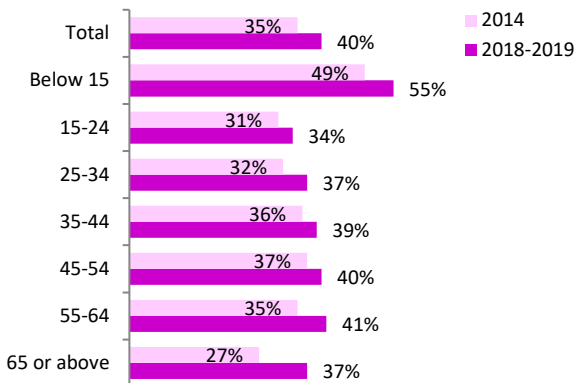




Dental care services for the elderly

Figure 1 – Utilization of dental care services by age group⁽¹⁾



Note: (1) Based on findings of the Thematic Household Survey conducted by the Census and Statistics Department in 2014 and 2018-2019.

Figure 2 – Poverty rate by age group, 2019

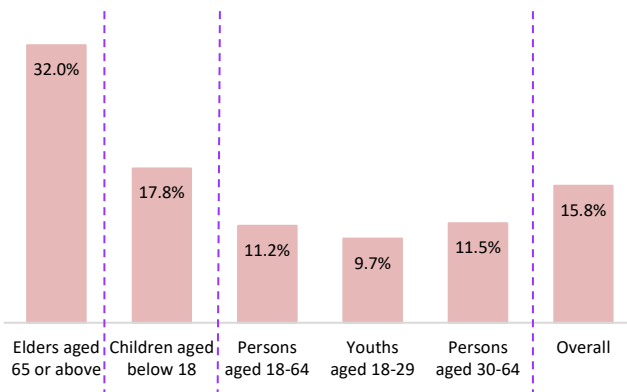


Figure 3 – Dental care assistance programmes for the elderly

ODCP	
- Cumulative number of attendances since October 2014	256 000 ⁽¹⁾
- Financial provision in 2020-2021	HK\$58 million
EDAP ⁽²⁾	
- Cumulative number of beneficiaries since September 2012	77 511
- Funding provision	HK\$1,393 million
- Disbursements	HK\$885 million

Notes: (1) Figure as at 31 January 2021.
(2) Figures as at 30 April 2021.

Highlights

- Good oral health is essential to one's general health and quality of life. Yet, oral problems are prevalent among the population regardless of age. For the elderly in particular, age-related changes in teeth would make them more vulnerable to erosions, cracks and cavities. As recently as 2014, the rate of dental care service utilization for people aged 65 or above was the lowest among all age groups, at only 27%. Yet in the following few years, the ratio was boosted upward by some 10 percentage points to 37% in 2018-2019, a level more in line with other adult age groups (**Figure 1**).
- Budget consciousness of the elderly might be one of the key factors contributing to their earlier low usage of dental services, since they would lose or see a significant reduction in their recurrent income when most of them ceased to engage in full-time employment. Indeed, the elderly have been among the groups that have the highest poverty rate (measured by post-intervention household income), with 391 200 of them living in poverty in 2019 and a poverty rate that hovered at or above 30% during the past decade (**Figure 2**).
- The higher dental care utilization for the elderly in recent years can be attributable to the government's enhanced efforts in improving accessibility of such services to the elderly. In terms of free dental care services, elderly persons receiving long-term care or day care services are entitled to free on-site dental services under the Outreach Dental Care Programme for the Elderly ("ODCP"), a pilot programme launched in 2011 and regularized in 2014. On average, the programme recorded some 40 000 attendances by elderly persons per year since it was regularized. In addition, other low-income elderly persons are provided with free removable dentures and related dental services through the Elderly Dental Assistance Programme ("EDAP") under the Community Care Fund ("CCF"). CCF launched EDAP in 2012 and has expanded the programme in phases since 2015 to benefit more needy elderly persons (**Figure 3**). As at April 2021, about 78 000 needy elderly persons had received support from the programme.

