Consumer Survey of Health Care Access: Barriers to Accessing Oral Health Services

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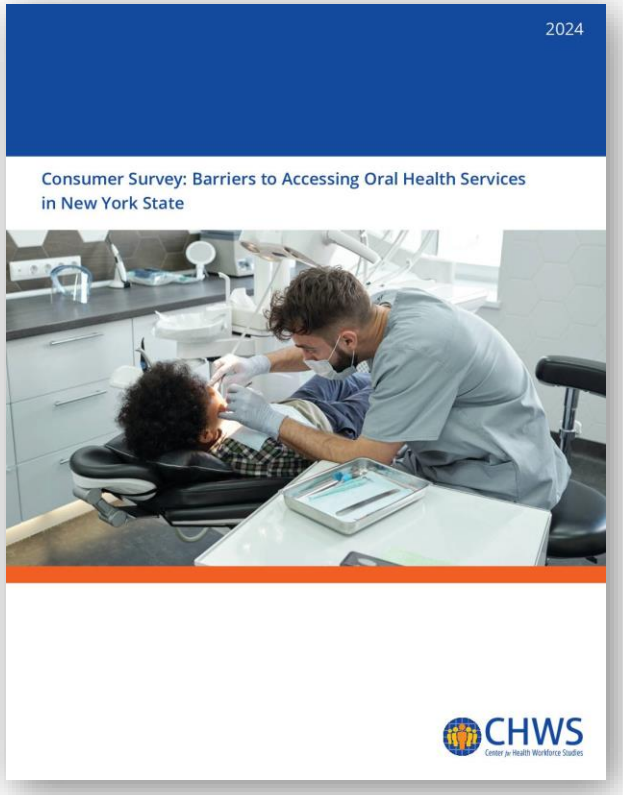
Consumer Survey Findings: Barriers to Accessing Oral Health Services in New York



- **Objectives:**
  - **This study aimed** to assess patterns of oral health service utilization
  - Identify barriers to accessing dental care for adults in New York State
- **Data were obtained** from the 2022 *Consumer Survey of Health Care Access* conducted by the American Association of Medical Colleges (AAMC), using a national panel of approximately 1.8 million adults
- **Descriptive statistical analyses** were performed to assess respondents'
  - Perceived **need** for dental care
  - Their **utilization** of oral health services
  - **Differences** across population groups
  - Access **barriers and facilitating** factors

Surdu S, Sasaki N, Pang J, Moore J. *Consumer Survey Focused on Experiences Accessing Oral Health Services in New York State*. Rensselaer, NY: Center for Health Workforce Studies, University at Albany, College of Integrated Health Sciences; October 2024.

Key Findings

The 2022 Consumer Survey of Health Care Access included 6,501 respondents ages 18 and older from across the US, with **431 from New York**

67.3% of New Yorker responders reported **needing oral health care** in the past year (n=286)

