



FDI POLICY STATEMENT

IMPROVING ACCESS TO ORAL HEALTHCARE

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September 2021, Sydney, Australia**

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October 1998, Barcelona, Spain**

CONTEXT

Despite being largely preventable, oral diseases are highly prevalent conditions, affecting more than 3.5 billion people around the world¹. Oral diseases have substantial effects and consequences, causing pain and sepsis, reduced quality of life, lost school and work days, family disruption and decreased work productivity. The costs of dental treatment can be considerable for both the individual and the wider healthcare system.² Many factors influence oral health and the prevalence and severity of oral diseases. Access to adequate, quality and affordable oral health services, however, remains a major obstacle in achieving optimal oral health.

The major barriers to accessing and utilizing oral healthcare include oral health literacy and cost, uneven distribution of the oral health workforce, low prioritization of oral health, cultural values and beliefs that do not promote healthy lifestyles, the episodic availability of preventive and routine care, a lack of health or dental insurance, a lack of political will to include oral health in the essential health services and other socio-economic factors^{3,4}.

Thus, this revised Policy Statement affirms FDI's position that supports the goal of equal access to oral health services for all populations, addresses barriers to access to oral healthcare and promotes the belief that universal health coverage (UHC) provides an opportunity for oral health services to become more integrated into the wider healthcare system and to be more accessible and responsive to the oral healthcare needs of the population.⁵

SCOPE

This Policy Statement addresses barriers to accessing and utilizing oral health services at personal, community, organization, institution and system levels. It suggests strategies that are evidence-based and community-based, and which integrate oral health into general health and involve all oral health team members and other non-dental personnel. FDI believes that the key test of access is equity. This Policy Statement consequently complements other FDI Policy Statements that are devoted to the subset of populations at risk of unequal access to oral healthcare, such as displaced persons⁶, the underserved and vulnerable⁷, persons with disabilities⁸ and ageing populations⁹.

DEFINITIONS

1. Access: Freedom or ability to obtain or make use of¹⁰
2. Accessibility: The ease with which healthcare can be reached in the face of financial, organizational, cultural, geographical and emotional barriers¹¹
3. Utilization: To make the actual use of a service
4. Universal health coverage: “Ensuring that all people have access to needed health services (including prevention, promotion, treatment, rehabilitation and palliation) of sufficient quality to be effective while also ensuring that the use of these services does not expose the user to financial hardship¹².

PRINCIPLES: Target 3.8 of the 2030 United Nations Sustainable Development Goal 3 (the health goal) aims to “achieve universal health coverage, including financial risk protection, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all.”¹³.

POLICY

1. FDI states that:

- oral health is inseparable from general health;
- oral diseases share common risk factors with other non-communicable diseases (NCDs), such as tobacco use, physical inactivity, obesity, unhealthy diet, excess sugar consumption, harmful alcohol consumption and HPV infection;
- poor oral health is linked with many NCDs, mostly bi-directional, such as diabetes, cardiovascular disease, cancer and adverse birth outcomes.

2. FDI supports:

- the integration of oral health care into UHC to improve oral health outcomes and reduce inequalities in access to care;
- that any efforts to increase access to healthcare through reforms to insurance programmes should include oral health benefits.

3.FDI recommends:

- empowering patients to utilize oral healthcare by raising awareness, using culturally competent and plain language materials of health literacy for oral health education, coordinating oral healthcare services and eliminating individual and structural barriers to oral healthcare;
- integration of oral health promotion and educational activities with disease prevention and control related to other NCDs to improve population health and reduce health disparities;
- integration of oral health into health promotion services and activities in all types of settings such as schools, nursing homes and end-of-life care facilities;
- integration of oral health education, screening, prevention and promotion into

primary healthcare to assure the equitable and holistic provision of oral health throughout life;

- integration of oral health into general health and vice versa in professional education, training and research;
- integration of oral health into the advocacy for legislative action on general public health including the legislation on tobacco control, harmful alcohol use, added sugar intake and obesity prevention;
- effective and appropriate use of all members of the dental team, as defined by their scope of practice in each country/region for better serving the public;
- improving patient access to specialist care, when needed, either in the dental clinic or hospital setting;
- collection of data through effective surveillance to support, inform and evaluate health policies to improve oral health;
- expanding the reach of the oral health workforce by innovative methods such as teledentistry and mobile dentistry;
- adoption of the “dental home” concept, namely the ongoing dentist-patient relationship with the inclusion of all aspects of oral healthcare being delivered continuously in a patient-centred way¹⁴.

4. FDI states that all healthcare professionals (other than members of the dental team) have roles to play in oral health. Improved oral health can be achieved by non-oral health professionals via patient referral for oral healthcare after initial screening, application of topical fluorides, educating patients on tobacco cessation, healthy eating, reduction in sugar intake and harmful alcohol consumption, and effective oral hygiene care.

5. FDI encourages governments to incentivize dentists and other members of the dental team who provide services in underserved areas.

KEYWORDS

Access to oral healthcare, utilization of oral healthcare, universal health coverage, dental home, prevention

DISCLAIMER

The information in this Policy Statement was based on the best scientific evidence available at the time. It may be interpreted to reflect prevailing cultural sensitivities and socio-economic constraints.

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