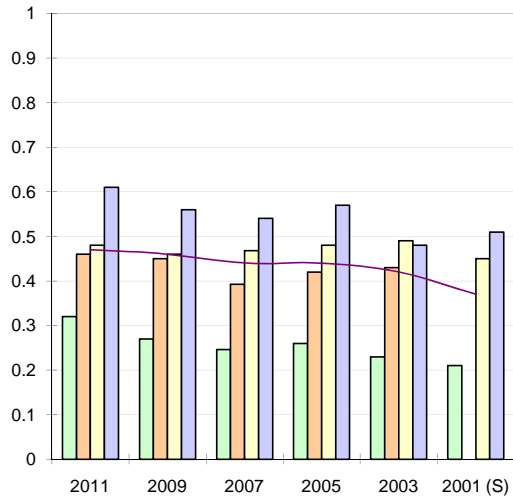


Children's Oral Health Program

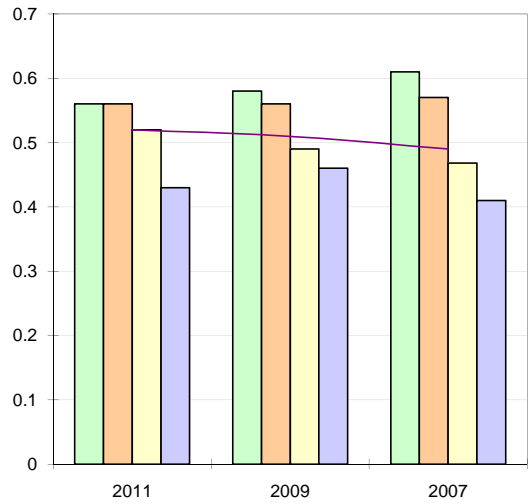
NJ Oral Health Survey Data

Survey results are compiled according to NJ District Factor Groupings: (green = AB, orange = CDDE, yellow = FGGH and purple = IJ).

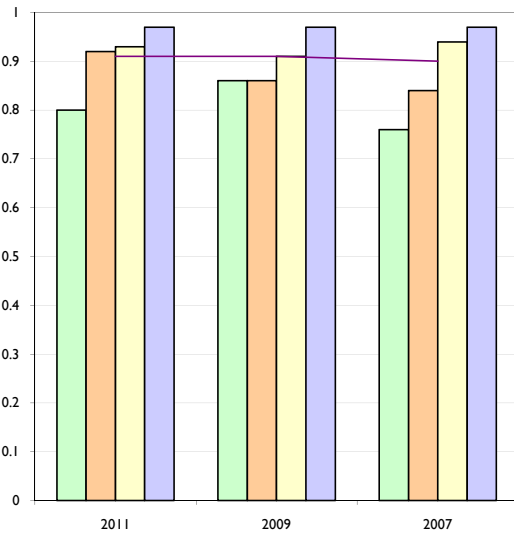
Does your child have a sealant on a back tooth? (Yes Responses)



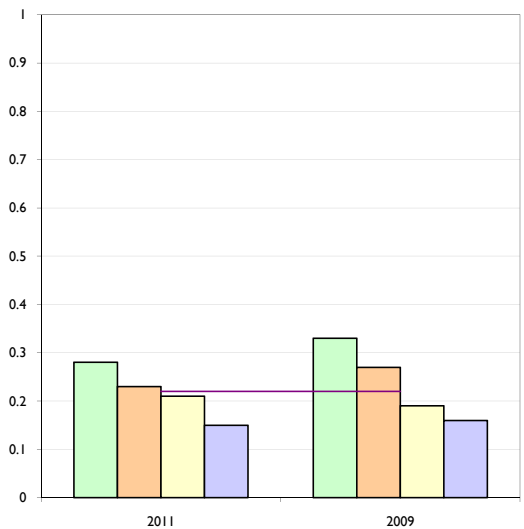
Has your child ever had a cavity? (Yes Responses)



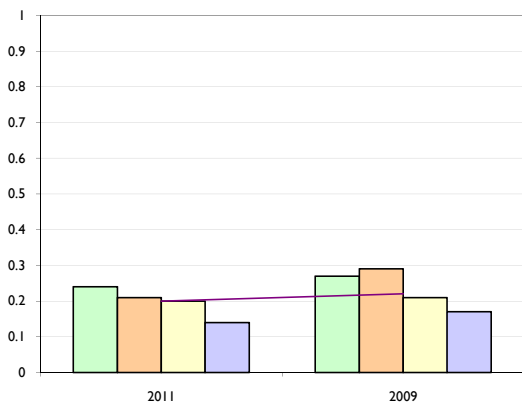
Has your child had a dental checkup in the last year? (Yes Responses)



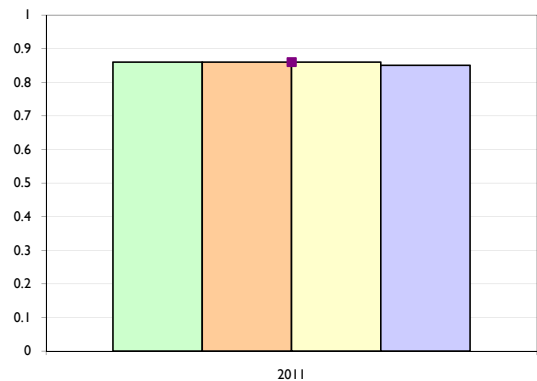
Has your child ever had a toothache? (Yes Responses)



Do you ever feel afraid or nervous about visiting the dentist? (Yes Responses)



Does your child have dental insurance? (Yes Responses)



The NJ Oral Health Survey is conducted biannually by the NJ Department of Health and Senior Services. Participating schools are randomly selected and data is collected through an anonymous survey distributed to parents of 3rd grade students.