**Between the ages of 6 and 12 many changes occur in the normal growth and development of your child’s mouth. As it transitions from all primary teeth to all permanent teeth, the dental appearance of your child will change significantly and including missing teeth, gaps in teeth, crooked teeth, and the perception that these new adult-size permanent teeth are out of proportion to other characteristics of the face. During this period, routine check-ups are important to continuously evaluate tooth positioning or jaw relationships. Orthodontic treatment may be recommended.**

In this stage of growth, good oral hygiene cannot be emphasized enough! It is important for the primary teeth to stay healthy until they naturally fall out. Permanent teeth will need good care that will help them to last a lifetime.

### Good Nutrition and Oral Health

Children need strong, healthy teeth to chew their food, speak and feel confident when they smile. What’s more, a good diet is essential for a child’s growth and development. Almost all the foods we eat, including milk and vegetables, have some type of sugar, which can contribute to tooth decay. To help control the amount of sugar your child consumes, read food labels and choose food and beverages that are low in added sugar. Offer your child water to drink throughout the day that is hydrating and contributes to good nutrition.

According to *My Plate*, a website from the Center for Nutrition Policy and Promotion, an agency of the U.S. Department of Agriculture, a balanced diet for young children 6–12 should include:

- **Fruits and vegetables.** Combined these should be half of what your child eats every day.
- **Grains.** Make sure at least half of their grains are whole grains, such as oatmeal, whole wheat bread and brown rice.
- **Dairy.** Choose low-fat or fat-free dairy foods.
- **Lean proteins.** Make lean protein choices, such as lean beef, skinless poultry and fish. Try to vary protein choices to include eggs, beans, peas and legumes, too. Eat at least 8 oz. of seafood a week.

Encourage healthy eating habits, serve nutritious snacks and limit sweets.

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**More resources**

Visit our website at visionycompromiso.org/oralheath
Discuss your child’s fluoride needs with your dentist or pediatrician. They may recommend a fluoride supplement if you live in an area where the tap water is not fluoridated.

**Oral Hygiene**

Tooth decay (cavities) is one of the most common childhood diseases. The good news is that tooth decay is preventable!

Toothbrushing and flossing are the best ways to help prevent cavities, but it is not easy to clean every nook and cranny of your children’s teeth—especially the molars, those back teeth that are used for chewing. Molars are rough and uneven and a favorite place for leftover food and cavity-causing bacteria to hide. However, there is a safety net to help protect the molars and keep them clean. It’s called a sealant, a thin, protective coating (made from plastic or other dental material) that adheres to the chewing surface of the back teeth. Sealants are no substitute for brushing and flossing, but they can keep cavities from forming and may even stop early-stage decay from becoming a full-blown cavity.

Fluoride treatments prevent cavities by strengthening the hard, outer shell of the teeth, and they may even reverse very early cavities that have just started to form. A fluoride treatment is quick and painless. The dentist will paint a thin layer of fluoride varnish on your child’s teeth. Fluoride varnish is a sticky yellow or orange substance that often has a pleasant taste. The varnish application is fast and sets quickly. Your child will be advised to avoid eating or drinking for 30 minutes after the treatment.

**HOW TO BRUSH YOUR CHILD’S TEETH**

The best way to protect your child’s teeth is to teach good dental habits. With proper coaching, parents can help their children adopt good oral hygiene as a part of their daily routine. However, you will need to stay involved to ensure that they remove all the plaque—the soft, sticky, bacteria-containing deposits that accumulate on the teeth and cause tooth decay. Also, watch for brown or white spots, which might be signs of early decay.

**Toothbrushes:** Most dentists recommend that toothbrushes be replaced every three months or more frequently if the bristles look bent or the brush-head looks worn. Replace the brush if your child has had a cold or the flu, bacteria can hide within the bristles leading to re-infection. Toothbrushes should not be shared, should be rinsed clean of all toothpaste when finished brushing and left in the open air to dry after each use.

**Storing Toothbrushes:** It is important to rinse your toothbrush very well after each use and let it dry out in an upright position. Try to keep it out from touching other toothbrushes to avoid passing germs. You can use a standard toothbrush holder with several slots. When traveling, use a plastic case to protect the bristles from damage.

