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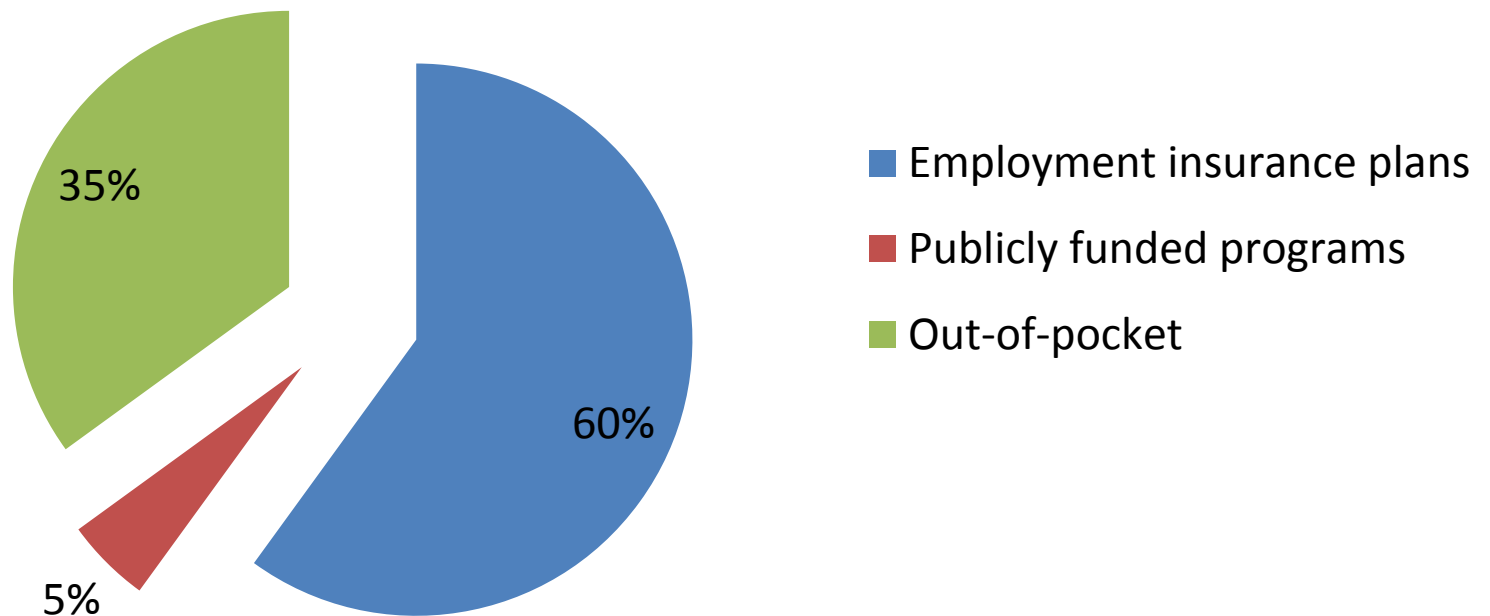
Access to Dental Care for Adults

Equitable access to dental

- Fundamental aspect
- Basic principle
- SUBGROUPS with poor oral health and poor access to care persist
 - Age
 - Dental insurance
 - Income
 - Education
 - Immigration status

