



Dental Fear Is Real. Providers Can Help.

Fear of dental care poses a significant barrier to receiving dental treatment and affects people across socioeconomic and demographic groups.¹ Many individuals with dental fear find themselves in a “cycle of avoidance” in which their fear leads to avoidance of regular dental care, followed by deterioration of their oral health, resulting in a need for dental treatment that is more invasive than would be needed for preventive care. This invasive treatment reinforces individuals’ fear of future dental treatment, and the avoidance cycle begins again.² Given the clear connection between oral health and overall health,³ avoidance of dental care due to fear has health implications that extend well beyond a healthy smile.

State of Oral Health Equity in America 2021, a survey designed and commissioned by CareQuest Institute for Oral Health, found that dental fear is linked to more than just skipping a six-month cleaning now and then. A high level of dental fear was associated with missing teeth and poor overall oral health, as well as difficulties in everyday activities and even missing out on job opportunities due to oral health problems. These findings highlight the importance of dental fear as a barrier to good oral and overall health.

Dental Fear Affects Individuals Across All Socioeconomic and Demographic Groups, but Not Equally

Nearly

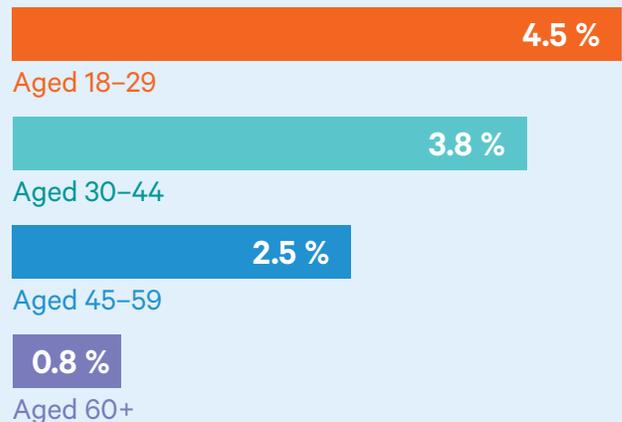
3% of respondents (2.6%) reported that at their last dental appointment, they were **“so frightened and nervous” that it either made the dental treatment difficult, or the treatment didn’t succeed.**



60% of respondents who reported experiencing dental fear at their last dental appointment **were female.**

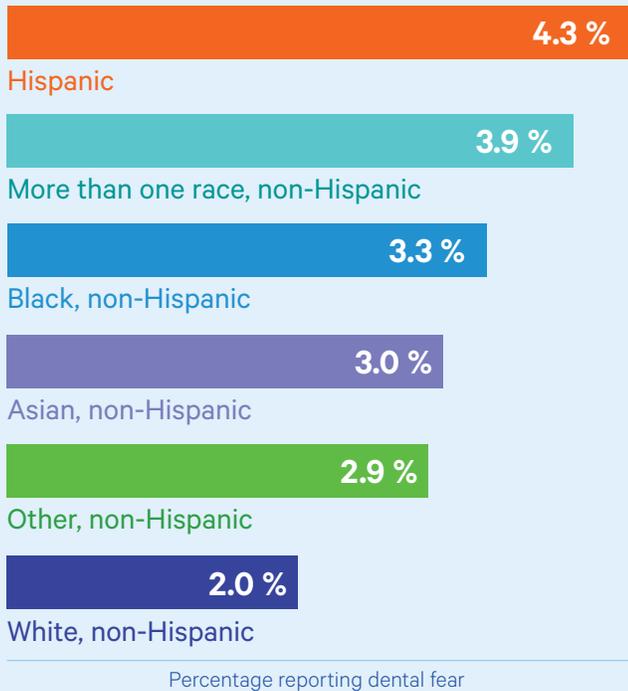
Dental fear decreased with age.

