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AIHW Dental Statistics
 and Research Unit
 Research Report No. 26

**Access to dental services
 among Australian children
 and adults**



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This report provides information on the use of dental services among Australian children and adults in 2002. Data on dental visiting patterns, location of dental visit, dental treatment received and affordability of dental care are presented. Variations in the use of these services among states and territories are provided.

Data collection

Data presented in this publication were sourced from the National Dental Telephone Interview Survey 2002. A total sample of 7,294 residents participated in the survey including 597 children aged 5-11 years, 510 children aged 12-17 years and 6,187 adults aged 18 years and over. Sample sizes varied among states and territories, with approximately 1,200 participants in each of New South Wales (NSW), Victoria (Vic), Queensland (Qld), South Australia (SA) and Western Australia (WA); approximately 450 participants in Tasmania (Tas); and approximately 400 participants in the Northern Territory (NT) and the Australian Capital Territory (ACT).

Data were weighted to represent the age and sex distribution of the Australian population at the time of the survey. Data have been suppressed in some tables due to insufficient sample size (indicated by n/a). Inferential statistics relating to data presented in this publication are available on request. Where attention is drawn to differences, the results are statistically significant at the 5 per cent level.

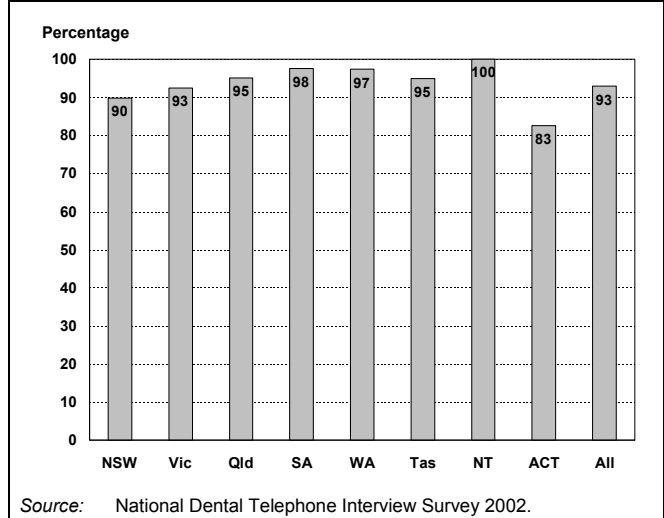
Time since last dental visit

Children

Regular visits to the dentist can help prevent or control dental disease. The percentage of children aged 5-11 years who had visited the dentist within the previous two years is presented in Figure 1.

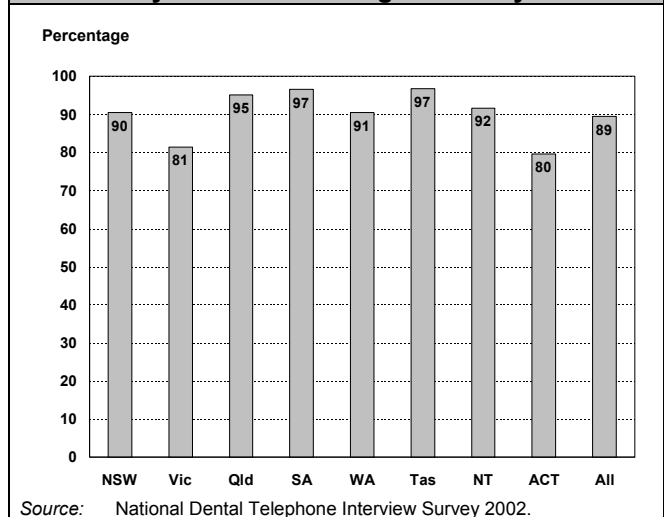
Over 90% of children aged 5-11 years had visited a dentist within the previous two years in every state/territory except ACT (83%). Approximately 13% of ACT children aged 5-11 years had never visited a dentist. Variations at the state/territory level, however, were not significant.

Figure 1: Visited dentist within previous two years – children aged 5-11 years



Among children aged 12-17 years, over 90% had visited the dentist within the previous two years in every state/territory except Vic (81%) and ACT (80%). Variations at the state/territory level, however, were not significant.

Figure 2: Visited dentist within previous two years – children aged 12-17 years



Adults

Nearly three in four (73%) Australian adults had visited the dentist within the previous two years (Table 1). There was significant variation among states/territories, with adults living in the ACT (81%) most likely to have recently visited and NT (66%) and Tas (63%) adults least likely.

