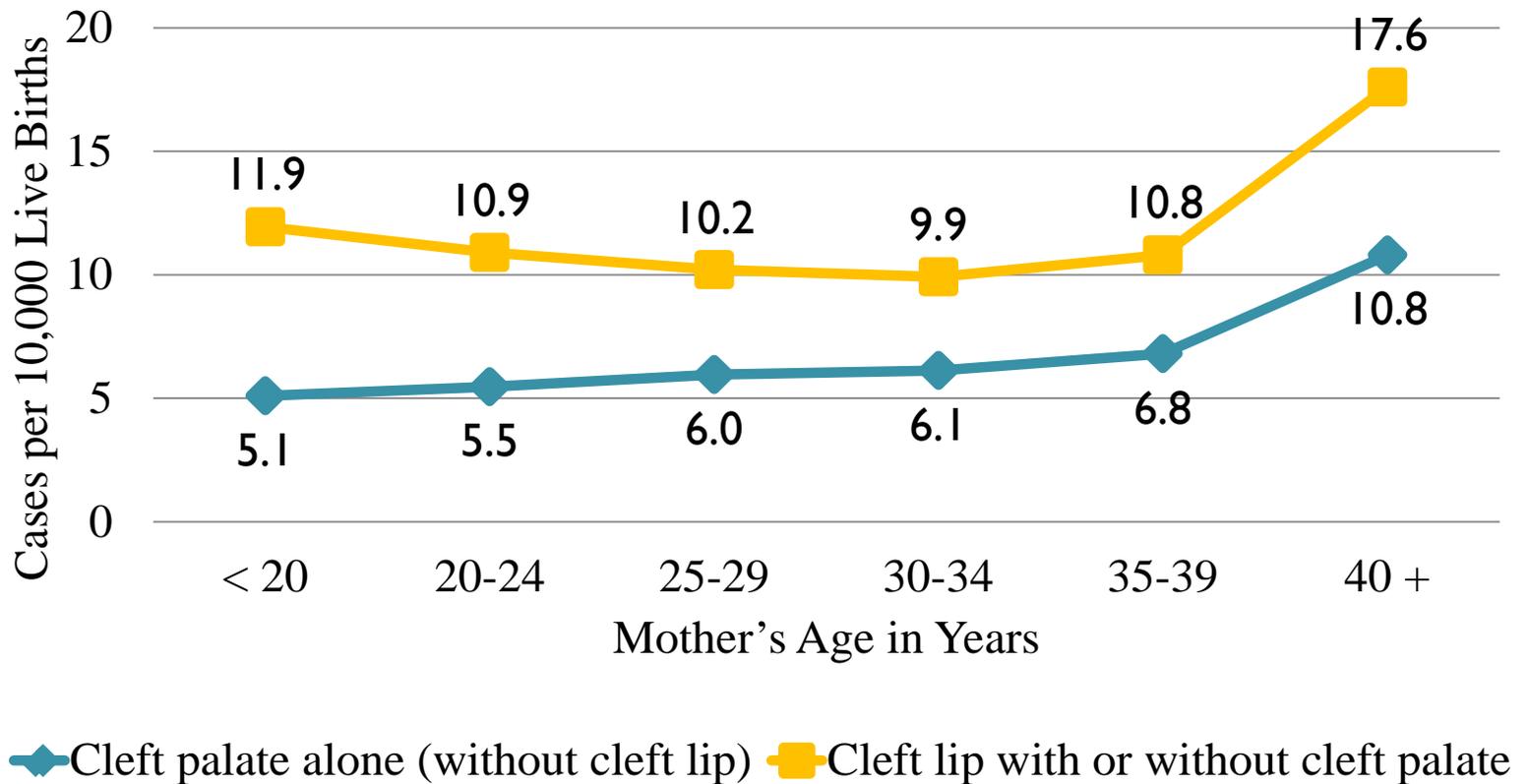
Prevalence of Oral Cleft Birth Defects by HSR,
Texas, 1999-2009 Combined



- Cleft palate alone (without cleft lip)
- Cleft lip with or without cleft palate

Oral Cleft Birth Defects

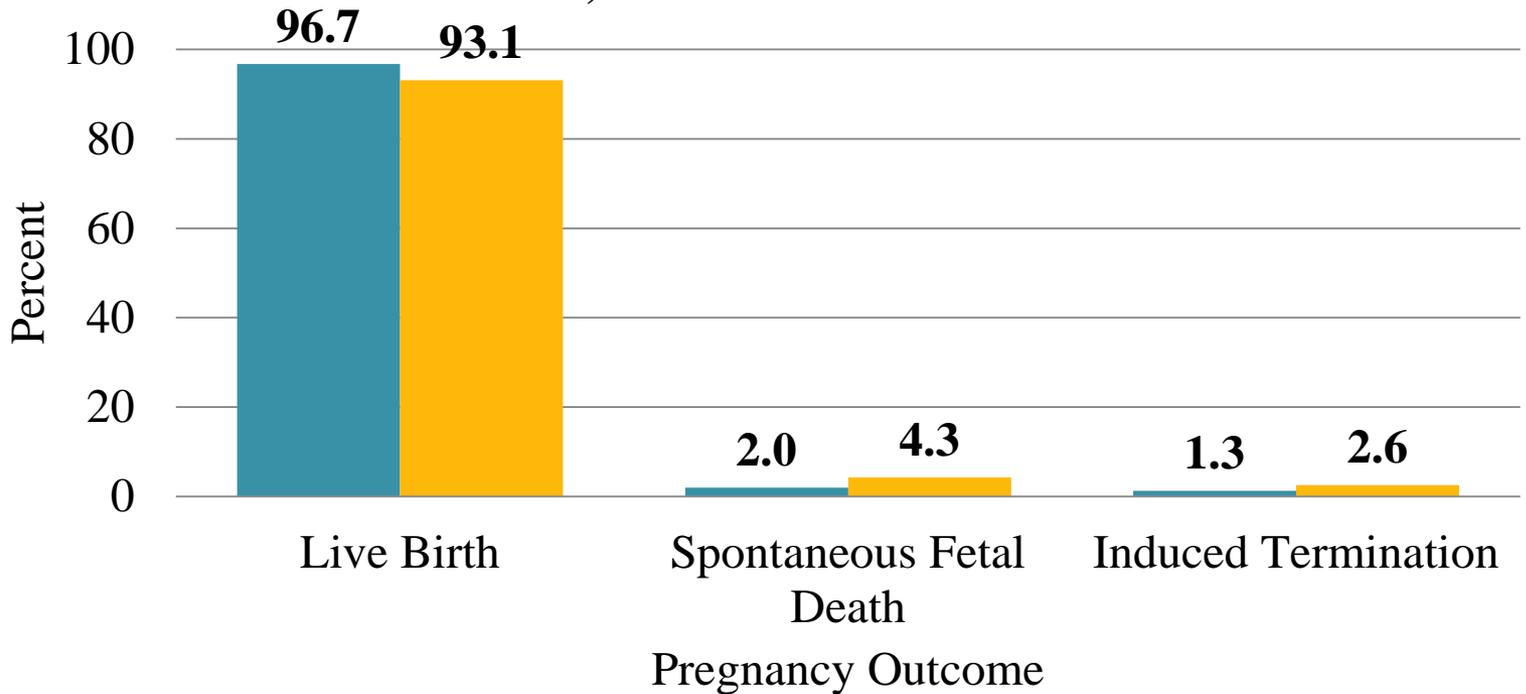
Prevalence of Oral Cleft Defects by Mother's Age, Texas, 1999-2009 Combined



Data Source: Texas DSHS Birth Defects Registry.

Oral Cleft Birth Defects

Percent of Oral Clefts by Pregnancy Outcome Distribution, Texas, 1999-2009 Combined



- Cleft palate alone (without cleft lip)
- Cleft lip with or without cleft palate

Burden of Dental Disease

Not taking care of dental disease affects more than just the mouth. It also leads to poor diet; illnesses affecting the whole body; low quality of life; and earlier death. The impact of poor health of the mouth on overall health is a public health concern.

To learn more, visit:

CDC Behavioral Risk Factor Surveillance System Survey at
<http://apps.nccd.cdc.gov/BRFSS/>

CDC National Oral Health Surveillance System at
<http://www.cdc.gov/nohss/>

HRSA Maternal and Child Health Bureau's National Survey of Children's Health at <http://www.cdc.gov/nchs/slait/nsch.htm>

CDC Pregnancy Risk Assessment Monitoring System at
<http://www.cdc.gov/prams/>

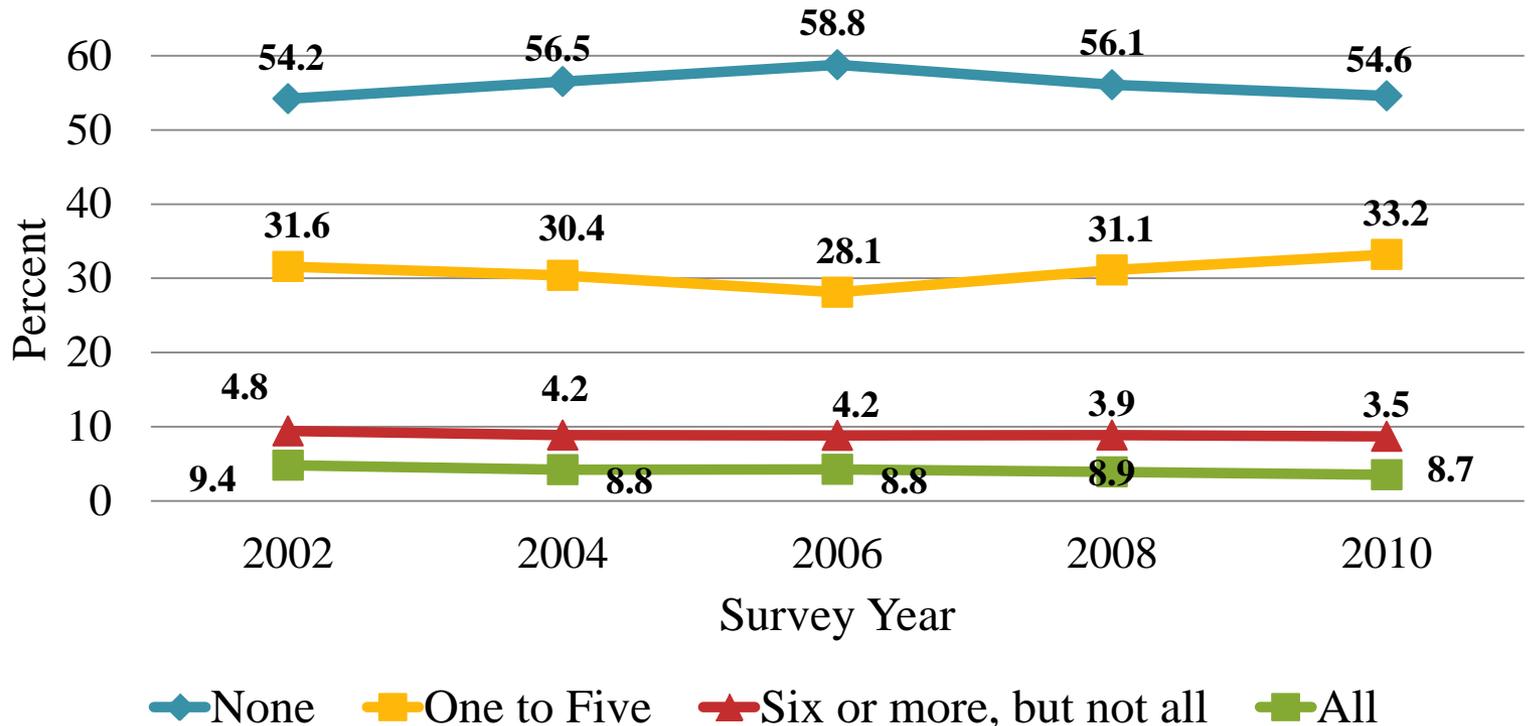
Adults Dental Disease

Poor health of the mouth in adults can be shown by the loss of teeth. Most adult tooth loss comes from tooth decay and gum disease. Tooth loss can be avoided by finding problems early and seeking routine dental care.



Dental Disease Among Adults

Percent of Tooth Loss Reported Due to Tooth Decay or Gum Disease, Adults Age 18 and Over, by Survey Year and Level of Tooth Loss, Texas, 2002-2010



Data Source: Texas DSHS Center for Health Statistics - Behavioral Risk Factor Surveillance Survey (BRFSS).

Includes non-institutional adults only.

All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

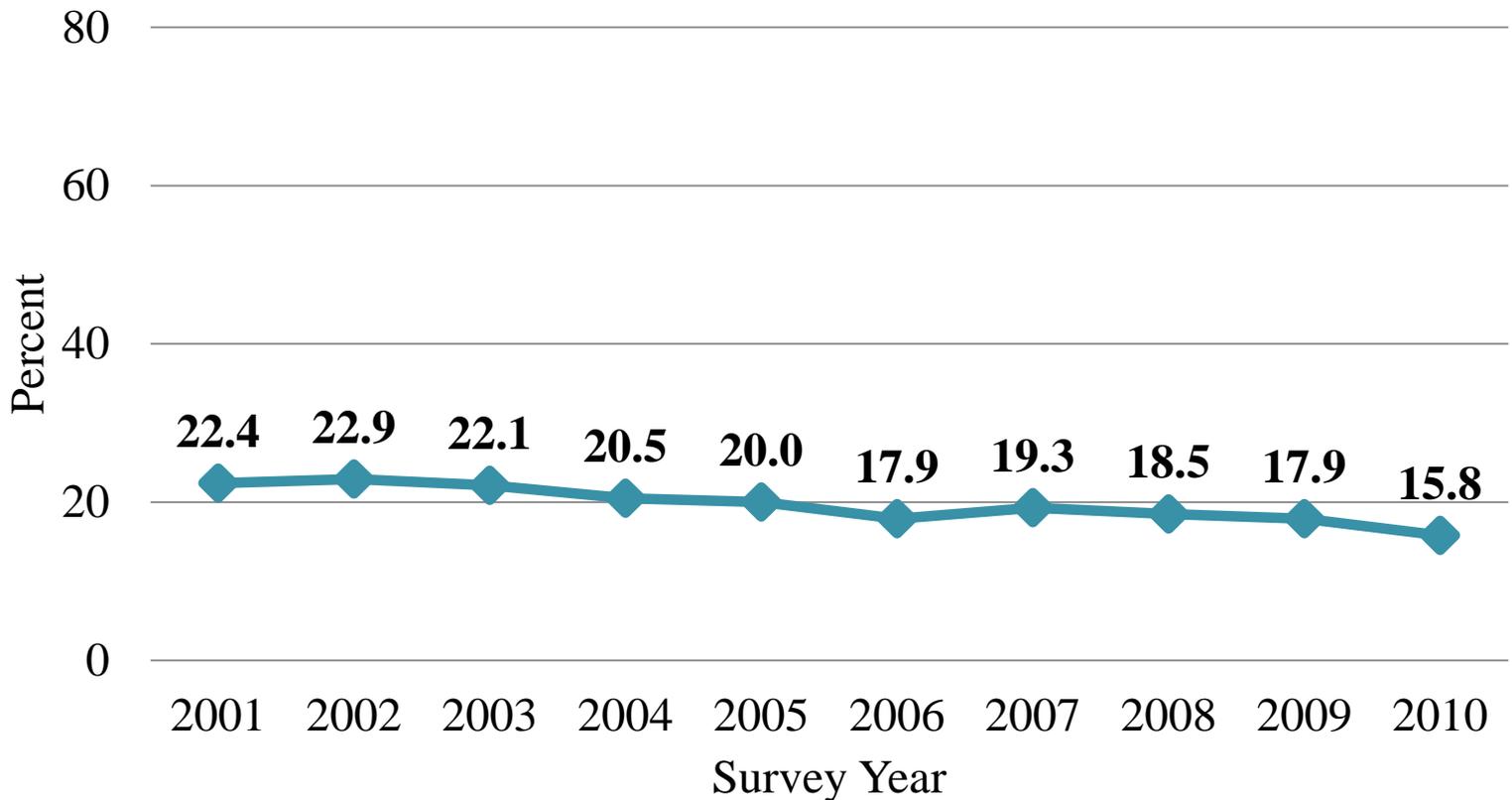
Adults Smoking

Smoking is linked to poor oral health problems. It can lead to early tooth loss and a higher risk for getting cancer of the mouth and throat.



Smoking Among Adults

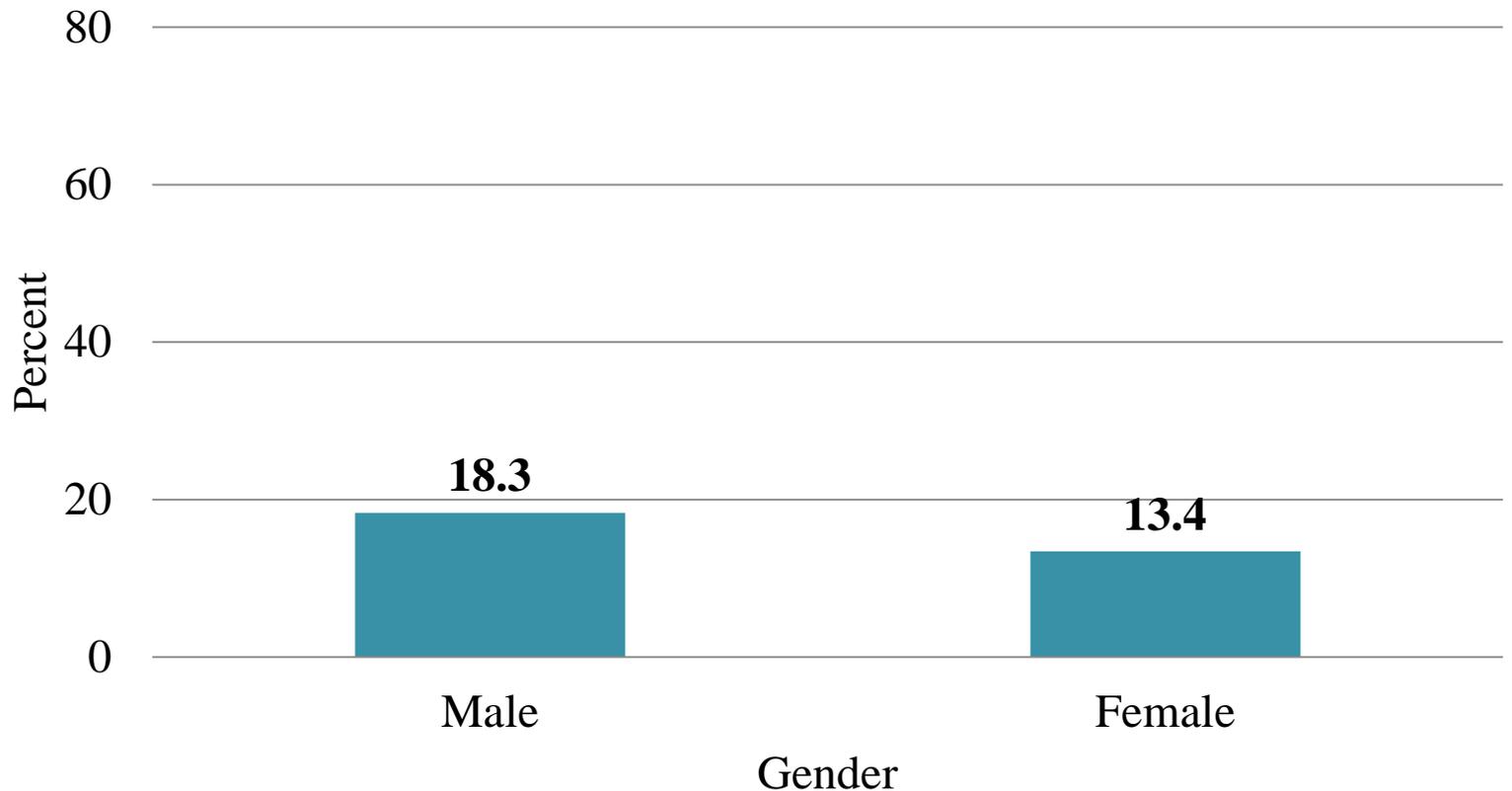
**Percent of Current Smokers, Adults Age 18 and Older,
by Survey Year, Texas, 2001-2010**



Data Source: Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System Survey (BRFSS) Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (<http://apps.nccd.cdc.gov/BRFSS/>). Percentages are weighted to population characteristics. Estimates based on self-reported data.

Smoking Among Adults

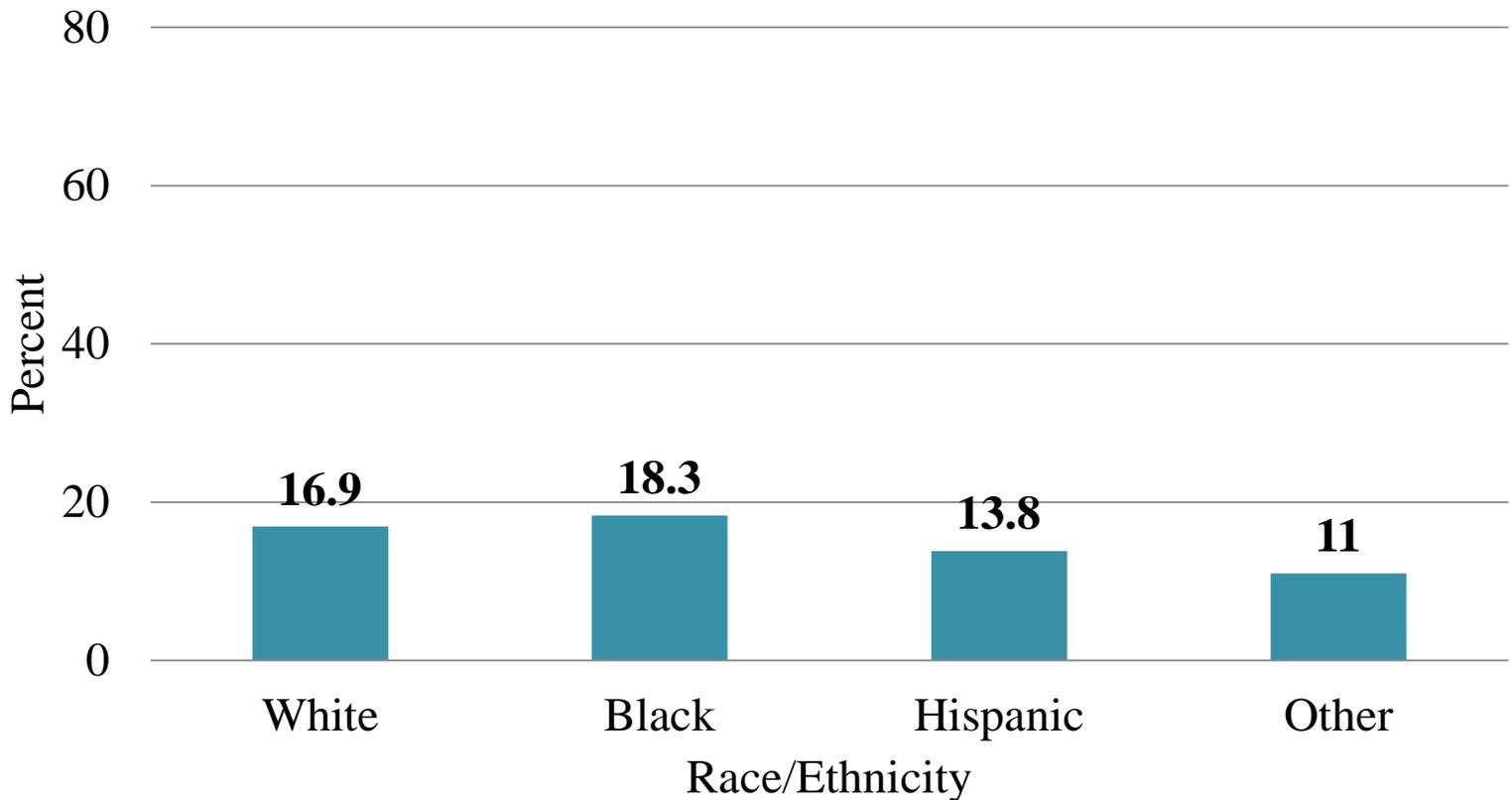
**Percent of Current Smokers, Adults Age 18 and Older,
by Gender, Texas, 2010**



Data Source: Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System Survey (BRFSS) Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (<http://apps.nccd.cdc.gov/BRFSS/>). Percentages are weighted to population characteristics. Estimates based on self-reported data.

Smoking Among Adults

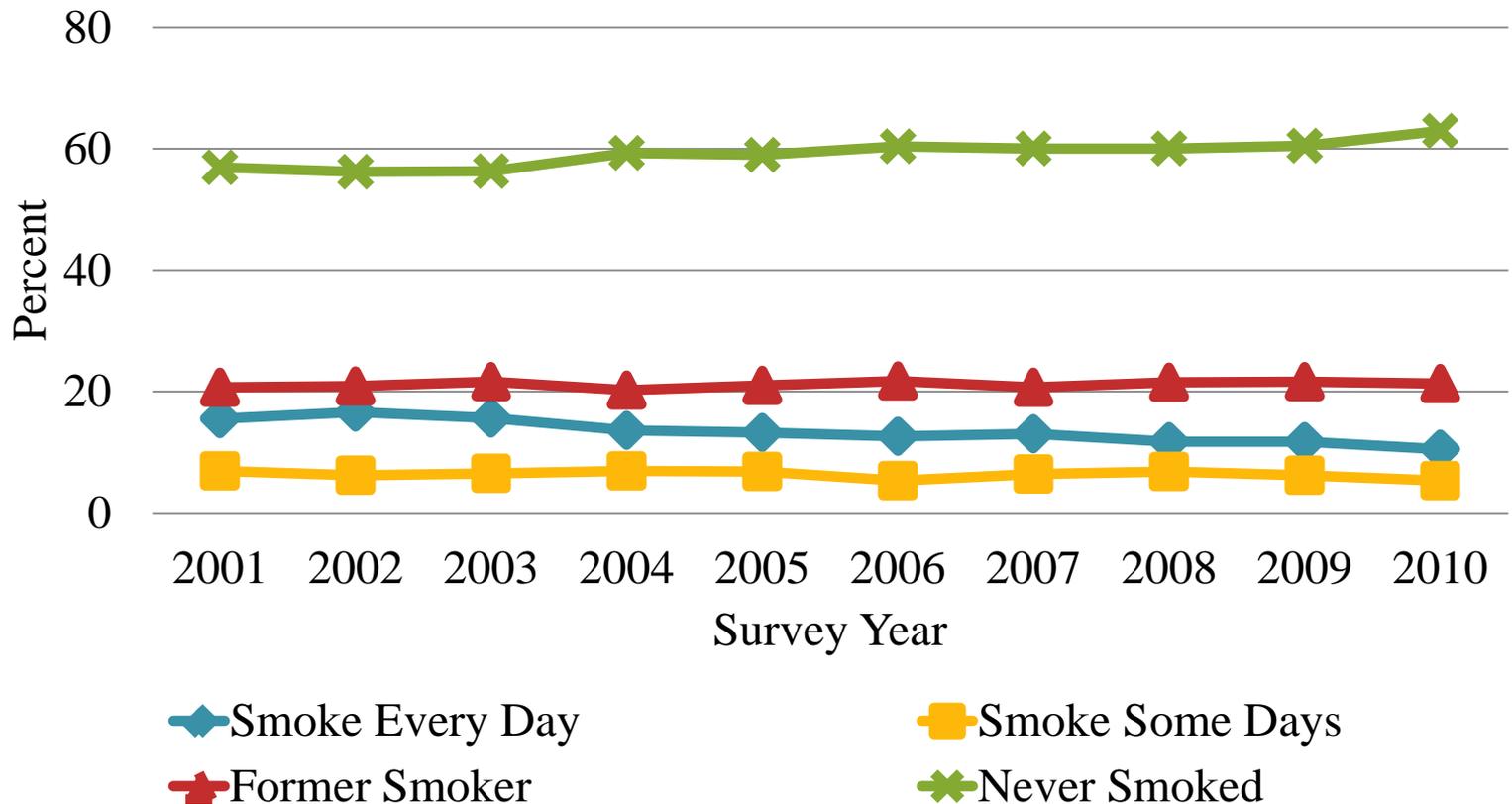
**Percent of Current Smokers, Adults Age 18 and Older,
by Race/Ethnicity, Texas, 2010**



Data Source: Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System Survey (BRFSS) Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (<http://apps.nccd.cdc.gov/BRFSS/>). Percentages are weighted to population characteristics. Estimates based on self-reported data.

Smoking Among Adults

Percent of Current Smokers, Adults Age 18 and Older, by Survey Year and Level of Smoking, Texas, 2010



Data Source: Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System Survey (BRFSS) Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (<http://apps.nccd.cdc.gov/BRFSS/>). Percentages are weighted to population characteristics. Estimates based on self-reported data.

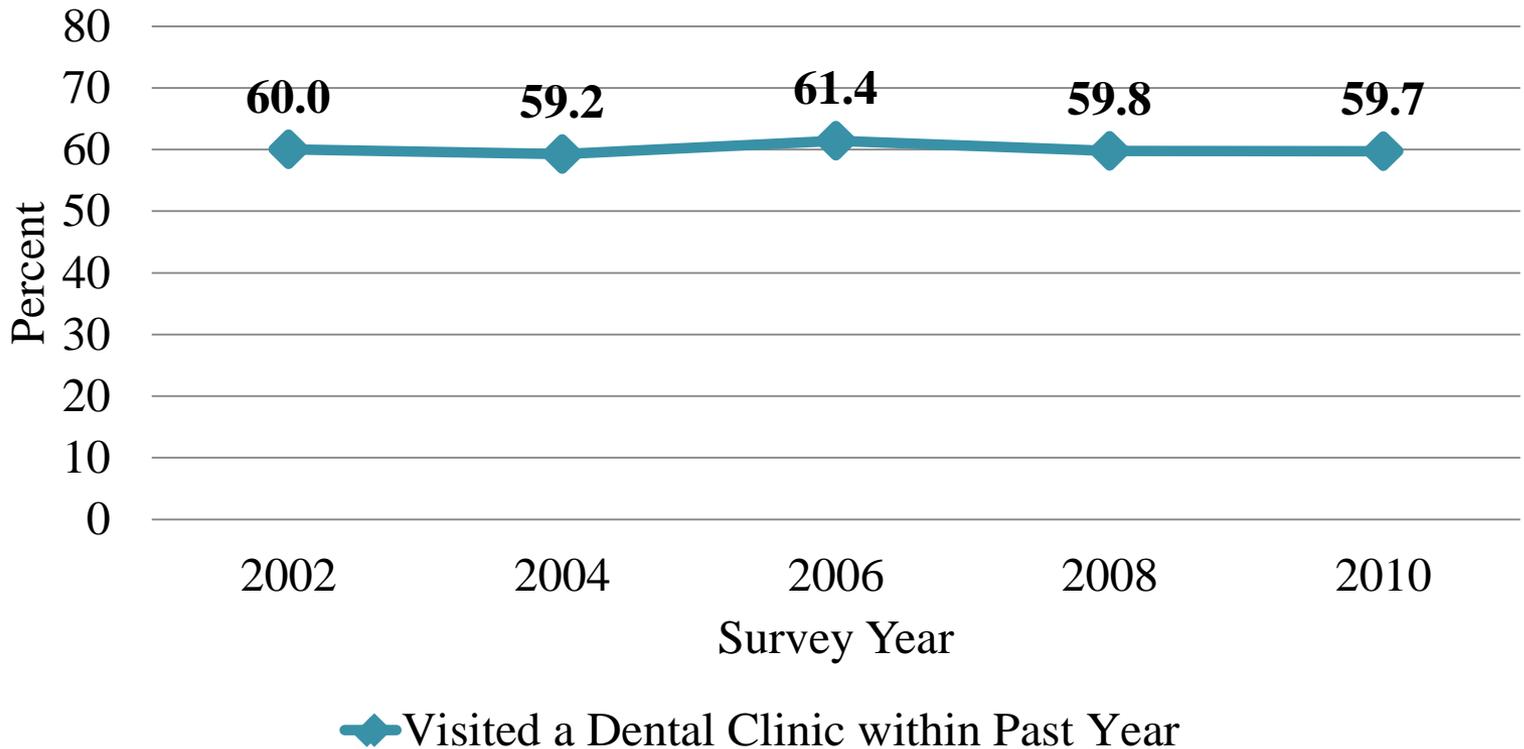
Adults Dental Visits

Regular dental visits may help to stop or slow down tooth decay and gum disease. The number of visits to the dentist within a year can often predict health in the mouth.