While nearly **5%** of respondents **aged 18–29 reported experiencing dental fear** at their most recent dental appointment, this figure dropped to less than **1%** of individuals **aged 60 and above.**



Percentage reporting dental fear

Hispanic individuals were more than **two times more likely** to report dental fear compared with white respondents (4.3% vs. 2%). Black (3.3%) and Asian (3%) respondents were also **more likely to report dental fear than white participants.**



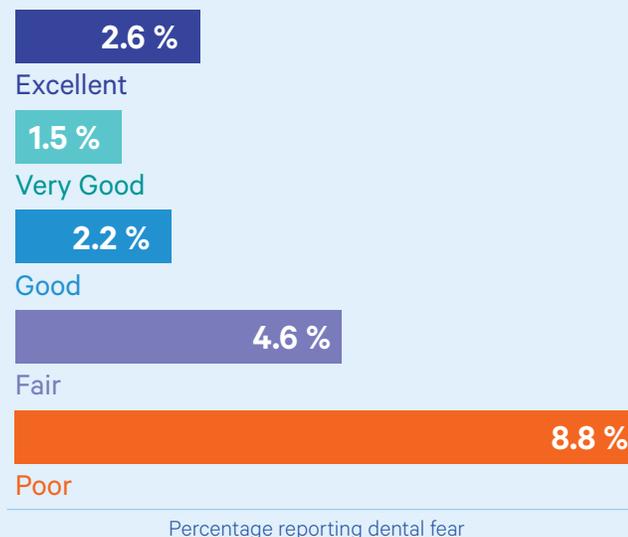
Individuals with less than a four-year college degree were **more likely** to report dental fear (3–4%) compared to individuals with at least a bachelor's degree (1.3–1.4%).

Individuals making less than \$60,000 per year were **more likely** to report dental fear (3.1–4.1%) than those making \$60,000 or above (1.5–1.8%).



Dental Fear Is Strongly Linked with Overall Oral Health

Individuals who described their **oral health as “poor” reported significantly more dental fear (8.8%)** than those who rated their oral health as “very good” (1.5%) or “excellent” (2.6%).



Nearly **6%** of those who had **lost all their teeth to caries or periodontal disease indicated that they had dental fear,** as opposed to less than **2%** of those who had not lost any teeth.



Individuals with Dental Fear Experience Impacts Beyond Oral Health

Nearly

20% of individuals who said they “very often” had **difficulties in the past year doing everyday activities due to problems with their teeth, mouth, or dentures also reported having dental fear.** This is compared to **1.2%** of respondents who said they “never” had such problems.

18.8 %

Very often had difficulties

9.0 %

Fairly often had difficulties

6.1 %

Occasionally had difficulties

3.3 %

Hardly ever had difficulties

1.2 %

Never had difficulties

Percentage reporting dental fear



12% of individuals who said **they believed they did not get a job within the past year because of their teeth reported having dental fear,** compared with **2%** of those who did not report such a belief.

Dental Fear Can Significantly Affect Dental Treatment



Individuals who had visited an **emergency department (ED) for a dental visit in the last year were significantly more likely to report dental fear (15%)** than those who had not had an ED dental visit **(2%)**.



Individuals who received **sedation at a dental visit within the past two years were significantly more likely to report experiencing dental fear (7%)** than those who did not receive sedation **(2%)**.

Those who had **not seen a dentist in the previous six months were significantly more likely to report dental fear (3.7%–4.2%)** than those who had seen a dentist in the past six months **(1.5%)**.

4.2 %

More than a year and less than two years since last dental visit

3.7 %

Between 6 months and a year since last dental visit

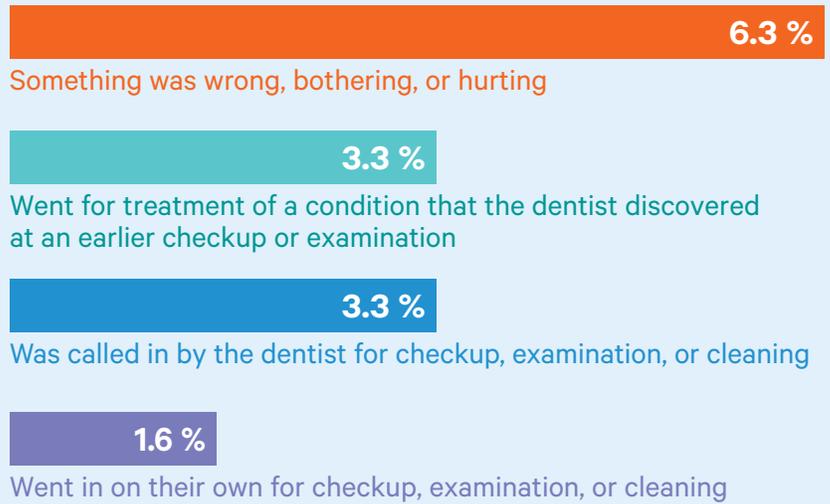
1.5 %

Less than 6 months since last dental visit

Percentage reporting dental fear



Respondents who had **seen a dentist most recently for an urgent dental issue were significantly more likely to report having dental fear at their last dental visit (6.3%)** than individuals who saw a dentist for a non-emergent issue **(1.6%–3.3%)**.



