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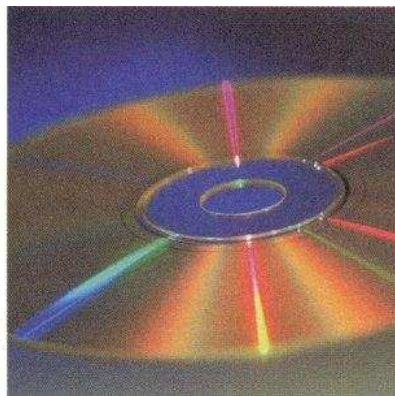
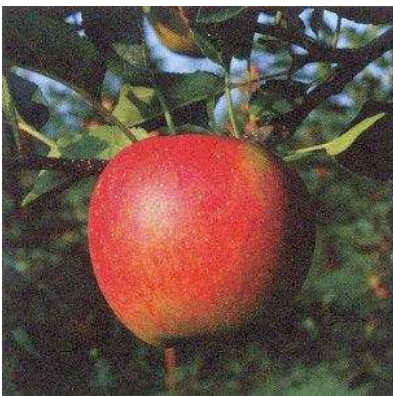
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Medway Adult Oral Health Survey 2009



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May 2010

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Medway Adult Oral Health Survey 2009

May 2010

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Contents

Page number

Acknowledgements.....	iv
1. Executive Summary	1
2. Background and Methodology.....	7
2.1. Summary.....	7
2.2. Background.....	8
2.3. Medway Adult Oral Health Survey 2009	9
2.3.1. Aims and Objectives	10
2.3.2. Methods.....	10
2.3.3. Dental Survey Sampling.....	11
2.3.4. Response to the Survey and Representativeness of the sample	12
3. Results: Demographics	17
3.1. Summary.....	17
3.1.1. Characteristics of Respondents	18
3.1.2. Locality and Deprivation	18
3.1.3. Education and Employment of Respondents	23
4. Results: Self Reported Oral Health Status	24
4.1. Summary.....	24
4.2. Dentition	25
4.2.1. Loss of all Natural Teeth.....	25
4.2.2. The number of teeth among dentate adults	27
4.2.3. Filled, crowned teeth and implants	29
4.2.4. Dentures.....	31
4.2.5. Self Perceived Need to see a Dentist	31
5. Results: Impact of Teeth on Quality of Life	35
5.1. Summary.....	35
5.1.1. The Questions.....	36
5.1.2. Painful Aching	36
5.1.3. Embarrassment, Tenseness and Self-Consciousness	38
6. Results: Dental Access and Attendance Pattern.....	40
6.1. Summary.....	40
6.1.1. Edentate Adults: Reason for Visiting the Dentist	42
6.1.2. Dentate Adults: Reason for Visiting the Dentist	47
6.1.3. Dentate Adults: Distance to the dentist.....	50
6.1.4. Dentate Adults: Most Recent Visit	50
6.1.5. Dentate Adults: Reasons for Not Visiting the Dentist.....	55
6.1.6. Edentate Adults: Last Dental Treatment	56
6.1.7. Dentate Adults: Last Dental Treatment	56
6.1.8. Edentate Adults: Anxiety and nervousness	66
6.1.9. Dentate adults: Anxiety and Nervousness	66
6.1.10. Edentate Adults: Visiting the Dentist	71

6.1.11.	Dentate Adults: Visiting the dentist.....	71
6.1.12.	Dentate Adults: Cosmetic Treatment.....	78
7.	Results: Normal Dental Routine	79
7.1.	Summary.....	79
7.1.1.	Edentate Adults: Frequency of Cleaning Teeth.....	80
7.1.2.	Dentate Adults: Frequency of Cleaning Teeth	80
7.1.3.	What do they use to clean their teeth	83
7.1.4.	Use of Tobacco	85
8.	Conclusion.....	88

Tables

Table 1	Sampling by Locality
Table 2	Percent of population in survey
Table 3	Locality by IMD 2007
Table 4	Non-Responders – Demographics
Table 5	Demographics by sex
Table 6	Demographics by age
Table 7	All Adults. Dentition by socio-demographic variables; number of teeth
Table 8	Dentate Adults. Dentition by socio-demographic variables; mean and median
Table 9	Mean number of filled or crowned teeth – dentate adults by age and sex
Table 10	If you went to the dentist tomorrow, do you think you would need any treatment?
Table 11	Dentate and edentate adults
Table 12	Relationship between painful aching and finding it uncomfortable to eat for dentate and edentate adults
Table 13	Edentate Adults: Reasons for visiting dentist by age and sex
Table 14	Dentate Adults: Reason for visiting dentist by demographics
Table 15	Dentate Adults: Location of dentist by demographics
Table 16	Dentate Adults: Most recent dental visit using time groupings as in the National Survey 1998
Table 17	Dentate Adults: Most recent dental visit using time groupings for Vital Signs
Table 18	Edentate Adults: Place where received last dental treatment by demography
Table 19	Dentate Adults: Place where received last dental treatment by demography
Table 20	Dentate Adults: Who paid for last dental treatment
Table 21	Dentate Adults: Crosstabs anxiety and nervousness about some treatments
Table 22	Dentate Adults: Anxiety and Nervousness about some kinds of treatment by demographics
Table 23	Those who said they feel anxious by length of time since last saw the dentist
Table 24	-
Table 25	-
Table 26	Frequency of Teeth Cleaning by demographics
Table 27	Response to question asking what they use to clean their teeth by sex

Table 28	Response to question asking what they use to clean their teeth by education level
Table 29	Response to question asking what they use to clean their teeth by deprivation quintile
Table 30	Use of tobacco and dentist response

Figures

Figure 1	Deprivation by age
Figure 2	Number of filled / crowned teeth – dentate respondents
Figure 3	Need for treatment tomorrow by deprivation quintile
Figure 4	Dentate Adults. Quality of life by age – those experiencing problems often/very often
Figure 5	Dentate Adults: Place of last treatment by age
Figure 6	Place of last treatment by deprivation quintile
Figure 7	Funding for last treatment by deprivation quintile
Figure 8	I don't see any point in seeing the dentist unless I need to by deprivation quintile
Figure 9	I don't see any point in visiting the dentist unless I need to by length of time since last visit
Figure 10	Dentate Adults: Frequency of teeth cleaning by age

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I. Executive Summary

Background and Methodology

The aim of the oral health survey was to provide self-reported oral health information about Medway residents at a local level to inform commissioning and service development and to provide useful baseline information against which the success of oral health improvement programmes could be measured. This report presents the results of the Medway Adult Oral Health Survey, the first of its kind in this locality. The survey was based on a representative sample of people aged 16 and over living in Medway and registered with an NHS General Medical Practitioner (GP) in Medway.

A random sample was drawn, stratified by locality; sub-samples were taken in proportion to the size of each locality, resulting in a total sample of 8000. A self completion postal survey was used asking a selection of questions from the National Adult Dental Health Survey in order to provide comparative baseline information on oral health of adults. Questions included Demographics, Self-Reported Oral Health Status, Dental Access and Attendance Pattern.

The true response rate was 39.7%, ranging from 41.1% in Gillingham / Rainham to 39.4% in Rochester / Strood and 37.9% in Chatham. There was a better response rate from women (46.1%) than men (33.1%), and with increasing age. A higher proportion of non-responders lived in the more deprived areas of Medway.

Demographics

This section sets out the profile of responders to the survey. Tables 5 and 6 summarise the demographic features of the sample, firstly by sex and then by age. Males comprised 41% of the sample and females 59%. In Gillingham and Rainham where 42.6% were male compared to 39.9% in Chatham and 39.2% in Rochester and Strood. The respondent profile included more people in the older age groups, increasing from 10.5% aged 16-24 and 11.3% aged 25-34 to 19.8% aged 55-64 and 24.1% aged 65 and over. Chatham had the youngest profile with 42.0% of responders aged under 45 compared to 36.2% in Gillingham and Rainham and 37.5% in Rochester and Strood.

Quintile 1 (most deprived) had more younger people and less older people, whilst quintiles 4 and 5 had fewer younger people and more older people. 91.7% of respondents said they were White, 3.2% Asian / Asian British and 1.7% Black / Black British. 25.9% of respondents had no formal qualification; 27.5% had O levels or GCSEs 5.2% ONC or BTEC, 8.6% A levels / highsers, 8.9% had a higher qualification below degree level and 11.0% had a degree. 49.0% of those with no formal were aged 65 and over and 27.9% were aged 55-64. 52.7% of respondents were currently employed - 32.3% full time, 11.4% part time, 6.8% self employed. 26.3% said they were retired, 3.2% unemployed / looking for work, 4.2% unable to work because of disability or ill health, and 5.0% were caring for the home and family / dependents. 3.9% were students.

Self Reported Oral Health Status

The survey asked how many teeth people had including crowns. 325 respondents (10.5%) did not answer this question. The range for the number of natural teeth was 0 to 32 with a mean of 23.14 and a median of 26. 4.5% of the sample said they had no teeth; 16.2% estimated they had less than 20 teeth and 69.6% reported they had 20 or more. 77.5% of those with no teeth were aged 65 and over. 6.2% of the responders in the most deprived quintile were edentulous reducing to 3.6% amongst the least deprived quintile. People with no formal qualification (and likely to be older) were more likely to be edentulous.

The mean number of teeth for dentate adults was above 27.0 until age 44, then reduced to 25.4% at 45-54, 22.8% at 55-64 and remained at 20 and above until age 70 and over. 70.5% of women and 62.4% of men with their own teeth reported 21 or more teeth and the mean for dentate women was 24.76 compared to 23.74 for men. 62.9% in the most deprived quintile had 21 or more teeth compared to 72.2% in the least deprived; people with no formal qualification were more likely to have fewer teeth, they also had the lowest mean (20.63) for dentate people.

12.2% with their own natural teeth said they had no fillings or crowns. The mean number of filled or crowned teeth was 6.02 and the median 5. 46.7% of dentate respondents had less than 5 filled or crowned teeth, 77.9% had less than 10. 22.3% of all respondents had a denture, and 3.5% had implants; this was 25.5% of male respondents and 20.6% of female respondents. 58.6% of men and 62.3% of women who possessed a denture were aged 65 and over. 20.4% of people with a denture had no natural teeth. 97.0% of edentulous people said they had a denture. 32.4% of

those with their own natural teeth thought they would need treatment if they went to the dentist tomorrow, and 14.4% said they didn't know; 8.7% of those with no natural teeth said they would need treatment and 9.4% said they didn't know.

Impact of Teeth on Quality of Life

- Painful aching in the mouth, discomfort eating, self consciousness, feeling tense, and embarrassment had the biggest impact on quality of life based on our survey
- Painful aching decreased with age. There was an increased likelihood of people having a painful aching or finding it uncomfortable to eat also feeling tense
- Discomfort with eating was more common in the middle and older age groups. There was a relationship between painful aching and finding it uncomfortable to eat. Edentate adults were more likely to experience discomfort eating unrelated to painful aching
- Younger and middle aged people seem to have been more likely to suffer embarrassment, tenseness or self-consciousness. Older people seem to have been less likely to feel tense because of problems with their teeth, mouth or dentures
- Locality was not statistically significant for quality of life impact questions.
- Amongst dentate adults painful aching was most important in younger people with a peak aged 25-34; discomfort in eating reached a peak in middle age 45-54 as did feeling self conscious and being embarrassed. Feeling tense followed the same pattern as painful aching with the highest prevalence of often / very often at 25-34

Dental Access and Attendance Pattern

48.6% of edentate adults had not seen a dentist for 5 years or more. 18.1% had been in the last 12 months, these were more likely to be younger and/or female; men were more likely to go than women, mainly they said when they were having trouble. 86.0% of edentate adults said they preferred to visit a dentist nearer to home; the average distance to the dentist was 3.5 miles.

When asked why they didn't visit in the past 12 months, 7.1% of edentate adults (who had not visited in the past 12 months) said they always feel anxious, 69.0% said their teeth are all right and they don't need to go, 5.3% said they cannot afford NHS treatment, 19.5% said they didn't go for other reasons. 60.3% of dentate adults said they visited the dentist regularly; more women (64.4%) visited regularly than men (54.3%); men were more likely to go only if they are having

trouble. Asian and black dentate respondents were more likely to say they only visited when they were having trouble.

People from Gillingham and Rainham were more likely to visit the dentist regularly; this was not the case in Chatham. Dentate adults from the most deprived parts of Medway were less likely to go regularly and more likely to go when they were having trouble. Dentate adults from more highly educated groups (degree, A level) were more likely to visit regularly and those with no formal education likely to visit when they were having trouble. Dentate adults who were full time employed, unemployed and unable to work for health reasons were least likely to go regularly; more unemployed people and those not working for health reasons said they never go.

77.9% of dentate respondents said they go to a dentist nearer home. Only 5.1% said nearer work, although 17.0% chose a dentist about the same distance from home and work; the mean distance from home to dentist for dentate adults was 3.9 miles; the median was 2 miles. 33.1% of dentate adults had been within the past 3 months, 30.9% between 4 and 9 months, 19.3% between 10 and 24 months and 14.6% 25 months or longer. Women were more likely to have been to the dentist in the past 9 months. Younger people were less likely to have been to the dentist more recently. People of white and mixed race had been to the dentist more recently than those who were Asian or Black.

The locality differences were not significant, those related to deprivation quintile were. People from the 2 least deprived quintiles had visited more recently than those from the most deprived quintiles. 63.6% of respondents said they received their last dental treatment from an NHS dentist. 28.9% said they went to a private dentist. 41.6% who went to an NHS dentist had their treatment paid for by the NHS, 35.4% were mixed NHS and self funded, and 18.6% were completely self funded.

23.3% of edentate adults said they always feel anxious about going to the dentist; 38.7% of all dentate adults said they felt anxious about going to the dentist and 58.7% said they felt nervous about some kinds of treatment. There was a significant relationship between likelihood of being anxious and nervous.

28.0% of all dentate adults said they didn't see any point in visiting the dentist unless they needed to; men (32.7%) were more likely to hold this view than women (24.7%). People living in the more deprived quintiles were more likely to have said there was no point in going unless they needed to. Retired people, unemployed and those unable to work because of disability or ill health were more likely to have said they saw no point in visiting unless they needed to. There was enough statistical evidence to support these arguments.

People who have visited the dentist recently were much less likely to have said there was no point in visiting if they didn't need to. 64.2% of dentate respondents said they would like to be able to drop in to see the dentist. 40.5% of dentate people considered they needed cosmetic treatment; only half those who considered they needed cosmetic treatment (50.3%) would be willing to pay. Women (43.9%) were more likely to consider they needed cosmetic treatment than men (35.5%) and would be more willing to pay

Normal Dental Routine

10.0% of edentate respondents said they did not clean their teeth every day; 44.6% cleaned them once a day and 45.4% cleaned them twice a day or more. Only 2.4% of dentate adults said they cleaned their teeth less than once a day; 23.5% cleaned their teeth once a day and 74.1% cleaned them twice or more. Men cleaned their teeth less regularly compared to women, and only 63.8% cleaned their teeth twice a day or more compared to 80.6% of women. There was no relationship between cleaning teeth and age. 3.9% of people with no formal qualification did not to clean their teeth every day and least likely to clean their teeth twice a day or more (69.0%), people with a degree (78.2%) or O level / GCSE (77.2%) were most likely to clean their teeth at least twice a day.

79.8% of dentate adults said they used fluoride toothpaste, 3.3% smoker's toothpaste and 17.7% used another toothpaste. There was no relationship between gender and type of toothpaste used. 28.6% used an electric toothbrush; 35.2% of women used dental floss and 45.8% used a mouth wash compared to 18.7% of men who used dental floss and 36.8% who used a mouthwash. There were no relationship between localities or deprivation quintiles in terms of the type of toothpaste used, except for the use of smokers toothpaste.

18.8% of dentate adults said they were using tobacco; 17.2% smoked daily. A slightly higher proportion of men used tobacco than women. More younger people up to the age of 44 used tobacco compared to older people, the proportion dropped to 8.4% after the age of 65. 27.6% of dentate adults living in the most deprived quintile in Medway used tobacco compared to those living in the least deprived quintile (12.2%). 35.7% of dentate adults had been asked by their dentist if they use tobacco and 8.6% had been given smoking advice. A greater proportion of people living in the more deprived quintiles had been asked if they smoked and to have been offered advice.

2. Background and Methodology

2.1. Summary

- The aim of the oral health survey was to provide self-reported oral health information about Medway residents at a local level to inform commissioning and service development and to provide useful baseline information against which the success of oral health improvement programmes could be measured
- This report presents the results of the Medway Adult Oral Health Survey, the first of its kind in this locality
- The survey was based on a representative sample of people aged 16 and over living in Medway and registered with an NHS General Medical Practitioner (GP) in Medway
- A random sample was drawn, stratified by locality; sub-samples were taken in proportion to the size of each locality, resulting in a total sample of 8000
- A self completion postal survey was used asking a selection of questions from the National Adult Dental Health Survey in order to provide comparative baseline information on oral health of adults
- Questions included Demographics, Self-Reported Oral Health Status, Dental Access and Attendance Pattern
- The true response rate was 39.7%, ranging from 41.1% in Gillingham / Rainham to 39.4% in Rochester / Strood and 37.9% in Chatham
- There was a better response rate from women (46.1%) than men (33.1%), and with increasing age
- A higher proportion of non-responders lived in the more deprived areas of Medway

2.2. Background

The National Health Service (NHS) dental contract, which was introduced in April 2006, and associated legislation (Statutory Instrument 2006 No. 185) placed a duty on Primary Care Trusts to commission NHS dental services to meet local needs. It is now a statutory duty of Primary Care Trusts to carry out oral health surveys to inform local commissioning (*The Functions of Primary Care Trusts (Dental Public Health) (England) Regulations, 2006*). This has recently been reiterated in the Department of Health (DH) document *Directions to Primary Care Trusts concerning the exercise of Dental Public Health functions 2008*. Additionally, *Commissioning NHS primary care dental services: meeting the NHS operating framework objectives* (Department of Health, 2008) affirms that local service developments should be based on local needs assessments. The programme of Medway oral health surveys will ensure the Primary Care Trust meets these requirements. Services would therefore be made available to people with the greatest need, thereby providing value for money and reducing health inequalities.

NHS Medway Public Health Directorate wishes to use information from the survey to develop robust local commissioning plans and oral health strategies; this will be used to inform dental sections in the annual public health reports. In addition, the survey will help NHS Medway towards achieving World Class Commissioning competencies which include engaging public and patients, collaboration with clinicians, working with community partners, management of knowledge and needs assessment, prioritizing investments and managing the local health system (Department of Health, 2007).

Until now there have been no local data on adult oral health from patients' or professionals' perspectives at lower geographic levels. There had been no local oral health surveys currently undertaken in Medway. A survey of Health and Lifestyle in Kent and Medway 2001, carried out by the West Kent Health Authority, included questions about access to dental services as well as smoking, alcohol and diet and exercise. The results from this can be compared to the new survey.

Previous national oral health surveys have only provided information at regional level for adults and at Primary Care Trust level for schoolchildren; these are not sensitive enough to fulfil commissioning requirements as outlined in the NHS Operating Plan. More detailed information of

oral health and oral health behaviour is required for commissioning of dental services in the Medway area to meet the needs of local people and to reduce oral health inequalities. World Class Commissioning has visions of dramatically reducing health inequalities and enabling people to live healthier and longer lives (Department of Health, 2007).

2.3. Medway Adult Oral Health Survey 2009

This study was a postal questionnaire survey of a random sample of Medway residents aged 16 years and older and registered with an NHS General Medical Practitioner (GP) in Medway. A selection of questions from the National Adult Dental Health Survey has been used in order to provide comparative baseline information on the oral health of adults. The study therefore provides important data which may be used to provide a local baseline, to inform Primary Care Trust commissioning of oral health services, and to facilitate the evaluation of oral health-related services and initiatives.

This study has been developed for Medway by a Steering Group brought together for the purpose. This group included representation from public health, dental primary care and academia.

National surveys of the dental health of adults have been undertaken decennially since 1968 in England and Wales, and since 1978 for the UK (Kelly et al, 2000). The Department of Health has stipulated that Primary Care Trusts are required to provide or secure the provision of oral health surveys for assessment and monitoring, and for planning and evaluation. Surveys will be in accordance with the NHS (England) Dental Epidemiology Programme and timetable; and in accordance with nationally agreed protocols. The National Adult Dental Survey was to take place in 2009, with reports made available by the end of 2010. The published results of these national surveys contain data for geographically large regional areas.