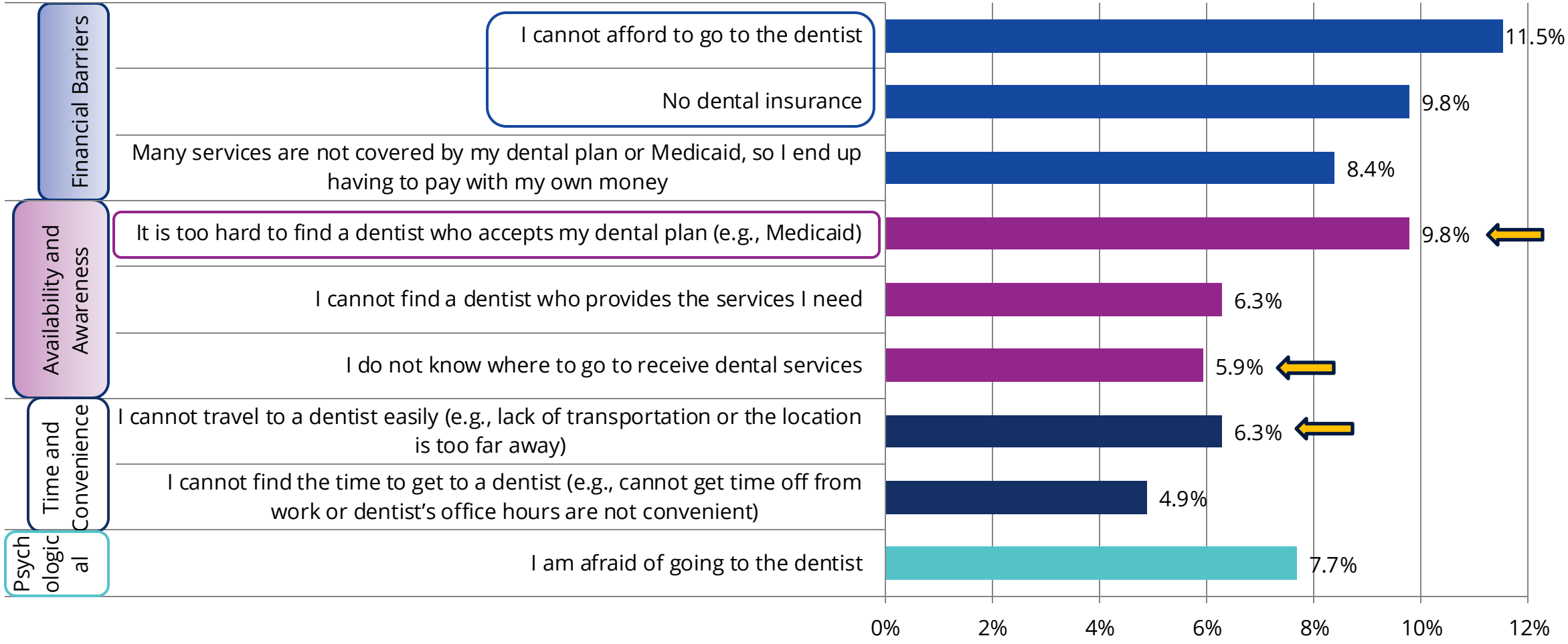
64.8%
always received oral health services they needed in the past year

35.2%
either ***sometimes*** received needed oral health services **(16.7%)** or ***did not*** receive any care **(18.5%)** in the past year

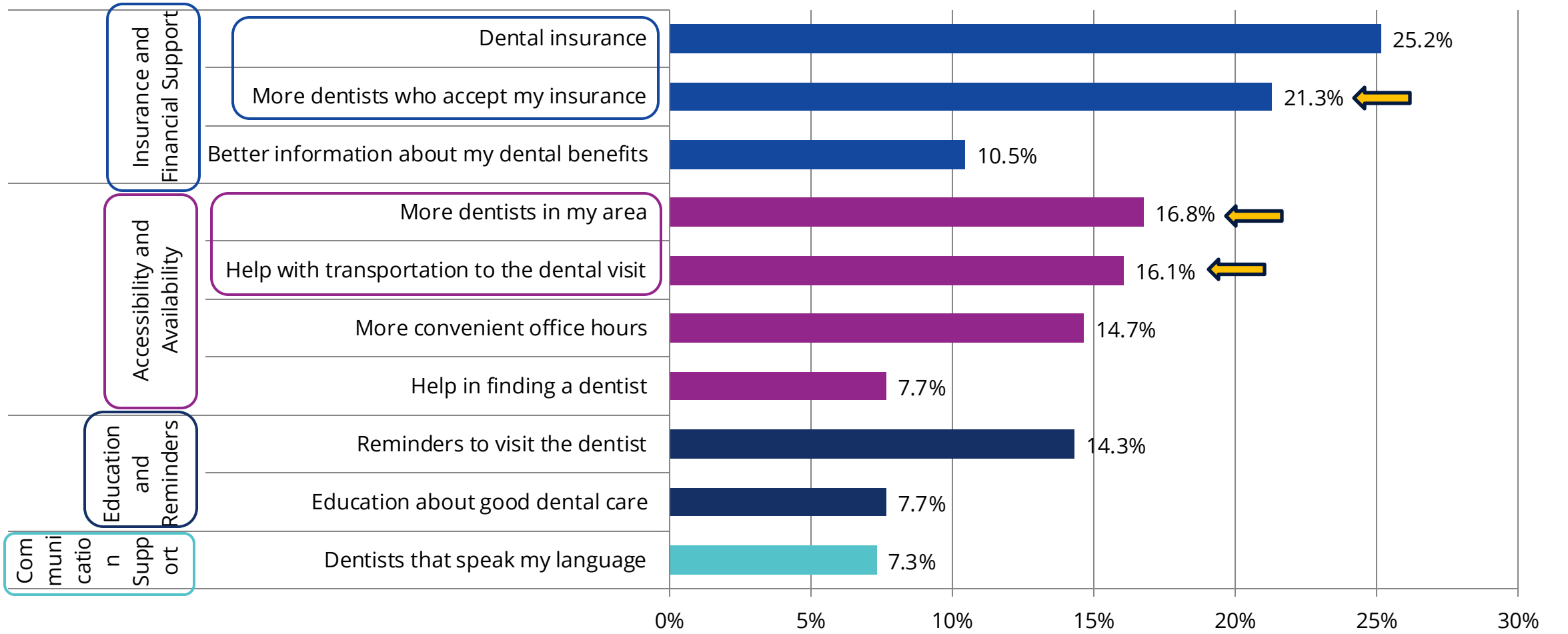
The lowest rates of *always* receiving care when needed were reported by consumers who were:

