



Brotherhood of St. Laurence
Working for an Australia free of poverty



Good Shepherd
Australia New Zealand

Provision of and Access to Dental Services in Australia

Good Shepherd and Brotherhood of St. Laurence would like to thank the Committee for the opportunity to make a submission to the Provision of and Access to Dental Services in Australia Inquiry ('the Inquiry').

Good Shepherd is a not-for-profit organisation that challenges the critical issues facing women, girls, and their families, to support them to be safe, well, strong, and connected. Good Shepherd provides specialist family violence, sexual assault, and financial wellbeing services across Australia, which includes counselling, housing, case management, financial assistance, and microfinance.

The **Brotherhood of St. Laurence** (BSL) is a social justice organisation working alongside people experiencing disadvantage to prevent and alleviate poverty across Australia. BSL's approach is informed directly by people experiencing disadvantage and uses evidence drawn from our research, together with insights from our programs and services, to develop practical solutions that work.

Our organisations have prepared this joint submission because we have identified common challenges faced by the people we support through our programs.

Dental care is not affordable

The affordability of dental care is a pressing issue for many Australians, particularly those on a low income, including those whose primary income is from social security payments. **Around 2 in 5 Australians have avoided or delayed dental care due to the cost, and this proportion is increasing over time.**¹ This impacts women more than men, driven by gender inequality such as the higher rates of poverty and low-income work among women. While some communities have access to public dental services, these often have long waiting periods and a limited scope of practice.

The majority of dental services provided in Australia are paid for privately, by citizens. Some private health insurance covers offer rebates, however this insurance is out of reach to most people with a low income, and provides limited value to those who can afford it.²

In BSL's experience, programs offering free dental care have seen immediate and high levels of take-up, particularly among the refugee and asylum seeker communities, many of whom have waited a long time for urgent dental work and have been living with severe pain because they cannot afford a private dentist. Unfortunately, programs able to provide this care are often short-lived.

¹ [Oral health and dental care in Australia, Costs - Australian Institute of Health and Welfare \(aihw.gov.au\)](https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/private-health-insurance)

² <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/private-health-insurance>

People are going into debt to pay for dental care

In addition to delaying treatment, the cost of dental treatment is resulting in people taking on personal debt in order to pay their dental bills. This includes using credit cards, Buy Now Pay Later (BNPL) accounts, and No Interest Loans. In the last 5 years, **1,163 people received a Good Shepherd NILs loan for dental treatment**, of which 78 per cent were women. More broadly, the reliance on debt to fund dental care is so established that there are several BNPL providers who operate solely within the dental industry.

Using BNPL products is risky for people on low incomes. As presented in our *Safety Net for Sale* report, Good Shepherd clients are going without basics, delaying other payments, and taking on further debt in order to service BNPL payments. As long as BNPL is not regulated as a credit product, people experiencing financial stress lack basic consumer protections such as affordability checks and hardship provisions. While BNPL is particularly problematic, the fact remains that no citizen should have to go into debt in order to pay for basic health care, including dental care.

Dental care is primary health care

Investment in dental care prevention reduces pain, distress, and higher treatment costs down the line. However, **20 per cent of men and 30 per cent of women have difficulty paying for preventive dental care**. Insights from people participating in BSL's employment services indicate that lack of access to timely and affordable dental care is a barrier to employment. Dental health has strong links to mental wellbeing and self-esteem,³ financial wellbeing through one's ability to participate comfortably in the workplace,⁴ and nutrition, through the ability to eat a range of foods.

There is also an important link between dental health and family violence: women who have experienced head and facial injuries due to family violence may need considerable restorative dental work. Without it, they too face pain, discomfort, embarrassment, and social isolation. However, experiencing family violence does not on its own qualify someone for access to the public dental system, nor does it give priority access.⁵ There are currently women in Australia who are footing the bill for dental care required as a result of family violence.

Dental care must be more accessible, and affordable

Access and affordability of dental care must be improved, particularly for women who have experienced family violence and/or poverty. There are a range of complementary measures that can be taken to reach these aims, including:

- Inclusion of dental care (prevention, treatment, and restoration) under Medicare
- Increased resourcing for public dental services, in order to reduce wait times
- Adding the experience of family violence to the list of characteristics that a) qualifies someone for public dental care, and b) prioritises their care.

³ [Association Between Mental Health and Oral Health Status and Care Utilization - PMC \(nih.gov\)](#)

⁴ [Oral health and dental care in Australia, Introduction - Australian Institute of Health and Welfare \(aihw.gov.au\)](#)

⁵ [Access to Victoria's public dental care services \(health.vic.gov.au\)](#)

Providing better dental care to women who experience poverty, financial hardship, and family violence will support their health, financial security, and recovery. No woman should have to go into debt to fund basic health care, especially when it is needed due to family violence.

We encourage the Committee to consider the intersection of dental care with the gendered nature of poverty, and family violence, in their final report. We look forward to continuing to work with the Committee and Commonwealth Government to prevent and eliminate poverty, and address the impacts of family violence.

Submitted to
Senate Select Committee into the Provision of and Access to Dental Services in Australia
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