Original article

# Prevalence of Dental Fear and Anxiety among School Children in Zawia City, Libya

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Corresponding Email. a.barka@zu.edu.ly	ABSTRACT
<b>Received</b> : 19-04-2024 <b>Accepted</b> : 22-05-2024 <b>Published</b> : 26-06-2024	Odontophobia, also known as dental fear and anxiety (DFA), is a type of phobia that can negatively affect the dental and oral health of people who experience it. This phobia has psychosocial characteristics that make it complex to address in dental practice. Dealing with dental fear is a challenging issue in dentistry for various reasons. Although this issue has been studied in children for quite some time around the world, no such studies have been conducted in Zawia, Libya. Therefore, this study aimed to determine the prevalence of dental fear and anxiety (DFA) among pupils aged 5 to 12- years in
Keywords. Anxiety, Dental Anxiety, Fear, Phobia, Odontophobia.	public and private schools in Zawia City. A cross- sectional survey was conducted in Zawia City over three months. In the survey, 205 students were randomly
<b>Copyright</b> : © 2024 by the authors. Submitted for possible open-access publication under the terms and conditions of the Creative Commons Attribution International License (CC BY 4.0). http://creativecommons.org/licenses/by/4.0/	selected from several private and public schools. All participants were given a self-reported questionnaire containing ten closed-ended questions about DFA. After collecting the data, the results were analyzed based on gender and school type and entered into a Microsoft Excel sheet for further analysis. Results of the study showed that 31.71% of all pupils experienced dental fear and anxiety (DFA). Furthermore, the slight variations in fear levels based on school type indicate that the school environment may influence a pupil's perception of dental
	visits. Most private school students experienced DFA during physical contact with their dentists and upon seeing dental anesthesia injections. Whereas pupils attending government schools experienced DFA wher hearing voices during treatment. Across all areas studied, female students reported slightly higher levels of anxiety than male students. Based on the survey results, it is evident that many pupils experience high levels of dental fear and anxiety (DFA). This highlights
	the need for intervention and attention in such situations, as DFA can significantly affect a pupil's dental experience and oral health outcomes. Therefore, it is essential to address these fears and anxieties to improve the overall dental experience of pupils and promote better oral health m T. Prevalence of Dental Fear and Anxiety among

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#### **INTRODUCTION**

Dental fear and anxiety (DFA) are factors that commonly affect oral health and clinical management in people of all ages, but they tend to develop mostly during childhood and adolescence [1,2]. Many countries have recognized that dealing with DFA in children is a significant challenge for pediatric dentists [3,4]. Children's dental fear can persist into adulthood and negatively impact oral health-related quality of life (OH-RQoL) [4,5,6]. Patients with severe DFA usually require more time for dental procedures [7]. Therefore, DFA's increasing recognition and importance highlight its crucial role in recent dentistry research. Preventing and intercepting DFA during the early stages of life is considered a critical approach to improving oral health and enhancing the dental experience [8]. Numerous studies carried out in various countries have indicated that DFA affected 12.5% of people in Canada. in France (13.5%), Australia (16.1%), Russia (20%), and China (30%). According to certain research carried out in Saudi Arabia, DFA is 27 to 51% among adults. Dental anxiety and fear can restrict the use of dental health services, which influences early detection and disease management [4,10].

There are various methods used to measure the level of fear and anxiety that children and teenagers experience when they visit dental clinics [4,8,11]. These methods are utilized for research purposes as well as in regular dental practice. However, due to the different methods used to evaluate dental fear and anxiety, the percentage of children and adolescent patients who experience it varies widely in the literature, ranging from 6% to 75%, according to a report by Grisolia et al. (2021) [4,12].

Children who have higher levels of DFA are more likely to have untreated cavities, resulting in poor oral health and increased expenses for dental services. Dealing with dental fear is a challenging issue in the field of dentistry for various reasons. Although this issue has been studied in children for quite some time, no such studies have been conducted in Zawiya, Libya. Therefore, this study aimed to determine the prevalence of DFA among pupils aged 5 to 12 years in public and private schools in Zawia city.

