



## **Improving the Oral Health of Iowa Veterans Through Collaborative Action**

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June 13, 2024

# Housekeeping



This session is  
being recorded



The materials will  
be posted on the  
AIDPH website



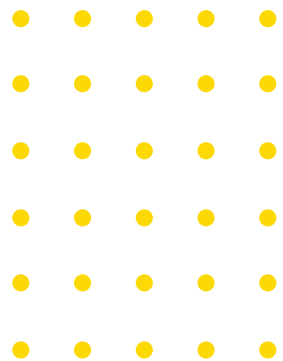
Please chat  
and engage  
throughout!



CEUs are  
available for  
this session

# Learning Objectives

- Explain the key oral health challenges faced by Iowa veterans.
- Analyze the roles and contributions of different stakeholders in improving the oral health of Iowa veterans.
- Develop a comprehensive action plan to enhance the oral health services available to Iowa veterans through community collaboration.
- Assess various strategies for forming effective coalitions of veteran oral health advocates and determine the most impactful approaches for fostering collaboration among stakeholders.



# Disclosure

The presenters declare that they do not have a financial arrangement or affiliation with any corporate organization offering financial support or grant monies for this continuing dental education program, nor do they have a financial interest in any commercial product(s) or service(s) they will discuss in the presentation.

# Today's Agenda

1

Reviewing the State of Veteran Oral Health in Iowa

2

Identifying collaborative action opportunities for Iowa stakeholders

3

Hearing from all of you on how to leverage this data for collective action

# What is a Community Forum?

Didactic presentation  
designed to be an  
overview of veteran oral  
health in Iowa



Discussion session  
where attendees  
share their thoughts,  
feedback, and  
opportunities for action

**Multi-Part Engagement**

# AIDPH's Mission and Vision

## MISSION

Empowering our community to advance oral health through science, education, and advocacy

## VISION

A justice-oriented oral health system





# Our Communities of Focus



## LGBTQIA+

By tailoring preventive and treatment strategies to the unique needs of this community, we can contribute to reducing disparities and promoting oral health equity for all individuals, regardless of their sexual orientation, gender identity, or intersex status.



## Veterans

By recognizing and addressing the distinct challenges faced by veterans, we can contribute to improving oral health outcomes, promoting preventive care, and enhancing the overall quality of life for those who have served in the military.



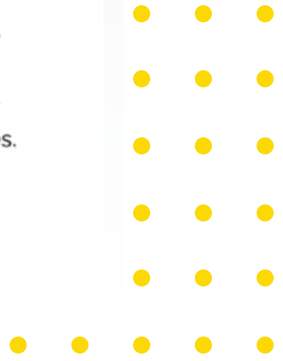
## Disabilities

By prioritizing inclusivity, accessibility, and targeted education, we can contribute significantly to improving the oral health outcomes and overall well-being of people with disabilities.



## Rural

By addressing the unique challenges faced by residents in rural areas, we can contribute to reducing oral health disparities and improving the overall well-being of these communities.







AMERICAN INSTITUTE OF  
DENTAL PUBLIC HEALTH  
**ACADEMY**

The AIDPH Academy presents a range of engagement opportunities to suit different levels of commitment. Choose from accessible webinars and workshops designed for busy schedules, or dive deeper with our immersive fellowships and the annual colloquium for a more substantial professional development experience.

**ADA CERP**® | Continuing Education  
Recognition Program

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**Webinars and Workshops**

Meetings on a specific topic or initiative to deliver information to a broader network

**Learning Collaboratives**

Informal meetings on an overarching topic focused on growth and collective action

**Certificates**

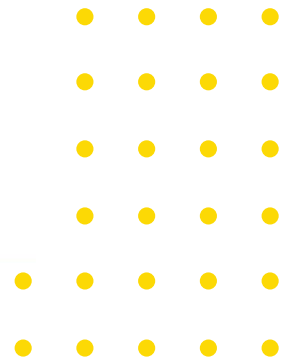
Dedicated curriculum pathways to earn a certificate signaling expertise in an established topic

**Fellowships**

Dedicated curriculum that is explored in longer terms to earn a certificate and moniker of "Fellow of the Academy"

**Colloquium**

Intensive topical examination that is interactive and geared for personal and professional development



# Iowa Veteran Oral Health



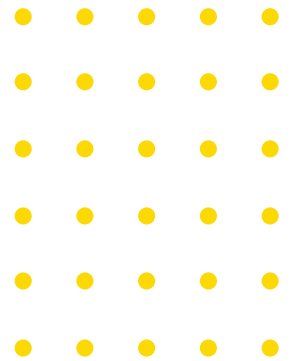
## Understanding Outcomes and Opportunities

Oral health is critical to overall health and well-being. Marginalized, historically excluded, and under-served communities often disproportionately suffer from poor oral health as a result of social and political determinants of health. Veterans experience a disproportionate burden of disease and disability that negatively affects their oral health, their overall health, and their well-being. This report was developed to serve as a resource for key target audiences in Iowa including clinicians, advocates, health administrators, nonprofit organizations, researchers, and policy makers to help design and implement solutions.



## A Report of Strategic and Actionable Recommendations for Iowa Stakeholders

This report published with support from the [Delta Dental of Iowa Foundation](#) assesses the oral health status of veterans living in Iowa using quantitative and qualitative data and noting gaps in available information and resources. It explores:







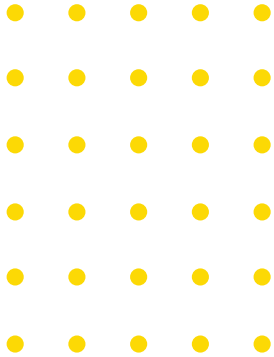
# **The State of Veteran Oral Health In Iowa**

Report Development & Overview

In the Chat:

**What comes to mind  
when you hear the  
phrase “collaborative  
action”?**

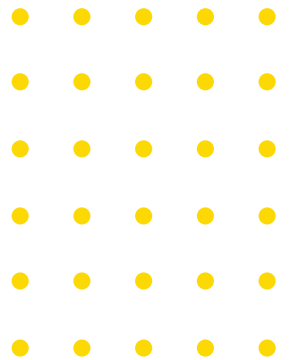
# Report Development Timeline





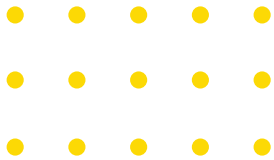
# Report Objectives

1. How do oral health outcomes for veterans living in Iowa **differ from nonveterans?**
2. What **factors contribute** to poor oral health among veterans in Iowa?
3. What **opportunities exist** for improving oral health outcomes for veterans in Iowa?
4. What **steps should be taken** to improve oral health outcomes for veterans in Iowa?



# Report Development

## Process for Report Development



# Report Elements



### EXECUTIVE SUMMARY

**National Access**  
There are 20 million veterans in the U.S. Of those, nine million are eligible for dental care from the Veteran Health Administration (VHA), through the Veteran's Administration (VA) system who are receiving mental care. This means most veterans who are receiving mental care in Iowa, get their dental care through the VA. Most veterans, including those with affordability concerns.

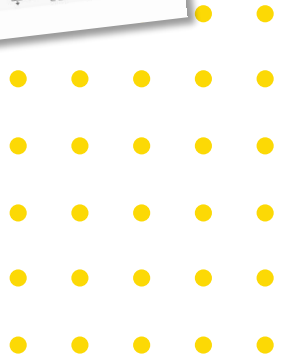
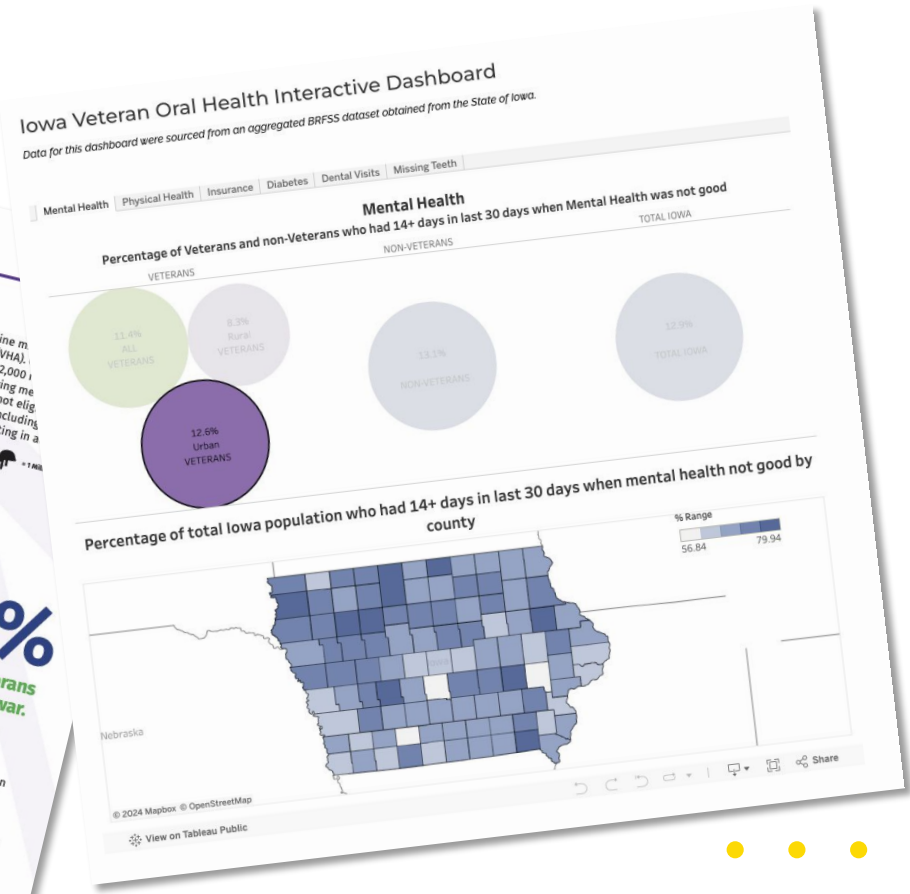
**Iowa Access**  
Approximately 7% of Iowans are veterans. As of 2020, Iowa had 193,861 veterans living in its 99 counties, with 76% having served during a period of war and approximately 184,000 enrolled in the Iowa VA healthcare system. Iowa veterans are experiencing poverty and housing insecurity at higher rates than nonveterans in Iowa. Geographically, Iowa veterans are highly concentrated in rural areas, with a large proportion of those veterans considered to be among the aging community. Veterans are also more likely to live in a Health Professional Shortage Area (HPSA).

