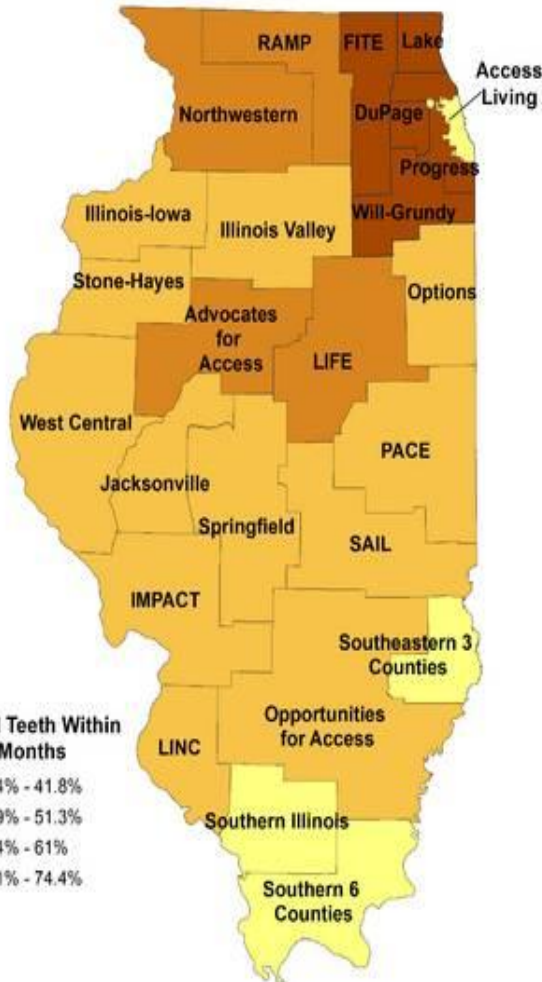


Teeth Cleaning

Among Illinois Adults With Disability

Data Brief
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Use of Professional Teeth Cleaning Among Illinois Adults With Disability by Center for Independent Living (CIL) Service Areas (2007-2009)



Percentage of Adults Who Had Teeth Cleaned Within 12 months

Gap = difference between adults with disability who had teeth cleaned within last 12 months and adults without disability who had teeth cleaned within last 12 months
 Percentage decrease calculation: gap divided by adults without disability who had teeth cleaned within last 12 months

CIL	Disability	Without Disability	Gap	% Decrease
Access Living	38.4%	60.4%	-22.0%	-36.4%
Advocates for Access	55.8%	69.8%	-14.0%	-20.1%
DuPage	68.0%	71.3%	-3.3%	-4.6%
FITE	66.8%	79.7%	-12.9%	-16.2%
Illinois-Iowa (Illinois only)	45.6%	67.0%	-21.4%	-31.9%
Illinois Valley	46.4%	66.0%	-19.6%	-29.7%
IMPACT	43.6%	62.6%	-19.0%	-30.4%
Jacksonville	45.0%	63.2%	-18.2%	-28.8%
Lake	70.9%	78.7%	-7.8%	-9.9%
LIFE	58.7%	76.8%	-18.1%	-23.6%
LINC	46.5%	65.3%	-18.8%	-28.8%
Northwestern	54.6%	65.6%	-11.0%	-16.8%
Opportunities for Access	28.2%	59.1%	-30.9%	-52.3%
Options	49.1%	62.0%	-12.9%	-20.8%
PACE	49.7%	67.1%	-17.4%	-25.9%
Progress	74.4%	79.0%	-4.6%	-5.8%
RAMP	61.0%	67.0%	-6.0%	-9.0%
Southern Illinois	41.8%	61.5%	-19.7%	-32.0%
SAIL	44.5%	65.2%	-20.7%	-31.7%
Springfield	46.9%	64.6%	-17.7%	-27.4%
Stone-Hayes	51.3%	53.8%	-2.5%	-4.6%
West Central	43.7%	59.9%	-16.2%	-27.0%
Will-Grundy	65.6%	71.3%	-5.7%	-8.0%
Southeastern 3 Counties	39.8%	60.9%	-21.1%	-34.6%
Southern 6 Counties	37.4%	50.9%	-13.5%	-26.5%
Total	54.7%	69.3%	-14.6%	-21.1%

Professional teeth cleaning to remove plaque and tartar above the gum line is key to good oral hygiene and helps reduce the main sources of tooth decay and gum disease, especially when self-care is difficult. As shown in the map, the rate of persons with disabilities who used such services within the last 12 months varies across different areas of the state. Furthermore, the rate for persons with disabilities is generally lower than that of their counterparts without disabilities in each area as shown in the table on the right. The table shows the gap, or difference, as well as the percentage decrease, in those rates between persons with and without disabilities. Disparities in the rate of teeth cleaning shown here suggest persons with disabilities are at a higher risk for poor oral health than those without disability.

