

Dental Care for Homeless People

(City Council on May 9, 10 and 11, 2000, adopted this Clause, without amendment.)

The Board of Health recommends that City Council advocate to the Ministry of Health to provide funding for dental services for homeless people and other marginalized groups through Community Health Centres and other agencies serving this population; and that the appropriate City officials be authorized and directed to take the necessary action to give effect thereto.

The Board of Health reports having:

- (1) adopted Recommendations Nos. (2) and (3) of the following report from the Medical Officer of Health;
- (2) requested the Chair of the Board of Health, together with the Medical Officer of Health, to convene a meeting with the Minister of Health and Long-term Care and representatives from Community Health Centres and the Faculty of Dentistry, University of Toronto, to discuss the delivery of dental services for homeless people; and
- (3) directed that a copy of the following report from the Medical Officer of Health be forwarded to the Community Services Committee and the Advisory Committee on Homeless and Socially Isolated Persons.

The Board of Health submits the following report (March 23, 2000) from the Medical Officer of Health:

Purpose:

This report is in response to a request from the Community Services Committee for Toronto Public Health to report on strategies to develop a program to meet the dental needs of people who are homeless.

Financial Implications and Impact Statement:

None.

Recommendations:

It is recommended that:

- (1) City Council advocate to the Ministry of Health to provide funding for dental services for homeless people and other marginalized groups through Community Health Centres and other agencies serving this population;

- (2) the Board of Health write to the Association of Community Health Centres to offer support in advocating strongly for developing capacity for dental services directed to the needs of marginalized populations such as homeless people within Community Health Centres;
- (3) the Board of Health write to the Ontario Hospital Association to urge hospitals to work with agencies serving homeless people and other marginalized people to ensure access to dental care; and
- (4) the appropriate City officials be authorized and directed to take the necessary action to give effect thereto.

Background:

The co-chair of the Advisory Committee on Homeless and Socially Isolated persons, Councillor Jack Layton, requested that the Board of Health report on strategies to provide dental care for people who are homeless. This report describes the evidence of need for such services and recommends actions that the City may take to augment the minimal dental services that currently exists for this segment of Toronto's population.

Comments:

Evidence of need:

There are two studies that provide data on the oral health needs of people living on the street. "The Street Health Report" by Ambrosia et al, a study of homeless adults in Toronto in 1992 showed that 37.1 percent of homeless people had visited the dentist in the past year compared to 68 percent of the general population. Almost one quarter of the women and men who participated in the Street Health Study had not seen a dentist in more than five years. Respondents in the study reported a significant amount of dental pathology in the mouth including 24.2 percent who reported sore or bleeding gums, 22.8 percent a toothache or cavity and 12.1 percent a loose tooth or teeth.

In 1994 the Shout clinic (a community health centre established to provide health care for street youth) and the Department of Public Health of the former City of Toronto, conducted a study of the Oral Health of Street Youth in Toronto and barriers to accessing care.

The study on the oral health of street youth in Toronto demonstrated that:

- (i) 41.4 percent showed signs of decay;
- (ii) 46 percent have a substantial build up of calculus and or gum disease which require the services of dental professionals and if left untreated, will result in more serious problems in the future;

- (iii) the number of decayed, missing and filled teeth was 3 times higher than for youth born in Toronto;
- (iv) the longer a young person lived on the streets, the greater likelihood that they would have dental disease and gingival problems;
- (v) those youth interviewed showed a high level of dissatisfaction with the state of their teeth and gums, and 75 percent felt that they needed dental treatment or advice now. Thirty-two percent reported having a toothache in the last month, 40 percent had pain when chewing and 12.6 percent had pain that kept them awake at night. Overall, one out of two reported having dental pain in at least one of the above categories;
- (vi) only 37 percent of the street youth interviewed had been to a dentist in the past year (compared to 68 percent of the general population in Toronto), and 40.8 percent had not been to the dentist in the past two years; and
- (vii) 57 percent of the street youth indicated that the primary reason they don't go to see the dentist is lack of money.

In addition the report of the Mayor's Homeless Action Task Force states that homeless adults have a higher degree of dental disease and more need for treatment due to infection, pain and decayed teeth than the general population.

Access to dental services by homeless people:

Homeless people cannot easily access basic dental services. The main reasons are the lack of funds or benefits to pay for these services, as well as the lack of clinics where people can walk in and obtain basic dental care. Access to dental services offered through private dentists requires that clients are able to make and keep appointments.

Currently there are three Community Health Centres in the South Region of the City of Toronto that provide limited dental services to marginalized groups. While Queen West Community Health Centre offers dental treatment services, the viability of the program is dependent on the patients' ability to contribute to the cost of service. This program therefore has a limited capacity to treat people who are not able to pay for the care.

The Shout clinic provides dental services for street youth, using volunteer dentists. This program was implemented and is being maintained by local fund raising activities done by staff at the Community Health Centre. The program operates two days per week and is currently unable to meet the demands for service. While this is a valued service, the use of volunteer dentists means that there is a lack of continuity of care for clients utilizing the service and sometimes there are difficulties in staffing the clinics as volunteers are not always able to keep their commitment. Maintenance of this program is dependent on Health Centres staff ability to constantly recruit volunteer dentists, and to fund raise to offset operational costs.

