

SUMMARY REPORT

ADEA Education Research Series  
Issue 7, December 2024

# Dentists of Tomorrow 2024:

## An Analysis of the Results of the ADEA 2024 Survey of U.S. Dental School Seniors

**T**his report summarizes the key findings of the analysis of the results of the American Dental Education Association (ADEA) Survey of Dental School Seniors, Class of 2024 (henceforth called “the ADEA 2024 Predoc Survey” and the overall survey series is called “the ADEA Predoctoral Senior Survey”).

The study examines the journey of U.S. dental schools’ predoctoral senior class of 2024, from its influences and motivations to pursue careers in dentistry to the graduating students’ perceptions of their dental school experience, to their plans upon graduation and the investment in their careers. Whenever feasible, the analysis compares the answers of the ADEA 2024 Predoc Survey respondents with their 2019 counterparts. Further, this research attempts to better understand the journey of predoctoral senior students of historically underrepresented race and ethnicity (HURE) groups in dentistry by comparing the responses of the overall response sample with those of the HURE students. This research considers the following four race and ethnicity categories to be part of HURE in dentistry: non-Hispanic African American, Hispanic or Latino of all races, non-Hispanic American Indian or Alaska Native and non-Hispanic Native Hawaiian or Other Pacific Islander.

This annual analysis examines changes in interprofessional and intraprofessional experiences of senior students during dental school. Further, it analyzes to what extent the respondents’ perceptions of these experiences’ effect on their understanding of the others in caring for patients, between the graduating classes of 2019 and 2024.

ADEA surveyed the 66 U.S. dental schools with a graduating class in 2024 between Jan. 16 – June 18, 2024. A total of 6,860 students received the survey, and 3,338 students from all the schools responded. As a result, 49% of senior students in the 2023-24 academic year responded. This is close to the 2019 response rate (48%). The response sample to the ADEA 2024 Predoc Survey is representative of the overall senior student population at U.S. dental schools that received the ADEA 2024 Predoc Survey. (See Table A1 in the Methodological Appendix.)

A typical participant in the ADEA 2024 Predoc Survey was most likely to self-report as a woman, 28 years old, equally likely to belong to the Millennial or Generation Z demographic generations, white, from the South and West. (See Table A2 in the Methodological Appendix.) This profile is relatively similar with the usual respondent in the 2019 response cohort that was more likely to self-report as a woman, 28 years old, overwhelmingly part of the Millennial generation, white, from the southern and the western U.S. Census regions. The HURE respondent in 2024 was highly likely to self-report as a woman, also 28 years old, Millennial, Hispanic, from the South. The profile of the typical HURE respondent has not changed much between 2019 and 2024, including belonging mainly to the Millennial demographic generation.

Key findings of this analysis include:

**56% OF THE HURE SENIOR STUDENTS RESPONDING TO THE ADEA 2024 PREDOC SURVEY DECIDED TO BECOME A DENTIST BEFORE COLLEGE.**

1

**AN EARLIER DECISION TO PURSUE A CAREER IN DENTISTRY IS ONE OF THE CHANGES IN 2024 RESPONDENTS' EXPERIENCE BEFORE DENTAL SCHOOL RELATIVE TO THEIR 2019 COLLEAGUES.**

Overall, the majority of 2024 respondents decided to become a dentist before going to college, more than the equivalent proportion of 2019 respondents. The difference is even larger for HURE predoctoral respondents. Fifty-six percent (56%) of the HURE senior students responding to the ADEA 2024 Predoc Survey decided to become a dentist before college (see Figure 1). This is significantly higher than five years before.