18-34 years old **(56.8%)**	Hispanic/Latino **(54.0%)**	Black/African American **(33.3%)** ←	Had less than a high school education **(52.7%)**	Had annual household incomes under $50,000 **(51.7%)**

43% of New Yorkers Reported Access Barriers (n=124)



71% of New Yorkers Identified Factors That Would Help Them Visit a Dentist Regularly (n=202)



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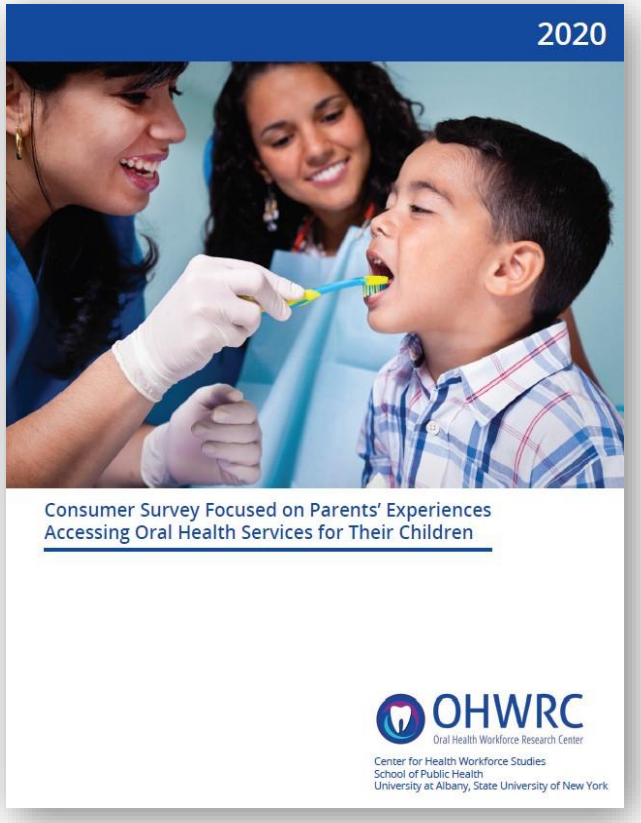
Conclusions

- **Race and ethnic minorities, individuals with less education, and those with lower incomes** had **the lowest rates of dental care**
    - **Major access barriers**—including financial constraints, lack of dental insurance, and difficulties finding providers who accept Medicaid or offer the needed services—continue to impact New York residents
- **To reduce oral health disparities**, it's essential to **increase** the availability of dental providers in underserved areas and **improve** public awareness of available services
    - Additionally, **addressing** transportation challenges could help alleviate some access barriers

Parents' Experiences Accessing Oral Health Services for Their Children



Objectives: To evaluate **barriers to oral health care services for children** using the 2019 Consumer Survey of Health Care Access

Key findings:

- Nationwide, 9% of children only *sometimes* received care or *did not receive any* dental care in the past year
- Nearly 1 in 4 children experienced one or more barriers to dental care
- Barriers to services utilization included dentists' limited participation in public insurance programs, dental practice hours, and distance to providers
- These findings underscore the need for policy solutions like school-based dental programs and initiatives to improve oral health literacy among parents

