Background

Oral health and sense of hearing are important components of an elder’s general health and well-being. The *Oral Health of Older Americans* found that more elders are keeping their natural teeth than ever before; however, there are sharp differences in natural teeth retention that vary by race and economic status.¹ Overall, non-Hispanic blacks, Hispanics, and American Indians and Alaska Natives generally have the poorest oral health of any racial and ethnic groups in the United States.⁶ In 2006, 37 million adults in the United States had trouble hearing (ranging from a little trouble to being deaf). Men (4.3%) were more likely than women (2.4%) to be deaf or experience more trouble hearing. Non-Hispanic American Indian or Alaska Native (A/AN) adults had the highest rates of reported hearing trouble amongst any race/ethnicity groups studied by the Center of Disease Control in the study of health disparities among adults with hearing loss: United States, 2000-2006.¹

Key Information

The participants from the “National Indian Council on Aging, Inc. (NICOA) Needs Assessment” included 533 females (77.9%) and 135 males (19.7%). Participants were also divided into four age groups: 50-54 years (2.1%), 55-64 years (33.6%), 65-74 years (43.6%), 74 years and over (18.6%).

- Participants age >74 with a perceived health status of “good” reported the highest percentage (44.9%) of trouble hearing.
- Males a with perceived health status of “good” reported a higher percentage (37.5%) of dentist or dental hygienist visits in the past year.

Figure 1. Percent of Self-Reported Good Health by Trouble Hearing and Age Group

The collaborative partners wish to thank the NICOA Elders for being an inspiration to us and for their contribution to the life of our people.
Conclusions/Implications

About one-third of Americans between the ages 65 and 74 have hearing problems. Dental problems in people are among the most common health problems experienced by the elderly. In 1981, the NICOA Survey, Health Status of Urban Indian Elders, elders self-reported their health status as poor (15%), while in 2014, only 3.2% indicated poor health. In 1981, 33% of elders reported they were in fair health while in 2014 29% indicated they were in fair health. In 1981, 33.2% of elders reported dental problems, while in 2014, 31.3% reported not seeing a dentist in the past year. In 1981, 21% of elders reported hearing problems, while in 2014 44.4% reported hearing problems. Although this project indicates that oral health has improved, hearing problems have escalated and continue to be a contributing factor for AI/AN elders indicating a continued need for services.

Warning Signs for Dental Problems

- Changing bad breath
- Dry mouth
- Canker sores
- Receding gums, tooth cavities, hypersensitivity, and discoloration of the teeth.

Prevention

- Brushing at least twice a day, flossing, and mouth washing
- Regular checkups.

Warning Signs for Hearing Loss

- Ringing or buzzing in ears after exposure to noise
- Experiencing fullness in ears after leaving a noisy area
- Being able to hear people talk but not understanding them after exposure to noise.

Prevention

- Avoid loud noises, wear hearing protection such as earplugs, and regular hearing tests.

References


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