**Toothpaste:** Brushing with an ADA-recommended fluoride toothpaste should be done at least twice a day. Beginning at six years old, a child can use a pea-sized amount of toothpaste.

**HOW TO FLOSS YOUR CHILD’S TEETH**

Children can begin to floss their teeth once the surfaces are next to each other. It is important to floss at least once a day. Bacterial plaque and food can settle between the teeth, which leads to gum disease, tooth decay and halitosis (chronic bad breath). Brushing the tongue also helps to remove bacteria.
It doesn’t matter if you floss your child’s teeth before or after they brush as long as you clean between any teeth that touch. You can use child-friendly plastic flossing tools to floss your child’s teeth until they are comfortable doing it themselves.

Flossers are small easy-to-grip handles that are pre-loaded with floss and ideal for children who are learning to floss.

**Oral Health Begins at Home**

It is important that you as a parent, help your children to understand the importance of their teeth at a young age. You can do it by providing them basic information, appropriate to their age and experience, on the importance of keeping their teeth clean and healthy. You can use you tube videos, stories, puppets to make it fun and easy to understand.

**DRINKING WATER**

Fluoride helps make tooth enamel more resistant to decay and helps repair weakened enamel. Children who do not receive an adequate amount of fluoride may be at an increased risk for tooth decay. Most, but not all, community water systems in California are fluoridated. Bottled water may not contain fluoride; therefore, children who regularly drink unfluoridated bottled water or unfluoridated tap water are missing the benefits of fluoride. If you are not sure if your tap water has fluoride, contact your local health department or water supplier.

**SUGARY DRINKS**

Juice is high in sugar and calories, water and milk are always the best options for your child. Children ages 6–19 should have no more than 8–12 oz. of juice per day (about one-half cup).

**STICKY FOODS**

Avoid snack foods that are sticky or hard to remove from your child’s teeth such as fruit roll ups, crackers, chips, and candy. Even raisins or other dried fruits, often promoted as an all-natural snack, have lots of sugar and are hard to clean from your child’s teeth.

**HEALTHY SNACKS**

To protect teeth, sweet foods and drinks should be limited to mealtimes and no more than one snack per day. Below you can find some recommendations.

- Fresh fruit but not dried fruit
- Vegetable sticks, e.g. carrot, cucumber, pepper, baby corn with dips based on yogurt, cream cheese or pulses in such dishes as hummus
- Wholegrain breakfast cereals with milk
- Cheese cubes and crackers/breadsticks
- Sandwiches, bread rolls and pitta breads with fillings
- Plain yogurt with pieces of fresh fruit
- Currant buns and teacakes
- Pancakes, fruit muffins and plain biscuits
- Fruit cake and carrot cake
Going to the Dentist

Baby teeth, or primary teeth, are an important part of your child’s growth and development. They are critical for learning to eat, speak and smile. Most important, perhaps, they hold the space in your child’s mouth until the adult teeth are ready to come in. Beginning at about 5–7 years old, a child’s baby teeth will begin to wobble and fall out, and this will continue until about 12–14 years.

This transitional phase of “mixed dentition,” when there are both baby teeth and permanent teeth in the mouth, is a time of changing appearances. Smaller teeth may make the permanent teeth appear very large in proportion to the size of a child’s face. Routine examinations by a dentist will enable proper monitoring of the child’s dental growth and appearance.

BEFORE THE VISIT

A visit to the dentist’s office can be frightening for children who may have heard stories on the playground about tooth extractions and fillings, or who mirror a parent’s own anxieties. Do your best to keep any anxiety you may be feeling to yourself. Children can pick up on your emotions, so emphasize the positive and be encouraging.

Before a visit to the dentist, try reading to your child from a selection of age appropriate books to dispel myths and so that they know what to expect. Many television programs have episodes where they characters visit the dentist for the first time. You may also want to roleplay at home using a toy dental kit. As a parent, think through in advance any questions you may have for the dentist about your child’s teeth and oral health.

