Resolution No. 01-2017

“Supporting the Dental Health Needs of Indian Country”

WHEREAS, the Alaska Native Health Board, a 26-member organization established in 1968, is recognized as the statewide voice on Alaska Native health issues representing the Tribes and Tribal consortia providing health care and community services to over 152,000 Alaska Native and American Indian (AN/AI) people statewide as well as thousands more non-Natives living in rural Alaska; and

WHEREAS, the Alaska Native Health Board is dedicated to assisting and promoting the health needs and concerns of Indian people; and

WHEREAS, the American Indian and Alaska Natives (AI/AN) have the highest tooth decay rate of any population in the United States; in which 79% of AI/AN children aged 2-5 years having tooth decay, with 60% of these children having severe early childhood caries (baby bottle tooth decay); 87% of these children, aged 6-14 years, have a history of decay—twice the rate of dental caries experienced by the general population, and 91% of AI/AN young people, aged 15-19 years have caries; and

WHEREAS, this prevalence of caries infection exists in spite of the implementation of significant dental decay prevention programs by the Indian Health Service (IHS) and tribes, including fluoridation of water systems suitable for fluoridation, the use of topical fluorides and dental sealants, and education programs on oral health for children and parents; and

WHEREAS, the lack of access to professional dental care is a significant contributor to the disparities in oral health that exist in the AI/AN population; and

WHEREAS, there is 1 dentist for every 2,800 individuals in the IHS and tribal health clinics, compared with 1 dentist for every 1,500 individuals in the general population; and

WHEREAS, despite intense recruitment efforts and significant financial incentives, the IHS and the tribes continue to experience great difficulty in attracting dentists with one-fourth of the dentist positions at 269 IHS and tribal health facilities were vacant in 2000 and in some IHS Service Areas, a turnover rate of approximately 30%; and

WHEREAS, the dental health disparities for AI/AN children is a national epidemic that is a moral issue and social injustice that can only be addressed with a concentrated
recruitment and deployment of dental health professionals to work in AI/AN communities and the development of practitioners that can effectively extend the ability of dentists to provide for children not receiving care and help to confront the significant oral health disparities existing in AI/AN children.

WHEREAS, The Dental Health Aide Therapist (DHAT) is a midlevel dental provider, providing dental services, within a defined scope of practice, in remote areas throughout the Tribal Health System in Alaska; The DHAT training program is an intensive 2 year training program, developed in Alaska and mirrored after the DHAT program in New Zealand; Training and employing DHAT’s is effective in increasing access to basic dental care.

THEREFORE BE IT RESOLVED, that the Alaska Native Health Board urges Congress to elevate the dental health needs of Indian Country and provide the necessary funding to address the dental health disparities in Indian Country.

BE IT FURTHER RESOLVED that ANHB strongly supports the Dental Health Aide Program in Alaska, and recommends that when additional funding is made available by Congress, these financial resources are utilized to expand the DHAT program outside Alaska and extend to Tribes throughout Indian Country to address the dental health professional shortage that exist in Indian Country.

CERTIFICATION
We hereby certify that this resolution was duly passed by the Alaska Native Health Board by the full Board of Directors on the 10th day of May, 2017 in Anchorage, AK.

Attested:

Lincoln Bean, Sr., Chairman  
Alaska Native Health Board

Verné Boerner, President/CEO  
Alaska Native Health Board