

Policy Statement 2.4 – Research

Position Summary

Dental Research is vital to the quality provision of oral health services in Australia and must be adequately funded by governments

1. Background

- 1.1. Oral diseases and disorders are a major public health problem in Australia with a high economic burden (estimated to be \$10.7 billion per annum in 2016/17¹, representing 5.6% of total health expenditure²). Current research in Australia and overseas is continuing to identify links between oral disease and broader health problems. Despite this, dental research continues to receive inadequate funding.
- 1.2. The dental workforce in Australia is in oversupply. Unemployment and under employment rates are rapidly escalating. For the foreseeable future, Australia will be training more dental practitioners than it needs. Timely workforce research is key to managing workforce.
- 1.3. Australia has a long and internationally distinguished record of research into the prevalence, aetiology, control and treatment of oral diseases and disorders. This research has resulted in major improvements in Australians' oral and general health.
- 1.4. The majority of dental research in Australia is conducted within the University Dental Schools.
- 1.5. Preventive dentistry is an important research area for improving national oral health.
- 1.6. The main sources of funding in health research are the National Health and Medical Research Council (NHMRC) and the Australian Research Council (ARC). Funding by the Federal Government for dental research has been inadequate.
- 1.7. The Australian Dental Association Inc (ADA) has played a supportive role to dental research through its involvement in the Australian Dental Research Foundation Inc.

Definitions

- 1.8. BOARD is the Dental Board of Australia.
- 1.9. ECONOMIC BURDEN is the total amount spent on dental treatment in the private and public sectors. It does not include associated costs such as time away from work.
- 1.10. NATIONAL ORAL HEALTH SURVEY is a comprehensive Australia-wide survey of the oral health status and treatment needs of the Australian community.

2. Position

- 2.1. Dental workforce planning must be based on up-to-date demographic and workforce research.
- 2.2. National Oral Health Surveys should be conducted at least every ten years and reported in a timely fashion.
- 2.3. The Commonwealth Government must adequately fund National Oral Health Surveys.

¹ AIHW 2016. Oral health and dental care in Australia: key facts and figures 2015. Dental statistics and research series. Cat. no. DEN 229. Canberra: AIHW. Released 28 January 2016.

² AIHW 2016. Health expenditure Australia 2014–15. Health and welfare expenditure series no. 57. Cat. no. HWE 67. Canberra: AIHW. Released 6 October 2016.

This Policy Statement is linked to other Policy Statement: 2.1 National Oral Health, 3.1 Dental Workforce, 6.8 Evidence-Based Dentistry & 2.10 Oral Health and Social Determinants of Health

- 2.4. Data collection for National Oral Health Surveys should be conducted through clinical examination by registered dental practitioners.
- 2.5. Research design, methodology and interpretation should be performed by appropriately trained researchers in collaboration with practising dentists.
- 2.6. National Oral Health Surveys must have an adequate sample size.
- 2.7. Government funding should be provided for accurate workforce data to be collected and collated nationally on an annual basis. The analysis of the data should be promptly and readily available.
- 2.8. Government funding should be provided for appropriate research to collect and analyse oral health data.
- 2.9. Priority should be given to research into:
 - the prevention and control of oral diseases;
 - the links between oral diseases and general health;
 - economic benefit of oral health;
 - regeneration and restoration of lost tissue;
 - the maintenance of healthy oral function.
- 2.10. Research should be conducted in facilities utilising state-of-the-art technologies complying with the NHMRC's National Statement on Ethical Conduct in Human Research.
- 2.11. Governments, both Commonwealth and State, should fund dental research. Such funds should be awarded on scientific merit determined by a peer review process. The NHMRC and ARC should make oral disease a research priority.
- 2.12. Additional support and funding for dental research from the community and dental profession are appropriate and should be encouraged. The ADA should encourage dental research through its continuing support of the Australian Dental Association Foundation and the Australian Dental Research Foundation Inc.
- 2.13. Where dental research is funded by a commercial body:
 - such funding must be disclosed;
 - such funding should be acknowledged;
 - the findings of such research must not be influenced or suppressed in any way; and
 - the funding body must not use a link or connection to such research to mislead the public.
- 2.14. Research in University Dental Schools should be fostered and adequately funded

Policy Statement 2.4

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Amended by ADA Federal Council, August 21, 2020

Amended by ADA Federal Council, November 20, 2020