

## Fact Sheet 1 – Kids Oral Health

### High rates of avoidable hospitalisation of children aged 0-4 years for dental conditions

Poor oral health in childhood can lead to lifelong disadvantage, so it is especially important that children receive regular oral health care. Tooth decay is Australia's most prevalent health problem. It is costly to the health care system and to the community, through missing school and work and being unable to live life to the full. However, this can be prevented by receiving regular oral health care.

*Recommendation 1: That areas of Victoria with very poor child oral health be made a priority target for specific interventions, through health promotion and the provision of more public dental care.*

*Recommendation 2: That child oral health be made a priority target for improvement at a State-wide level.*

#### Did you know?

- Some areas of Victoria experience high rates of child hospitalisation for dental conditions
- These hospitalisations may have been avoided through early dental treatment and advice from a dental professional
- Socio-economic disadvantage and poor oral health are linked, especially in children
- Although the Child Dental Benefits Schedule<sup>1</sup> may go some way to addressing the inequities of child access to dental care, more needs to be done

For more information on the oral health of Victoria's children see:

<https://www.dhsv.org.au/oral-health-programs/LGA-oral-health-profiles>

#### How does this affect Victorians?

- Some areas of Victoria have extremely high rates of child hospitalisation, more than twice the State average (see Table 1)
- These areas need concentrated oral health care interventions
- Avoidable hospitalisation, especially of children, is something we should strive to reduce wherever possible
- State-wide programs to promote oral health and provide dental care to children are critical to the health of Victorians

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<sup>1</sup> The Child Dental Benefit Schedule is a Government dental treatment scheme for children aged 2-17, which provides \$1000 of funding over two years for eligible children to receive dental care.

**Table 1 – rate of preventable hospitalisation of children aged 0-4 years, compared to the State average, due to dental conditions**

Local Government Area	Number of children hospitalised per 1,000 people (2011/12) <sup>2</sup>
Gannawarra	13.5
Hindmarsh	13.3
Corangamite	11.7
Swan Hill	11.7
Mildura	10.7
Yarriambiack	7.4
Macedon Ranges	7.3
Golden Plains	6.9
Hepburn	5.9
Mount Alexander	5.9
Moira	5.8
Victoria	4.8

**What is ADAVB doing?**

- ADAVB is lobbying State politicians and the State Government – we are seeking an ongoing commitment to the improvement of Victorian child oral health, both in areas of high need and State-wide.

**What can you do?**

- Write to your local politicians, the State Minister for Health and the State Shadow Health Minister. Urge them to make the oral health of Victoria’s children a priority. Ask them to commit to oral health promotion and dental care programs that can reduce the number of children who are hospitalised for problems that could have been avoided with earlier treatment.

**Click here to send an email to Victorian politicians about the importance of improving the oral health of Victoria’s children:** <http://www.adavb.net/?TabId=1395#ADAVB-the-voice-of-dentistry-in-Victoria-0110110100000011>

**Electoral comment:** see <http://electoralcomment.adavb.org>

<sup>2</sup> Local Government Area Oral Health Profiles (2013). Dental Health Services Victoria. Available at <https://www.dhsv.org.au/oral-health-programs/LGA-oral-health-profiles>