**Oral Health of Iowa Veterans**  
Most oral health indicators show that Iowa veterans have poorer oral health outcomes than nonveterans. Approximately half of Iowa veterans (52.3%) are at risk of experiencing tooth loss, compared with 37.1% of nonveterans. Nearly one in ten Iowa veterans (9.5%) are completely edentulous, compared with 4.4% of the Iowa adult population. Indicators such as income, education, and age exacerbate those disparities; however, rurality is the largest driver of poor oral health among veterans.

**76% of Iowa Veterans served in a war.**

**Nearly one in ten Iowa veterans (9.5%) are completely edentulous.**

The State of Veteran Oral Health in Iowa



# Report Elements



**Section 1** provides an overview of the Veterans' Health Administration (VHA) infrastructure, details on healthcare eligibility offered through the Department of Veterans' Affairs (VA), and descriptions of veteran and active-duty service member healthcare benefits. Additionally, this section provides a comprehensive overview of the Iowa veteran population, including information on access and healthcare delivery systems and federal health insurance programs.



**Section 2** offers an extensive analysis of veteran oral health at the national, state, and county levels. Moreover, this section provides key insights for dental health professional shortage areas in Iowa, as well as dental visits, edentulism (tooth loss), and dental emergency room visits observed in Iowa.



**Section 3** delivers a comprehensive overview of the impact of chronic inflammatory diseases on the Iowa veteran population. Additionally, it underscores the financial burden these diseases place on State and VA expenditures, as well as out-of-pocket expenses for veterans.



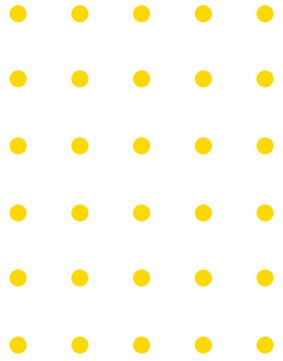
**Section 4** highlights trends that emerged from interviews conducted with key Iowa stakeholders regarding the access to, use of, and potential barriers to oral healthcare faced by Iowa veterans. This section reports a compilation of interviewee responses, supported by direct quotes. Cost, transportation, and oral health literacy were recurrent barriers reported by stakeholders, particularly aging veterans living in rural communities. The interviews also provided valuable insight into effective policy solutions, calling for increased funding of the Iowa Trust Fund and Medicaid expansion.



**Section 5** summarizes conclusions of results generated from this report in plain language for each major area of analysis, including cost, overall health, and oral health.



**Section 6** provides a detailed list of actionable, evidence-based strategic recommendations for key stakeholders to use to ignite systemic change for Iowa veterans.



# Report Stakeholders & Target Audiences



Veterans +  
Caregivers



Policymakers



Clinicians



Associations



Researchers



Insurers

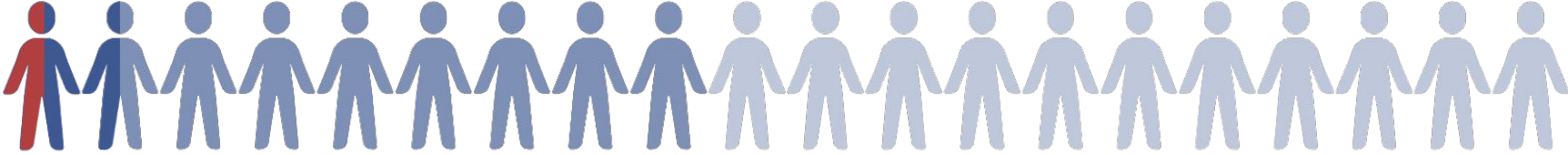




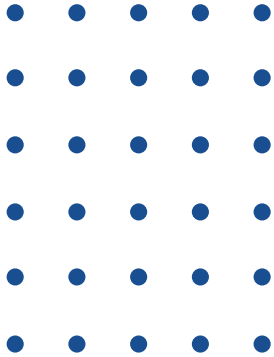
# Iowa Infrastructure

What does the care delivery system and demographic of veterans in Iowa look like?

# National Landscape



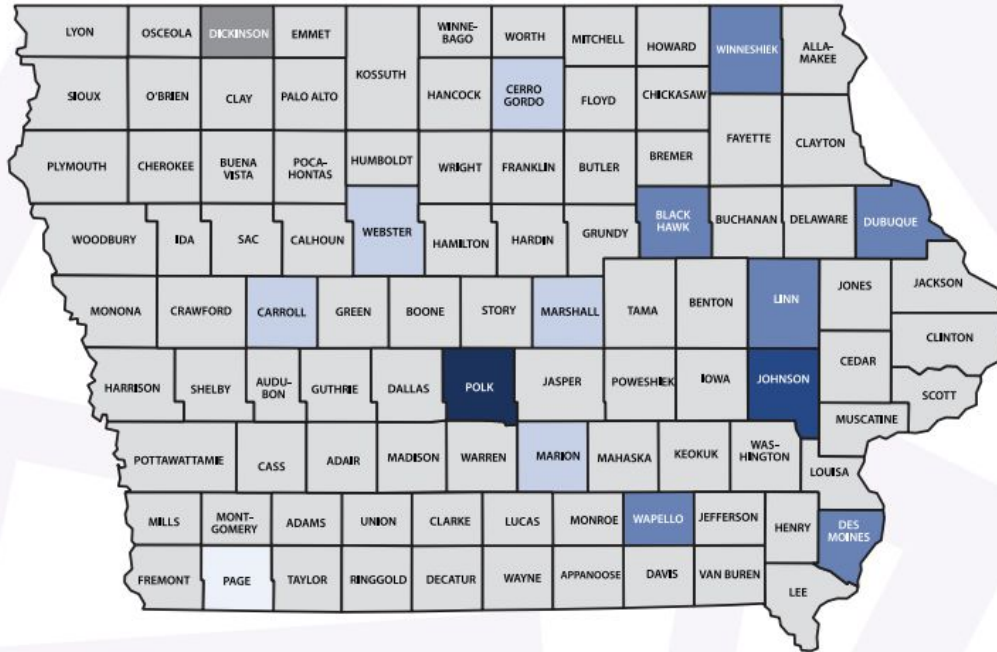
There are **18 million** veterans in the US. Of those, **9 million** receive healthcare from the VHA. Only **1.8 million** are eligible for dental care from the VHA, with just **582,000** receiving dental care.