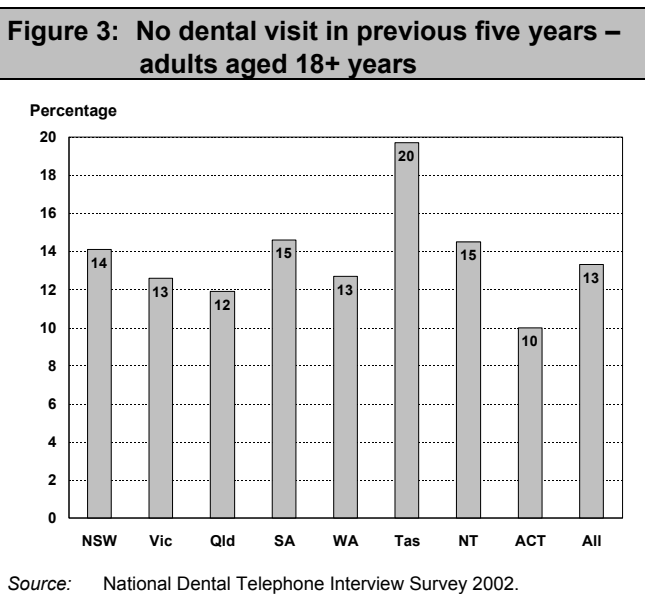
Adults aged 65 years and over were less likely to have visited within the previous two years (60%) than other adults (75-76%). This trend was particularly evident in NSW, Vic and SA.

Table 1: Visited dentist within previous two years – adults aged 18+ years (%)

	18-24 years	25-44 years	45-64 years	65+ years	Total
NSW	82	75	76	60	74
Vic	81	77	73	57	73
Qld	69	75	80	62	74
SA	78	71	78	58	71
WA	57	74	77	67	72
Tas	n/a	63	71	55	63
NT	72	61	75	n/a	66
ACT	89	76	82	83	81
All	76	75	76	60	73

Source: National Dental Telephone Interview Survey 2002.

The percentage of adults who had not made a dental visit within the previous five years is presented in Figure 3.

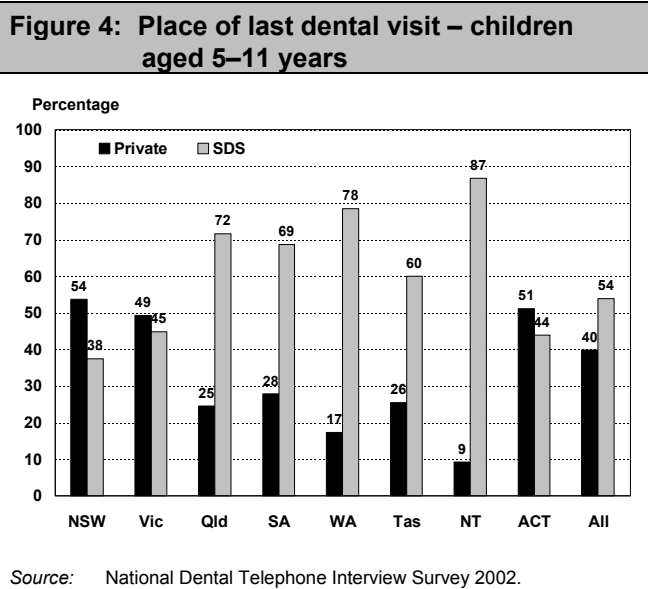


Approximately 13% of Australian adults had not made a dental visit within the previous five years. There was significant variation among states/territories, with 20% of Tas adults not visiting within the previous five years compared with only 10% of ACT adults.

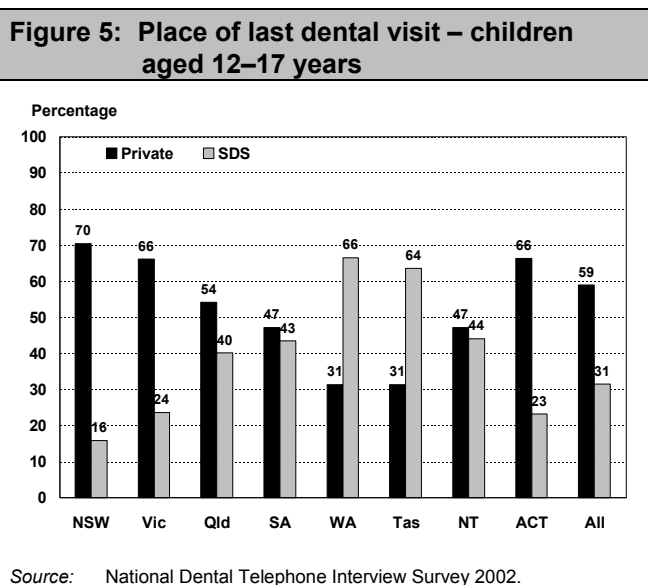
Place of last dental visit

Children

Since 1975 the School Dental Service (SDS) has provided free or subsidised dental care for children of primary school age and varying grades of secondary school age. Due to different eligibility criteria and resourcing, the proportions of children enrolled in this service vary significantly among states and territories.



