



FDI POLICY STATEMENT

Improving Access to Oral Healthcare

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27–29 September 2021, Sydney, Australia

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2 **CONTEXT**

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4 Despite being largely preventable, oral diseases are highly prevalent conditions,
5 affecting more than 3.5 billion people around the world.¹ Oral diseases have substantial
6 effects and consequences, causing pain and sepsis, reduced quality of life, lost school
7 and work days, family disruption and decreased work productivity. The costs of dental
8 treatment can be considerable for both the individual and the wider healthcare system.²
9 Many factors influence oral health and the prevalence and severity of oral diseases.
10 Access to adequate, quality and affordable oral health services, however, remains a
11 major obstacle in achieving optimal oral health.

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

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

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28 **SCOPE**

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30 This Policy Statement addresses barriers to accessing and utilizing oral health services
31 at personal, community, organization, institution and system levels. It suggests
32 strategies that are evidence-based and community-based, and which integrate oral
33 health into general health and involve all oral health team members and other non-
34 dental personnel. FDI believes that the key test of access is equity. This Policy
35 Statement consequently complements other FDI Policy Statements that are

36 devoted to the subset of populations at risk of unequal access to oral healthcare,
37 such as displaced persons⁶, the underserved and vulnerable⁷, persons with
38 disabilities⁸ and ageing populations.⁹

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41 **DEFINITIONS:**

- 42 1. **Access:** Freedom or ability to obtain or make use of¹⁰
- 43 2. **Accessibility:** The ease with which healthcare can be reached in the face of
44 financial, organizational, cultural, geographical and emotional barriers¹¹
- 45 3. **Utilization:** To make the actual use of a service
- 46 4. **Universal health coverage:** “Ensuring that all people have access to
47 needed health services (including prevention, promotion, treatment,
48 rehabilitation and palliation) of sufficient quality to be effective while also
49 ensuring that the use of these services does not expose the user to financial
50 hardship.”¹²

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53 **PRINCIPLES:** Target 3.8 of the 2030 United Nations Sustainable Development Goal
54 3 (the health goal) aims to “achieve universal health coverage, including financial risk
55 protection, access to quality essential healthcare services and access to safe,
56 effective, quality and affordable essential medicines and vaccines for all.”¹³

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58 **POLICY:**

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60 1. FDI states that:

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

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69 2. FDI supports:

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

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75 3. FDI recommends:

- 76 • empowering patients to utilize oral healthcare by raising awareness, using
77 culturally competent and plain language materials of health literacy for oral
78 health education, coordinating oral healthcare services and eliminating
79 individual and structural barriers to oral healthcare;
- 80 • integration of oral health promotion and educational activities with disease
81 prevention and control related to other NCDs to improve population health and

- 82 reduce health disparities;
- 83 • integration of oral health into health promotion services and activities in all
- 84 types of settings such as schools, nursing homes and end-of-life care facilities;
- 85 • integration of oral health education, screening, prevention and promotion into
- 86 primary healthcare to assure the equitable and holistic provision of oral health
- 87 throughout life;
- 88 • integration of oral health into general health and vice versa in professional
- 89 education, training and research;
- 90 • integration of oral health into the advocacy for legislative action on general
- 91 public health including the legislation on tobacco control, harmful alcohol use,
- 92 added sugar intake and obesity prevention;
- 93 • effective and appropriate use of all members of the dental team, as defined by
- 94 their scope of practice in each country/region for better serving the public;
- 95 • improving patient access to specialist care, when needed, either in the dental
- 96 clinic or hospital setting;
- 97 • collection of data through effective surveillance to support, inform and evaluate
- 98 health policies to improve oral health;
- 99 • expanding the reach of the oral health workforce by innovative methods such
- 100 as teledentistry and mobile dentistry;
- 101 • adoption of the “dental home” concept, namely the ongoing dentist-patient
- 102 relationship with the inclusion of all aspects of oral healthcare being delivered
- 103 continuously in a patient-centred way.¹⁴

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105 4. FDI states that all healthcare professionals (other than members of the dental

106 team) have roles to play in oral health. Improved oral health can be achieved by non-

107 oral health professionals via patient referral for oral healthcare after initial screening,

108 application of topical fluorides, educating patients on tobacco cessation, healthy

109 eating, reduction in sugar intake and harmful alcohol consumption, and effective oral

110 hygiene care.

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112 5. FDI encourages governments to incentivize dentists and other members of the

113 dental team who provide services in underserved areas.

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116 **KEYWORDS**

117 Access to oral healthcare, utilization of oral healthcare, universal health coverage, dental

118 home, prevention

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120 **DISCLAIMER**

121 The information in this Policy Statement was based on the best scientific evidence

122 available at the time. It may be interpreted to reflect prevailing cultural sensitivities

123 and socio-economic constraints.

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