Much research has been carried out to test the validity of questionnaire surveys and to develop socio-dental indicators of oral health-related quality of life. A series of measures have been constructed to examine oral health from the patient perspective. These include Oral Health Impact Profile (OHIP) which consists of 49 questions, and the shorter version of the scale OHIP-14 which consists of 14 questions (Nuttall et al, 2001; Slade, 1997; Locker, 1988). These are oral health impact assessment tools, which may be used for individual patients to look at health

outcomes. The national Adult Dental Health Survey includes various validated questions, which assess oral health from the patient perspective (Kelly et al, 2000).

2.3.1. Aims and Objectives

Aim

The aim of the oral health survey was to provide self-reported oral health information about Medway residents at a local level to inform commissioning and service development. In addition, the survey aimed to provide useful baseline information against which the success of oral health improvement programmes could be measured.

Objectives

The objectives of the survey were:

- To establish the self-reported oral health status of the adult population living in Medway.
- To establish and investigate the self-reported impact of poor oral health, dental experiences, dental knowledge, attitude and behaviour, dental care and oral hygiene practices of adults living in Medway.
- To describe the findings by age, gender, ethnicity and socio-economic status.
- To satisfy the statutory duty of NHS Medway to carry out oral health surveys to inform local planning of services.
- To provide standardised information for comparison locally over time and nationally with other Primary Care Trusts undertaking similar surveys.
- To make recommendations for planning and commissioning of NHS dental services in Medway, based on the identified local oral health needs.

2.3.2. Methods

A random cross sectional sample of adults aged 16 and over resident in Medway was drawn from the NHS register. The sample was asked to complete a postal questionnaire survey of the oral health.

The Chair of East Kent Research Ethics Committee and the University of Kent Ethics Committee both advised that the survey would be classed as a service evaluation and that Research Ethics approval was not required. Research Governance approval was obtained from Medway Primary Care Trust. The Local Dental Committee was informed that the study was taking place.

A prize was offered to enhance response rate; 84.9% of responders returned the Prize Draw card so they could be entered into the Draw.

2.3.3. Dental Survey Sampling

The sampling frame of names and addresses of all adults aged 16 and over in Medway from the GP Registration list was obtained from the Kent Primary Care Agency; this included 222691 cases. The information also included sex, date of birth, NHS number and GP practice code of each individual. The file was checked for duplicate records by checking the NHS number before proceeding with the sampling.

The database file was extracted into Excel then exported into Access. The sample was stratified by the following three localities:

- Gillingham and Rainham
- Chatham
- Rochester and Strood

Locality and electoral ward data were then mapped via postcode to the name and addresses supplied. In the files provided three wards were unallocated to a locality. These were rural wards and were possibly unallocated because there are no GP practices in them. In order to ensure rural areas were properly represented the three wards were then allocated to the locality that was relevant geographically (i.e. Peninsula in Gillingham and Rainham, Cuxton & Halling in Rochester & Strood, and Strood Rural in Rochester & Strood).

Records without a postcode (2 records) were excluded from sampling. 14156 records (6%) were not allocated to a locality (i.e. reasons include being registered with a GP in Medway but living outside the Medway area). These records were not included in the final sampling procedure, resulting in a final sampling frame of 208533.

The random sample stratified by locality was drawn using Microsoft Access. In order to remain representative to the population the locality sub-samples were drawn in proportion of the size of each locality resulting in a total sample of 8000. The proportions sampled were 30.4% Chatham, 43.7% Gillingham and Rainham, 25.9% Rochester and Strood (Table 1):

Table 1
Sampling by Locality

Locality	Population Total	Proportion	Sample
Chatham	63419	30.4%	2432
Gillingham & Rainham	91063	43.7%	3496
Rochester & Strood	54051	25.9%	2072
Total	208533	100%	8000

2.3.4. Response to the Survey and Representativeness of the sample

8000 questionnaires were posted out; 3118 (39.0%) were returned, 239 (3.0%) people refused to take part or were too old or ill and 143 (1.8%) were returned by the post office or because they had moved away. Thus the true response rate (i.e. the response from the 7857 valid post outs (total posted minus returns but including refusals) was 39.7%.

The response rate was higher in Gillingham / Rainham (41.1%) than in Rochester / Strood (39.4%) or Chatham (37.9%). Since the locality of Gillingham / Rainham is more populous than the other two localities nearly half the respondents were from this locality.

The information in Table 2 uses the Medway PCT information database (supplied by the Dental Department). It has not been possible to break this down to age within sex as the population data was not available. This analysis reveals a better response rate with increasing age even for age 85 and over; it also confirms the better representativeness of the sample for the Gillingham / Rainham population.

Table 2**Percent of population in survey (using Medway PCT Locality Information)**

	16-24	25-44	45-64	65-84	85+	Male	Female
Chatham	1.03%	1.15%	1.93%	2.26%	2.16%	0.93%	1.39%
Gillingham and Rainham	1.34%	1.30%	2.26%	3.15%	1.78%	1.28%	1.65%
Rochester and Strood	0.97%	0.96%	1.66%	1.96%	1.01%	0.83%	1.25%

The response from females was much greater than from males. The overall response for females was 46.1% and from males 33.1%. Overall there was a poorer response from younger people with only 31.7% of 25-44 year olds responding compared to 44.7% of 45-64 year olds and 57.7% of 65-74 year olds. Although response rate at age 75 and over was 46.6%, the percent of people refusing to take part increased with age to 15.2% in this group. The resulting sample for women was weighted towards the younger age group whilst for men there were more people in the middle age groups.

The age profile mirrored the population in Chatham where 43.6% of the population was aged 16-44 but was low for the other two localities, in Gillingham and Rainham it was 40.4% and in Rochester and Strood 40.6% were aged 16-44 ¹.

Medway is considered to be one of the most deprived areas in the south east. The IMD 2007 score was 19.55 and Medway ranked 150 in the national scoring system where Liverpool ranks 1 and Hackney 2 and were the most deprived and Hart ranked 354 and Wokingham 353 and were the least deprived local authorities. Scores within Medway ranged from parts of Luton and Wayfield, Gillingham North Chatham Central and the most deprived area of River ward (super output 015E) with scores of 44.24 to 58.79 to parts of Rainham, Hempstead and Wigmore and one area of River (super output 007D) with scores of 2.93 to 4.75.

¹ PCT Locality profile

In the study, post codes were used to assign a super output area to individuals thus assigning an IMD score and rank within both national and Kent and Medway scores. Analyses have used these rankings on the results grouped into quintiles to compare the least and most deprived quintiles and the effect of increasing deprivation on dental health. In our survey respondents from Chatham were more likely to be deprived. On national rankings 14.1% of Chatham respondents were in the most deprived group compared to 4% from both Gillingham / Rainham and Rochester / Strood. Using the England classification there was an increase in response with decreasing deprivation; 31% of those surveyed who fell into the most deprived quintile responded compared to 44.3% of those in the least deprived quintile. Level of deprivation did not relate to the likelihood they refused / were too old or ill.

Table 3

Locality by IMD 2007 (quintiles Medway respondents - 1 being most deprived)

		IMD 2007 (quintiles Medway respondents - 1 being most deprived)					
		1	2	3	4	5	Total
Locality	Chatham	294 32.9%	128 14.3%	212 23.7%	95 10.6%	164 18.4%	893 100.0%
	Gillingham and Rainham	169 12.0%	297 21.1%	240 17.1%	363 25.8%	338 24.0%	1407 100.0%
	Rochester and Strood	154 19.2%	188 23.5%	171 21.3%	167 20.8%	121 15.1%	801 100.0%
Total		617 19.9%	613 19.8%	623 20.1%	625 20.2%	623 20.1%	3101 100.0%

The differences were more marked but less consistent for the Medway classification. Using the Medway rankings 32.9% of Chatham respondents were in the most deprived group compared to 12.0% of Gillingham / Rainham respondents and 19.2% of Rochester / Strood respondents. To put it differently 47.6% of all respondents in the most deprived quintile came from Chatham whilst 53.8% of respondents in the least deprived quintile came from Gillingham and Rainham (Table 3).

Non-response to the survey

Table 4 displays the demographic characteristics of the sample who did not respond to the survey, broken down by those from informed us they did not wish to take part (including for reasons such as being too ill or too old) and by those from whom there was no response at all. This analysis reveals that a greater proportion of non-responders were male (66.9%) compared to female (53.9%) and were younger, with 69.8% of 16-24 year olds and 72.5% of 25-34 year old not responding compared to 47.3% of those aged 65 or older.

A higher proportion of non-responders lived in the more deprived areas of Medway, with 67.3% living in the most deprived quintile compared to 55.4% in the most affluent quintile. There was little difference in non-response in relation to locality areas.

Table 4
Non-Responders - Demographics

% are out of 7857 valid post outs		No response	Refusal/too old/too ill	All non- responders
Total	All	4500 57.3%	239 3.0%	4739 60.3%
Sex	Male	2498 64.5%	94 2.4%	2592 66.9%
	Female	2002 50.3%	145 3.6%	2147 53.9%
Age	16-24	740 69.4%	4 .4%	744 69.8%
	25-34	909 71.8%	9 .7%	918 72.5%
	35-44	941 63.8%	14 .9%	955 64.7%
	45-54	787 58.3%	20 1.5%	807 59.8%
	55-64	581 46.9%	43 3.5%	624 50.4%
	65+	542 37.1%	149 10.2%	691 47.3%
Locality	Chatham	1419 59.6%	60 2.5%	1479 62.1%
	Gillingham and Rainham	1917 55.7%	112 3.3%	2029 59.0%
	Rochester and Strood	1164 57.3%	67 3.3%	1231 60.6%
Deprivation (IMD) Medway quintile - 1 being most deprived				
	1	999 64.6%	41 2.7%	1040 67.3%
	2	924 59.3%	56 3.6%	980 62.9%
	3	940 59.8%	41 2.6%	981 62.4%
	4	809 51.2%	41 2.6%	850 53.8%
	5	828 51.7%	60 3.7%	888 55.4%

3. Results: Demographics

3.1. Summary

- This section sets out the profile of responders to the survey. Tables 5 and 6 summarise the demographic features of the sample, firstly by sex and then by age
- Males comprised 41% of the sample and females 59%. In Gillingham and Rainham where 42.6% were male compared to 39.9% in Chatham and 39.2% in Rochester and Strood.
- The respondent profile included more people in the older age groups, increasing from 10.5% aged 16-24 and 11.3% aged 25-34 to 19.8% aged 55-64 and 24.1% aged 65 and over
- Chatham had the youngest profile with 42.0% of responders aged under 45 compared to 36.2% in Gillingham and Rainham and 37.5% in Rochester and Strood
- Quintile 1 (most deprived) had more younger people and less older people, whilst quintiles 4 and 5 had fewer younger people and more older people
- 91.7% of respondents said they were White, 3.2% Asian / Asian British and 1.7% Black / Black British
- 25.9% of respondents had no formal qualification; 27.5% had O levels or GCSEs 5.2% ONC or BTEC, 8.6% A levels / highsers, 8.9% had a higher qualification below degree level and 11.0% had a degree. 49.0% of those with no formal were aged 65 and over and 27.9% were aged 55-64
- 52.7% of respondents were currently employed - 32.3% full time, 11.4% part time, 6.8% self employed. 26.3% said they were retired, 3.2% unemployed / looking for work, 4.2% unable to work because of disability or ill health, and 5.0% were caring for the home and family / dependents. 3.9% were students

3.1.1. Characteristics of Respondents

Males comprised 41% of the sample and females 59%. There were less younger men in the sample compared to women with the balance gradually shifting with increasing age (Table 4) In addition the sample was an old sample with more people in the older age groups, increasing from 10.5% aged 16-24 and 11.3% aged 25-34 to 19.8% aged 55-64 and 24.1% aged 65 and over (Table 5) 54% of respondents described themselves as married, 10.1% as living as a couple, 16.4% were single / never married, 2.5% separated, 7.2% divorced and 7.5% widowed.

91.7% of respondents said they were White, 3.2% Asian / Asian British and 1.7% Black / Black British. The sample contained a lower proportion of white males (40.7%) to females (59.3%) than other ethnic groups (for example there are 44.0% Asian males to 56.0% females) (Table 4) The sample of white people was older than other ethnic groups, 10.3% of white males was aged 16-24 increasing to 20.2% aged 55-64 and 25.0% aged 65 and over. By contrast 73.6% of the black sample (53 people) were aged between 25 and 54. The Asian sample (100 people) was also younger with 61% aged less than 45 (Table 5)

3.1.2. Locality and Deprivation

In Gillingham and Rainham 42.6% were male compared to 39.9% in Chatham and 39.2% in Rochester and Strood (Table 5) In contrast Chatham has the youngest profile with 42.0% of responders aged under 45 compared to 36.2% in Gillingham and Rainham and 37.5% in Rochester and Strood (Table 6)

Table 5
Responders - Demographics by sex

		All	Male	Female	Total
Age	16-24	321 10.4%	117 36.4%	204 63.6%	321 100.0%
	25-34	347 11.2%	117 33.7%	230 66.3%	347 100.0%
	35-44	516 16.6%	181 35.1%	335 64.9%	516 100.0%
	45-54	541 17.4%	227 42.0%	314 58.0%	541 100.0%
	55-64	613 19.8%	277 45.2%	336 54.8%	613 100.0%
	65+	763 24.6%	351 46.0%	412 54.0%	763 100.0%
	All	3101 100.0%	1270 41.0%	1831 59.0%	3101 100.0%
Ethnicity	White	2845 93.8%	1157 40.7%	1688 59.3%	2845 100.0%
	Mixed	24 .8%	11 45.8%	13 54.2%	24 100.0%
	Asian or Asian British	100 3.3%	44 44.0%	56 56.0%	100 100.0%
	Black or Black British	53 1.7%	24 45.3%	29 54.7%	53 100.0%
	Other ethnic group	12 .4%	3 25.0%	9 75.0%	12 100.0%
	All	3034 100.0%	1239 40.8%	1795 59.2%	3034 100.0%
Locality	Chatham	893 28.8%	356 39.9%	537 60.1%	893 100.0%
	Gillingham and Rainham	1407 45.4%	600 42.6%	807 57.4%	1407 100.0%
	Rochester and Strood	801 25.8%	314 39.2%	487 60.8%	801 100.0%
All	3101 100.00%	1270 41.0%	1831 59.0%	3101 100.0%	

Deprivation (IMD) Medway quintile - 1 being most deprived					
	1	617	258	359	617
		19.9%	41.8%	58.2%	100.0%
	2	613	239	374	613
		19.8%	39.0%	61.0%	100.0%
	3	623	241	382	623
		20.1%	38.7%	61.3%	100.0%
	4	625	264	361	625
		20.2%	42.2%	57.8%	100.0%
	5	623	268	355	623
		20.1%	43.0%	57.0%	100.0%
	All	3101	1270	1831	3101
		100.0%	41.0%	59.0%	100.0%
<hr/>					
Education	Degree or Higher education qualification	618	254	364	618
		21.0%	41.1%	58.9%	100.0%
	A levels/higher equivalent/ ONC/BTEC	426	190	236	426
		14.4%	44.6%	55.4%	100.0%
	O Level/GCSE equivalent	853	311	542	853
		28.9%	36.5%	63.5%	100.0%
	No formal qualification	802	343	459	802
		27.2%	42.8%	57.2%	100.0%
	Other qualification	250	112	138	250
		8.5%	44.8%	55.2%	100.0%
	All	2949	1210	1739	2949
		100.0%	41.0%	59.0%	100.0%
<hr/>					
Present work situation					
	self employed	211	131	80	211
		7.1%	62.1%	37.9%	100.0%
	employed full-time	1001	496	505	1001
		33.7%	49.6%	50.4%	100.0%
	employed part time	354	44	310	354
		11.9%	12.4%	87.6%	100.0%
	retired	816	366	450	816
		27.4%	44.9%	55.1%	100.0%
	unemployed and looking for work	98	49	49	98
		3.3%	50.0%	50.0%	100.0%
	unable to work due to disability or ill health	131	66	65	131
		4.4%	50.4%	49.6%	100.0%
	caring for home and family / dependents	156	8	148	156
		5.2%	5.1%	94.9%	100.0%
	full time student	121	46	75	121
		4.1%	38.0%	62.0%	100.0%
	Other	85	18	67	85
		2.9%	21.2%	78.8%	100.0%
	All	2973	1224	1749	2973
		100.0%	41.2%	58.8%	100.0%

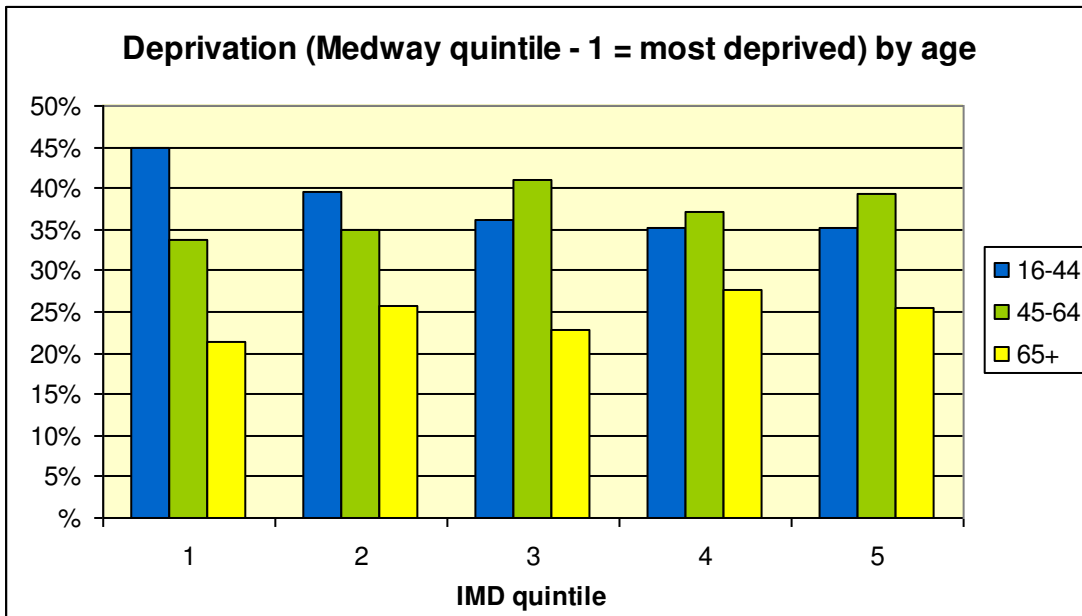
Table 6
Demographics by age

		Age						Total
		16-24	25-34	35-44	45-54	55-64	65+	
Ethnicity	White	293	307	458	502	575	710	2845
		10.3%	10.8%	16.1%	17.6%	20.2%	25.0%	100.0%
	Mixed	3	2	5	6	6	2	24
		12.5%	8.3%	20.8%	25.0%	25.0%	8.3%	100.0%
	Asian or Asian British	19	19	23	13	9	17	100
		19.0%	19.0%	23.0%	13.0%	9.0%	17.0%	100.0%
	Black or black British	5	12	16	11	8	1	53
	9.4%	22.6%	30.2%	20.8%	15.1%	1.9%	100.0%	
Other ethnic group	0	4	3	2	2	1	12	
	.0%	33.3%	25.0%	16.7%	16.7%	8.3%	100.0%	
All groups		320	344	505	534	600	731	3034
		10.5%	11.3%	16.6%	17.6%	19.8%	24.1%	100.0%
Locality	Chatham	98	114	163	145	178	195	893
		11.0%	12.8%	18.3%	16.2%	19.9%	21.8%	100.0%
	Gillingham and Rainham	145	147	217	249	274	375	1407
		10.3%	10.4%	15.4%	17.7%	19.5%	26.7%	100.0%
Rochester and Strood	78	86	136	147	161	193	801	
	9.7%	10.7%	17.0%	18.4%	20.1%	24.1%	100.0%	
IMD 2007 (quintiles by Medway respondents - 1 being most deprived)								
	1	86	79	112	110	98	132	617
		13.9%	12.8%	18.2%	17.8%	15.9%	21.4%	100.0%
	2	70	76	96	93	121	157	613
		11.4%	12.4%	15.7%	15.2%	19.7%	25.6%	100.0%
	3	57	63	106	123	132	142	623
		9.1%	10.1%	17.0%	19.7%	21.2%	22.8%	100.0%
	4	57	67	96	101	131	173	625
		9.1%	10.7%	15.4%	16.2%	21.0%	27.7%	100.0%
	5	51	62	106	114	131	159	623
		8.2%	10.0%	17.0%	18.3%	21.0%	25.5%	100.0%
Education								
	Degree or Higher education qualification	57	119	144	123	104	71	618
		9.2%	19.3%	23.3%	19.9%	16.8%	11.5%	100.0%
	A levels/higher/ equivalent/ONC/BTEC	111	74	70	69	60	42	426
		26.1%	17.4%	16.4%	16.2%	14.1%	9.9%	100.0%
	O Level/GCSE equivalent	113	100	209	182	148	101	853
		13.2%	11.7%	24.5%	21.3%	17.4%	11.8%	100.0%
	No formal qualification	23	27	41	94	224	393	802
		2.9%	3.4%	5.1%	11.7%	27.9%	49.0%	100.0%
	Other qualification	14	19	37	57	53	70	250
		5.6%	7.6%	14.8%	22.8%	21.2%	28.0%	100.0%

Present work situation

self employed	6	22	52	58	61	12	211
	2.8%	10.4%	24.6%	27.5%	28.9%	5.7%	100.0%
employed full-time	88	192	243	280	195	3	1001
	8.8%	19.2%	24.3%	28.0%	19.5%	.3%	100.0%
employed part time	32	39	104	80	78	21	354
	9.0%	11.0%	29.4%	22.6%	22.0%	5.9%	100.0%
retired	1	0	1	5	174	635	816
	.1%	.0%	.1%	.6%	21.3%	77.8%	100.0%
unemployed and looking for work	24	16	18	30	10	0	98
	24.5%	16.3%	18.4%	30.6%	10.2%	.0%	100.0%
unable to work due to disability or ill health	8	16	19	40	45	3	131
	6.1%	12.2%	14.5%	30.5%	34.4%	2.3%	100.0%
caring for home and family / dependents	17	47	57	19	11	5	156
	10.9%	30.1%	36.5%	12.2%	7.1%	3.2%	100.0%
full time student	111	2	3	4	1	0	121
	91.7%	1.7%	2.5%	3.3%	.8%	.0%	100.0%
Other	17	6	6	11	17	28	85
	20.0%	7.1%	7.1%	12.9%	20.0%	32.9%	100.0%

Figure 1



There was no difference between quintile for males and females, although there had been an increase in the proportion of males in the sample for quintiles 4 and 5 (least deprived) (Table 5). Quintile 1 (most deprived) had a higher proportion of younger people and less older people, whilst quintiles 4 and 5 had fewer younger people and more older people (Table 6 and Figure 1). The differences in age were statistically significant (Chi sq=23.351; 8df; p=0.003).

