

Factors Affecting Access to Oral Health Services Among US Adults

Presented by:

Simona Surdu, MD, PhD

Oral Health Workforce Research Center

Center for Health Workforce Studies

School of Public Health, University at Albany, SUNY

15th Annual AAMC Health Workforce Research Conference

Developing a Health Workforce for 2030 and Beyond

May 1-3, 2019



Acknowledgements and Disclaimer

- This research was supported by the Health Resources and Services Administration (HRSA) of the US Department of Health and Human Services (HHS) under the Cooperative Agreement for an Oral Health Workforce Research Center (OHWRC)
- The authors wish to acknowledge the contributions of the Workforce Studies team at the Association of American Medical Colleges (AAMC) to the current research
- Co-authors: Margaret Langelier, MSHSA, Qiushuang Li, MA, Sohini Dhar, BDS, MPH, Mia Stufflebeam, MPH
- The content and conclusions of this presentation are those of OHWRC and do not necessarily represent positions or policies of the HRSA, SUNY, or AAMC

Introduction

- Gaps in access to and utilization of oral health services are recognized public health problems that result in persistent oral health conditions for many high-needs populations.
- Analysis of recent trends shows a steady decrease in utilization of oral health services among US adults across all socioeconomic strata, with cost being the most reported reason for the decline.
- Incorporating the consumer perspective on access to oral health services is important in the design of public policy and programming to improve the oral health status of the US population.

Purpose of the Study

- The OHWRC collaborated with the Workforce Studies team at the AAMC to conduct a survey of the US adult population in order to:
 - Obtain information from consumers on factors contributing to oral health disparities
 - Evaluate the impact of respondents characteristics and other factors identified by consumers on their access to and utilization of oral health services
- The ultimate goal of this study is to support the development of policy strategies to address access barriers for underserved populations

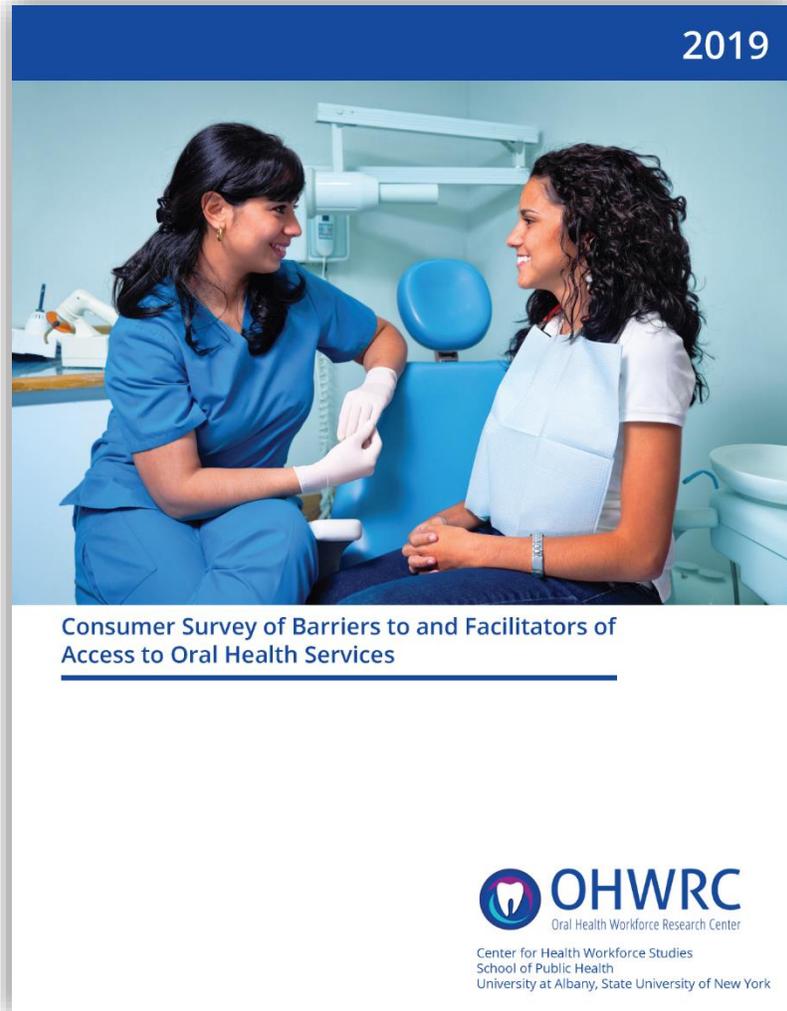
Methods: Data Source

- The analytic data set was created by merging data from the January and June 2018 waves of the AAMC Consumer Survey of Health Care Access.
- The oral health module, which was part of the larger survey about need for medical services, consisted of questions asking about:
 - Respondents' ability to obtain needed oral health care
 - Perceived barriers to and facilitators of oral health care services
- The survey also collected extensive information on demographics, socioeconomic factors, and urban/rural location of respondents residence.