Dental Visits Among Adults

Percent of Adults, Age 18 Years & Over Who Visited a Dental Clinic Within Past Year, by Survey Year, Texas, 2002-2010



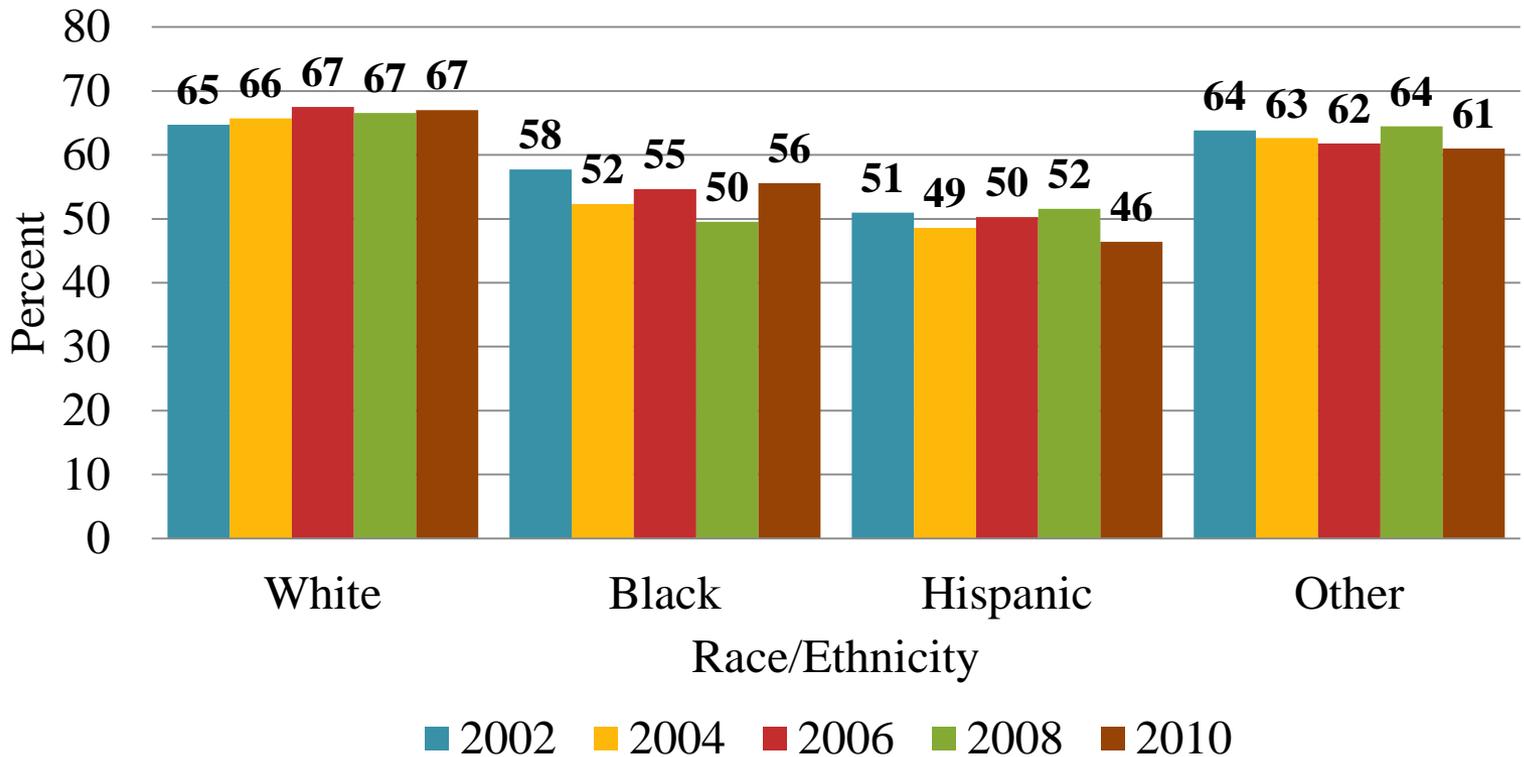
Data Source: Texas DSHS Center for Health Statistics - Behavioral Risk Factor Surveillance Survey (BRFSS).

Includes non-institutional adults only.

All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Dental Visits Among Adults

Percent of Adults, Age 18 Years & Over Who Visited a Dental Clinic Within Past Year, by Race/Ethnicity and Survey Year, Texas, 2002-2010



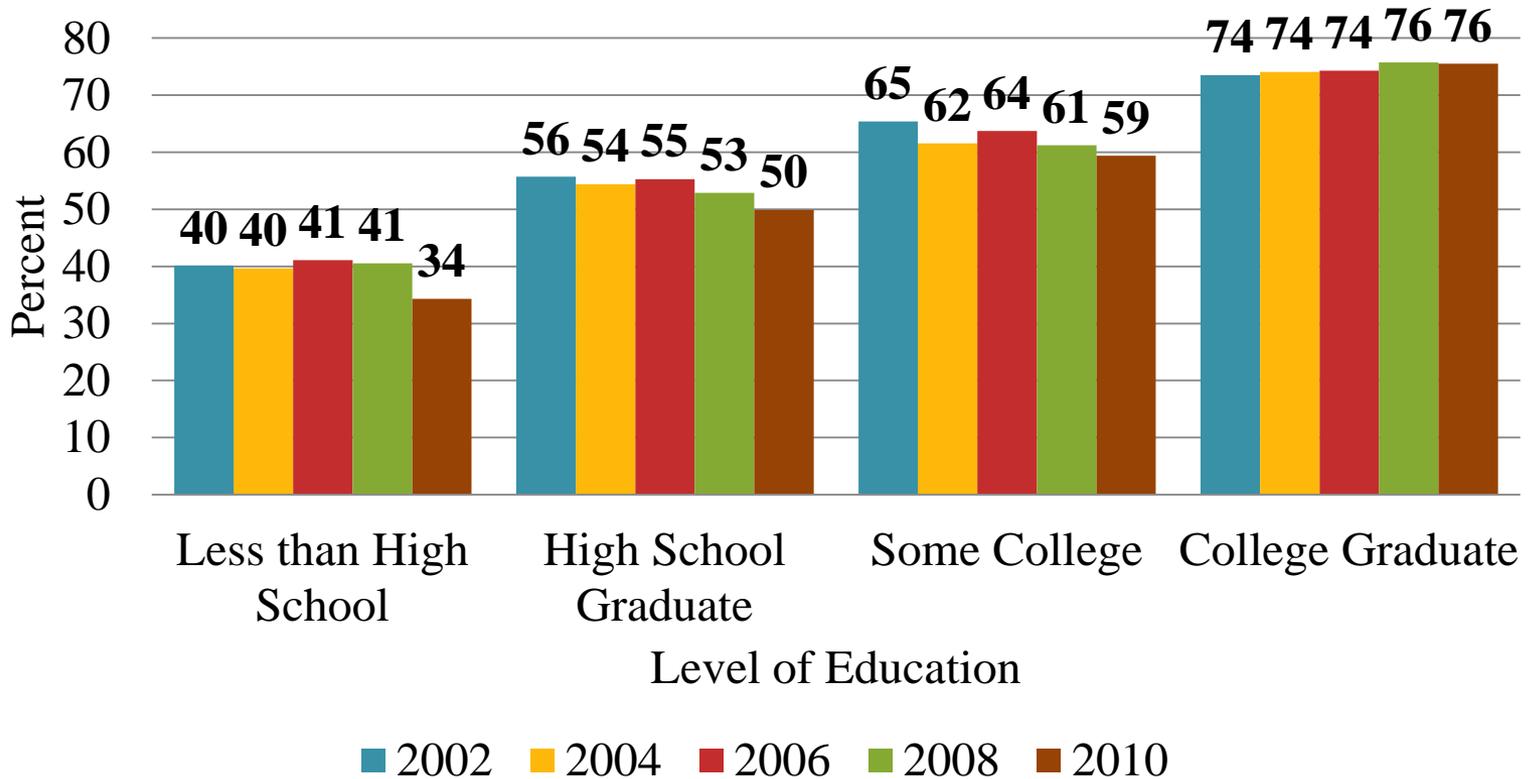
Data Source: Texas DSHS Center for Health Statistics - Behavioral Risk Factor Surveillance Survey (BRFSS).

Includes non-institutional adults only.

All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Dental Visits Among Adults

Percent of Adults, Age 18 Years & Over Who Visited a Dental Clinic Within Past Year, by Level of Education and Survey Year, Texas, 2002-2010



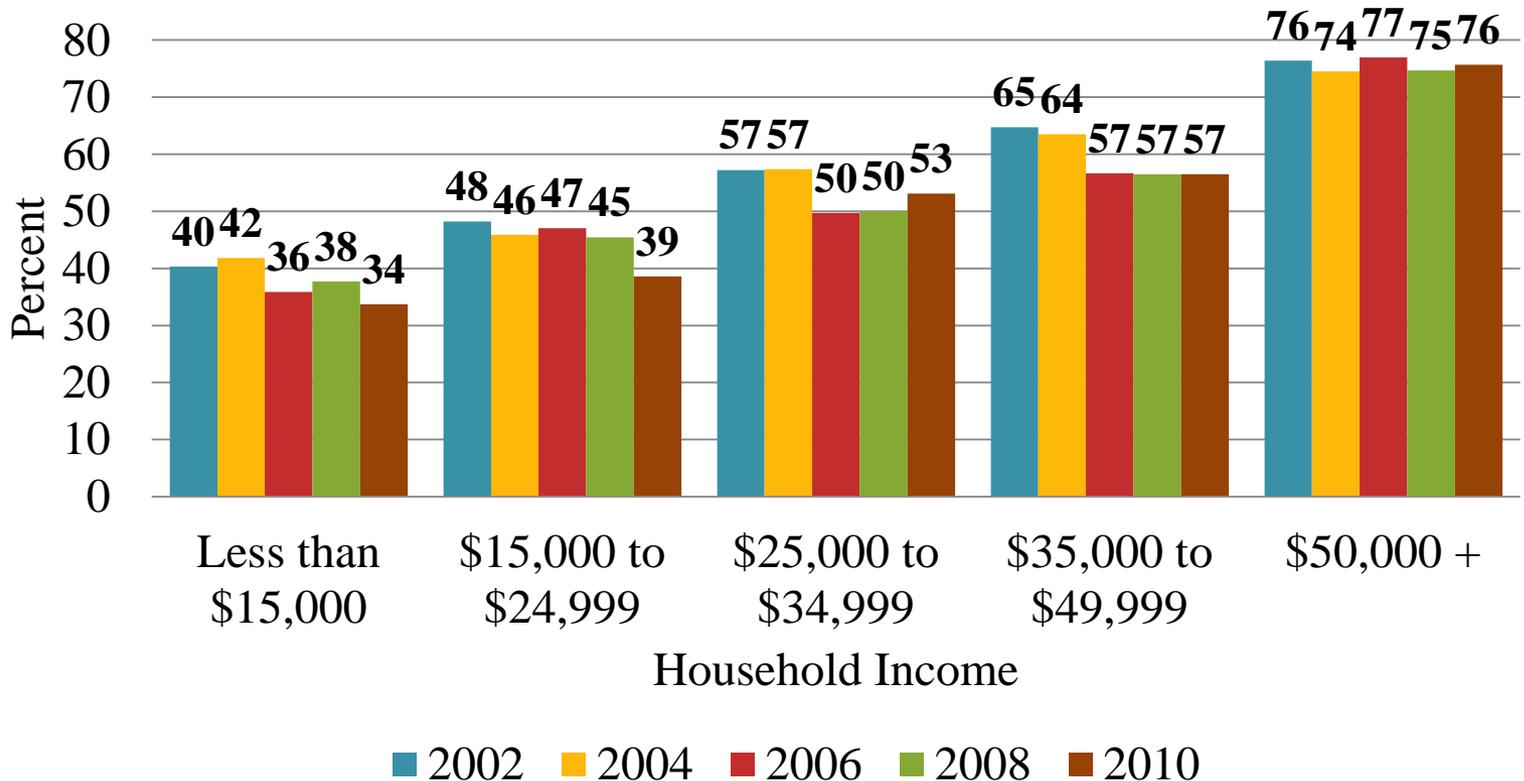
Data Source: Texas DSHS Center for Health Statistics - Behavioral Risk Factor Surveillance Survey (BRFSS).

Includes non-institutional adults only.

All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Dental Visits Among Adults

Percent of Adults, Age 18 Years & Over who Visited a Dental Clinic within Past Year, by Household Income and Survey Year, Texas, 2002-2010



Data Source: Texas DSHS Center for Health Statistics - Behavioral Risk Factor Surveillance Survey (BRFSS).

Includes non-institutional adults only.

All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

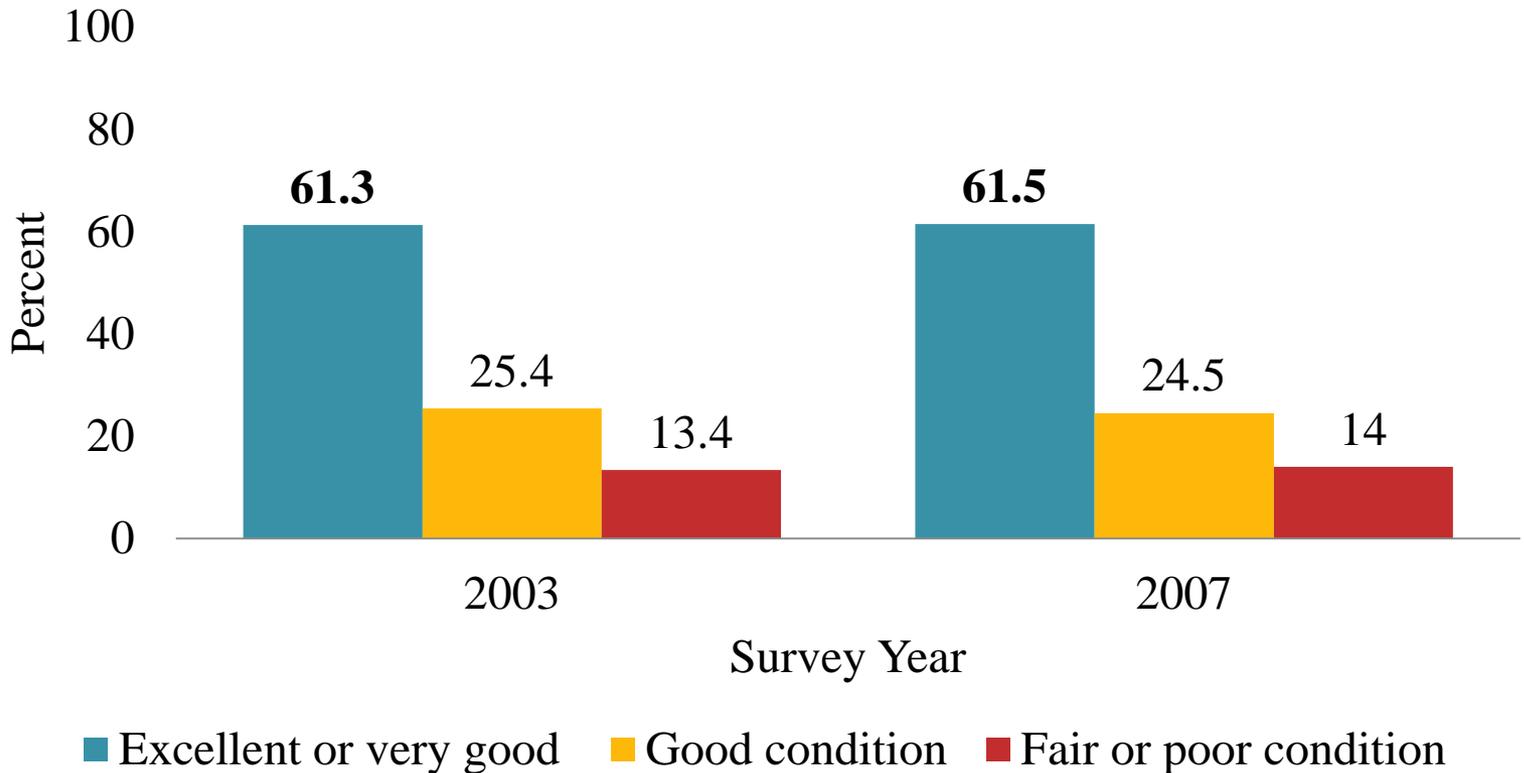
Children Dental Disease

Tooth decay is the most common long-lasting illness in children with severe outcomes. These outcomes include pain; infections of the mouth; tooth loss; and poor appearance. If not treated, pain, and infection can lead to problems in eating, speaking, learning, and possibly death.



Dental Disease Among Children

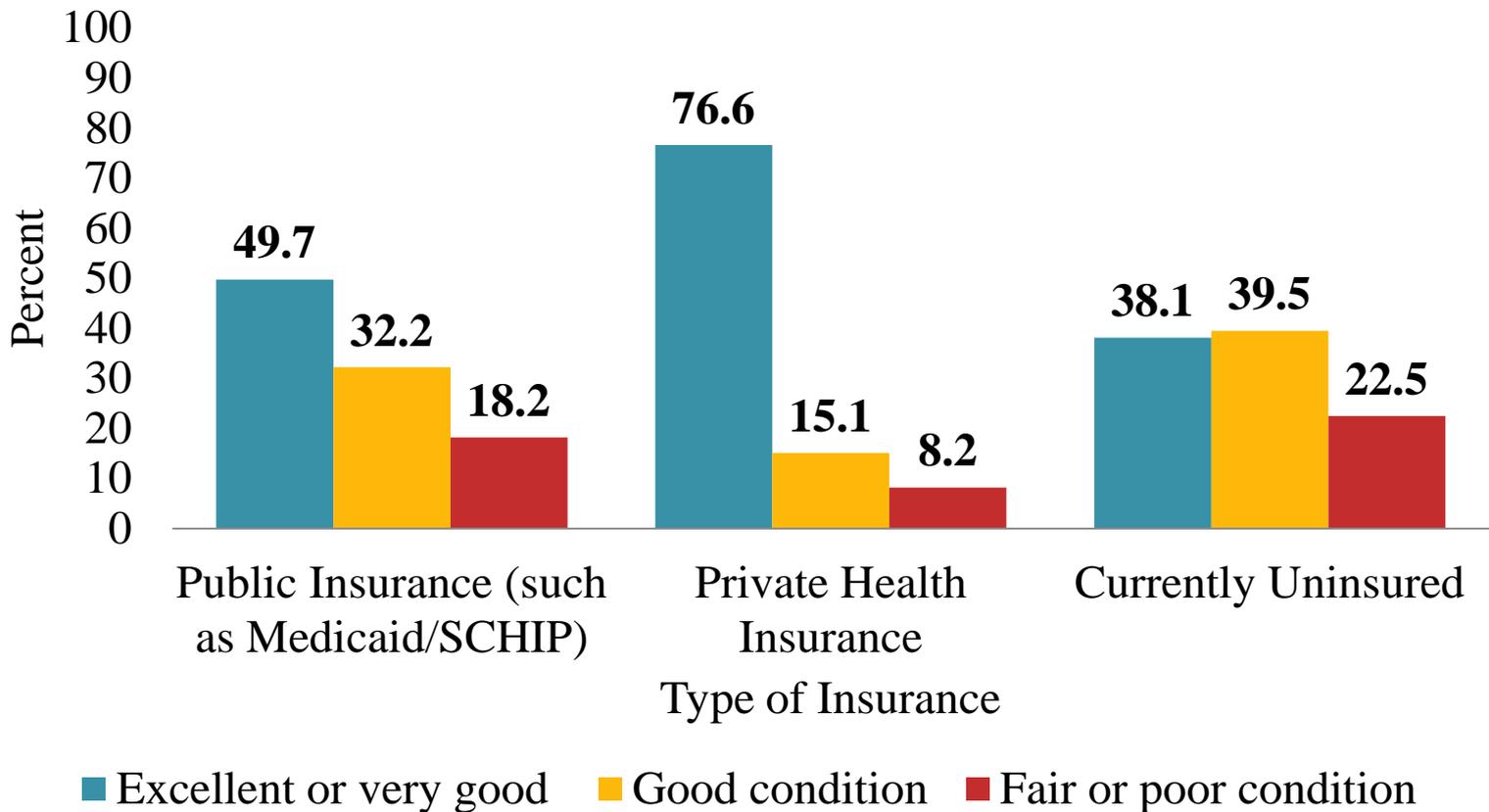
Condition of Children's Teeth, Age 1-17 Years, by Survey Year and Condition of Teeth, Texas, 2003 & 2007



Data Source: National Survey of Children's Health (NSCH).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

Dental Disease Among Children

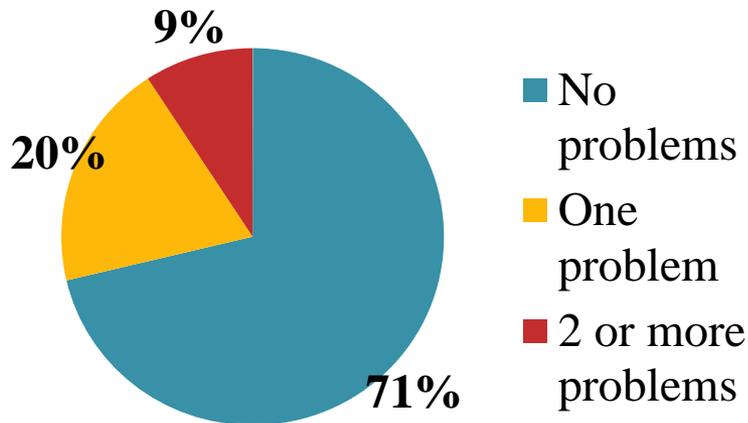
Condition of Children's Teeth, Age 1-17 Years by Type of Insurance, Texas, 2003 & 2007



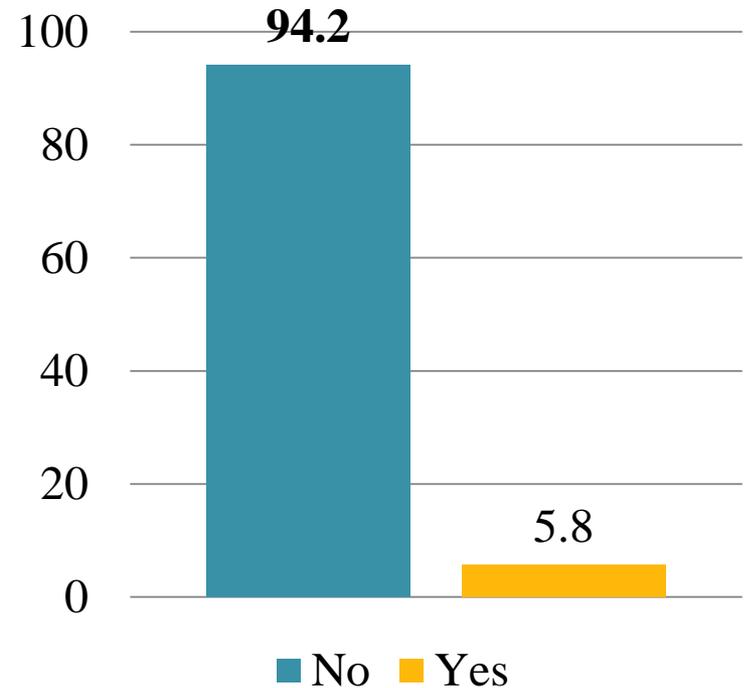
Data Source: National Survey of Children's Health (NSCH).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

Dental Disease Among Children

Percent of Children, Age 1-17 Years, Who Had Two or More Oral Health Problems in Past 6 Months, Texas, 2007



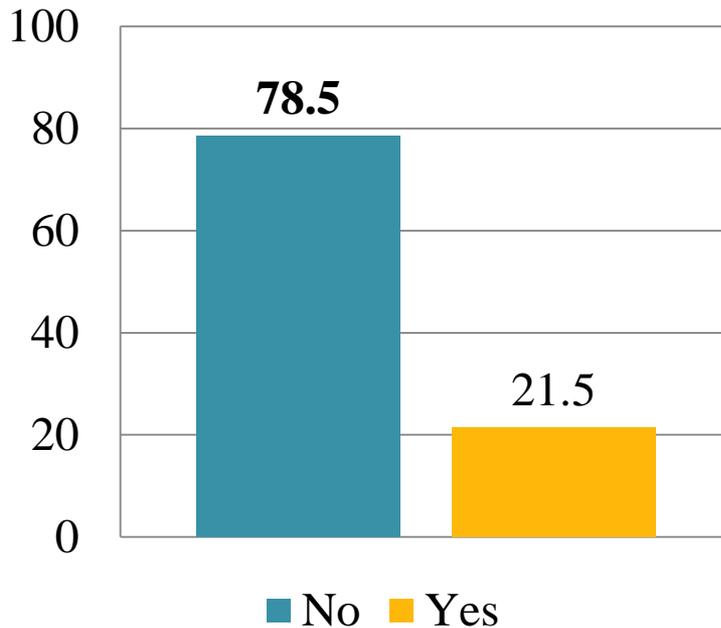
Percent of Children, Age 1-17 Years Who Had a Toothache in Past 6 Months, Texas, 2007



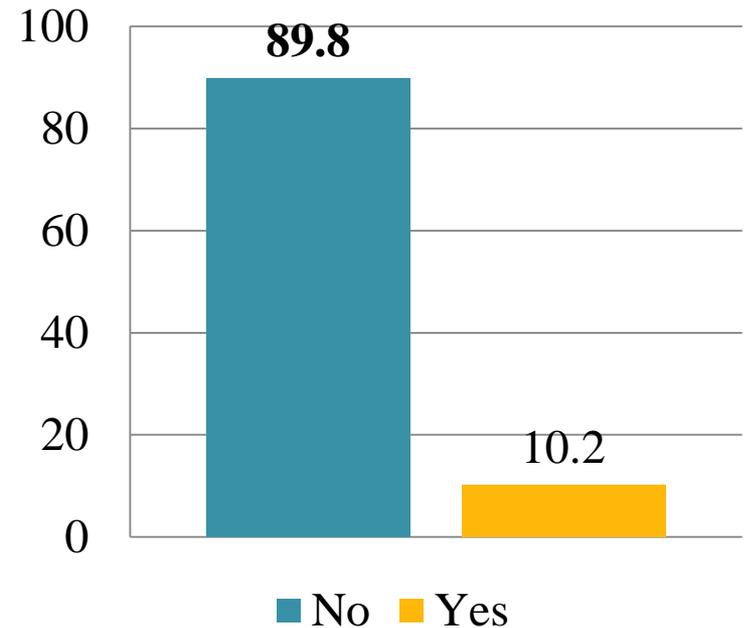
Data Source: National Survey of Children's Health (NSCH). Percentages are weighted to population characteristics. Estimates based on self-reported data.

Dental Disease Among Children

Percent of Children, Age 1-17 Years, Who Had Decayed Teeth or Cavities in Past 6 Months, Texas, 2007



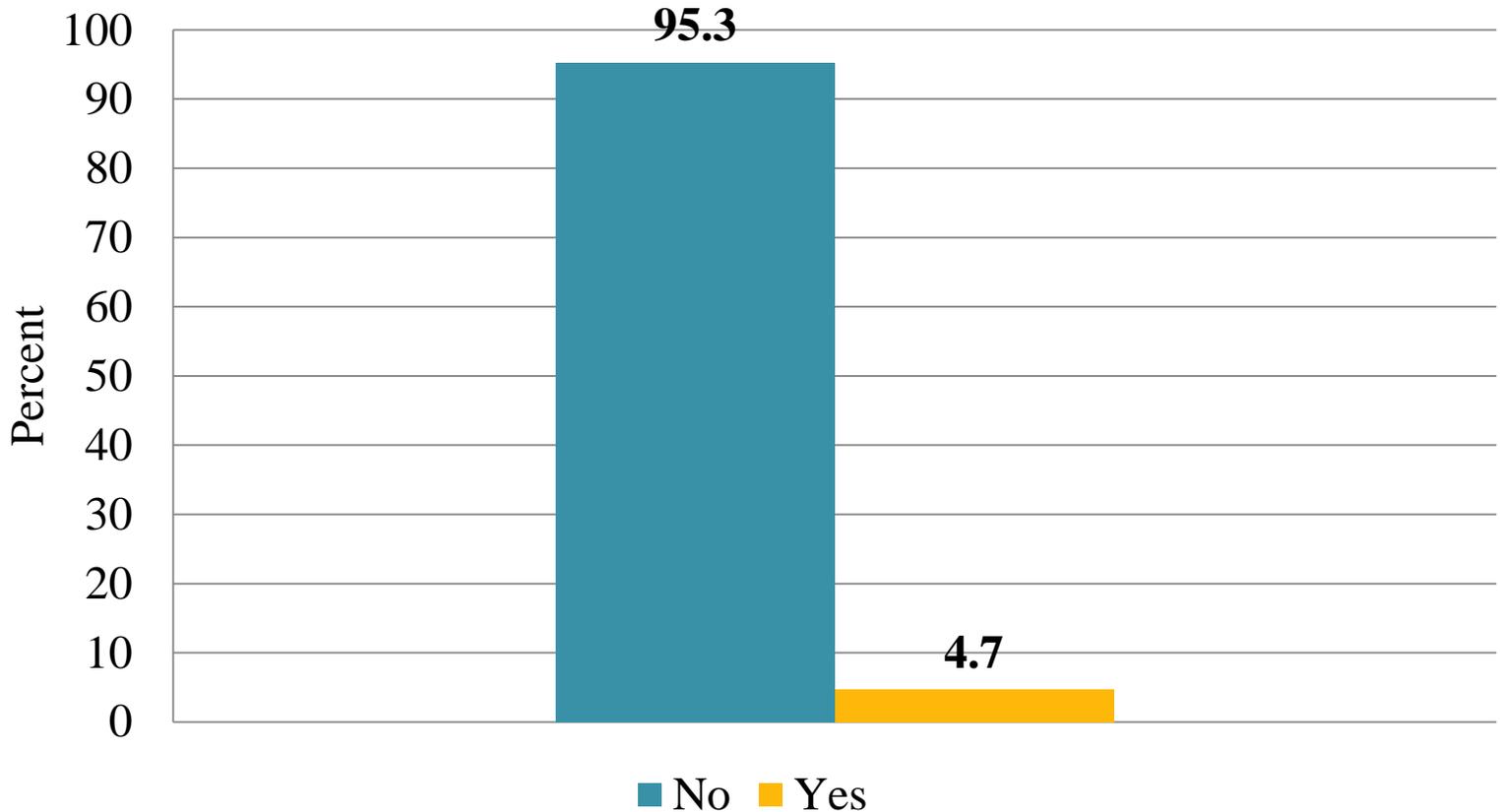
Percent of Children, Age 1-17 Years, Who Had Broken Teeth in Past 6 Months, Texas, 2007



Data Source: National Survey of Children's Health (NSCH). Percentages are weighted to population characteristics. Estimates based on self-reported data.