3.1.3. Education and Employment of Respondents

25.9% of respondents had no formal qualification; 27.5% had O levels or GCSEs, 5.2% ONC or BTEC, 8.6% A levels / highers, 8.9% had a higher qualification below degree level and 11.0% had a degree (Table 4). Apart from O level / GCSE where 63.5% were women, the sex profile mirrors the sample population. 49.0% of those with no formal qualification were aged 65 and over and 27.9% were aged 55-64 (Table 6). 34.9% of 16-24 year olds had O level / GCSE / equivalent; this was much higher than other age groups in the sample (21.8% of 25-34 year olds and 14.0% of 35-44 year olds).

52.7% of respondents were currently employed - 32.3% full time, 11.4% part time, 6.8% self employed. 26.3% said they were retired, 3.2% unemployed / looking for work, 4.2% unable to work because of disability or ill health, and 5.0% were caring for the home and family / dependents. 3.9% were students (Table 5). Employed women were more likely to be part time and less likely to be self employed. 77.8% of retired people in the sample were aged 65 and over. 91.7% of students were aged 16-24. 66.5% of people caring for home and family were aged 25-44 and 94.9% were women. 67.2% of people unable to work because of ill health were aged 45 and over. 81% of self employed people, 74% of part time and 72% of full time employed people were aged 35-64.

4. Results: Self Reported Oral Health Status

4.1. Summary

- The survey asked how many teeth people had including crowns. 325 respondents (10.5%) did not answer this question. The range for the number of natural teeth was 0 to 32 with a mean of 23.14 and a median of 26
- 4.5% of the sample said they had no teeth; 16.2% estimated they had less than 20 teeth and 69.6% reported they had 20 or more. 77.5% of those with no teeth were aged 65 and over
- 6.2% of the responders in the most deprived quintile were edentulous reducing to 3.6% amongst the least deprived quintile. People with no formal qualification (and likely to be older) were more likely to be edentulous
- The mean number of teeth for dentate adults was above 27.0 until age 44, then reduced to 25.4% at 45-54, 22.8% at 55-64 and remained at 20 and above until age 70 and over
- 70.5% of women and 62.4% of men with their own teeth reported 21 or more teeth and the mean for dentate women was 24.76 compared to 23.74 for men
- 62.9% in the most deprived quintile had 21 or more teeth compared to 72.2% in the least deprived; people with no formal qualification were more likely to have fewer teeth, they also had the lowest mean (20.63) for dentate people
- 12.2% with their own natural teeth said they had no fillings or crowns. The mean number of filled or crowned teeth was 6.02 and the median 5. 46.7% of dentate respondents had less than 5 filled or crowned teeth, 77.9% had less than 10
- 22.3% of all respondents had a denture, and 3.5% had implants; this was 25.5% of male respondents and 20.6% of female respondents. 58.6% of men and 62.3% of women who possessed a denture were aged 65 and over
- 20.4% of people with a denture had no natural teeth. 97.0% of edentulous people said they had a denture
- 32.4% of those with their own natural teeth thought they would need treatment if they went to the dentist tomorrow, and 14.4% said they didn't know; 8.7% of those with no natural teeth said they would need treatment and 9.4% said they didn't know.

4.2. Dentition

The survey asked how many teeth people had including crowns. 325 respondents (10.5%) did not answer this question. Any responses over 32 were coded as 32. The range was 0 to 32 with a mean of 23.14 and a median of 26. There is a striking change in number of natural teeth with age, not surprisingly the majority of respondents aged under 45 had most of their natural teeth.

4.2.1. Loss of all Natural Teeth

4.5% of the sample said they had no teeth; 16.2% estimated they had less than 20 teeth and 69.6% reported they had 20 or more. The proportion who reported they were edentulous increased with age from zero or near zero (equal to or less than 0.5%) until age 45-49, gradually increasing to 4.7% aged 60-64 and 37.7% aged 85 and over (Table 6). 4.5% of White people reported being edentulous compared to 3.0% of Asian and 1.9% of Black people.

There were fewer edentulous respondents in Gillingham and Rainham than in the other two localities. The trend for being edentulous was stronger for deprivation quintiles with 6.2% edentulous in the most deprived quintile reducing to 3.6% amongst the least deprived quintile. People with no formal qualification were more likely to be edentulous; older people were less likely to have formal qualifications and are also more likely to be edentulous; those who had A levels / equivalent or a degree were least likely to be edentulous.

Table 7**All Adults. Dentition by socio-demographic variables; number of teeth**

		no teeth	1-20 teeth	21+ teeth	N/A	Total
Sex	All	138 4.50%	573 18.6%	2065 67.2%	297 9.70%	3073 100.00%
	Male	57 4.50%	277 22.0%	786 62.4%	139 11.00%	1259 100.00%
	Female	81 4.50%	296 16.3%	1279 70.5%	158 8.70%	1814 100.00%
Age	16-24	2 0.60%	7 2.2%	269 84.1%	42 13.10%	320 100.00%
	25-34	1 0.30%	7 2.0%	312 90.4%	25 7.20%	345 100.00%
	35-44	0 0.00%	27 5.3%	430 84.0%	55 10.70%	512 100.00%
	45-54	5 0.90%	73 13.5%	413 76.6%	48 8.90%	539 100.00%
	55-64	23 3.80%	147 24.1%	384 63.0%	56 9.20%	610 100.00%
	65+	107 14.30%	312 41.8%	257 34.4%	71 9.50%	747 100.00%
Ethnicity	White	129 4.50%	551 19.4%	1896 66.6%	269 9.50%	2845 100.00%
	Mixed	0 0.00%	3 12.5%	16 66.7%	5 20.80%	24 100.00%
	Asian or Asian British	3 3.00%	4 4.0%	84 84.0%	9 9.00%	100 100.00%
	Black or Black British	1 1.90%	3 5.7%	42 79.2%	7 13.20%	53 100.00%
	Other ethnic group	1 8.30%	2 16.7%	9 75.0%	0 0.00%	12 100.00%
Locality	Chatham	43 4.90%	177 20.0%	585 66.0%	81 9.10%	886 100.00%
	Gillingham and Rainham	55 3.90%	274 19.6%	921 66.0%	146 10.50%	1396 100.00%
	Rochester and Strood	40 5.10%	122 15.4%	559 70.7%	70 8.80%	791 100.00%

Deprivation (IMD) Medway Quintile (1 is most deprived)						
	1	38	111	385	78	612
		6.20%	18.1%	62.9%	12.70%	100.00%
	2	31	125	392	61	609
		5.10%	20.5%	64.4%	10.00%	100.00%
	3	25	114	421	59	619
		4.00%	18.4%	68.0%	9.50%	100.00%
	4	22	126	421	46	615
		3.60%	20.5%	68.5%	7.50%	100.00%
	5	22	97	446	53	618
		3.60%	15.7%	72.2%	8.60%	100.00%
Education level						
	Degree or Higher education	8	52	512	46	618
		1.30%	8.4%	82.8%	7.40%	100.00%
	A levels/higher/equivalent/ONC/BTEC	4	51	333	38	426
		0.90%	12.0%	78.2%	8.90%	100.00%
	O Level/GCSE equivalent	18	102	653	80	853
		2.10%	12.0%	76.6%	9.40%	100.00%
	No formal qualification	81	274	365	82	802
		10.10%	34.2%	45.5%	10.20%	100.00%
	Other qualification	10	50	165	25	250
		4.00%	20.0%	66.0%	10.00%	100.00%

4.2.2. The number of teeth among dentate adults

The results are summarized in Tables 8 and 9. The mean number of teeth for dentate adults was above 27.0 until age 44, then reduced to 25.4% at 45-54, 22.8% at 55-64 and 18.3% aged 65 and over. The mean remained 20 and above until age 70 and over; at 70-74 the mean was 19.01 and median 20. Women in the sample reported more teeth than the men (70.5% of women and 62.4% of men reported 21 or more teeth and the mean for dentate women was 24.76 compared to 23.74 for men). Asian and Black respondents were more likely to have 21 or more teeth with a mean of 28.03 for Asian people and 28.87 for Black compared to 24.15 for White; this was probably related to age distribution of the sample and numbers in the minority ethnic groups are small.

Respondents living in Rochester and Strood reported more natural teeth than the other two localities with 70.7% reporting 21 or more natural teeth and a mean of 24.91 (Chatham mean was 24.41 and Gillingham and Rainham 24.12). Locality results may have been confounded by response rates for different age and sex groups. 62.9% in the most deprived quintile had 21 or

more teeth compared to 72.2% in the least deprived. This was not mirrored by the mean number of teeth, the lowest mean (23.36) being found in the middle quintile.

Table 8
Dentate Adults. Dentition by socio-demographic variables; mean and median

		1-20 teeth	21 or more teeth	All	Mean no. of teeth	Median no. of teeth
Sex	All	573	2065	2638	24.35	26
		21.7%	78.3%	100.0%		
	Male	277	786	1063	23.74	26
		26.1%	73.9%	100.0%		
	Female	296	1279	1575	24.76	27
		18.8%	81.2%	100.0%		
Age	16-24	7	269	276	28.14	28
		2.5%	97.5%	100.0%		
	25-34	7	312	319	28.51	29
		2.2%	97.8%	100.0%		
	35-44	27	430	457	27.41	28
		5.9%	94.1%	100.0%		
	45-54	73	413	486	25.43	27
	15.0%	85.0%	100.0%			
	55-64	147	384	531	22.76	24
		27.7%	72.3%	100.0%		
	65+	312	257	569	18.27	19
		54.8%	45.2%	100.0%		
Ethnicity	White	551	1896	2447	24.15	26
		22.5%	77.5%	100.0%		
	Mixed	3	16	19	23.74	25
		15.8%	84.2%	100.0%		
	Asian or Asian British	4	84	88	28.03	29
		4.5%	95.5%	100.0%		
	Black or Black British	3	42	45	28.87	30
		6.7%	93.3%	100.0%		
	Other ethnic group	2	9	11	23.91	27
		18.2%	81.8%	100.0%		
Locality	Chatham	177	585	762	24.41	26
		23.2%	76.8%	100.0%		
	Gillingham and Rainham	274	921	1195	24.12	26
		22.9%	77.1%	100.0%		
	Rochester and Strood	122	559	681	24.91	27
		17.9%	82.1%	100.0%		

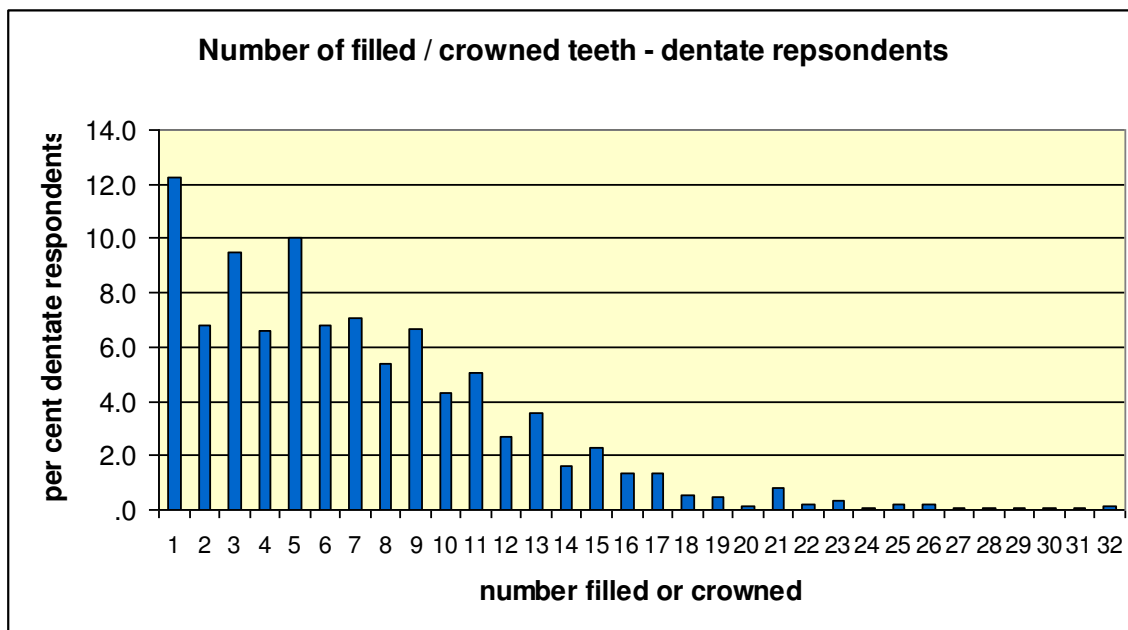
Deprivation (IMD) Medway quintile						
	1	111	385	496	24.25	27
		22.4%	77.6%	100.0%		
	2	125	392	517	24.05	26
		24.2%	75.8%	100.0%		
	3	114	421	535	23.36	26
		21.3%	78.7%	100.0%		
	4	126	421	547	24.33	26
		23.0%	77.0%	100.0%		
	5	97	446	543	24.05	26
		17.9%	82.1%	100.0%		
Education level						
	Degree or higher education	52	512	564	26.92	28
		9.2%	90.8%	100.0%		
	A levels / Highers/ ONC / BTEC	51	333	384	25.98	28
		13.3%	86.7%	100.0%		
	O level / GCSE	102	653	755	25.45	27
		13.5%	86.5%	100.0%		
	No formal qualification	274	365	639	20.63	22
		42.9%	57.1%	100.0%		
	Other qualification	50	165	215	23.64	26
		23.3%	76.7%	100.0%		

People with no formal qualification were more likely to have fewer teeth; they also had the lowest mean (20.63) for dentate people. People who had A levels / equivalent or a degree had a higher mean number of teeth (25.98 for those with A level and 26.92 for those with a degree or higher education).

4.2.3. Filled, crowned teeth and implants

The survey asked: *How many teeth do you have that are filled or crowned (capped)?* The range was 0 to 32. 88 people with their own natural teeth did not answer this question. 323 (12.2%) with their own natural teeth said they had no fillings or crowns although 3 of these said they had a dental implant. 2 people who did not answer the question on number of natural teeth also said they had implant(s). The mean number of filled or crowned teeth was 6.02 and the median 5. 46.7% of dentate respondents had less than 5 filled or crowned teeth, 77.9% had less than 10 (Figure 2).

Figure 2



The mean number of fillings or crowns increased with age for both men and women until mid 60s when it reduced again. Women were more likely than men to have fillings or crowns in all age groups except 25-44 (Table 9).

Table 9

Mean number of filled or crowned teeth – dentate adults by age and sex

Age	All	Males	Females
16-24	1.89	1.82	1.93
25-34	3.41	3.80	3.22
35-44	5.81	5.25	6.11
45-54	8.12	7.28	8.70
55-64	8.04	6.99	8.85
65+	5.95	5.73	6.14

Further to this information the survey found that of all respondents 690 (22.3%) had a denture, and 110 (3.5%) had implants; this was 25.5% of male respondents and 20.6% of female respondents. 58.6% of men and 62.3% of women who possessed a denture were aged 65 and over. Only 3.7% of male respondents aged under 45 had a denture compared to 23.3% aged 45-64 and 54.8% aged 65 and over. 3.2% of females respondents aged under 45 had a denture compared to 18.1% aged 45-64 and 57.8% aged 65 and over.

4.2.4. Dentures

20.4% of people with a denture had no natural teeth. 97.0% of edentulous people said they had a denture; they were all aged 45 and over, 80.3% were aged 65 and over. 39.4% were female and 60.6% male.

3.9% of male respondents and 3.4% of female respondents said they had dental implant(s). 12.8% of people with implants also had a denture. These figures were not so much related to age as the dentures, although middle aged females were the group most likely to have implants (5.3%) and young females the least likely (1.8%). 4.1% of young men said they had implants. 5 people who said they had implants did not say they had any natural teeth (see above p.20).

4.2.5. Self Perceived Need to see a Dentist

Respondents were asked, *'if they went to the dentist tomorrow, would they need any treatment?'* 948 respondents (30.6%) thought if they went to a dentist tomorrow they would need treatment; 14.4% said they didn't know. This same question was asked in 2001 when 31.1% of the Medway sample (1281 respondents) said they would need treatment; on that occasion 17.4% said they didn't know.

8.7% of those with no natural teeth said they would need treatment and 9.4% said they didn't know. The analyses below (summarized in Table 10) relate to respondents who have their own teeth.

32.4% of those with their own natural teeth thought they would need treatment if they went to the dentist tomorrow, and 14.4% said they didn't know.