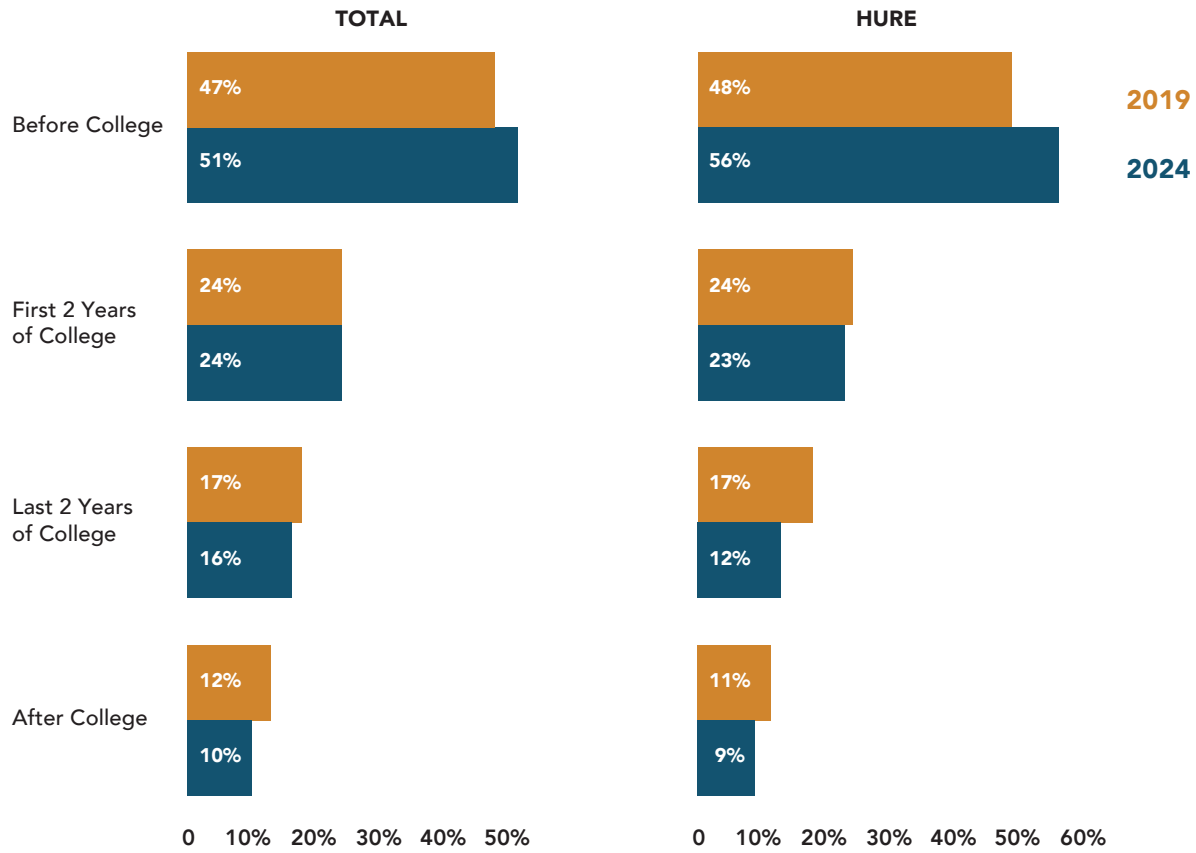
The top two reasons for attending the dental school from which the respondents were graduating in 2024 were statistically a tie. A lower cost of attendance and proximity to family and friends were the most frequently cited reasons by both the overall and HURE 2024 respondents for choosing the school they were graduating from in 2024. Five years before, proximity to family and friends, academic reputation and lower cost of attendance were holding the top spots.

Personal dental experience and shadowing a dentist were the most frequently cited top influences on pursuing a career in dentistry in 2024. The HURE 2024 respondents ranked the same top influences but with shadowing a dentist a large distance behind personal dental experience. Seeing oneself reflected in the profession makes a significant difference; having a family member, relative or friend who is a dentist was the third most cited influence in 2024 by HURE and overall respondents. This is similar to the 2019 responses.

When it comes to motivation to become an oral health professional, service to others was the most cited by the ADEA 2024 Predoc Survey participants, similar with 2019. Enjoying working with hands and the artistic, creative and aesthetic aspects of dentistry were also top reasons for the ADEA 2024 Predoc Survey participants to apply to a dental program. In 2019, control of work schedule ranked also at the top, dropping in significance in the 2024 responses. Most of the time, HURE students' choices are similar with the overall response group; opportunity to serve vulnerable and low-income population represented a differentiator in 2024. HURE respondents indicated it as motivation almost 50% more often than the overall group.

