



Oral Health among North Dakota Adults (18-64)

This fact sheet is Number 10 in a series of analyses regarding oral health in North Dakota.

The United States Census Bureau estimates that there are currently 475,720 North Dakota residents aged 18 to 64, accounting for 63% of the State's population.¹ In 2014, the U.S. reported a 7.7% increase in the Medicaid population.² North Dakota experienced paralleled growth, a 9.1% increase in the same year. Between 2013 - 2015, North Dakota added 21,167 additional adult Medicaid recipients; likely associated with North Dakota's early adoption of Medicaid Expansion.³

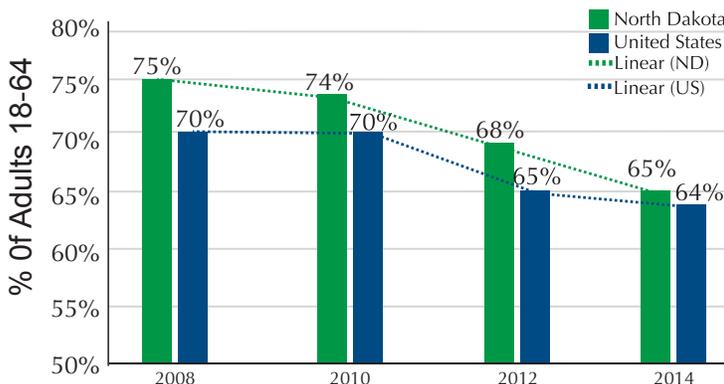
Oral health providers must acknowledge the unique dental needs of this group, taking into consideration the tremendous impact appropriate and accessible care can have on such a large proportion of the population.

Dental Care Utilization

Dental care utilization is declining among those aged 18 – 64.⁴ This downturn seems to be occurring among various income levels and regardless of dental health insurance coverage.^{5,6}

Nationally, dental care is not recognized as part of systemic health. This distinction affects both elders (65 years of age and older), and those 18-64.^{6,7} See Figure 1. There has been a steady drop in the percentage of adults who have visited a dentist, dental hygienist, or dental clinic within the previous calendar year. The U.S. and North Dakota exhibit similar trends. From 2008 to 2014 dental care visits among adults in North Dakota decreased by 10%. The U.S. showed a 6% decline over the same period.

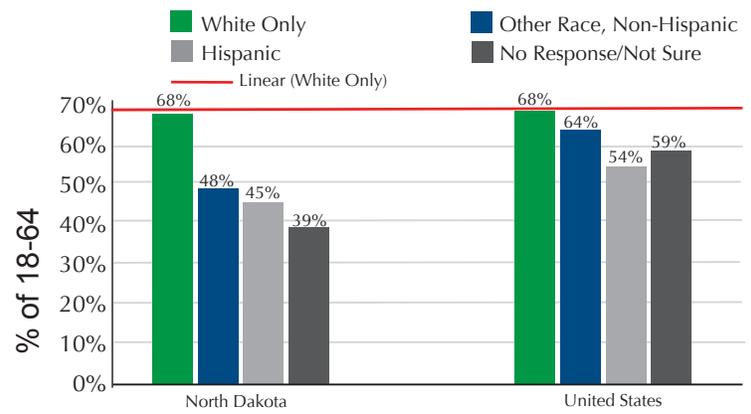
Figure 1. Percentage of 18-64 who Accessed Dental Care in the Past Year



While the percentage of adults visiting a dentist is declining, percentages are consistently worse among minorities, notably in North Dakota. See Figure 2. In 2014, only 48% of "other

race, non-Hispanic" adults had visited a dental provider in the past year. It is likely that the State's larger American Indian population falls within this racial category.