Saint Michael's Hospital had a dental program whose mandate was to provide dental services for marginalized inner city residents. However this program was discontinued due to budgetary pressures. As a result, the Regent Park Community Health Centre saw an increase in the number of clients trying to access dental care through their dental program, but who could not afford to pay for the service. The Community Health Centre was successful in negotiating a grant of \$50,000.00 from the Hospital for the 1999 fiscal year. This grant is used to help offset the cost of providing emergency dental care for these clients. However the demand for the service has exceeded the current capacity of the dental clinic at the Regent Park Health Centre and the cost of providing the service is greater than the funding provided by the Hospital. In addition, there is uncertainty as to the Hospital's ability to maintain the current funding level.

It is, therefore, apparent that access to dental services for homeless people is difficult and inadequate.

Responding to the need:

The Report from the Mayor's Task Force on Homelessness recommends improving access to dental services for homeless people. The Task Force identified the need to ensure that all homeless people get the benefits to which they are entitled. Currently adults on social assistance in the City of Toronto are entitled to emergency dental benefits under Ontario Works. Clients eligible for Ontario Disability Support Plan are eligible for basic dental benefits. However some homeless people who are on social assistance fall through the cracks because of lack of knowledge of their benefit entitlement and the lack of access to walk-in dental clinics. In addition a significant number of homeless people cannot access income support and other benefits because they do not have a permanent address. These people would therefore have to pay for dental services themselves.

The Mayor's Task force on Homelessness further proposed expanding the number of accessible clinics through Community Health Centres across the city that offer dental services. Community Health Centres are places where many homeless people feel comfortable in obtaining their health and social services.

The Task Force supported the development of a pilot dental care project for homeless people in which dental and dental hygiene students, under supervision, would provide dental care through clinic placements in selected Community Health Centres across the City as well as through the Faculty of Dentistry at the University of Toronto. At least two locations should be outside of the downtown core. It was also stated that Toronto Public Health should coordinate the project in collaboration with the Faculty of Dentistry, the George Brown College School of Dental Hygiene, and selected Community Health Centres. Each site should have a budget of up to \$100,000.00 to pay for dental staff and materials. The Task Force recommended that administration costs be provided in kind by the site agency, that equipment be donated or available on-site, and that funds for this project come from the Province.

Toronto Public Health supports the recommendations of the Mayor's Task Force and has had initial discussions with staff at the Faculty of Dentistry and the Queen West Community Health Centre to examine the feasibility of implementing such a pilot program. However, due to lack of

resources, the partners have been unable to proceed with implementation. Toronto Public Health currently has an arrangement with both the Faculty of Dentistry and the George Brown College which allows dental and dental hygiene students to gain invaluable clinic experience through placement in the City's dental offices. The placement of these students at Community Health Centres as suggested by the Mayor's Task Force on Homelessness could be viewed as an extension of this arrangement, once resources to support dental treatment are in place.

In addition, the Rexdale Community Health Centre has requested that Toronto Public Health enter into a partnership with them to provide dental services at their site. The success of this partnership is dependent on Rexdale Community Health Centre being able to obtain funding from the Province to offset capital costs for setting up the clinic and on the City of Toronto providing operational funds to provide care for those clients who are eligible for the City's dental program (i.e., low income seniors and children of low income families without dental benefits). While this would not address the needs of the homeless population directly, having a clinic at this site would enable the Community Health Centre to expand its services to include other marginalized groups once funding becomes available through other fund-raising activities. The ability of the City to participate in this partnership will be dependent on the level of funding approved for the expansion of the dental program.

The staff at the LAMP Community Health Centre have also indicated that the lack of dental care is an issue for their clientele, and if funds were available, they would be interested in offering dental services as part of the package of health services they are currently providing.

Conclusion:

Toronto Public Health supports the model of providing dental services for homeless people at Community Health Centres as this is where most homeless people go to obtain supportive services. This would reduce the burden of travel for these people as well as support comprehensive integrated service.

Toronto Public Health, therefore, recommends that the Board of Health advocate to the Province for the provision of funding to Community Health Centres so that dental services is included as one of the health services provided for marginalized groups.

This report provides evidence of the need for comprehensive, accessible and affordable dental services for the homeless population. Such oral health services should include restorative and preventive treatment and preventive education appropriate for people who currently are homeless. Dental health is an integral part of general health and well-being and if homeless people are to be supported in their efforts to regain control of their lives, then resources must be provided to ensure the provision of dental services for this population.

Contact:

Dr. Hazel Stewart
Regional Director, West Region
Toronto Public Health
Tel: 392-0442

The Board of Health reports, for the information of Council, having also had before it during consideration of the foregoing matter a communication (April 28, 2000) from Joel Rosenbloom, DDS, Coordinator, Dental Program, Queen West Community Health Centre, urging the Board to support the recommendations outlined in the report from the Medical Officer of Health.