Filling the gaps in dental care

Dental health is essential for overall health and well-being but dental care is one of the most inefficient and inequitable areas of the Australian health system. Less than 50% of adults currently receive adequate dental care with access highly dependent upon income. In fact, those earning over $140,000 p.a. are more than twice as likely (57%) to receive regular check-ups as those earning less than $30,000 p.a. (27%).

Adults who are eligible for public dental services often experience long waiting times for care, during which time problems can become more serious, leading to potentially preventable tooth loss. Poor access to dental care compounds the disadvantage already experienced by many low income and disadvantaged groups. Without good dental health it is very difficult to maintain employment or participate fully in education and social life. Poor dental health can also seriously complicate the management of multiple other chronic diseases.

Currently, the most socio-economically disadvantaged people have the poorest oral health and greatest treatment needs. This is already a major problem that will only become more serious with the ageing of our population. 87% of dental care in Australia is provided in the private sector and dentistry in general operates within an outdated bio-medical model of care which is inflexible, insufficiently engages patients as partners and is too disease and treatment oriented.

To meet the future health care needs of our community we need to break down the division between primary health and oral health and ensure that all Australians can access timely screening and referral, dental check-ups and basic and preventive dental care.

This requires cooperative actions from both the Commonwealth and state/territory governments to bring oral health care within the universal Medicare health system and oral health promotion within national prevention programs.
Older Australians and dental care

As our population ages, it is vital that we ensure older Australians can maintain a good standard of oral health. Some older Australians have a legacy of dental disease and repair which necessitates continuing dental care. Many lived as children without fluoridation or high quality preventive care.

As there is a trend towards increased retention of teeth by older people, this means there will be an increased need for dental care for this age group.

Many older Australians are on low incomes and struggle to afford dental care. Older Australians may also face other barriers to accessing dental care, for instance illness or restricted mobility.

Private dental care has become less affordable and public dental services are under-funded and unable to meet the demand for care. Older people are also facing increased costs due to the introduction of user contributions towards the cost of aged care services and the higher contribution for medications which can impact on their ability to pay for dental services.

Being unable to afford dental care causes major distress to elderly Australians and greatly impacts on their quality of life.

Poorly maintained teeth or badly functioning dentures restrict diet and poor diet is linked to conditions in older people such as cardio-vascular disease and bone thinning as well as contributing to memory loss and poor cognitive functioning. Pain and suffering from untreated dental problems can contribute to depression and other mental health problems and the long term use of pain killers and antidepressants. Untreated dental problems can also restrict participation in community and family activities.

AHCRA supports increased funding for public dental services and programs which directly target older Australians and those at risk of dental problems, including people in aged care facilities and those with dementia.

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