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Nativity Status predicts Dental Healthcare Disparities among Diabetics and Prediabetics in New York City: An Analysis of the New York City Health and Nutrition Examination Survey 2013-2014

Purpose: To determine if nativity status is associated with a reduced number of visits to the dentist among diabetics and pre-diabetics in NYC. We postulated that diabetic and pre-diabetic immigrants will have less than one dental visit per year.

Methods: Using data from the 2013-2014 NYC HANES cross-sectional study, the relationship between access to oral healthcare and nativity status among adult diabetics and pre-diabetics was assessed. The outcome variable was oral healthcare access, self-reported and defined as having at least one visit to the dentist within the last year. The main predictor variable was nativity status categorized and self-reported as either "US-Born, 50 States and DC Only" or "Not US-Born". Chi square analysis looked at the associations between nativity status and sociodemographic factors. Weighted logistic regression estimated the odds of visiting the dentist in the past year.

Results: There were a total of 492 diabetics and pre-diabetics participants of which 43.59% were born in the US while 56.41% were born outside of the US. Most participants had dental insurance (69.77%) and lived in low poverty neighborhoods (55.25%). There were highly significant associations between nativity status and age ($X^2(4) = 31.78$), race/ethnicity ($X^2(4) = 108.32$) and education attainment ($X^2(3) = 31.05$), $P < 0.0001$ respectively. No association was found between nativity status and having dental insurance, $P=0.13$. After adjusting for confounders in the model, immigrants were 84% more likely to have visited the dentist within the last year as compared to non-immigrants (AOR=1.84, 95%CI 1.09-3.11, $P=0.02$).

Conclusion: Diabetic and pre-diabetic immigrants had a higher rate of dental care service utilization and were more likely to visit the dentist within the past year as compared to US non-immigrants. This is indicative of the effectiveness of ongoing NYC Department of Health diabetes education outreach initiatives that target low income, immigrant communities.