Dentistry and Trauma-Informed Care
A resource for dentists and other oral healthcare professionals who work with the facial difference community

What Does Trauma-Informed Care Mean in Dentistry?
Trauma-informed care is based on the assumption that all patients may have experienced trauma at some time in their life. The goal of trauma-informed care is to create a safe environment in order to avoid further traumatization or re-traumatization.

Patients with a facial difference or other complex medical conditions often experience discrimination and trauma during medical and dental treatments. They also may have previously experienced unrelated personal trauma, including trauma arising from systemic oppression, such as racism, or other forms of structural and historical violence.

Trauma-informed care does not require knowing the patients’ trauma or “fixing” their trauma. It is instead focused on creating a supportive and safe environment. By recognizing patients’ needs for physical and emotional safety, care professionals provide choice and control in the treatment process.

Our Top Recommendations for Trauma-Informed Practices for Dental and Oral Healthcare Professionals

1. RELATIONSHIP BUILDING
Many dentists focus on treating dental problems or conditions efficiently, but it is also important for dentists to provide the most effective treatment, which includes applying trauma-informed practices. By establishing a safe relationship with your patients, as a healthcare professional you will be able to better communicate about procedures and provide effective treatment in a timely manner.

By establishing a positive relationship with your patients, you will also be able to provide co-regulation support. This is necessary when a patient becomes dysregulated, which means their sympathetic nervous system engages the flight, fight, or freeze response. This can include difficulty communicating and breathing, and also sweating and shaking. When a patient becomes stressed during an appointment you can help them cope by responding in a confident and calm manner. When another person in the room remains calm (maintains personal emotional regulation), they can also provide a calming influence on the person who is struggling.
The following tips and suggestions will advance trauma-informed care by supporting relationship building, effective communication, and problem solving, and also by assisting coregulation.

[A] Use open-ended screening questions.
• Have you experienced anything that makes you nervous or makes it difficult for you to visit a dental office?
• Is there anything that makes it difficult for you to open your mouth widely for [describe procedure in plain language]?
• Sometimes people endure things that are especially painful or traumatic, can you think of any time you might have experienced something like that?
• What other aspects of dental care are particularly hard for you to tolerate: for example, the taste or texture of the fluoride, the use of rubber dams, the sound of a drill?

[B] Create comfort in the environment.
• Be aware of lighting and sounds in the clinic space.
• Ask questions, such as, what can we do to make you more comfortable in the clinic?

[C] Confirm consent throughout the appointment and avoid personalized language. Use clear, specific, plain language about procedures, such as the following:
• To evaluate your dental health, I need to examine your gums closely by [describe procedure]. Is that okay?
• Is it okay if I lean your chair back so I can get a better look in your mouth?

• I’m going to keep checking in to make sure you are doing okay.

Then be sure to follow through and check in.
• In order to treat [specific issue], I need to use [specific tool]. I will be [explain procedure].

[D] Provide choice, when possible, and ask for feedback.
• If freezing for a particular procedure is optional, you might ask, would you prefer having freezing for this procedure or no freezing?
• Would you like to listen to something while we do our work?
• How would you like to let me know that you need to take a break?
• What else is there that we can do to make you feel more comfortable?

[E] Use consistent, clear communication.
• Add commentary during treatment:
  • I’m using this tool to [describe procedure].
  • I am leaving the room to grab a different tool. Would you like to see the tool before I use it?
• Use count downs:
  • We’ll be done in 10, 9, 8... 3, 2, 1.
• Provide positive reinforcement:
  • You’re doing a good job at keeping your mouth open so we can complete this procedure. Be sure to always reinforce specific behaviours, rather than making general comments.
2 SCRIPTED, MINDFUL LANGUAGE
When someone becomes stressed, or dysregulated, you can support them best by focusing on their present experience and guiding them to become more grounded in the moment. When the patient’s sympathetic nervous system engages the flight, fight or freeze response, use methods that re-engage the parasympathetic nervous system. An excellent example of this is having the patient focus on their breath.

Scripted statements can be used in a variety of situations. The purpose is to VALIDATE the patient’s experience, REDIRECT attention onto something they can do to change their experience in the moment, and give POSITIVE REINFORCEMENT.

For example, if you see a patient is experiencing pain, encourage them to focus on something else, such as their breathing:

**Validate**—It looks like this is uncomfortable. Thank you for letting me know.

**Redirect**—Can you take a deep breathe in, hold it, count to three, and then slowly let it out

**Positive reinforcement**—You’re doing a great job, keep focusing on your breath.

3 SCREENING AND ONGOING SUPPORT
Many dental clinics routinely screen new patient by having them complete a new-patient questionnaire, which includes questions about past treatments, current health, dental concerns, etc. Through assessment questionnaires patients may share their concerns based on past dental treatments and procedures. Remember, you can practise trauma-informed care without knowing the details of a patient’s specific trauma history. Some patients with trauma want to be asked about their trauma history; however, it is not necessary (and could have some risk) to discuss detailed trauma history to meet their safety needs during their dental appointment.

Similar to their taking universal precautions for infection control, dentists can practise trauma-informed care: that is, by assuming all patients may have experienced trauma, at some point in the past. It is recommended that patients be given the opportunity to answer open-ended questions both in writing and verbally so they have a choice in how they disclose this information.

It is also important to provide resources for patients to access follow-up treatment or care. Patients will want to talk about their trauma when they are ready. As a dental professional, however, it is not appropriate for you to provide trauma therapy. But it can be helpful if you – as someone they trust – can refer your patient to an appropriate resource. This can be done by having posters and pamphlets in your office reception area, and available for staff to share with patients, to provide contact information for local mental health and crisis lines.
Some of these strategies might at first feel awkward or seem like they will slow down your work, but with practice they can become routine and part of your regular practice.

Over time this approach will also increase your effectiveness in using best practices to treat all your patients.

This resource was created in partnership with the Canadian Society for Disability and Oral Health.

ABOUTFACE*

Who We Are

AboutFace is a national charity and our mission is to cultivate equity and opportunity for individuals with a facial difference through supportive programming, advocacy, and education.

If you would like more information or support, please contact us or visit aboutface.ca.