

Submission
No 132

INQUIRY INTO DENTAL SERVICES IN NSW

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Theme:

Summary

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DENTAL SURGEON

LEVEL 2

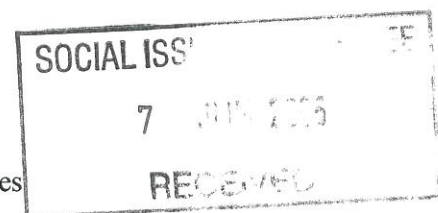
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The Standing Committee On Social Issues
Legislative Council, NSW Parliament
Macquarie St, NSW 2000



RE: The Inquiry By The Standing Committee On Social Issues
Into Dental Health

Dear Sir/Madam

As a citizen of NSW, I have long been concerned about the degrading state of dental health, service and education, and welcome the Upper House Inquiry into this neglected area of health care.

I am aware of many people who suffer significant pain and disability from poor dental health, and am dismayed by the lack of adequate services to relieve their pain and restore their lives to normal function

Toothache and dental disease can be intensely painful, and prevents the consumption of a normal diet essential for continuing good health. The lack of proper dentures for missing teeth contributes to the malaise.

In a society where personal appearance is considered important, degraded teeth cause great psychological pain, discomfort and embarrassment for many. The maintenance of a disease free dentition is no longer an acceptable minimum standard of community dental care even if it was ever met. It is understand that there are now links between general and dental health, so that poor dental health is making our community sicker in more ways than one.

It is particularly worrying to me that there is an increase in the extent of untreated dental disease. I am also aware that this in part reflects a shortage of trained dental clinicians, with significant shortfalls predicted by 2010. The workforce shortage appears to be due to a lack of sufficient training positions for dentists, as well as dental therapists, hygienists, technicians and prosthetists. It worries me that

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despite the fact that there are many young people who would love to enter these professions, and the significant community need, the necessary training positions have not been created. I am also aware that the educational staff in the training institutions are working in difficult circumstances, and am worried that if this is not reversed the dental workforce will be further degraded.

I recognize that public dental services are patchy, with some areas receiving comparatively good care and most of the eligible population unable to access routine dental care in a reasonable time.

I am concerned that people living in rural areas are often unable to find a dentist, despite being able to pay for service, and am further worried by the prospect of dental shortages in metropolitan areas.

The lack of adequate preventive dental programs and insufficient fluoridation worry me, as prevention of disease seems even more important in the absence of enough dental clinicians to treat existing dental disease.

Finally, I am concerned that despite there being many internal and external reports of these problems to both State and Federal governments, including a Senate Inquiry in 1998, very little seems to have been done to prevent the current and developing dental crisis. It is of note that despite an increase of about one billion dollars for NSW Health in the recent budget, no new funding for dental health has been allocated.

I hope that the current inquiry results in positive action being taken to address these concerns, and expect the State Government to accept its responsibility for ensuring adequate dental health, services and education for NSW.

Yours sincerely

A handwritten signature in black ink, appearing to read 'W L Dawes', enclosed within a hand-drawn oval.

(Adj. Assoc. Prof.) William L. Dawes