The National Coalition of Dentists for Health Equity (NCDHE)

Position Statement for Social and Racial Justice in Oral Health

(Approved February 26, 2021)

In his March 1966 presentation to the Committee on Human Rights Dr. Martin Luther King made the following statement: “Of all forms of inequality, injustice in health care is the most shocking and inhumane.” It is that sentiment and spirit that guides the National Coalition of Dentists for Health Equity.

The National Coalition of Dentists for Health Equity (NCDHE) is focused on advocacy and action to promote and assure oral health equity for all. This is a critical objective to achieve if the dental profession is to stand tall among the health professions. To this point, the dental care system has fallen short in sufficiently addressing oral health inequities. Further, it has not yet made the necessary advances to orient itself toward oral health equity.

The essence of the problem can be presented in a simple statement: Populations most in need of dental care receive the least. Conversely, those populations least in need of dental care receive the most. Any discussion of this inequity raises “ifs, ands, buts, and rationalizations” defending and explaining why this inequity prevails. However, these discussions have failed to result in significant improvement.

The moral and ethical disregard is also apparent in the fact that the disadvantaged populations are not randomly distributed cohorts. Data and numerous publications make this clear. The populations disproportionately affected by barriers to good oral health include, but are not limited to the following: people living in rural or frontier settings; people enrolled in Medicaid; those with low incomes; older adults; people in nursing homes and other custodial settings; people of color; tribal communities; those for whom English is not their primary language; people with disabilities or chronic health conditions; and people with debilitating mental and general health conditions. These groups have disproportionate access to the dental care system. Consequently, they experience more oral disease and pain, and too often seek relief in hospital emergency rooms.

Oral health goes beyond teeth and supporting anatomical structures; it is also a determining factor in a host of life functions. Oral health affects the ability to eat and drink, diet and nutrition, self-confidence, and social function, as well as employability, promotability and earning potential. People who disproportionately experience oral health inequities carry the disadvantages in these life functions.

Recent publications also demonstrate associations between poor oral health and multiple chronic and systemic health issues. These connections indicate a need to consider oral health in primary medical care. They point to major deficiencies in today’s health system, where oral health is often ignored.
NCDHE will assume leadership in advancing oral health equity, access to quality dental care, and social justice in multiple ways, including:

- Increasing the number of dentists who recognize a social and moral obligation to serve the public through their state Medicaid program.
- Serving as a bridge for the dental profession to collaborate with other national organizations focused on health equity, access to care, and social justice.
- Identifying any form of conscious or subconscious bias and discrimination affecting the public’s oral health and the provision and utilization of dental care.
- Promote state and federal policies that expand access for underserved communities.

The essential structure of dental care delivery has not met the full needs of the community. However, effective solutions exist that can help the oral health system eliminate inequity and ensure all people get the support they need to be healthy. With targeted changes, our oral health system can meet the needs of both consumers and dental care providers.

The National Coalition of Dentists for Health Equity is devoted to being a strident voice and presence to address these critical issues through advocacy and action. If not the NCDHE, then who or what entity will provide the necessary leadership? If not now, and in this moment, then when will progress happen? NCDHE is prepared to provide the leadership to achieve oral health equity, access to oral health care, and social justice for all. We invite other organizations to partner with us in this effort.

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