



Attitudes and Access Patterns of Michigan Veterans Not Eligible for VA Oral Healthcare: A Cross-Sectional

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ABSTRACT

Problem: One dental visit annually is a key oral health objective of Healthy People 2020 to reduce oral health disparities. The veteran population is at increased risk of oral health disparities due to chronic health conditions, mental health disorders, unique social/cultural contexts, and significant socioeconomic challenges. While veterans qualify for health care through the Veteran Affairs (VA) system, oral health care is not included, leaving millions of socioeconomically challenged veterans without access to oral health care. **Objectives:** The purpose of this study was to assess Michigan veteran's attitudes toward oral health care, access to oral health care services, and how they pay for those services. **Methodology:** A 24 question survey was developed and pilot tested. A paper survey was disseminated to a convenience sample of 300 veterans from Michigan affiliated with various veteran organizations including VFW and American Legion Posts, and student veteran organizations. Frequency distributions, means, and standard deviations were analyzed to provide an overview of the data. The Pearson chi-square test was used to investigate the association of having a service connected disability and VA medical and oral health care, dental benefits, and challenges of receiving oral health care. Significance was set at p<0.05. **Results:** A total of 192 surveys were completed by veterans for a response rate of 64%. Forty-five percent of respondents reported a service-connected disability qualifying them for VA health care. While 77% reported not being eligible for VA dental care, respondents rated the importance of dental health as extremely important (4.56, ±806). One-third of respondents reported not having a dental home, with 35% reporting no dental care in the last 12 months. More than half of respondents reported cost as the greatest challenge to accessing care. Pearson chi-square test found statistical significance of a service-related disability and receiving medical care at the VA hospital (p=.000), qualifying for dental care at the VA hospital (p=.006), receiving dental care at the VA hospital (p=.006) and having dental insurance benefits (p=.032). **Conclusion:** Veterans in Michigan value the importance of oral health care, yet are subject to disparities in access to care. Cost, ineligibility for VA oral health care, and lack of dental insurance are the greatest barriers to veterans accessing oral health care. Further studies should focus on the unique cultural and social contexts of veterans that impact oral health disparities in the veteran population.

BACKGROUND

- The oral health objectives of Healthy People 2020 have identified having visited a dentist in the previous 12 months as the leading oral health indicator.
- There are approximately 23 million veterans living in the U.S., making up nearly 7% of the total population.
- Veteran Affairs (VA) serves as somewhat of a safety net, almost two million veterans do not have medical insurance, and the majority of veterans do not utilize medical services through the VA. This implies that these veterans are therefore far more likely to not have access to regular oral healthcare.
- In recent years, the State of Michigan has been ranked last nationally regarding VA healthcare provided to veteran residents. This implies that Michigan veterans are more likely to have oral healthcare disparities when compared to veterans nationwide.

PURPOSE

- The purpose of this study was to assess Michigan veteran's attitudes toward oral health care, access to oral health care services, and how they pay for those services.
- This study supports the American Dental Hygienists' Association National Dental Hygiene Research Agenda area of research (a), access to care and the phase of research (b), discovery.

METHODS

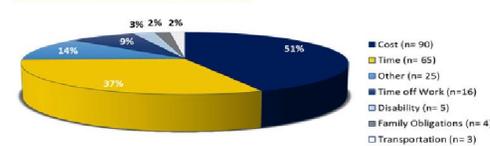
- The University of Michigan (U-M) Institutional Review Board approved this study as exempt from oversight (HUM00127688).
- A convenience sample of (n=300) veterans from Michigan affiliated with VFW Posts, American Legion Posts, Team Red White and Blue (RWB), the Patriot Guard Riders, and student veterans at Ferris State University (FSU) participated in this study.
- A 24 question survey was developed and pilot tested. Paper surveys were disseminated with a cover letter explaining the purpose of the study, and also served as an informed consent.