# Iowa Infrastructure

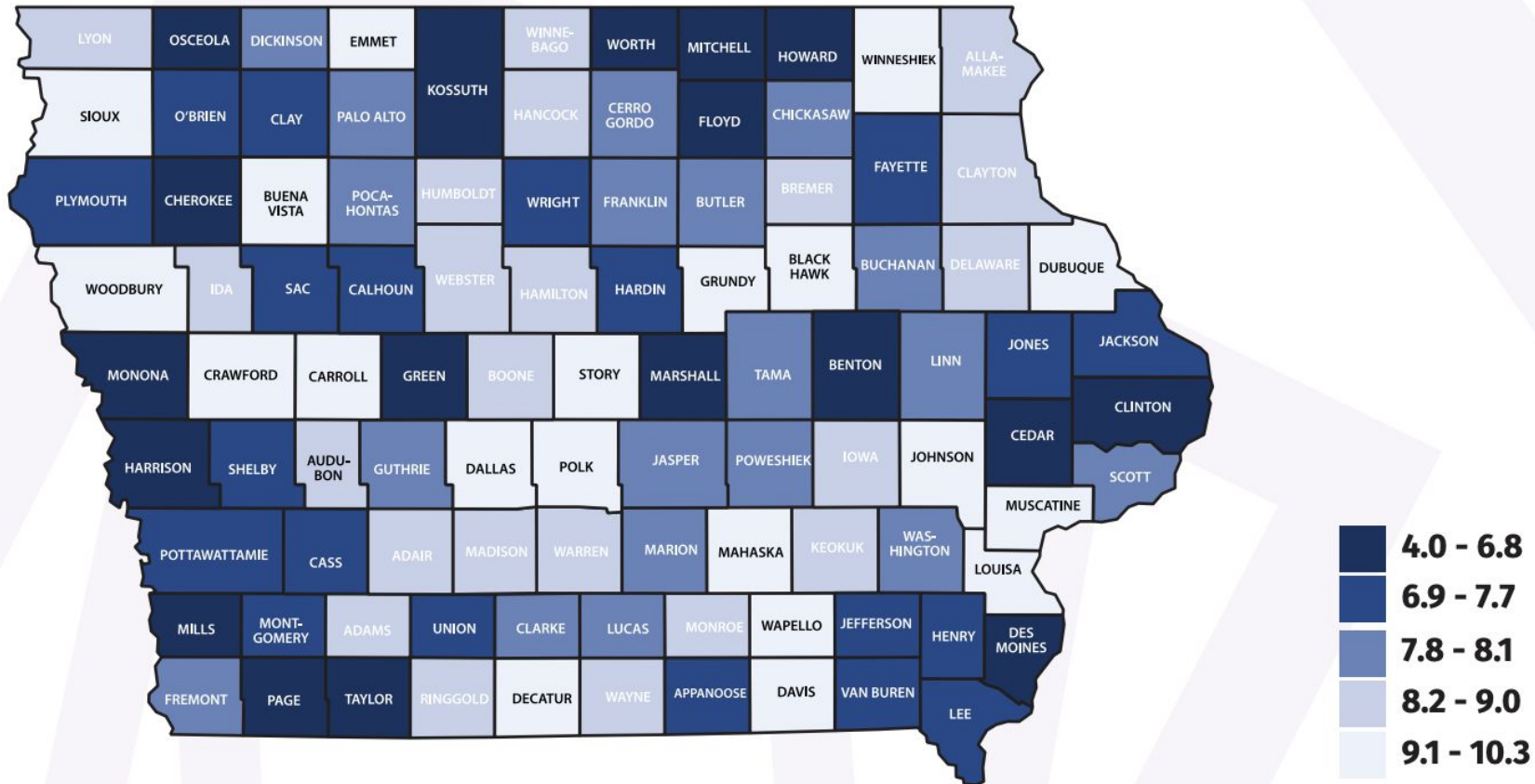
Figure 2: VISN 23 — Iowa Locations



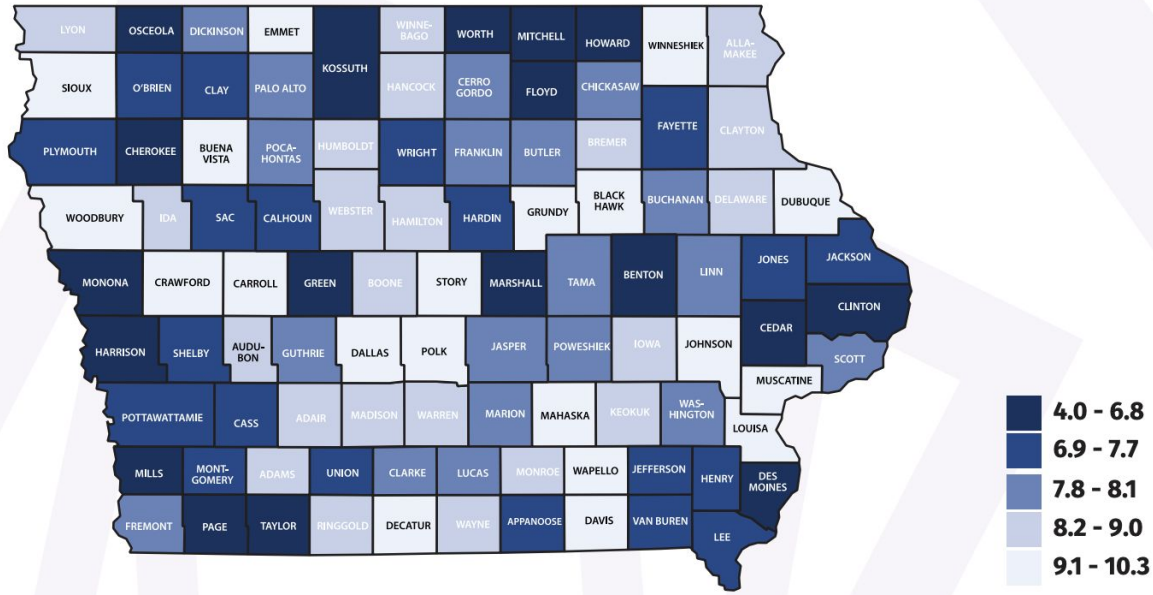
- VA Central Iowa Health System, VA Medical Center
- VA Iowa City Health Care System, VA Medical Center
- Outpatient Clinic
- Outpatient Clinic
- VA Nebraska-Western Iowa Health Care System Outpatient Clinic
- VA Sioux Falls Health Care System Outpatient Clinic

# Iowa Infrastructure

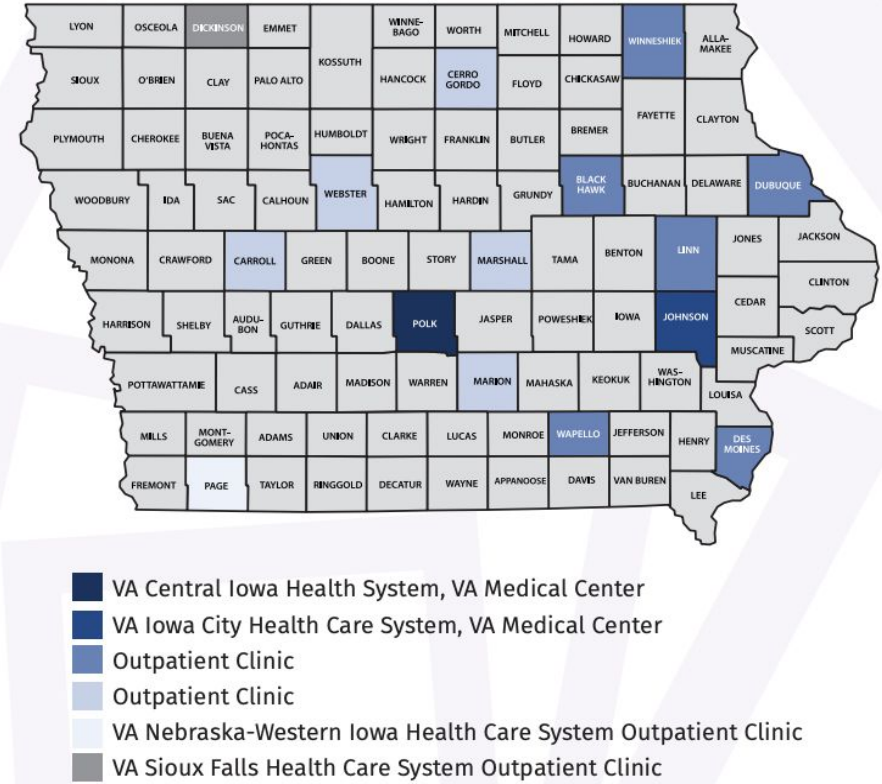
Figure 1: Percentage of Veterans in the Adult Population by County