FIGURE 1

**Timing of Decision to Pursue a Career in Dentistry, Total and HURE Respondents, 2019 and 2024**



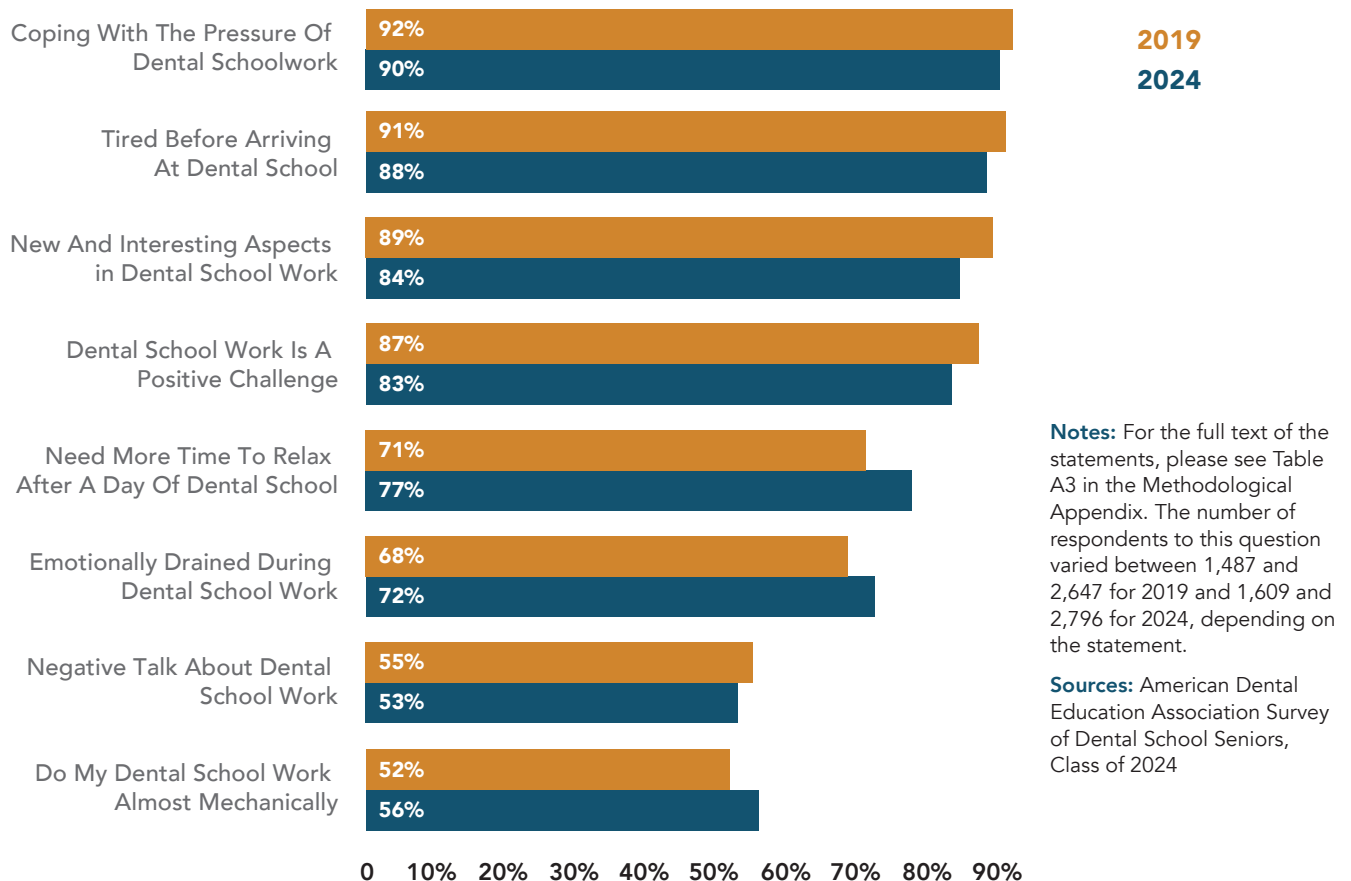
**Notes:** The number of respondents to this question was 2,879 total and 348 for HURE students in 2019 and 3,263 total and 558 for HURE students in 2024.

**Sources:** American Dental Education Association Surveys of Dental School Seniors, Classes of 2019 and 2024.

## 2 THE RESPONDENTS TO THE ADEA 2024 PREDOC SURVEY STATED HIGH LEVELS OF WELL-BEING DURING DENTAL SCHOOL, BUT SLIGHTLY LESS COMPARED TO THEIR 2019 COUNTERPARTS.

The ADEA Predoc Survey asked respondents' level of agreement to eight different statements that reflect a variety of well-being circumstances in a positive and negative formulation. (See Table A3 in the Methodological Appendix for the full text of the statements.) Students responding in 2024 continued to state high rates of finding new and interesting aspects in dental schoolwork, ability to cope with the pressures of dental school and finding their work a positive challenge (see Figure 2). However, the rates are in decline compared to what their 2019 counterparts reported. At the same time, 2024 participants mentioned more often than the 2019 class the need for more time than in the past to relax and feel better, feeling emotionally drained and doing their schoolwork almost mechanically. On a positive note, the percentage of respondents indicating there are days when they feel tired before arriving at dental school declined between the two cohorts.

**FIGURE 2** Well-being Statements, Percent of Respondents Agreeing or Strongly Agreeing, 2019 and 2024



**74% OF  
THE 2024  
RESPONDENTS  
STATED THAT  
THEY GAINED  
ADEQUATE  
AND/OR ABOVE  
ADEQUATE  
LEVELS OF  
CLINICAL  
EXPERIENCE  
DURING DENTAL  
SCHOOL IN AT  
LEAST ONE OF  
14 AREAS OF  
EDUCATION.**