Zhao Y, Surdu S, Langelier M. Parental Perspectives on Barriers to Pediatric Oral Health Care: Associations with Children's and Families' Characteristics. *Pediatric Dentistry*. 2023;45(1):24-35. PMID: 36879369

Parental Oral Health Literacy

Oral Health Knowledge Statements	Correct Answer	Incorrect Answer	Don't Know
There is a strong relationship between what children eat and their dental health *[true]*	69.6%	13.1%	17.3%
Thumb sucking can cause problems with the development of a child's teeth and jaws *[true]*	69.0%	14.9%	16.1%
Oral health does not affect overall health *[false]*	68.5%	18.7%	12.8%
If a child has been sick, you should replace the child's toothbrush once the child is well *[true]*	63.7%	12.6%	23.7%
Giving a young child fruit juice in a bottle at bedtime or naptime cannot cause tooth decay *[false]*	59.6%	25.7%	14.7%
Cavities are nearly 100% preventable *[true]*	57.6%	17.6%	24.9%
A child should go to the dentist by age 1 or within 6 months after the first tooth erupts [true]	**53.7%**	16.1%	30.2%
It is not important to clean a baby's gums with a soft cloth even before the baby's teeth surface *[false]*	47.8%	30.9%	21.3%
Giving a young child milk in a bottle at bedtime or naptime cannot cause tooth decay *[false]*	46.8%	30.5%	22.8%
Dental disease cannot be passed from a caregiver to a baby by sharing utensils *[false]*	30.7%	35.3%	34.0%

Over a quarter (26.6%) of parents correctly answered *fewer* than half of the questions about children's oral health

- Only about half (53.7%) of parents knew that children should visit a dentist within 6 months of the 1st tooth eruption
- Improving oral health literacy is essential for early prevention and long-term outcomes

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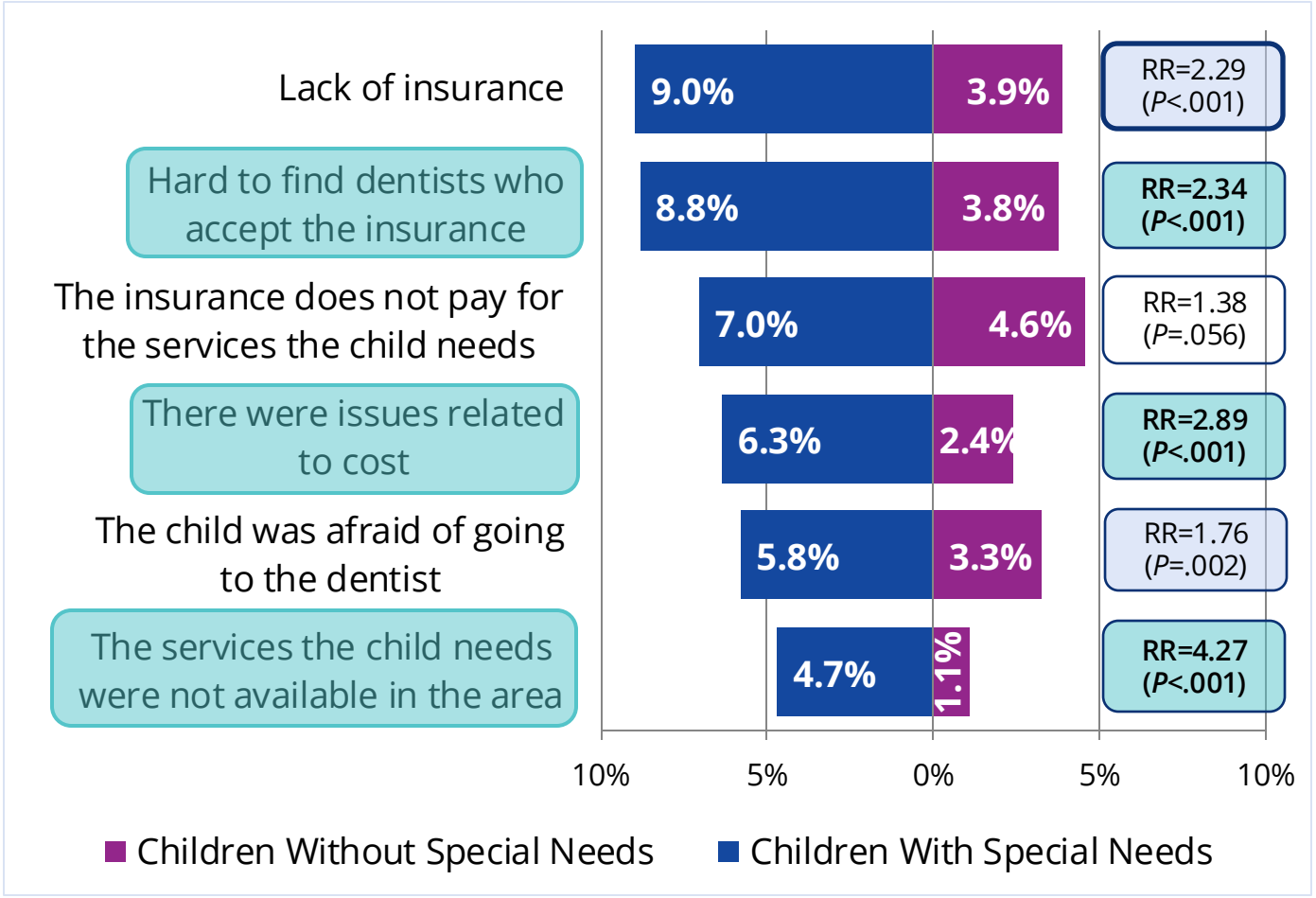
A Comparison of Parental Perceived Barriers for Children With and Without Special Needs