Dental Disease Among Children

Percent of Children, Age 1-17 Years, Who Had Bleeding Gums in Past 6 Months, Texas, 2007



Data Source: National Survey of Children's Health (NSCH).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

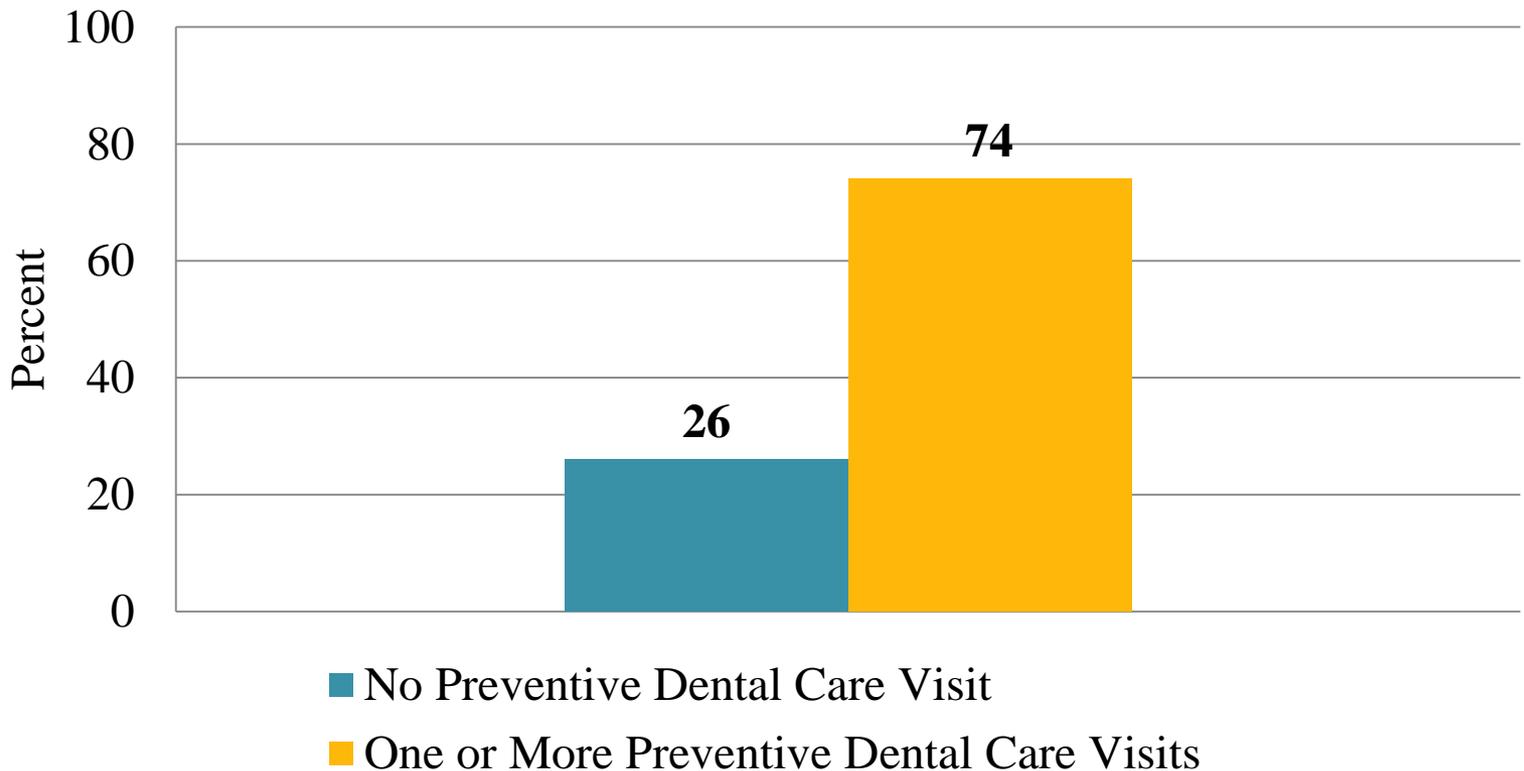
Children Dental Visits

Regular dental visits are a key part in having a healthy mouth. Visiting the dentist lowers the chance of illness by finding problems early and treating them. These visits are even more important for children. Visits can include applying sealants, plastic coatings put on teeth; fluoride treatments; suggesting changes in diet; and providing instructions on how to take care of teeth to help lower decay.



Dental Visits Among Children

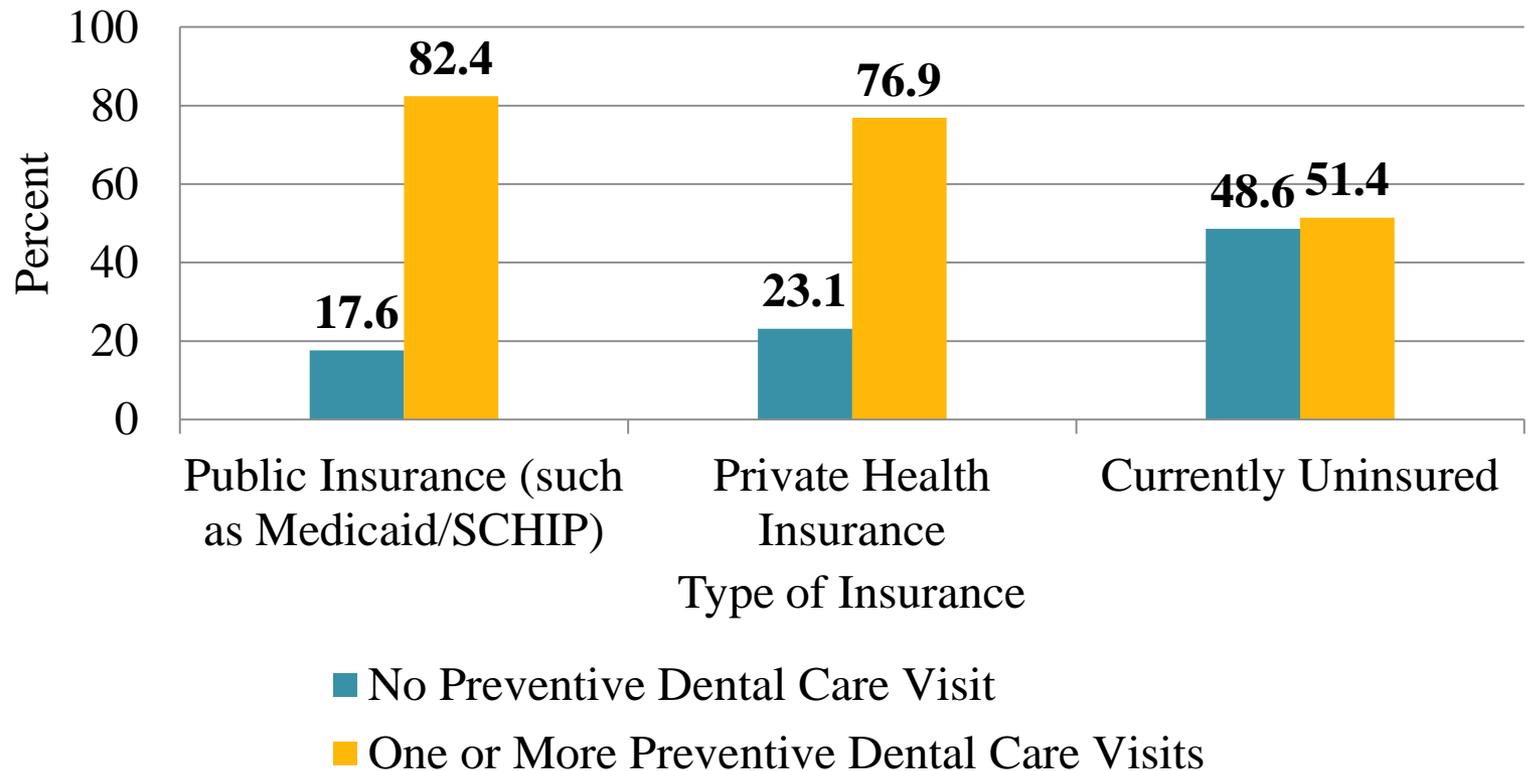
Percent of Children, Age 1-17 Years, With One or More Preventive Dental Care Visits in Past 12 Months, Texas, 2007



Data Source: National Survey of Children's Health (NSCH).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

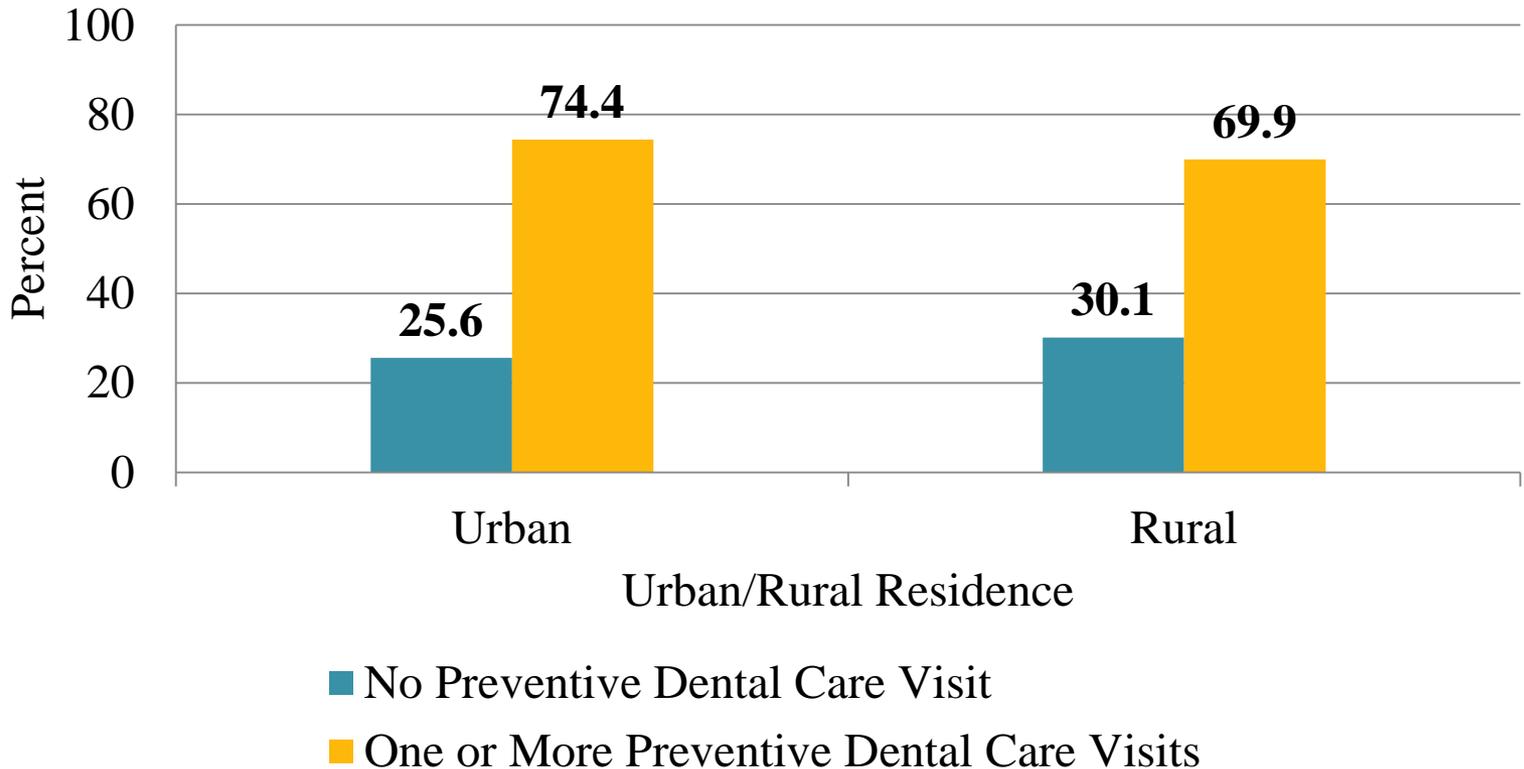
Dental Visits Among Children

Percent of Children, Age 1-17 Years, With One or More Preventive Dental Care Visits in Past 12 Months, by Type of Insurance, Texas, 2007



Dental Visits Among Children

Percent of Children, Age 1-17 Years, With One or More Preventive Dental Care Visits in Past 12 Months, by Urban/Rural Residence, Texas, 2007



Data Source: National Survey of Children's Health (NSCH).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

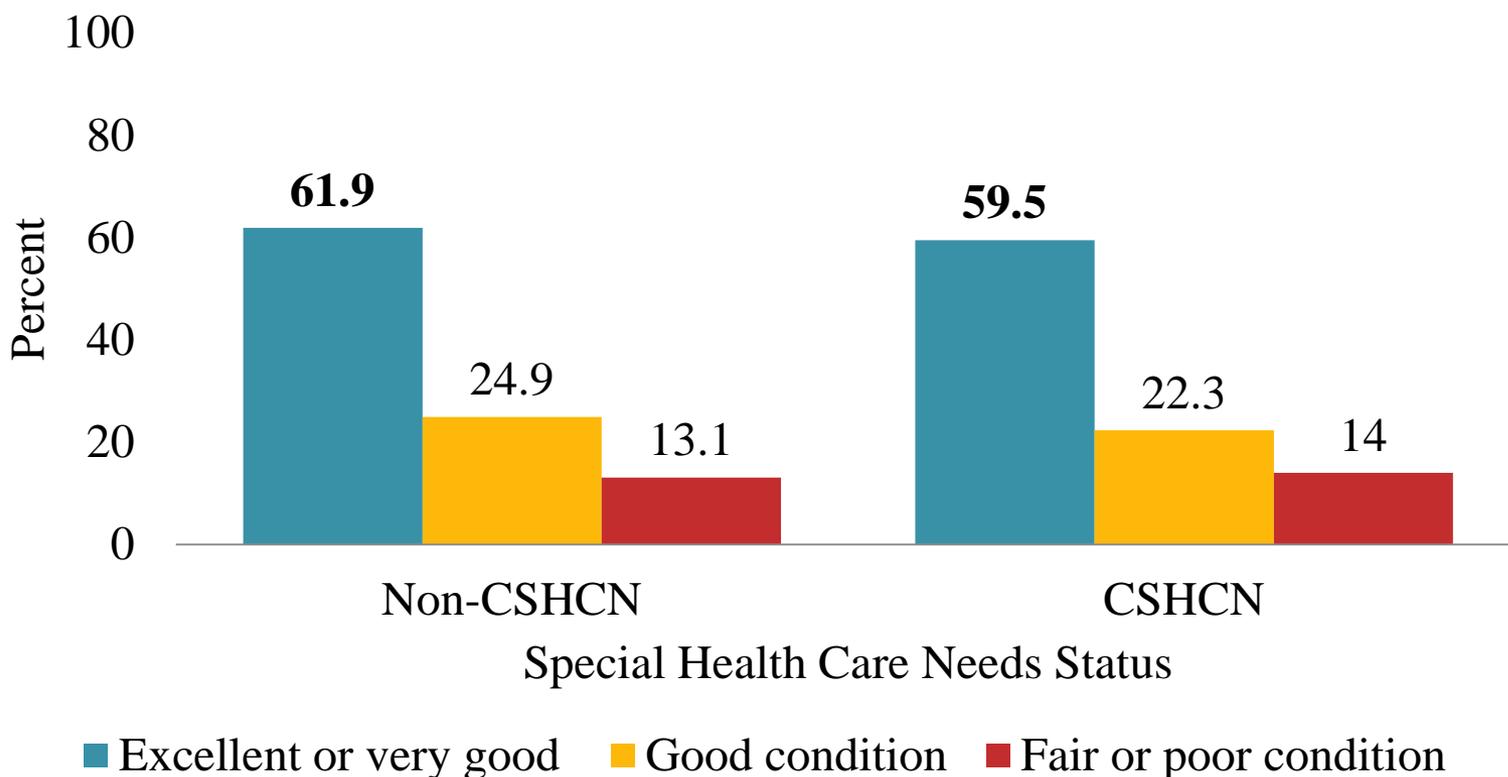
Children Special Needs

Children with special health care needs are at higher risk for dental disease. This includes people living in poverty or with disabilities. They often have a hard time getting the care they need.



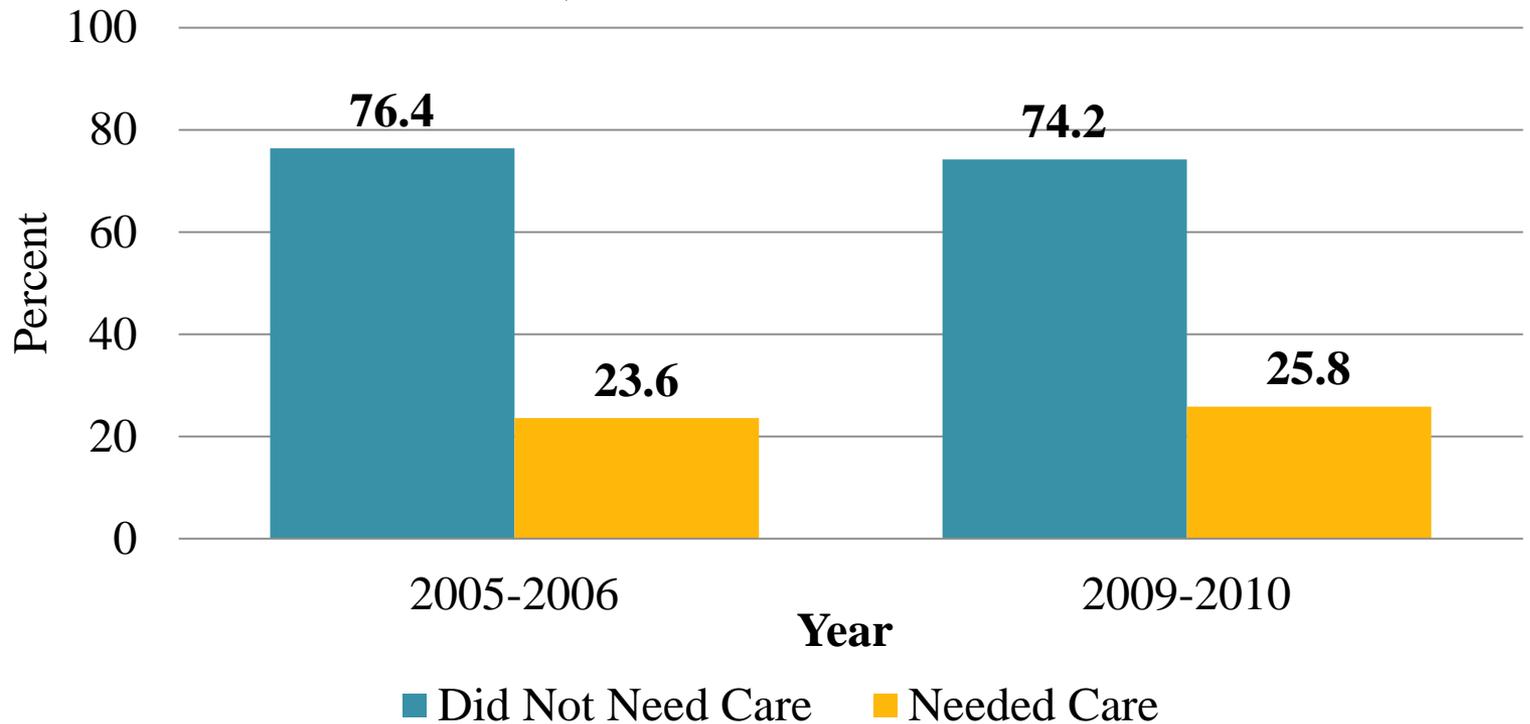
Dental Disease Among Special Needs Children

Condition of Children's Teeth, Age 1-17 Years, by Special Health Care Needs Status and Condition of Teeth, Texas, 2003 & 2007



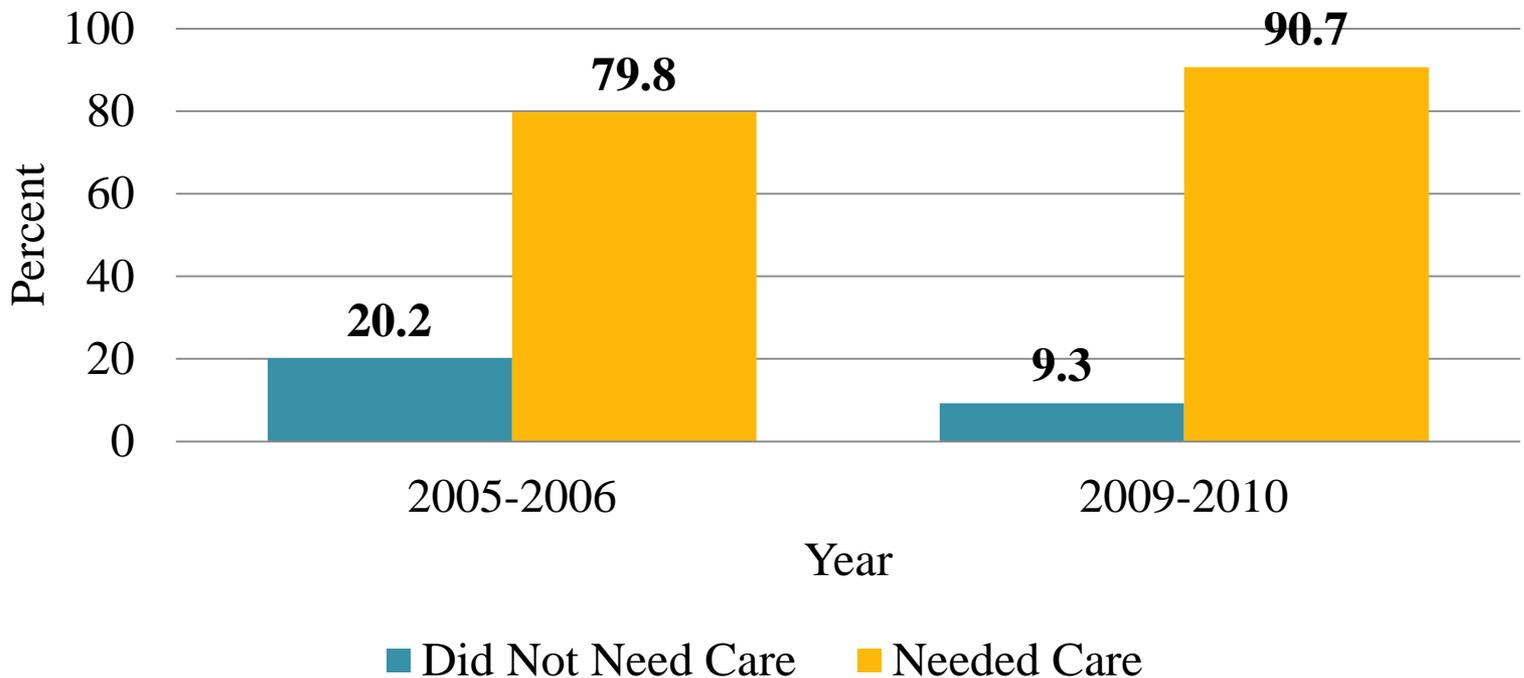
Dental Visits Among Special Needs Children

**Percent of Special Needs Children, Age 0-17 Years,
Who Had a Need for Any Other Dental Care or
Orthodontia in Past Year,
Texas, 2005-2006 & 2009-2010**



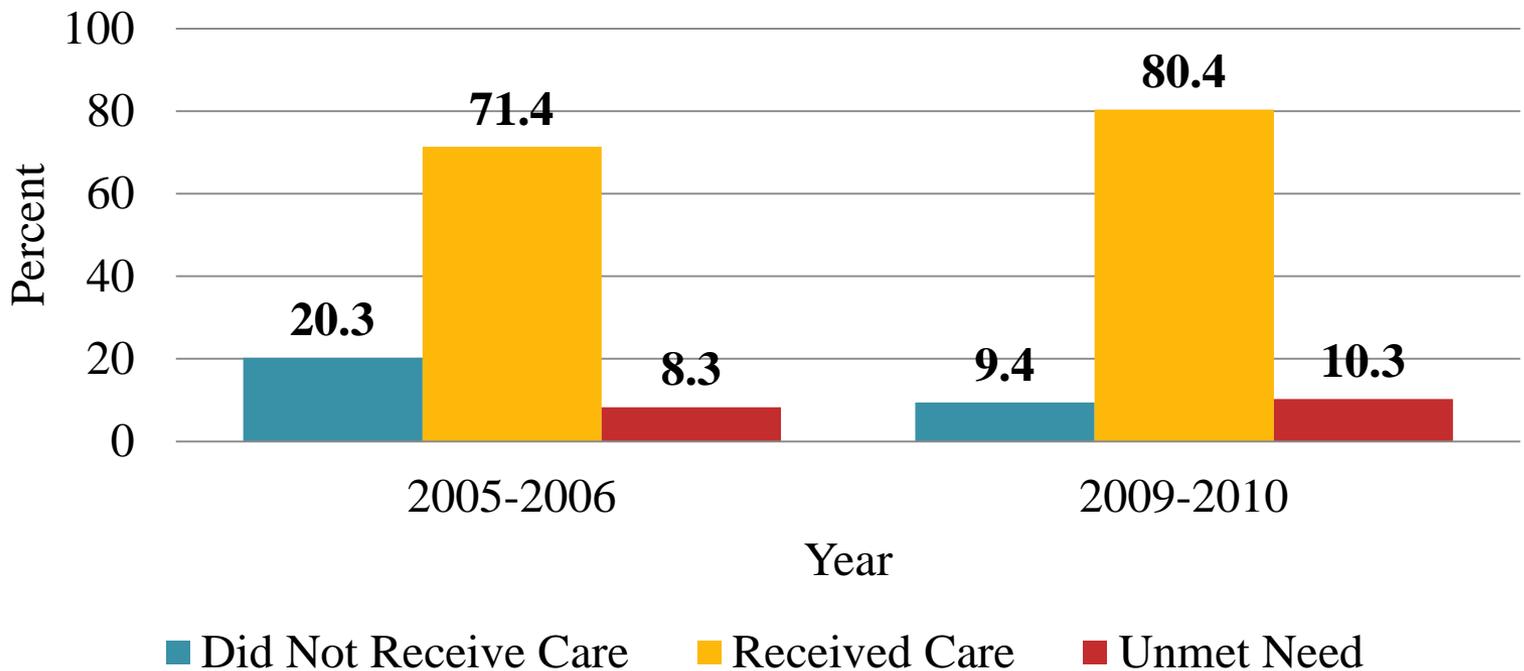
Dental Visits Among Special Needs Children

**Percent of Special Needs Children, Age 0-17 Years,
Who Had a Need for at Least One Preventive
Dental Visit in Past Year,
Texas, 2005-2006 & 2009-2010**



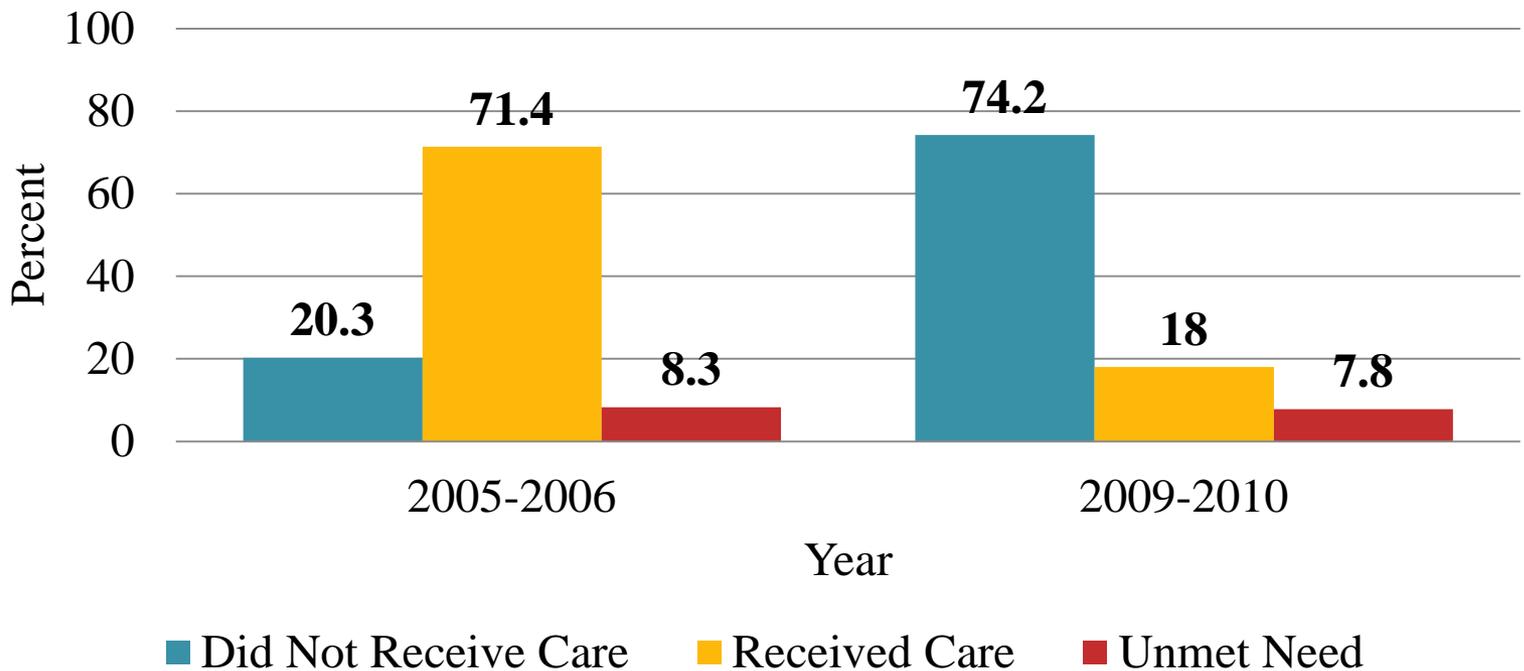
Dental Visits Among Special Needs Children

Percent of Special Needs Children, Age 0-17 Years, Who Received All Preventive Dental Care Needed in Past Year, Texas, 2005-2006 & 2009-2010



Dental Visits Among Special Needs Children

**Percent of Special Needs Children, Age 0-17 Years,
Who Received All Other
Dental Care Needed in Past Year,
Texas, 2005-2006 & 2009-2010**



Data Source: National Survey of Children with Special Health Care Needs (NS-CSHCN).
Percentages are weighted to population characteristics. Estimates based on self-reported data.

Pregnant Women

It is very important to have good health within the mouth during pregnancy. A mother's health affects both the mother and unborn baby. Pregnancy can lead to a higher risk of tooth decay; early wearing away of teeth; gum disease; and loose teeth. Poor oral health in the mother can lead to poor birth outcomes; high blood pressure; and poor control of long-lasting illnesses such as diabetes. The spread of germs in the mouth from mother to baby can also lead to tooth decay in the baby. It is just as important for a pregnant woman to see a dentist as it is for her to take care of her teeth at home.



<http://www.buildingbetteroralhealth.org/>

<http://www.dshs.state.tx.us/dental/>

Image from: Texas DSHS Take Time for Teeth Texas Health Steps Dental Health Program

Pregnant Women

Texas PRAMS 2005-2008

Overall percent of women who reported, <i>during pregnancy</i> , that they needed to see a dentist for a problem.	24.2%
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Overall percent of women who reported, <i>during pregnancy</i> , that they went to a dentist or dental clinic.	28.8%
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Overall percent of women who reported, <i>during pregnancy</i> , that a dentist or other health care worker talked to them about how to care for their teeth or gums.	31.8%
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Texas PRAMS

2009

2010

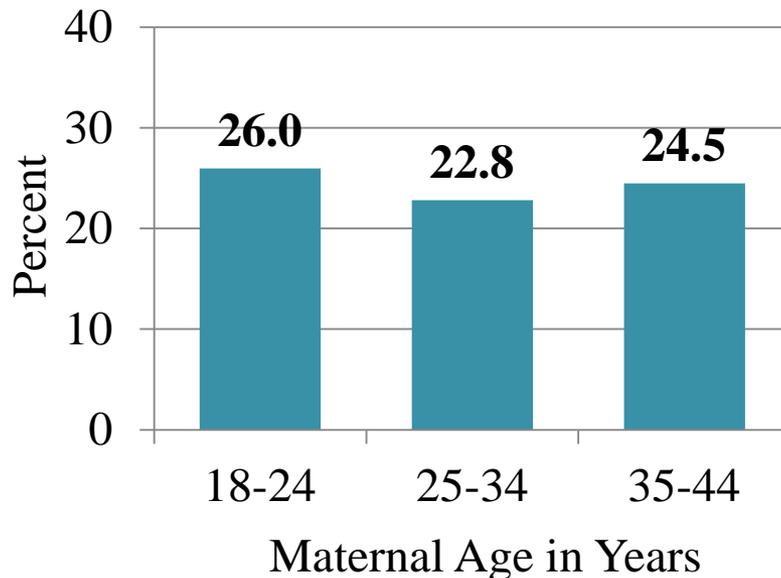
Overall percent of women who reported that, <i>during their most recent pregnancy</i> , they had their teeth cleaned by a dentist or dental hygienist.	27.2%	28.7%
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Overall percent of women who reported that, <i>after their most recent pregnancy</i> , they had their teeth cleaned by a dentist or dental hygienist.	21.3%	23.8%
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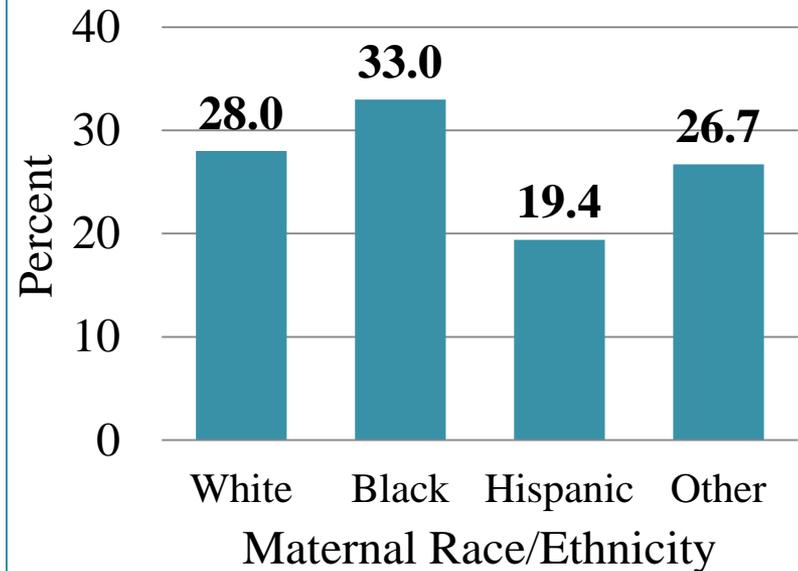
Data Source: Pregnancy Risk Assessment Monitoring System (PRAMS). PRAMS does not currently meet CDC requirement of a 70% response rate sample strata for survey years 2005-2007. All reported rates are weighted. Estimates based on self-reported data.