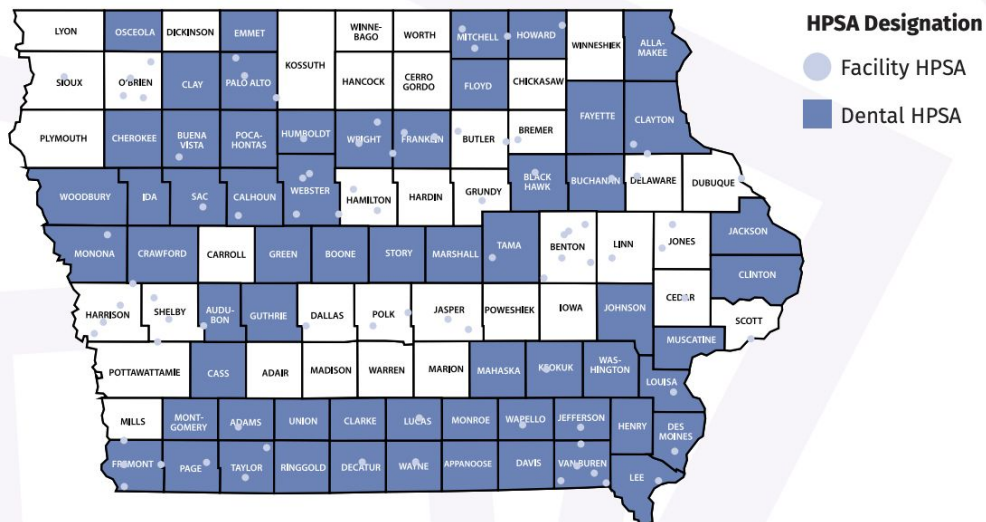
**Figure 1: Percentage of Veterans in the Adult Population by County**



**Figure 2: VISN 23 – Iowa Locations**



**Figure 5: Iowa Federal Dental Health Care Shortage Designations**



**Let's Compare...**



# Social Determinants

**Table 1: Age Range, Education & Income Levels of Iowa Non-Veteran & Veteran Adult Populations**

Age	Nonveterans %	Veterans %
18-24	14.41	3.48
25-34	16.51	10.48
35-44	16.47	9.38
45-54	14.93	13.25
55-64	16.86	15.17
65+	20.82	48.25
Education		
Never attended school	0.19	0.00
Grades 1-8	2.71	1.83
Grades 9-11	5.71	4.46
Grade 12 or GED	30.23	33.27
College 1-3 years	34.63	37.35
College 4+ years	26.53	23.10
Income		
< \$10k	3.62	1.09
\$10k to \$14,999	3.57	2.50
\$15k to \$19,999	5.27	3.52
\$20k to \$24,999	7.34	7.26
\$25k to \$34,999	8.80	10.13
\$35k to \$49,999	14.69	20.33
\$50k to \$74,999	18.10	21.50
\$75k +	38.62	33.68

- Nearly a quarter (22.3%) of Iowa veterans have a **service-connected disability rating** (38,893 veterans).
- Approximately 22,052 Iowa veterans live in homes with “one or more **major problems of quality, crowding, or cost.**”
- Roughly 19.1% of Iowa **veterans pay too much for their housing**, indicating that housing insecurity may be a systemic issue among this population.

## Key Takeaways

Understanding infrastructure and access for Iowa Veterans

- 1 Veterans in Iowa are disproportionately white, male, and residents of rural areas.
- 2 Iowa veterans are experiencing poverty and housing insecurity at higher rates than nonveterans in Iowa.
- 3 Geographically, Iowa veterans are highly concentrated in rural areas, with a large proportion of those veterans considered to be among the aging community. Veterans are also more likely to live in a Health Professional Shortage Area (HPSA).

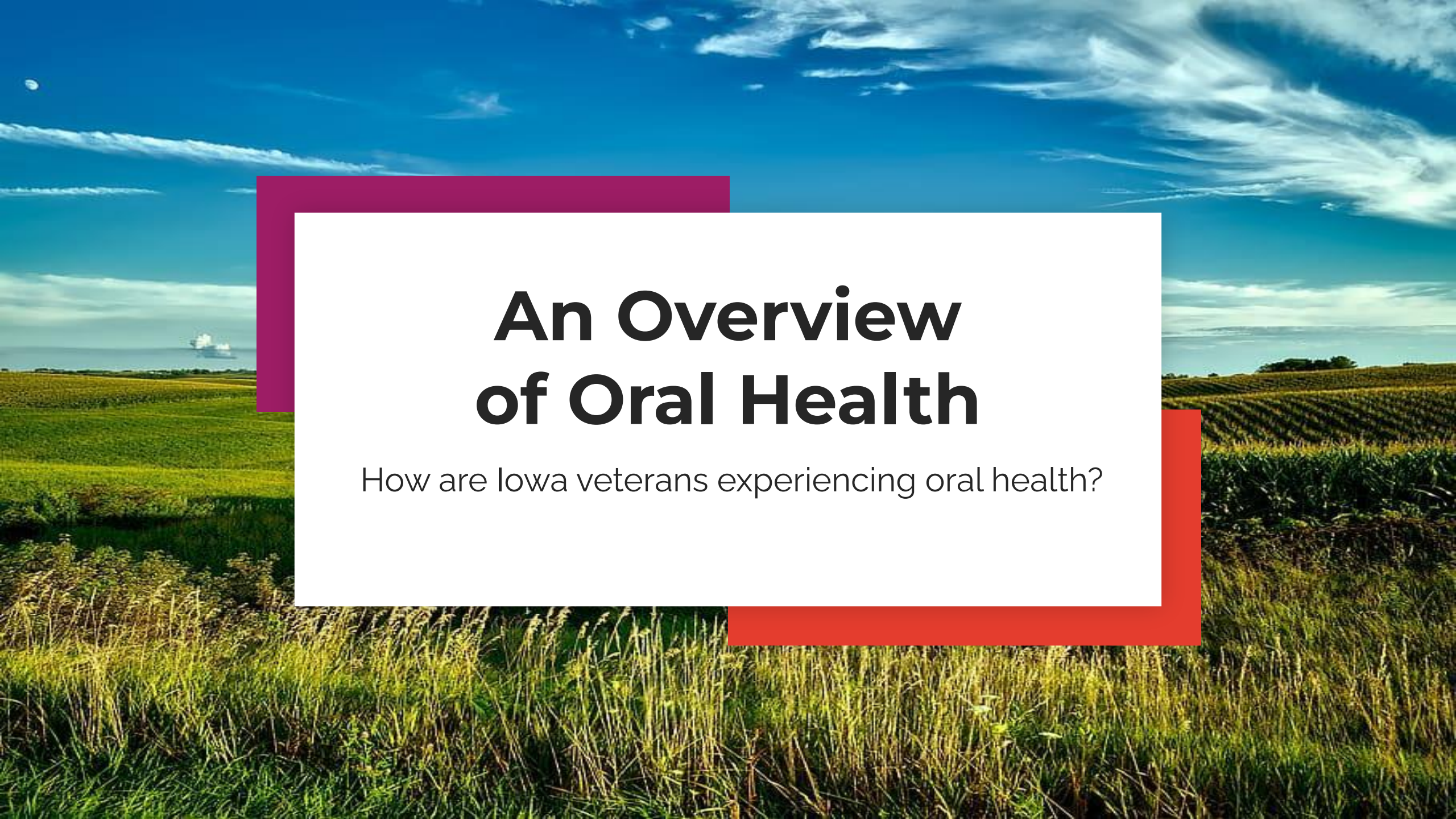
## Key Takeaways

An overview of Iowa healthcare access and care delivery

- 1 There are many dental healthcare access points in Iowa for veterans; however, they are primarily located in urban areas.
- 2 Dental care coverage for many Iowa veterans is limited to Medicaid, VA, and charitable programs, creating potential financial barriers for veterans who are underinsured or do not have employer-paid dental coverage.
- 3 The full scope of veteran access within the available infrastructure is difficult to determine given the limited data and the lack of veteran status indicators collected within some healthcare systems.

In the Chat:  
**Are there other  
complicating factors  
that impact veteran  
oral health in Iowa?**





# An Overview of Oral Health

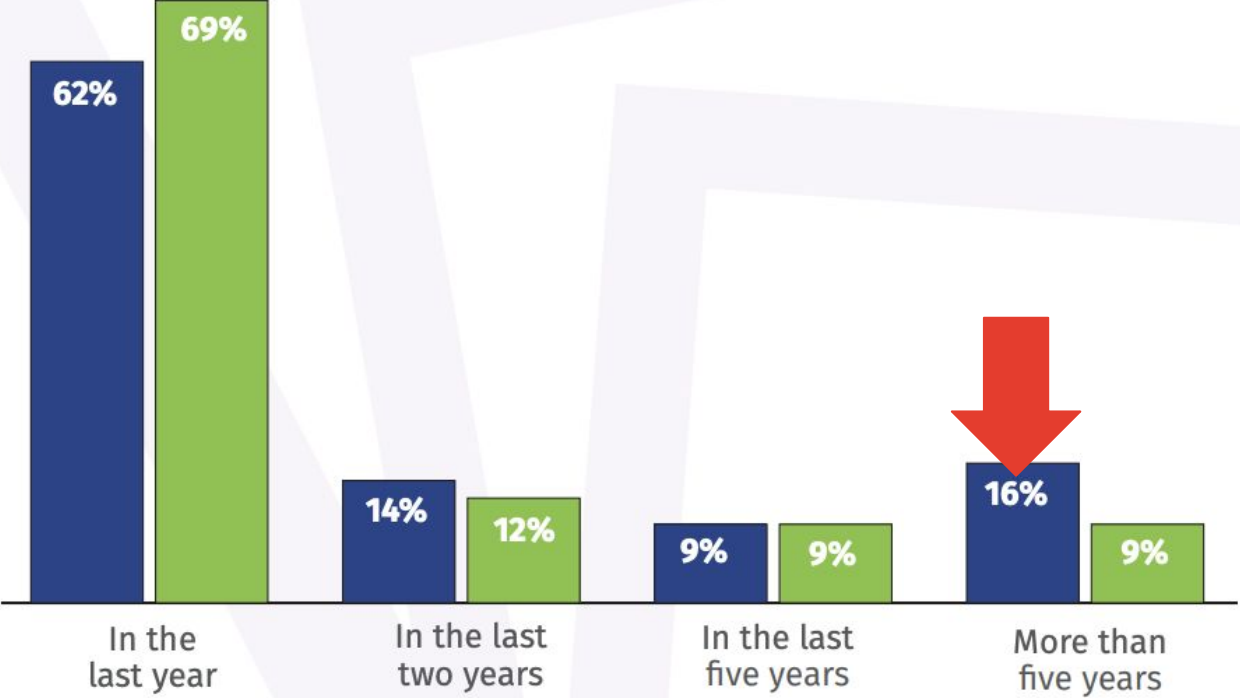
How are Iowa veterans experiencing oral health?