#### **METHODS**

#### Study design

A descriptive cross-sectional study was carried out on pupils of four schools in Zawia City, Libya. The two public elementary schools were (Asmaa Bent Abi Bakr and Al Sayda Zainab) elementary schools, and the two private schools were (Al Ain and Mnahel Al Mahaba) elementary schools. This survey study was conducted in June 2022 with a total sample of 205 participants with age 5-12 years old; pupils were selected randomly from the four schools. The data was collected during the field study with permission from the undersecretary for scientific affairs of the Faculty of Medical Technology to school managers.

#### Data Collection

A survey questionnaire paper designed to include ten closed-ended questions related to DFA with response options of "Yes" or "No". The students were interviewed in their respective schools, The researchers completed the survey questionnaire based on the responses provided by the pupils.

#### Data analysis

The collected data was entered into a Microsoft Excel spreadsheet, and analyzed according to gender and school type

#### RESULTS

The findings of this survey research are presented in table 1. About 31.71% of the pupils reported being afraid of the dentist, while the remaining students did not experience any fear. Regarding dental phobia, a survey was conducted among the students to determine if they were afraid of dental tools. The most popular answer was 'no'. However, worrying about pain is also a significant concern for many students, with 56.1% expressing worry. Additionally, students who have had a negative experience in the past are more likely to experience anxiety in the future, as 41.46% of students reported a negative experience.

Another common anxiety is fear of dental tools, with 39.51% of students expressing this fear. Seeing the dentist's chair is a relatively minor anxiety, with only 19.51% of pupils reporting fear. Dental anaesthesia is a concern for a substantial number of pupils, with 52.68% reporting fear. Furthermore, seeing and hearing reviewers during treatment is a significant anxiety for many pupils, with 56.59% reporting being bothered by it. Dentist's hands touching their mouth

is a common anxiety, with 41.95% of students reporting fear. Finally, drinking water for washing mouth and teeth is a relatively minor anxiety, with only 50.73% of students feeling uncomfortable.

Questions		Answer	
Questions	Yes	No	
Q1. Are you afraid of the dentist?	65 (31.71%)	140 (68.29%)	
Q2. Are you afraid of dental tools?	81 (39.51%)	124 (60.49%)	
Q3. Are you worried about pain?	115 (56.11 %)	90 (43.89%)	
Q4. Have you ever had a negative shock before?	85 (41.46%)	120 (58.54%)	
Q5. Do you feel scared when you see the dentist's chair?	40 (19.51%)	165 (80.49%)	
Q6. Are you afraid of dental anaesthesia?	108 (52.68%)	97 (47.32%)	
Q7. Do you feel scared when seeing the dentist's equipment?	64 (31.22%)	141 (68.78%)	
Q8. Are you bothered by seeing the sight and hearing the voices of the reviewers during treatment?	116 (56.59%)	89 (43.41%)	
Q9. Are you afraid when the dentist's hand touches your mouth?	86 (41.95%)	119 (58.05%)	
Q10. Do you feel uncomfortable when drinking a cup of water for washing your mouth and teeth?	101 (49.27%)	104 (50.73%)	

According to Table 2, It has been observed that girls typically report higher levels of anxiety than boys about dental treatment. This holds for all the questions asked in this context. The most significant difference was found in the fear of the dentist. 40.26% of girls and 32.26% of boys reported feeling afraid. Other notable differences include the fear of dental tools, with 51.95% of girls and 41.94% of boys reporting fear; worrying about pain during treatment, with 67.53% of girls and 67.74% of boys expressing concern; and being bothered by seeing and hearing reviewers during treatment, with 66.23% of girls and 53.85% of boys reporting discomfort.