RESULTS

Table 1. Demographics

Category	n (%)
Years Served	
4-10 years	85 (43%)
Less than 4 years	74 (38%)
20+ years	21 (11%)
10-20 years	17 (8%)
Age	
65 years +	100 (51%)
46-64 years	40 (20%)
31-45 years	33 (17%)
18-30 years	25 (12%)
Sex	
Male	182 (91%)
Female	18 (9%)
Service Related Disability	
No	108 (55%)
Yes	87 (45%)
Eligible for VA medical care	
Yes	101 (52%)
No	95 (48%)
Eligible for VA dental care	
No	151 (77%)
Yes	44 (23%)
Insurance Benefits	
Yes	118 (59%)
No	82 (41%)
Insurance Benefits Received	
Private dental insurance	49 (38%)
Delta dental retiree	36 (28%)
None of the above	28 (22%)
Medicare	8 (6%)
Medicaid	6 (5%)
VADIP	1 (1%)

Figure 1. Challenges to Receive Dental Care



Cost (n=90) = 51%
 Time (n=65) = 37%
 Other (n=25) = 14%
 Time off Work (n=16) = 9%
 Disability (n=5) = 2%
 Family Obligations (n=4) = 2%
 Transportation (n=3) = 2%

Table 2. Perceptions of the Importance of Oral Health and Self Oral Health Status

Importance of Dental Health	n (%)
Very important	138 (69%)
Somewhat important	46 (23%)
Neutral	10 (5%)
Not important	4 (2%)
Slightly important	2 (1%)
Rating of Dental Health	
Very good	71 (36%)
Good	43 (22%)
Excellent	39 (19%)
Fair	34 (17%)
Poor	12 (6%)

Short scale rating: 1=very important, 2=somewhat important, 3=neutral, 4=not important, and 5=slightly important
 Short scale rating: 1=poor, 2=fair, 3=good, 4=very good, and 5=excellent.

Table 3. Respondents Self-Reported Access to Dental Care

Last dental appointment	n (%)
3-6 months	127 (64%)
1-3 years	38 (19%)
3+ years	26 (13%)
Cannot remember	9 (3%)
Routine Dental Care	
Yes	133 (67%)
No	66 (33%)
Type of Dental Appointment	
Prevention	134 (67%)
Treatment	52 (26%)
Emergency	17 (8%)
Prosthetic issue	15 (7%)
Other	11 (5%)

Prevention (tooth cleaning)
 Treatment (filling, crown/cap, root canal)
 Emergency (pain, infection, tooth, swelling)
 Problem with denture or partial (false teeth)
 Other
 *Respondents checked all that applied

DISCUSSION

- The veteran population is at higher risk for oral health disparities.
- For the veteran population, determinants of oral health are complicated by additional cofactors such as (a) higher rates of mental health disorders, (b) lower education, (c) higher unemployment and homelessness, and (d) military/veteran culture which significantly impact access to care.
- Approximately a quarter of all veterans utilize the VA for healthcare, but due to strict VA Dental Services regulations, very few are able to access oral healthcare through the VA.
- Due to stigma within the veteran culture, literature indicates that veterans may be reluctant to report service connected disabilities, and that non-reported service connected disabilities are more prevalent among uninsured veterans. This is significant considering the majority of those who self-reported a service-connected disability rating in the study did not qualify for VA oral healthcare. This reluctance to self-report may inhibit some veterans' access to VA Dental Services.
- Cost was identified as the greatest barrier for oral healthcare. Despite 59% of the respondents reported as having dental benefits, cost was still the most significant barrier reported.
- Nearly a quarter of the veteran participants reported having a toothache within the last year. Of those, only 55% reported seeing a dentist for care, while half reported self-medicating with OTC or prescription drugs (including RX drugs not prescribed to them).
- Limitations include respondents were members of veteran organizations and may not accurately represent all Michigan veteran residents. The survey did not address gross household income or identify if received dental benefits were from a spouse or parent

CONCLUSION

Veterans in Michigan value the importance of oral health. There is an association of a service-connected disability rating and obtaining VA medical care, qualifying and obtaining VA oral healthcare, and having dental insurance. Cost, ineligibility for VA oral healthcare, and lack of dental insurance are the greatest barriers to veterans accessing oral health care. Further studies are needed to focus on the impact of cultural and social contexts of veterans' as it relates to their access to oral health care.

REFERENCES

- Healthy People 2020 [Internet]. Rockville (MD): Office of Disease Prevention and Health Promotion; c2014; updated 2018. Topics and objectives-oral [cited 2018 Feb 1]. Available from: <https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health>
- Hyman JJ, Reid BC, Mongeau SW, et al. The military oral health care system as a model for eliminating disparities in oral health. J Am Dent Assoc. 2006 Mar;137(3):372-8.
- US Department of Veterans Affairs. Profile of veterans: 2014 data from the American community survey. U.S. Department of Veterans Affairs; 2016. 20 p.
- Haley J, Kenney GM. Uninsured veterans and family members: who are they and where do they live? Rep from Urban Inst. 2012;May (May):1-16.