Use of the SDS by children aged 5-11 years varied significantly among states/territories (Figure 4). Children from NT (87%), WA (78%) and Qld (72%) were more likely to have attended the SDS at their last dental visit than NSW (38%) and Vic (45%) children. Use of the SDS was also low in ACT (44%), where one in two children aged 5-11 years attended a private clinic at their last visit.



Just over three in ten (31%) Australian children aged 12–17 years attended the SDS at their last dental visit (Figure 5). There was significant variation among states/territories, with utilisation of the SDS highest in WA (66%) and Tas (64%) and lowest in NSW (16%), Vic (24%) and ACT (23%). The majority of adolescents in NSW, Vic and ACT attended a private clinic. Adolescents (31%) were less likely to use the SDS than children of primary school age (54%).

Adults

Most Australian adults (84%) attended a private clinic at their last dental visit (Table 2). Use of private clinics varied significantly among states/territories, being highest in ACT (90%) and NSW (89%) and lowest in Tas (74%) and NT (76%).

Adults aged 25–64 years were more likely to have attended a private clinic at their last dental visit than adults in the youngest (18–24 years) and oldest (65+ years) age groups.

Table 2: Attended private clinic at last dental visit – adults aged 18+ years (%)

	18–24 years	25–44 years	45–64 years	65+ years	Total
NSW	83	94	90	80	89
Vic	82	89	86	65	83
Qld	67	82	83	66	78
SA	66	82	87	68	79
WA	73	88	91	78	85
Tas	n/a	81	80	57	74
NT	56	76	90	n/a	76
ACT	86	88	96	87	90
All	76	88	87	72	84

Source: National Dental Telephone Interview Survey 2002.

Usual reason for dental visit

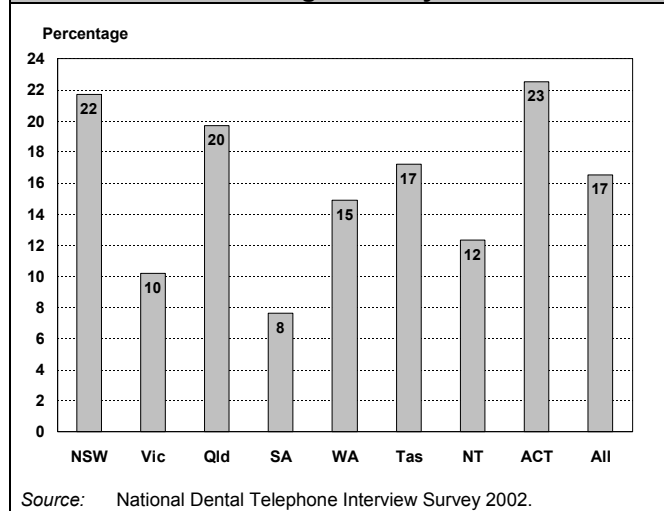
A person's reason for seeking dental care influences the type of care they receive. Those seeking care for a check-up benefit from early detection and receive preventive services, while those who usually seek care for a problem may receive less complete treatment and fewer preventive services.

Children

The percentage of children who usually visit the dentist for a problem rather than for a check-up is presented in Figure 6. Approximately 17% of Australian children aged 5–17 years usually visit

the dentist for a problem. SA children had the lowest prevalence of problem-oriented visiting (8%), significantly lower than the national average (17%). Problem-oriented visiting was highest in ACT (23%), NSW (22%) and Qld (20%).

Figure 6: Usually visit for a dental problem – children aged 5–17 years



Source: National Dental Telephone Interview Survey 2002.

Adults

The percentage of dentate adults (i.e. those with some natural teeth remaining) who usually visit the dentist for a problem is presented in Table 3. Problem-oriented visiting was far more prevalent in adults (47%) than children (17%). There was some variation among states/territories, with NT adults (56%) having the highest prevalence of problem-oriented visiting, significantly higher than the national average (47%).