Dental Disease Among Pregnant Women

Percent of women who reported, *during pregnancy*, that they needed to see a dentist for a problem, by Maternal Age, Texas, 2005-2008

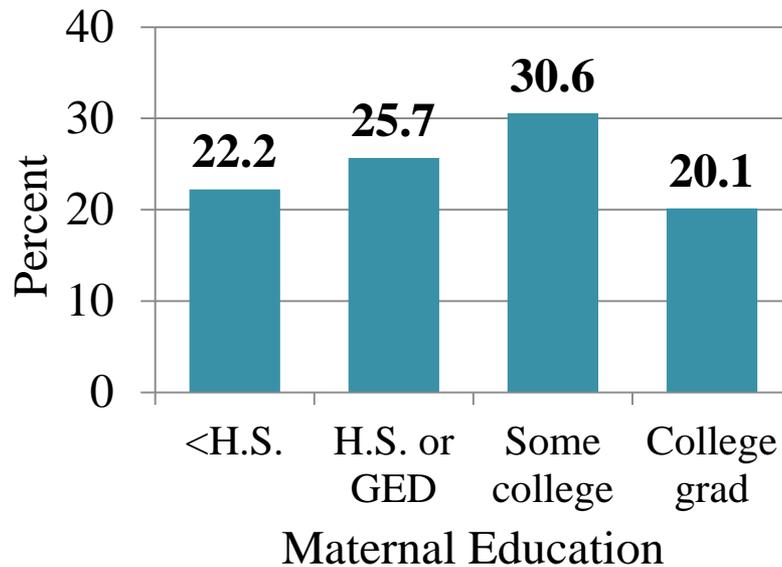


Percent of women who reported, *during pregnancy*, that they needed to see a dentist for a problem, by Maternal Race/Ethnicity, Texas, 2005-2008

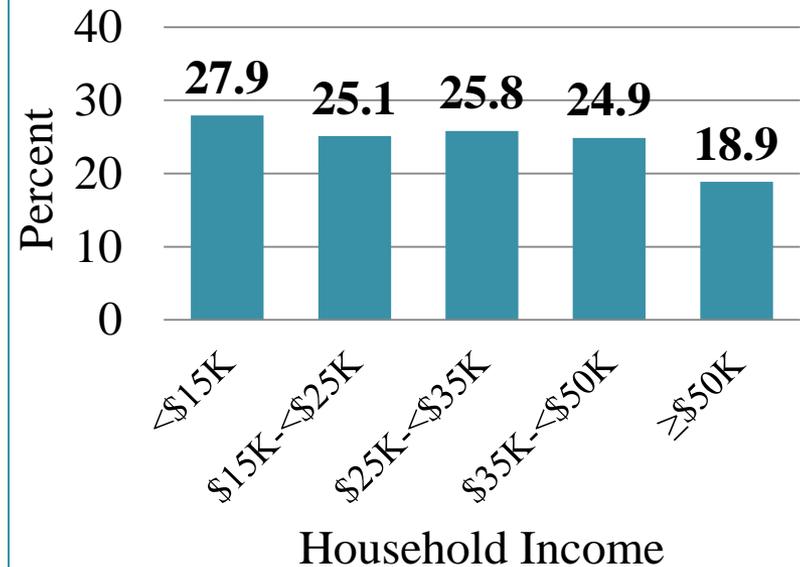


Dental Disease Among Pregnant Women

Percent of women who reported, during pregnancy, that they needed to see a dentist for a problem, by Maternal Education, Texas, 2005-2008

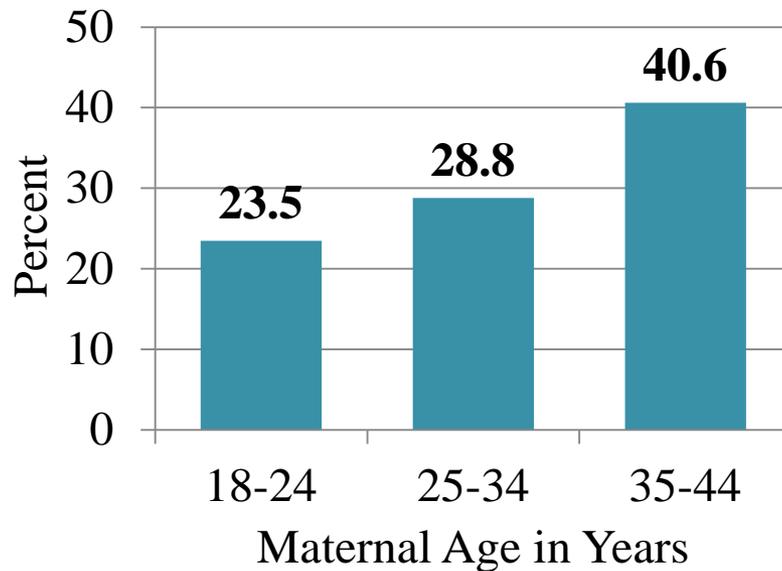


Percent of women who reported, during pregnancy, that they needed to see a dentist for a problem, by Household Income, Texas, 2005-2008

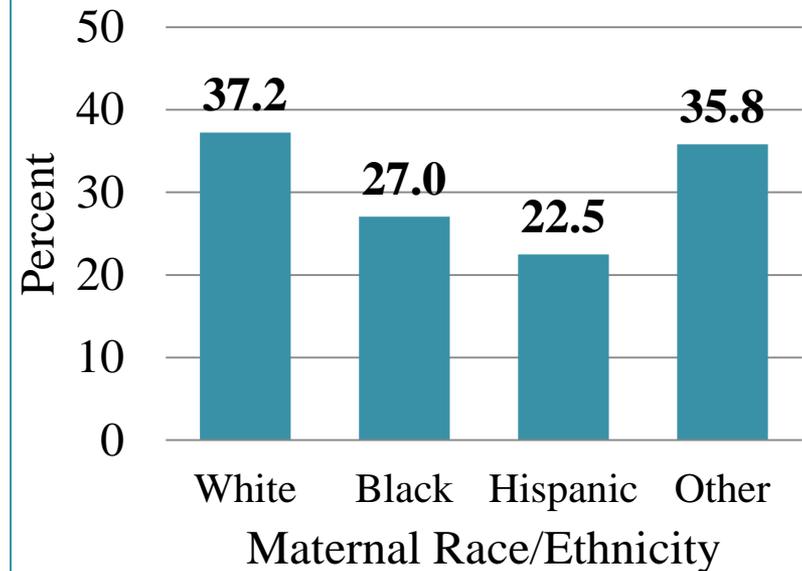


Dental Disease Among Pregnant Women

Percent of women who reported, *during pregnancy*, that they went to a dentist or dental clinic, by Maternal Age, Texas, 2005-2008

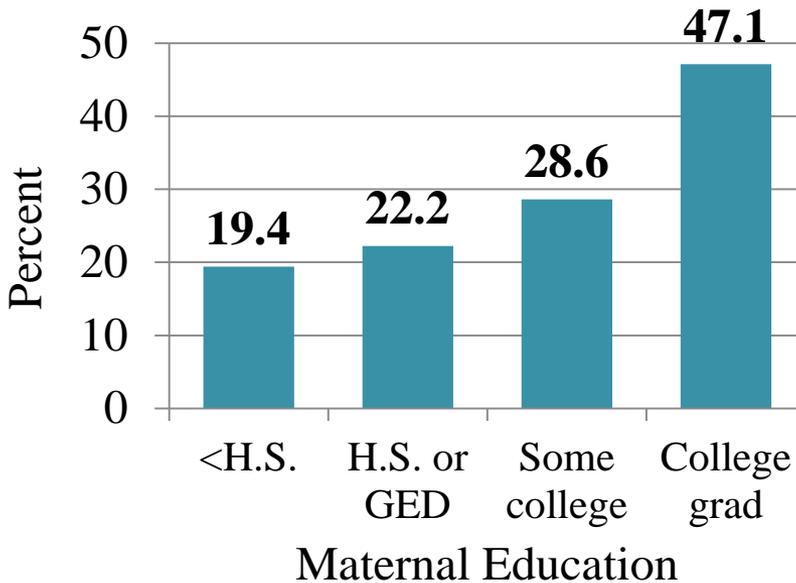


Percent of women who reported, *during pregnancy*, that they went to a dentist or dental clinic, by Maternal Race/Ethnicity, Texas, 2005-2008

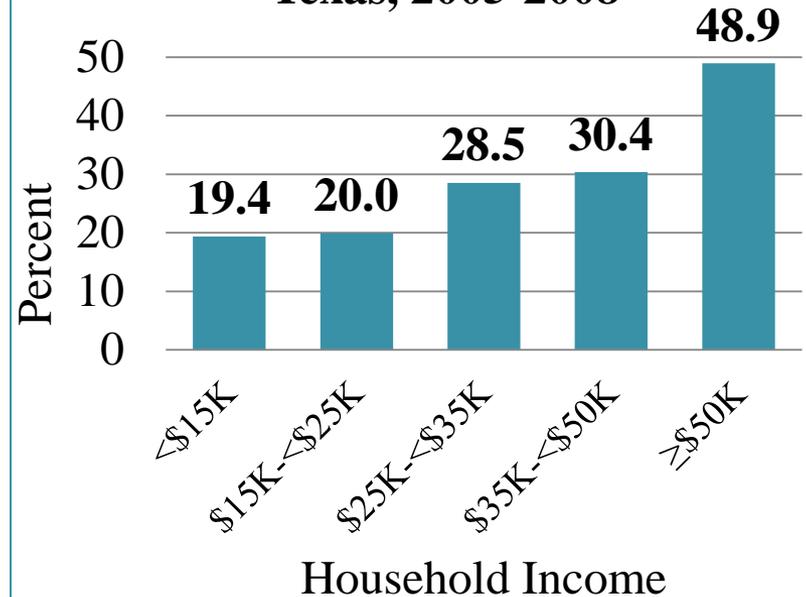


Dental Visits Among Pregnant Women

Percent of women who reported, during pregnancy, that they went to a dentist or dental clinic, by Maternal Education, Texas, 2005-2008

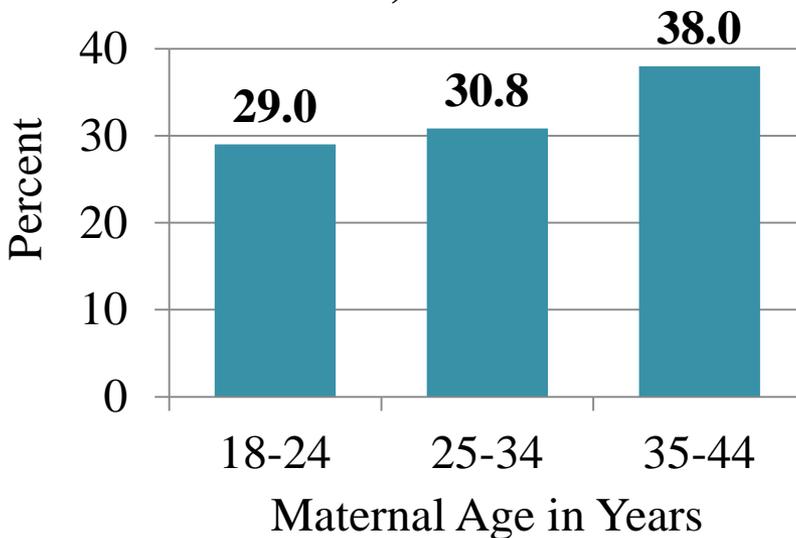


Percent of women who reported, during pregnancy, that they went to a dentist or dental clinic, by Household Income, Texas, 2005-2008

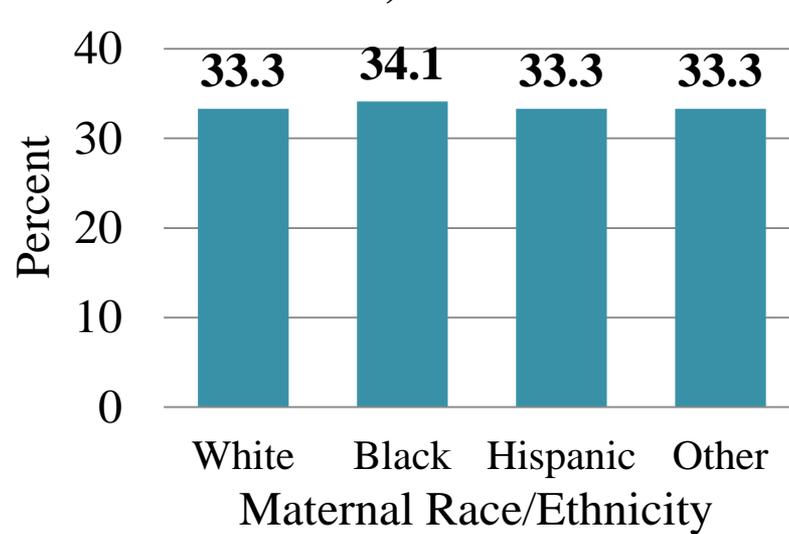


Dental Visits Among Pregnant Women

Percent of women who reported, during pregnancy, that a dentist/healthcare worker talked to them about care of teeth/gums, by Maternal Age, Texas, 2005-2008

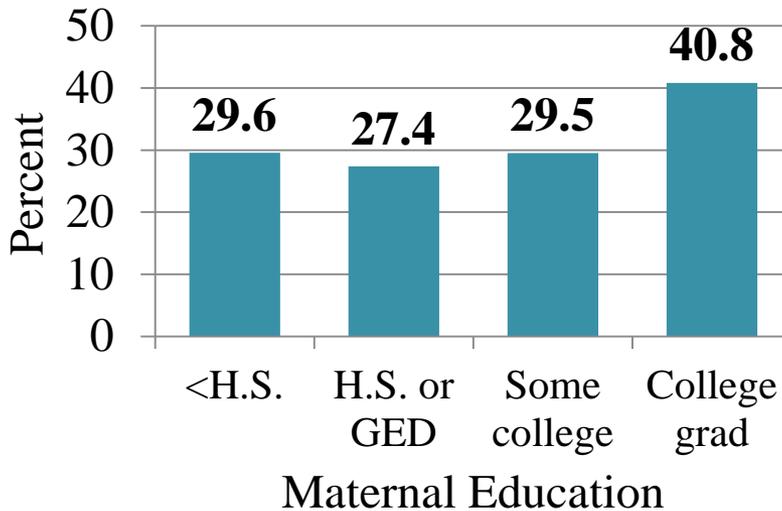


Percent of women who reported, during pregnancy, that a dentist/healthcare worker talked to them about care of teeth/gums, by Maternal Race/Ethnicity, Texas, 2005-2008



Dental Visits Among Pregnant Women

Percent of women who reported, during pregnancy, that a dentist/healthcare worker talked to them about care of teeth/gums, by Maternal Education, Texas, 2005-2008

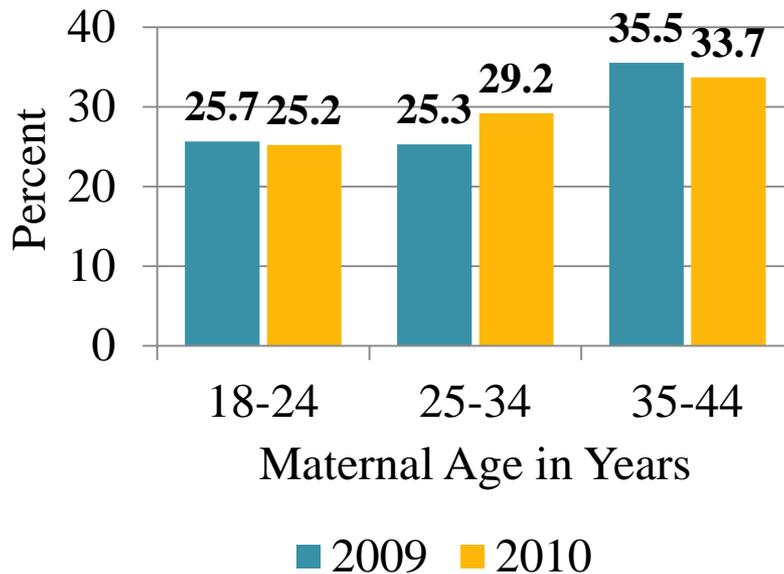


Percent of women who reported, during pregnancy, that a dentist/healthcare worker talked to them about care of teeth/gums, by Household Income, Texas, 2005-2008

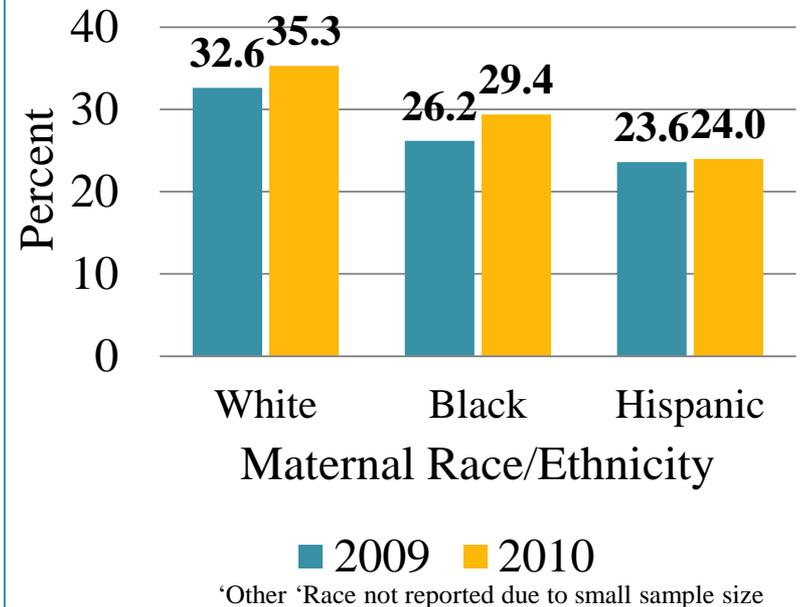


Dental Visits Among Pregnant Women

Percent of women who reported, *during most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Age, Texas, 2009-2010



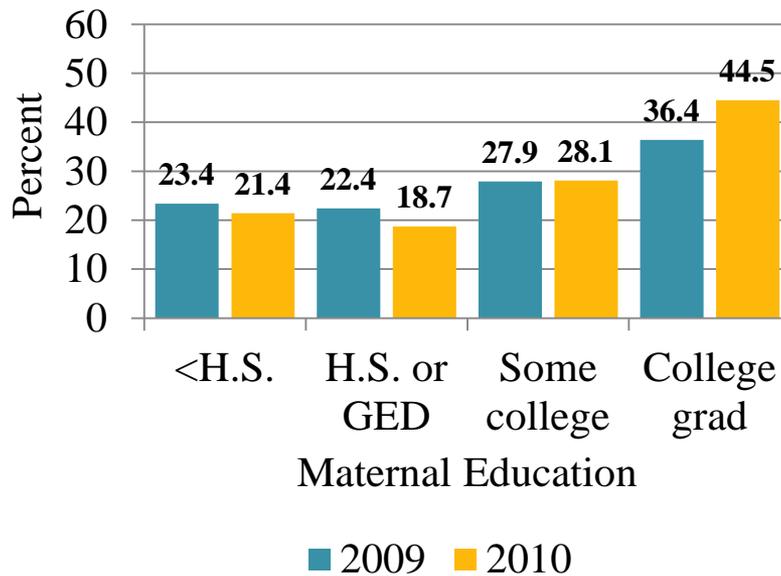
Percent of women who reported, *during most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Race/Ethnicity, Texas, 2009-2010



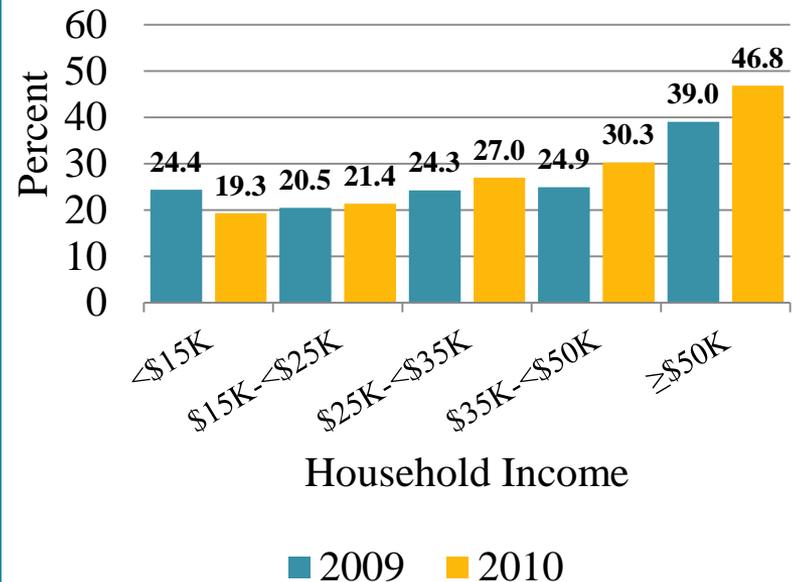
Data Source: Pregnancy Risk Assessment Monitoring System (PRAMS). All reported rates are weighted. Estimates based on self-reported data.

Dental Visits Among Pregnant Women

Percent of women who reported, *during most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Education, Texas, 2009-2010



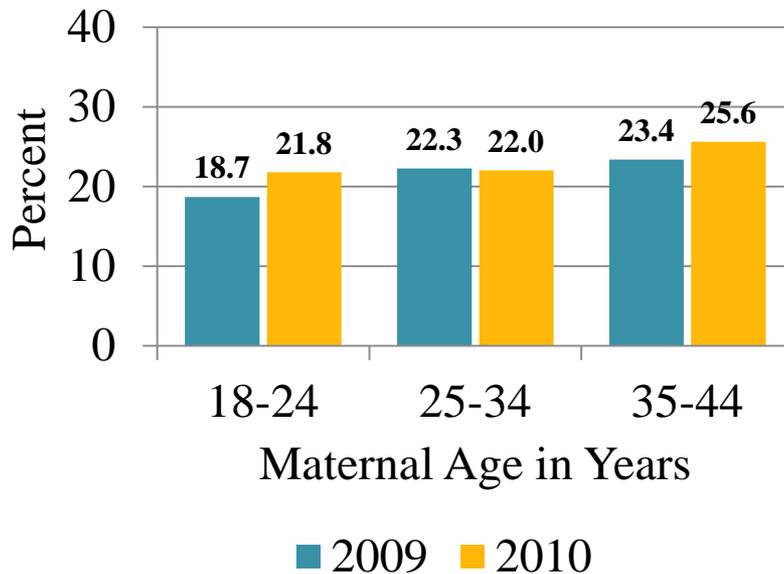
Percent of women who reported, *during most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Household Income, Texas, 2009-2010



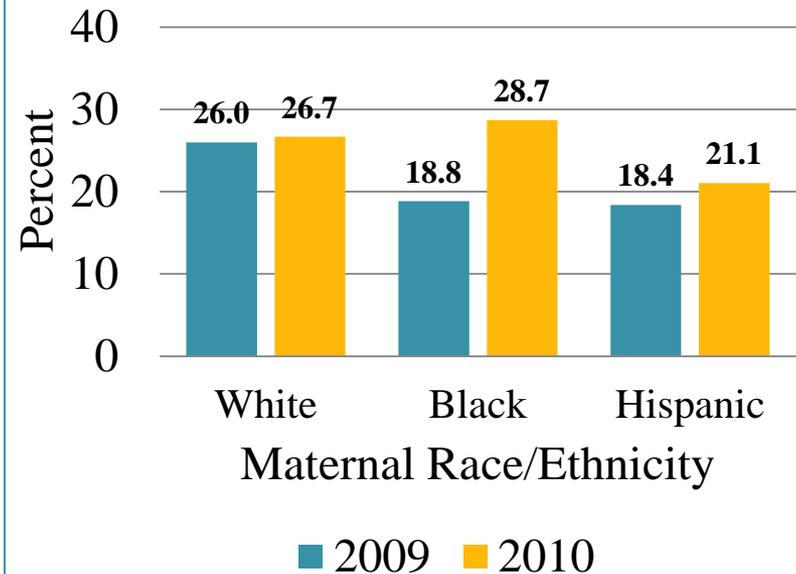
Data Source: Pregnancy Risk Assessment Monitoring System (PRAMS). All reported rates are weighted. Estimates based on self-reported data.

Dental Visits Among Pregnant Women

Percent of women who reported, *after most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Age, Texas, 2009-2010



Percent of women who reported, *after most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Race/Ethnicity, Texas, 2009-2010

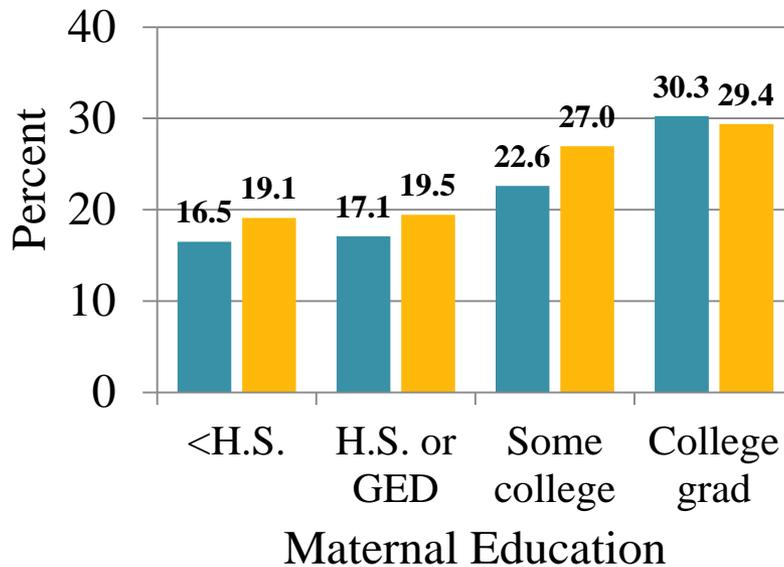


“Other” Race not reported due to small sample size

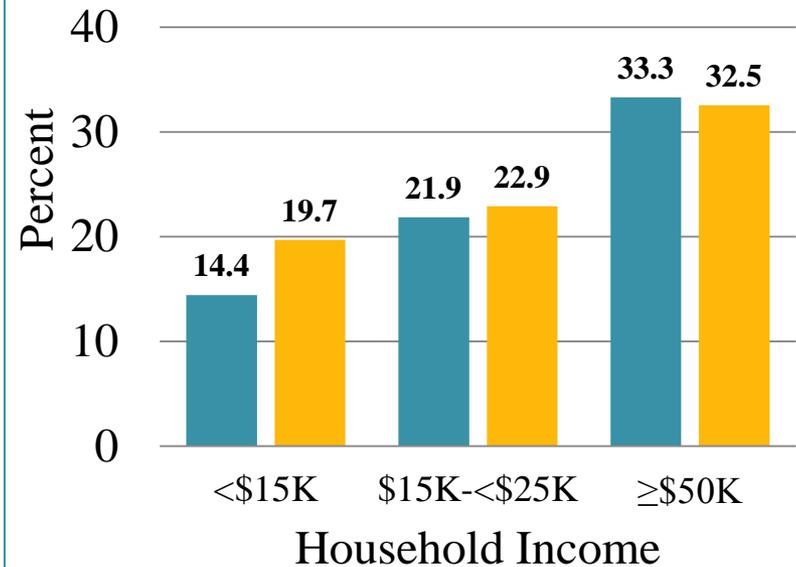
Data Source: Pregnancy Risk Assessment Monitoring System (PRAMS). All reported rates are weighted. Estimates based on self-reported data.

Dental Visits Among Pregnant Women

Percent of women who reported, *after most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Maternal Education, Texas, 2009-2010



Percent of women who reported, *after most recent pregnancy*, teeth cleaning by a dentist or dental hygienist, by Household Income, Texas, 2009-2010



Missing categories \$25K- <\$35K and \$35K-<\$50K have sample sizes too small to report

Data Source: Pregnancy Risk Assessment Monitoring System (PRAMS). All reported rates are weighted. Estimates based on self-reported data.

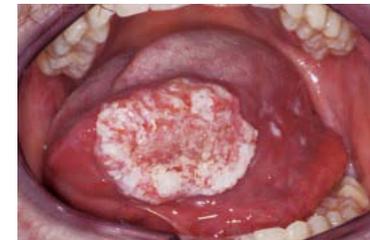
Cancer of the Mouth and Throat

Oral cancer includes cancers of the mouth and the throat (pharynx). Oral cancer often starts as a tiny white or red spot or sore anywhere in the mouth that does not heal. All areas of the mouth can be involved. Oral cancers can get worse very quickly and finding it early can lead to a better outcome. Risk factors include age, tobacco use, alcohol use, and too much time under the sun for lip cancers. Oral cancers are still found in patients with no known risk factors.

