

Health Indicator Profile: Oral Health



Millions of individuals in the United States experience pain and reduced functionality due to oral diseases, with certain conditions being interconnected with other illnesses such as diabetes, heart disease, and stroke. Consistent dental appointments play a pivotal role in averting oral diseases and their associated complications. However, a significant portion of the population has not undergone dental check-ups in the past year. The development of approaches to increase access to dental care is imperative to improve both oral well-being and overall health results.

Findings from the 2022 Santa Barbara County CHNA

Measure

The prevalence of receiving oral healthcare in the past 12 months was measured by asking respondents how long it has been since they last visited a dentist or dental clinic. Those that reported within the past year (anytime less than 12 months ago) were classified as having received recent oral healthcare. The CDC recommends a dental visit at least once every 12 months. Data are compared against the 2030 Healthy People target and the most recent California BRFSS data collected in 2020.

Including all types of dentists, such as orthodontists, oral surgeons, and all other dental specialties, as well as dental hygienists, how long has it been since you last visited a dentist or a dental clinic for any reason?

¹Centers for Disease Control and Prevention. (2018). Well-being concepts. Retrieved from <http://www.cdc.gov/hrqol/wellbeing.htm>

Table 1. Percentage of Adults Reporting Receiving Dental Care in the Past 12 Months

	2019 Santa Barbara CHNA	2022 Santa Barbara CHNA	2020 California BRFSS	2030 Healthy People Target
	% (95% CI)	% (95% CI)	% (95% CI)	%
Overall	68.9 (64.4, 73.3)^	72.1 (68.0, 76.3)^	64.6 (62.7, 66.5)^	45.0*
Male	67.2 (60.9, 73.8)^	71.4 (64.7, 78.2)^	63.4 (60.7, 66.1)^	
Female	70.6 (64.6, 76.7)^	72.7 (67.5, 77.9)^	65.8 (63.0, 68.5)^	
Hispanic	63.7 (56.2, 71.2)^	59.5 (50.6, 68.3)^	56.7 (63.0, 68.5)^	
Non-Hispanic White	72.9 (67.0, 78.7)^	81.2 (77.0, 85.4)^	73.2 (70.7, 75.7)^	
Other	70.8 (55.2, 86.5)^	70.1 (59.0, 81.3)^	65.8 (63.0, 68.5)^	
Age 18-44	65.9 (58.7, 73.0)^	63.3 (55.9, 70.6)^	61.4 (58.6, 64.1)^	
Age 45-64	68.8 (61.6, 76.1)^	72.7 (65.3, 80.2)^	63.6 (60.0, 67.2)^	
Age 65+	78.1 (71.1, 85.0)^	86.3 (81.6, 91.1)^	74.1 (70.3, 77.9)^	
< High School	60.4 (48.3, 72.5)^	54.9 (37.8, 72.1)	49.8 (44.3, 55.2)	
High School Grad	65.3 (55.0, 75.5)^	67.5 (55.1, 79.9)^	62.6 (58.3, 66.9)^	
Some College	69.4 (61.5, 77.3)^	73.9 (66.6, 81.3)^	62.9 (59.2, 66.7)^	
College Grad	75.4 (68.1, 82.6)^	76.5 (71.2, 81.8)^	76.0 (73.7, 78.4)^	
<\$35,000	60.7 (52.7, 68.8)^	57.8 (47.3, 68.3)^	51.4 (47.7, 55.2)^	
\$35,000-\$74,999	61.9 (51.5, 72.2)^	64.8 (55.4, 74.2)^	60.5 (56.0, 65.0)^	
\$75,000 or greater	78.4 (71.3, 85.4)^	80.4 (75.5, 85.2)^	76.0 (73.3, 78.7)^	