Age was also a significant factor, with adults aged 18–24 years less likely to usually visit for a problem (37%) than older adults (46–50%). This trend was particularly evident in NSW and SA.

Table 3: Usually visit for a dental problem – dentate adults aged 18+ years (%)

	18–24 years	25–44 years	45–64 years	65+ years	Total
NSW	31	48	46	49	45
Vic	37	48	44	50	46
Qld	45	52	47	45	49
SA	35	55	52	51	51
WA	35	55	42	42	47
Tas	n/a	55	45	58	52
NT	51	59	53	n/a	56
ACT	45	46	49	38	46
All	37	50	46	48	47

Source: National Dental Telephone Interview Survey 2002.

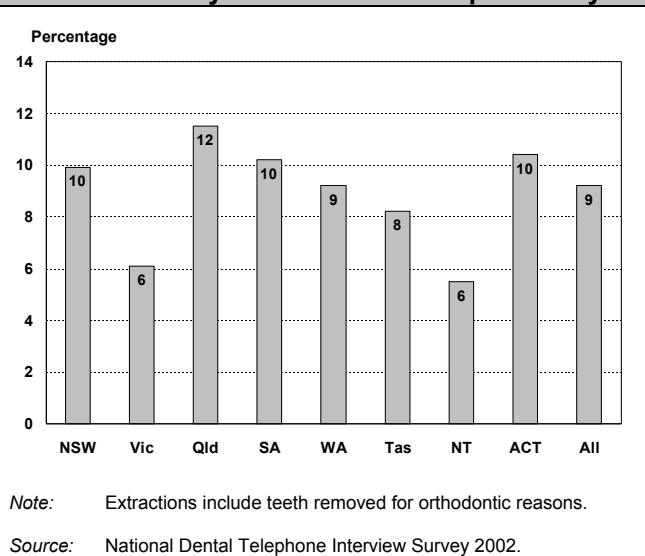
Services received – extractions

Respondents who made a dental visit in the previous 12 months were asked about the treatment they received. Generally, extraction of a tooth indicates that there has been no previous intervention for disease or that any previous preventive and restorative treatment has failed.

Children

Extraction rates for children aged 5–17 years were similar among states/territories with 6–12% of children who had made a dental visit in the previous year having a tooth extracted (Figure 7).

Figure 7: Received extraction – children aged 5–17 years who visited in previous year



Adults

Extraction rates were highest in NT (27%) and lowest in ACT (14%), although these differences were not significant (Table 4). There was little variation in the remaining states.

Table 4: Received extraction – dentate adults who visited in previous year (%)

	18–44 years	45–64 years	65+ years	Total
NSW	18	16	18	17
Vic	17	17	19	17
Qld	18	22	10	18
SA	23	15	16	19
WA	16	16	24	17
Tas	12	21	30	19
NT	29	17	n/a	27
ACT	17	8	20	14
All	18	17	17	18

Note: Extractions among young adults may include the removal of third molars.

Source: National Dental Telephone Interview Survey 2002.

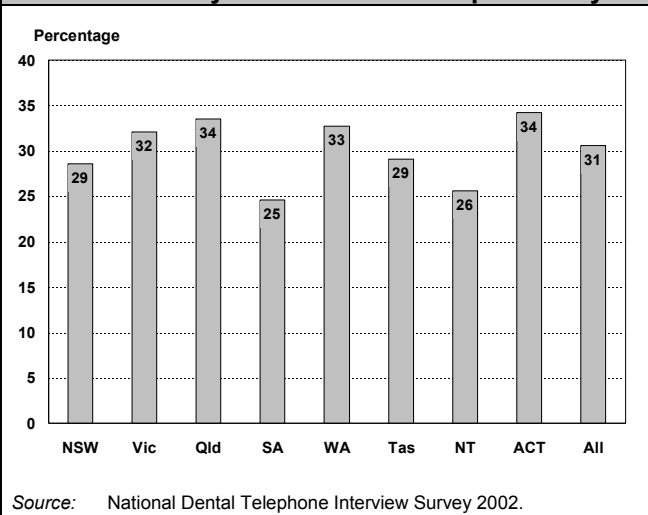
Data have been combined for age groups 18–24 years and 25–44 years to ensure adequate sample sizes in every state/territory. Age was not a significant factor despite some variation in extraction rates among states/territories.