To learn more, visit:

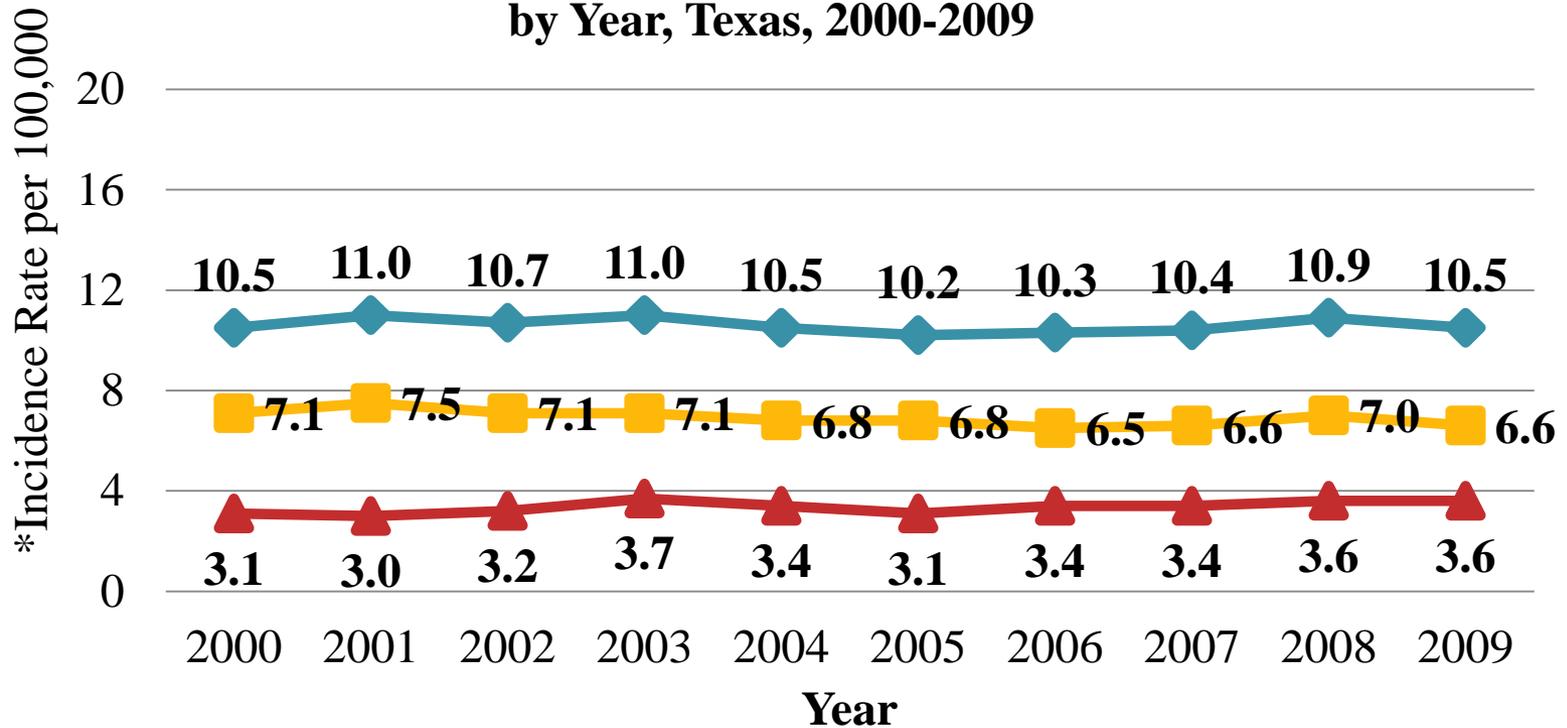
Cancer Epidemiology and Surveillance at
<http://www.dshs.state.tx.us/tcr/default.shtm>

CDC National Oral Health Surveillance System at
<http://www.cdc.gov/nohss/>



Oral Cavity/Pharynx Cancer

Age-Adjusted Oral and Pharyngeal Cancer Incidence Rate, by Year, Texas, 2000-2009



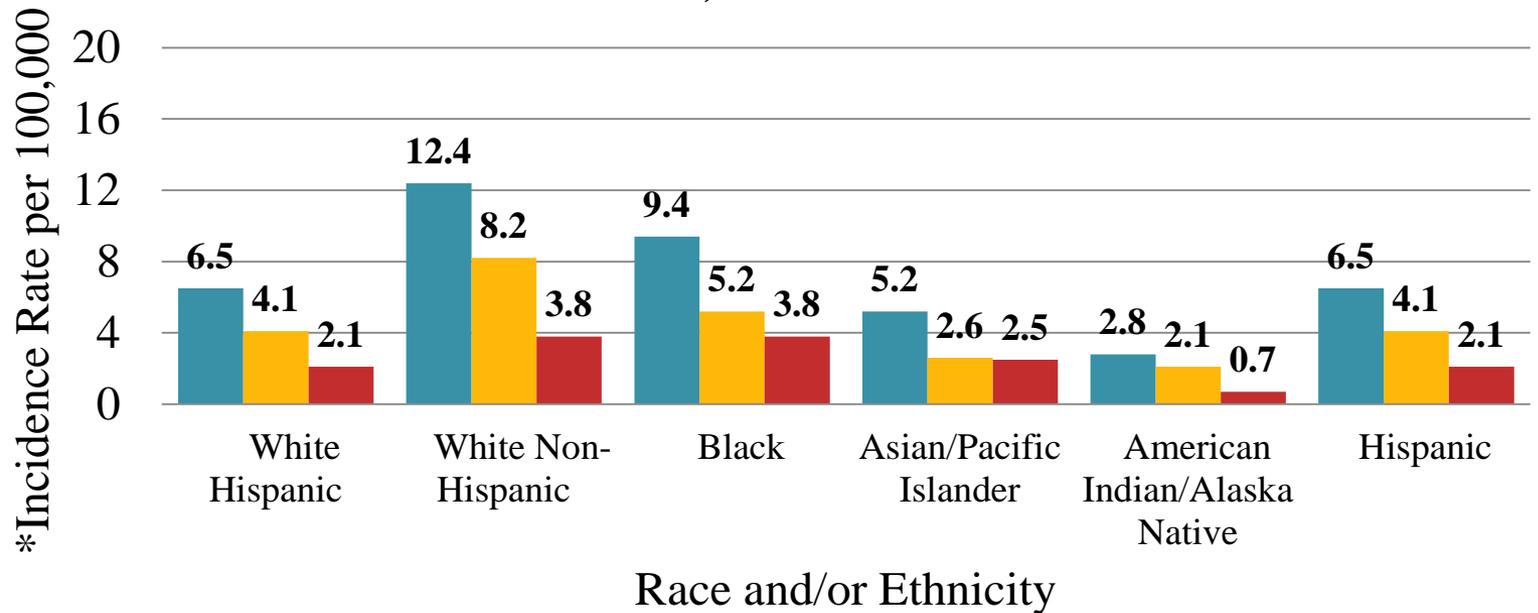
◆ Oral Cavity and Pharynx Cancer ■ Oral Cavity Cancer ▲ Pharynx Cancer

Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Average Annual Oral and Pharyngeal Cancer Incidence Rates, by Race and/or Ethnicity, Texas, 2000-2009



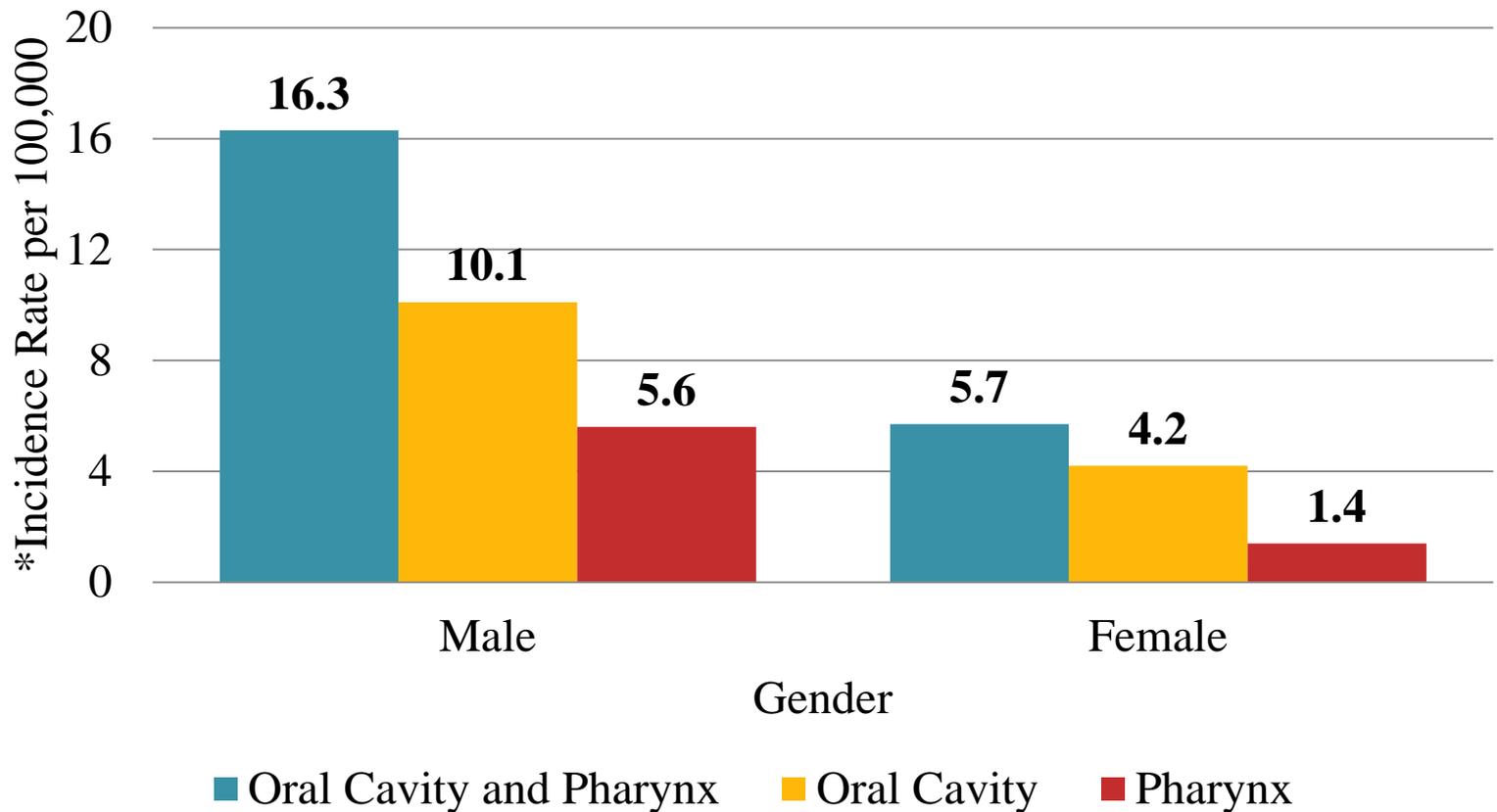
■ Oral Cavity and Pharynx Cancer ■ Oral Cavity Cancer ■ Pharynx Cancer

Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Average Annual Oral and Pharyngeal Cancer Incidence Rates, by Gender, Texas, 2000-2009

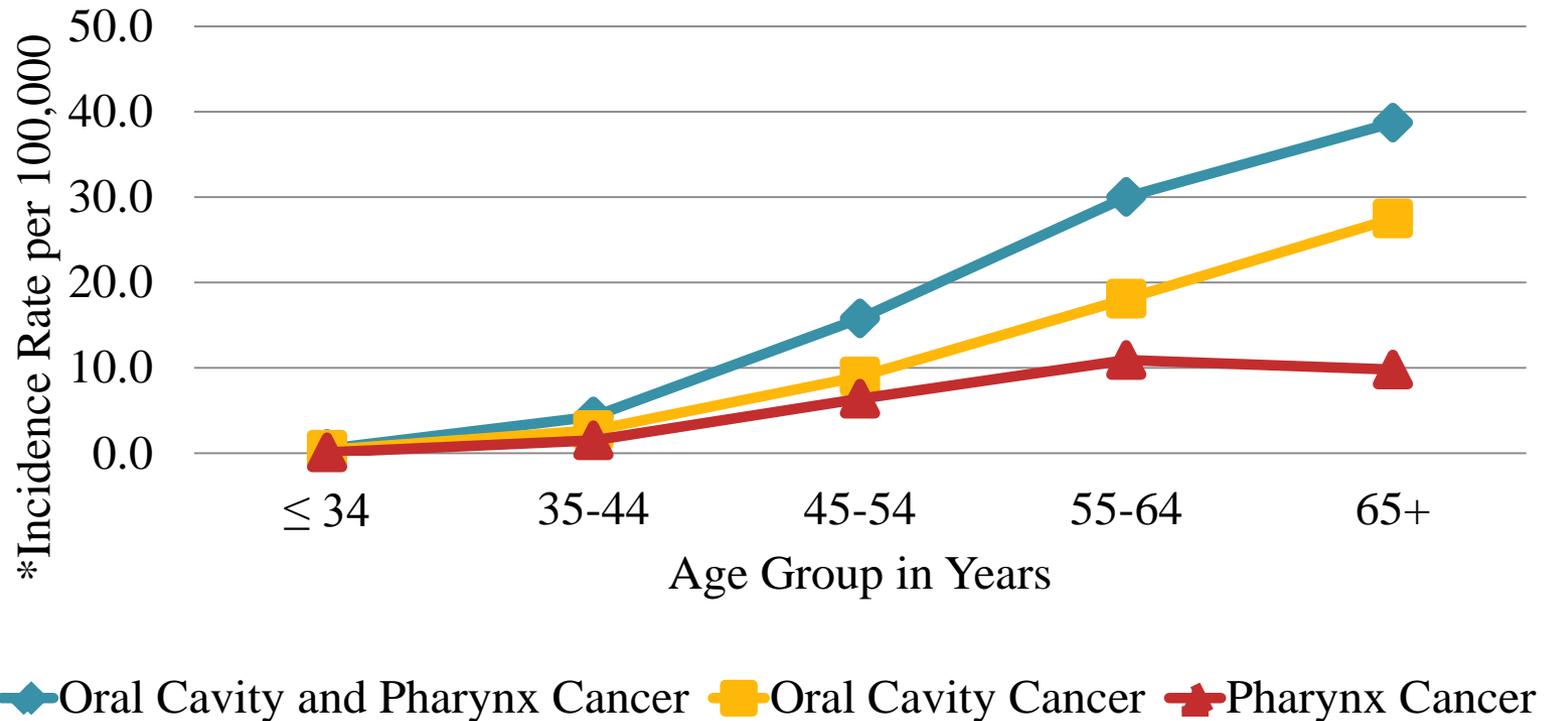


Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

**Average Annual Oral and Pharyngeal Cancer
Incidence Rates, by Select Age Groups,
Texas, 2000-2009**

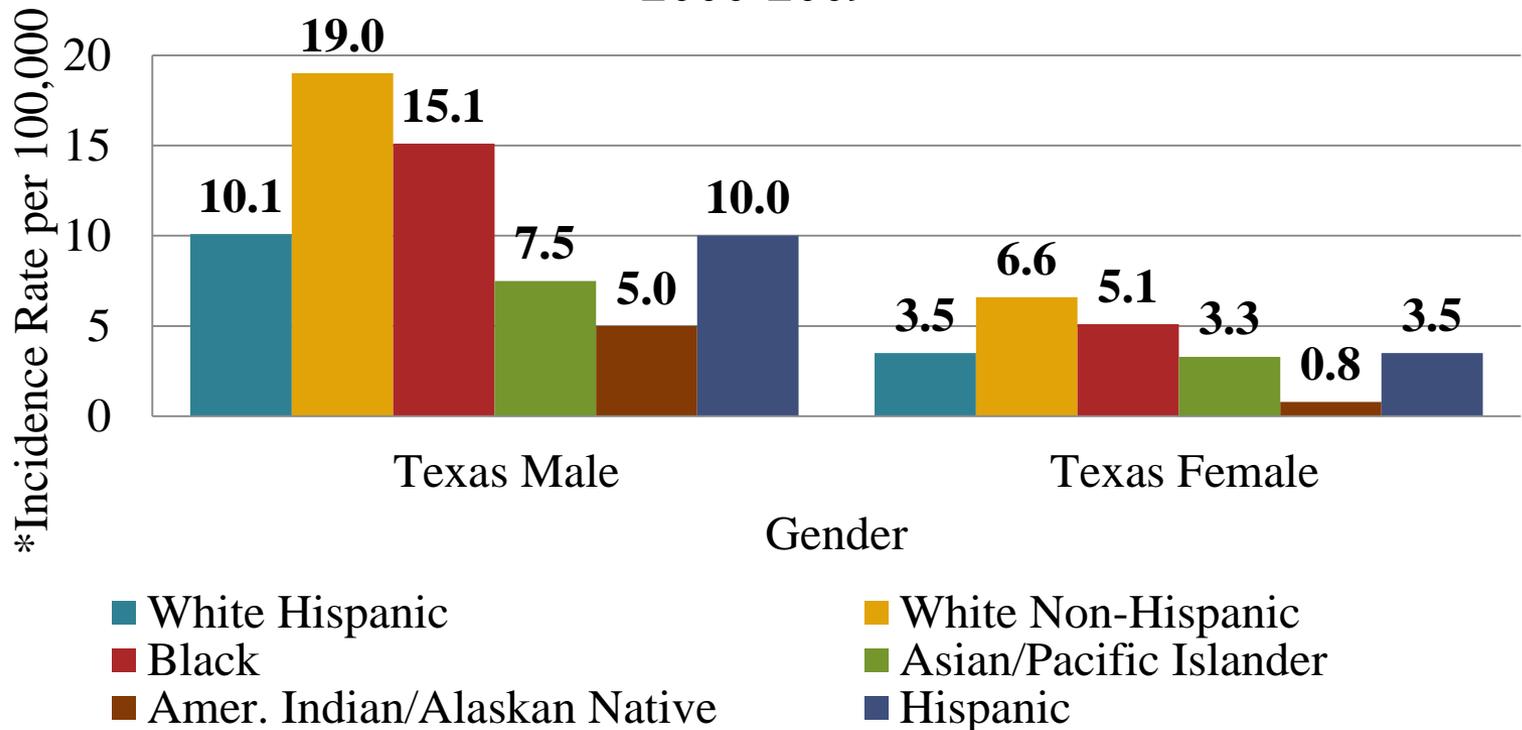


Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Average Annual Oral and Pharyngeal Cancer Incidence Rates, by Gender and Race/Ethnicity, Texas, 2000-2009

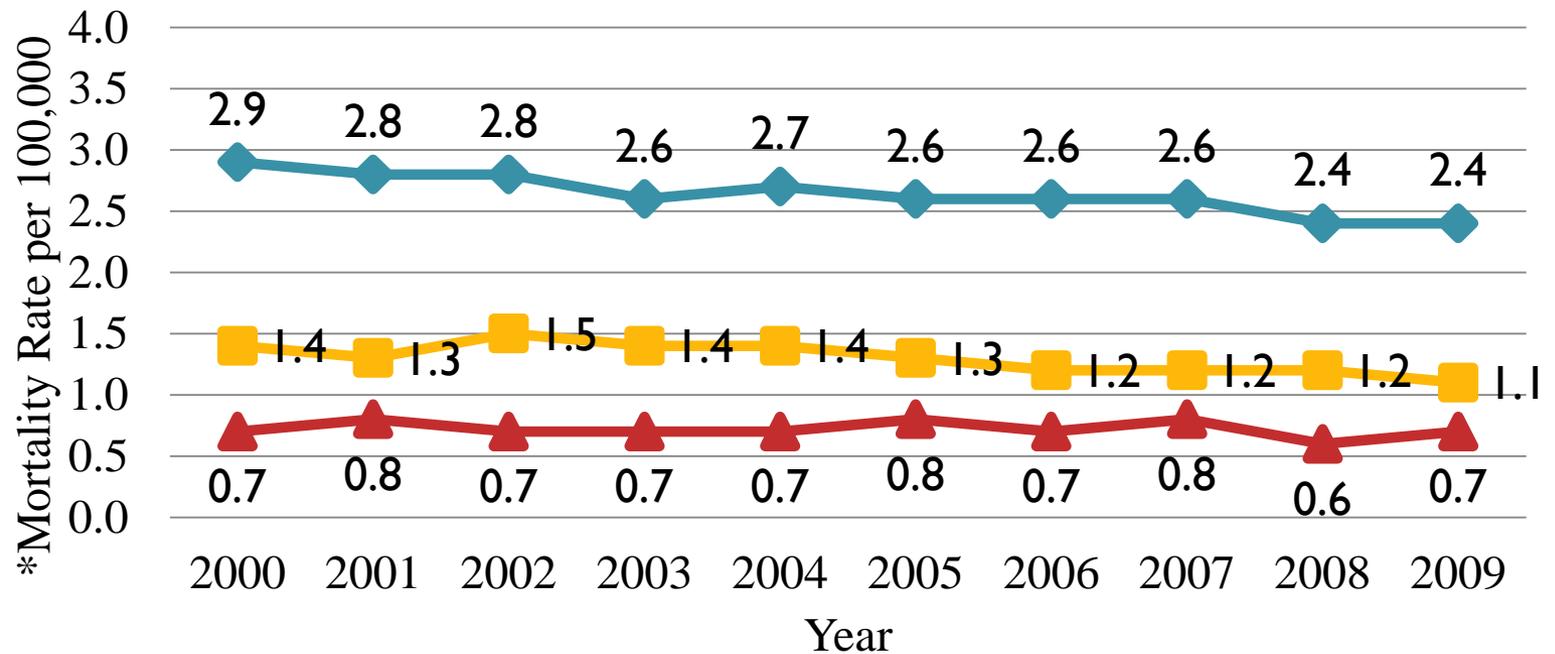


Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Oral and Pharyngeal Cancer Mortality Rate, by Year, Texas, 2000-2009



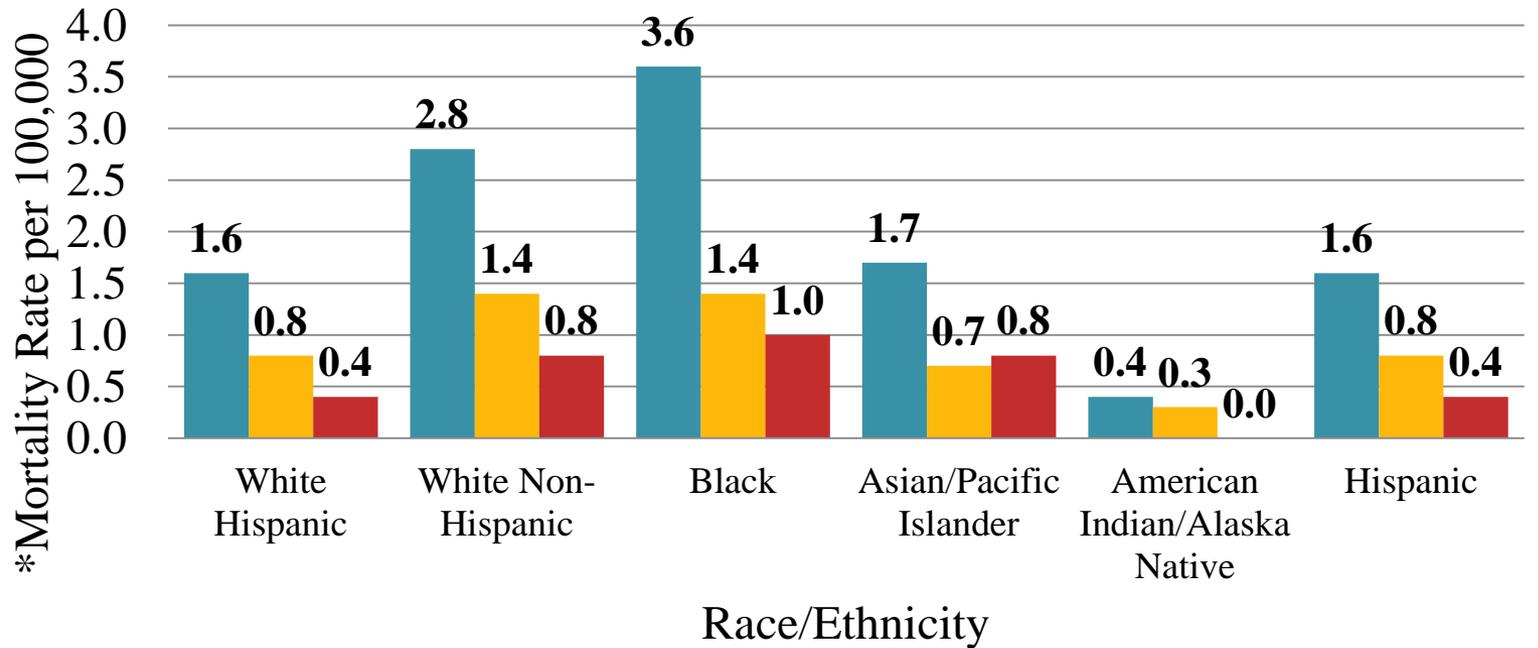
◆ Oral Cavity and Pharynx Cancer ■ Oral Cavity Cancer ▲ Pharynx Cancer

Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Oral Cavity and Pharyngeal Cancer Mortality Rate, by Race/Ethnicity, Texas, 2000-2009



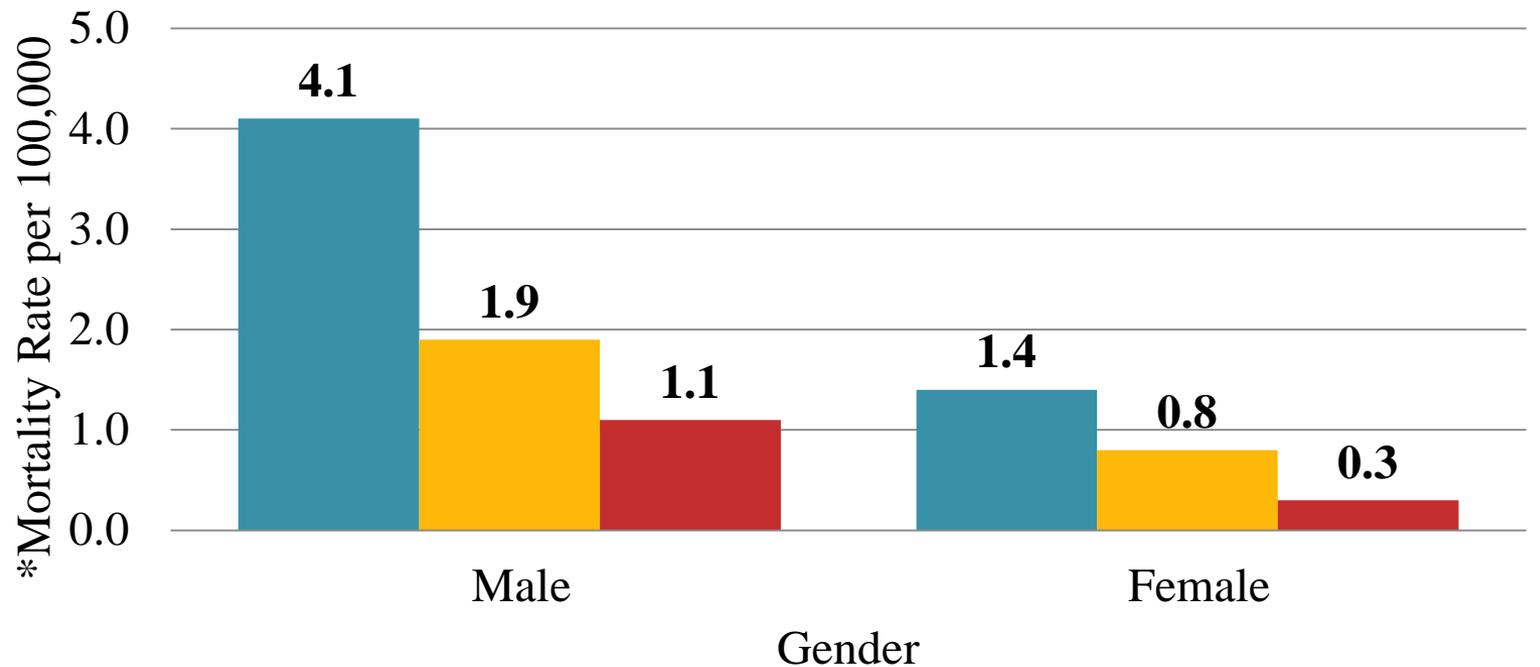
■ Oral Cavity and Pharynx Cancer ■ Oral Cavity Cancer ■ Pharynx Cancer

Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Oral Cavity and Pharyngeal Cancer Mortality Rate, by Gender, Texas, 2000-2009



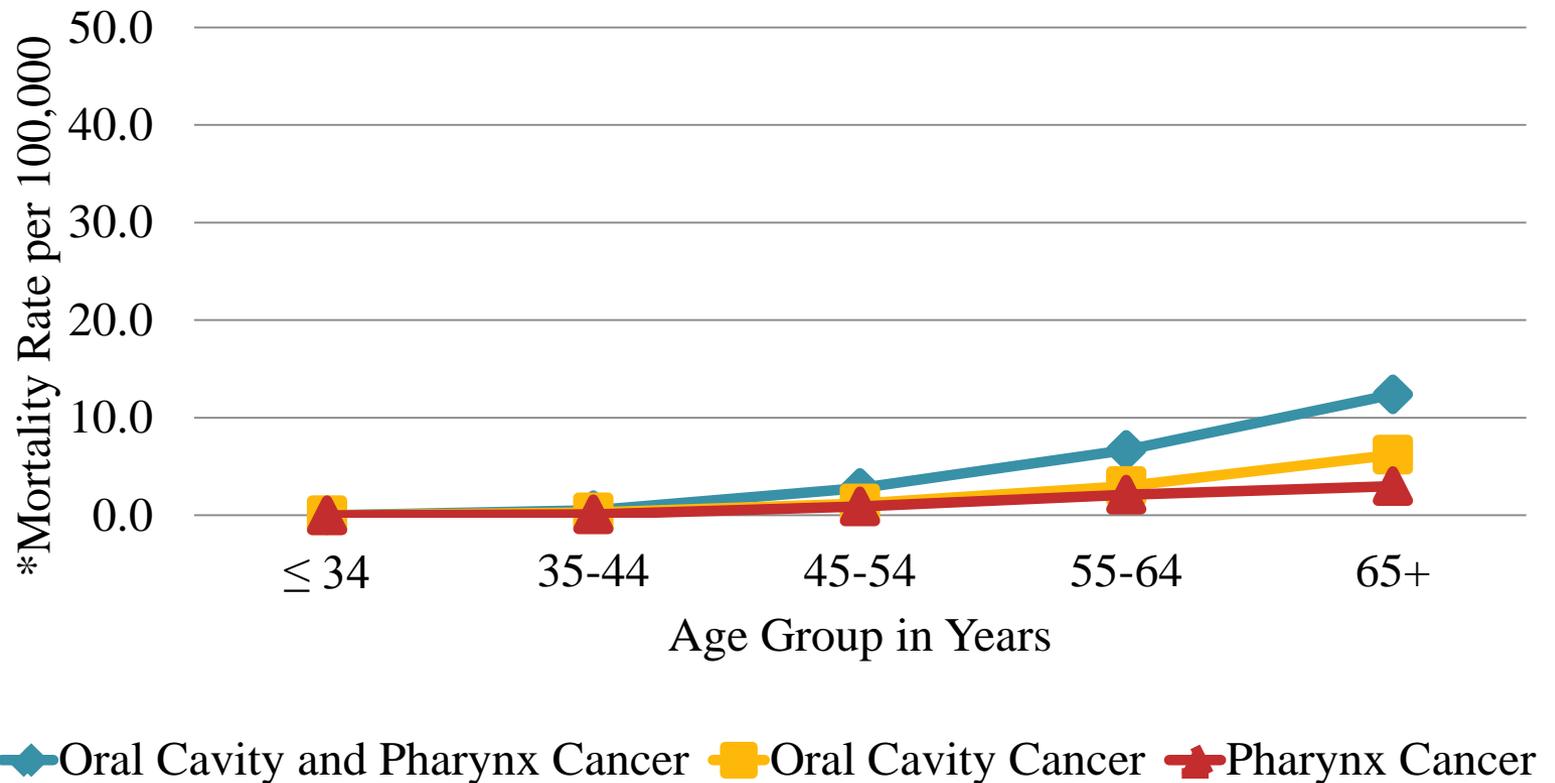
■ Oral Cavity and Pharynx Cancer ■ Oral Cavity Cancer ■ Pharynx Cancer

Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Oral Cavity and Pharyngeal Cancer Mortality Rates, by Selected Age Group, Texas, 2000-2009

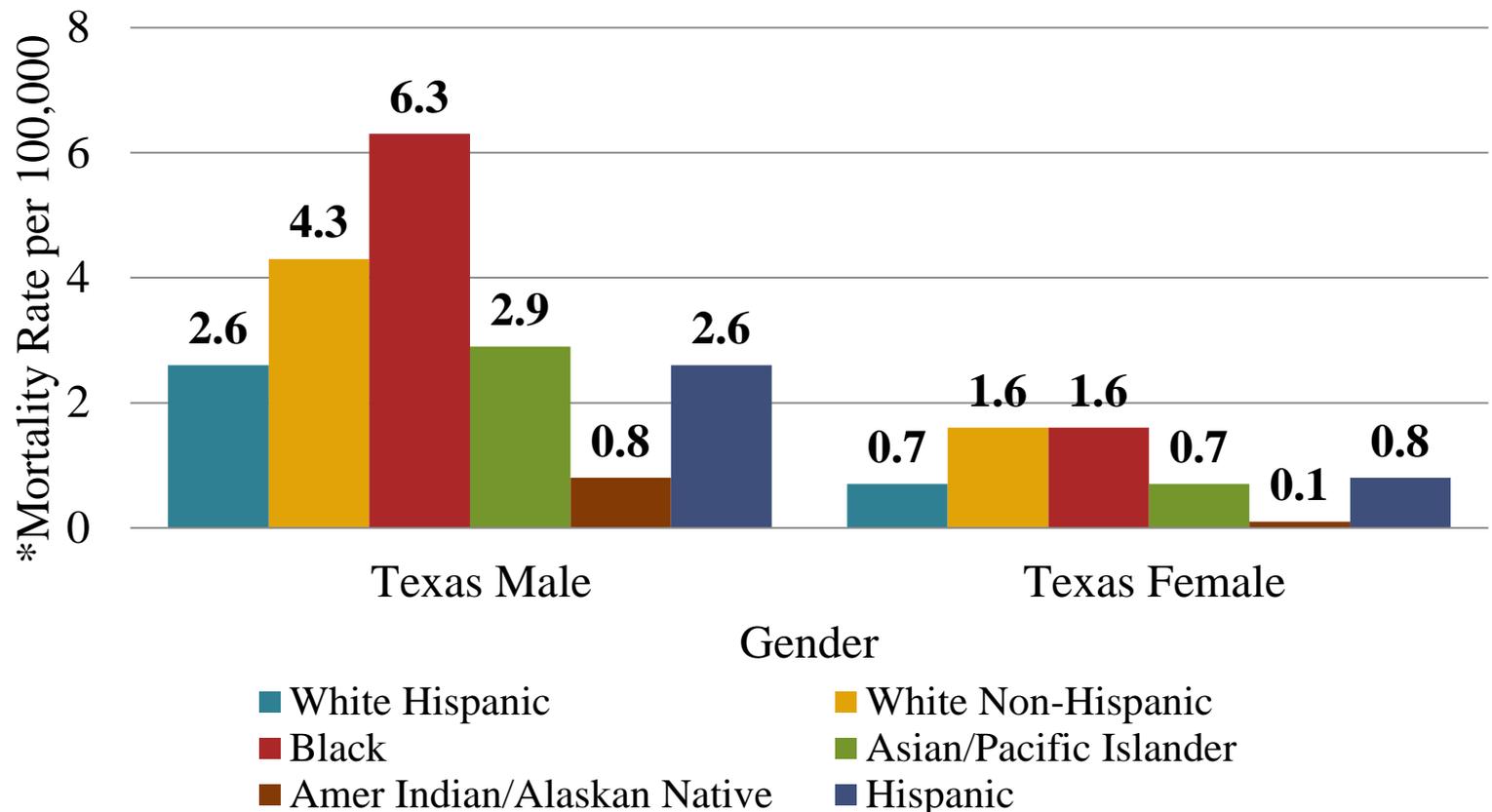


Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

Oral Cavity and Pharyngeal Cancer Mortality Rates, by Gender and Race/Ethnicity, Texas, 2000-2009