Figure 2. Percentage of 18-64 who Accessed Dental Care in 2014 by Race

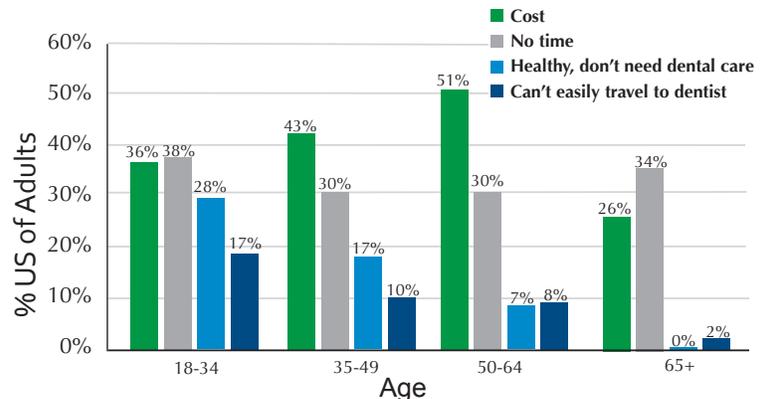


North Dakota reports lower dental visit rates than the U.S. for both Hispanics and other race, non-Hispanics. Among other race, non-Hispanics there is roughly a 20% gap when compared to national utilization.

Barriers to Oral Healthcare Utilization

A serious challenge in providing both restorative and preventive care for adults is finding ways to make dental care affordable. See Figure 3. In 2014, between 36-51% of U.S. adults reported cost as a top reason they would not anticipate a dental visit in the upcoming year.⁶

Figure 3. Reasons Adults are not Anticipating a Dentist Visit in the Next Year⁶



Source: ADA Health Policy Institute analysis of Harris Poll survey data collected April 2014.⁶

For the majority of adults, cost was the leading barrier in utilizing dental care. However, consistently noted as a second factor inhibiting adults from using dental care was one's perception of their oral health. Between 30-38% of adults reported healthy mouths and would not be seeking out dental care in the next 12 months.

Discussion

Both North Dakota and the U.S. have seen a decrease in the utilization of dental care among adults aged 18-64 and those 65 and older. See *Oral Health among North Dakota Elderly fact sheet* at ruralhealth.und.edu/pdf/oral-health-nd-elderly.pdf.

To improve oral health, we must change perceptions regarding oral health and ensure that dental care becomes integrated as an accepted component of general health.⁸

The Surgeon General also specifies that the U.S. must:

- Eliminate barriers inhibiting individuals from dental care.
- Access private/public partnerships to improve dental care access to those suffering disproportionately.
- Provide an infrastructure that facilitates oral health programs.

It is imperative that dental care providers acknowledge the downward trend in the use of oral healthcare. More importantly, to identify those groups who struggle disproportionately to access dental care. North Dakota reports 16% fewer "other race, non-Hispanic" adult dental visits than the U.S. Again, it is likely that the State's larger American Indian population falls within this racial category; where oral health disparities may exist.

Conclusions

In North Dakota the percentage of adults accessing dental care is declining. While there is clear need to provide preventative care and treatment to all ages, there is a demand for a heightened recognition concerning the importance of oral health among the largest age group, adults 18-64.

Successful navigation through the oral health system requires a certain level of health literacy. This literary prerequisite combined with the cost of care, and an inability to recognize oral care as systematic health may be compounding factors contributing to the steady decline in oral health use among adults both in North Dakota and the U.S.

Recommendations

In focusing on systematic changes, future infrastructure must be able to improve oral health literacy among adults. The system should also address various barriers deterring utilization of dental care: cost, time, and travel. It is imperative that this age group recognize the significance of preventive dental care and the potential impact it could have if accepted as a component of systemic health. Finally, dental care providers

must encourage patients to use preventive dental care at all ages in efforts to improve oral healthcare utilization throughout every stage of life.

Data

Data were provided by the Behavioral Risk Factor Surveillance System (2008-2014) provided by the Centers for Disease Control and Prevention and Harris Poll (2014) on behalf of the American Dental Association (ADA) Health Policy Institute (HPI).

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For More Information

Visit the CRH webpage for additional oral health publications and information. ruralhealth.und.edu/what-we-do/oral-health

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