Table 10**If you went to the dentist tomorrow, do you think you would need any treatment?**

		yes	no	don't know	total
Total		851 32.4%	1397 53.2%	378 14.4%	2626 100.0%
Age in ten year bands	16-24	66 24.0%	156 56.7%	53 19.3%	275 100.0%
	25-34	119 37.4%	146 45.9%	53 16.7%	318 100.0%
	35-44	144 31.5%	254 55.6%	59 12.9%	457 100.0%
	45-54	188 38.8%	238 49.2%	58 12.0%	484 100.0%
	55-64	158 30.0%	295 56.0%	74 14.0%	527 100.0%
	65+	176 31.2%	308 54.5%	81 14.3%	565 100.0%
	sex	male	394 37.1%	529 49.9%	138 13.0%
female		457 29.2%	868 55.5%	240 15.3%	1565 100.0%
ethnic group	White	782 32.1%	1311 53.8%	345 14.2%	2438 100.0%
	Mixed	5 26.3%	11 57.9%	3 15.8%	19 100.0%
	Asian or Asian British	33 37.5%	41 46.6%	14 15.9%	88 100.0%
	Black or Black British	23 53.5%	14 32.6%	6 14.0%	43 100.0%
	Other ethnic group	3 30.0%	3 30.0%	4 40.0%	10 100.0%
Locality	Chatham	271 35.8%	376 49.6%	111 14.6%	758 100.0%
	Gillingham and Rainham	361 30.3%	666 56.0%	163 13.7%	1190 100.0%
	Rochester and Strood	219 32.3%	355 52.4%	104 15.3%	678 100.0%

IMD 2007 (quintiles Medway respondents - 1 being most deprived)					
	1	200	212	83	495
		40.4%	42.8%	16.8%	100.0%
	2	204	247	63	514
		39.7%	48.1%	12.3%	100.0%
	3	160	283	90	533
		30.0%	53.1%	16.9%	100.0%
	4	144	331	71	546
		26.4%	60.6%	13.0%	100.0%
	5	143	324	71	538
		26.6%	60.2%	13.2%	100.0%
education level	Degree or Higher education qualification	158	330	74	562
		28.1%	58.7%	13.2%	100.0%
	A levels/higher/equivalent/ONC/BTEC	108	221	55	384
		28.1%	57.6%	14.3%	100.0%
	O Level/GCSE equivalent	258	402	92	752
		34.3%	53.5%	12.2%	100.0%
	No formal qualification	233	292	109	634
		36.8%	46.1%	17.2%	100.0%
	Other qualification	65	119	30	214
		30.4%	55.6%	14.0%	100.0%

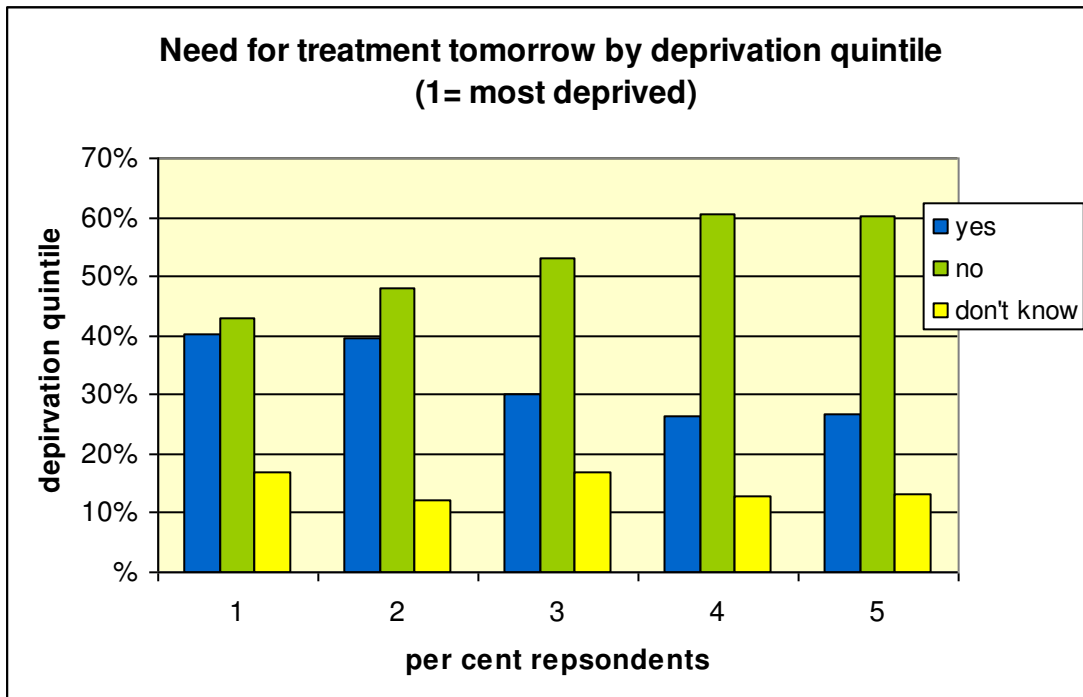
There was a fairly even spread across the age groups from 24.0% aged 16-24 (19.9% didn't know) to 31.2% aged 65 and over (14.3% didn't know). Based on our sample, men were more likely than women to think they would need to see the dentist tomorrow, 37.1% and 29.2% respectively (Chi sq=18.397; p=0.000). Both men and women had higher proportions in the younger age groups who said they didn't know.

Black respondents were more likely to think they would need treatment but the numbers are small and the results not significant. There were locality differences with more people from Gillingham and Rainham who thought they would not need treatment, again these differences were not statistically significant and probably reflected levels of deprivation within the localities.

There was an increasing tendency to perceive a need for treatment tomorrow with increasing deprivation using the Medway quintiles (Figure 3 – quintile 1 was most deprived); people in the more deprived quintiles were more likely to think they needed treatment. The differences between the 5 deprivation quintiles were statistically significant (Chi sq=61.234; p=0.000). There are also differences between levels of education with people who had a degree or equivalent, and

those with A level or equivalent, being less likely to have thought they needed treatment (Chi sq=27.461; p=0.001).

Figure 3



5. Results: Impact of Teeth on Quality of Life

5.1. Summary

- Painful aching in the mouth, discomfort eating, self consciousness, feeling tense, and embarrassment had the biggest impact on quality of life based on our survey
- Painful aching decreased with age. There was an increased likelihood of people having a painful aching or finding it uncomfortable to eat also feeling tense
- Discomfort with eating was more common in the middle and older age groups. There was a relationship between painful aching and finding it uncomfortable to eat. Edentate adults were more likely to experience discomfort eating unrelated to painful aching
- Younger and middle aged people seem to have been more likely to suffer embarrassment, tenseness or self-consciousness. Older people seem to have been less likely to feel tense because of problems with their teeth, mouth or dentures
- Locality was not statistically significant for quality of life impact questions
- Amongst dentate adults painful aching was most important in younger people with a peak aged 25-34; discomfort in eating reached a peak in middle age 45-54 as did feeling self conscious and being embarrassed. Feeling tense followed the same pattern as painful aching with the highest prevalence of often / very often at 25-34

5.1.1. The Questions

The survey asked a number of questions, drawn from the national survey, relating to the impact of teeth on the quality of life. These were self completion questions each with the same five options ranging from never to very often. Non responders to these questions were included, thus the percentages don't add to 100% across the rows; 3101 respondents (i.e. all – not divided by dentate / edentate) were included in the analysis shown in Table 11.

The biggest impact on quality of life has been painful aching in the mouth, discomfort eating, self consciousness, feeling tense, and embarrassment.

5.1.2. Painful Aching

Painful aching decreased with age; 7.1% of respondents aged 16-44 had painful aching fairly often or very often compared to 5.2% aged 45-64 and 2.5% aged 65 or over. The differences across the age groups were statistically significant (Chi sq. = 47.057, p=0.000).

There was an increased likelihood of people having a painful aching or finding it uncomfortable to eat also feeling tense; 31.4% of those who very often felt tense fairly or very often had a painful aching; 55.5% fairly or very often found it uncomfortable to eat.

Discomfort with eating was more common in the middle and older age groups (10.4% aged 45-64 fairly or very often had discomfort with eating, as did 9.9% aged 65+; this compared to 8.2% aged 16-44. The differences were again statistically significant Chi sq = 27.182, p=0.001. There was a relationship between painful aching and finding it uncomfortable to eat (Table 11), 3.8% of dentate adults fairly or very often experienced both painful aching and discomfort with eating. (Chi sq=1028.407; p=0.000). Edentate adults were more likely to experience discomfort eating unrelated to painful aching.

Table 11**Dentate and edentate adults**

Over the last 12 months have you	Never	Hardly Ever	Occasionally	Fairly Often	Very Often
	%	%	%	%	%
Had trouble PRONOUNCING ANY WORDS because of problems with your teeth, mouth or dentures?	84.6	6.3	5.5	1.4	0.7
Felt that your SENSE OF TASTE has worsened because of problems with your teeth, mouth and dentures?	81.2	7.7	6.4	1.8	1.0
Had a PAINFUL ACHING in your mouth?	52.9	18.9	21.0	3.8	1.4
Found it UNCOMFORTABLE TO EAT ANY FOODS because of problems with your teeth, mouth or dentures?	50.0	16.1	22.9	5.8	3.5
Been SELF-CONSCIOUS because of problems with your teeth, mouth or dentures?	60.5	11.3	14.8	6.4	5.0
FELT TENSE because of problems with your teeth, mouth or dentures?	68.7	12.3	10.9	3.6	2.6
Had an UNSATISFACTORY DIET because of problems with your teeth, mouth or dentures?	83.4	8.1	4.3	1.3	1.2
Had to INTERRUPT MEALS because of problems with your teeth, mouth or dentures?	76.7	11.0	8.0	1.6	1.1
Found it DIFFICULT TO RELAX because of problems with your teeth, mouth or dentures?	74.5	11.8	8.7	1.7	1.3
Been a bit EMBARRASSED because of problems with your teeth, mouth or dentures?	67.3	10.8	13.6	2.9	3.6
Been IRRITABLE WITH OTHER PEOPLE because of problems with your teeth, mouth or dentures?	80.2	9.2	6.3	1.3	1.1
Had DIFFICULTY DOING YOUR USUAL JOBS because of problems with your teeth, mouth or dentures?	87.5	6.9	2.6	0.5	0.5
Felt that life in general was LESS SATISFYING because of problems with your teeth, mouth or dentures?	78.2	8.9	7.1	2.3	1.6
Been TOTALLY UNABLE TO FUNCTION because of problems with your teeth, mouth or dentures?	91.1%	4.5%	2.1%	0.4%	0.4%

Table 12

Relationship between painful aching and finding it uncomfortable to eat for dentate and edentate adults

Over the last 12 months have you found it UNCOMFORTABLE TO EAT ANY FOODS because of problems with your teeth, mouth or dentures?						
			Edentate (n=138)		Dentate (n=2638)	
Over the last 12 months have you			never/ hardly ever/ occasionally	fairly / very often	no answer	never/ hardly ever/ occasionally
Had a PAINFUL ACHING in your mouth?	no answer				no answer	fairly / very often
N/A	1.4%		.7%	.0%	.3%	.4%
never/ hardly ever / occasionally	.0%		83.3%	13.0%	.5%	88.2%
fairly / very often	.0%		.0%	1.4%	.0%	1.5%
						3.8%

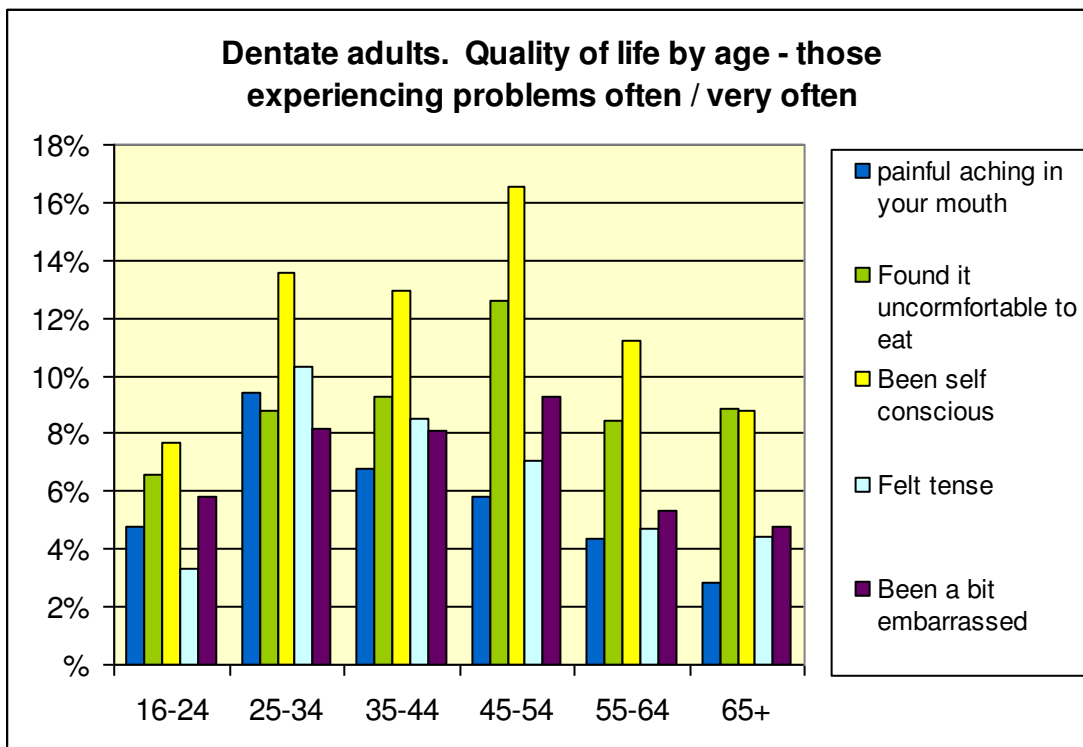
39.5% of those who very often felt tense, fairly or very often suffered painful aching and 59.3% fairly or very often found it uncomfortable to eat. 30.6% of those who very often felt a bit embarrassed suffered fairly or very often from a painful aching and 50.9% fairly or very often found it uncomfortable to eat.

5.1.3. Embarrassment, Tenseness and Self-Consciousness

Younger and middle aged people seem to have been more likely to suffer embarrassment, tenseness or self-consciousness. 13.7% of people aged 45-64 felt self conscious fairly or very often compared to 11.7% aged 16-44 and 8.4% aged 65 and over. Older people seem to have been less likely to feel tense because of problems with their teeth, mouth or dentures; 5.2% of respondents aged 65 and over felt tense fairly or very often compared to 7.4% aged 16-44 and 6.1% aged 45-64. 7.4% aged 16-44 and 7.2% aged 45-64 felt embarrassed fairly or very often compared to 4.7% aged 65 and over.

Locality was not statistically significant for quality of life impact questions; other comparators used were deprivation, age and gender; only age showed statistically significant differences in the key variables found to be important (see above). Amongst dentate adults painful aching was most important in younger people with a peak aged 25-34; discomfort in eating reached a peak in middle age 45-54 as did feeling self conscious and being embarrassed. Feeling tense followed the same pattern as painful aching with the highest prevalence of often / very often at 25-34 (Figure 4).

Figure 4



6. Results: Dental Access and Attendance Pattern

6.1. Summary

- 48.6% of edentate adults had not seen a dentist for 5 years or more. 18.1% had been in the last 12 months, these were more likely to be younger and/or female; men were more likely to go than women, mainly they said when they were having trouble
- 86.0% of edentate adults said they preferred to visit a dentist nearer to home; the average distance to the dentist was 3.5 miles.
- When asked why they didn't visit in the past 12 months, 7.1% of edentate adults (who had not visited in the past 12 months) said they always feel anxious, 69.0% said their teeth are all right and they don't need to go, 5.3% said they cannot afford NHS treatment, 19.5% said they didn't go for other reasons
- 60.3% of dentate adults said they visited the dentist regularly; more women (64.4%) visited regularly than men (54.3%); men were more likely to go only if they are having trouble
- Asian and black dentate respondents were more likely to say they only visited when they were having trouble.
- People from Gillingham and Rainham were more likely to visit the dentist regularly; this was not the case in Chatham. Dentate adults from the most deprived parts of Medway were less likely to go regularly and more likely to go when they were having trouble
- Dentate adults from more highly educated groups (degree, A level) were more likely to visit regularly and those with no formal education likely to visit when they were having trouble
- Dentate adults who were full time employed, unemployed and unable to work for health reasons were least likely to go regularly; more unemployed people and those not working for health reasons said they never go
- 77.9% of dentate respondents said they go to a dentist nearer home. Only 5.1% said nearer work, although 17.0% chose a dentist about the same distance from home and work; the mean distance from home to dentist for dentate adults was 3.9 miles; the median was 2 miles
- 33.1% of dentate adults had been within the past 3 months, 30.9% between 4 and 9 months, 19.3% between 10 and 24 months and 14.6% 25 months or longer.

- Women were more likely to have been to the dentist in the past 9 months. Younger people were less likely to have been to the dentist more recently.
- People of white and mixed race had been to the dentist more recently than those who were Asian or Black
- The locality differences were not significant, those related to deprivation quintile were. People from the 2 least deprived quintiles had visited more recently than those from the most deprived quintiles
- 63.6% of respondents said they received their last dental treatment from an NHS dentist. 28.9% said they went to a private dentist. 41.6% who went to an NHS dentist had their treatment paid for by the NHS, 35.4% were mixed NHS and self funded, and 18.6% were completely self funded
- 23.3% of edentate adults said they always feel anxious about going to the dentist; 38.7% of all dentate adults said they felt anxious about going to the dentist and 58.7% said they felt nervous about some kinds of treatment. There was a significant relationship between likelihood of being anxious and nervous
- 28.0% of all dentate adults said they didn't see any point in visiting the dentist unless they needed to; men (32.7%) were more likely to hold this view than women (24.7%). People living in the more deprived quintiles were more likely to have said there was no point in going unless they needed to. Retired people, unemployed and those unable to work because of disability or ill health were more likely to have said they saw no point in visiting unless they needed to. There was enough statistical evidence to support these arguments.
- People who have visited the dentist recently were much less likely to have said there was no point in visiting if they didn't need to.
- 64.2% of dentate respondents said they would like to be able to drop in to see the dentist
- 40.5% of dentate people considered they needed cosmetic treatment; only half those who considered they needed cosmetic treatment (50.3%) would be willing to pay. Women (43.9%) were more likely to consider they needed cosmetic treatment than men (35.5%) and would be more willing to pay

6.1.1. Edentate Adults: Reason for Visiting the Dentist

There were only 132 edentate adults in the sample, so presentation of results in this section is limited to age and sex, younger age groups had so few respondents they have not been included in Table 13. 48.5% of edentate adults said they never go to the dentist; men were more likely to go than women, mainly they said when they were having trouble. Most edentate adults were in the older age groups; those aged under 65 were more likely to visit the dentist.

Table 13

Edentate Adults: Reason for visiting dentist by age and sex

		To have a regular check up	To have an occasional check up	Only when you are having trouble	I never go to dentist	Total
Sex	All	12 9.1%	9 6.8%	47 35.6%	64 48.5%	132 100.0%
	Male	5 9.3%	3 5.6%	24 44.4%	22 40.7%	54 100.0%
	Female	7 9.0%	6 7.7%	23 29.5%	42 53.8%	78 100.0%
Age	45-54	1 20.0%	0 .0%	3 60.0%	1 20.0%	5 100.0%
	55-64	5 21.7%	2 8.7%	6 26.1%	10 43.5%	23 100.0%
	65+	4 4.0%	6 5.9%	38 37.6%	53 52.5%	101 100.0%

48.6% of edentate adults had not seen a dentist for 5 years or more. 13.0% did not reply to the question. 18.1% had been in the last 12 months, these were more likely to be younger and/or female. 86.0% of edentate adults said they preferred to visit a dentist nearer to home; it would appear that gender was not statistical impact on this question (87.7% of men and 84.4% of women). The mean distance to the dentist was 3.5 miles. The results were affected by 4 outliers who were respondents who travelled 10 miles or more.

