

Oral Health Status of Adults with Disabilities in Nevada: Analysis of the 2022 Behavioral Risk Factor Surveillance System

Key findings

Data from the 2022 Behavioral Risk Factor Surveillance System (BRFSS)

- Overall, more than one-third (33.1%) of adults in NV have at least one disability.
- The most common disability was cognitive disability (15.8% of NV adults).
- Among adults with one or more disabilities 56.8% had visited a dentist in the past year, compared to 63.1% among those with no disability.
- Over half (54.8%) of adults with at least one disability had lost one or more permanent teeth, compared to 45.2% among individuals with no disability.
- Adults with one disability had 37% higher odds of permanent tooth loss, compared to those without disability (95% CI:1.06-1.79; p: 0.017), while those with two or more disabilities had 63% higher odds of permanent tooth loss compared to those without disabilities (95% CI:1.14-2.34; p: 0.008).

Oral health is a crucial component of well-being, yet it remains an often-overlooked area, particularly for adults with disabilities. Individuals with disabilities face unique barriers to accessing dental care, including physical, financial, and social challenges, which can contribute to significant disparities in oral health outcomes.¹ This fact sheet highlights key findings on the oral health status of adults with disability in Nevada (NV). This factsheet is particularly relevant as it provides a framework for public health professionals and policymakers to develop targeted interventions aimed at improving oral health equity for adults with disabilities in NV.

Methods

We analyzed data from the 2022 Behavioral Risk Factor Surveillance System (BRFSS), an annual survey collected by the US Centers for Disease Control and Prevention (CDC) to explore the oral health status of adults with disability in NV.

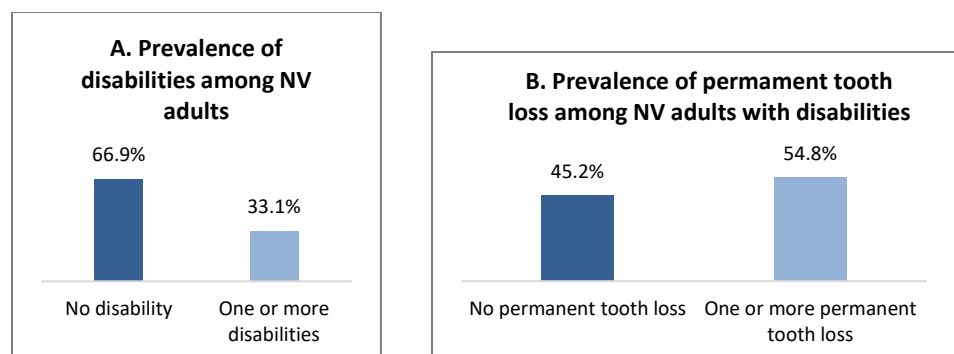
NV adults with disability and permanent tooth loss.

- Overall, more than one-third (33.1%) of adults in NV have at least one disability. [Figure I.A]
- The most common disability was cognitive disability (15.8% of NV adults).
- Among adults with one or more disabilities 56.8% had visited a dentist in the past year, compared to 63.1% among those with no disability.
- Over half (54.8%) of adults with at least one disability had lost one or more permanent teeth, compared to 45.2% among individuals with no disability. [Figure I.B]

Association between disability and permanent tooth loss among adults in NV.

- Adults with one disability had 37% higher odds of permanent tooth loss, compared to those without disability (95% CI:1.06-1.79; p: 0.017), while those with two or more disabilities had 63% higher odds of permanent tooth loss compared to those without disabilities (95% CI:1.14-2.34; p: 0.008).

Figure I. Weighted % of one or more permanent teeth loss by disability status among NV Adults (18+ years) in 2022



Implications and Recommendations

To improve care for adults with disabilities in Nevada, public health efforts should focus on enhancing provider communication, expanding workforce capacity, and increasing accessibility to dental services, particularly for low-income and rural populations.² We propose the following specific recommendations:

A. Patient-Provider Education

- Enhance communication strategies: Providers should be trained to use clear and accessible language to accommodate individuals with cognitive disabilities, who form the largest subgroup of adults with disabilities in Nevada.
- Promote shared decision-making: Encourage providers to involve patients with disabilities in discussions about their oral and general health care plans to address the high prevalence of permanent tooth loss.

B. Workforce Development and Operations

- Expand workforce capacity in rural areas: Given that one in ten adults with disabilities and tooth loss are in non-metropolitan counties, prioritize recruiting and retaining healthcare providers in these regions to improve accessibility.

C. Health Information Exchange (HIE)

- Promote data integration: Facilitate communication between dental and medical providers to coordinate care for adults with both disabilities and permanent tooth loss, particularly those with two or more disabilities.

D. Payment Mechanisms

- Expand Medicaid insurance coverage: Advocate for comprehensive dental benefits for adults with disabilities, including coverage for preventive care and prosthetics for those with tooth loss.

E. Community and Policy Initiatives

- Community outreach programs: Develop targeted programs to raise awareness of oral health issues among adults with disabilities, especially in metropolitan counties where the majority of affected individuals reside.
- Policy advocacy: Promote legislation that prioritizes funding for oral health initiatives and accessibility improvements in dental practices serving adults with disabilities.

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