BEYOND BRUSHING
THE IMPACT OF RACISM ON ORAL HEALTH IN COLORADO

US institutions have a long history of segregating communities of color, concentrating resources in white communities, and designing systems that benefit white people. This leads to preventable differences in the health of our mouths, teeth, and gums, which are closely connected to our overall health.

WHAT IMPACTS ORAL HEALTH?
Genetics and behaviors have less of an impact on health than social determinants, which are largely out of our control.

Social Determinants of Access to Care, such as dental insurance or transportation to a clinic, impact our ability to get dental care.

Social Determinants of Health, such as proximity to grocery stores, impact our ability to make healthy life choices.

Social Determinants of Equity are underlying social, political, and economic forces, such as racism, that shape our world.

Examples of SOCIAL DETERMINANTS OF ACCESS TO CARE

Coloradans with dental insurance and local dental care have better oral health. However, communities of color have less access to both, due to the unjust distribution of health care resources.

INSURANCE
- Have dental insurance: 71% of whites, 67% of Hispanic
- Had a dental visit last year: 76% of insured, 45% of uninsured

ACCESS TO CARE
- Nearly all communities that are more than 40% people of color also have too few dentists for the population

Examples of SOCIAL DETERMINANTS OF HEALTH

Coloradans with access to healthy food and water have better oral health. However, communities of color have less access to both, due to centuries of discriminatory policies that disadvantage people of color.

FOOD SECURITY & ACCESS
- 17% of white children in Colorado don’t have enough food
- 37% of children of color in Colorado don’t have enough food

WATER FLUORIDATION
Fluoridated water prevents 25% of cavities and Colorado communities that have it save $149 million each year in health care costs.

...but only 75% of Coloradans have fluoridated water

Examples of SOCIAL DETERMINANTS OF EQUITY

Both the subtle and explicit ways racism shows up in our systems and institutions have negative impacts on oral health. Communities of color experience the repercussions in their health care and daily lives.

DIVERSITY
- 30% of Coloradans are people of color

CARE BIAS
Studies show that most health care providers, including dentists, have implicit bias against people of color. Implicit bias affects patient-provider interaction, treatment decisions, and health outcomes.

TOXIC STRESS
Toxic stressors, such as racism and violence, seriously impact health, including oral health.

- 22% of blacks
- 3% of whites

have avoided medical care in the US out of concerns about racial discrimination

The opportunity to live a healthy life should be a matter of fact, not a matter of privilege. Because when our neighbors are healthy, our communities prosper, and Colorado is stronger.
ACCESS TO CARE
WHAT CAN WE DO?
Increase enrollment in dental insurance. Fund outreach for public and private dental plans.
Recruit dental providers and add services to areas that need them. Increase incentives and train local community members.
Integrate oral and medical health care. Train primary care providers on basic oral health care. Include oral health in primary care visits.
Provide interpretation for local languages. Hire multilingual staff and translate printed materials.
Change policies. Provide paid health leave. Change transit routes to pass near dental clinics. Open on evenings and weekends.

HEALTH
WHAT CAN WE DO?
Get more Coloradans access to healthy food. Use local institutions in communities of color—libraries, schools—to identify and enroll families in food assistance.
Redesign food systems. Invest in local agriculture. Explore co-ops and other new models to locate grocery stores in food deserts.
Increase economic opportunity in communities of color. Increase the minimum wage. Expand job training programs. Strengthen the Earned Income Tax Credit.
Fluoridate more water systems. Water fluoridation protects teeth and every $1 invested saves $43 in health care costs.

EQUITY
WHAT CAN WE DO?
Train and recruit more dental providers of color. Dental training programs can diversify through targeted recruitment, mentoring, and institutional change.
Understand and interrupt implicit bias. Ongoing training should be included in every organization’s work plan, for every employee.
Be culturally responsive. Ongoing training should be included in all dental education and continuing education programs.
Build trust. Health care systems throughout history have used and harmed people of color. Invite community members to share experiences and ways to heal.

DENTAL INSURANCE & VISITS
Whether or not someone has dental insurance has a substantial effect on decisions to seek regular dental care.
Source: Colorado Health Institute
Data: Colorado Health Access Survey, 2017

POPULATION ESTIMATES
The state demography office estimates population by a variety of factors.
Source: Colorado Department of Local Affairs
Data: Race estimates by county, 2017

DENTAL PROFESSIONAL SHORTAGES
Shortage areas are those with too few dentists to meet community needs.
Source: Colorado Department of Public Health & Environment
Data: Dental Health Professional Shortage Areas, 2015

CHILDREN’S FOOD SECURITY
Families that rely on only a few kinds of low-cost food are food insecure.
Source: Colorado Department of Public Health & Environment
Data: Colorado Child Health Survey, 2015-2017

ACCESS TO HEALTHY FOODS
Coloradans who are low-income and do not live close to a grocery store may struggle to access healthy food.
Source: County Health Rankings
Data: USDA Food Environment Atlas, 2015

WATER FLUORIDATION
Water fluoridation is safe and effective but only available to some communities.
Source: Colorado Department of Public Health & Environment
Data: Various studies, 2000 (health), 2005 (savings), 2018 (water status)

WORKFORCE DIVERSITY
The health care workforce should have similar demographics to the community.
Source: Colorado Department of Public Health & Environment, Primary Care Office
Data: Dental workforce data, 2018

(NATIONAL) IMPLICIT BIAS
Implicit bias is the stereotypes or attitudes that unconsciously affect our understanding and decisions.
Source: American Journal of Public Health
Data: Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes, 2015

(NATIONAL) TOXIC STRESS & RACISM
Toxic stressors are experiences such as violence or trauma that have long-term health impacts.
Source: Harvard School of Public Health
Data: Discrimination in America, 2017

At Center for Health Progress, we believe our health care system should work for all Coloradans. So, we bring people together, to ensure factors like race, income, and ZIP Code don’t determine a person’s access to care and opportunity to live a healthy life. When we uncover commonsense solutions to these complex challenges, we get closer to ensuring our health care system works for everyone. Because when our neighbors are healthy, our communities prosper, and Colorado is stronger.

Quisiera esta información en español? Comunicarse con nosostros al weare@centerforhealthprogress.org