Table 14

Dentate Adults: Reason for visiting dentist by demographics

		To have a regular check up	To have an occasional check up	Only when you are having trouble	I never go to dentist	Total
Sex	All	1578 60.3%	318 12.2%	548 20.9%	172 6.6%	2616 100.0%
	Male	574 54.3%	134 12.7%	253 23.9%	96 9.1%	1057 100.0%
	Female	1004 64.4%	184 11.8%	295 18.9%	76 4.9%	1559 100.0%
Age	16-24	131 47.8%	55 20.1%	62 22.6%	26 9.5%	274 100.0%
	25-34	139 44.1%	57 18.1%	83 26.3%	36 11.4%	315 100.0%
	35-44	279 61.3%	58 12.7%	95 20.9%	23 5.1%	455 100.0%
	45-54	297 61.6%	59 12.2%	92 19.1%	34 7.1%	482 100.0%
	55-64	369 69.9%	47 8.9%	92 17.4%	20 3.8%	528 100.0%
	65+	363 64.6%	42 7.5%	124 22.1%	33 5.9%	562 100.0%

Ethnicity	White	1511	281	491	147	2430
		62.2%	11.6%	20.2%	6.0%	100.0%
	Mixed	13	1	4	0	18
		72.2%	5.6%	22.2%	.0%	100.0%
	Asian or Asian British	23	19	31	14	87
		26.4%	21.8%	35.6%	16.1%	100.0%
Black or Black British	10	11	13	9	43	
	23.3%	25.6%	30.2%	20.9%	100.0%	
Other ethnic group	4	2	3	2	11	
	36.4%	18.2%	27.3%	18.2%	100.0%	
Locality	Chatham	419	98	166	71	754
		55.6%	13.0%	22.0%	9.4%	100.0%
	Gillingham and Rainham	764	134	226	62	1186
		64.4%	11.3%	19.1%	5.2%	100.0%
	Rochester and Strood	395	86	156	39	676
		58.4%	12.7%	23.1%	5.8%	100.0%

Deprivation (IMD) Medway Quintile (1 is most deprived)						
	1	235 47.8%	57 11.6%	154 31.3%	46 9.3%	492 100.0%
	2	280 54.4%	76 14.8%	113 21.9%	46 8.9%	515 100.0%
	3	319 60.1%	64 12.1%	121 22.8%	27 5.1%	531 100.0%
	4	378 70.0%	56 10.4%	82 15.2%	24 4.4%	540 100.0%
	5	366 68.0%	65 12.1%	78 14.5%	29 5.4%	538 100.0%
Education level	Degree or Higher education	351 63.1%	83 14.9%	94 16.9%	28 5.0%	556 100.0%
	A levels/higher/equivalent /ONC/BTEC	230 60.2%	48 12.6%	73 19.1%	31 8.1%	382 100.0%
	O Level/GCSE equivalent	465 61.8%	96 12.7%	139 18.5%	53 7.0%	753 100.0%
	No formal qualification	365 57.4%	55 8.6%	168 26.4%	48 7.5%	636 100.0%
	Other qualification	123 58.0%	28 13.2%	54 25.5%	7 3.3%	212 100.0%

Current employment	I am self employed	111	27	40	11	189
		58.7%	14.3%	21.2%	5.8%	100.0%
	I am employed full-time	501	137	190	71	899
		55.7%	15.2%	21.1%	7.9%	100.0%
	I am employed part time	223	32	50	9	314
		71.0%	10.2%	15.9%	2.9%	100.0%
	I am retired	445	46	125	33	649
		68.6%	7.1%	19.3%	5.1%	100.0%
	I am unemployed and looking for work	43	15	21	11	90
		47.8%	16.7%	23.3%	12.2%	100.0%
	I am unable to work due to disability or ill health	49	12	33	14	108
		45.4%	11.1%	30.6%	13.0%	100.0%
	I am caring for my home and family / dependents	73	19	40	6	138
		52.9%	13.8%	29.0%	4.3%	100.0%
	I am a full time student	62	16	15	6	99
		62.6%	16.2%	15.2%	6.1%	100.0%
	Other	39	9	16	3	67
		58.2%	13.4%	23.9%	4.5%	100.0%

Only 18.1% of edentate adults had visited the dentist in the past 12 months. Of those who had not visited in the past year 7.1% said they always feel anxious, 69.0% said their teeth are all right and they don't need to go, 5.3% said they cannot afford NHS treatment, 19.5% said they didn't go for other reasons.

6.1.2. Dentate Adults: Reason for Visiting the Dentist

The results are summarised in Table 14. These results do not include the answers of the 286 who did not give information about their dentition, 48.6% of whom said they visit the dentist regularly. 60.3% of dentate adults said they visited the dentist regularly; more women (64.4%) visited regularly than men (54.3%); and men were more likely to go only if they are having trouble. Younger people under the age of 35 were less likely to say they go regularly and more likely to go for an occasional check up or only when they are having trouble or never. Older people (aged 55 and over) were most likely to go regularly. Based on our sample there was strong statistical evidence to support this argument (Chi sq=101.132; p=0.000).

Asian and black respondents were more likely to say they only visited when they were having trouble. People from Gillingham and Rainham were more likely to visit regularly, whereas people from Chatham were more likely never to go. Based on our sample there was enough statistical evidence to support this argument (Chi sq=24.958; p=0.000). There was a clear relationship between deprivation quintiles and frequency of visit to the dentist. Those from the most deprived parts of Medway were less likely to go regularly and more likely to go only when they were having trouble, whilst respondents in the least deprived quintiles were more likely to go regularly (Chi sq=96.300; p=0.000).

Education also made a difference with the more highly educated people (degree, A level) more likely to visit regularly and those with no formal education most likely to visit when they were having trouble (Chi sq=38.856; p=0.000). Part time employed, retired and students were most likely to visit regularly whilst those who were full time employed, unemployed and unable to work for health reasons were least likely to go regularly. More unemployed people and those not working for health reasons said they never go.

Table 15**Dentate Adults: Location of dentist by demographics**

		Nearer to home	Nearer to work	About the same	Total
Sex	All	1923	126	421	2470
		77.9%	5.1%	17.0%	100.0%
	Male	797	43	143	983
		81.1%	4.4%	14.5%	100.0%
	Female	1126	83	278	1487
		75.7%	5.6%	18.7%	100.0%
Age	16-24	217	13	31	261
		83.1%	5.0%	11.9%	100.0%
	25-34	225	16	53	294
		76.5%	5.4%	18.0%	100.0%
	35-44	341	24	73	438
		77.9%	5.5%	16.7%	100.0%
	45-54	307	29	120	456
	67.3%	6.4%	26.3%	100.0%	
	55-64	388	36	88	512
		75.8%	7.0%	17.2%	100.0%
	65+	445	8	56	509
		87.4%	1.6%	11.0%	100.0%
Ethnicity	White	1794	115	388	2297
		78.1%	5.0%	16.9%	100.0%
	Mixed	11	2	6	19
		57.9%	10.5%	31.6%	100.0%
	Asian or Asian British	63	4	16	83
		75.9%	4.8%	19.3%	100.0%
	Black or Black British	29	3	5	37
		78.4%	8.1%	13.5%	100.0%
	Other ethnic group	6	1	3	10
		60.0%	10.0%	30.0%	100.0%
Locality	Chatham	531	38	129	698
		76.1%	5.4%	18.5%	100.0%
	Gillingham and Rainham	892	54	182	1128
		79.1%	4.8%	16.1%	100.0%
	Rochester and Strood	500	34	110	644
		77.6%	5.3%	17.1%	100.0%

Deprivation (IMD) Medway Quintile (1 is most deprived)					
	1	347	16	93	456
		76.1%	3.5%	20.4%	100.0%
	2	364	25	92	481
		75.7%	5.2%	19.1%	100.0%
	3	394	32	80	506
		77.9%	6.3%	15.8%	100.0%
	4	412	31	70	513
		80.3%	6.0%	13.6%	100.0%
	5	406	22	86	514
		79.0%	4.3%	16.7%	100.0%
Education level					
	Degree or Higher education	396	35	92	523
		75.7%	6.7%	17.6%	100.0%
	A levels/higher/equivalent/ ONC/BTEC	297	12	53	362
		82.0%	3.3%	14.6%	100.0%
	O Level/GCSE equivalent	520	50	143	713
		72.9%	7.0%	20.1%	100.0%
	No formal qualification	499	10	84	593
		84.1%	1.7%	14.2%	100.0%
	Other qualification	151	13	41	205
		73.7%	6.3%	20.0%	100.0%
Current employment					
	I am self employed	131	12	37	180
		72.8%	6.7%	20.6%	100.0%
	I am employed full-time	600	69	185	854
		70.3%	8.1%	21.7%	100.0%
	I am employed part time	212	25	71	308
		68.8%	8.1%	23.1%	100.0%
	I am retired	527	7	63	597
		88.3%	1.2%	10.6%	100.0%
	I am unemployed and looking for work	67	3	9	79
		84.8%	3.8%	11.4%	100.0%
	I am unable to work due to disability or ill health	86	2	13	101
		85.1%	2.0%	12.9%	100.0%
	I am caring for my home and family / dependents	118	1	15	134
		88.1%	.7%	11.2%	100.0%
	I am a full time student	84	2	11	97
		86.6%	2.1%	11.3%	100.0%
	Other	57	1	7	65
		87.7%	1.5%	10.8%	100.0%

6.1.3. Dentate Adults: Distance to the dentist

77.9% of dentate respondents said they go to a dentist nearer to home (Table 14). Only 5.1% said nearer work, although 17.0% chose a dentist about the same distance from home and work. Men (77.9%) were more likely to choose a dentist nearer to home than were women (75.7%). 87.4% of people aged 65 and over and 83.1% of people aged 16-24 chose a dentist nearer to home compared to 67.3% aged 45-54 who were the least likely to see a dentist nearer home.

The mean distance from home to dentist for dentate adults was 3.9 miles; the median distance was 2 miles. The survey asked how close they would like their dental practice to be; the mean was 2.3 miles and the median was 1.5 miles. 7.6% of dentate respondents travelled 10 miles or more to see their dentist, 2.1% 25 miles or more. The 2001 Census found that 12% of men and 9% of women from Medway commuted to inner London, 18% of men and 11% of women were working in Greater London.

6.1.4. Dentate Adults: Most Recent Visit

The survey asked '*when was the most recent visit to the dentist*'. The results were expressed in months and have been calculated to provide results both as set out in the National Survey 1998 (less than one year, 1-5 years and 5 years plus) (Table 16) and to fit with 'Vital Signs' i.e. 0-3 months, 4-9 months, 10-24 months and 25 months and over (Table 17). Both tables set out the findings by demographics for dentate adults.

66.9% of dentate adults had last visited the dentist within the past year; 21.6% between one year and 5 years and 9.4% over 5 years ago. 33.1% had been within the past 3 months, 30.9% between 4 and 9 months, 19.3% between 10 and 24 months and 14.6% 25 months or longer. Younger people were less likely to have been to the dentist recently this is backed by statistical evidence (Chi sq=60.176; 15df; p=0.000). People of white race had been to the dentist more recently compared to other ethnic groups.

Table 16

Dentate Adults: Most recent dental visit using time groupings as in the National Survey 1998

		0-11 months	12 - 59 months	60 months +	N/K	Total
Sex	All	1766	570	247	55	2638
		66.9%	21.6%	9.4%	2.1%	100.0%
	Male	660	252	133	18	1063
		62.1%	23.7%	12.5%	1.7%	100.0%
	Female	1106	318	114	37	1575
		70.2%	20.2%	7.2%	2.3%	35.1%
Age	16-24	160	89	26	1	276
		58.0%	32.2%	9.4%	.4%	100.0%
	25-34	193	87	32	7	319
		60.5%	27.3%	10.0%	2.2%	100.0%
	35-44	326	94	31	6	457
		71.3%	20.6%	6.8%	1.3%	100.0%
	45-54	320	106	49	11	486
	65.8%	21.8%	10.1%	2.3%	100.0%	
	55-64	385	94	45	7	531
		72.5%	17.7%	8.5%	1.3%	100.0%
	65+	382	100	64	23	569
		67.1%	17.6%	11.2%	4.0%	100.0%
Ethnicity	White	1654	525	226	42	2447
		67.6%	21.5%	9.2%	1.7%	100.0%
	Mixed	15	4	0	0	19
		78.9%	21.1%	.0%	.0%	100.0%
	Asian or Asian British	48	24	13	3	88
		54.5%	27.3%	14.8%	3.4%	100.0%
	Black or Black British	22	10	5	8	45
		48.9%	22.2%	11.1%	17.8%	100.0%
	Other ethnic group	6	3	0	2	11
		54.5%	27.3%	.0%	18.2%	100.0%
Locality	Chatham	490	168	91	13	762
		64.3%	22.0%	11.9%	1.7%	100.0%
	Gillingham and Rainham	835	235	98	27	1195
		69.9%	19.7%	8.2%	2.3%	100.0%
	Rochester and Strood	441	167	58	15	681
		64.8%	24.5%	8.5%	2.2%	100.0%

Deprivation (IMD) Medway Quintile (1 is most deprived)						
	1	290	119	70	17	496
		58.5%	24.0%	14.1%	3.4%	100.0%
	2	325	117	62	13	517
		62.9%	22.6%	12.0%	2.5%	100.0%
	3	349	130	48	8	535
		65.2%	24.3%	9.0%	1.5%	100.0%
	4	412	93	30	12	547
		75.3%	17.0%	5.5%	2.2%	100.0%
	5	390	111	37	5	543
		71.8%	20.4%	6.8%	.9%	100.0%
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Education level	Degree or Higher education	396	128	34	6	564
		70.2%	22.7%	6.0%	1.1%	100.0%
	A levels/higher/equivalent/ ONC/BTEC	258	87	36	3	384
		67.2%	22.7%	9.4%	.8%	100.0%
	O Level/GCSE equivalent	516	159	63	17	755
		68.3%	21.1%	8.3%	2.3%	100.0%
	No formal qualification	404	131	87	17	639
		63.2%	20.5%	13.6%	2.7%	100.0%
	Other qualification	141	51	21	2	215
		65.6%	23.7%	9.8%	.9%	100.0%
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Current employment						
	I am self employed	121	52	15	2	190
		63.7%	27.4%	7.9%	1.1%	100.0%
	I am employed full-time	582	224	82	15	903
		64.5%	24.8%	9.1%	1.7%	100.0%
	I am employed part time	238	54	20	4	316
		75.3%	17.1%	6.3%	1.3%	100.0%
	I am retired	465	107	61	22	655
		71.0%	16.3%	9.3%	3.4%	100.0%
	I am unemployed and looking for work	57	21	10	2	90
		63.3%	23.3%	11.1%	2.2%	100.0%
	I am unable to work due to disability or ill health	60	27	22	1	110
		54.5%	24.5%	20.0%	.9%	100.0%
	I am caring for my home and family / dependents	89	36	11	3	139
		64.0%	25.9%	7.9%	2.2%	100.0%
	I am a full time student	68	24	6	1	99
		68.7%	24.2%	6.1%	1.0%	100.0%
	Other	46	13	8	2	69
		66.7%	18.8%	11.6%	2.9%	100.0%

Table 17

Dentate Adults: Most recent dental visit using time groupings for Vital Signs

		0-3 months	4-9 months	10-24 months	25 months and over	N/K	Total
Sex	All	872	816	510	385	55	2638
		33.1%	30.9%	19.3%	14.6%	2.1%	100.0%
	Male	319	315	217	194	18	1063
		30.0%	29.6%	20.4%	18.3%	1.7%	100.0%
Female		553	501	293	191	37	1575
		35.1%	31.8%	18.6%	12.1%	2.3%	100.0%
Age	16-24	66	83	79	47	1	276
		23.9%	30.1%	28.6%	17.0%	.4%	100.0%
	25-34	91	87	77	57	7	319
		28.5%	27.3%	24.1%	17.9%	2.2%	100.0%
	35-44	160	150	88	53	6	457
		35.0%	32.8%	19.3%	11.6%	1.3%	100.0%
	45-54	167	143	89	76	11	486
	34.4%	29.4%	18.3%	15.6%	2.3%	100.0%	
55-64		199	174	81	70	7	531
		37.5%	32.8%	15.3%	13.2%	1.3%	100.0%
65+		189	179	96	82	23	569
		33.2%	31.5%	16.9%	14.4%	4.0%	100.0%
Ethnicity	White	822	760	473	350	42	2447
		33.6%	31.1%	19.3%	14.3%	1.7%	100.0%
	Mixed	8	7	2	2	0	19
		42.1%	36.8%	10.5%	10.5%	.0%	100.0%
	Asian or Asian British	20	26	20	19	3	88
		22.7%	29.5%	22.7%	21.6%	3.4%	100.0%
Black or Black British	6	12	12	7	8	45	
	13.3%	26.7%	26.7%	15.6%	17.8%	100.0%	
Other ethnic group	5	1	1	2	2	11	
	45.5%	9.1%	9.1%	18.2%	18.2%	100.0%	
Locality	Chatham	252	219	142	136	13	762
		33.1%	28.7%	18.6%	17.8%	1.7%	100.0%
	Gillingham and Rainham	419	379	219	151	27	1195
		35.1%	31.7%	18.3%	12.6%	2.3%	100.0%
Rochester and Strood	201	218	149	98	15	681	
	29.5%	32.0%	21.9%	14.4%	2.2%	100.0%	

Deprivation (IMD) Medway Quintile (1 is most deprived)

1	142	138	93	106	17	496
	28.6%	27.8%	18.8%	21.4%	3.4%	100.0%
2	146	163	110	85	13	517
	28.2%	31.5%	21.3%	16.4%	2.5%	100.0%
3	174	159	112	82	8	535
	32.5%	29.7%	20.9%	15.3%	1.5%	100.0%
4	213	175	97	50	12	547
	38.9%	32.0%	17.7%	9.1%	2.2%	100.0%
5	197	181	98	62	5	543
	36.3%	33.3%	18.0%	11.4%	.9%	100.0%

Education level

Degree or Higher education	195	173	129	61	6	564
	34.6%	30.7%	22.9%	10.8%	1.1%	100.0%
A levels/higher/equivalent/ ONC/BTEC	122	120	81	58	3	384
	31.8%	31.3%	21.1%	15.1%	.8%	100.0%
O Level/GCSE equivalent	273	227	135	103	17	755
	36.2%	30.1%	17.9%	13.6%	2.3%	100.0%
No formal qualification	189	204	107	122	17	639
	29.6%	31.9%	16.7%	19.1%	2.7%	100.0%
Other qualification	75	59	47	32	2	215
	34.9%	27.4%	21.9%	14.9%	.9%	100.0%

Current employment

I am self employed	62	56	39	31	2	190
	32.6%	29.5%	20.5%	16.3%	1.1%	100.0%
I am employed full-time	292	260	197	139	15	903
	32.3%	28.8%	21.8%	15.4%	1.7%	100.0%
I am employed part time	117	108	57	30	4	316
	37.0%	34.2%	18.0%	9.5%	1.3%	100.0%
I am retired	233	216	101	83	22	655
	35.6%	33.0%	15.4%	12.7%	3.4%	100.0%
I am unemployed and looking for work	23	29	21	15	2	90
	25.6%	32.2%	23.3%	16.7%	2.2%	100.0%
I am unable to work due to disability or ill health	28	31	18	32	1	110
	25.5%	28.2%	16.4%	29.1%	.9%	100.0%
I am caring for my home and family / dependents	46	40	30	20	3	139
	33.1%	28.8%	21.6%	14.4%	2.2%	100.0%
I am a full time student	31	33	23	11	1	99
	31.3%	33.3%	23.2%	11.1%	1.0%	100.0%
Other	24	19	14	10	2	69
	34.8%	27.5%	20.3%	14.5%	2.9%	100.0%

Locality had no impact on whether people had visited the dentist recently. However deprivation quintiles did have an impact. In particular 21.4% of people from the most deprived quintile had not visited for more than 2 years. Regarding education, those with no formal education were most likely not to have visited the dentist recently, 19.1% for 2 years and 13.6% for 5 years. 29.1% of people not working for health reasons had not visited for 2 years; 16.3% of those who were self employed, 15.4% working full time had not visited for 2 years as well as 16.7% of those who were unemployed.

6.1.5. Dentate Adults: Reasons for Not Visiting the Dentist

The survey asked the respondent for reasons why they had not visited the dentist if this was for over a year, offering a number of answers and inviting respondents to tick as many as they liked. As this question was also answered by people who said they did visit within 12 months, these people were excluded from the analysis. This analysis was then based on 872 respondents who had not visited for 12 months or more (Table 16, 33.1% of dentate adults).

30.3% of dentate adults who had not visited within the past year said they always felt anxious when visiting the dentist. The proportion of women not visiting the dentist was higher than men, 35.7% and 21.8% respectively. People aged 45-54 (38.0%) and 55-64 (37.0%) were also more likely to have reported being anxious. There was enough statistical evidence to support these claims.

24.7% said their teeth were all right and they didn't need to go to the dentist. 6.8% said it was difficult to get time off work, 8.8% said it was difficult to get a convenient appointment, 23.1% said they couldn't afford NHS treatment, 2.5% said it was a long way to go, 6.0% said they hadn't found a dentist they liked and 11.8% couldn't find an NHS dentist. 14.3% said none of these reasons.

6.1.6. Edentate Adults: Last Dental Treatment

63.4% of the edentate adults responding to this question received their last treatment from an NHS dentist; women (67.9%) were more likely to have been to an NHS dentist than men (57.1%); men were more likely to have been to a private dentist or to the dental hospital. The differences were not statistically significant.

The edentate population was older, retired, and with no formal education. Younger age groups and minority ethnic groups were not included in the results table as there were small numbers. People in Chatham were more likely to have been to an NHS dentist; those in Rochester / Strood the dental hospital.

6.1.7. Dentate Adults: Last Dental Treatment

65.3% received their last dental treatment from an NHS dentist and 30.6% from a private dentist. There was a relationship between gender and the type of dentist visited. 33.4% of men compared to 28.6% of women saw a private dentist. There is statistical evidence to support this claim (Chi sq=17.31; p=0.001). Age group also has an effect on the type of dentist visited with younger adults visiting an NHS dentist and older adults visiting a private dentist (Figure 5) (Chi sq=69.373; p=0.000).

Ethnicity had an effect on the type of dentist visited. 30.8% of white people visited a private compared to 25.0% of Asians and 22.2% black people (but numbers of black people and other ethnic groups are small).

