

Facts on: Self Rated Oral Health

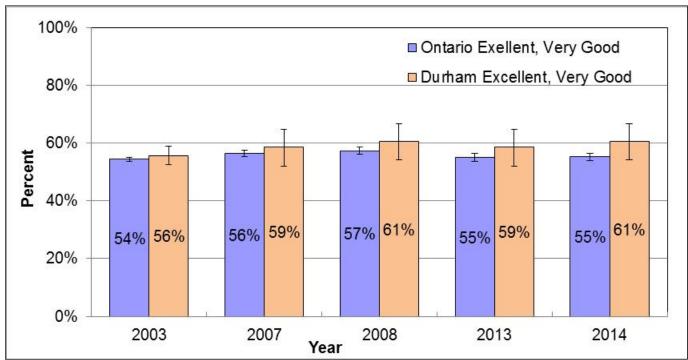
In Durham Region

Highlights April 2016

- In 2014, 61% of the Durham Region residents aged 12 and over rated their oral health as excellent or very good. Rates for both Durham and Ontario remained relatively stable since 2003.
- Percentage of people who rated their oral health as excellent or very good in 2014 ranged from 45% to 64% among 36 Ontario health units. Durham's rate was at the higher end of the range.
- Females, younger people and those with higher income and education, were more likely to have better self-rated oral health.
- Better self-rated oral health was related to less work stress, better general and mental health, as well as higher life satisfaction.

Trend over Time

Figure 1: Self-Rated Oral Health, Ontario and Durham Region, 2003-2014, Ages 12+



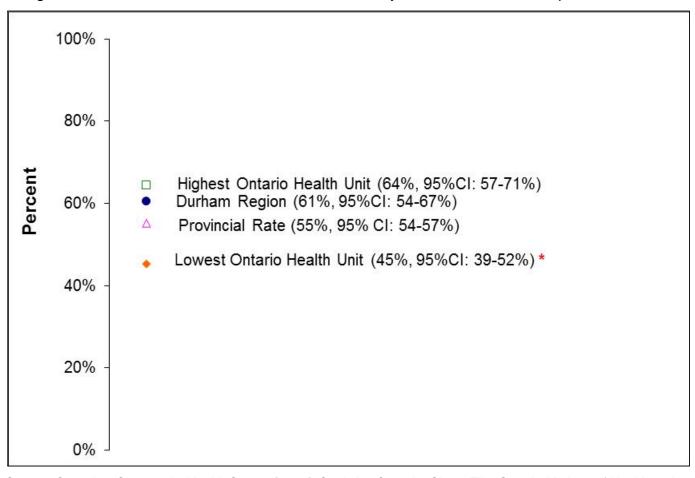
	2003	2007	2008	2013	2014
Ontario Excellent/ Very Good	54%	56%	57%	55%	55%
Durham Excellent/Very Good	56%	59%	61%	59%	61%
Durham Good	31%	30%	29%	30%	29%
Durham Fair and Poor	12%	11%	11%	11%	11%

Source: Canadian Community Health Survey [2003, 2007-2008, 2013-2014]. Statistics Canada, Share File, Ontario Ministry of Health and Long-Term Care

In 2014, 61% of the Durham Region residents aged 12 and over rated their oral health as excellent or very good, similar to Ontario rate of 55%. Rates for both Durham and Ontario remained relatively stable since 2003 (Figure 1).

Provincial Comparisons

Figure 2: Self-Rated Oral Health as Excellent or Very Good, Provincial Comparison, 2014, 12+



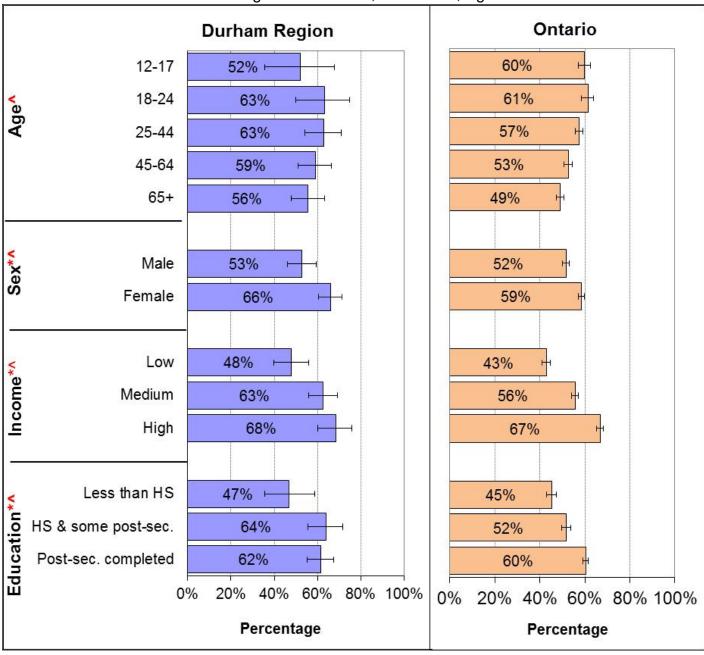
Source: Canadian Community Health Survey [2014], Statistics Canada, Share File, Ontario Ministry of Health and Long-Term Care

The percentage of people who rated their oral health as excellent or very good in 2014 ranged from 45% to 64%, among the 36 Ontario health units. Durham's rate was at the higher end of the range (Figure 2).