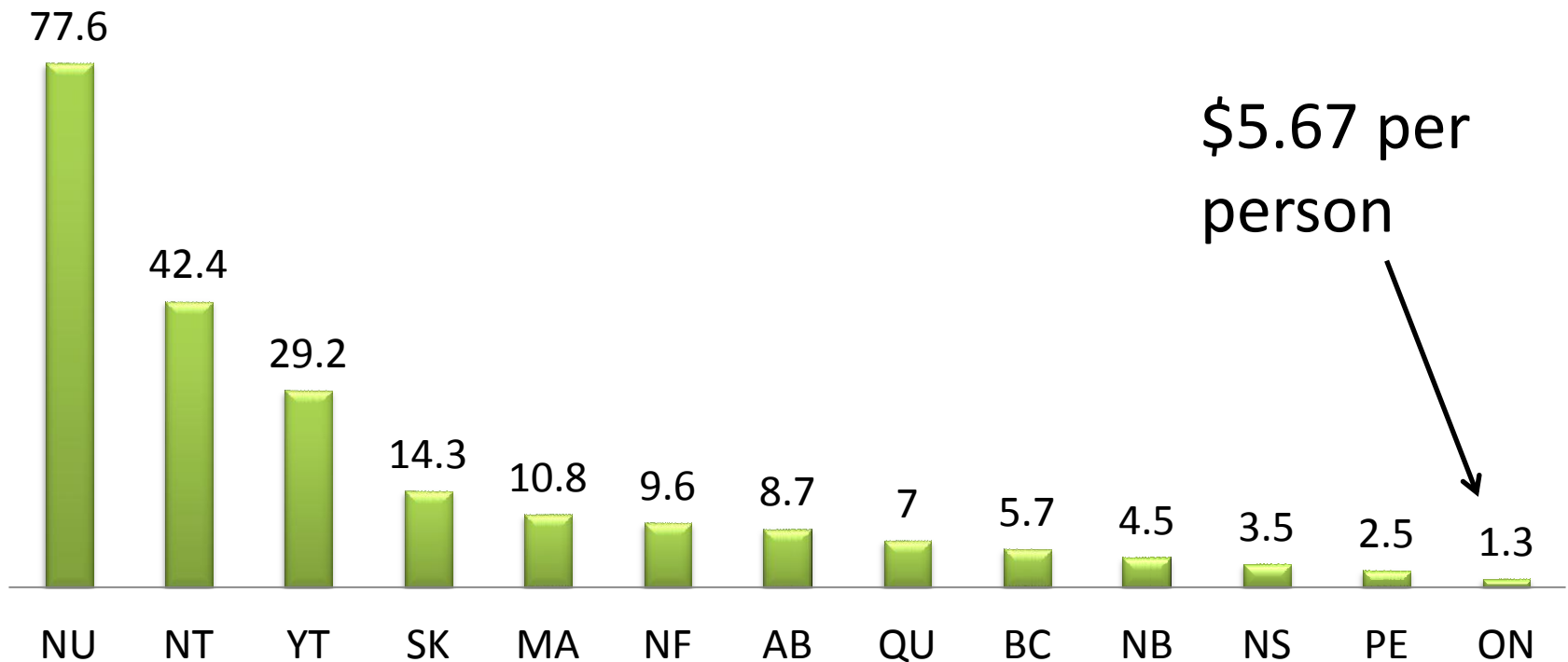
Financing dental care in Canada

Money spent on dental services (2009)



Public funded share for dental services (2010)

■ % total expenditures



Visits to Ontario Hospital Emergency Rooms for Oral Health Problems (2012)

Local Health Integration Network	Number of Patient Visits
CENTRAL	3,500
CENTRAL EAST	5,817
CENTRAL WEST	1,988
CHAMPLAIN	5,477
ERIE ST. CLAIR	3,160
HAMILTON NIAGARA HALDIMAND BRANT (HNHB)	6,258
MISSISSAUGA HALTON	2,388
NORTH SIMCOE MUSKOKA	3,289
NORTH-EAST	6,161
NORTH-WEST	2,771
SOUTH EAST	4,005
SOUTH WEST	6,822
TORONTO CENTRAL	3,531
WATERLOO WELLINGTON	2,767
Total	57,934

From Dr. King's Report on Oral Health

“The inequities that exist in Ontario with respect to oral health care are deep and they are serious. The government programs... are important programs that do a great deal of good. But there are significant gaps that remain...”

Victims of lack of access



Oral Health and Income Inequality in Middlesex County and London

- Adults in the lower income level had significantly lower percent of self-reporting their oral health as 'Excellent' or 'Very Good' compared to adults in the higher income level. In addition, the adults in the lower income level reported a higher percent of 'Fair' or 'Poor' oral health ratings compared to adults in the higher income level.
- A greater proportion of adults in the higher income level, compared to adults in the lower income level, reported visiting their dental care provider in the previous year, and this difference was statistically significant.
- There was a large amount of disparity among income levels in the percent of preventative and maintenance/treatment visits to a dental care provider. Compared to adults in the higher income level, adults in the lower income level reported a lower percent of visiting a dental care provider for preventative reasons and a higher percent of visiting a dental care provider for maintenance- or treatment-related reasons.
- Dental insurance status is drastically different across all income levels, with the greatest disparity occurring between the lower and higher income levels. More than half of the adults in the lower income level (55.8%) reported that they do not have dental insurance that covers all or part of their dental expenses. On the other hand, only 15.1% of adults in the higher income level reported not having dental insurance. Alternatively, only 26.9% of adults in the lower income level reported having private/employer-paid dental insurance (compared to 84.4% of adults in the higher income level). These differences were all statistically significant.

Advocates for adult dental care

October 21, 2013

- Ontario Oral Health Alliance
- Association of Ontario Health Centres
- Toronto Oral Health Coalition
- Peter Tabuns, MPP Toronto-Danforth

Phase 1

- Postcard campaign to MPPs completed with 50,000 postcards sent
- 36 MPPs have met with Ontario Oral Health Alliance members
- Increased media coverage – Toronto, Peterborough, Sarnia, Hamilton
- Petition received by legislative assembly with 3,500 signatures

"Whereas thousands and thousands of adults live with pain and infection because they cannot afford dental care;

"Whereas the promised \$45-million dental fund under the Poverty Reduction Strategy excluded impoverished adults;

"Whereas the programs were designed with rigid criteria so that most of the people in need do not qualify; and

"Whereas desperately needed dental care money went unspent and was diverted to other areas even though people are still suffering without access to dental care;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly do all in its power to stop the dental fund being diverted to support other programs; and

"That the Legislative Assembly fully utilize the commissioned funding to provide dental care to those in need."

MLHU - leadership and participation





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