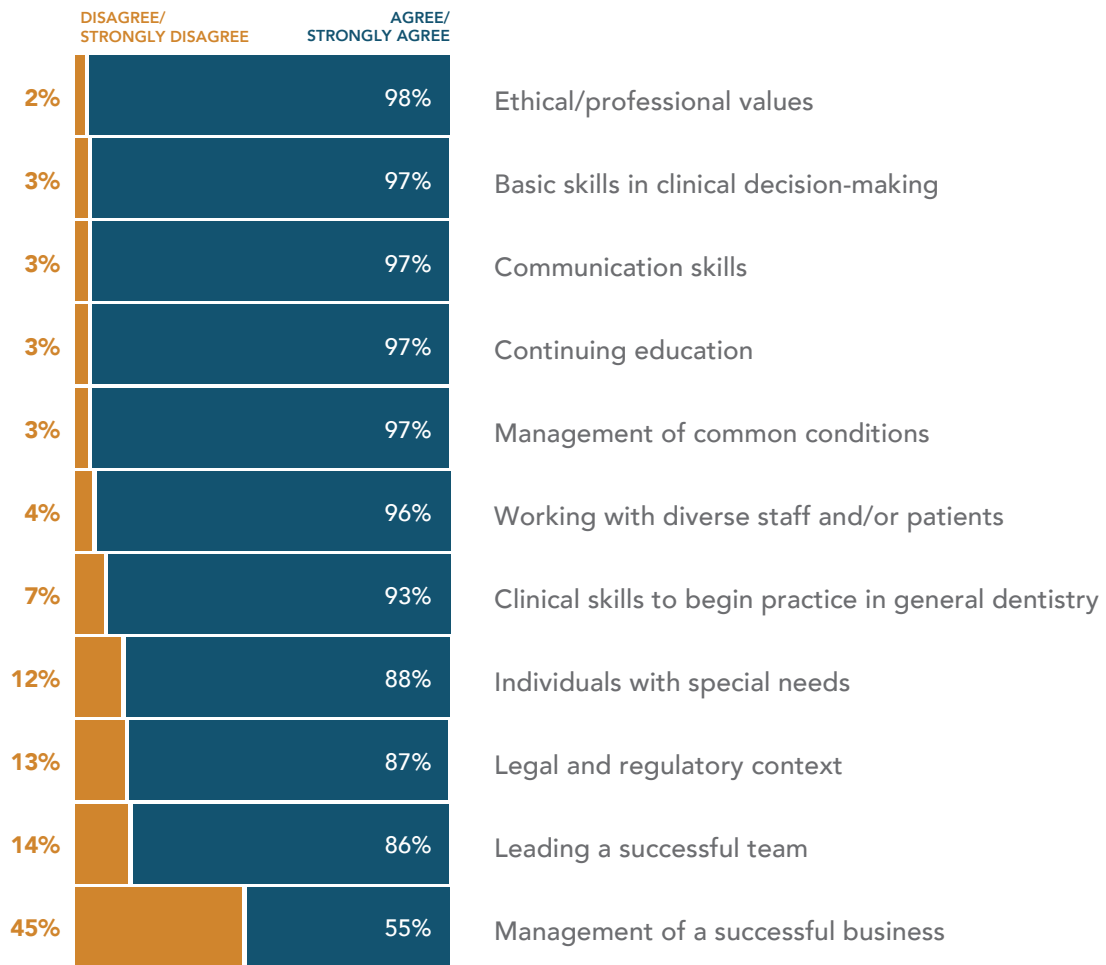
### **3 SENIOR STUDENTS INDICATED A HIGH LEVEL OF READINESS TO GO INTO THE PROFESSION IN THEIR RESPONSES TO THE ADEA 2024 PREDOC SURVEY.**

On average, 90% of respondents agreed or strongly agreed with the preparedness to practice statements in the ADEA 2024 Predoc Survey (see Figure 3). In addition, majority of respondents (different percentages for each category) stated receiving appropriate or above appropriate levels of clinical experience during dental school for 12 of the 14 areas of education mentioned in the survey.

Most 2024 participants perceived receiving adequate and/or above adequate levels of clinical experience during dental school. The ADEA 2024 Predoc Survey asked the participants to estimate the adequacy of clinical experience gained across 14 different areas of education. On average, almost 74% of the respondents stated they gained adequate and/or above adequate levels of clinical experience during dental school in at least one of the 14 areas of education.<sup>1</sup> For 12 of the 14 categories, majority of respondents reported receiving adequate and/or above adequate levels of clinical experience during dental school. The majority of 2024 respondents stated they would have wanted more clinical experience in endodontic therapy (51% of them) and surgical placement of implants (75% of participants). Preventive care, examination and diagnosis and direct restorations were the top three clinical areas in terms of the percentage of survey respondents indicating they acquired an adequate level of clinical experience (94 – 96%). Restoration of implants, endodontic therapy and surgical placement of implants ranked at the bottom of the 14 analyzed clinical areas.


**FIGURE 3**

**Preparedness to Practice, Percent of Respondents, 2024**



**Notes:** For the full text of the statements, please see Table A2 in the Methodological Appendix. The number of respondents to this question varied between 3,218 and 3,222, depending on the statement.

**Sources:** American Dental Education Association Survey of Dental School Seniors, Class of 2024.



Overall, the senior students responding to the ADEA 2024 Predoc Survey stated high levels of confidence in their skills across the 15 clinical areas mentioned in the survey. On average, 82% of survey respondents were moderately or highly confident in their abilities gained in at least one of the 15 clinical areas included in the survey.<sup>2</sup> In six clinical areas, confidence in skills exceeded 90% for overall respondents:

- **Restoration** of teeth;
- The ability to perform **health promotion and disease prevention**, including caries management;
- **Patient assessment**, diagnosis, comprehensive treatment planning, prognosis and informed consent;
- **Recognizing the complexity** of patient treatment and identifying when a referral is indicated;
- **Local anesthesia** and pain and anxiety control, including consideration of the impact of prescribing practices and substance use disorder; and
- **Evaluation** of the outcomes of treatment, recall strategies and prognosis.

Overall, respondents felt the least confident in their abilities to deal with hard and soft tissue surgery (56% stated being moderately or highly confident in their abilities gained in this area), as well as malocclusion and space management (58%).



On average, 90% of respondents agreed or strongly agreed with the preparedness to practice statements in the 2024 ADEA Predoc Survey (see Figure 3). The ADEA 2024 Predoc Survey asked respondents' level of agreement to 11 different statements that reflected a variety of abilities needed to enter dental practice. (See Table A4 in the Methodological Appendix for the full text of the statements.) The overwhelming majority (96 – 98%) of survey respondents felt most ready about six areas:



Understanding the **ethical and professional values** that are expected of the profession.