# Veterans in Iowa See the Dentist Less Frequently

Figure 7: Oral Health Care Utilization by Years of Iowa Veteran and Nonveteran Populations

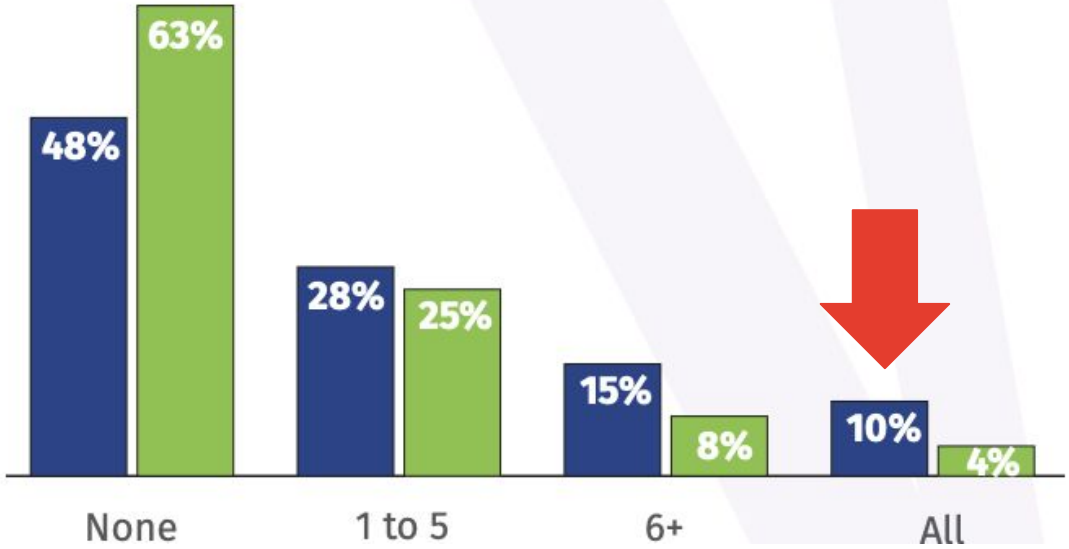
— Veterans  
— Nonveterans



# Tooth Loss is Higher

**Figure 9: Percentage of Tooth Loss in Veteran and Non-Veteran Populations**

— Veterans  
— Nonveterans




**Figure 10: Percentage of Tooth Loss in Rural and Urban Veteran Populations**

— Rural Veterans  
— Urban Veterans



# Veterans Can't Get to the Care



**That's been a challenge for a lot of our veterans, particularly in the rural areas, but even here in [this] County.... We have really good quality providers here, but just to get that veteran to those additional places has been difficult sometimes. And the time frame that that takes as well is really difficult.**

# Veterans Can't Pay For the Care



**Affordability is key... cost [is an issue] for a lot of the veterans, really most of the veterans that we have worked with. It's been many many years since they've had dental care, predominantly due to cost. Cost is a big factor because they haven't been able to afford dental care. It goes years and years and years and then we end up in a situation where there's thousands and thousands of dollar's worth of work to get them into good oral system of health."**



Poll: Which of these barriers have you seen the most in your work?

# Iowa Veterans Have Worse Oral Health

## Key Takeaways

The oral health and well-being of Iowa veterans

- 1 Most oral health indicators show that Iowa veterans have poorer oral health outcomes
- 2 Indicators such as income, education, and age exacerbate those disparities; however, rurality is the largest driver of poor oral health among veterans.
- 3 Some veterans visit a dentist at similar frequency to nonveterans; however, the large disparities in outcomes such as edentulism suggest that optimal oral health is not being achieved through those visits.



# **An Overview of Physical Health**

How are Iowa veterans experiencing overall health & well-being?



# Impacts Beyond the Mouth

Growing evidence connects a healthy mouth with a healthy body. Here are some examples showing why oral health is about much more than a smile:

## High Blood Pressure

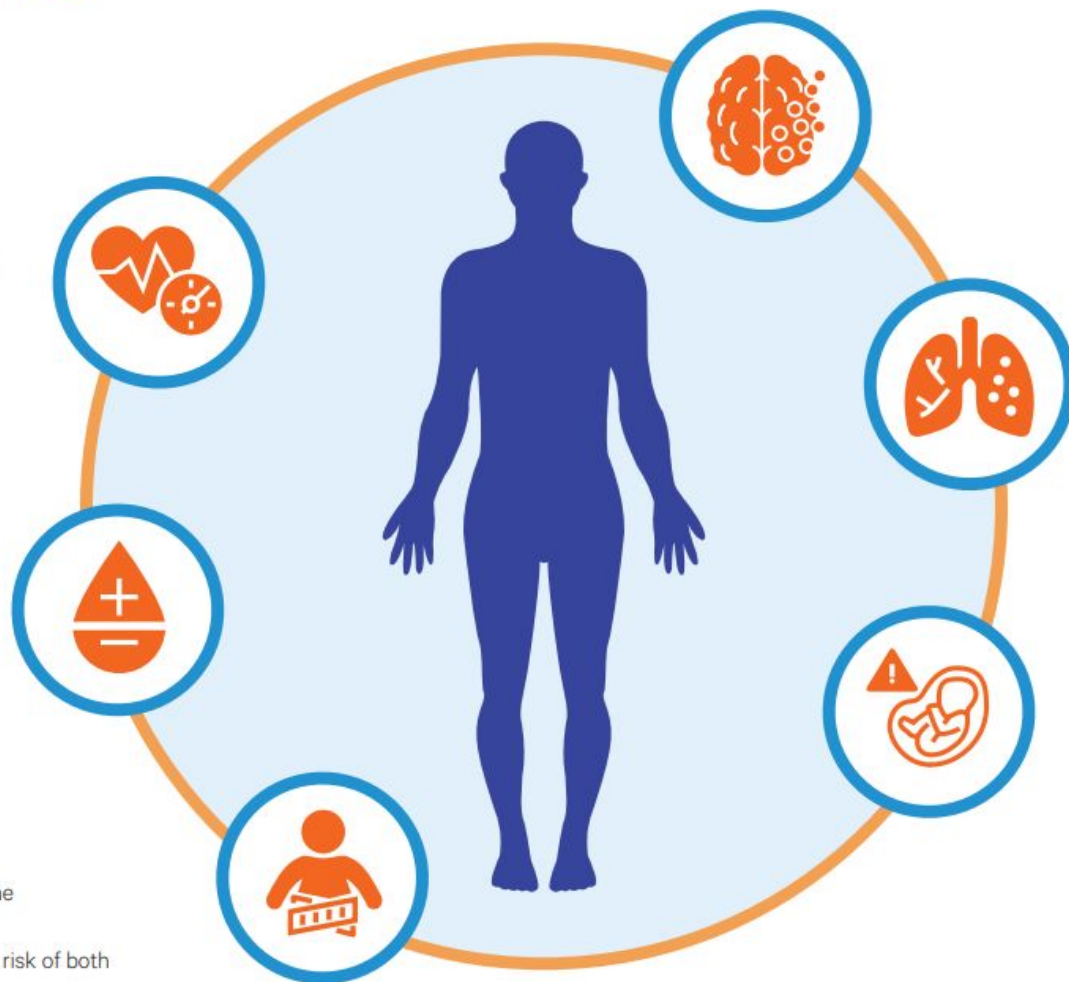
- Putting off dental care during early adulthood is linked to an increased risk of having high blood pressure.<sup>1</sup>
- Patients with gum disease are less likely to keep their blood pressure under control with medication than are those with good oral health.<sup>2</sup>