Dental care services for the elderly (cont'd)

Figure 4 – Claims on dental services under EHCVS

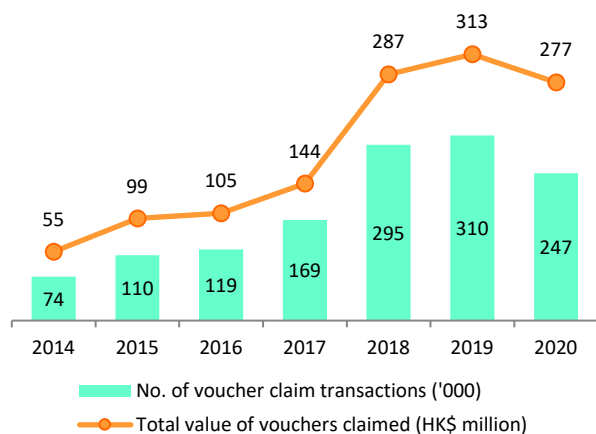
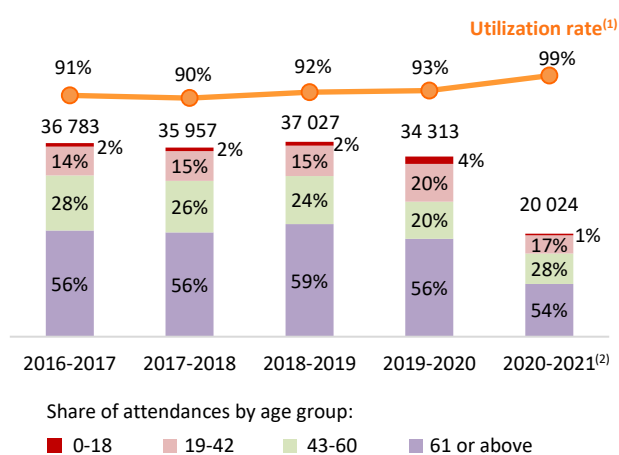
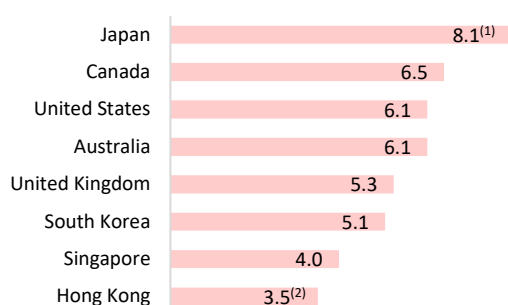


Figure 5 – Number of attendances in GP sessions by age group



Notes: (1) The utilization rate refers to the number of consultation quota allocated as a proportion of the total number of quota available in the respective years. The number of quota in 2019-2020 and 2020-2021 had been reduced in response to the Coronavirus Disease 2019 pandemic.
(2) The figures are up to 31 January 2021.

Figure 6 – Number of dentists per 10 000 population, 2019



Notes: (1) Figure in 2018.
(2) The corresponding figure for 2020 was 3.6.

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Highlights

- In terms of subsidized dental services, the Elderly Health Care Voucher Scheme ("EHCVS") provides an annual voucher amount of HK\$2,000 to eligible elderly persons aged 65 or above to pay for private healthcare services (including dental services). The usage of vouchers for private dental services increased visibly in 2018 and 2019 (Figure 4), when an additional one-off HK\$1,000 worth of vouchers was given to each eligible elderly person in June 2018 and June 2019 respectively. Moreover, usage in 2020 remained relatively high even though no additional \$1,000 vouchers were distributed that year. That said, certain types of services such as dentures, implants and root canal treatments may remain out of reach for some elderly persons, as these procedures can cost thousands or even tens of thousands of dollars and therefore the voucher amount granted might not be enough to cover the entire bill.
- Meanwhile, government dental clinics may not be able to fill in the gap. On one hand, the designated sessions in 11 government dental clinics reserved for the general public ("GP sessions") are assigned to provide only emergency dental services (e.g. pain relief and teeth extraction). On the other hand, the capacity is limited to just around 40 000 consultation quota per year between 2016-2017 and 2019-2020, with high utilization rate of over 90% and people aged 61 or above already taking up more than half of the quota available (Figure 5).
- Indeed, shortage of dental manpower has been an issue more broadly. Vis-à-vis other advanced places, Hong Kong had a low ratio of 3.5 dentists per 10 000 persons in 2019 (Figure 6). To address this issue, the Dental Council of Hong Kong has since 2016 increased the number of licensing examination for non-locally trained dentists from one to two sittings a year. As a result, close to 30 non-local graduates were granted registration qualification to practise dentistry in 2019, up from the single-digit annual figures between 2010 and 2015. The University of Hong Kong has also increased the annual intake of undergraduate dentistry students, from around 50 before the 2016-2017 to 2018-2019 triennium to 80 in the following triennium. Nevertheless, given it takes six years to train a dentist, Hong Kong may have to wait until 2022-2023 to see a visible increase in the supply of locally trained dentists and the consequent impact on service capacity.

Data sources: Latest figures from Census and Statistics Department, Department of Health, Food and Health Bureau, Home Affairs Bureau, Organisation for Economic Co-operation and Development and The Dental Council of Hong Kong.

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