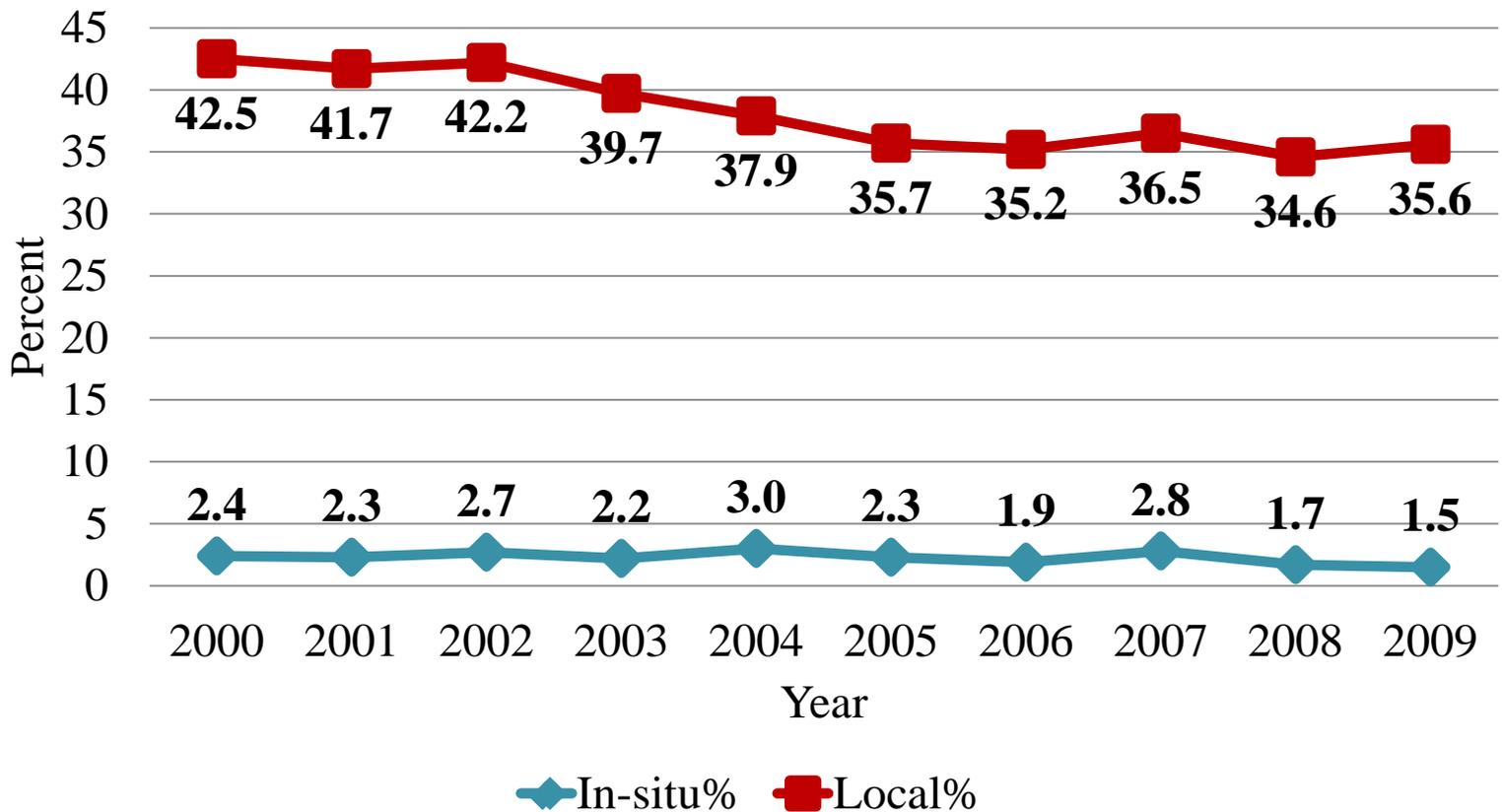


Data Source: Texas DSHS Cancer Registry.

*Rates are per 100,000 and age-adjusted to the 2000 US Std Population (19 age groups - Census P25-1130) standard.

Oral Cavity/Pharynx Cancer

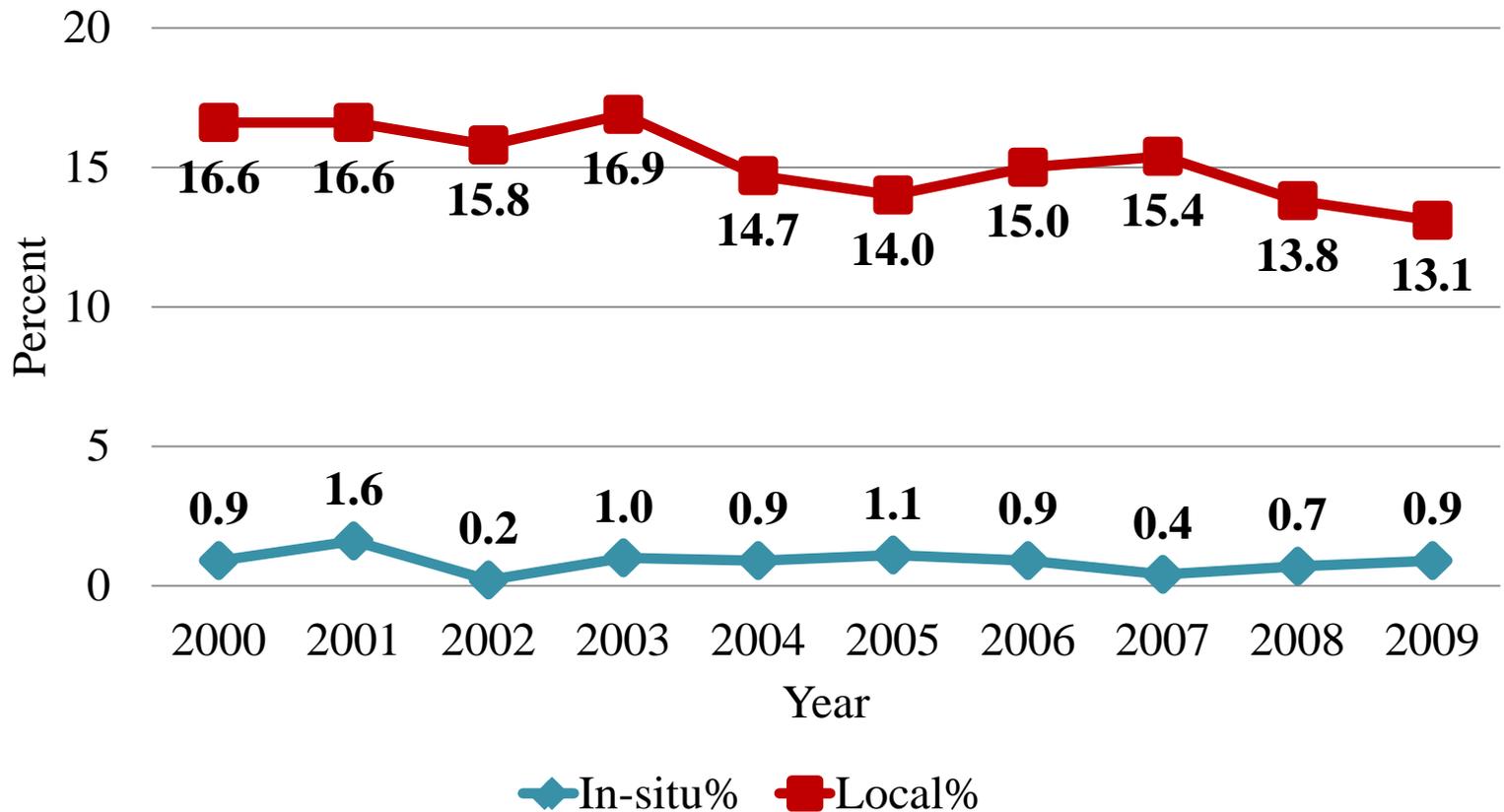
Oral Cancer Summary Stage Percent, Early Diagnosis, by Year, Texas, 2000-2009



Data Source: Texas DSHS Cancer Registry.

Oral Cavity/Pharynx Cancer

Pharyngeal Cancer Summary Stage Percent, Early Diagnosis, by Year, Texas, 2000-2009



Data Source: Texas DSHS Cancer Registry.

Fluoridation

Community water fluoridation plays a part in good health within the mouth. Adding fluoride to the water is low cost, useful, and safe. It helps to lower the chances of tooth decay and tooth loss to lower the cost of dental care.

To learn more, visit:

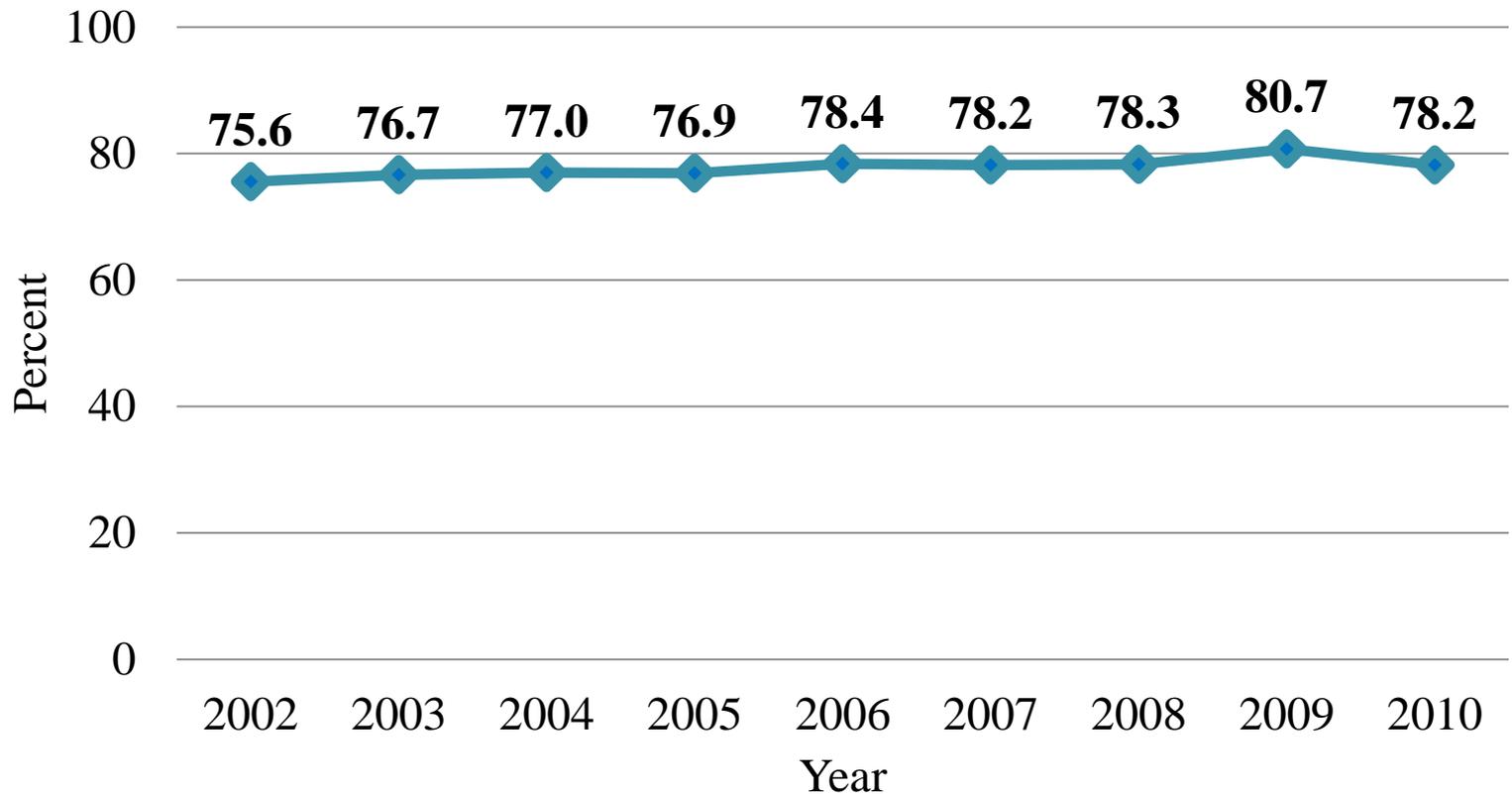
CDC Water Fluoridation Reporting System (WFRS) at
http://cdc.gov/oralhealth/data_systems/index.htm

CDC National Oral Health Surveillance System at
<http://www.cdc.gov/nohss/>



Fluoridation

**Percent of Population with Fluoridated Water,
by Year, Texas, 2002-2010**



Data Source: Centers for Disease Control and Prevention (CDC) Water Fluoridation Reporting System (WFRS) via Texas DSHS Environmental and Injury Epidemiology and Toxicology Group.

Substance Abuse

The use of tobacco and marijuana is harmful to the health of the mouth, as well as general health. Most adult smokers start smoking before age 19. Therefore, stopping substance abuse among youth plays a role for better overall health of Texans. Smoking related illnesses are the leading cause of death in Texas. The use of smokeless tobacco can be just as bad as smoking tobacco. It can lead to loss of gum tissue; wear on teeth; tooth decay; loss of teeth; and cancers of the mouth and throat.

To learn more, visit:

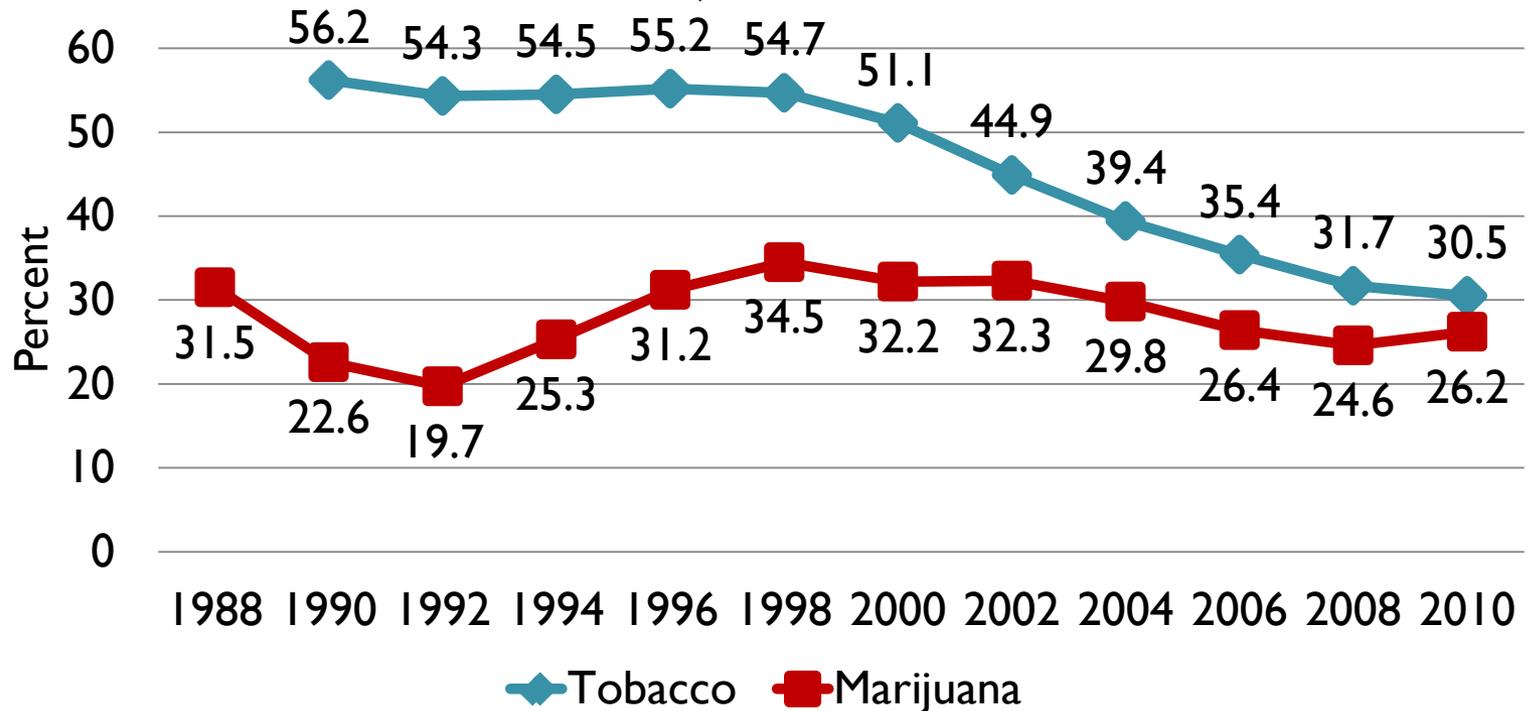
Texas DSHS Mental Health and Substance Abuse Services' Decision Support Unit at

<http://www.dshs.state.tx.us/mhsa-decision-support.aspx>

Texas DSHS Center for Health Statistics' Texas YRBS at
<http://www.dshs.state.tx.us/chs/yrbs/>

Substance Abuse In Secondary Schools

**Percent of Secondary Students,
Grades 7 – 12, Who Had Ever Used Selected
Substances, by Year, School Survey of Substance Use,
Texas, 1988-2010**

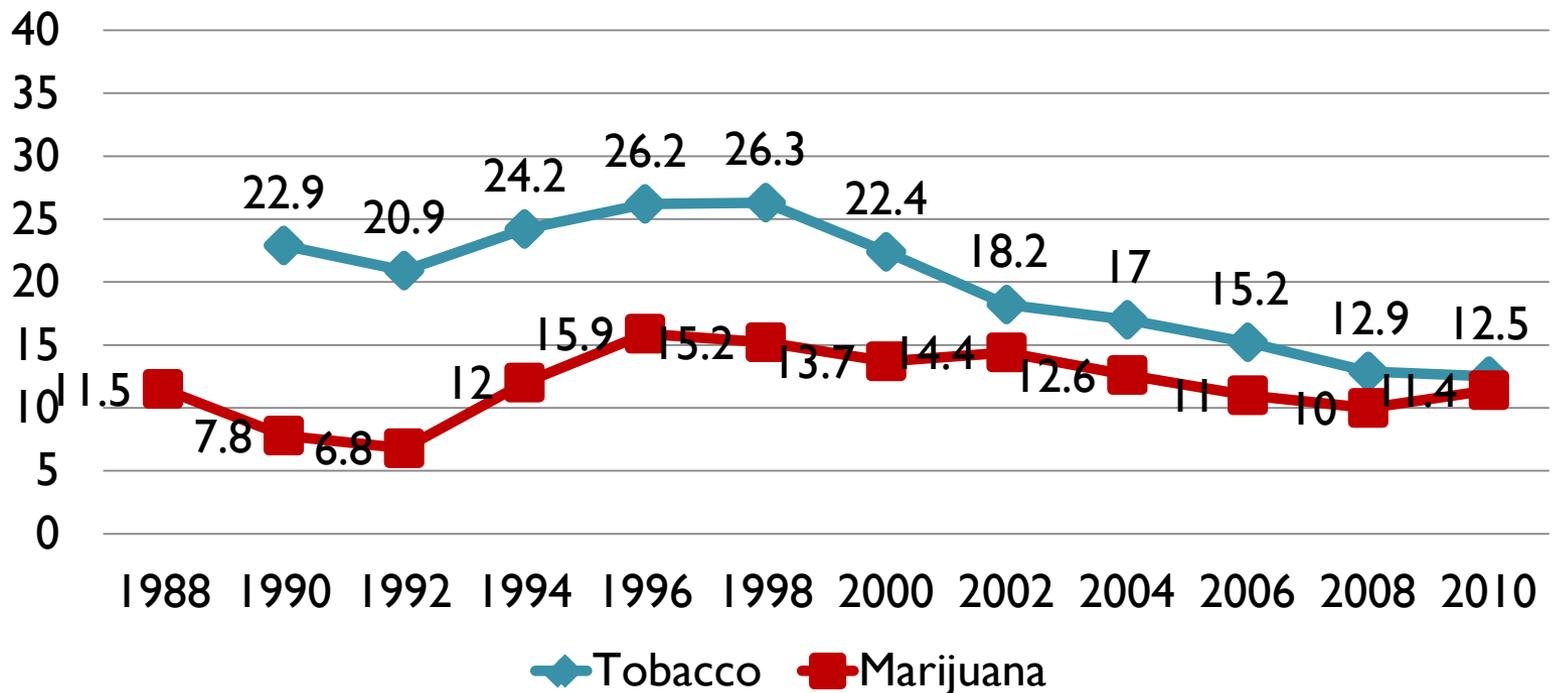


Data Source: Mental Health and Substance Abuse Services, Decision Support Unit, Texas DSHS.

Includes only public schools. Private school students and dropouts not represented in sample. Estimates based on self-reported data.

Substance Abuse In Secondary Schools

**Percent of Secondary Students,
Grades 7 – 12, Who Had Used Selected Substances in
Past Month, by Year, School Survey of Substance Use,
Texas, 1988-2008**

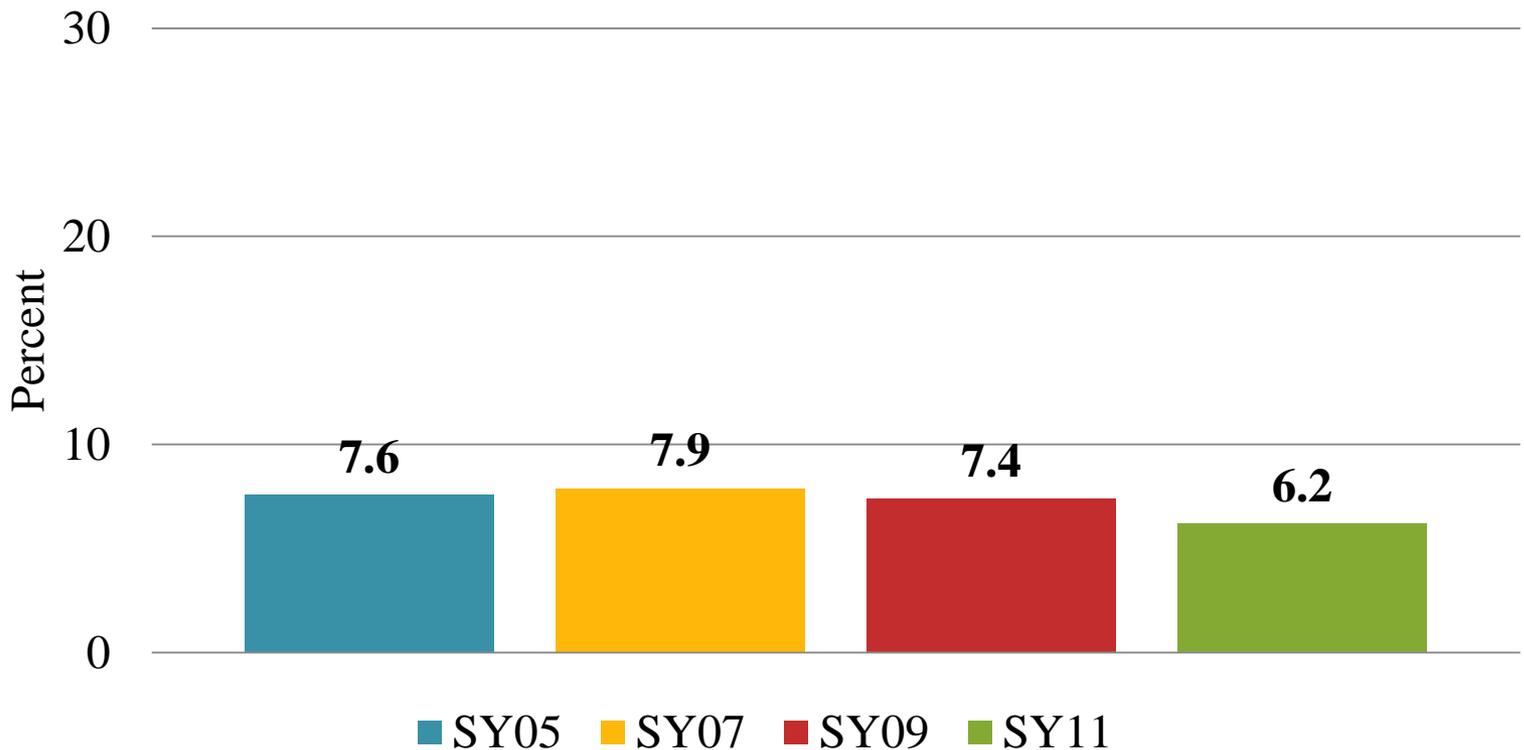


Data Source: Mental Health and Substance Abuse Services, Decision Support Unit, Texas DSHS.

Includes only public schools. Private school students and dropouts not represented in sample. Estimates based on self-reported data.

Tobacco Usage Among High School Students

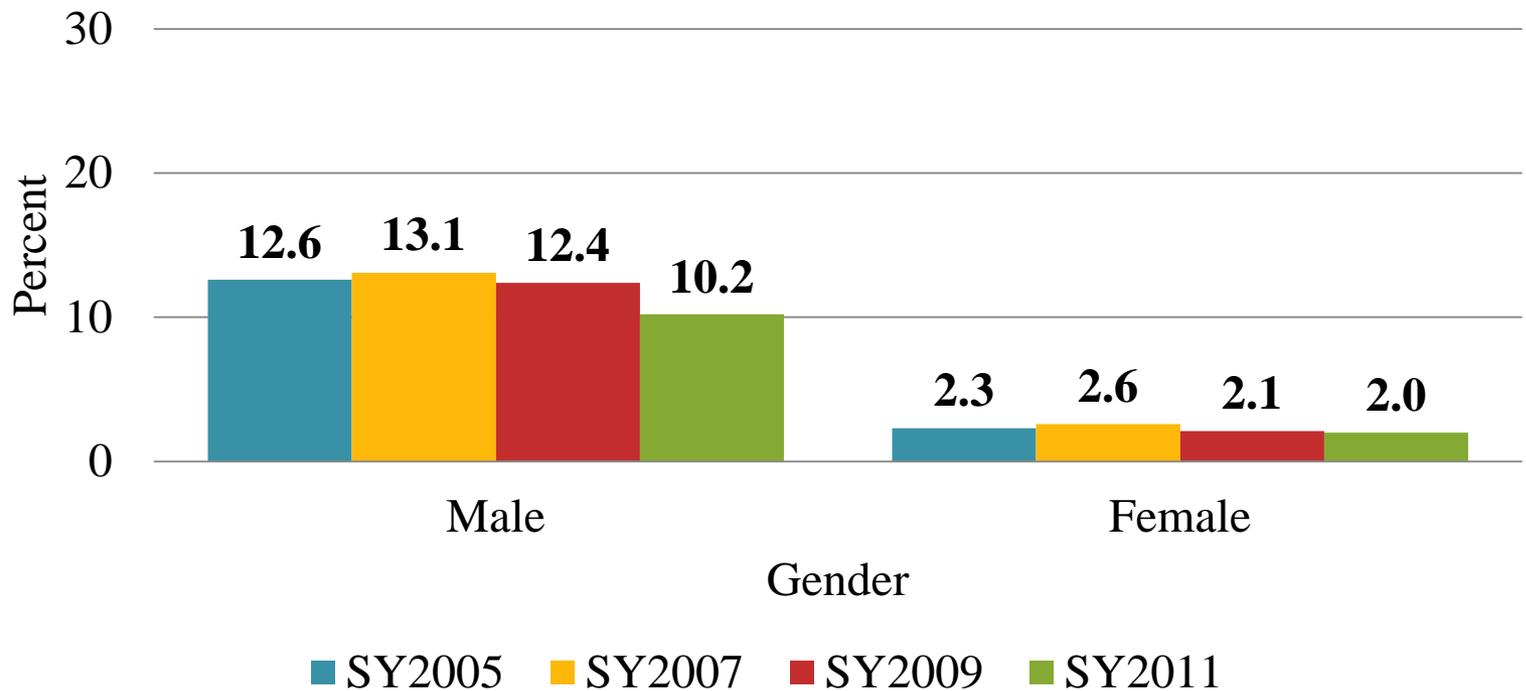
Percent of High School Students, Grade 9 – 12, Who Used Chewing Tobacco, Snuff, or Dip on One or More of Past 30 Days, by School Year (SY), Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

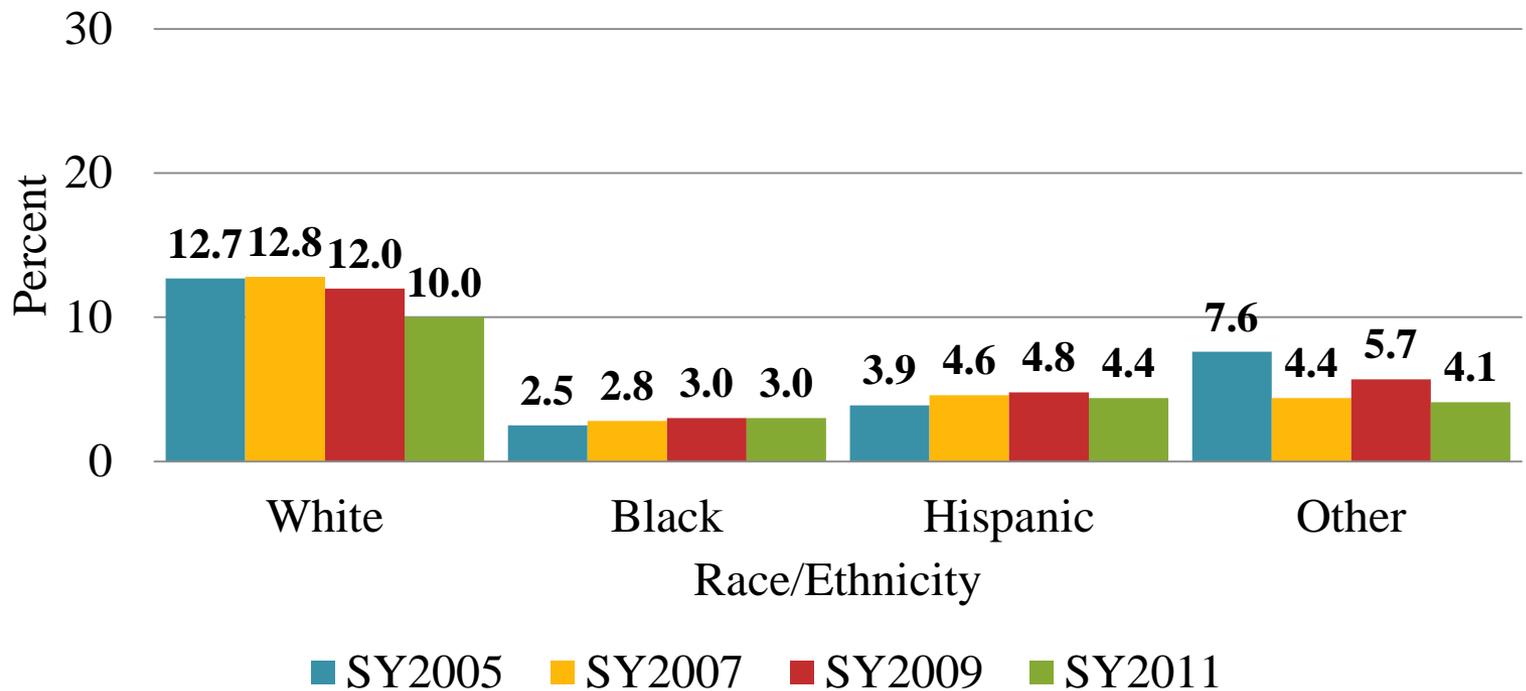
Percent of High School Students, Grade 9 – 12, Who Used Chewing Tobacco, Snuff, or Dip on One or More of Past 30 Days, by School Year (SY) and Gender, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

