



## Opinion



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*Photograph by Michael Browning via Unsplash*

# For oral health, prevention is key

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BY ONDINA LOVE

The statistics are clear: Canadians between the ages of 60 and 79 are 40 per cent less likely to have private dental insurance compared to the general population. As a result, older Canadians tend to be less frequent users of oral care services, with long-term care residents in particular experiencing a high rate of untreated oral disease. These prevent-

able or untreated oral diseases frequently result in more costly emergency procedures.

Canadians are proud of our universal public health care system. However, our system overlooks the contribution of a healthy mouth to the overall well-being of Canadians. Furthermore, our system requires people to have private insurance or to pay out of pocket for oral care. Access to oral care is limited for the most vulnerable Canadians.

It is good that Canadians are living longer than ever before, but that creates new challenges. By 2031, one in four Canadians will be over age 65, with many seniors retaining most, if not all, of their natural teeth. That's almost double the proportion of seniors alive today. As people age, oral health problems, including periodontal disease, decay, and broken teeth often increase. There is increasing evidence to show that poor oral health is associated with functional disability that can lead to deficits and decline.

Working directly with the provinces and territories, the next government needs to develop oral health-care guidelines for long-term care and home-care settings, as well as oral-care supports for low-income seniors. By incentivizing these programs, the next government can improve oral health outcomes and reduce unnecessary pressure being put on the acute care system.

Northern, rural, and remote communities are also underserved. Current programs, like the Non-Insured Health Benefits program, which provides funding for many First Nations and Inuit to travel to urban centres for more costly and invasive treatments, are underfunded.

Rather than continue to disadvantage those living in remote areas, it is vital to move toward more localized care. With the rise of expenditures over the past decade, having oral health care providers in local communities to address preventable conditions is essential. Attract-

ing more health care workers, and dental hygienists in particular, to underserved communities should be a priority for the next government.

Increasing funding for the Children's Oral Health Initiative—early childhood tooth decay prevention programs—and encouraging dental hygienists with student loan forgiveness are smart ways of improving health outcomes for Indigenous Peoples in remote areas. Advancing equitable health outcomes for Indigenous peoples is an important component of reconciliation.

No matter which party wins the election, the next government should not just spend more, but spend more effectively by prioritizing prevention. Preventive oral care means fewer trips to hospitals for urgent and emergency care. It isn't just the right thing to do, it's the smart thing to do.

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