^ Significant difference between estimate and Healthy People 2030 target

*Health People 2030 target includes children and adolescents in measure

Health Disparities

In 2022, Santa Barbara County was significantly above the Healthy People 2030 target for receiving oral healthcare at 72.1% versus the target of 45.0%. Santa Barbara County saw a slight increase (3.2%) in those receiving dental care between 2019 and 2022, and in 2022, Santa Barbara County was significantly higher than California overall at 72.1% versus 64.6%. This difference is likely due to significantly higher oral care in Santa Barbara County for non-Hispanic Whites and those age 65+ when compared to their counterparts in California as a whole. Non-Hispanic Whites and those aged 65+ had the highest reported receipt of dental care at 81.2% and 86.3%, respectively. In 2022, significant differences were observed between the youngest age group (63.3%) and oldest age group (86.3%) and between the lowest household income (57.8%) and highest household income (80.4%) as well as between Hispanics (59.5%) vs. non-Hispanic Whites (81.2%). The disparity has widened between Hispanics and non-Hispanic Whites (Figure 2). The groups reporting the lowest receipt of dental care in the past year include those with less than high school education (54.9%) followed by those with income below \$35K (57.8%).

Most impacted demographic subgroups include males, those with household incomes below \$35,000, those with high school education or less, those aged 18-44 years, and Hispanics.

Figure 1. 2022 Percent Reporting Seeing A Dentist In the Past Year

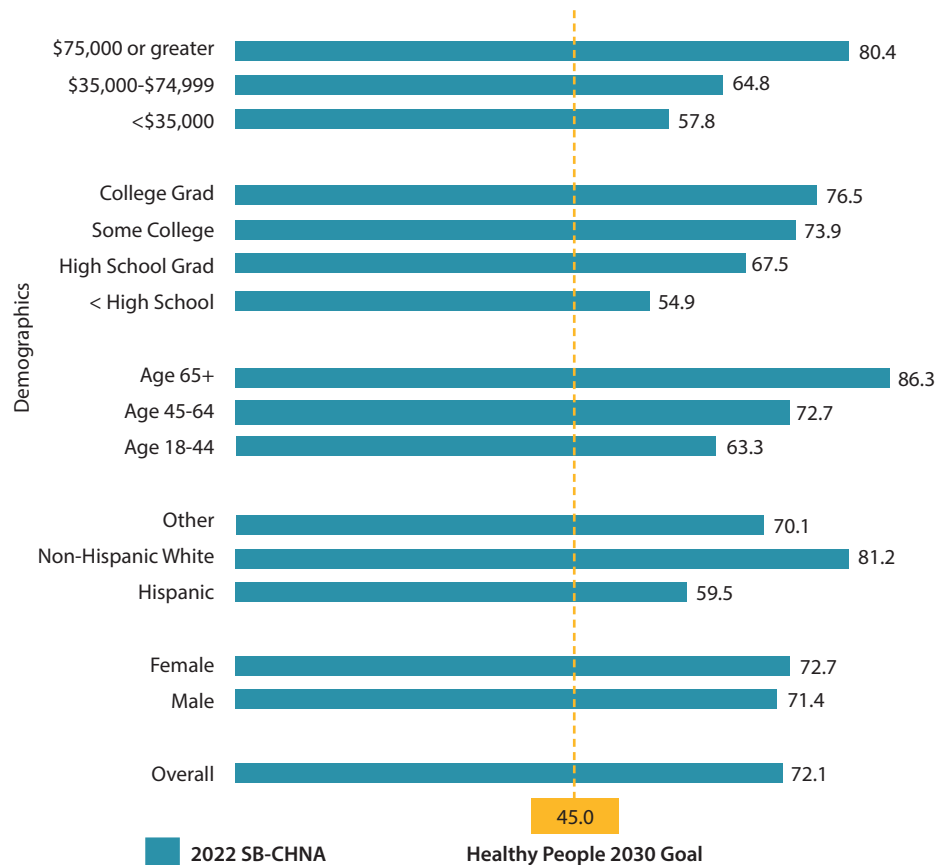
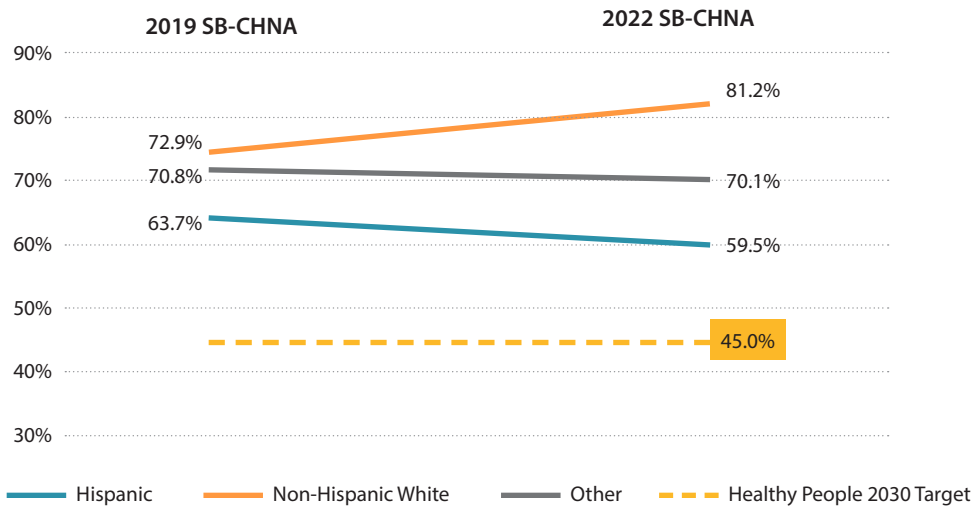