Having the **communication skills** to interact with patients and coworkers.



The need for **continuing education** requirements as practitioners.



Having the basic skills in clinical **decision-making**.



Understanding **common conditions** and their management.



Considering themselves prepared to work with **diverse staff and patients**.

Only one area received less than 80% agreement; 55% felt prepared to manage a successful business.

**32% OF THE 2024 RESPONDENTS WHO PLANNED TO GO INTO PRIVATE PRACTICE IMMEDIATELY UPON GRADUATION INTENDED TO JOIN A DSO-AFFILIATED PRACTICE.**

**4 ENTERING PRIVATE PRACTICE IMMEDIATELY UPON GRADUATION INCREASED IN POPULARITY AMONG THE RESPONDENTS TO THE ADEA PREDOC SURVEY BETWEEN 2019 AND 2024 AND CONTINUING DENTAL EDUCATION STUDIES SAW ITS PROSPECTS UNCHANGED, WHILE PRACTICING AS A DENTIST IN A GOVERNMENT OR NONPROFIT SETTING WAS CHOSEN BY FEWER SURVEY PARTICIPANTS.**

Entering private practice remained a favorite professional choice for senior predoctoral students responding to the ADEA 2024 Predoc Survey. This choice increased in popularity among the 2024 respondents relative to the 2019 cohort (see Figure 4). Similar with 2019, a smaller percentage of 2024 HURE respondents than overall response group stated they planned to join a private practice upon graduation.

Working for a dental service organization (DSO) continues to rank high with the graduating predoc students interested in private practice. Close to a third of the 2024 respondents (32%) who planned to go into private practice immediately upon graduation intended to join a DSO, almost double the proportion of 2019 respondents (18%). This trend was heightened for HURE respondents. In 2019, 24% of the HURE participants planning to join a private practice, mentioned going to work for a DSO. Five years later, 35% of the HURE respondents expressed similar plans.

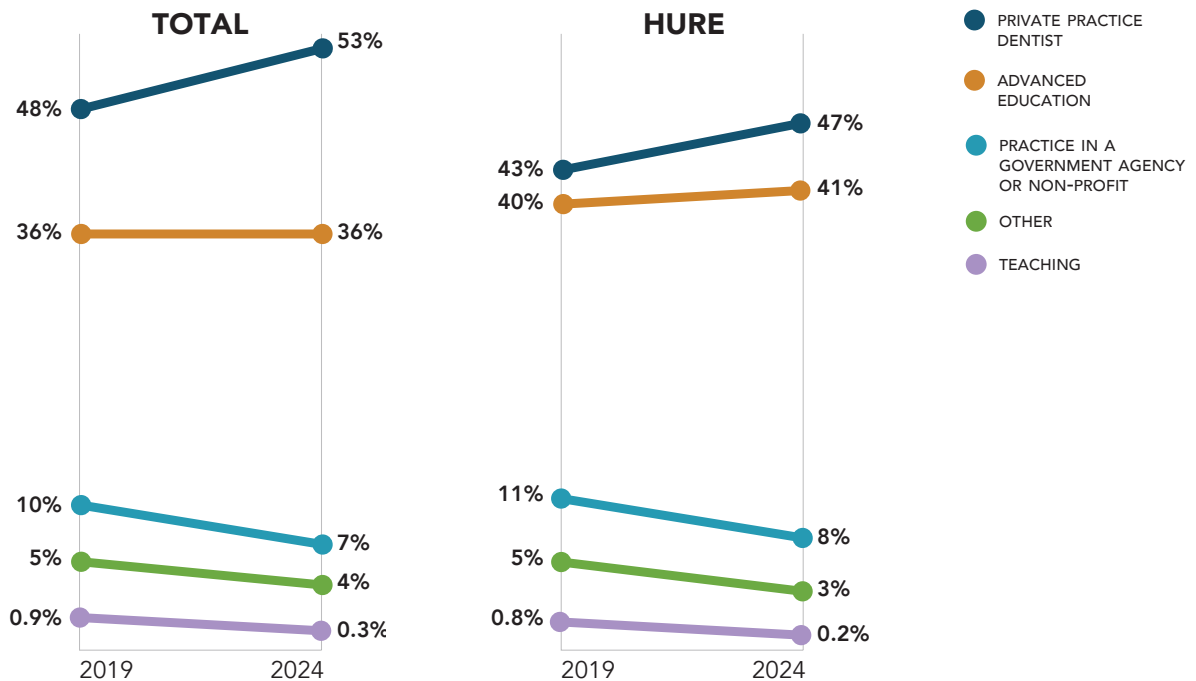
The 2024 HURE respondents to the ADEA 2024 Predoc Survey were more likely to continue their education upon graduating from dental school than the overall response group, similar with their 2019 counterparts. In 2024, the share of HURE respondents who expressed plans to further their oral health education immediately after graduation reached 41%, much higher than the percentage for the overall response sample (36%) (see Figure 4). This trend was similar to five years earlier.