Localities also had a statistically significant effect on the type of dentist visited. 34.0% of people from Chatham, 31.3% from Rochester and Strood and 28.0% from Gillingham and Rainham having been privately (Chi sq=.32.678; 6df; p=0.000). There was a clear relationship between deprivation and the type of dentist visited. The least deprived were less likely to have visited an NHS dentist (Figure 6) (Chi sq=55.670; p=0.000).

Table 18

Edentate Adults: Place where received last dental treatment by demography

		Private dentist	NHS dentist	Dental hospital / hospital	Armed forces	Other	Total
Sex	All	37 27.6%	85 63.4%	7 5.2%	2 1.5%	3 2.2%	134 100.0%
	Male	18 32.1%	32 57.1%	4 7.1%	2 3.6%	0 .0%	56 100.0%
	Female	19 24.4%	53 67.9%	3 3.8%	0 .0%	3 3.8%	78 100.0%
Age	55-64	7 30.4%	14 60.9%	1 4.3%	0 .0%	1 4.3%	23 100.0%
	65+	29 28.2%	66 64.1%	4 3.9%	2 1.9%	2 1.9%	103 100.0%
Ethnicity	White	35 27.8%	80 63.5%	7 5.6%	1 .8%	3 2.4%	126 100.0%
Locality	Chatham	11 25.6%	30 69.8%	2 4.7%	0 .0%	0 .0%	43 100.0%
	Gillingham and Rainham	16 30.8%	33 63.5%	1 1.9%	1 1.9%	1 1.9%	52 100.0%
	Rochester and Strood	10 25.6%	22 56.4%	4 10.3%	1 2.6%	2 5.1%	39 100.0%
Deprivation (IMD) Medway Quintile (1 is most deprived)							
	1	5 13.5%	29 78.4%	1 2.7%	1 2.7%	1 2.7%	37 100.0%
	2	11 36.7%	15 50.0%	3 10.0%	0 .0%	1 3.3%	30 100.0%
	3	10 41.7%	14 58.3%	0 .0%	0 .0%	0 .0%	24 100.0%
	4	6 28.6%	13 61.9%	1 4.8%	1 4.8%	0 .0%	21 100.0%
	5	5 22.7%	14 63.6%	2 9.1%	0 .0%	1 4.5%	22 100.0%
Education level	No formal qualification	22 28.2%	53 67.9%	3 3.8%		0 .0%	78 100.0%
Current employment	I am retired	26 26.8%	65 67.0%	3 3.1%	1 1.0%	2 2.1%	97 100.0%

Table 19

Dentate Adults: Place where received last dental treatment by demography

		Private dentist	NHS dentist	School dental service	Community dental service	Dental hospital /	Armed forces	Other	Total
Sex	All	792	1691	13	16	24	7	48	2591
		30.6%	65.3%	.5%	.6%	.9%	.3%	1.9%	100.0%
	Male	352	650	4	5	12	6	24	1053
		33.4%	61.7%	.4%	.5%	1.1%	.6%	2.3%	100.0%
	Female	440	1041	9	11	12	1	24	1538
	28.6%	67.7%	.6%	.7%	.8%	.1%	1.6%	100.0%	
Age	16-24	42	206	5	7	4	1	3	268
		15.7%	76.9%	1.9%	2.6%	1.5%	.4%	1.1%	100.0%
	25-34	86	200	3	3	6	0	14	312
		27.6%	64.1%	1.0%	1.0%	1.9%	.0%	4.5%	100.0%
	35-44	134	300	1	1	5	1	4	446
		30.0%	67.3%	.2%	.2%	1.1%	.2%	.9%	100.0%
	45-54	149	317	3	0	2	1	7	479
		31.1%	66.2%	.6%	.0%	.4%	.2%	1.5%	100.0%
	55-64	173	332	0	1	3	2	12	523
		33.1%	63.5%	.0%	.2%	.6%	.4%	2.3%	100.0%
	65+	208	336	1	4	4	2	8	563
		36.9%	59.7%	.2%	.7%	.7%	.4%	1.4%	100.0%

Ethnicity	White	742	1586	13	16	19	5	28	2409
		30.8%	65.8%	.5%	.7%	.8%	.2%	1.2%	100.0%
	Asian or Asian British	22	50	0	0	2	1	11	86
		25.6%	58.1%	.0%	.0%	2.3%	1.2%	12.8%	100.0%
	Black or Black British	10	22	0	0	1	1	8	42
	23.8%	52.4%	.0%	.0%	2.4%	2.4%	19.0%	100.0%	
	Other ethnic group	8	16	0	0	2	0	1	27
		29.6%	65.3%	0.0%	0.0%	7.4%	0.0%	3.7%	100.0%
Locality	Chatham	255	444	9	7	8	3	24	750
		34.0%	59.2%	1.2%	.9%	1.1%	.4%	3.2%	100.0%
	Gillingham and Rainham	329	812	4	7	10	3	12	1177
		28.0%	69.0%	.3%	.6%	.8%	.3%	1.0%	100.0%
	Rochester and Strood	208	435	0	2	6	1	12	664
	31.3%	65.5%	.0%	.3%	.9%	.2%	1.8%	100.0%	

Deprivation (IMD) Medway								
1	116	331	6	5	6	3	15	482
	24.1%	68.7%	1.2%	1.0%	1.2%	.6%	3.1%	100.0%
2	127	352	4	2	4	0	15	504
	25.2%	69.8%	.8%	.4%	.8%	.0%	3.0%	100.0%
3	162	344	0	5	3	2	13	529
	30.6%	65.0%	.0%	.9%	.6%	.4%	2.5%	100.0%
4	187	341	2	3	3	0	3	539
	34.7%	63.3%	.4%	.6%	.6%	.0%	.6%	100.0%
5	200	323	1	1	8	2	2	537
	37.2%	60.1%	.2%	.2%	1.5%	.4%	.4%	100.0%
Education level Degree or Higher education								
	223	306	2	2	5	3	17	558
	40.0%	54.8%	.4%	.4%	.9%	.5%	3.0%	100.0%
A levels/higher/equivalent /ONC/BTEC	95	263	7	5	5	0	3	378
	25.1%	69.6%	1.9%	1.3%	1.3%	.0%	.8%	100.0%
O Level/GCSE equivalent	212	508	2	4	6	1	6	739
	28.7%	68.7%	.3%	.5%	.8%	.1%	.8%	100.0%
No formal qualification	174	421	2	5	6	2	17	627
	27.8%	67.1%	.3%	.8%	1.0%	.3%	2.7%	100.0%
Other qualification	70	136	0	0	2	1	3	212
	33.0%	64.2%	.0%	.0%	.9%	.5%	1.4%	100.0%

Current employment	I am self employed	76	101	1	0	4	0	5	187
		40.6%	54.0%	.5%	.0%	2.1%	.0%	2.7%	100.0%
	I am employed full-time	276	578	4	2	8	4	19	891
		31.0%	64.9%	.4%	.2%	.9%	.4%	2.1%	100.0%
	I am employed part time	84	217	1	3	0	0	2	307
		27.4%	70.7%	.3%	1.0%	.0%	.0%	.7%	100.0%
	I am retired	236	389	2	4	4	2	11	648
		36.4%	60.0%	.3%	.6%	.6%	.3%	1.7%	100.0%
	I am unemployed and looking for work	19	69	1	0	0	0	0	89
		21.3%	77.5%	1.1%	.0%	.0%	.0%	.0%	100.0%
	I am unable to work due to disability or ill health	18	82	2	2	2	0	4	110
		16.4%	74.5%	1.8%	1.8%	1.8%	.0%	3.6%	100.0%
	I am caring for my home and family / dependents	28	103	0	1	2	0	0	134
		20.9%	76.9%	.0%	.7%	1.5%	.0%	.0%	100.0%
	I am a full time student	18	70	1	1	3	0	2	95
		18.9%	73.7%	1.1%	1.1%	3.2%	.0%	2.1%	100.0%
	Other	18	45	0	2	0	0	3	68
		26.5%	66.2%	.0%	2.9%	.0%	.0%	4.4%	100.0%

Figure 5

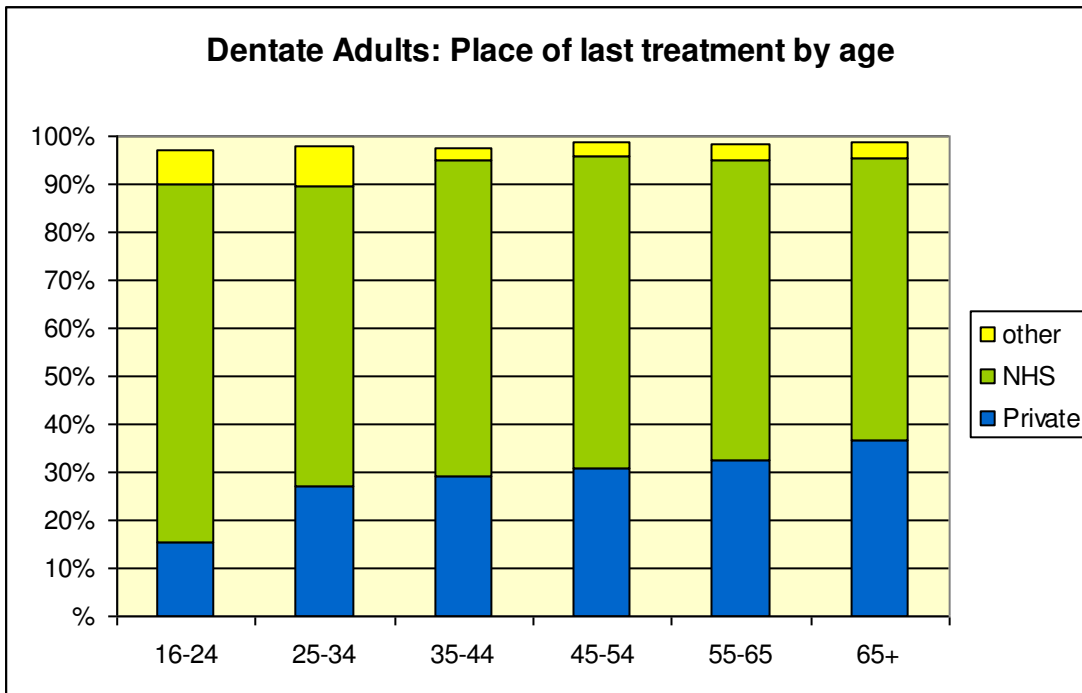
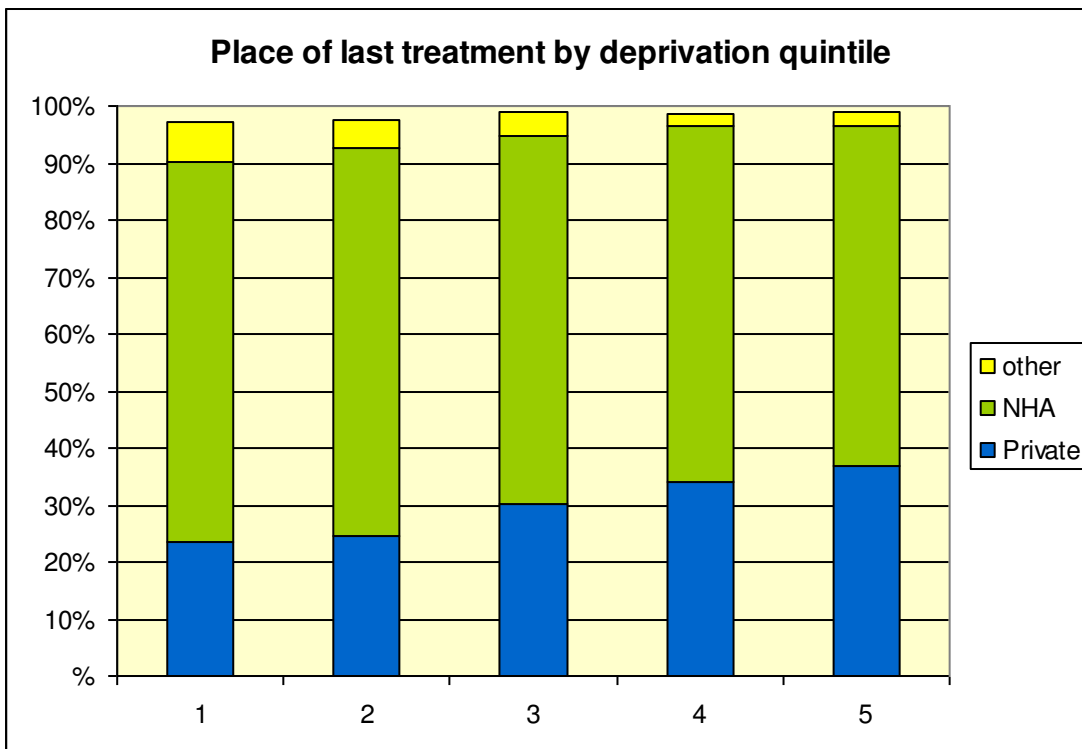


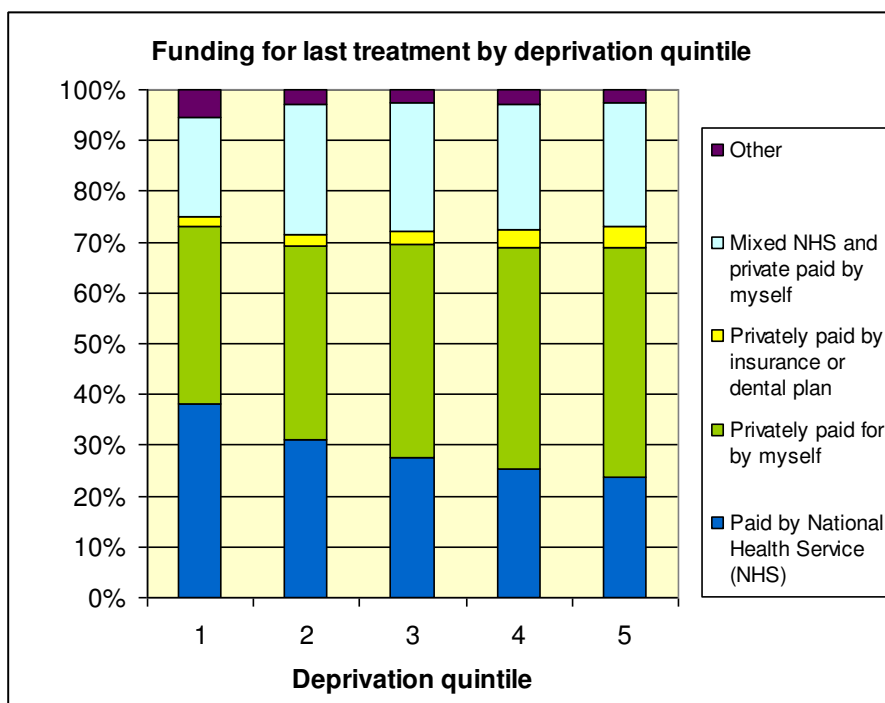
Figure 6



There was a clear relationship between education and the type of dentist visited. 39.5% of people with a degree or higher education and 32.6% of those with other qualifications last visited a private dentist compared to 27.2% of those with no formal education, 28.1% of those with a lesser qualification including O levels / GCSE and even those with A levels / BTEC (24.7%) (Chi sq=46.395; p=0.000).

There was a relationship between employment status and the type of dentist last seen. There was statistical evidence to support this statement (Chi sq=80.439; p=0.000). Self employed people (40.0%) and retired people (36.0%) were those most likely to have been to a private dentist whilst those who were unable to work for health reasons (16.4%), students (18.2%), carers (20.1%) and unemployed people (21.1%) were least likely to have been privately and most likely to have seen an NHS dentist

Figure 7



Only 40.8% of those who saw an NHS dentist were wholly funded by the NHS; 35.8% were mixed NHS and private partly funded by themselves. 89.0% of those who went to a private dentist were self funded and 5.7% used an insurance plan, 3.4% were NHS funded. Table 20 summarises payment arrangements by demographics.

Table 20

Dentate Adults: Who paid for last dental treatment

		Paid by National Health Service (NHS)	Privately paid for by myself	Privately paid by insurance or dental plan	Mixed NHS and private paid by myself	Other	Total
Sex	All	752 29.0%	1060 40.9%	77 3.0%	622 24.0%	83 3.2%	2594 100.0%
	Male	253 24.1%	480 45.7%	32 3.0%	254 24.2%	32 3.0%	1051 100.0%
	Female	499 32.3%	580 37.6%	45 2.9%	368 23.8%	51 3.3%	1543 100.0%
Age	16-24	169 62.8%	51 19.0%	2 .7%	23 8.6%	24 8.9%	269 100.0%
	25-34	107 34.3%	134 42.9%	6 1.9%	56 17.9%	9 2.9%	312 100.0%
	35-44	132 29.1%	202 44.6%	13 2.9%	87 19.2%	19 4.2%	453 100.0%
	45-54	108 22.6%	209 43.7%	19 4.0%	131 27.4%	11 2.3%	478 100.0%
	55-64	104 19.8%	219 41.6%	18 3.4%	172 32.7%	13 2.5%	526 100.0%
	65+	132 26.7%	245 50.0%	19 3.3%	153 13.3%	7 6.7%	556 100.0%
Ethnicity	White	705 29.3%	978 40.6%	72 3.0%	590 24.5%	65 2.7%	2410 100.0%
	Asian or Asian British	25 29.4%	37 43.5%	2 2.4%	13 15.3%	8 9.4%	85 100.0%
	Black or Black British	9 22.0%	15 36.6%	1 2.4%	8 19.5%	8 19.5%	41 100.0%
	Other ethnic group	8 26.7%	15 50.0%	1 3.3%	4 13.3%	2 6.7%	30 100.0%
Locality	Chatham	228 30.4%	327 43.7%	26 3.5%	142 19.0%	26 3.5%	749 100.0%
	Gillingham and Rainham	342 29.2%	437 37.3%	34 2.9%	321 27.4%	38 3.2%	1172 100.0%
	Rochester and Strood	182 27.0%	296 44.0%	17 2.5%	159 23.6%	19 2.8%	673 100.0%

Deprivation (IMD) Medway						
1	185	169	9	95	26	484
	38.2%	34.9%	1.9%	19.6%	5.4%	100.0%
2	159	193	11	131	15	509
	31.2%	37.9%	2.2%	25.7%	2.9%	100.0%
3	146	221	14	134	13	528
	27.7%	41.9%	2.7%	25.4%	2.5%	100.0%
4	136	235	20	132	16	539
	25.2%	43.6%	3.7%	24.5%	3.0%	100.0%
5	126	242	23	130	13	534
	23.6%	45.3%	4.3%	24.3%	2.4%	100.0%
Education level						
Degree or Higher education	185	169	9	95	26	484
	38.2%	34.9%	1.9%	19.6%	5.4%	100.0%
A levels/higher/ equivalent /ONC/BTEC	159	193	11	131	15	509
	31.2%	37.9%	2.2%	25.7%	2.9%	100.0%
O Level/GCSE equivalent	146	221	14	134	13	528
	27.7%	41.9%	2.7%	25.4%	2.5%	100.0%
No formal qualification	136	235	20	132	16	539
	25.2%	43.6%	3.7%	24.5%	3.0%	100.0%
Other qualification	126	242	23	130	13	534
	23.6%	45.3%	4.3%	24.3%	2.4%	100.0%
Current employment						
self employed	36	105	4	38	7	190
	18.9%	55.3%	2.1%	20.0%	3.7%	100.0%
employed full-time	162	414	34	247	32	889
	18.2%	46.6%	3.8%	27.8%	3.6%	100.0%
employed part time	94	115	13	81	10	313
	30.0%	36.7%	4.2%	25.9%	3.2%	100.0%
retired	150	284	17	180	10	641
	23.4%	44.3%	2.7%	28.1%	1.6%	100.0%
unemployed and looking for work	47	24	0	13	6	90
	52.2%	26.7%	.0%	14.4%	6.7%	100.0%
unable to work due to disability or ill health	59	26	0	20	3	108
	54.6%	24.1%	.0%	18.5%	2.8%	100.0%
caring for my home and family / dependents	80	38	2	15	1	136
	58.8%	27.9%	1.5%	11.0%	.7%	100.0%
full time student	76	9	0	2	7	94
	80.9%	9.6%	.0%	2.1%	7.4%	100.0%
Other	26	24	1	12	4	67
	38.8%	35.8%	1.5%	17.9%	6.0%	100.0%

Treatment for 32.3% of women compared to 24.1% of men (24.1%) was wholly paid for by the NHS (Chi sq=24.925; p=0.000). Treatment received by younger people especially those under 25 (62.8%) was wholly paid for by the NHS compared to 34.3% at 25-34 reducing with age in older age groups. 38.2% of those in the most deprived quintile had been wholly paid for by the NHS compared to 31.2% in quintile 2 and 27.7% and in quintile 3 (Figure 7).