## Diabetes

- Untreated gum disease makes it harder for people with diabetes to manage their blood glucose levels.<sup>3</sup>
- Diabetes raises the risk of developing gum disease by 86%.<sup>4</sup>

## Obesity

- Brushing teeth no more than once per day was linked with the development of obesity.<sup>5</sup>
- Frequent consumption of sugar-sweetened drinks raises the risk of both obesity<sup>6</sup> and tooth decay among children<sup>7</sup> and adults.<sup>8</sup>



## Dementia

- Having 10 years of chronic gum disease (periodontitis) was associated with a higher risk of developing Alzheimer's disease.<sup>9</sup>
- Researchers report that uncontrolled periodontal disease "could trigger or exacerbate" the neuroinflammatory phenomenon seen in Alzheimer's disease.<sup>10</sup>

## Respiratory Health

- Research shows that improving oral hygiene among medically fragile seniors can reduce the death rate from aspiration pneumonia.<sup>11</sup>
- Patients with ventilator-associated pneumonia (VAP) who engaged in regular toothbrushing spent significantly less time on mechanical ventilation than other VAP patients.<sup>12</sup>
- Improving veterans' oral hygiene reduced the incidence of hospital-acquired pneumonia (HAP) by 92%, preventing about 136 HAP cases and saving 24 lives.<sup>13</sup>

## Adverse Birth Outcomes

- Gum disease among pregnant women is associated with preterm births, low birthweight babies and preeclampsia, a pregnancy complication that can cause organ damage and can be fatal.<sup>14</sup>

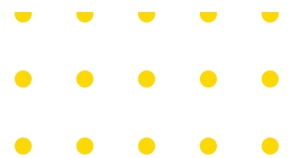


## How does depression affect oral health?

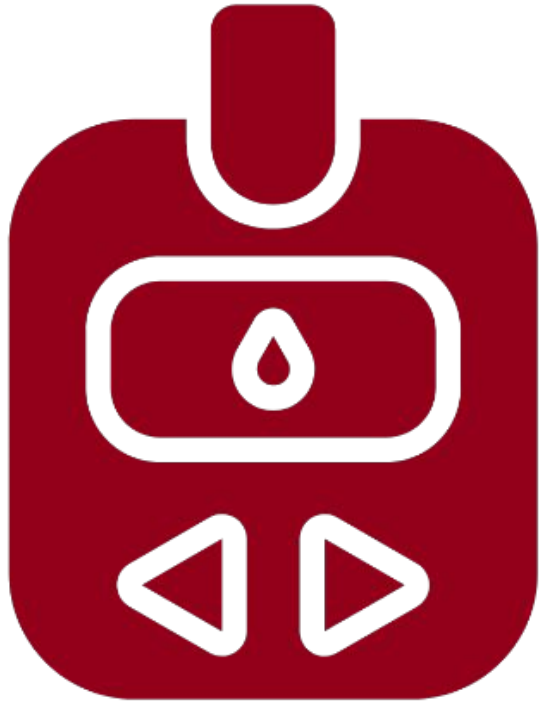
Depression can cause you to neglect your oral health if you aren't able to motivate yourself to do daily tasks like brushing your teeth and flossing. This neglect can cause gum disease, tooth decay, and tooth loss.

Depression can also cause you to seek out unhealthy habits that affect your oral health. Some examples of behaviors and symptoms that may affect your oral health include:

- Eating or drinking sugary or carb-heavy foods. These foods and drinks are major causes of cavities in teeth.
- Smoking, drinking alcohol, or using recreational drugs.
- Dental phobia. Many people with depression become anxious about the decline of their oral hygiene and are afraid to go to their regular dental appointments for routine cleanings.
- Dry mouth from anti-depressant medication. Dryness can increase cavity-causing bacteria in your mouth. Make sure you drink plenty of water to prevent this condition from affecting your teeth.

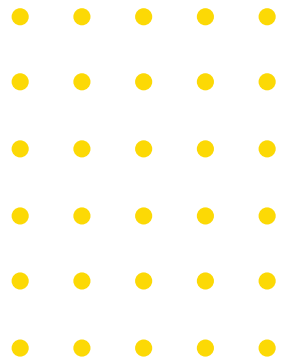


# Chronic Disease Conditions in Veterans



After controlling for factors like income, education, and rurality...

veterans with diabetes were about **40% more likely** to be edentulous than veterans without diabetes.



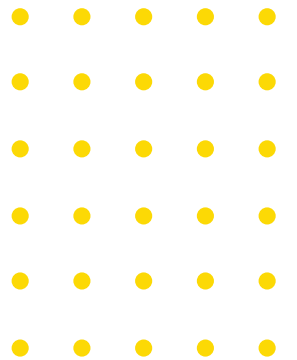
# Chronic Disease Conditions in Veterans

After controlling for factors like income, education, and rurality...



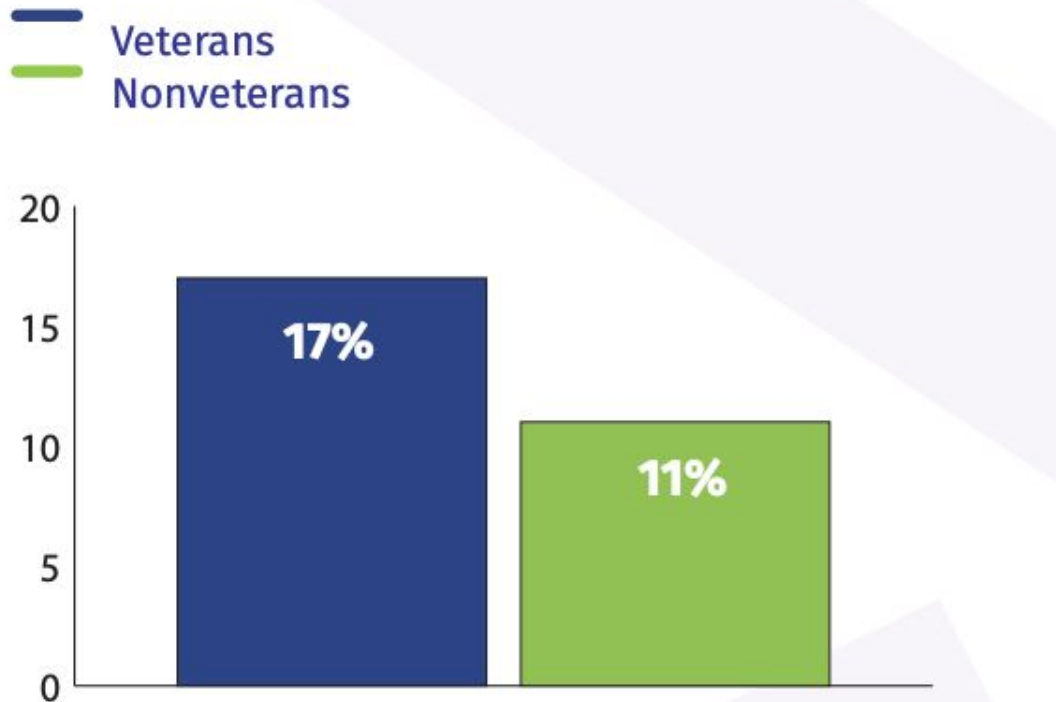
veterans with heart disease were about **30% more likely**

to be edentulous than veterans without heart disease.

