



FDI/IADH DRAFT POLICY STATEMENT

Oral Health and Dental Care of People with Disabilities

Submitted for adoption by the FDI General Assembly:
September, 2016, Poznan, Poland

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CONTEXT

3 Over 1 billion people, about 15% of the world's population, have some form of
4 disability. Among them, between 110 and 190 million people experience functional
5 difficulties. Disability rates continue to rise globally due to increased life expectancy
6 amongst children with disabilities and ageing populations, and a growth in
7 prevalence and incidence of long-term health conditions.

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SCOPE

10 Global oral health goals to achieve by the year 2020 by FDI/WHO/IADR (2003)
11 emphasized the importance of promoting oral health within groups and populations
12 with the greatest disease burden. This is especially important for people with
13 disabilities as they typically experience greater levels of oral disease. These groups
14 are often under-served and experience high levels of unmet need for dental care,
15 with the oral disease they experience often remaining untreated. Most dental care
16 for people with disabilities is not complex and can be provided in primary care and
17 community settings, by a dental workforce with the relevant attitudes and
18 competencies.

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DEFINITIONS

21 The WHO International Classification of Functioning describes disability as an
22 umbrella term, covering impairments, activity limitations, and participation
23 restrictions. Disability is diverse, including those who have a range of impairments
24 with or without additional needs. However, not everyone who is disabled will have
25 complex needs. The scope is broad, covering people with physical, sensory,
26 intellectual, medical, emotional or social impairments; or more often a combination
27 of these factors. These groups are sometimes referred to as 'people with special
28 needs', people with 'special healthcare needs', or people requiring 'special care
29 dentistry'.

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PRINCIPLES

32 All people have a fundamental right to health and access to healthcare services in
33 their communities. People with disabilities should advise on the design and
34 evaluation of healthcare services and healthcare information, to ensure that
35 services are patient-centred and appropriate to their needs. People with disabilities
36 should be recognized for their abilities, not their disabilities, and dental care should
37 be offered to the same standard as for the general population. FDI and the
38 International Association for Disability and Oral Health (IADH) support the United
39 Nations Declaration on the Rights of Disabled Persons, that people with disabilities
40 should have access to medical treatment without discrimination.



41 **POLICY**

42 FDI and IADH support the following guiding principles and associated
43 recommendations:

- 44 • Encourage national health policies to consider the needs of people with
45 disabilities.
- 46 • Ensure that all oral health services are accessible to people with intellectual,
47 physical, sensory, emotional and social impairments.
- 48 • Raise awareness of the importance of oral health as an essential component
49 of general health and quality of life amongst people with disabilities, families,
50 caregivers and non-dental health professionals.
- 51 • Advocate for oral health risk assessment and oral health promotion skills
52 training for all healthcare workers within multi-disciplinary care pathways for
53 people with disabilities.
- 54 • Acknowledge the specific skills, education and training, and facilities necessary
55 to manage patients requiring complex special care dentistry.
- 56 • Encourage training in special care dentistry at the undergraduate,
57 postgraduate, and continuing education levels through all dental disciplines.
- 58 • Encourage private and public sponsors of oral health research to consider the
59 needs of people requiring special care dentistry.

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61 **DISCLAIMER**

62 The information in this Policy Statement was based on the best scientific evidence
63 available at the time. It may be interpreted to reflect prevailing cultural sensitivities
64 and socio-economic constraints.

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