Tribal/Urban Indian Local Dental Pilot Project

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Care Coordination Training: The Determinants of Health
Determinants of Health

- In the U.S. there are dramatic inequalities in health and access to health care.
- Some populations get sick more often and die earlier than others.
- These inequalities do not happen by chance and are not often the result of genetic differences.
- It is not simply the result of poor choices—people do not generally choose to be without the resources to support their health.
- It is more often the result of how our society chooses to allocate basic resources that would allow populations to live healthy lives.
Determinants of Health

- These resources include:

  - Human rights
  - Safety
  - Sufficient and proper nutrition
  - A living wage
  - Economic opportunity
  - Health care
  - Education
Social Determinants of Health
Income and Health

- Lower incomes → more likely to report being in poor health, to have children with asthma, and to report serious psychological distress
- Can lead to fewer choices for good nutrition and physical activity
- “If a poor person is smoking, he or she has a higher rate of disease than if a wealthy person is smoking” (Adelman, 2008, p. 3 of transcript, first episode).
- Higher levels of stress
Inequality and Health

- A growing body of research shows that it’s not just low income that leads to poor health; high levels of inequality itself can lead to worse health outcomes on a population level.

- One possible explanation for this is “status anxiety,” or stress caused by having low status in a hierarchical society.
Stress and Health

- Stress causes physiological reactions in the body that contribute to chronic disease.
- **Toxic stress** can affect the immune system, the cardiovascular system, the body’s use of insulin, and even brain development.
- The effects of toxic stress can persist even when a person changes income levels or social status.
Education and Health

› Generally speaking, those with more education earn more on average and tend to live longer.

› There are great disparities in school spending in the U.S.
  
  › The Center for American Progress reports that “…schools with 90 percent or more students of color spend a full $733 less per student per year than schools with 90 percent or more white students.” (Spatig-Amerikaner, 2012)
Education and Health

- Ways that education can improve health:
  - More health knowledge and health literacy
  - Better pay and more benefits at work
  - Less stressful jobs
    - Benefits such as paid vacation, sick leave, and health insurance make it easier to care for one’s own or family members’ health.
- People with higher levels of education tend to have a higher social status and a greater sense of being able to control or influence what happens to them, which leads to better stress management and healthier behaviors.
Neighborhood Quality

- Access to nutritious and affordable food is often lacking in lower-income neighborhoods.
- However, tobacco and alcohol are heavily marketed in lower-income neighborhoods.
- There may be inadequate access to transportation.
  - May affect the ability to get a good job, education, or reaching the health clinic
  - Violence in neighborhoods discourages people from outdoor activities.
Other Determinants of Health
Genetics and Health

- Some illnesses are caused by specific genetic mutations. (Down syndrome, cystic fibrosis, etc.)

- Some genes give people a weakness or predisposition toward an illness. Not everyone with the gene will have the disease, but they are more likely to develop it.

- Genes interact with the environment, which influences the expression of those genes by exposures to chemicals, stress, or other environmental factors. The behavior of genes can change in reaction to the environment.
Behaviors and Health

- Often presented as the leading cause of illness
  - Sexual behaviors (STIs) or nutrition and physical activity (diabetes and hypertension)
- But health behaviors themselves are strongly influenced by the social determinants of health.
  - Low-income neighborhoods have less green space, fewer parks, less safe streets, more liquor stores, more stores that sell tobacco, fewer places to buy healthy food, etc.
Access to Health Care

- Lack of access means:
  - Missing out on preventive care
  - Inadequate management of chronic conditions
  - Later diagnoses of health conditions
  - And more!

U.S. Health Care Options

Sell your home... or buy the farm

Uninsured
Difference in the Quality of Health Care

- Many doctors and some hospitals do not serve the uninsured or may not accept Medi-Cal.
- Attitudes and assumptions of care providers may influence care recommendations or treatment decisions.
What Does All this Mean?

- During the first part of the 20th century, average life expectancy in the U.S. increased by ~30 years. These gains were not due, as many believe, by new advances in medicine.

- They were due to new social policies that improved working conditions, wages, and increased access to education and civil rights.

- The solution lies in addressing ALL of the determinants of health.

- Our LDPP is addressing several of these.
  - Access to care
  - Health behaviors
  - Stress
Care Coordination Training: Barriers to Care
Barriers to Care

What barriers to care are present for our patients?

• Internal family factors

• External factors
Internal Family Barriers

- Family beliefs, attitudes, and practices—“Baby teeth don’t matter.”
- Child’s temperament—e.g. resistance to tooth brushing
- Low parental health literacy and an inability to fully understand educational materials
- Lack of knowledge about oral health and oral disease prevention
- Lack of family support
- Higher financial priorities than dental care
- Dental anxiety and phobias
- Home oral care activities perceived as time-consuming and low-priority when compared to other responsibilities
Internal Family Barriers

- Language and cultural barriers
- Communication
  - Babies and young children cannot verbalize their distress.
  - Children may be afraid to express feelings out of fear of a dental procedure.
External Factors—Access to Care

- Long wait times
- Distance to dental providers
- Distance to specialist care
  - Crescent City to Santa Rosa 300 miles—5+ hours to drive, or ~8-10 hours by bus
- Lack of dental providers
  - Concentrated in high population areas
  - Dental Health Aide Therapists (DHATs)

- Attitudes of dental providers
  - Low reimbursement rates
  - Cumbersome paperwork
  - High no-show rate
  - Low oral health literacy and compliance with recommendations
External Factors—Access to Care

- Lack of health and dental insurance
- Lack of flexible dental clinic hours; inability to schedule appointments that do not conflict with workplace demands or other parental responsibilities
- Lack of transportation
- The complexity of navigating the health care system
Barriers to Care

- We must distinguish between those families that are not motivated toward positive oral health behaviors and families that are motivated but need support in overcoming barriers.

<table>
<thead>
<tr>
<th>Characteristics of Parents who Choose NOT to Obtain Dental Services for their Children</th>
<th>Characteristics of Parents who Choose to Obtain Dental Services for their Children</th>
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<tbody>
<tr>
<td>Emphasize appearance, self-esteem, and treatment of pain as being more important reasons than health concerns to access dental care</td>
<td>Perceive oral health as associated with overall health</td>
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<tr>
<td>View dental care in emergency rather than preventive terms</td>
<td>Identify preventive dental care as a normal caregiver responsibility</td>
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<tr>
<td></td>
<td>Have a greater knowledge of preventive dental care</td>
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Citations


Citations


Thank You!

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