EDITORIAL



Bridging the gap in rural oral health care

Access to oral health care remains a significant challenge in rural areas worldwide, with profound implications for underserved populations and patients with complex medical conditions. Despite advances in dental care and technology, rural communities often face barriers to accessing basic dental services, contributing to a persistent cycle of poor oral health outcomes. Addressing these disparities requires a multi-layered approach that encompasses policy changes, workforce development, community engagement, and innovative delivery models.

Geographic isolation, limited transportation options, scarce resources, and a shortage of dental professionals contribute to this disparity. The World Health Organization identifies dental care as one of the most underserved health care needs in rural areas.¹ In the US, many counties lack practicing dentists, forcing residents to travel long distances for care. As of 2022, 4,633 of the nation's 6,927 Dental Health Professional Shortage Areas were in rural areas.² This challenge is compounded by socioeconomic factors, with rural populations more likely to be uninsured, underinsured, or living below the poverty line.³

The lack of access to oral health care in rural areas has farreaching consequences. Untreated dental issues can lead to chronic pain, infections, and difficulties with eating, speaking, and daily functioning. Poor oral health is also linked to systemic conditions, such as heart disease, diabetes, and adverse pregnancy outcomes, exacerbating health disparities in these communities.

Barriers to access

- Workforce shortages: One of the most pressing issues is the shortage of dental professionals in rural regions. Dental practitioners are less likely to establish practices in remote areas due to limited professional opportunities, lower income potential, and challenges in recruiting and retaining staff. Additionally, rural areas often lack the infrastructure to support dental practices, such as specialized equipment or access to suppliers.
- Economic constraints: For many rural residents, the cost of dental care is prohibitive. Even with insurance, high out-of-

pocket costs deter individuals from seeking preventive or necessary treatments. Medicaid, a critical resource for lowincome populations, often has low reimbursement rates for dental services, leading many providers to opt out of participation.

 Cultural and educational barriers: Misinformation and a lack of awareness about the importance of oral health further impedes access. In some communities, dental care is perceived as a luxury rather than a necessity, delaying treatment until conditions become severe.

Strategies for improvement

- Expanding the workforce: Increasing the number of dental professionals in rural areas is essential. Initiatives such as loan repayment programs, scholarships, and incentives for practicing in underserved areas can attract dental practitioners to rural regions. Expanding the scope of practice for dental hygienists and mid-level providers, such as dental therapists, can also help bridge gaps in care.
- Innovative care models: Tele-dentistry is an emerging solution for rural areas, allowing patients to consult with dental professionals remotely.⁴ Mobile clinics and community-based programs that integrate oral health care with primary care and mental and behavioral health services, can bring care directly to underserved populations, reducing the need for travel and making care more accessible.⁵
- Upgraded facilities and training: To address the needs of older patients and those with complex medical conditions, rural dental facilities must be equipped with advanced tools and technologies, such as digital imaging, sedation capabilities, and enhanced infection control systems. Additionally, dental providers should receive ongoing training to manage medically complex patients effectively and safely, ensuring high-quality care for diverse needs.
- Policy interventions: Governments must prioritize oral health as part of broader health care strategies. Increasing Medicaid reimbursement rates, allowing easier transfer of credentials

across states or regions, and investing in rural health infrastructure can encourage providers to serve these communities. Public–private partnerships can also play a critical role in funding and delivering care.

Community engagement and education: Empowering communities with knowledge about oral health fosters early intervention and routine care. Local outreach programs can raise awareness about preventive care, promote healthy behaviors, and connect residents with available resources. Community Dental Health Coordinators (CDHC) have been shown not only to increase the education level of the community, but also to improve the overall health of rural communities.⁶

A call to action

Addressing rural oral health care disparities is not just a health care imperative; it is a moral and economic necessity. The persistence of these gaps highlights systemic inequities that demand coordinated efforts from policymakers, health care providers, and community leaders. By investing in rural oral health, we can ensure that no one is left behind, regardless of where they live.

Demographic changes and increasing complexity of patient needs further underscore the urgency for action. Bridging these gaps requires innovative solutions, sustained investment, and a commitment to equity. As we work toward a future where oral health care is accessible to all, rural residents must remain at the center of these efforts, ensuring healthier smiles and brighter futures for generations to come.

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