Figure 2. Percentage of Adults Reporting Receiving Dental Care in the Past 12 Months by Race/Ethnicity in 2019, 2022, and 2030 HP Target



Factors and Health Outcomes Associated with Dental Care in the Past 12 Months

Those reporting poor or fair health or having Medicaid were more likely to also report not receiving dental healthcare in the past 12 months. Although both groups were still faring better than the Healthy People target, both groups showed a significant increase in not receiving oral healthcare compared to the county average (Figure 3). While controlling for demographics, the odds of reporting no dental care in the past 12 months were increased threefold when reporting poor or fair health or Medicaid (Table 2).

Figure 3. Adults Reporting No Dental Care in the Past 12 Months by Significant Related Factors

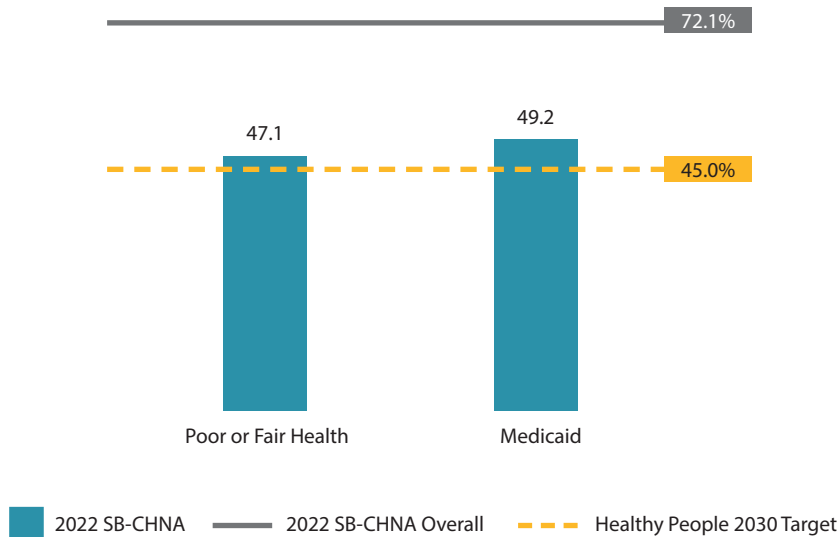


Table 2. Odds Ratio Estimates for No Dental Care by Significant Related Factors

Significant Related Factors	Point Estimate	95% Confidence Limits	
Poor of Fair Health	3.4	1.6	7.4
Medicaid	3.1	1.3	7.5

NOTE: The degrees of freedom in computing the confidence limits is 1400.