Services received – fillings

Children

Approximately 30% of Australian children who made a dental visit in the previous year had a tooth filled (Figure 8). Variations among states/territories were small with between 25% and 34% of children receiving a filling. Children were more likely to have had a filling (31%) than an extraction (9%).

Figure 8: Received filling – children aged 5–17 years who visited in previous year



Adults

There was little variation among states/territories in the percentage of dentate adults who had received a filling (42–50%) in the previous year (Table 5). Adults aged 18–44 years were less likely to have received a filling (40%) than older adults (50–52%).

Table 5: Received filling – dentate adults who visited in previous year (%)

	18–44 years	45–64 years	65+ years	Total
NSW	39	45	48	42
Vic	41	61	61	50
Qld	41	53	56	47
SA	39	54	47	45
WA	41	40	47	42
Tas	34	48	49	42
NT	35	56	n/a	42
ACT	36	53	61	45
All	40	50	52	45

Source: National Dental Telephone Interview Survey 2002.

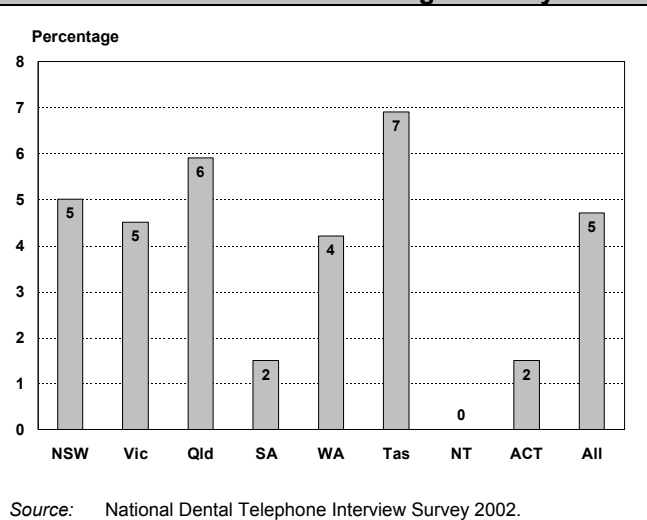
Affordability of dental care

Respondents were asked a range of questions relating to the affordability of dental care, including whether cost had prevented them from receiving recommended dental treatment and whether a \$100 dental bill would cause financial difficulties.

Children

Only 5% of Australian children aged 5–17 years were prevented from receiving recommended dental treatment due to cost (Figure 9). There were only small variations among states/territories.

Figure 9: Cost prevented recommended dental treatment – children aged 5–17 years



Adults

Between 13% and 19% of dentate adults in each state/territory reported that cost had prevented them from receiving recommended treatment (Table 6). Cost was more likely to be a deterrent for adults (14%) than children (5%).

Table 6: Cost prevented recommended dental treatment – dentate adults (%)

	18–24 years	25–44 years	45–64 years	65+ years	Total
NSW	10	14	16	5	13
Vic	14	18	13	9	15
Qld	18	17	16	7	16
SA	13	19	11	12	15
WA	12	20	14	6	15
Tas	n/a	15	15	7	13
NT	9	23	20	n/a	19
ACT	17	18	12	7	15
All	13	17	15	7	14

Source: National Dental Telephone Interview Survey 2002.

Thirteen per cent of dentate adults across Australia reported they would have significant

difficulty paying a \$100 dental bill (Table 7). ACT residents (7%) were less likely to report this than other Australians. Age was not a significant factor, with some variation across age groups.

Table 7: Significant difficulty paying a \$100 dental bill – dentate adults (%)

	18–24 years	25–44 years	45–64 years	65+ years	Total
NSW	10	12	12	15	12
Vic	17	14	10	14	13
Qld	17	12	15	12	14
SA	16	16	13	15	15
WA	18	9	11	7	11
Tas	n/a	15	11	12	13
NT	16	18	12	n/a	16
ACT	7	9	5	3	7
All	15	12	12	13	13

Source: National Dental Telephone Interview Survey 2002.