Data Source: 2007-2009 Round 4 Illinois County Behavioral Risk Factor Surveys (ICBRFS), a random digit telephone survey of community households conducted by the Illinois Department of Public Health. The survey gathers information on health status and health risk factors among Illinois county residents who are 18 years of age and older.

Disability Screening: Survey participants who responded positive to either or both of the following two questions in the ICBRFS were identified as having a disability: 1) limited in any way in activities because of physical, mental or emotional problems? 2) have health problem that requires use of special equipment, such as a cane, a wheelchair, a special bed or a special telephone?

Adults Who Had Their Teeth Cleaned Within Last 12 months: Survey respondents who indicated they had teeth cleaned by a dentist or dental hygienist within one year or less.

What can be done?

The underuse of professional teeth cleaning for people with disabilities may be a result of patient-provider miscommunication, lack of patient adherence, patient access problems (e.g., transportation), lack of provider training, staff's lack of knowledge on how to accommodate people with disabilities, poor coordination of care, and insufficient financial incentives. To effectively practice preventive oral hygiene and reduce the risk of oral problems among people with disabilities, health system changes that reduce barriers limiting the ability of people with disabilities to access professional teeth cleanings need to be promoted. The inclusion of people with disabilities in preventive oral health care will require overcoming the many barriers to oral hygiene services that people with disabilities experience. Ensuring that people with disabilities are included in state-based oral hygiene programs can help eliminate these disparities and improve the quality of preventive oral hygiene care for people with disabilities.

CILs	Service Area (County)
Access Living	Chicago
Advocates for Access CIL	Fulton, Peoria, Tazewell and Woodford
DuPage CIL	DuPage
FITE CIL	Kane, Kendall and McHenry
Illinois-Iowa CIL (Illinois counties only)	Henry, Mercer and Rock Island
Illinois Valley CIL	Bureau, LaSalle, Marshall, Putnam and Stark
IMPACT CIL	Bond, Calhoun, Greene, Jersey, Macoupin and Madison
Jacksonville Area CIL	Cass, Mason, Morgan and Scott
Lake CIL	Lake
LIFE CIL	DeWitt, Ford, Livingston and McLean
LINC CIL	Monroe, Randolph and St. Clair
Northwestern CIL	Carroll, Jo Daviess, Lee, Ogle and Whiteside
Opportunities for Access CIL	Clay, Clinton, Edwards, Effingham, Fayette, Hamilton, Jasper, Jefferson, Marion, Wabash, Washington, Wayne and White
Options CIL	Iroquois and Kankakee
PACE	Champaign, Douglas, Edgar, Piatt and Vermillion
Progress CIL	Suburban Cook
RAMP	Boone, DeKalb, Stephenson and Winnebago
Southern Illinois CIL	Franklin, Gallatin, Hardin, Jackson, Perry, Saline and Williamson
SAIL	Clark, Coles, Cumberland, Macon, Moultrie and Shelby
Springfield CIL	Christian, Logan, Menard, Montgomery and Sangamon
Stone-Hayes CIL	Henderson, Knox and Warren
West Central CIL	Adams, Brown, Hancock, McDonough, Pike and Schuyler
Will-Grundy CIL	Grundy and Will
Southeastern 3 Counties without a CIL	Crawford, Lawrence and Richland
Southern 6 Counties without a CIL	Alexander, Johnson, Massac, Pope, Pulaski and Union

This Data Brief is prepared by the Illinois Department of Public Health’s Disability and Health Program, a statewide project initiated jointly by the Illinois Department of Public Health and the University of Illinois at Chicago. The goal of the program is to reduce and prevent chronic health conditions among Illinois citizens with a disability and promote their health, well-being and quality of life. Persons with a disability have an increased risk of chronic health conditions, such as arthritis, obesity, hypertension, and high cholesterol, when compared to those without a disability. As a group, however, persons with a disability have rarely been targeted by health promotion and disease prevention efforts. The Illinois Disability and Health Program represents an effort to include those with a disability in on-going health promotion and disease prevention activities and to raise professional awareness of disability issues to increase access to health care for persons with disability. Funding for this project is provided by the U.S. Centers for Disease Control and Prevention through a cooperative agreement (Grant #: 5U59DD000271). To learn more about the project and how to become involved, contact the program at 217-557-2939, TTY 800-547-0466.