

State of Oral Health Equity in America 2021

RESEARCH BRIEF

The Connection Between Oral Health and Mental Health

**New Survey Finds Poor Mental Health Status May Be Linked to
Dental Fear and Delayed Dental Care**

SUGGESTED CITATION:

Kelly A., Diep V., Frantsve-Hawley J., Tranby E. The Connection Between Oral Health and Mental Health — New Survey Finds Poor Mental Health Status May Be Linked to Dental Fear and Delayed Dental Care. Boston, MA: CareQuest Institute for Oral Health; May 2021. DOI: 10.35565/CQI.2021.2032
Copyright ©2021 CareQuest Institute for Oral Health, Inc.

Authors

Abigail Kelly, MS

Biostatistician, Analytics and Evaluation
CareQuest Institute for Oral Health

Vuong K. Diep, MPH

Health Science Specialist, Analytics and Evaluation
CareQuest Institute for Oral Health

Julie Frantsve-Hawley, PhD, CAE

Director, Analytics and Evaluation
CareQuest Institute for Oral Health

Eric P. Tranby, PhD

Data and Impact Manager, Analytics and Evaluation
CareQuest Institute for Oral Health

Acknowledgements

Chelsea Chokas

Project Coordinator, Interprofessional and Value-Based Care
CareQuest Institute for Oral Health

Melinda Clark, MD

Pediatrics Specialist
Albany Medical College

Cameron L. Randall, PhD

Acting Assistant Professor, Department of Oral Health Sciences
University of Washington School of Dentistry



Introduction

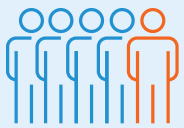


Even before the COVID-19 pandemic, poor mental health could be linked to exacerbated oral health issues. Studies have shown that those with poor mental health also tend to have poor oral health, and are more likely to have decayed teeth, periodontal disease, and dry mouth.^{1,2} During the last year there has been an increased incidence of cracked teeth which media reporting has linked to the stress caused by the COVID-19 pandemic.³ Access to care was also hindered by closure of dental offices at the height of the pandemic, which worsened oral problems.

In January and February 2021, The CareQuest Institute for Oral Health conducted a nationally representative survey to examine attitudes, experiences, and behaviors related to oral health. Respondents self-rated their mental health and oral health status and answered questions about oral healthcare utilization. The survey relied on self-report of the individual's mental and emotional health, which is impacted by myriad factors and personal circumstances. Findings from this study showed consistent oral health disparities among those with self-identified poor mental health.

Key Findings:

Mental health is a pervasive public health issue.



Almost
1 out of 5
respondents rated their
current mental health status as fair or poor
(14% fair, 4% poor).

Mental health is as important as oral health.



85% of respondents thought **mental health was equally important as or more important than oral health.**
However, **15%** said it was less important.

Poor mental health status can influence dental visit experiences. Dental anxiety is common.



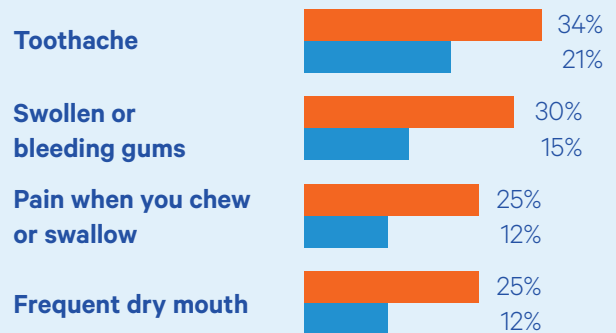
47% of respondents with poor mental health* said **their last dental visit “went well, but they were nervous”** compared with **27%** of those with good mental health status.

- Those with poor mental health status were also **more likely** to say they were **“so frightened and nervous that it made treatment difficult”** (poor vs good: **4%** vs **1%**).

* Self-rated mental health was dichotomized to poor (poor, fair) or good (excellent, very good, or good).

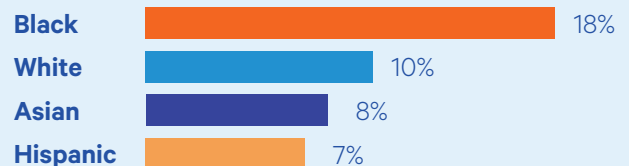
Poor mental health status is associated with greater oral health needs.

- Those who identified as having poor mental health status reported **higher rates of unmet oral health needs** in all categories.
- The top unmet oral health needs by mental health status (**poor** vs **good**) were as follows:



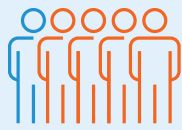
Opioids are prescribed for dental problems at higher rates for those with poorer mental health.

- Americans who had poor mental health **were prescribed opioids for a problem with their teeth or mouth after surgery at a higher rate** than those with good mental health.
- Black respondents with poor mental health received the **greatest number of opioid prescriptions** for problem with their teeth or mouth after surgery compared to other racial/ethnic groups.



- Those with poor mental health and lower income were **more than twice as likely to receive a prescription for opioids** after oral surgery than those with poor mental health in the highest income group (**12%** of patients with income of less than \$30,000 vs **6%** for those with incomes of \$100,000 or greater).

Those with poor mental health are more likely to have lower confidence because of poor oral health.



Those who had poor mental health were nearly

4x more likely

to report they were **self-conscious or embarrassed because of their teeth, mouth, or dentures** than those respondents with good mental health (**19%** vs **5%**).



Those with poor mental health were also

less likely

to say that they were **“hardly ever or never”** self-conscious or embarrassed because of poor oral health than those with good mental health (**48%** vs **70%**).

Methodology:

The 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 by the CareQuest Institute for Oral Health. The survey was administered in January and February 2021, to adults aged 18 and older, by the NORC at the University of Chicago as part of the AmeriSpeak panel. AmeriSpeak is a probability-based panel designed to be representative of the U.S. household population. Randomly selected U.S. households were sampled using area probability and address-based sampling, with a known, non-zero probability of selection from the 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; the final weighted cumulative response rate was 5.2%. All data presented account for appropriate sample weights. Margin of error for the survey is 1.86%.

References

1. Delta Dental, “The connection between oral health and mental health,” Grin!, 2021, <https://www.deltadental.com/grinmag/us/en/ddpa/2017/wellness/oral-and-mental-health-connection.html>.
2. Steve Kisely, Emily Sawyer, Dan Siskind, and Ratilal Laloo, “The oral health of people with anxiety and depressive disorders—a systematic review and meta-analysis,” *Journal of Affective Disorders* 200 (2016): 119-132.
3. Kristen Rogers, “Dentists are seeing more cracked teeth. Pandemic stress is to blame,” CNN, September 29, 2020, <https://www.cnn.com/2020/09/29/health/cracked-teeth-covid-stress-wellness/index.html>.

CareQuest Institute for Oral Health

CareQuest Institute for Oral Health is a national nonprofit championing a more equitable future where every person can reach their full potential through excellent health. We do this through our work in grantmaking, research, health improvement programs, policy and advocacy and education as well as our leadership in dental benefits, care delivery and innovation advancements. We collaborate with thought leaders, health care providers, patients and local, state and federal stakeholders, to accelerate oral health care transformation and create a system designed for everyone. To learn more, visit carequest.org.

This report and others are available at carequest.org.