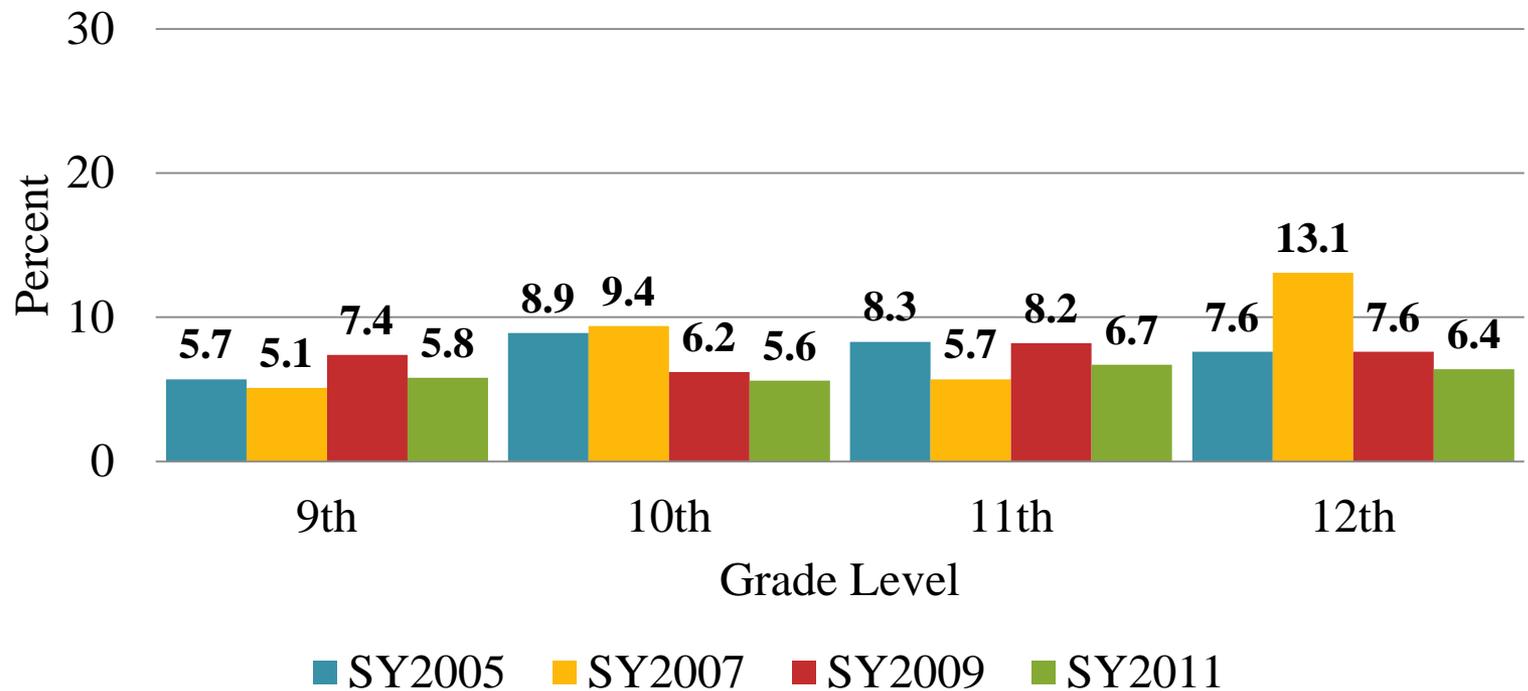
Percent of High School Students, Grade 9 – 12, Who Used Chewing Tobacco, Snuff, or Dip on One or More of Past 30 Days, by School Year (SY) and Race/Ethnicity, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

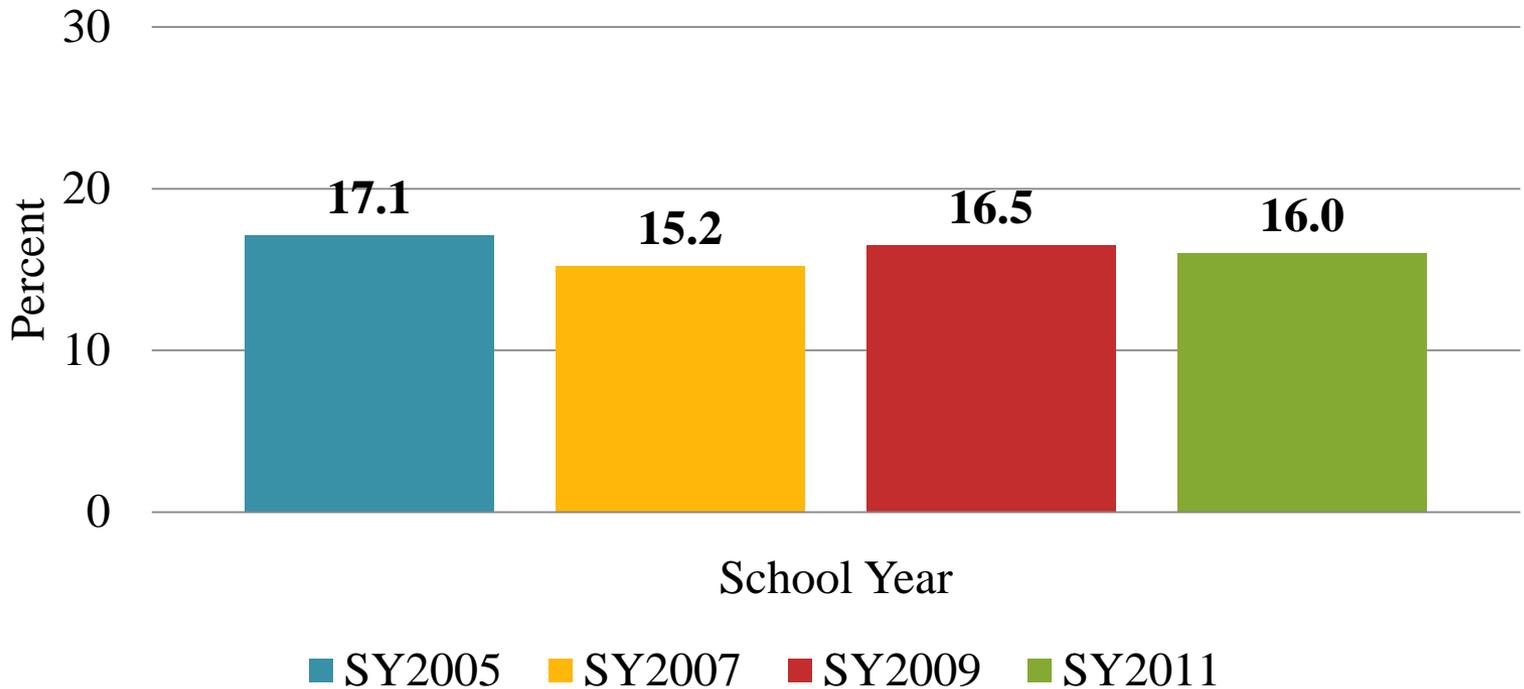
Percent of High School Students, Grade 9 – 12, Who Used Chewing Tobacco, Snuff, or Dip on One or More of Past 30 Days, by School Year (SY) and Grade Level, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

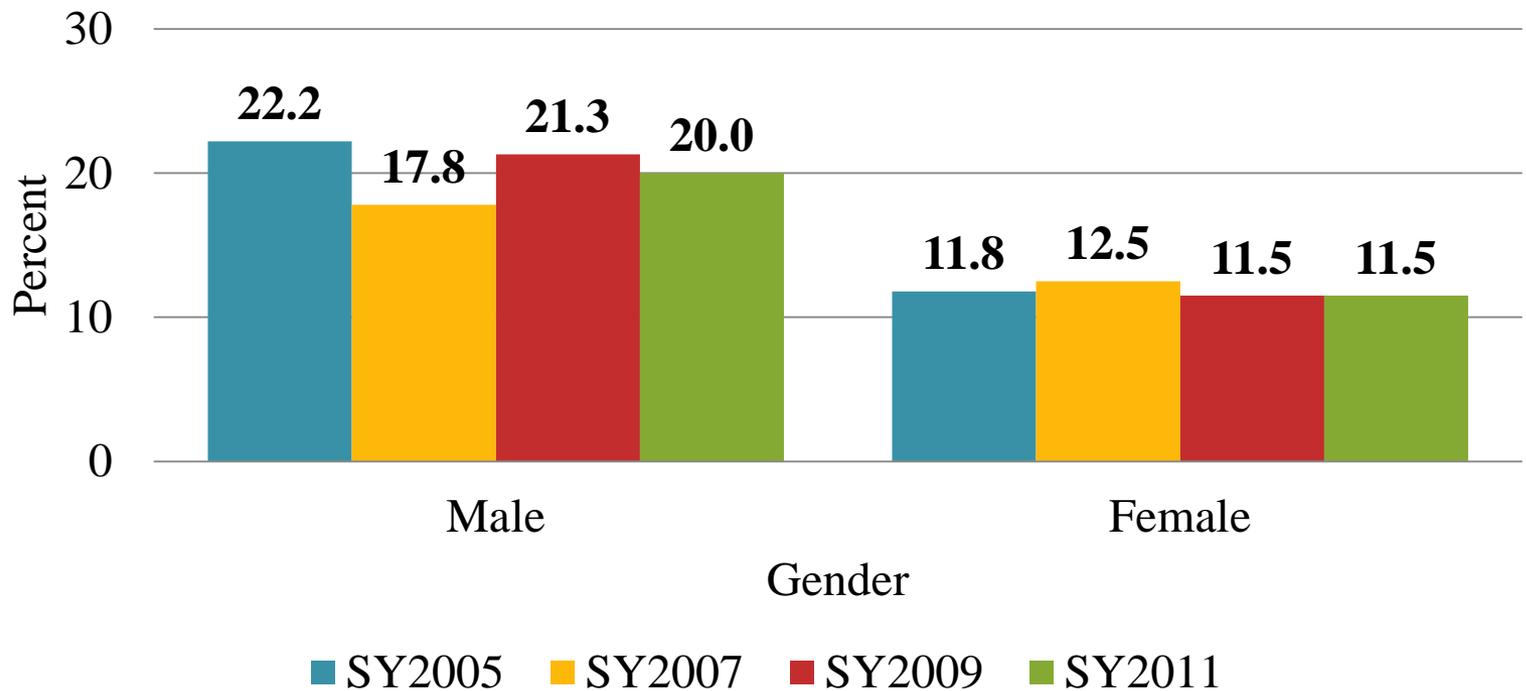
Percent of High School Students, Grade 9 – 12, Who Smoked Cigars, Cigarillos, or Little Cigars on One or More of Past 30 Days, by School Year (SY), Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

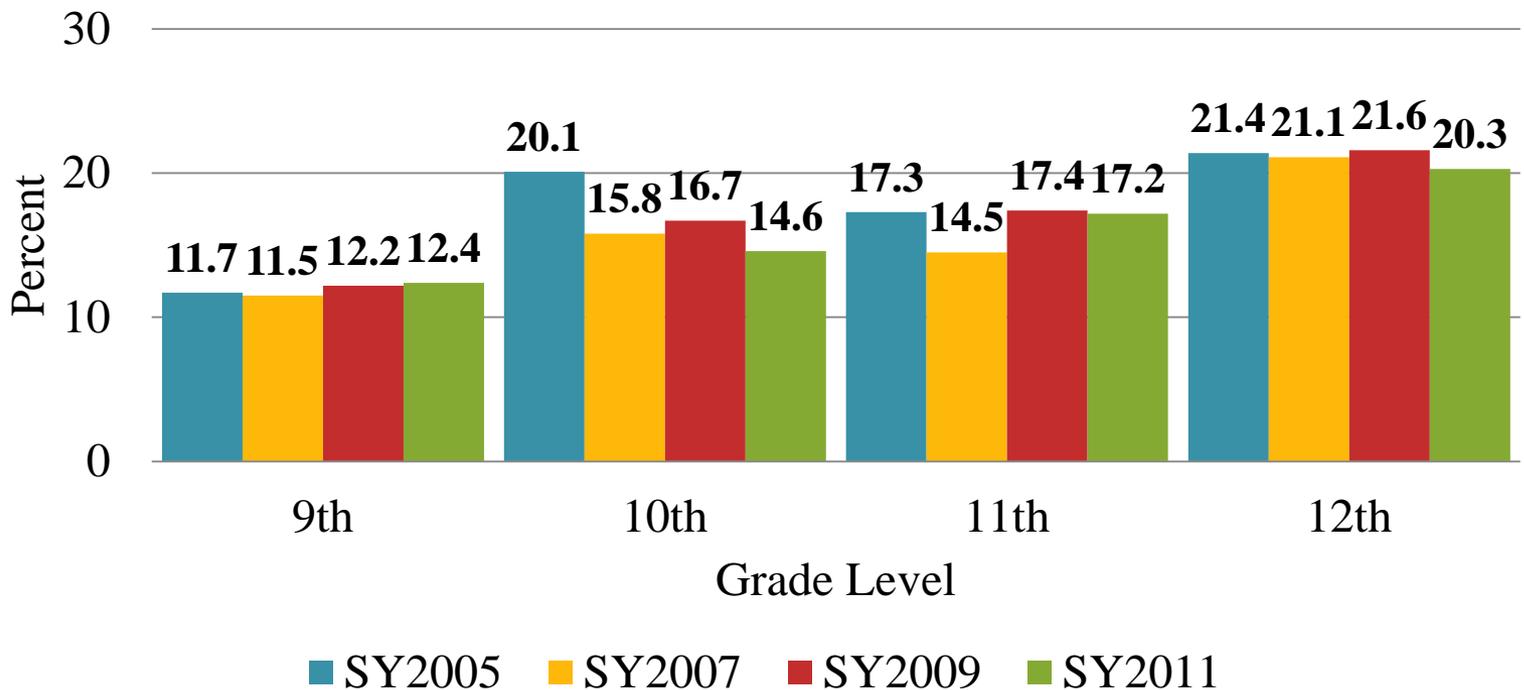
Percent of High School Students, Grade 9 – 12, Who Smoked Cigars, Cigarillos, or Little Cigars on One or More of Past 30 Days, by School Year (SY) and Gender, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

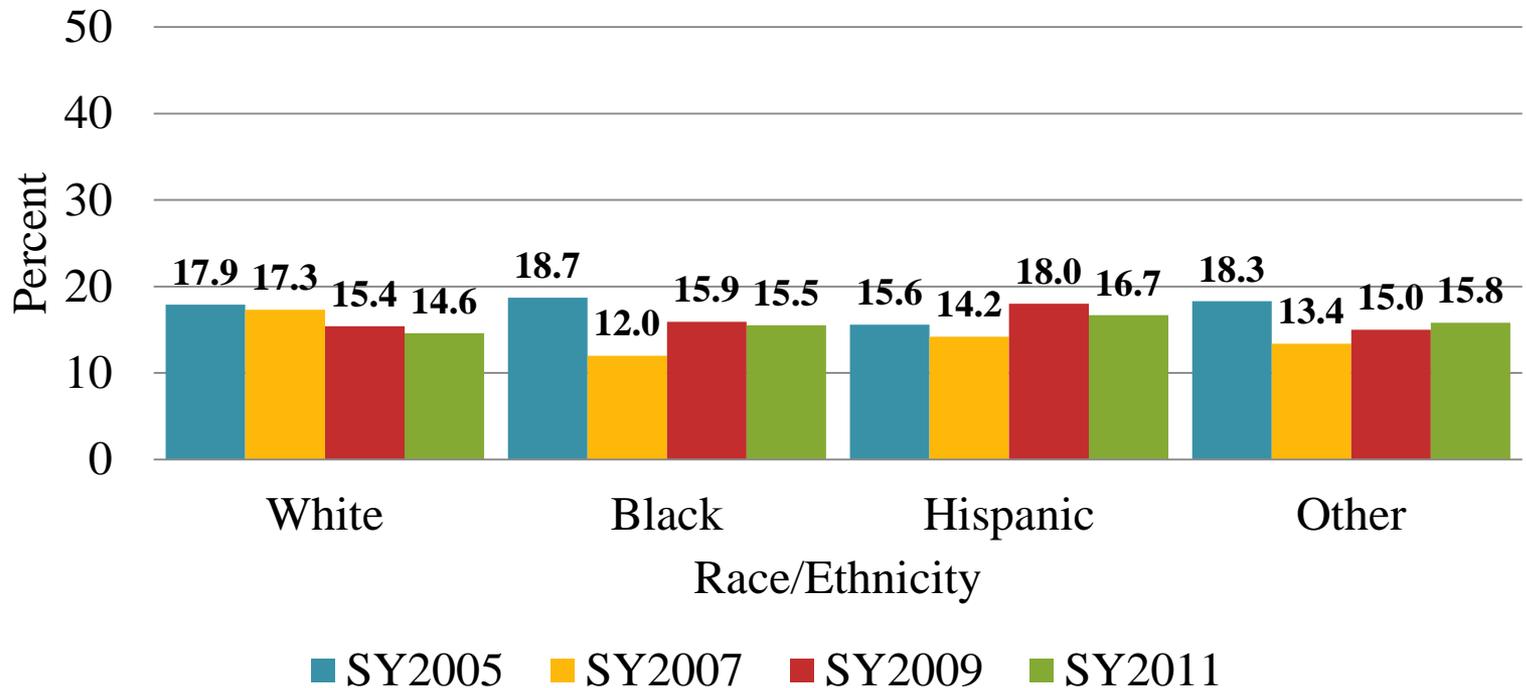
Percent of High School Students, Grade 9 – 12, Who Smoked Cigars, Cigarillos, or Little Cigars on One or More of Past 30 Days, by School Year (SY) and Grade Level, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

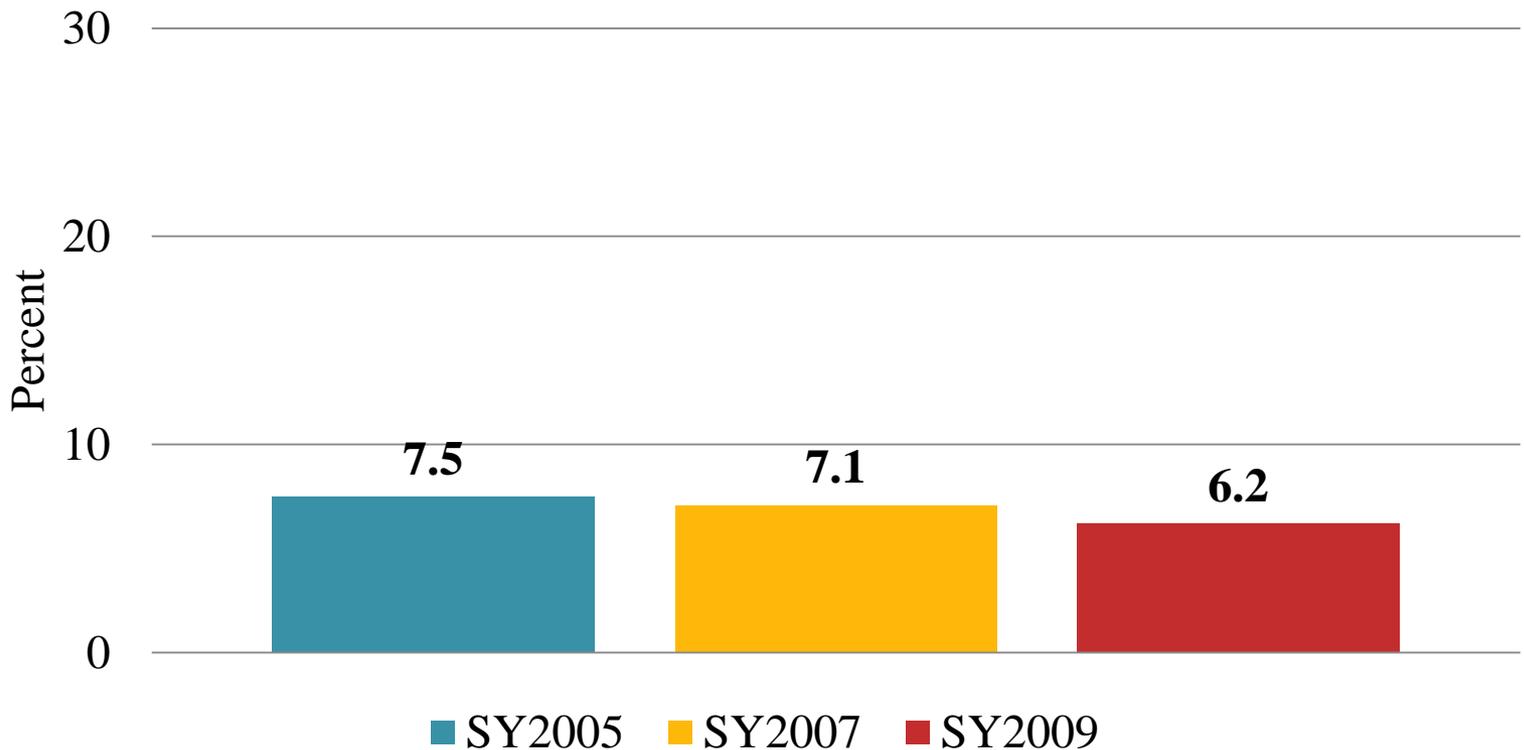
Percent of High School Students, Grade 9 – 12, Who Smoked Cigars, Cigarillos, or Little Cigars on One or More of Past 30 Days, by School Year (SY) and Race/Ethnicity, Texas, 2005-2011



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

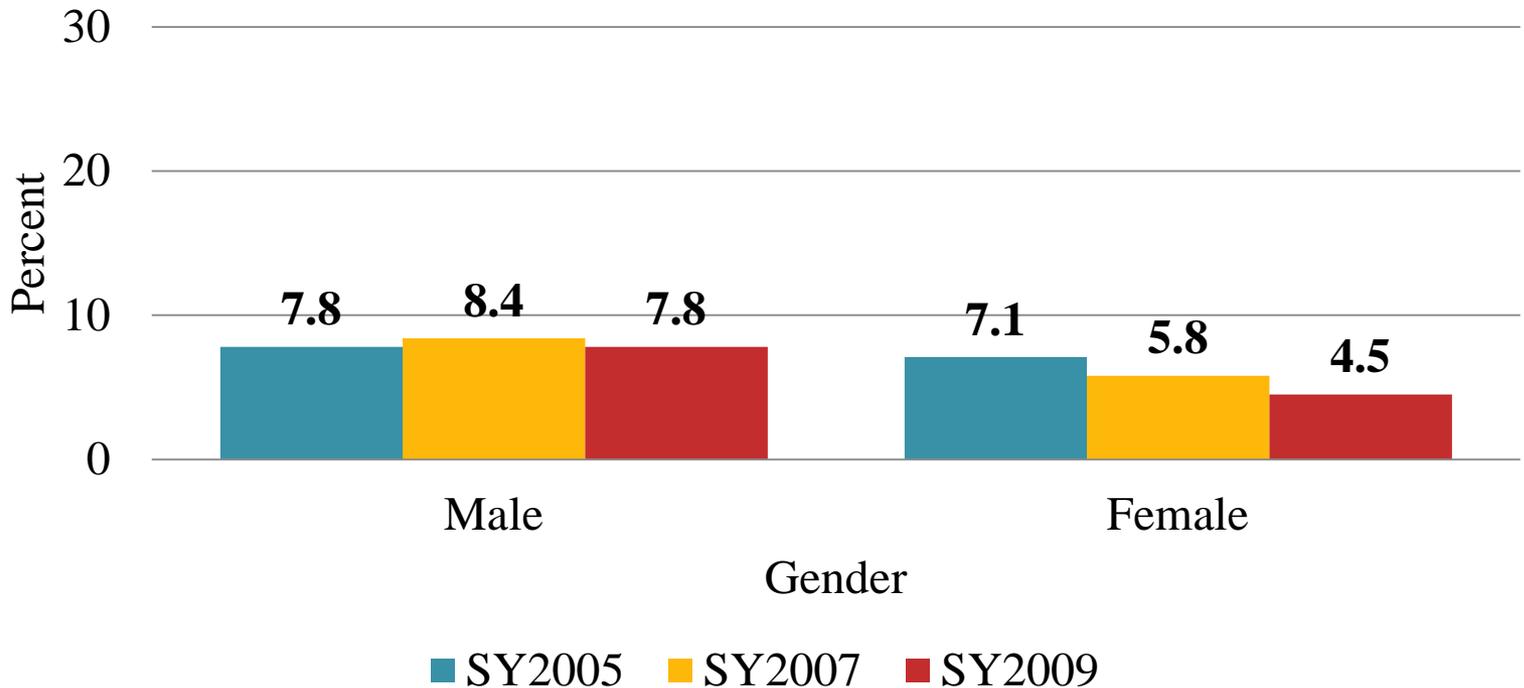
Percent of High School Students, Grade 9 – 12, Who Smoked Cigarettes on 20 or More of Past 30 Days, by School Year (SY), Texas, 2005-2009



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

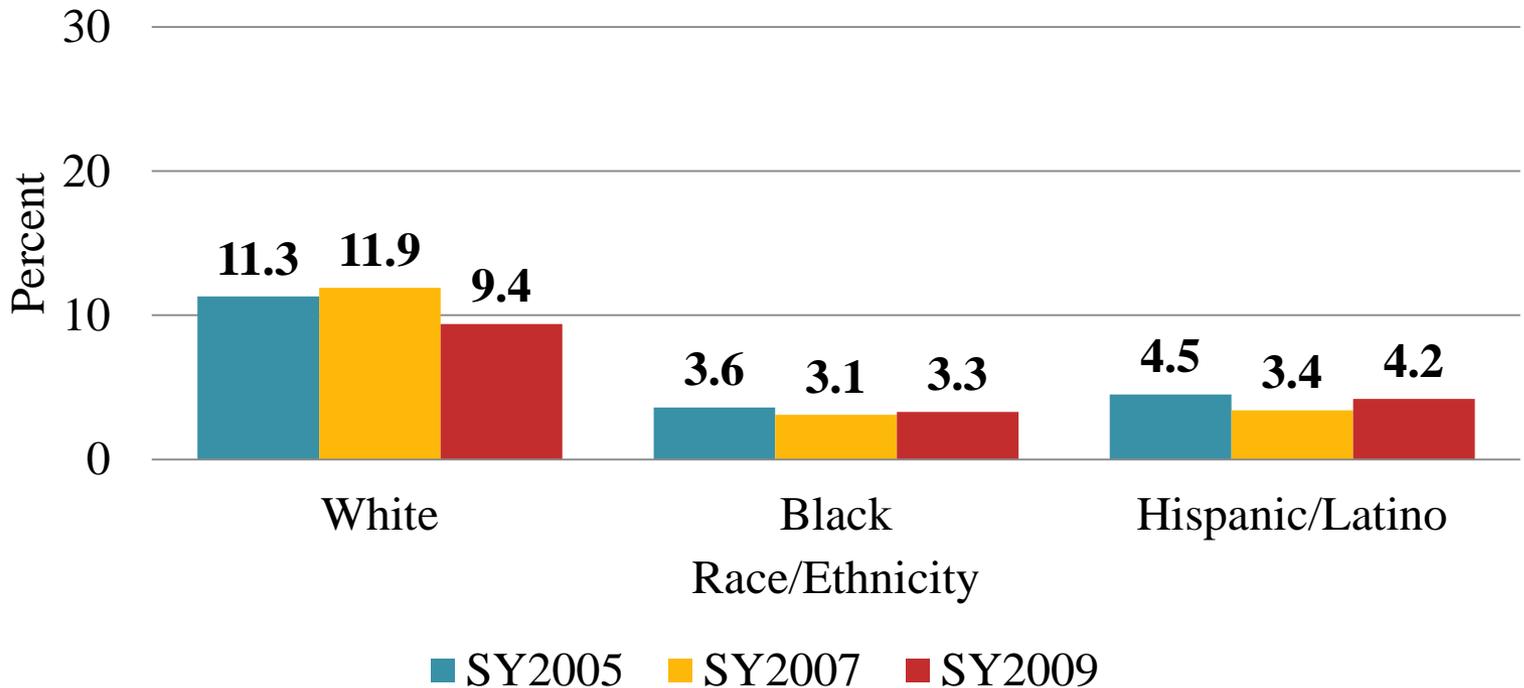
Percent of High School Students, Grade 9 – 12, Who Smoked Cigarettes on 20 or More of Past 30 Days, by School Year (SY) and Gender, Texas, 2005-2009



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Tobacco Usage Among High School Students

Percent of High School Students, Grade 9 – 12, Who Smoked Cigarettes on 20 or More of Past 30 Days, by School Year (SY) and Race/Ethnicity, Texas, 2005-2009



Data Source: Texas DSHS Center for Health Statistics. Youth Risk Behavior Survey (YRBS) conducted biennially in selected metropolitan areas and only includes students in 9-12 grades in public and private schools. All reported rates are weighted for Texas demographics and the probability of selection. Estimates based on self-reported data.

Workforce - Access to Dental Services

The number of people in Texas is predicted to grow. It is important to have enough dental care workers for this growth. The dental team includes dentists, dental hygienists, and assistants. These team members will play a major role in dealing with the rising need for dental care. This need is greatest in rural and frontier areas of Texas.

Federally Qualified Health Centers (FQHCs) play a key role in rural areas of Texas. Many of the people served are poor and have no dental insurance. They often have trouble getting dental care.