Ala J M	Girls (103)		Boys (102)	
Questions	Yes	No	Yes	No
Q1. Are you afraid of the dentist?	41 (39.81%)	62 (60.19%)	24 (23.53%)	78 (76.47%)
Q2. Are you afraid of dental tools?	49 (47.57%)	54 (52.43%)	32 (31.37%)	70 (68.63%)
Q3. Are you worried about pain?	65 (63.11%)	38 (36.89%)	50 (49.02%)	52 (50.98%)
Q4. Have you ever had a negative shock before?	50 (48.54%)	53 (51.46%)	35 (34.31%)	67 (65.69%)
Q5. Do you feel scared when you see the dentist's chair?	24 (23.30%)	79 (76.70%)	16 (15.69%)	86 (84.31%)
Q6. Are you afraid of dental anaesthesia?	64 (62.14%)	39 (37.86%)	44 (43.14%)	58 (56.86%)
Q7. Do you feel scared when seeing the dentist's equipment?	42 (40.78%)	61(59.22%)	22 (21.57%)	80 (78.43%)
Q8. Are you bothered by seeing the sight and hearing the voices of the reviewers during treatment?	65 (63.11%)	38 (36.89%)	51 (50%)	51 (50%)
Q9. Are you afraid when the dentist's hand touches your mouth?	53(51.46%)	50 (48.54%)	33 (32.35%)	69 (67.65%)
Q10. Do you feel uncomfortable when drinking a cup of water for washing your mouth and teeth?	56 (54.37%)	57(55.34%)	45 (44.12%)	57 (55.88%)

Table 2. The answer to the survey's questions according to gender



According to Table 3, there are significant differences in anxiety levels between students from public and private schools. Students from public schools tend to report higher levels of anxiety for most questions. The most notable difference is in the fear of dental anaesthesia, with 63.64% of public-school girls, and 33.80% of public-school boys reporting fear compared to 57.69% of private school girls and 64.52% of private school boys. Other notable differences include fear of the dentist, with 40.26% of public-school girls reporting fear, compared to 38.46% of private school girls and 19.72% of public-school boys compared to 32.26% of private school boys. There is also a difference in fear of dental tools, with 51.95% of public-school girls reporting fear, compared to 34.62% of private school girls and 26.76% of public-school boys compared to 41.94% of private school boys.

Finally, pupils from public schools report more worry about the pain with 67.53% of public-school girls reporting worry, compared to 50% of private school girls and 40.88% of public-school boys reporting worry, compared to 67.74% of private school boys.

	Public	schools	Private schools		
Question	Boys (71)	Girls (77)	Boys (31)	Girls (26)	
	Q1. Are you afraid o	of the dentist?			
Yes	14 (19.72%)	31 (40.26%)	10 (32.26%)	10 (38.46%)	
No	57(80.28%)	46 (59.74%)	21(67.74%)	16(61.54%)	
	Q2. Are you afraid o	of dental tools?			
Yes	19 (26.76%)	40 (51.95%)	13 (41.94%)	9 (34.62%)	
No	52 (73.24%)	37 (48.05%)	18 (58.06%)	17(65.38%)	
	Q3. Are you worried	about pain?			
Yes	29 (40.88%)	52 (67.53%)	21(67.74%)	13 (50%)	
No	42 (59.15%)	25 (32.47%)	10 (32.26%)	13(50%)	
	Q4. Have you ever h	ad a negative shock befor	re?		
Yes	22 (30.99%)	41 (53.25%)	13 (41.94%)	9 (30.77%)	
No	49 (69.01%)	36 (47.75 %)	18 (58.06%)	17 (69.23%)	
	Q5. Do you feel scar	ed when you see the dent	ist's chair?		
Yes	10 (14.08%)	20 (25.97%)	6 (19.35%)	4 (15.38%)	
No	61 (85.92%)	57 (74.03%)	25 (80.65%)	22(84.62%)	
	Q6. Are you afraid of	f dental anaesthesia?			
Yes	24 (33.80%)	49 (63.64%)	20 (64.52%)	15 (57.69%)	
No	47(66.19%)	28 (36.36%)	11 (35.48%)	11(42.31%)	
	Q7. Do you feel scare	ed when seeing the dentist	t's equipment?		
Yes	17 (23.94%)	29 (37.66%)	5 (16.13%)	13 (50%)	
No	54 (76.06%)	48 (62.33%)	26 (83.87%)	13 (50%)	
Q8. Are you	bothered by seeing the sight	and hearing the voices o	f the reviewers during tr	eatment?	
Yes	39 (54.93%)	51 (66.23%)	12 (38.71%)	14 (53.85%)	
No	32(45.07%)	26 (37.77%)	19 (61.29%)	12 (46.15%)	
	Q9. Are you afraid whe	en the dentist's hand touc	hes your mouth?		
Yes	16 (22.54%)	37 (48.05%)	17 (54.84%)	16 (61.54%)	
No	55 (77.46%)	40 (51.95%)	14 (45.16%)	10(38.46%)	
Q10. Do you	u feel uncomfortable when d	rinking a cup of water fo	r washing your mouth an	d teeth?	
Yes	32 (45.07%)	46 (59.74%)	13 (41.94%)	10 (38.46%)	
No	39 (54.93%)	31 (40.26%)	18 (58.06%)	16 (61.54%)	