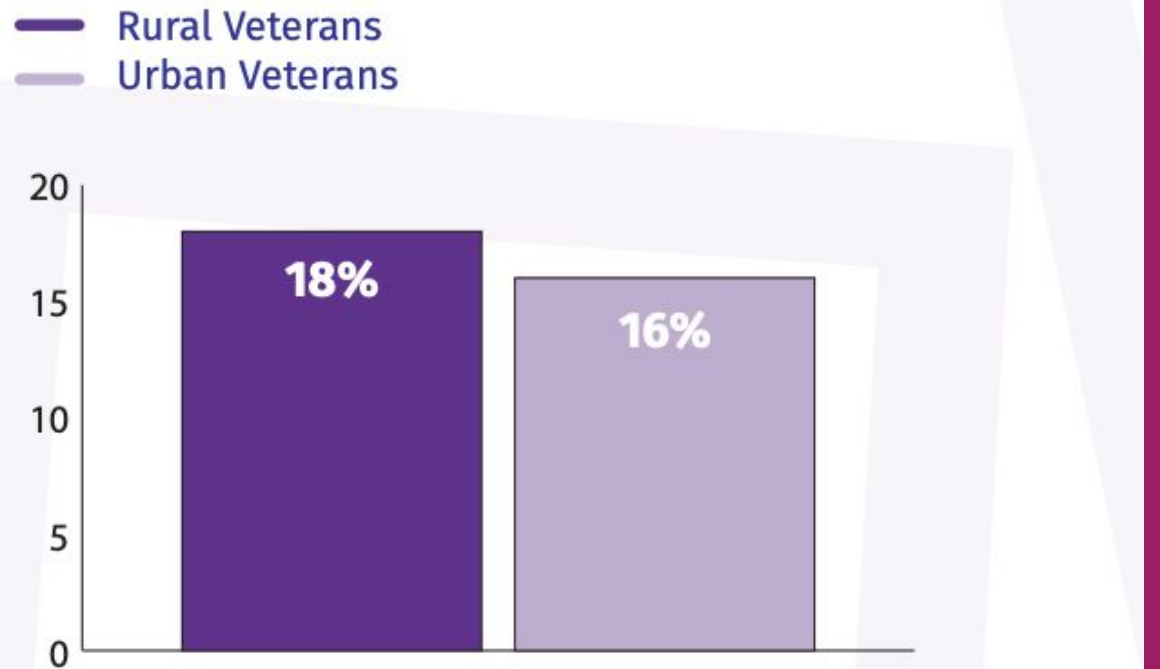


# Iowa Veterans Have More Chronic Disease

**Figure 13: Prevalence of Diabetes by Iowa Veteran Status**



**Figure 14: Prevalence of Diabetes by Rural and Urban Status**

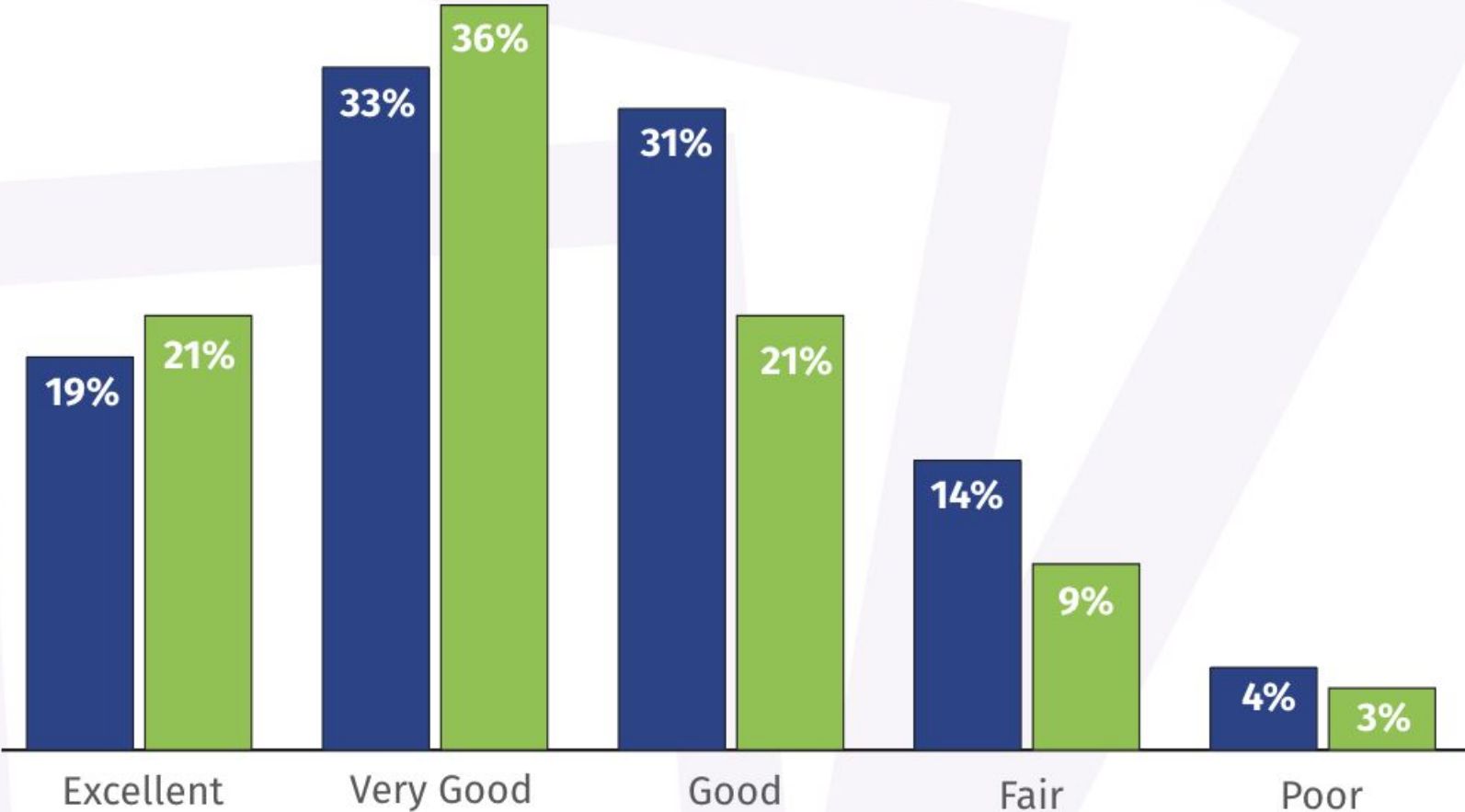




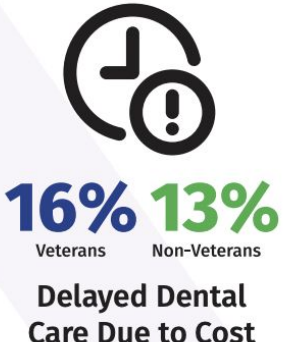
# Iowa Veterans Are Generally Less Healthy

Figure 11: Self-Reported Physical Health Ratings by Iowa Veteran Status

— Veterans  
— Nonveterans



# Addressing Dental Care Access Saves Money



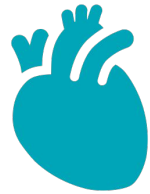
**\$55M** **\$66M**

The VHA Can Save Millions By  
Providing Dental Care To  
Iowa Veterans With **Diabetes**  
and **Heart Disease**.

# How can we leverage collaborative action?



Mental Health



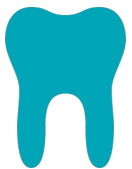
Chronic Disease



Physical Health



Health Literacy



Oral Health



Housing Insecurity



Transportation



Disability

In the Chat:

**How do you partner  
with organizations  
throughout Iowa to  
support veterans?**





# **Collaborative Action for Iowa Veterans**

Strategic Recommendations for Improving  
Oral Health & Wellbeing



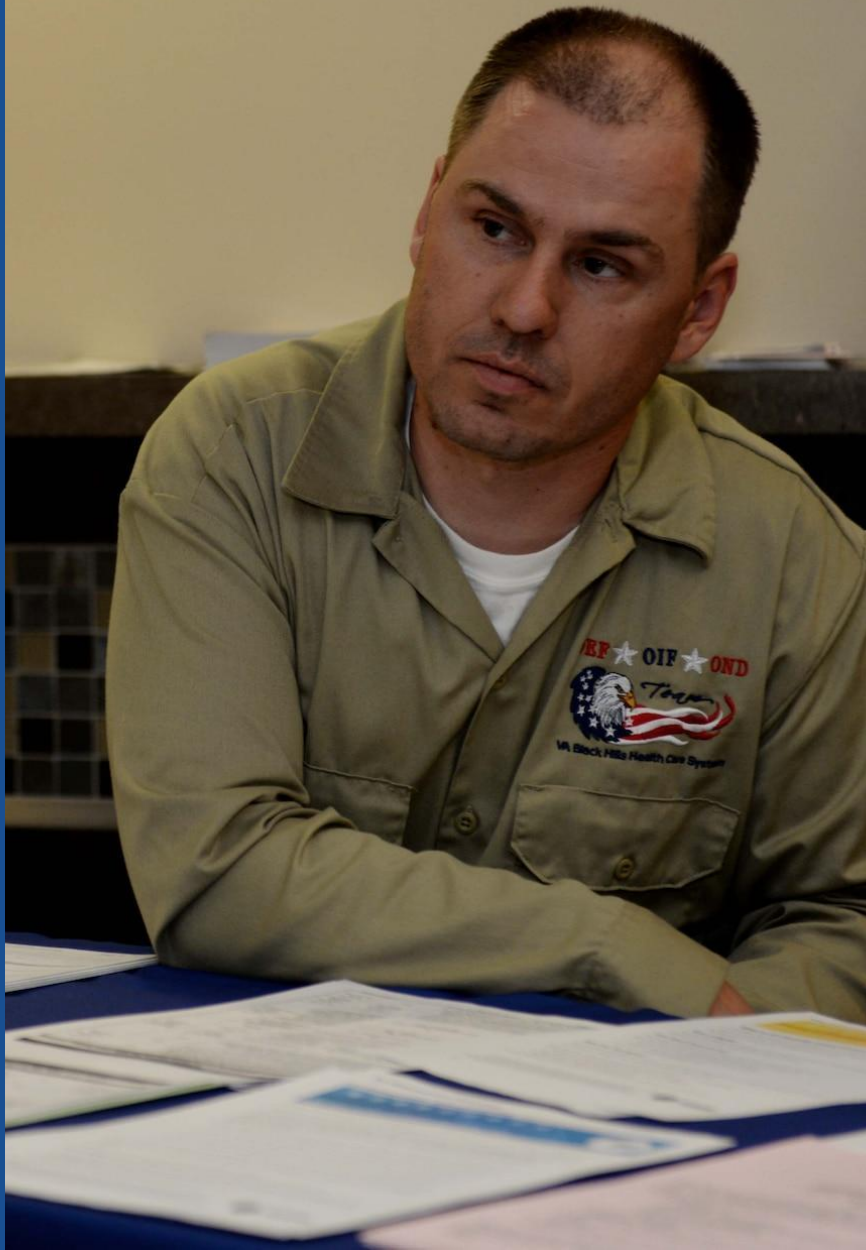
A woman with blonde hair tied back, wearing a light blue button-down shirt and a white skirt, is speaking into a microphone. She is standing outdoors under a white canopy tent. In the background, there are other people, including a man in a military uniform, and a sign that partially reads "BETTER".