^{*:} Statistically significant compared to Durham Region based on p<0.05

Self-Rated Oral Health and the Determinants of Health

Figure 3: Self-Rated Oral Health as Excellent or Very Good by Selected Socio-demographics, Durham Region and Ontario, 2013-2014, Ages 12+



Source: CCHS [2013-2014], Statistics Canada, Share File, Ontario Ministry of Health and Long-Term Care \star : Association between selected socio-demographics and self-rate oral health is significant based on p<0.05 for Durham Region

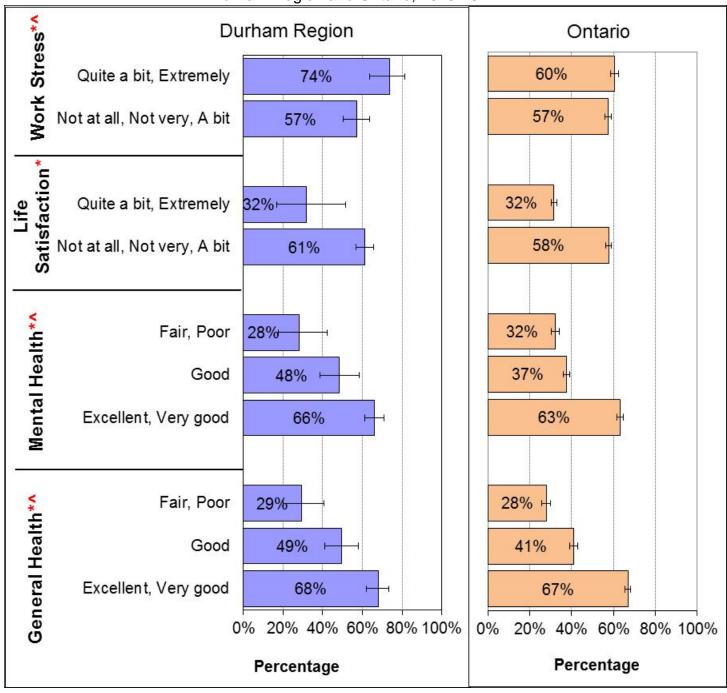
Note: "Less than HS"= Less than high school; "HS & some post-sec" = High school and some post-secondary education; "Post-sec. completed" = Completed post-secondary education

Figure 3 shows the percentage of people who rated their oral health as excellent or very good by selected socio-demographic characteristics in 2013-2014. Younger people, females, and people with higher income and education were more likely to have better self-rated oral health compared to their counterparts. There were no statistically significant differences in self-rated oral health between different age groups for Durham, which is likely due to the small sample size.

^{^:} Association between selected socio-demographics and self-rated oral health is significant based on *p*<0.05 for Ontario

Self-Rated Oral Health and Other Health Outcomes

Figure 4: Self-Rated Oral Health as Excellent or Very Good, by Self-reported Health Outcomes, Durham Region and Ontario, 2013-2014



Source: Canadian Community Health Survey [2013-14], Statistics Canada, Share File, Ontario Ministry of Health and Long-Term Care

Figure 4 shows the percentage of people who rated their oral health as excellent or very good by some self-reported health outcomes in 2013-14. People who had better self-rated oral health tend to also have less work stress, better self-rated general and mental health and higher life satisfaction.

^{*:} Association between selected health outcome and self-rate oral health is significant based on p<0.05 for Durham Region

^{^:} Association between selected health outcome and self-rate oral health is significant based on p<0.05 for Ontario

Data Notes

Date Source: The Canadian Community Health Survey (CCHS) is a cross-sectional survey that collects information related to health status, health care utilization and health determinants for the Canadian population. It surveys a large sample of respondents and is designed to provide reliable estimates at the health region level. Since 2007, data are collected on an ongoing basis with annual releases, rather than every two years as was the case prior to 2007. The CCHS data are collected from persons aged 12 and over living in private dwellings, excluding individuals living on Indian Reserves and on Crown Lands, institutional residents, full-time members of the Canadian Forces, and residents of certain remote regions. Interviews are conducted using computer assisted interviewing, either in person or over the telephone.

Definitions and Survey Questions: Self-rated oral health is one question in the Oral Health 1 module. People are asked the following question:" In general, would you say the health of your teeth and mouth is excellent, very good, fair or poor?"

Data Analysis: The CCHS share file obtained from the Ontario Ministry of Health and Long-Term Care was used for analysis. Data were analyzed using IBM SPSS Statistics 23 Complex Samples. Estimates are weighted using the final CCHS sampling weight. Error bars (I) in the graphs represent the 95% confidence intervals (CI) around the percentage. The true or actual percentage falls within the range of values, 95 out of 100 times. For all variables, response options of 'Refusal', 'Don't Know', 'Not Stated' and 'Not Applicable' were excluded from the analysis.

The CCHS 2013 and 2014 dataset was used for the 'Self-Rated Oral Health and the Determinants of Health' and the 'Self-Rated Oral Health and Other Health Outcomes' analysis. Statistical significance was based on a Chi-square test with a p-value less than 0.05 (p<0.05). A statistically significant difference between groups means that the difference is not likely due to chance.

The income categories of low, medium and high were based on a CCHS derived variable which distributed residents according to the adjusted ratio of their total household income to the low income cut-off corresponding to their household and community size. The ten categories in this variable were grouped with "low" income corresponding to the lowest 30%, "medium" including the fourth 10% to seventh 10%, and "high" corresponding to 80% or higher.

Do You Know?

Oral health is a state of being free from chronic mouth and facial pain, oral and throat cancer, oral sores, birth defects such as cleft lip and palate, periodontal (gum) disease, tooth decay and tooth loss, and other diseases and disorders that affect the oral cavity (World Health Organization).

Oral health is an important part of overall health. Good oral health contributes positively to your physical, mental and social well-being. Cavities and gum disease may contribute to many serious conditions, such as diabetes and respiratory diseases. Untreated cavities can also be painful and lead to serious infections.

Brushing and flossing, following a healthy diet, and visiting the dentist regularly are all part of ongoing oral care for healthy teeth and gums.

For more information on the CCHS, visit http://www.statcan.gc.ca.