#### Table 3. The answer to the survey's questions according to the school's type

#### DISCUSSION

Despite developments in dental technology, dental fear and anxiety (DFA) remain significant challenges for dentists when treating patients [13]. Literature indicates that children with high levels of DFA are more likely to have untreated cavities and poor dental health [14,15], which could influence the quality of life of individuals [2]. Studies on dental fear and anxiety in children have been conducted worldwide, but none have been done in Zawia, Libya. This study aims



to determine Dental fear and anxiety (DFA) prevalence in this population.

Typically, DFA is evaluated through the use of specific questions and tools. Self-reported scales are commonly utilized, as they offer more precise results, even for children who have the cognitive capacity to understand and report their anxiety on a scale [16,17,18]. An interviewer-administered questionnaire was utilised to collect data as part of the current study on cognitive growth in children between the ages of 5 and 12. The researchers completed the questionnaire based on the responses given by the students. A recent comprehensive review with meta-analyses carried out by Grisolia et al. (2021) [4] revealed that estimates of DFA prevalence in children and adolescents, obtained from 50 studies worldwide utilizing various assessment tools, varied from 6% to 75%. The pooled prevalence of DFA was documented at 23.9% [4].

According to the current study, 31.71% of children have had DFA experiences. This rate is comparable to a study conducted in Brazil [19], which found a 39.4% prevalence rate of DFA among children aged 5 to 12 years. In 2023, research undertaken in Pakistan [9] reported a prevalence rate of 66% DFA, which is higher than the percentage found in the present study. Nonetheless, both studies agreed that DFA is more likely to affect girls than boys.

Based on the findings of the current study, girls experience more (DFA) than boys. The results obtained in this study were similar to those of other studies [8,20]. However, some other studies suggest that boys tend to be more fearful and try to escape during their dental visits [21,22]. On the other hand, a few studies have reported that there is no significant correlation between DFA and gender [23,24,25].

Dental anxiety can be influenced by a variety of factors, such as fear of blood or injections, gag reflexes, the sound of dental instruments, and past dental experiences [10]. According to the findings of the present study, the most fearstimuli situation for the children surveyed was "bothered by seeing the sight and hearing the voices of the reviewers during treatment" (56.59%), and "worrying about pain" (56.11%). While gender is often estimated as a risk factor, both boys and girls share similar anxieties regarding dental procedures, such as discomfort, hearing the voices of reviewers during treatment, and the administration of anaesthesia. Nevertheless, an earlier study conducted in Bosnia and Herzegovina [26] found that the noticeable fears among children during dental appointments are choking, the sound of the dentist's drill, and injections [26]. Fear of injections is common in children. When children go to the dentist, they are first worried about getting an injection. However, in a recent study, worrying about dental anaesthesia injections came in third place after worrying about pain and being bothered by the sight and sounds of the dental office.

According to a recent study, there were notable differences in the experiences of DFA between students attending government schools and private schools. For example, a significant percentage of boys (54.93%) from government schools reported experiencing DFA upon hearing voices during treatment. Conversely, boys from private schools reported experiencing DFA due to fear of pain (67.64%), dental anaesthesia injections (64.52%), and the dentist's hand touching their mouths (54.84%). Compared to a previous study, most of the pupils studying in private schools reported DFA at the sight of the dental chair and dental injections [10]. The results of the study indicate that girls in government schools reported experiencing (DFA) more frequently than those in private schools. Furthermore, girls in both public and private schools reported higher levels of DFA than boys. The most significant differences were observed in fear of the dentist, fear of dental tools, worry about pain, fear of dental anaesthesia, and fear of the dentist's hands touching their mouths. The study's limitation is the relatively small sample size and its restriction to pupils from Zawiya City, which may hinder the generalizability of the findings.