# Advocate for VA dental eligibility expansion

Approximately 85% of veterans are not eligible for dental services through the VA, resulting in inadequate access to VA clinics in Iowa. Iowa veterans struggle through a fragmented dental system with many left uninsured or with too many barriers to using dental insurance. As the largest integrated healthcare system in the nation, the VA is best positioned to support the complex healthcare needs of veterans in a holistic setting—and benefit from the cost savings of managing the connection between oral and systemic conditions. A VA expansion of eligibility reduces the burden of sourcing and financing care for Iowa veterans while ensuring culturally responsive care in an integrated environment.

# Consider forming a coalition of veteran oral health advocates

A diverse set of stakeholders including clinicians, advocates, researchers, and veterans who are dedicated to collaboratively addressing oral healthcare disparities among veterans can stimulate change and rally local support. A coalition can serve as a powerful platform for bringing together diverse expertise to address the unique healthcare needs of Iowa veterans. By focusing on a wide range of solutions, the coalition can develop and implement targeted strategies to address disparities in healthcare access and outcomes among Iowa veterans. This collaborative approach can lead to effective and sustainable solutions for improving the oral health of Iowa veterans.



# Ensure veteran patient representation in dental associations and initiatives.

Veterans should have patient representation on advisory boards, health boards, dental boards, and other stakeholder groups to inform solutions from the community voice and perspective. Importantly, these community members should be patients who have lived experience with accessing dental care. Advocates should use suggestions from these community members directly to advance the oral health and well-being of Iowa veterans.





# Develop community-driven educational campaigns for oral health literacy.

Given the concerns Iowa stakeholders articulated regarding oral health education and health literacy, advocates, in partnership with community members, can create educational campaigns focused on the importance of oral health for veterans. Education is key to prevention, and effective educational materials and campaigns that are tailored to the Iowa veteran community can increase prevention efforts.

Disseminating resources through multiple channels, including social media, community events, and partnerships with other organizations, is an easy and cost-effective way to improve oral health literacy and reach Iowa veterans in a targeted manner.



# Consider nontraditional stakeholder collaboration for multifaceted solutions.

Partnering with businesses, educational institutions, insurers, faith communities, and other nontraditional partners can drive creative solutions toward addressing complex oral health disparities faced by Iowa veterans. Increasing funding, infrastructure, and events that provide pro bono dental care are not systemic solutions, but they can bring awareness to the needs of Iowa veterans and serve as an intermediary measure to address urgent or short-term dental needs.



Poll:

**Which of these  
recommendations  
are most actionable  
for you?**





**You Can Shape  
Veteran Oral Health  
In Iowa**



# Ready for Action? Use this Report!



Veteran  
Advocacy



Educating  
Stakeholders



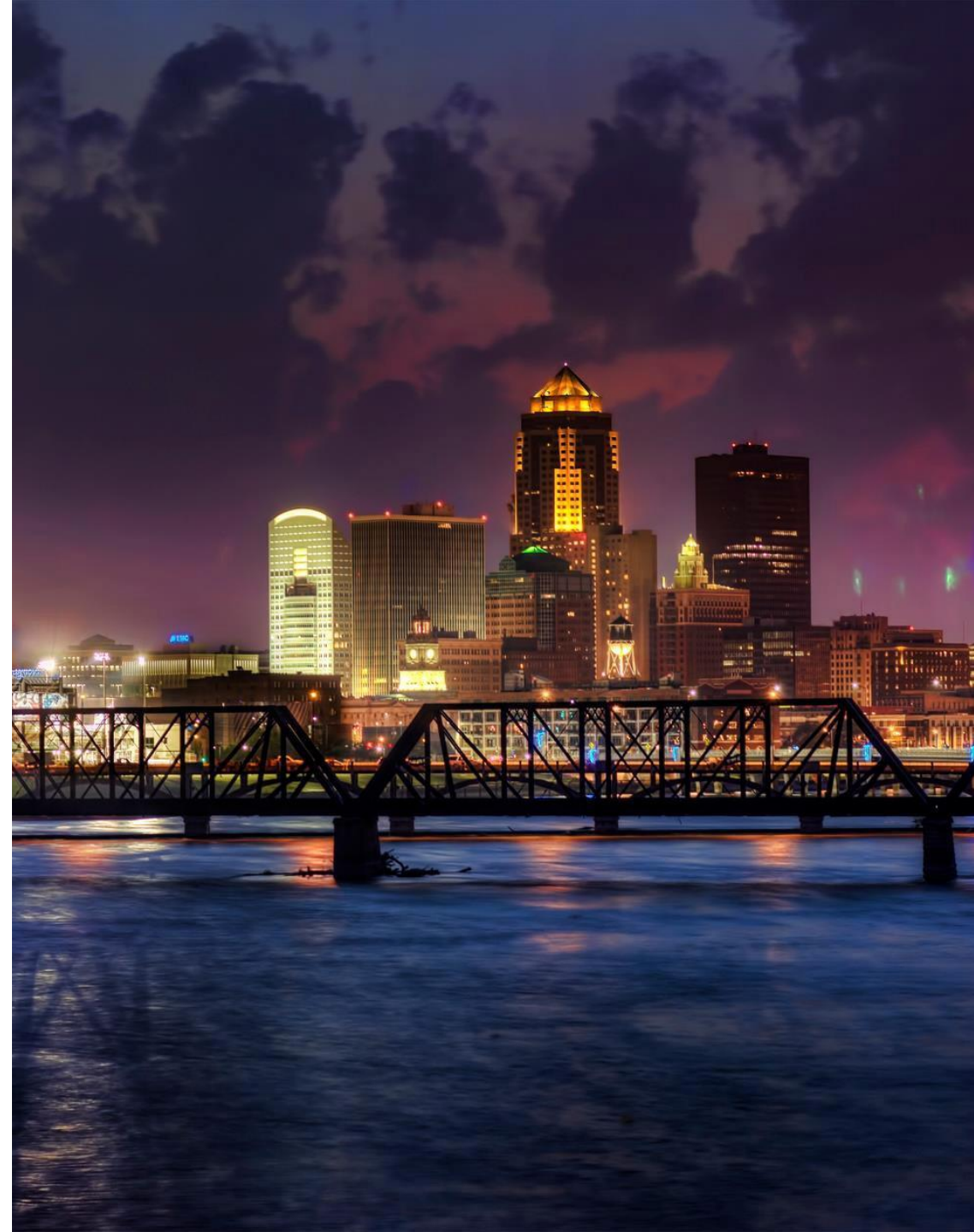
Making Decisions



Seeking Funding

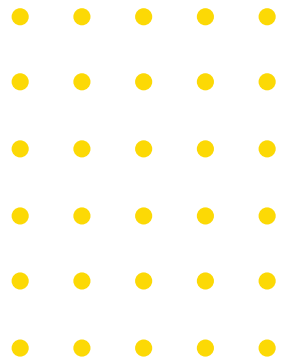
# Join Us in Des Moines Soon!

With support from Delta Dental of Iowa Foundation, AIDPH will be hosting an Iowa Veteran Oral Health Summit in Des Moines **August 13th, 2024**. The summit will serve as a strategic planning session featuring tools, resources, and coalescing action to prepare for next steps.



# Close & Next Steps

- Evaluations are **really important**—we'll use them to inform the summit agenda + areas of activation.
- CEUs are available—the **survey will show up immediately** in your browser at the end of this session.
- Please fill out the **summit interest form** so that you stay updated on logistics as they are confirmed.
- We'll add the **recording of this session + a summary** on the Iowa VOH page via the AIDPH website.
- Don't forget to join us for the **next sessions!**





**AIDPH**

AMERICAN INSTITUTE OF DENTAL PUBLIC HEALTH