2024 HURE respondents planning to attend further oral health education were more likely to choose general dentistry programs as their highest selection relative to the entire response cohort. The ADEA 2024 Predoc Survey allowed respondents to rank their applications by preference along types of advanced education, such as general dentistry programs, approved specialties and specialties not approved by the National Commission on Recognition of Dental Specialties and Certifying Boards (NCRDSB). More than half of the 2024 respondents (53%) who indicated they had applied to continue their education ranked general dentistry programs as their top choice, while 58% of HURE respondents did so. Close to half of the overall response group (46%) and 43% of HURE

participants considered NCRDSB-approved specialties their top choice. Less than 1% of the survey participants continuing their education chose as their top choice specialties not approved by the NCRDSB. None of the HURE respondents selected this choice as their number one plan in advanced education.

The loss in interest in pursuing a career in dentistry with the military contributed to fewer 2024 respondents stating they were planning to practice dentistry for a government agency or a nonprofit than their 2019 counterparts. In 2019, almost half of the respondents (47%) who planned to work in nonprofits or government were planning to serve in the U.S. armed forces. Five years later, only 15% were expressing a similar selection. The decline was also seen with HURE respondents, from 37% in 2019 to 5% five years later. At the same time, there was more interest in serving as a dentist with the civilian federal government, but not enough to stem the decline as a professional choice upon graduation for practicing dentistry for a government agency or a nonprofit. Sixty-one percent (61%) of 2024 respondents planning to practice in a nonprofit or government setting stated intentions to join a Federally Qualified Health Center upon graduation. This was almost double the percentage (34%) of their 2019 colleagues stating similar professional plans upon graduation.

**FIGURE 4** Immediate Professional Plans Upon Graduation, Percent of Respondents, Total and HURE, 2019 and 2024



**Note:** The number of respondents to this question in 2019 was 2,838 total and 380 for HURE students, and in 2024 was 3,081 total and 526 for HURE students. The "Other" category includes working in another position related to dentistry, but not those mentioned in the chart; working in a position not related to dentistry; and being unsure about professional plans upon graduation. "Teaching" means working as a faculty/staff member at a dental school immediately upon graduation.

**Source:** American Dental Education Association Survey of Dental School Seniors, Classes of 2019 and 2024.

**69% OF THE ADEA 2024 PREDOC SURVEY PARTICIPANTS PARTICIPATING IN INTRA-PE REPORTED BEING INVOLVED IN SUCH ACTIVITIES WITH OTHER ORAL HEALTH PROFESSIONS STUDENTS DURING THEIR TIME IN DENTAL SCHOOL, A DECLINE FROM THE 74% OF THE 2019 ADEA PREDOC SURVEY.**

**5 THERE IS A DECLINE IN THE LEVEL OF PARTICIPATION IN INTERPROFESSIONAL AND INTRAPROFESSIONAL EXPERIENCES (PE) DURING DENTAL SCHOOL, BASED ON THE RESPONSES TO THE ADEA 2019 AND 2024 PREDOC SURVEYS.**

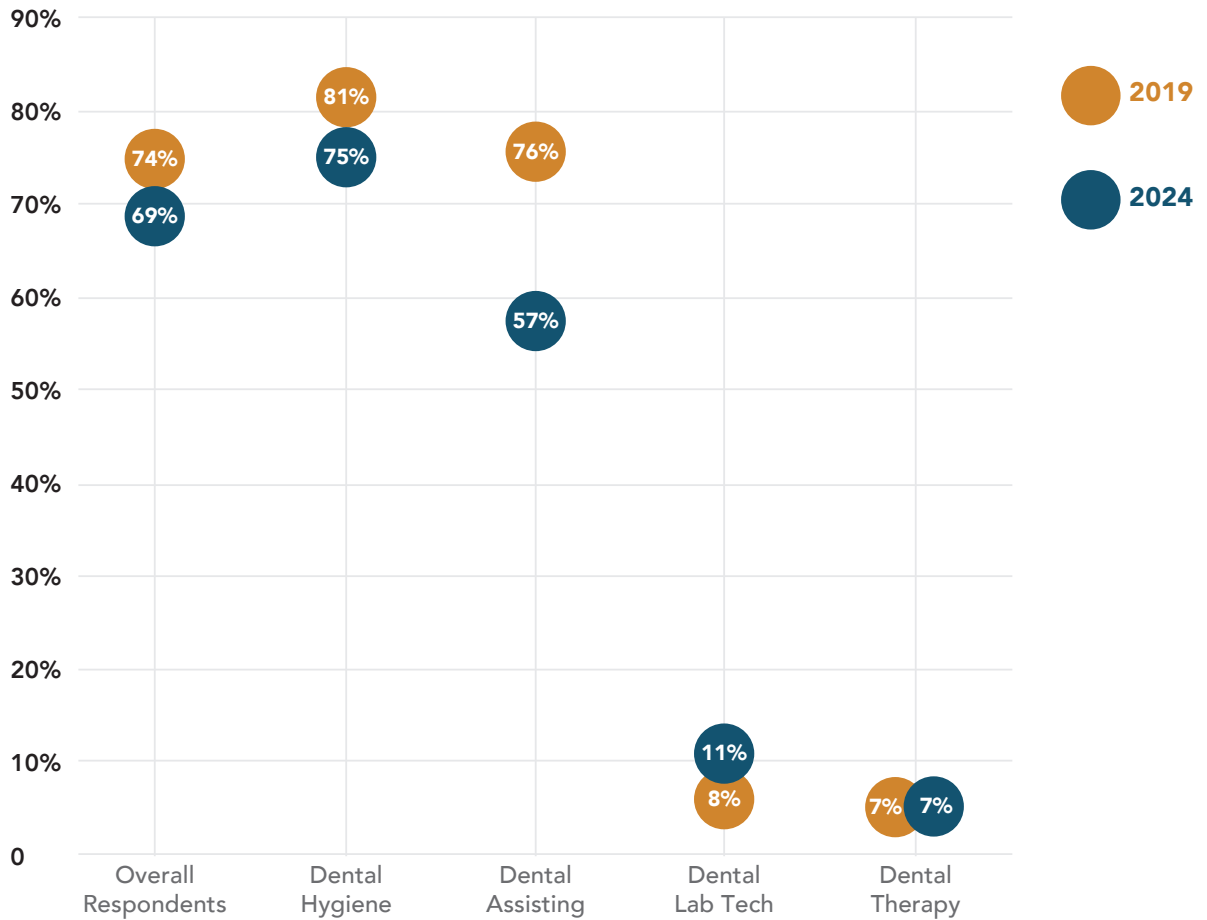
A smaller percentage of students responding to the ADEA Survey in 2024 were involved in intra-PE with allied oral health students than their 2019 counterparts (see Figure 5). The decline was even more pronounced when examining the level of participation in inter-PE (see Figure 6). At the same time, the level of agreement with the statement that the intraprofessional and interprofessional experiences helped them gain a better understanding of the other professions' roles in caring for the health of patients dropped in 2024 compared to 2019.