### CONCLUSION

It is common for children to feel fear and anxiety when undergoing dental procedures. According to a survey conducted in Zawia City, Libya, a significant number of students between the ages of 5 and 12 experience elevated levels of dental fear and anxiety. It can be concluded that there is evident that many pupils experience high levels of DFA. This highlights the need for intervention and attention in such situations, as DFA can significantly affect a pupil's dental experience and oral health outcomes. Therefore, it is essential to address these fears and anxieties to improve the overall dental experience of pupils and promote better oral health. It is essential to address these fears to enhance students' dental experiences and foster improved oral health.

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**تحت شعار:** التطورات التكنولوجية والاتجاهات الحديثة في التعليم

# Conflicts of Interest. The authors declare no conflicts of interest.

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# مدى انتشار خوف و رهاب الأسنان بين أطفال المدارس الذين تتراوح أعمارهم بين 5-12 سنة في مدينة الزاوية، ليبيا

أماني بركة\*، لبنى عبدالرحمن، نبراس إحميدة، راوية الشيباني، تهاني الفاهم قسم تقنية الأسنان، كلية التقنية الطبية ، جامعة الزاوية

## المستخلص

رهاب الأسنان، والذي يُعرف أيضًا باسم الخوف والقلق من طب الأسنان، هو نوع من الخوف الذي يمكن أن يؤثر سلبًا على صحة الأسنان والفم للأشخاص الذين يعانون منه. لهذا الرهاب خصائص نفسية-اجتماعية تجعله معقدًا للتعامل معه أثناء ممارسة أو تقديم خدمات طب الأسنان. التعامل مع رهاب الأسنان هو أمر صعب في طب الأسنان لأسباب متعددة. على الرغم من أن هذه المشكلة قد تمت دراستها لدى الأطفال في جميع أنحاء العالم منذ فترة طويلة، لم تُجرَ مثل هذه الدراسات في الزاوية، ليبيا. لذلك، هدفت هذه الدراسة إلى تحديد مدى انتشار خوف و رهاب الأسان (DFA)بين الطلاب الذين تتراوح أعمارهم بين 5 و12 عامًا في المدارس العامة والخاصة في مدينة الزاوية. أُجريت دراسة مقطعية في مدينة الزاوية على مدى ثلاثة أشهر. في الدراسة، تم اختيار 205 طالبًا عشوائيًا من عدة مدارس خاصة وعامة. تم إعطاء جميع المشاركين استبيانًا ذاتي يحتوى على عشر أسئلة ذات إجابات محددة و مغلقة" بنعم أو لا " عن خوف و رهاب الأسنان(DFA) . بعد أن تم جمع البيانات، تم تحليل النتائج على أساس الجنس ونوع المدرسة وادخالها في ورقة بيانات Microsoft Excel للمزيد من التحليل. أظهرت نتائج الدراسة أن 31.71% من جميع الطلاب عانوا من خوف و رهاب الأسانان(DFA). علاوة على ذلك، فإن التباينات الطفيفة في مستويات الخوف على أساس نوع المدرسة تشير إلى أن البيئة المدرسية قد تؤثر على تصور الطالب لزيارات طبيب الأسنان. عاني معظم طلاب المدارس الخاصة من الخوف والقلق من طب الأسنان (DFA) أثناء التواصل الجسدى مع أطبائهم الأسنان وعند رؤية حقن التخدير السنى. في حين عاني الطلاب في المدارس الحكومية من الخوف والقلق من طب الأسنان (DFA) عند سماع الأصوات أثناء العلاج. في جميع المجالات التي تمت دراستها، أفادت الطالبات بمستوبات قلق أعلى قليلاً من الطلاب الذكور. بناءً على نتائج الأستبيان، من الواضح أن العديد من الأطفال يعانون من مستويات عالية من الخوف والقلق من طب الأسنان (DFA). ويسلط هذا الأمر الضوء على الحاجة إلى التدخل والاهتمام في مثل هذه المواقف، حيث يمكن أن يؤثر الخوف والقلق من طب الأسنان (DFA) بشكل كبير على تجربة الطالب مع طب الأسنان ونتائج صحة الفم. لذلك، من الضر\_وري معالجة هذه المخاوف والقلق لتحسين التجربة الشـاملة لطّب الأسـنان للأطفال وتعزيز صحة الفم.

الكلمات المفتاحية: القلق، قلق الأسنان، الخوف، الرهاب، رهاب الأسنان