- **About 26% of children** in the consumer survey had a special need as reported by their parents
- *Children with special needs* were **disproportionally more likely** to experience (1) unavailability of services in their area, (2) cost issues, and (3) difficulty finding dentists who accepted their insurance
- These disparities suggest that children with special needs require targeted support to ensure equitable access to oral health services

Definition of a special need included a diagnosed *emotional*, *developmental*, or *behavioral health* condition requiring treatment or counseling.

Recently Completed OHWRC Research

Journal Articles:

- Key factors associated with oral health services at Federally Qualified Health Centers (*J Public Health Dent, 2025)*
- Utilization of Oral Health Services among Pregnant Women and Associations with Gestational Diabetes and Hypertensive Disorders of Pregnancy: Insights from the 2016–2020 Pregnancy Risk Assessment Monitoring System (PRAMS) (*JADA,* 2025)
- Workplace factors associated with job satisfaction among dental hygienists and assistants in the United States (*Heath Aff Sch*, 2025)
- Safety Net Patients' Satisfaction with Oral Health Services by Provider Type and Intent to Return for More Care *(J Public Health Dent,* 2024)
- The Impact of Pandemic Concerns on Consumers' Teledentistry Use During the First Months of the COVID-19 Pandemic (*Public Health Rep*, 2023)
- A Longitudinal Cohort Study of Opioid Prescriptions Associated with Non-Surgical Dental Visits Among Oregon and New York State Medicaid Beneficiaries (2014-2016) (*JADA*,2022)

Technical Reports:

- Consumer Survey: Barriers to Accessing Oral Health Services in New York State (2024)
- Oral Health Needs Assessment for New York State, 2024 (2024)
- Identifying Strategies to Improve Oral Health Workforce Resilience (2023)
- Teledentistry Adoption and Use During the COVID-19 Pandemic (2023)
- COVID-19 Impact on Dental Service Delivery, Financing, Regulation, and Education Systems: An Environmental Scan (2023)
- Implications of COVID-19 on Safety-net Oral Health Services (2023)
- Teledentistry Trends in the United States During the COVID-19 Pandemic (2022)
- Provider and Patient Satisfaction With the Dental Therapy Workforce at Apple Tree Dental (2022)
- Assessing the Characteristics of New York State Dentists Serving Medicaid Beneficiaries (2022)
- A Comparison of Opioid Prescribing Patterns by Dentists in New York and Oregon, 2014-2016 (2021)

Questions?

For more information, please email me at: ssurdu@albany.edu

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