A smaller share of the 2024 respondents engaged in activities with their other oral health colleagues than the 2019 participants. Almost seven in 10 (69%) respondents in 2024 indicated that they participated in some intra-PE, a decline from five years earlier (74%). This was not consistent across the board; the 2024 responses indicated more contact with dental hygiene and dental laboratory technology students than in 2019. Meanwhile, 2024 respondents had the same level of interaction with dental therapy students and less with dental assisting students compared to 2019. In terms of activities, predoctoral students reported a lot more clinical activities than their counterparts in 2019, and more research and volunteer work. Classroom and pre-clinical activities completed together with other oral health professions students were in decline in terms of predoctoral students' participation, as reported to the ADEA Predoctoral Survey.

2024 participants found their intra-PE less eye opening than the 2019 cohort. While still high, the percentage of respondents agreeing and strongly agreeing that intra-PE helped them gain a better understanding of the roles of other oral health professions in caring for the oral health of patients dropped from 90% to 86% over the analyzed period.

FIGURE 5

**Intraprofessional Activities During Dental School, Percent of Predoctoral Respondents Stating Being Involved in Any Intraprofessional Activities With Other Oral Health Profession Students, 2019 and 2024**

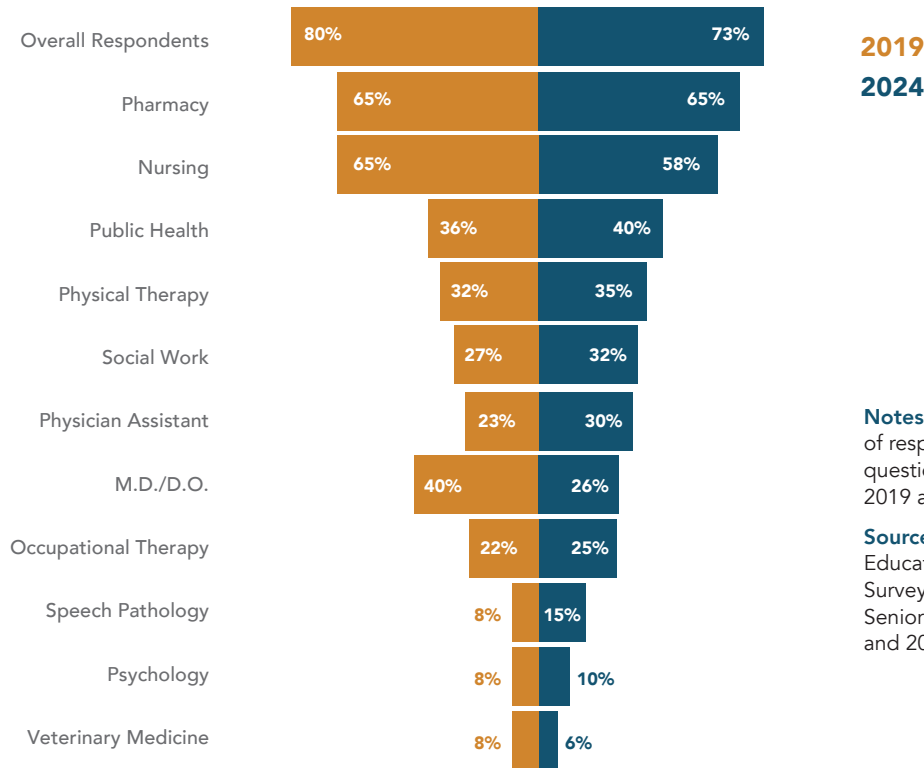


**Notes:** The number of respondents to this question was 2,268 in 2019 and 2,318 in 2024.

**Sources:** American Dental Education Association Survey of Dental School Seniors, Classes of 2019 and 2024.

FIGURE 6

**Interprofessional Activities During Dental School, Percent of Predoctoral Respondents Stating Being Involved in Any Interprofessional Activities With Other Health Profession Students, 2019 and 2024**