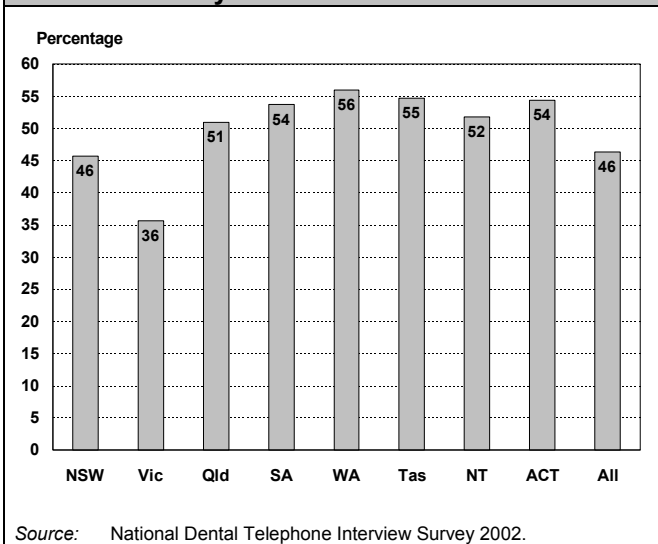
Note: Comparing Table 7 data with previous data sources can be misleading due to the change in value of \$100 over time.

Dental insurance

Children

Forty six per cent of Australian children were covered by private dental insurance (Figure 10). Among states/territories, coverage was lowest in Vic (36%) and NSW (46%).

Figure 10: Dental insurance – children aged 5–17 years



Adults

Dental insurance coverage of adults varied significantly among states/territories (Table 8). Coverage was highest in WA (59%), SA (56%) and Tas (56%) and lowest in Vic (35%), where adults were less likely to have dental insurance

than other Australians. Age was also a significant factor, with adults aged 18–24 years (39%) and adults aged 65 years and over (36%) less likely to have dental insurance than adults aged 45–64 years (56%).

Table 8: Dental insurance – dentate adults (%)

	18–24 years	25–44 years	45–64 years	65+ years	Total
NSW	40	49	57	37	49
Vic	26	38	39	25	35
Qld	39	39	57	36	44
SA	56	49	69	45	56
WA	45	57	72	52	59
Tas	n/a	53	66	40	56
NT	30	43	70	n/a	48
ACT	43	46	60	53	51
All	39	45	56	36	47

Source: National Dental Telephone Interview Survey 2002.

Summary

- Over 90% of children aged 5–17 years had visited a dentist within the previous two years in all states/territories except Vic and ACT. ACT children aged 5–17 years and Vic children aged 12–17 years reported the lowest level of attendance (approximately 80%). Despite this, state/territory differences were not significant.
- Nearly three in four Australian adults had visited the dentist within the previous two years. Attendance varied significantly by state/territory, with attendance highest in ACT (81%) and lowest in Tas (63%) and NT (66%).
- Approximately 13% of Australian adults had not made a dental visit within the previous five years. There were significant differences among states/territories, with Tas adults (20%) more likely to have not visited during the previous five years than other Australians.
- Use of the School Dental Service (SDS) varied significantly among states/territories. Children aged 5–11 years from NT, WA and Qld were more likely to have attended the SDS at their last dental visit than NSW and Vic children.
- Children aged 12–17 years were less likely to use the SDS (31%) than younger children (54%). Among adolescents, use of the SDS varied significantly among states/territories. Usage was highest in WA (66%) and Tas (64%) and lowest in NSW (16%), ACT (23%) and Vic (24%).
- Most Australian adults attended a private clinic at their last dental visit (84%). Use of private clinics varied significantly among states/territories, being highest in ACT (90%) and NSW (89%) and lowest in Tas (74%) and NT (76%).
- Approximately 17% of Australian children aged 5–17 years usually visit the dentist for a problem. SA children had the lowest prevalence of problem-oriented visiting (8%), significantly lower than the national average.
- Adults (47%) were far more likely than children (17%) to usually visit the dentist for a problem. NT adults had the highest prevalence of problem-oriented visiting (56%), significantly higher than the national average (47%).
- The number of children and adults receiving extractions or fillings during the previous 12 months did not vary significantly among states/territories.
- Cost was more likely to prevent adults (14%) from receiving recommended dental treatment than children (5%). There was little variation among states/territories.
- Approximately 13% of dentate adults across Australia reported that they would have significant difficulty paying a \$100 dental bill. ACT residents were less likely to report difficulty in paying than other Australians.
- Between 46% and 47% of Australian children and adults have private dental insurance. Vic residents were less likely (35–36%) to have dental insurance than other Australians.

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The AIHW Dental Statistics and Research Unit (DSRU) is a collaborating unit of the Australian Institute of Health and Welfare, established in 1988 at The University of Adelaide and located in the Australian Research Centre for Population Oral Health (ARCPOH), School of Dentistry, The University of Adelaide. DSRU aims to improve the oral health of Australians through the collection, analysis and reporting of information on oral health and access to dental care, the practice of dentistry and the dental labour force in Australia.

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