To learn more, visit:

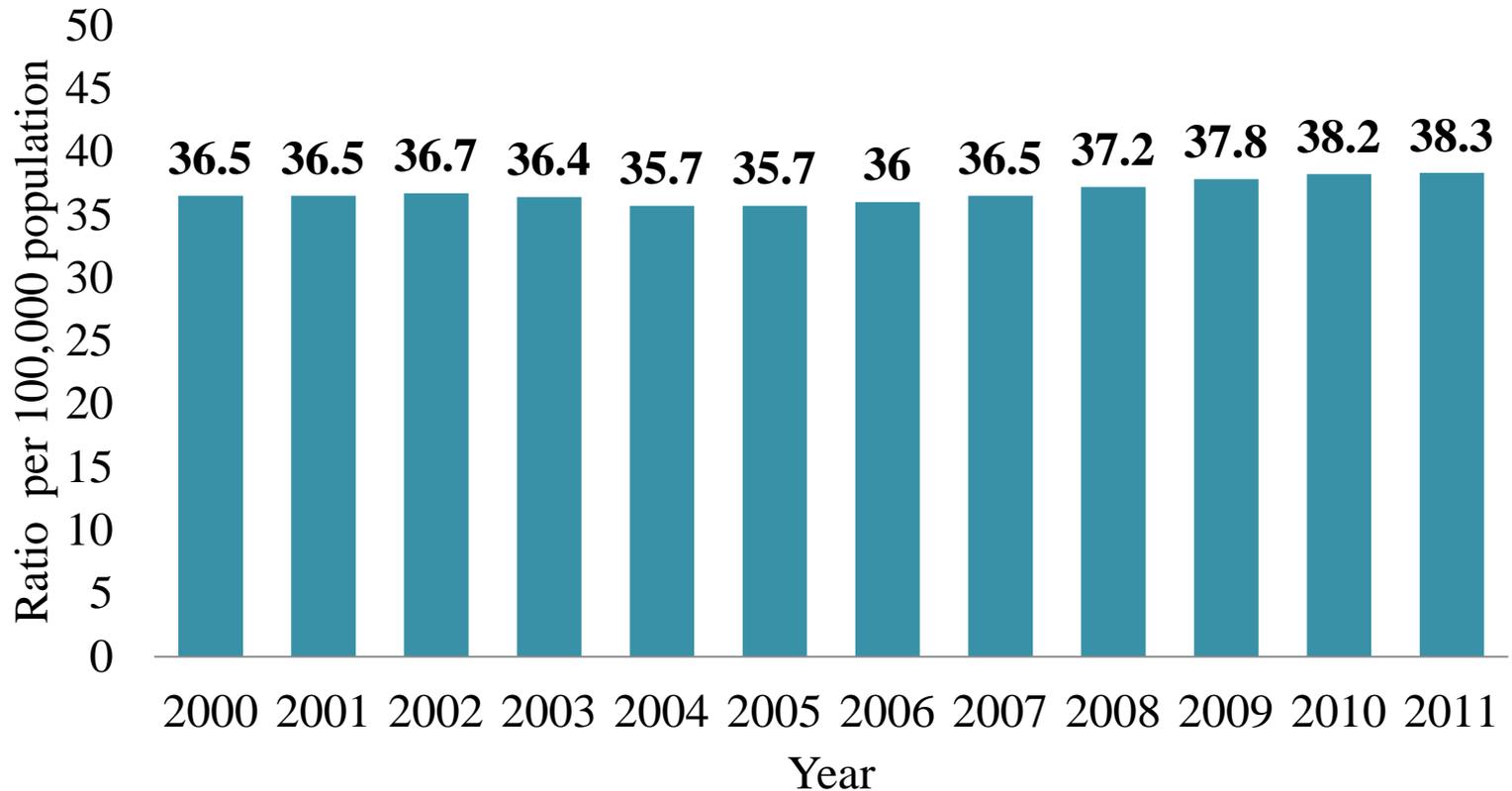
Texas DSHS Center for Health Statistics' Health Professions Resource Center at <http://www.dshs.state.tx.us/chs/hprc/DENT-Ink.shtm>

Texas State Board of Dental Examiners at <http://www.tsbde.state.tx.us/>

HRSA Bureau of Primary Health Care's Uniform Data System at <http://bphc.hrsa.gov/healthcenterdatastatistics/>

Workforce

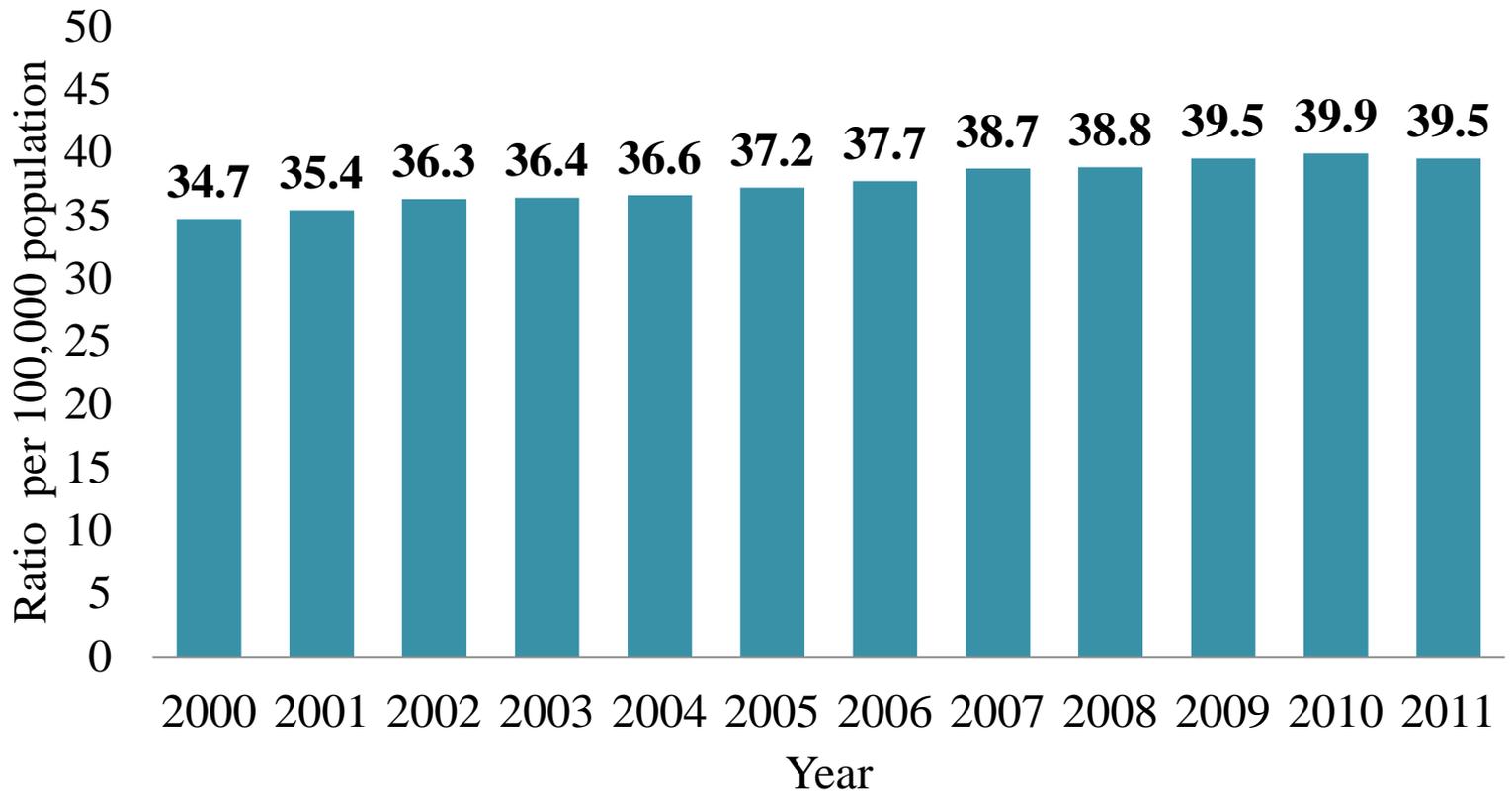
**Ratio of Primary Care Dentist per 100,000 Population,
by Year, Texas, 2000-2011**



Data Source: Texas State Board of Dental Examiners. Includes: Dentists with a status code of “active” or “expired” and a practice type of general dentistry, pediatric dentistry, or dental public health. Excludes: Dentists with a status code as “retired”, “revoked”, “suspended”, “cancelled”, “surrendered”, or “deceased”; and those who are non-primary care; federal or military; dental residents; or faculty.

Workforce

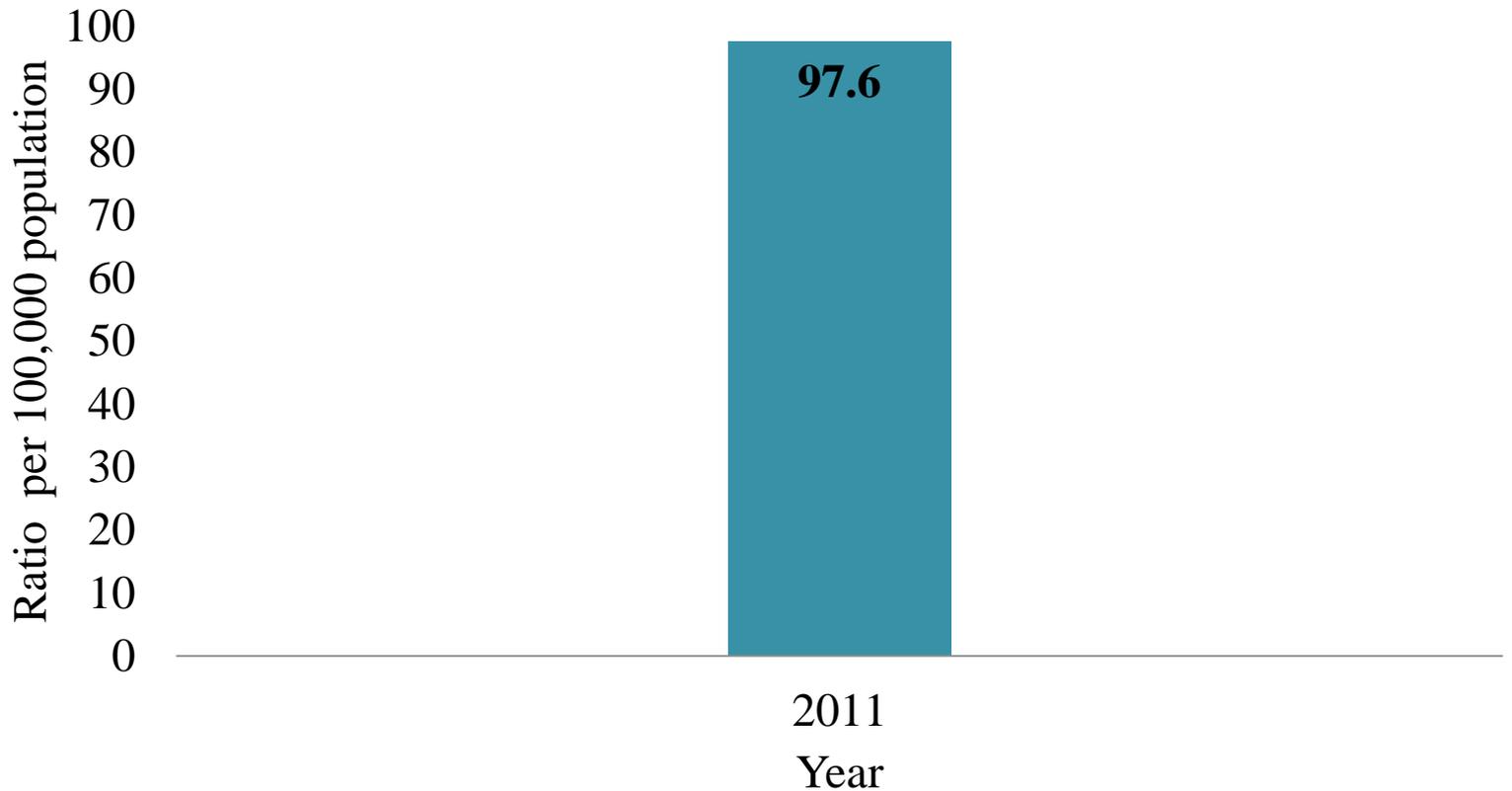
**Ratio of Dental Hygienists per 100,000 Population,
by Year, Texas, 2000-2011**



Data Source: Texas State Board of Dental Examiners. Excludes: Dental hygienists with a license status code of “surrender”, “revoked”, “retired”, “deceased”, or “cancelled”.

Workforce

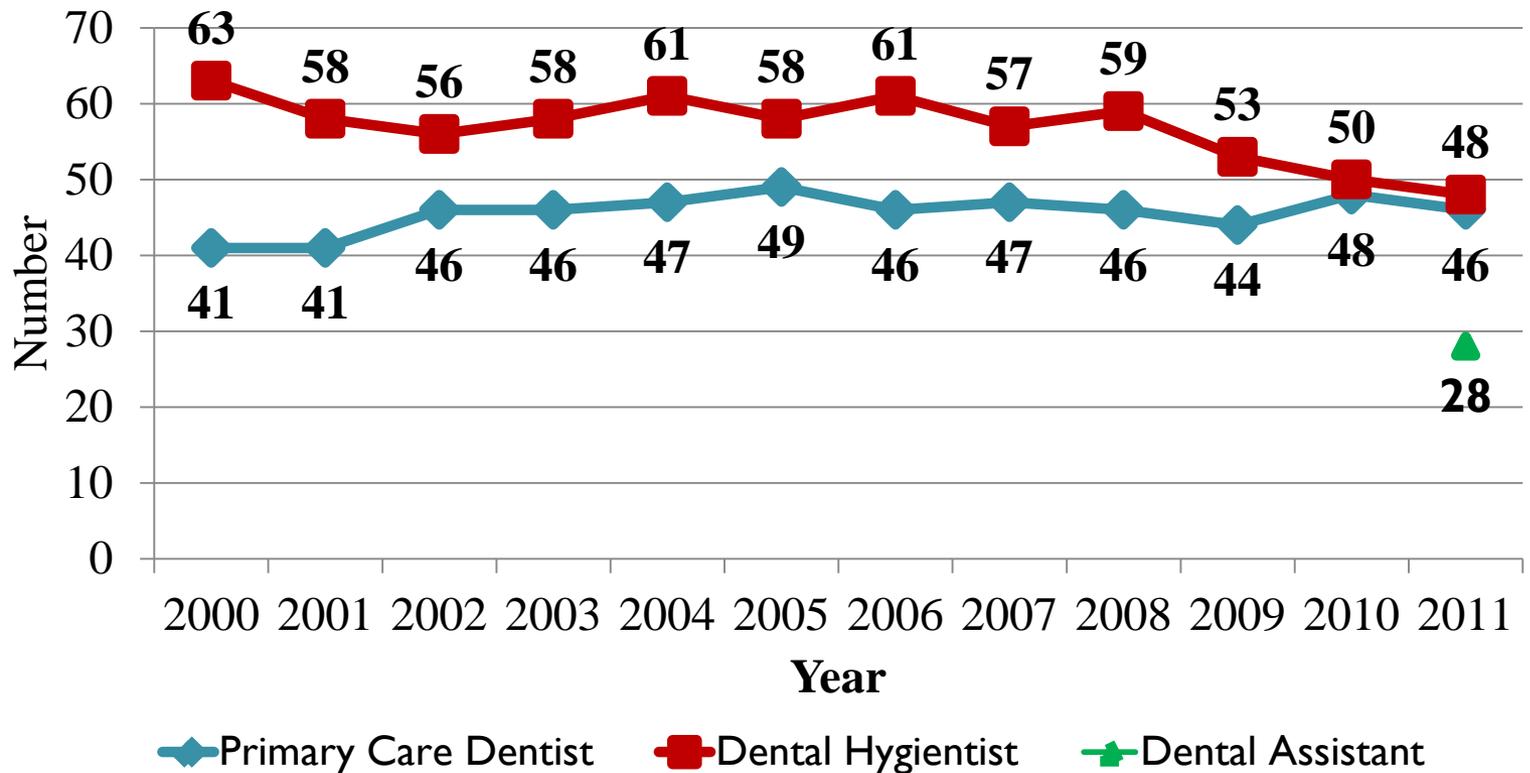
Ratio of Dental Assistants per 100,000 Population, Texas, 2011



Data Source: Texas State Board of Dental Examiners.
Data available only for 2011.

Workforce

**Number of Counties without a Primary Care Dentist/
Dental Hygienist/Dental Assistant, by Year,
Texas, 2000-2011**

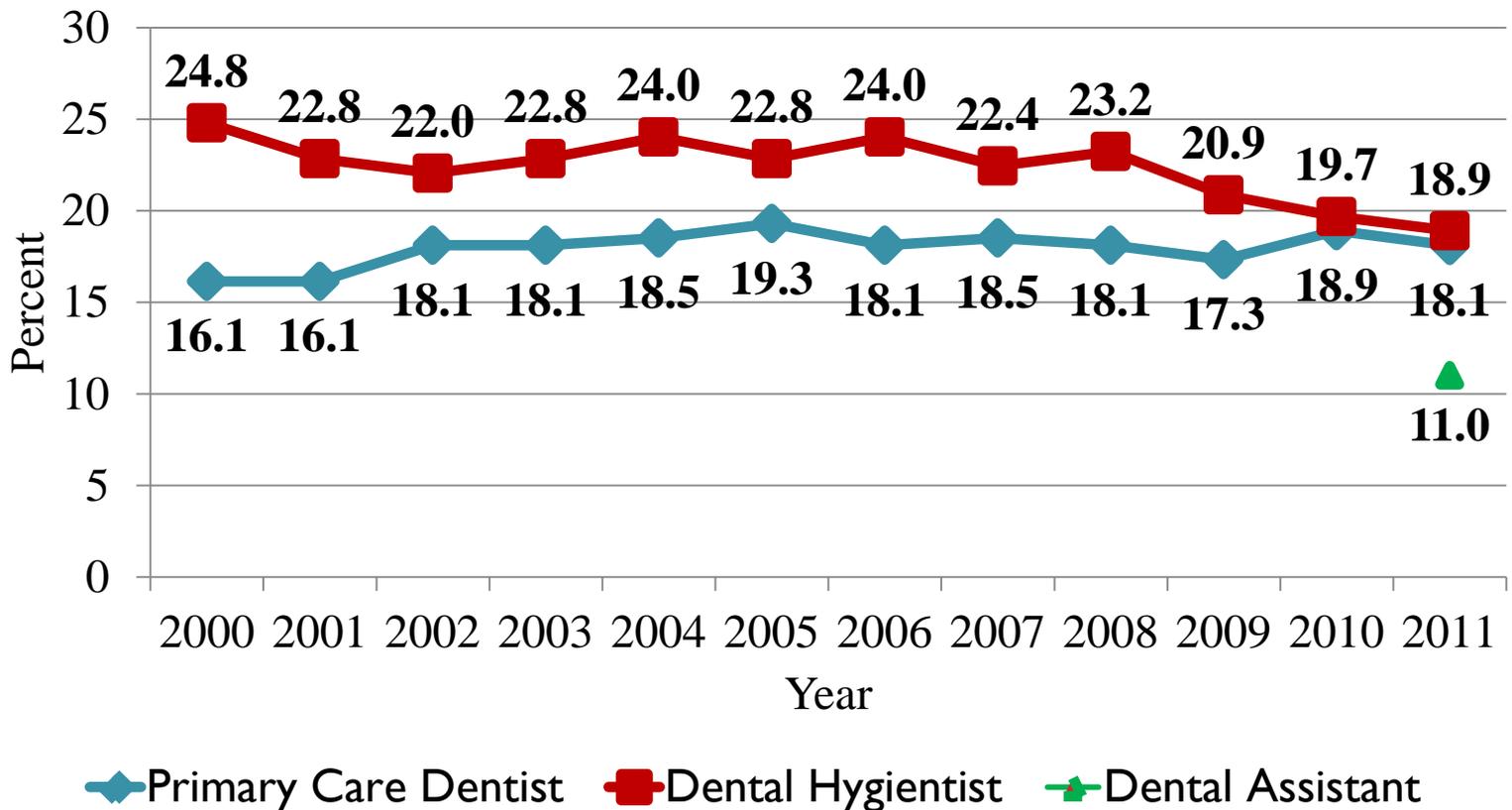


Data Source: Texas State Board of Dental Examiners. Includes: Dentists with a status code of “active” or “expired” and a practice type of general dentistry, pediatric dentistry, or dental public health. Excludes: Dentists with a status code as “retired”, “revoked”, “suspended”, “cancelled”, “surrendered”, or “deceased”; and those who are non-primary care; federal or military; dental residents; or faculty. Excludes: Dental hygienists with a license status code of “surrender”, “revoked”, “retired”, “deceased”, or “cancelled”.

Dental Assistant: Data available only for 2011.

Workforce

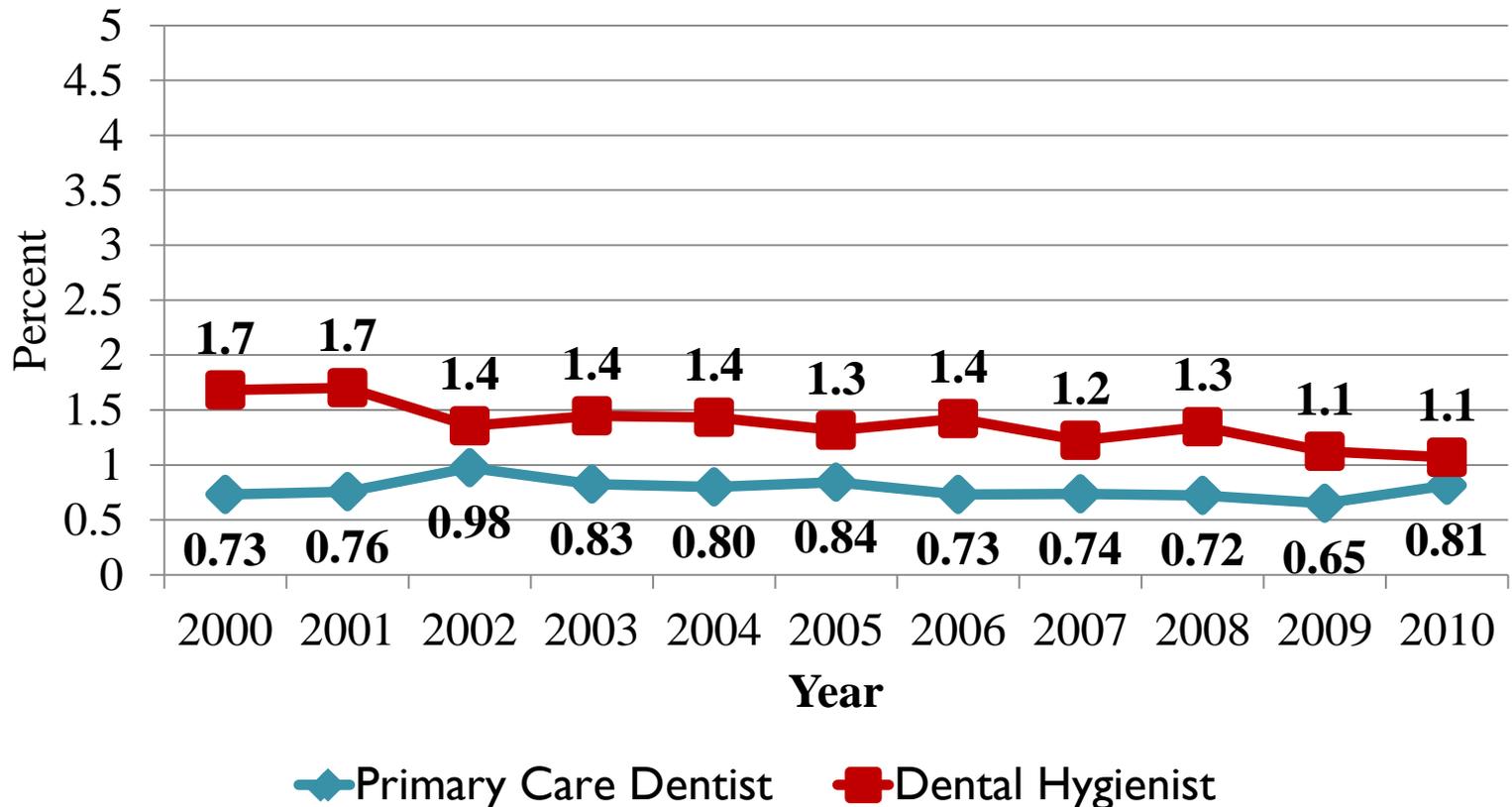
Proportion of Counties without a Primary Care Dentist/Dental Hygienist/Dental Assistant, by Year, Texas, 2000-2011



Data Source: Texas State Board of Dental Examiners. Includes: Dentists with a status code of “active” or “expired” and a practice type of general dentistry, pediatric dentistry, or dental public health. Excludes: Dentists with a status code as “retired”, “revoked”, “suspended”, “cancelled”, “surrendered”, or “deceased”; and those who are non-primary care; federal or military; dental residents; or faculty. Excludes: Dental hygienists with a license status code of “surrender”, “revoked”, “retired”, “deceased”, or “cancelled”.

Workforce

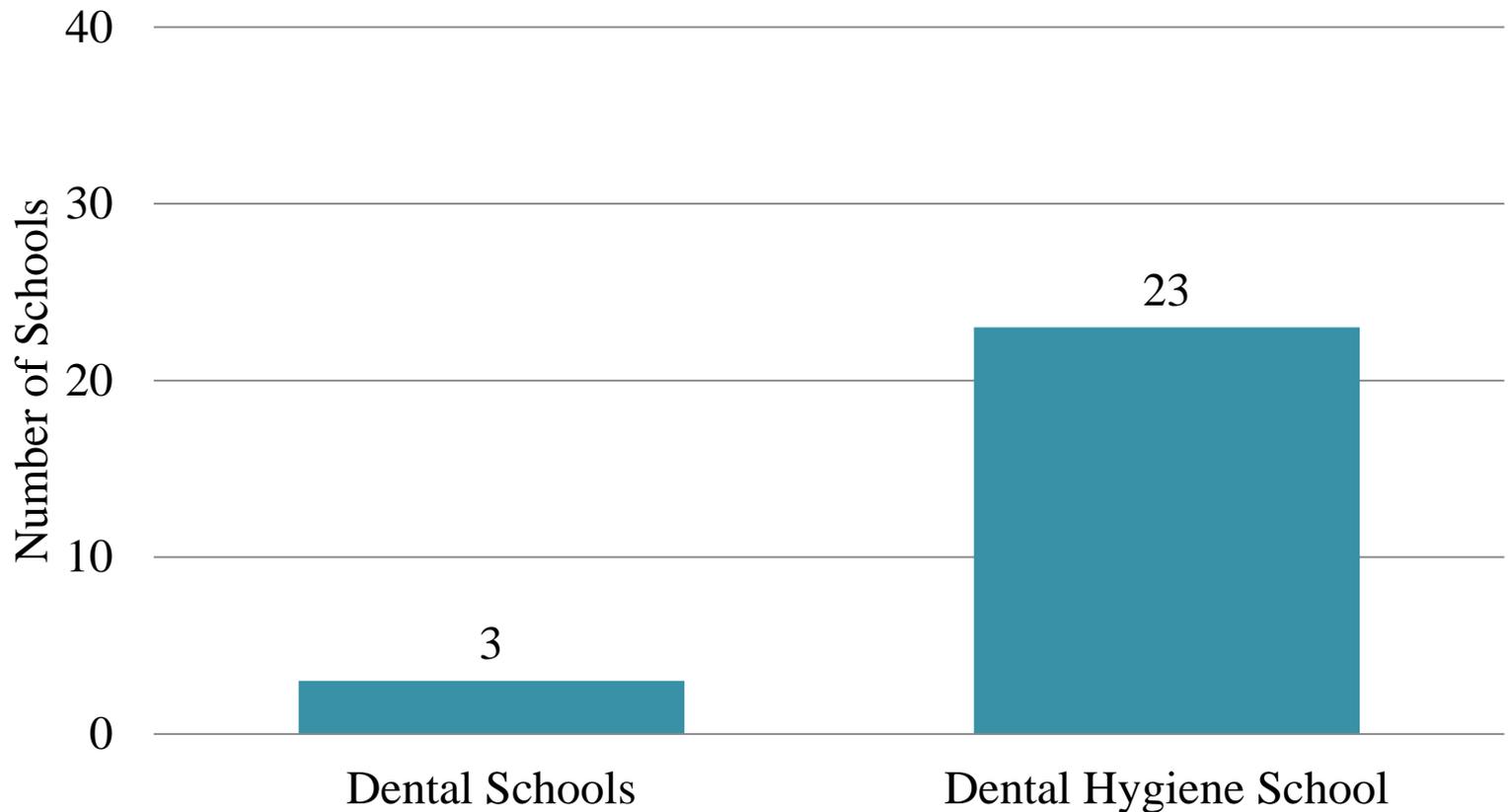
Proportion of Total Population in Counties without a Primary Care Dentist/Dental Hygienist, by Year, Texas, 2000-2010



Data Source: Texas State Board of Dental Examiners. Includes: Dentists with a status code of “active” or “expired” and a practice type of general dentistry, pediatric dentistry, or dental public health. Excludes: Dentists with a status code as “retired”, “revoked”, “suspended”, “cancelled”, “surrendered”, or “deceased”; and those who are non-primary care; federal or military; dental residents; or faculty.

Workforce

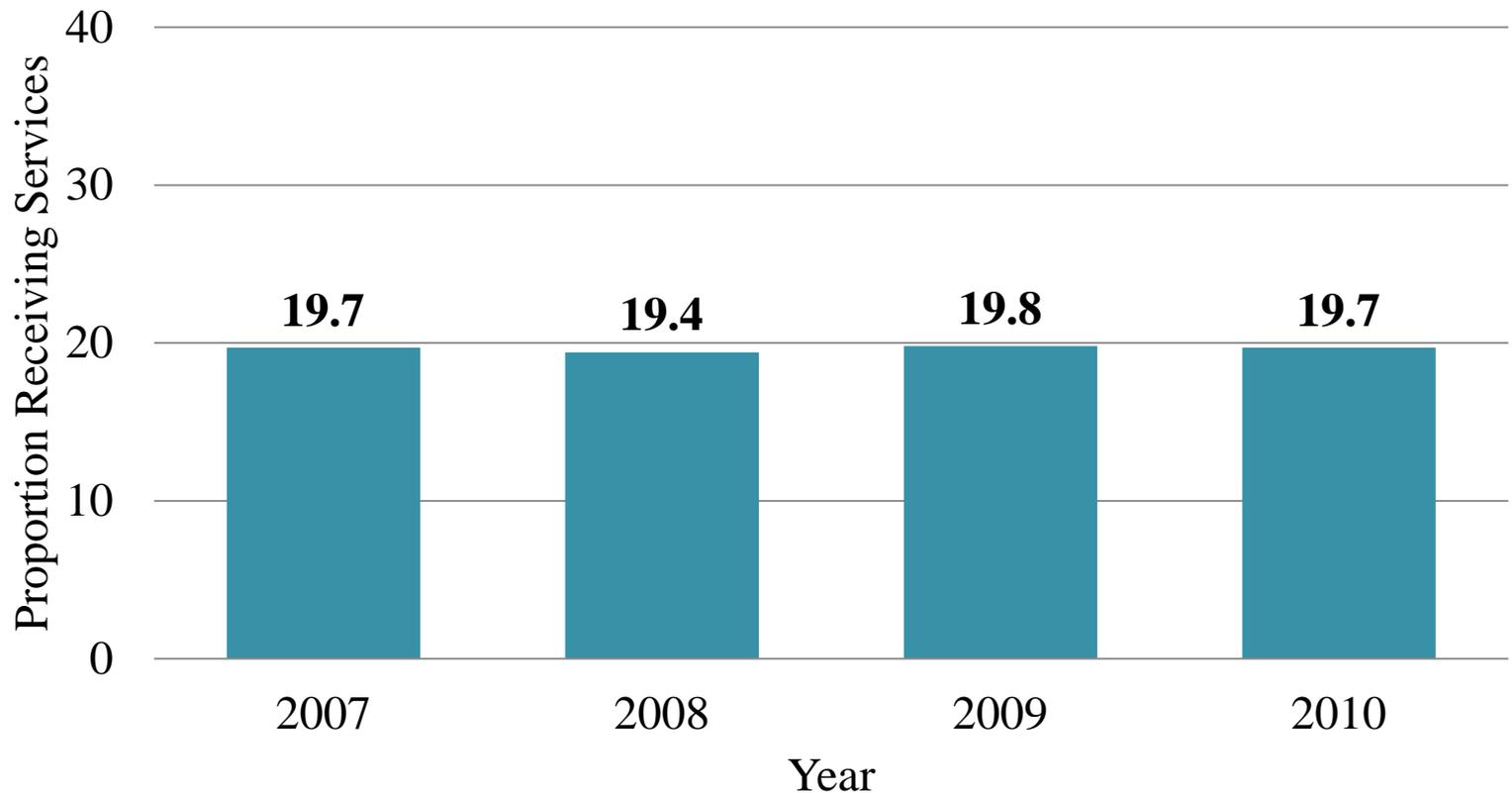
**Number of Dental and Dental Hygienist Schools,
Texas, 2011**



Data Source: Texas State Board of Dental Examiners.

Access to Dental Services

Proportion of Patients Receiving Oral Health Services at FQHCs, by Year, Texas, 2007-2010



Data Source: Human Resources and Service Administration (HRSA), Bureau of Primary Health Care (BPHC), Uniform Data System (UDS).

Medicaid/Children's Health Insurance Program (CHIP)

To learn more about Texas Medicaid/CHIP and access program data, visit:

Texas Health and Human Services Commission at <http://www.hhsc.state.tx.us/research/index.shtml>

Next Steps

Future data collection sources in the upcoming years will include:

- Basic Screening Survey (BSS) for 3rd graders during school year 2012-2013.
- BSS for Head Start children during school year 2013-2014.
- Dental question added to the Texas YRBS for year 2013.

References

<http://www.ada.org/>

<http://www.nidcr.nih.gov/oralhealth/topics/oralcancer/>

<http://www.dshs.state.tx.us/dental/reports.shtm>

<http://www.dshs.state.tx.us/birthdefects/about.shtm>

<http://www.buildingbetteroralhealth.org/>

<http://www.dshs.state.tx.us/dental/>

<http://www.dshs.state.tx.us/chpr/fqhcmain.shtm>

<http://www.dshs.state.tx.us/epitox/fluoride.shtm>

<http://www.dshs.state.tx.us/tobacco/>

<http://www.dshs.state.tx.us/dental/smokeless.shtm>

<http://www.dshs.state.tx.us/chs/hprc/>