



FDI DRAFT POLICY STATEMENT

Providing Basic Oral Healthcare for Displaced Persons

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Final Draft 2

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2 **CONTEXT**

3 The world is witnessing an era in which the scale of global forced displacement is
4 increasing. According to the United Nations High Commissioner for Refugees
5 (UNHCR), by the end of year 2017, 68.5 million individuals had been forcibly displaced
6 worldwide as a result of persecution, armed conflict, generalized violence, natural
7 disasters, famine, and economic changes. Almost 25 million of them were refugees, 40
8 million were displaced internally and 3 million were asylum-seekers.¹

9 Displaced persons are among the most vulnerable groups worldwide. They have limited
10 access to both preventive and therapeutic dental care. The consequences of untreated
11 tooth decay and dental emergencies include pain, dysfunction, systemic illnesses and
12 poor quality of life. Barriers to dental care among displaced persons include high cost
13 of dental treatment, lack of dentists and dental insurance, as well as language barriers
14 in the case of displaced persons abroad, including asylum seekers.^{2,3,4,5}

15

16 **SCOPE**

17 Governments, judicial and legislative institutions should recognize that dental
18 professionals have the duty to provide dental care based on clinical urgency and need
19 rather than political, religious, ethnic or civil status. Neither governments nor legislative
20 bodies should prevent or impede this duty. Non-governmental organizations should be
21 encouraged to intervene in this public health emergency. All stakeholders should
22 actively contribute to United Nations Sustainable Development Goal 10: "Reduce
23 inequalities".⁶

24

25 **DEFINITIONS**

26 Displaced persons are defined as persons or groups of persons who have been forced
27 to flee, or leave, their homes or places of habitual residence as a result of armed
28 conflict, internal strife, and/or habitual violations of human rights, as well as natural or
29 man-made disasters involving one or more of these elements.¹

30

31 **PRINCIPLES**

32 All people are equal in their right to access oral healthcare.

33 All people, including displaced persons, should have access to appropriate medical and
34 dental care without prejudice or fear of discrimination.

35

36 **POLICY**

37 FDI:

38 • emphasizes that regardless of political, religious, ethnic or civil status, displaced
39 persons require appropriate, basic oral healthcare, conditional on consent and
40 bound by confidentiality;

41 • recognizes that displaced persons may be more susceptible to discrimination and
42 neglect, and that appropriate treatment shall be provided by dental care
43 professionals when clinically indicated. The necessary treatment may not be
44 withheld or diminished on non-clinical grounds;

45 • recognizes displaced persons as a vulnerable group that often have high treatment
46 needs and multiple barriers preventing their access to appropriate and timely dental
47 care;

48 • notes that displaced persons may not have access to adequate and continuous
49 care. Thus, when possible, appropriate treatment plans should be made to ensure
50 sustainable and effective clinical outcomes;

51 • recognizes that dental professionals have an ethical commitment to provide oral
52 healthcare to all people, including displaced persons;

53 • recognizes that dental professionals need adequate time and sufficient resources
54 to assess clinical, physical and psychological needs of displaced persons;

55 • stresses the importance of full cooperation and coordination between governmental
56 and non-governmental institutions working with displaced persons, and local dental
57 associations in order to provide the appropriate dental care to displaced persons;

58 • encourages dental associations to promote the right of all people, including those
59 who are displaced, to receive necessary and appropriate evidence-based dental
60 care on the basis of clinical need;

61 • discourages legislative and civil practices that limit access to appropriate dental
62 care for displaced persons;

63 • encourages dental schools to prepare dental students to be competent and
64 confident in meeting the challenges faced when treating displaced persons.

65 • encourages host countries, in collaboration with local dental associations and with
66 the support of governmental and non-governmental organizations, to develop
67 preventive and therapeutic strategies and interventions to reduce the oral disease

68 burden among displaced persons;
69 • calls for a global approach to meet displaced persons' healthcare needs that
70 includes oral health as an essential component. Strategies to treat appropriate
71 dental needs and prevent further disease among displaced persons should be
72 included in such an approach.

73

74 **KEYWORDS**

75 displaced persons; basic oral healthcare; dental ethics

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77 **DISCLAIMER**

78 The information in this policy statement was based on the best scientific evidence
79 available at the time. It may be interpreted to reflect prevailing cultural sensitivities and
80 socio-economic constraints.

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