Set expectations

Whether your child’s dental appointment is for a routine check-up or a more significant procedure, talk to your child about what to expect. Be prepared to answer your child’s questions honestly. Find ways to describe the process in easy-to-understand terms and comforting language. If your child prefers visual explanations, sit down together, and look at pictures of pediatric dental offices. Point out the dental chair, the overhead light, and some of the equipment used by dental hygienists and dentists. Although you may choose to reinforce positive behavior with a reward to give them something to look forward to, do not bribe your child to attend the dental visit.

Also, never use a dental visit as a punishment or a threat. Warnings such as, “The dentist will have to pull out all your teeth if you keep that up!” only increase your child’s anxiety, which can follow them well into their adult lives and have major consequences on their oral health.

DURING THE VISIT

During your child’s dental visit, you should expect the dentist or hygienist to:

- Review your child’s dental history
- Respond to your questions and concerns
- Talk with you about your child’s overall oral health, including:
  - Teeth development
  - Bite (how your child’s teeth come together)
  - Soft tissues such as gums and cheeks
  - Oral habits such as thumb or finger sucking
  - Factors that affect the risk of cavities such as diet, oral hygiene, fluoride use, and family history
  - How to prevent trauma to your child’s mouth

They will also:

- Show you how to clean your child’s teeth and give you a chance to practice
- Offer advice about home care, including hygiene, diet and use of toothpaste and other fluorides
Tell you what to expect as your child’s mouth grows and develops

Suggest a schedule for follow-up care

The dentist or hygienist may also clean your child’s teeth, especially if your child’s teeth have stains that are common in children. The dentist or hygienist also may apply fluoride, particularly if your child has a higher than average risk of developing cavities.

Before leaving the office, you should have a clear idea about:

- Your child’s development
- Your responsibilities as a parent
- Any follow-up care that is needed
- Your child’s likelihood of future cavities or bite problems

Your questions should be answered and you should be clear about what you and the dentist can do together to make sure your child has excellent oral health.

Paying for Your Child’s Oral Health Care

In California, all children 0-19 years old, regardless of their immigration status, qualify for Medi-Cal if their parents are considered low income. Under Medi-Cal, all children also receive Denti-Cal, which covers most of their dental care services.

Kaiser Permanente Community Health Plan offers both health and dental coverage for uninsured children under 19 years, whose parents’ income makes them ineligible for Medi-Cal, regardless of immigration status. Unfortunately, this program is not offered in all counties.

What Does Your Dental Plan Cover?

In California, all health coverage for children also includes pediatric dental benefits. You always have the option to purchase additional coverage through a stand-alone plan if you wish.

Once you determine what your child’s dental needs are, work with your child’s dentist and benefits provider so that you understand what services are covered. Often, the dentist’s office will look into this for you. Most plans cover preventive care.

You can also call your child’s plan using the customer services 800 number on your identification card, or go to their website for more information.

Choosing the Best Dental Home for Your Child’s Needs

Parents and dentists each have an important role to play in making a child’s dental visit a positive experience. Dental health is a vital part of your child’s overall health and it is important that you select a dental home where they feel comfortable.

If possible, select a pediatric dental office for your child 6–12 years. Pediatric dentists receive additional training and know how to communicate well with children. In addition, their office has pediatric equipment and an environment designed to make children feel comfortable. Exam rooms may be decorated with bright colors, animals or fun designs while waiting rooms may feature a variety of toys and activity tables to keep them entertained while they are waiting. A fun environment makes the dentist office a treat for children to visit—they may even beg to return!

A dental home gives you a safe and trusted place to turn to whether it is for a routine cleaning or a dental emergency. Here are some strategies to help you find the best dental fit for you and your child:

- Is the appointment schedule convenient for you? Are they open before and after school hours? Or on weekends?
- If you have dental coverage, is the dentist in your dental plan’s network?
- Do you and your child feel comfortable there?
- Is the office clean, neat and orderly?
- Will you need translation or interpreter services to communicate with the dentist or the dental hygienist?
- Does the dentist explain the procedures and provide instructions that will help you take care of your child’s oral health?
- Was your child’s medical and dental history recorded and placed in a permanent file?
- Do they have a plan in case of dental emergencies?