People with A levels (34.5%) and O levels / GCSE (31.3%) were wholly funded by the NHS compared to people with a degree or higher education (21.8%). Self employed people wholly funded themselves (55.3%); as did 46.6% of full time employed people and 44% of retired people.

6.1.8. Edentate Adults: Anxiety and nervousness

23.3% of edentate adults said they always felt anxious about going to the dentist; 15.2% did not answer the question. 20.3% said they were nervous about some kinds of treatment; 21.7% did not answer this question. 63.8% said they could have dental treatment without sedation; and 21.0% did not answer.

6.1.9. Dentate adults: Anxiety and Nervousness

38.7% of all dentate There was a statistically significant relationship between gender and payment of dental treatment. Adults said they felt anxious about going to the dentist and 58.7% said they felt nervous about some kinds of treatment. There was a statistically significant relationship between gender and anxiety and nervousness about going to the dentist. 44.8% of women were anxious and 67.9% were nervous compared to men (29.7% who were anxious and 45.2% who were nervous). (Chi sq=59.375; p=0.000 for anxiety and 113.935; p=0.000 for nervousness). There is no clear relationship for age. 60.0% of white people were nervous compared to than other ethnic groups (Chi sq=29.436; p=0.000).

There was statistical evidence of a relationship between for localities and anxiety about visiting the dentist. People living in the most deprived quintiles were anxious (43.8%) and nervous (63.3%) compared to less deprived quintiles. 32.8% were anxious and 55.0% were nervous in the 4th quintile (next least deprived). This relationship was statistically significant for anxiety and deprivation (Chi sq = 15.277; p=0.004) but not for nervousness.

People with a degree (30.8%) or A level (35.3%) were less anxious than those with no formal education (46.4%), O level/GCSE (39.1%) and other qualifications (39.9%) came in between. There was statistical evidence to support this claim (Chi sq=32.102; p=0.000). There was no statistically significant relationship between being nervous about going to the dentist and educational group.

There was a statistically significant relationship between employment status and nervousness about going to the dentist. 23.5% of students and 30.9% of people who were self employed to 49.6% of carers and 57.1% of those who were unable to work because of disability or long term illness were nervous about going to the dentist (Chi sq=42.421; p=0.000).

There was also statistical evidence to support a relationship between employment status and nervousness about some kind of treatments. Less self employed people (47.1%) and retired people (54.3%) were nervous compared to those unable to work because of disability (69.4%) and carers (71.1%) (Chi sq= 37.878; p=0.000).

Table 21

Dentate Adults: Anxiety and nervousness about some treatments and anxiety going to the Dentist

		I am nervous about some kinds of treatment		
		Yes	No	Total
I always feel anxious about going to the dentist	Yes	933	53	986
		36.4%	2.1%	38.5%
	No	565	1009	1574
		22.1%	39.4%	61.5%
Total		1498	1062	2560
		58.5%	41.5%	100.0%

There was a statistically significant relationship between likelihood of being anxious and nervous (Table 22) with 36.4% having said yes to both questions (94.6% of those who had said they were anxious also said they were nervous) (Chi sq=861.370; p=0.000).

Table 22**Dentate Adults: Anxiety and Nervousness about some kinds of treatment by demographics**

		I always feel anxious about going to the dentist	I am nervous about some kinds of treatment	Not able to have dental treatment without sedation?	Total
Sex	All	1002 38.7%	1512 58.7%	549 21.2%	2574 100.0%
	Male	310 29.7%	469 45.2%	208 19.9%	1038 100.0%
	Female	692 44.8%	1043 67.9%	341 22.0%	1536 100.0%
Age	16-24	88 32.1%	168 61.3%	82 30.3%	274 100.0%
	25-34	129 40.4%	198 62.5%	70 22.3%	317 100.0%
	35-44	164 36.4%	263 58.2%	88 19.5%	452 100.0%
	45-54	212 44.1%	306 63.5%	88 18.4%	482 100.0%
	55-64	216 41.5%	314 60.9%	107 20.4%	516 100.0%
	65+	193 35.5%	263 49.3%	114 20.7%	533 100.0%
	Ethnicity	White	952 39.6%	1434 60.0%	481 20.0%
Asian or Asian British		23 26.7%	31 35.6%	35 41.2%	87 100.0%
Black or Black British		9 22.5%	15 37.5%	17 40.5%	40 100.0%
Other ethnic group		11 36.7%	20 69.0%	8 26.7%	29 100.0%
Locality		Chatham	299 40.0%	439 59.1%	167 22.4%
	Gillingham and Rainham	444 37.7%	672 57.5%	234 19.8%	1169 100.0%
	Rochester and Strood	259 39.0%	401 60.6%	148 22.2%	662 100.0%

Deprivation (IMD) Medway quintiles					
	1	211	302	136	477
		43.8%	63.3%	28.3%	100.0%
	2	206	305	110	501
		40.7%	60.9%	21.8%	100.0%
	3	212	300	113	524
		40.1%	57.3%	21.3%	100.0%
	4	177	296	99	538
		32.8%	55.0%	18.4%	100.0%
	5	196	309	91	534
		36.8%	57.9%	16.9%	100.0%
Education level					
	Degree or Higher education	172	314	110	559
		30.8%	56.2%	19.7%	100.0%
	A levels/higher/equivalent/ ONC/BTEC	134	228	67	381
		35.3%	59.8%	17.7%	100.0%
	O Level/GCSE equivalent	293	439	146	744
		39.1%	59.0%	19.7%	100.0%
	No formal qualification	285	366	170	610
		46.4%	60.0%	27.1%	100.0%
	Other qualification	85	131	33	209
		39.9%	62.7%	15.6%	100.0%
Current employment					
	I am self employed	58	88	38	187
		30.9%	47.1%	20.2%	100.0%
	I am employed full-time	328	515	170	894
		36.6%	57.6%	19.0%	100.0%
	I am employed part time	135	205	62	310
		42.9%	66.1%	19.9%	100.0%
	I am retired	237	339	123	624
		37.5%	54.3%	19.3%	100.0%
	I am unemployed and looking for work	40	56	30	90
		45.5%	62.2%	34.1%	100.0%
	I am unable to work due to disability or ill health	60	75	31	108
		57.1%	69.4%	28.7%	100.0%
	I am caring for my home and family / dependents	68	96	31	135
		49.6%	71.1%	22.5%	100.0%
	I am a full time student	23	57	22	97
		23.5%	58.8%	22.4%	100.0%
	Other	26	43	20	67
		38.2%	64.2%	29.4%	100.0%

Table 23**Those who said they feel anxious by length of time since last saw the dentist**

		Last saw the dentist (months)					
		0-3	4-9	10-24	25 +	N/A	Total
I always feel anxious about going to the dentist	Yes	267	263	228	226	18	1002
		31.0%	32.5%	45.5%	59.9%	43.9%	38.7%
	No	594	546	273	151	23	1587
		69.0%	67.5%	54.5%	40.1%	56.1%	61.3%
Total		861	809	501	377	41	2589
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

57.2% of those who thought they would need treatment if they went to the dentist tomorrow were anxious compared to 26.1% who did not think they would need treatment. 47.7% of those who were anxious thought they would need treatment compared to 22.4% of those who were not anxious (Chi sq=217.199; p=0.000). There was a significant increase in the proportion who were feeling anxious with length of time since last visit from 31.0% of those who visited in the last 3 months to 59.9% of those who have not been for over 2 years (Table 24) (Chi sq=116.526; p=0.000).

21.2% said they are not able to have dental treatment without sedation. There was no relationship between this and gender. A greater proportion of younger people said they would need sedation, there was little difference between those in the middle age groups and older people (Chi sq=16.947; p=0.005). Asian (41.2%) and black people (40.5%) said they could not have treatment without sedation compared to white people (20.0%) (Chi sq=32.412; p=0.000).

There was not a relationship between locality and sedation. However there was between deprivation quintiles; people in the most deprived quintile (28.3%) were nearly twice as likely to have said they couldn't have treatment without sedation as those in the least deprived quintile (16.9%) (Chi sq=23.051; p=0.000). 27.1% of those with no formal education and 34.1% of

unemployed people and 27.8% of those unable to work because of ill health or disability thought they would need sedation.

6.1.10. Edentate Adults: Visiting the Dentist

62.3% of edentate adults said they saw no point in visiting the dentist. 44.9% said they would like to be able to drop in without an appointment.

6.1.11. Dentate Adults: Visiting the dentist

28.0% of all dentate adults said they didn't see any point in visiting the dentist unless they needed to; results are summarised in Table 25. More men (32.7%) held this view compared to women (24.7%) (Chi sq=19.235; p=0.000). Whilst 40.1% of older people (aged 65+) held this view more younger people did so with the proportion decreased progressively with age (Chi sq=58.516; p=0.000). 49.4% of Asians and 40.0% of black people (small numbers total black=40) said there was no point visiting unless you needed to compared to 27.1% of white people (Chi sq=23.680; p=0.000).

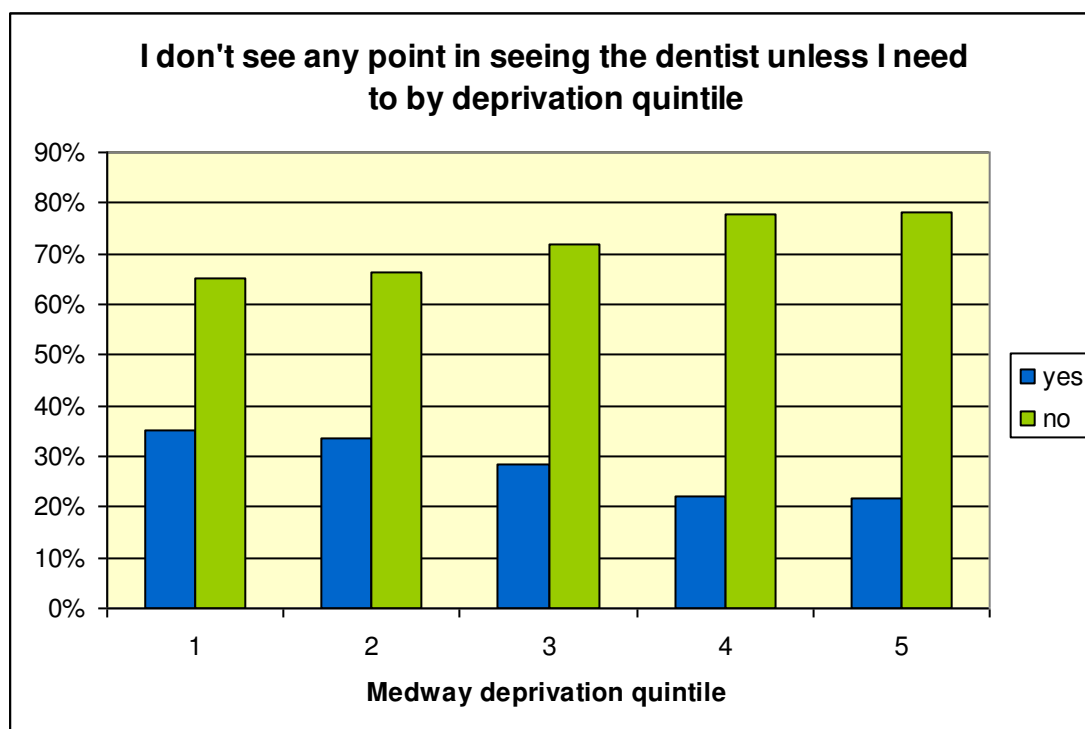
There was no statistically significant relationship in views by locality, but more people living in the more deprived quintiles said there was no need to go to the dentist unless they needed to than were those on the least deprived quintiles (Chi sq=37.259; p=0.000).

Table 24

		I don't see any point in visiting the dentist unless I need to	I'd like to be able to drop into the dentist without an appointment	Total
Sex	All	695 28.0%	1639 64.2%	2554 100.0%
	Male	334 32.7%	651 62.7%	1038 100.0%
	Female	361 24.7%	988 65.2%	1516 100.0%
Age	16-24	86 31.6%	178 65.2%	273 100.0%
	25-34	93 29.7%	193 60.7%	318 100.0%
	35-44	105 23.9%	293 65.1%	450 100.0%
	45-54	109 23.0%	332 69.6%	477 100.0%
	55-64	104 21.2%	324 63.2%	513 100.0%
	65+	198 40.1%	319 61.0%	523 100.0%
	Ethnicity	White	622 27.1%	1519 64.1%
Asian or Asian British		43 49.4%	53 61.6%	86 100.0%
Black or Black British		16 40.0%	29 70.7%	41 100.0%
Other ethnic group		8 26.7%	18 60.0%	30 100.0%
Locality		Chatham	216 30.2%	487 66.3%
	Gillingham and Rainham	292 25.9%	749 64.1%	1168 100.0%
	Rochester and Strood	187 29.3%	403 61.9%	651 100.0%

Deprivation (IMD) Medway quintiles				
	1	164	331	472
		35.0%	70.1%	100.0%
	2	163	334	501
		33.6%	66.7%	100.0%
	3	143	341	517
		28.3%	66.0%	100.0%
	4	113	321	532
		22.2%	60.3%	100.0%
	5	112	312	532
		21.8%	58.6%	100.0%
Education level				
	Degree or Higher education	101	343	558
		18.3%	61.5%	100.0%
	A levels/higher/equivalent/ ONC/BTEC	93	229	376
		24.9%	60.9%	100.0%
	O Level/GCSE equivalent	188	481	739
		25.9%	65.1%	100.0%
	No formal qualification	229	409	603
		40.6%	67.8%	100.0%
	Other qualification	58	137	211
		29.0%	64.9%	100.0%
Current employment				
	I am self employed	46	114	189
		24.9%	60.3%	100.0%
	I am employed full-time	206	588	892
		23.5%	65.9%	100.0%
	I am employed part time	69	194	305
		22.5%	63.6%	100.0%
	I am retired	199	369	614
		34.5%	60.1%	100.0%
	I am unemployed and looking for work	30	58	89
		34.5%	65.2%	100.0%
	I am unable to work due to disability or ill health	36	80	109
		36.0%	73.4%	100.0%
	I am caring for my home and family / dependents	41	89	137
		31.1%	65.0%	100.0%
	I am a full time student	24	64	97
		24.5%	66.0%	100.0%
	Other	23	45	64
		35.4%	70.3%	100.0%

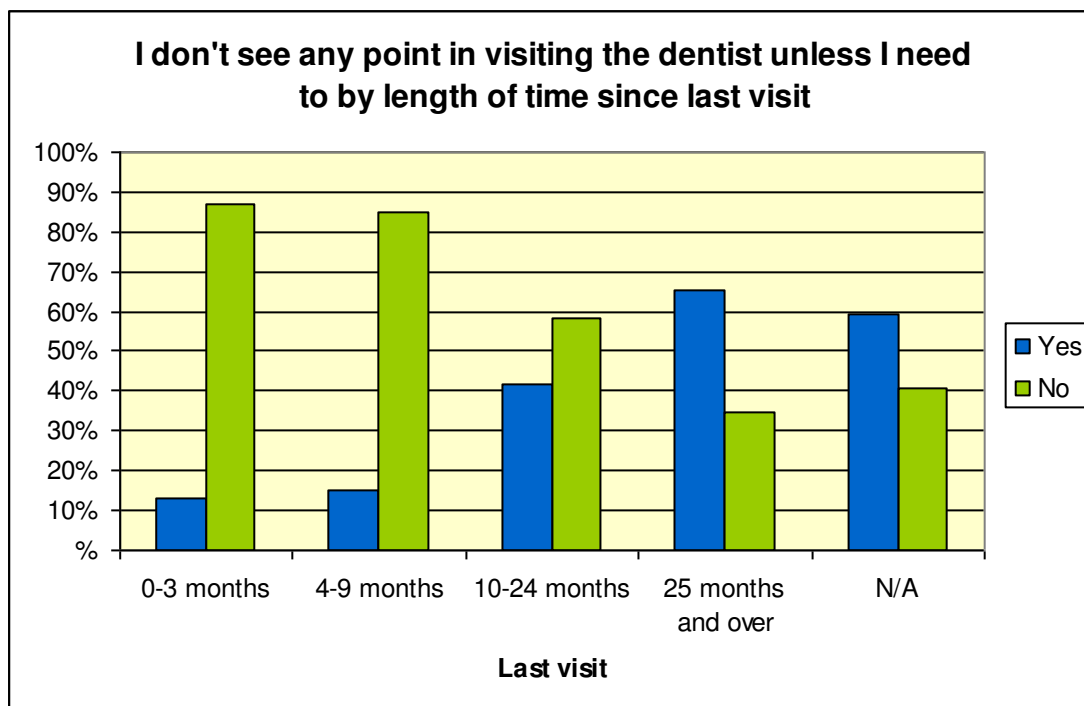
Figure 8



People with no formal education (40.6%) were more likely to have said they saw no point in visiting unless they needed to compared to other groups; particularly those with a degree or higher education (18.3%) (Chi sq=74.287; p=0.000). Retired people, unemployed and those unable to work because of disability or ill health said they saw no point in visiting unless they needed to; less students and employed people reported this. There was statistically significant evidence to support this claim (Chi sq=34.465; p=0.000).

People who have visited recently said there was no point in visiting if they didn't need to compared to those who had not (Figure 25) (Chi sq=471.499; p=0.000). People with 20 teeth or less (45.8%) compared to those with more than 20 teeth held this view (23.4%) (Chi sq=100.285; p=0.000) (Figure 9).

Figure 9



64.2% of dentate respondents said they would like to be able to drop in to see the dentist. There was no relationship between views on a drop in service and gender or by age, ethnicity or locality, educational groups or current working arrangement. However there was for deprivation quintile. More people in deprived localities said they would prefer a drop in service compared to those who lived in the less deprived quintiles (Chi sq=19.819; p=0.001). Those respondents who had not visited the dentist for over 2 years were more likely to have said they would prefer a drop in service compared to more recent visitors to the dentist (chi sq=27.924; p=0.000).

Table 25**Need and Willingness to pay for Cosmetic Treatment by Demographics**

		I think I need cosmetic treatment	Total	I would be willing to pay privately for cosmetic treatment not available on the NHS	Total
Sex	All	1045	2582	763	2537
		40.5%	100.0%	30.1%	100.0%
	Male	372	1049	279	1040
		35.5%	100.0%	26.8%	100.0%
	Female	673	1533	484	1497
		43.9%	100.0%	32.3%	100.0%
Age	16-24	124	274	70	268
		45.3%	100.0%	26.1%	100.0%
	25-34	183	318	120	313
		57.5%	100.0%	38.3%	100.0%
	35-44	228	453	182	447
		50.3%	100.0%	40.7%	100.0%
	45-54	224	480	133	469
		46.7%	100.0%	28.4%	100.0%
	55-64	186	515	157	510
		36.1%	100.0%	30.8%	100.0%
	65+	100	542	101	530
		18.5%	100.0%	19.1%	100.0%
Ethnicity	White	965	2399	722	2357
		40.2%	100.0%	30.6%	100.0%
	Asian or Asian British	33	87	16	83
		37.9%	100.0%	19.3%	100.0%
	Black or Black British	21	40	9	40
	52.5%	100.0%	22.5%	100.0%	
	Other ethnic group	15	29	8	30
		51.7%	100.0%	26.7%	100.0%
Locality	Chatham	313	742	199	731
		42.2%	100.0%	27.2%	100.0%
	Gillingham and Rainham	460	1180	364	1152
		39.0%	100.0%	31.6%	100.0%
	Rochester and Strood	272	660	200	654
		41.2%	100.0%	30.6%	100.0%

Deprivation (IMD) Medway quintiles					
	1	213	482	107	470
		44.2%	100.0%	22.8%	100.0%
	2	226	507	137	494
		44.6%	100.0%	27.7%	100.0%
	3	224	519	152	518
		43.2%	100.0%	29.3%	100.0%
	4	190	538	184	531
		35.3%	100.0%	34.7%	100.0%
	5	192	536	183	524
		35.8%	100.0%	34.9%	100.0%
Education level					
	Degree or Higher education	246	559	233	552
		44.0%	100.0%	42.2%	100.0%
	A levels/higher/equivalent/ ONC/BTEC	178	378	124	375
		47.1%	100.0%	33.1%	100.0%
	O Level/GCSE equivalent	334	743	244	725
		45.0%	100.0%	33.7%	100.0%
	No formal qualification	184	619	100	602
		29.7%	100.0%	16.6%	100.0%
	Other qualification	89	211	51	209
		42.2%	100.0%	24.4%	100.0%
Current employment					
	I am self employed	70	188	70	185
		37.2%	100.0%	37.8%	100.0%
	I am employed full-time	428	894	328	884
		47.9%	100.0%	37.1%	100.0%
	I am employed part time	139	311	103	304
		44.7%	100.0%	33.9%	100.0%
	I am retired	142	629	140	621
		22.6%	100.0%	22.5%	100.0%
	I am unemployed and looking for work	50	89	16	87
		56.2%	100.0%	18.4%	100.0%
	I am unable to work due to disability or ill health	54	108	16	105
		50.0%	100.0%	15.2%	100.0%
	I am caring for my home and family / dependents	79	138	45	134
		57.2%	100.0%	33.6%	100.0%
	I am a full time student	35	99	20	97
		35.4%	100.0%	20.6%	100.0%
	Other	25	66	14	64
		37.9%	100.0%	21.9%	100.0%

6.1.12. Dentate Adults: Cosmetic Treatment

40.5% of dentate people considered they needed cosmetic treatment (Table 26); 30.1% would be willing to pay for it. Only half those who considered they needed cosmetic treatment (50.3%) said they would be willing to pay. More women (43.9%) compared to men (35.5%) said they would consider cosmetic treatment (Chi sq=18.408; p=0.000) and would be more willing to pay (Chi sq=8.841; p=0.003). (Only 2 edentate people said they needed cosmetic treatment but 8.7% of edentate people said they would be willing to pay).

