

Oral Health Policy - Rural and Remote Australia

NOHA is concerned that:

- Children living in remote areas are 1.5 times more likely to be admitted to hospital for tooth decay (AIHW 2014)
- Children from remote areas experience untreated tooth decay at twice the rate of their metropolitan counterparts. (Do and Spencer 2016)
- Adults living outside capital cities have 1.5 times more untreated decay and lose more teeth than adults who live in capital cities. (Spencer et al 2007)
- There is reduced access to optimally fluoridated water in many rural and remote communities. (COAG, 2015)
- There is a maldistribution, and an insufficiency, of dental practitioners working in remote and regional Australia. The prevalence of dental practitioners in our cities is three times greater than in remote Australia. (AIHW 2012)
- Healthy foods, and oral hygiene products, cost more in remote communities. (NT DoH, 2014)

NOHA position:

- All people, no matter where they live, should have optimal access to fluorides.
- Nutritious foods and oral hygiene products should be affordable in rural and remote communities.
- Funding should support coordinated and readily accessible oral health services in rural and remote areas.
- The distribution and numbers of dental practitioners working in rural and remote Australia must be improved to achieve equity in oral health outcomes.

References

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NOHA members

- Australian Council of Social Service
- Australian Dental Association
- Australian Dental & Oral Health Therapists Association
- Australian Dental Prosthetists Association
- Australian Health Care Reform Alliance
- Australian Healthcare and Hospitals Association
- Consumers Health Forum
- Council on the Ageing
- Dental Hygienists' Association of Australia
- National Rural Health Alliance
- Public Health Association of Australia
- Royal Flying Doctors Service