Methods: Statistical Analyses

- Descriptive statistical analyses, including frequency distribution, cross tabulation, and chi-square test were used to estimate associations between study respondents access to oral health services and their characteristics
- Survey data were weighted by age, gender, race/ethnicity, employment status, household income, educational attainment, and geographic region to better represent the characteristics of the US adult population as measured by the US Census Bureau
- All analyses were conducted in SAS v9.4.

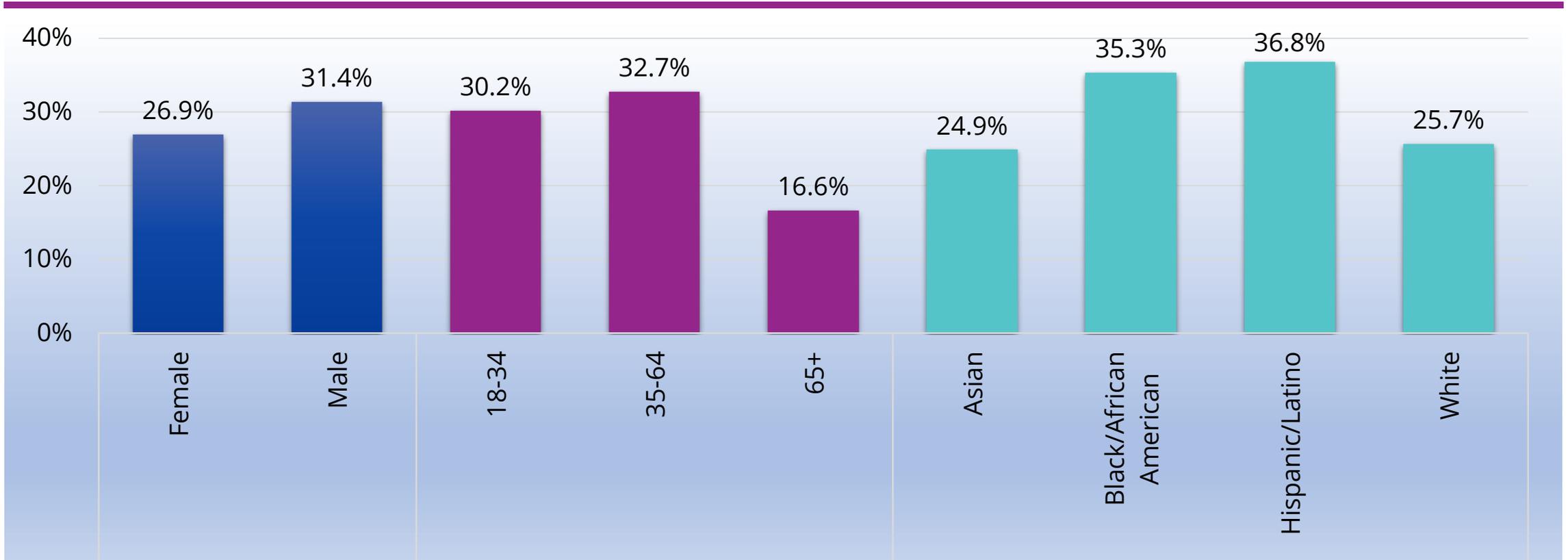
Key Findings



Utilization of Needed Dental Care

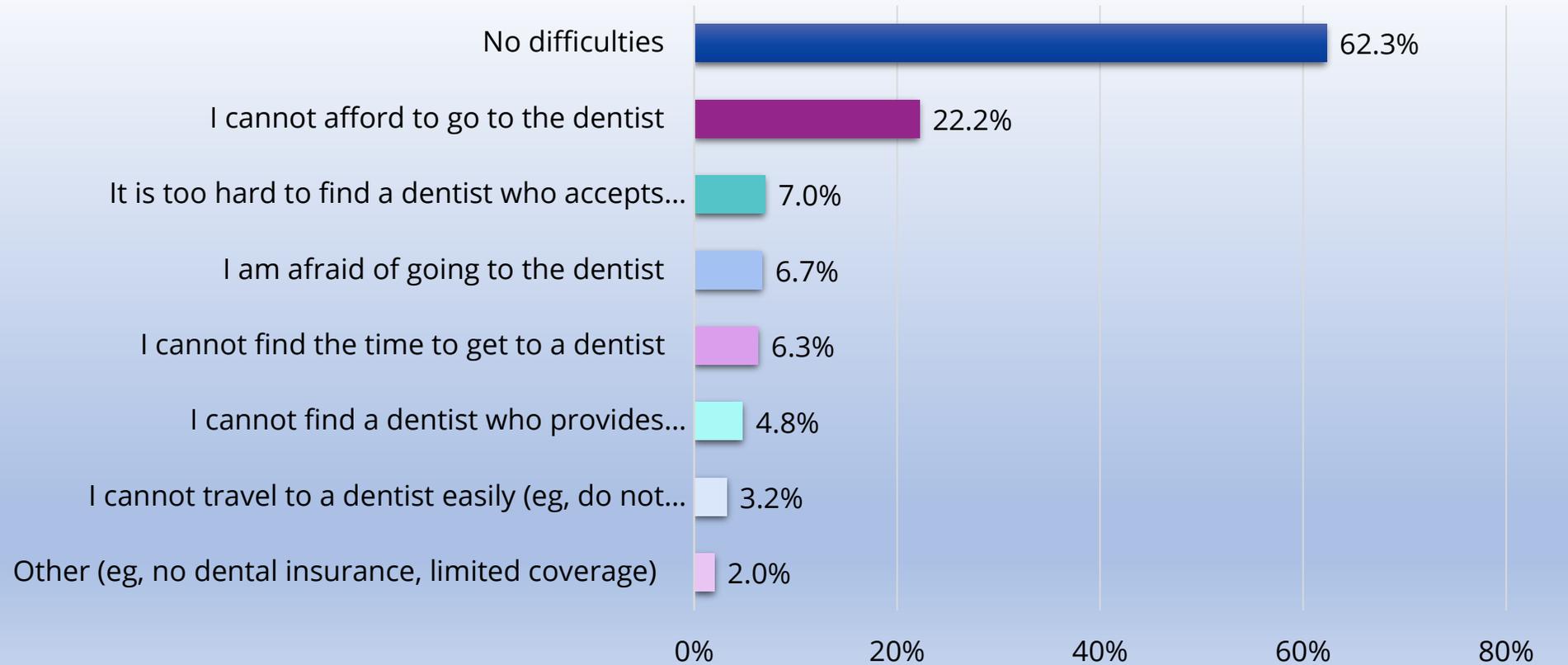
- The majority of survey respondents (70.9%; n=3,674) reported receiving needed dental care from a dentist or other dental provider in the last 12 months, most of them (75.1%) indicating 2 or more dental visits.
- However, nearly 3 in 10 respondents (29.1%; n=1,510) did not receive needed dental care in the past year.

Percentage of Respondents Without a Dental Visit in the Past Year by Demographic Characteristics



Note: There were statistically significant differences, estimated using Pearson chi-square tests, between respondents who did not receive the needed dental care versus those who did by gender ($P=.0004$), age ($P<.0001$), and race/ethnicity ($P<.0001$).

Major Barriers to Seeing a Dental Provider as Often as Needed



Note: Respondents were permitted to select more than one response option. Therefore, total response percentages exceed 100%.

Conclusions and Implications

- The associations between socioeconomic & geographic characteristics and access to care suggest that present efforts to link underserved populations with oral health services remain important policy and program initiatives at the state & national level for the near future.
- Offering an adult dental benefit in the State Medicaid Programs must be considered in order to expand access to dental services and improve oral health outcomes among adults.
- Efforts to educate the public about the importance of maintaining oral health should also continue to be a priority among stakeholders.

Study Limitations and Future Research

- Study Limitations:
 - The cross-sectional study design does not allow the assessment of causal relations.
 - Survey data face challenges resulting from self-reporting and potential recall bias.
 - Survey respondents may differ from the general population in that they may have a greater awareness of health or oral health topics.
- Future Research:
 - To investigate other access factors and dental care experiences as well as subgroups of survey respondents such as adults >65 years or those without self-reported barriers to care who did not utilize needed dental services.

Thank You

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