More younger people (under 55) (>45%) thought they needed cosmetic treatment compared to older age groups; the proportion fell to 18.3% after 65. Those aged 25-44 were more willing to pay for it (Chi sq=67.601; p=0.000). There was no relationship between localities and thoughts on cosmetic treatment; however there was for deprivation quintile. People in the two least deprived quintiles thought they needed cosmetic treatment (Chi sq=18.617; p=0.001) and were more willing to pay for it (Chi sq=24.506; p=0.000) compared to more people with no formal education who thought they didn't need cosmetic treatment and were less willing to pay for it.

12.7% of people thinking they needed cosmetic treatment had a denture compared to 22.4% who said they did not need cosmetic treatment; 4.0% had dental implants compared to 3.4% who did not, and there was no difference in the number of fillings, crowns and caps between the two groups.

7. Results: Normal Dental Routine

7.1. Summary

- 10.0% of edentate respondents said they did not clean their teeth every day; 44.6% cleaned them once a day and 45.4% cleaned them twice a day or more
- Only 2.4% of dentate adults said they cleaned their teeth less than once a day; 23.5% cleaned their teeth once a day and 74.1% cleaned them twice or more.
- Men cleaned their teeth less regularly compared to women, and only 63.8% cleaned their teeth twice a day or more compared to 80.6% of women. There was no relationship between cleaning teeth and age. 3.9% of people with no formal qualification did not to clean their teeth every day and least likely to clean their teeth twice a day or more (69.0%), people with a degree (78.2%) or O level / GCSE (77.2%) were most likely to clean their teeth at least twice a day
- 79.8% of dentate adults said they used fluoride toothpaste, 3.3% smoker's toothpaste and 17.7% used another toothpaste. There was no relationship between gender and type of toothpaste used.
- 28.6% used an electric toothbrush; 35.2% of women used dental floss and 45.8% used a mouth wash compared to 18.7% of men who used dental floss and 36.8% who used a mouthwash
- There were no relationship between localities or deprivation quintiles in terms of the type of toothpaste used, except for the use of smokers toothpaste
- 18.8% of dentate adults said they were using tobacco; 17.2% smoked daily. A slightly higher proportion of men used tobacco than women. More younger people up to the age of 44 used tobacco compared to older people, the proportion dropped to 8.4% after the age of 65
- 27.6% of dentate adults living in the most deprived quintile in Medway used tobacco compared to those living in the least deprived quintile (12.2%)
- 35.7% of dentate adults had been asked by their dentist if they use tobacco and 8.6% had been given smoking advice. A greater proportion of people living in the more deprived quintiles had been asked if they smoked and to have been offered advice.

7.1.1. Edentate Adults: Frequency of Cleaning Teeth

10.0% of edentate respondents said they did not clean their teeth every day; 44.6% cleaned them once a day and 45.4% cleaned them twice a day (or more). 24.6% of edentate people said they used fluoride toothpaste, 3.6% used smokers' toothpaste, 24.6% used another toothpaste. 12.3% said they used a mouthwash. 46.4% said they used 'other'

7.1.2. Dentate Adults: Frequency of Cleaning Teeth

Only 2.4% of dentate adults said they cleaned their teeth less than once a day; 23.5% cleaned their teeth once a day and 74.1% cleaned them twice or more. 3.9% of men did not clean their teeth regularly compared to 1.4% of women, less men than women cleaned their teeth twice during the day – 32.2% of men cleaned their teeth once only compared to 17.6% of women and 63.8% cleaned their teeth twice a day or more compared to 80.6% of women (Chi sq=101.298; p=0.000) (Figure 10).

77.5% of people aged 35-54 and 69.4% of people aged 16-24 cleaned their teeth twice a day; however there was no statistical evidence to support a relationship between age and frequency of cleaning teeth. This was also the case between frequency of cleaning teeth and ethnic groups, localities or deprivation quintiles.

The differences between education groups and frequency of cleaning teeth was statistically significant; a higher proportion of people with no formal qualification did not clean their teeth every day (3.9%) compared to other educational groups. 69.0% of people with no formal qualification cleaned their teeth twice a day or more compared to 78.2% of people with a degree and 77.2% with O levels / GCSEs as their highest level of education (Chi sq=32.584; p=0.001).

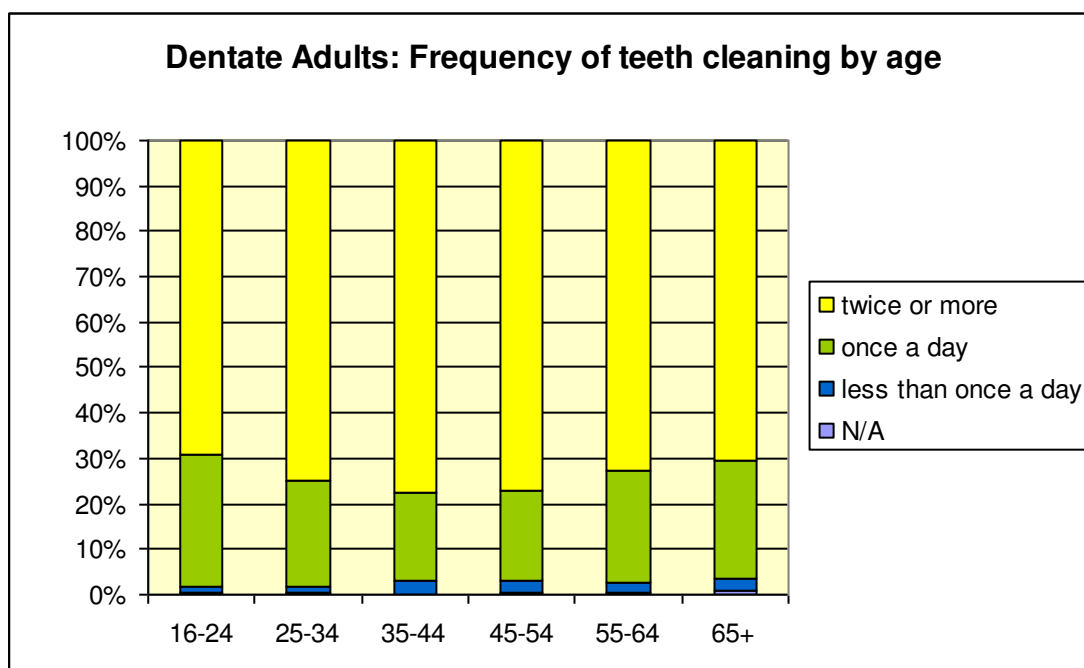
Table 26

Frequency of Teeth Cleaning by demographics

		How often do you clean your teeth?					Total
		Never	Not every day	Once a day	Twice a day	More than twice a day	
Sex	All	5	58	617	1703	244	2627
		.2%	2.2%	23.5%	64.8%	9.3%	100.0%
	Male	5	36	342	613	65	1061
		.5%	3.4%	32.2%	57.8%	6.1%	100.0%
	Female	0	22	275	1090	179	1566
		.0%	1.4%	17.6%	69.6%	11.4%	100.0%
Age	16-24	0	4	80	175	16	275
		.0%	1.5%	29.1%	63.6%	5.8%	100.0%
	25-34	0	4	75	211	28	318
		.0%	1.3%	23.6%	66.4%	8.8%	100.0%
	35-44	1	12	89	318	36	456
		.2%	2.6%	19.5%	69.7%	7.9%	100.0%
	45-54	3	11	95	321	54	484
	.6%	2.3%	19.6%	66.3%	11.2%	100.0%	
	55-64	1	12	129	330	57	529
		.2%	2.3%	24.4%	62.4%	10.8%	100.0%
	65+	0	15	149	348	53	565
		.0%	2.7%	26.4%	61.6%	9.4%	100.0%
Ethnicity	White	5	57	567	1587	222	2438
		.2%	2.3%	23.3%	65.1%	9.1%	100.0%
	Asian or Asian British	0	0	28	50	9	87
		.0%	.0%	32.2%	57.5%	10.3%	100.0%
	Black or Black British	0	0	10	29	5	44
	.0%	.0%	22.7%	65.9%	11.4%	100.0%	
	Other ethnic group	0	1	5	20	4	30
		.0%	3.3%	16.7%	66.7%	13.3%	100.0%
Locality	Chatham	2	22	188	479	69	760
		.3%	2.9%	24.7%	63.0%	9.1%	100.0%
	Gillingham and Rainham	3	20	274	771	122	1190
		.3%	1.7%	23.0%	64.8%	10.3%	100.0%
	Rochester and Strood	0	16	155	453	53	677
		.0%	2.4%	22.9%	66.9%	7.8%	100.0%

Deprivation (IMD) Medway quintiles							
	1	2	19	130	296	47	494
		.4%	3.8%	26.3%	59.9%	9.5%	100.0%
	2	1	14	130	318	48	511
		.2%	2.7%	25.4%	62.2%	9.4%	100.0%
	3	1	10	118	353	51	533
		.2%	1.9%	22.1%	66.2%	9.6%	100.0%
	4	1	7	122	375	42	547
		.2%	1.3%	22.3%	68.6%	7.7%	100.0%
	5	0	8	117	361	56	542
		.0%	1.5%	21.6%	66.6%	10.3%	100.0%
Education level							
	Degree or Higher education	0	7	114	381	60	562
		.0%	1.2%	20.3%	67.8%	10.7%	100.0%
	A levels/higher/ equivalent/ONC/BTEC	0	5	110	224	43	382
		.0%	1.3%	28.8%	58.6%	11.3%	100.0%
	O Level/GCSE equivalent	1	15	154	525	58	753
		.1%	2.0%	20.5%	69.7%	7.7%	100.0%
	No formal qualification	3	22	169	394	47	635
		.5%	3.5%	26.6%	62.0%	7.4%	100.0%
	Other qualification	1	6	50	130	28	215
		.5%	2.8%	23.3%	60.5%	13.0%	100.0%
Current employment							
	self employed	0	5	39	125	21	190
		.0%	2.6%	20.5%	65.8%	11.1%	100.0%
	employed full-time	1	14	204	602	81	902
		.1%	1.6%	22.6%	66.7%	9.0%	100.0%
	employed part time	0	5	59	218	29	311
		.0%	1.6%	19.0%	70.1%	9.3%	100.0%
	retired	0	16	168	412	56	652
		.0%	2.5%	25.8%	63.2%	8.6%	100.0%
	unemployed and looking for work	0	4	34	42	10	90
		.0%	4.4%	37.8%	46.7%	11.1%	100.0%
	unable to work due to disability or ill health	3	10	29	61	6	109
		2.8%	9.2%	26.6%	56.0%	5.5%	100.0%
	caring for my home and family / dependents	0	1	36	88	14	139
		.0%	.7%	25.9%	63.3%	10.1%	100.0%
	full time student	0	3	24	62	10	99
		.0%	3.0%	24.2%	62.6%	10.1%	100.0%
	Other	0	0	11	50	7	68
		.0%	.0%	16.2%	73.5%	10.3%	100.0%

Figure 10



7.1.3. What do they use to clean their teeth

79.8% of dentate adults said they used fluoride toothpaste, 3.3% used smoker’s toothpaste and 17.7% another toothpaste. There was no statistical evidence to support a relationship between gender and type of toothpaste used.

Table 27

Response to question asking what they use to clean their teeth by sex

	Males n=1063	Female n=1575	All n=2638
	%	%	%
Fluoride toothpaste	80.5%	79.2%	79.8%
Smokers toothpaste	2.7%	3.6%	3.3%
Other toothpaste	16.0%	18.9%	17.7%
Electric toothbrush	26.3%	30.1%	28.6%
Dental floss	18.7%	35.2%	28.5%
Mouthwash	36.8%	45.8%	42.2%
Other	7.0%	9.9%	8.7%

28.6% said they used an electric toothbrush; more women (30.1%) than men (26.3%) used an electric brush (not statistically significant). More women (35.2%) said they used dental floss than men (18.7%) (Chi sq=84.241; p=0.000) and more women (45.8%) used a mouthwash than men (36.8%) (Chi sq=21.059; p=0.000). 'Other toothpaste' included special toothpaste for sensitive teeth, tooth whitening paste, tablets for false teeth, inter-dental brushes and manual toothbrushes.

Table 28

Response to question asking what they use to clean their teeth by education level

		Fluoride toothpaste	Other toothpaste	Electric toothbrush	Dental floss	Mouthwash
Degree or Higher education qualification	n=564	496 87.9%	63 11.2%	194 34.4%	210 37.2%	245 43.4%
A levels/higher/equivalent/ ONC/BTEC	n=384	325 84.6%	61 15.9%	91 23.7%	93 24.2%	174 45.3%
O Level/GCSE equivalent	n=755	617 81.7%	116 15.4%	211 27.9%	227 30.1%	349 46.2%
No formal qualification	n=639	452 70.7%	163 25.5%	172 26.9%	155 24.3%	237 37.1%
Other qualification	n=215	164 76.3%	44 20.5%	68 31.6%	57 26.5%	80 37.2%
Total	n=2557	2054 80.3%	447 17.5%	736 28.8%	742 29.0%	1085 42.4%

A lower proportion of people with no formal education (70.7%) or other qualifications (76.3%) used fluoride toothpaste compare to groups other educational groups. Less people with A levels or no formal education used an electric tooth brush (23.7% and 26.9%) or dental floss (24.2% and 24.3%). Less people with no qualification (37.1%) and other qualifications (37.2%) using a mouthwash compared to other groups. There was enough statistical evidence to support these claims.

There was no statistical evidence to suggest a relationship between localities or deprivation quintiles and type of toothpaste used except for the use of smokers toothpaste (used by 4.6% of

those in Medway quintile 1 compared to 1.8% in quintile 5) (Chi sq=13.854; p=0.008) and also the use of an electric toothbrush (chi sq=26.499; p=0.000) and dental floss (Chi sq=9.466; p=0.050) (Table 30).

Table 29

Response to question asking what they use to clean their teeth by deprivation quintile

IMD quintile	Electric toothbrush	Dental floss
1	107 21.6%	120 24.2%
2	130 25.1%	137 26.5%
3	165 30.8%	168 31.4%
4	164 30.0%	160 29.3%
5	188 34.6%	168 30.9%
Total	754 28.6%	753 28.5%

7.1.4. Use of Tobacco

18.8% of dentate adults said they were using tobacco; 18.6% were using cigarettes; not one used Paan; 0.8% smoked a pipe, 0.1% other tobacco substances (hukka, gutka, snuff). 17.2% said they smoked daily and 1.9% less than daily. A slightly higher proportion of men used tobacco than women. Younger people up to the age of 44 used tobacco compared older people, the proportion dropped to 8.4% after the age of 65, there was enough statistical evidence to support this relationship between tobacco use and age (Chi sq=74.846; p=0.000). Dentate adults living in the most deprived quintile in Medway (27.6%) were more likely to have said they were using tobacco than those living in the least deprived quintile 5 (12.2%) (Chi sq=48.465; p=0.000). Less people with a degree (11.2%) and A levels / equivalent 13.6%) said they used tobacco compared to other education groups (Chi sq=48.088; p=0.000).

Table 30
Use of tobacco and dentists response

		Do you use tobacco?	Has your dentist ever asked if you've used tobacco?	Has your dentist ever given you stop smoking advice?
		n=2623	n=2588	n=2484
Sex	All	493 18.8%	371 35.7%	81 8.0%
	Male	205 19.4%	510 33.0%	133 9.0%
	Female	288 18.4%	881 34.1%	214 8.6%
Age	16-24	67 24.4%	73 26.8%	21 7.8%
	25-34	79 24.8%	123 39.0%	37 12.4%
	35-44	123 27.0%	191 42.4%	65 14.8%
	45-54	89 18.4%	164 34.3%	37 8.0%
	55-64	88 16.7%	189 36.3%	37 7.4%
	65+	47 8.4%	141 25.6%	17 3.3%
	Deprivation (IMD) Medway	1	136 27.6%	174 35.8%
2		110 21.4%	199 39.5%	54 11.3%
3		101 19.0%	181 34.4%	48 9.4%
4		80 14.7%	187 34.6%	34 6.7%
5		66 12.2%	140 26.4%	26 5.0%
		n=2543	n=2511	n=2415
Education level	Degree or Higher education	63 11.2%	193 34.5%	38 7.1%
	A levels/higher/equivalent/ONC/BTEC	52 13.6%	115 30.2%	23 6.3%
	O Level/GCSE equivalent	185 24.6%	266 36.1%	85 11.9%
	No formal qualification	135 21.3%	215 34.5%	42 7.1%
	Other qualification	45 21.2%	72 34.0%	18 8.7%

35.7% of dentate adults had been asked by their dentist if they used tobacco and 8.6% had been given smoking advice; there was no statistical evidence of a relationship between gender and tobacco advice. Younger people (26.8% of 16-24 year olds) had not been asked if they smoked by their dentist compared to older people. People aged 25-34 (12.4%) and 35-44 (14.8%) were more likely to have been given smoking advice from their dentist compared to other age groups. There was enough statistical evidence to support these claims. (Chi sq=42.202; p=0.000 for being asked by the dentist and Chi sq=47.069, p=0.000) for given advice).

People living in the more deprived quintiles were more likely to have been asked if they smoked compared to other quintiles (Chi sq=21.156; p=0.000) and to have been offered advice by their dentist (Chi sq=19.356; p=0.001). Despite the fact that a lower proportion of people with a degree or A levels smoked, a similar proportion were asked if they smoked by their dentist compared to the other educational groups. More people with O levels / GCSEs had been given stop smoking advice by their dentist compared to other educational groups (Chi sq=15.936; p=0.000).

8. Conclusion

The Medway Adult Oral Health Survey was the first of its kind to be carried out in the Medway; this survey comprised a stratified sample of 8000 adults aged 16 and over of whom 39.7% responded. This response rate was good in the light of decreasing response to local surveys over the past 20 years. Although the response from men was lower than that for women it was judged that the resulting sample was representative of the population.

The results were reported separately for dentate and edentate adults, who had different experiences in terms of quality of life, and who behaved differently regarding their dental hygiene and visits to the dentist. Edentate people were likely to be aged 65 or over, less likely to have formal educational qualifications and more likely to be living in a more deprived part of Medway.

Results did not pick up any significant differences between the localities of Rochester / Strood, Chatham, and Gillingham / Rainham; there were however differences in findings by deprivation, those in more deprived areas were more likely to have dental issues and less likely to attend for treatment. There was also a view amongst nearly one in three of the population that one didn't need to visit the dentist unless there was a need. Two out of three would have liked to see a drop-in service.

People from more deprived areas were more likely to smoke, and were also more likely to have been offered help regarding smoking. Men were less regular regarding dental hygiene than were women.

The survey was not powerful enough to detect significant differences by ethnicity due to the small number of minority ethnic groups amongst the responders (reflecting the population prevalence).