Percentage reporting dental fear

Dental Providers Play a Key Role in Reducing Dental Fear

Collaborating with patients by listening to their concerns, building trust through good communication, providing information about procedures, and taking treatment at each patient's pace and comfort level are important ways in which dental providers can help patients feel more comfortable receiving dental treatment. Many dental schools now include dental fear management training in their curricula. In addition, several resources exist for dental providers to improve their skills in treating and managing dental fear. Textbook resources include [Treating Fearful Dental Patients: A Patient Management Handbook](#),⁴ [Cognitive Behaviour Therapy for Dental Phobia and Anxiety](#),⁵ and [Behavioral Dentistry](#).⁶

[Dental Fear Central](#), a self-help website based in the United Kingdom that serves individuals fearful of dental care, offers several [resources for dental providers](#) who wish to build their skills in reducing their patients' dental fear.⁷ State and local dental societies often offer continuing education courses in the management of dental fear, anxiety, and phobia, including behavioral and pharmacological anxiety management techniques. Dental providers can and should play a leading role in improving the oral health and overall health of their communities by making their patients feel more comfortable in the dental chair.

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Methodology:

State of Oral Health Equity in America 2021 is a nationally representative survey of consumer and patient attitudes, experiences, and behaviors related to oral health. It was designed and commissioned by CareQuest Institute for Oral Health. The survey was administered in January and February 2021 to adults 18 and older by NORC at the University of Chicago on the AmeriSpeak panel. AmeriSpeak is a probability-based panel designed to be representative of the US household population. Randomly selected US households were sampled using area probability and address-based sampling, with a known, non-zero probability of selection from NORC National Sample Frame. Sampled households were contacted by US mail, telephone, and field interviewers. A sampling unit of 16,986 was used, with a final sample size of 5,320 and a final weighted cumulative response rate of 5.2%. All data presented account for appropriate sample weights. The margin of error for the survey is 1.86%. All differences described in this report are statistically significant. Individuals who had visited a dentist within the prior two years were asked how they felt at their last dental visit. Participants who responded either "I was so frightened and nervous that it made the treatment difficult" or "I was so frightened and nervous that the treatment didn't succeed" were considered to have experienced dental fear.

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References:

1. Silveira, Ethieli Rodrigues; Cademartori, Mariana Gonzalez; Schuch, Helena Silveira; Armfield, Jason A.; and Demarco, Flávio Fernando. "Estimated Prevalence of Dental Fear in Adults: A Systematic Review and Meta-analysis." *Journal of Dentistry* 108:103632 (May 2021), doi: 10.1016/j.jdent.2021.103632.
2. Armfield, Jason M., Stewart, Judy F., and Spencer, A. John. "The Vicious Cycle of Dental Fear: Exploring the Interplay Between Oral Health, Service Utilization and Dental Fear." *BMC Oral Health* 7, no. 1 (January 2007), doi: 10.1186/1472-6831-7-1.
3. CareQuest Institute for Oral Health. *Impacts Beyond the Mouth*. Boston, MA: June 2020. DOI: 10.35565/CQI.2020.4002. Accessed November 30, 2021. <https://www.carequest.org/system/files/CareQuest-Institute-Impacts-Beyond-The-Mouth-Infographic.pdf>.
4. Peter Milgrom, Philip Weinstein, and Lisa J. Heaton, *Treating Fearful Dental Patients: A Patient Management Handbook*, 3rd edition (Seattle: Dental Behavioral Resources, 2009).
5. Lars-Göran Öst and Erik Skaret, editors. *Cognitive Behaviour Therapy for Dental Phobia and Anxiety* (West Sussex: Wiley, 2013).
6. David I. Mostofsky and Farida Fortune, editors. *Behavioral Dentistry*, 2nd edition (West Sussex: Wiley-Blackwell, 2014).
7. Dental Fear Central, <https://www.dentalfearcentral.org>; "Dental Fear and Anxiety Management: A List of Resources," <https://www.dentalfearcentral.org/tips/resources/>, accessed November 30, 2021. Available from [Dental Anxiety Management Resources \(dentalfearcentral.org\)](https://www.dentalfearcentral.org/tips/resources/).

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