**Notes:** The number of respondents to this question was 2,448 in 2019 and 2,421 in 2024.

**Sources:** American Dental Education Association Survey of Dental School Seniors, Classes of 2019 and 2024.

This trend is visible also in the inter-PE of predoctoral students. Fewer students took part in any such activities in 2024 (73%) than in 2019 (80%), based on the responses to the ADEA Predoctoral Survey. There were large drops in reported interactions of predoctoral students with students from such health professions as nursing and medicine. The percentage dropped from 40% of the 2019 predoc respondents stating they did some activity with M.D./D.O. students to 26% reporting the same in 2024. Over the same period, predoc students stated higher interactions with physician assisting, speech pathology, public health, social work, and physical therapy students. Similar to the intra-PE activities, there was a rise in the share of students reporting research inter-PE activities. At the same time, there was a decline in clinical, classroom and voluntary joint exercises. They also agreed less than their 2019 colleagues with the statement that the learning experiences with other health professions students helped them gain a better understanding of the roles of other professions in caring for patients. Over the five-year period, the proportion of respondents participating in inter-PE that agreed or strongly agreed with this statement weakened from 83% in 2019 to 79% in 2024.

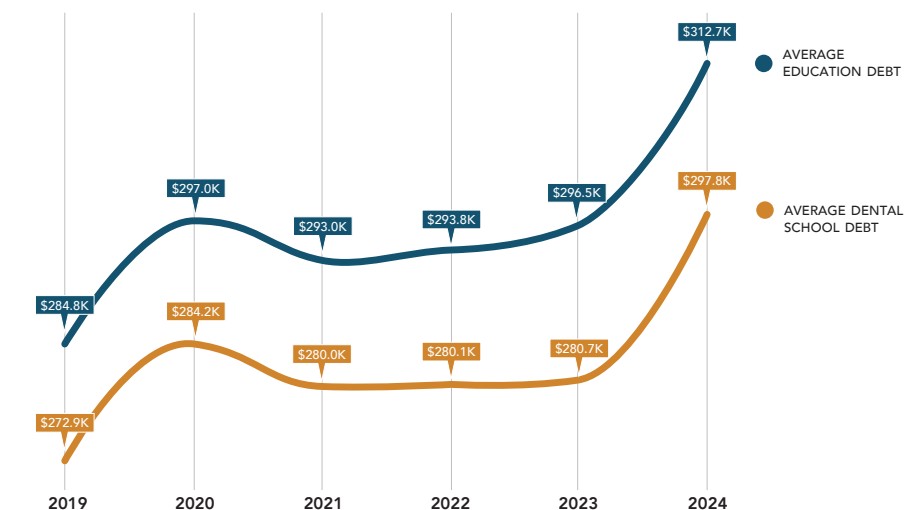
THERE WAS A  
**10% INCREASE**  
 OF THE AVERAGE  
 EDUCATION DEBT  
 FOR INDEBTED  
 GRADUATING  
 STUDENTS  
 RESPONDING TO  
 ADEA 2024 PREDOC  
 SURVEY RELATIVE  
 TO THEIR 2019  
 COUNTERPARTS,  
 NOT ADJUSTED  
 FOR INFLATION.

**6 AVERAGE EDUCATION DEBT WAS \$312,700 FOR STUDENTS GRADUATING WITH DEBT AND RESPONDING TO THE ADEA 2024 PREDOC SURVEY.**

When examining the change in nominal values, this amount was 10% higher than that reported by the 2019 respondents. Education debt is a combination of the dental school debt the senior students graduate with from dental school (the loans contracted to finance partially or all the cost of the predoctoral degree) and their predoctoral education debt, which is the outstanding education debt the senior students had when they entered dental school. Annual average education debt amounts varied between 2019 and 2024, given different cohorts and various response rates to the debt question to the ADEA Predoc Survey over the years (see Figure 7).

Most of the average education debt that predoctoral students reported in the ADEA 2024 Predoc Survey was from dental school debt (95%). Five percent of the 2024 average education debt was from predoctoral education debt.

**FIGURE 7**  
**Nominal Average Education Debt and Average Dental School Debt, as Stated by Respondents Graduating With Debt, 2019–2024, in Current Dollars, Thousands**



**Notes:** Debt values are not adjusted to inflation. The response rates for this survey question vary between 37% in 2020 and 65% in 2019. A response rate reflects the number of respondents for the debt question relative to the senior student population in that academic year. Education debt is a combination of the dental school debt the senior students graduate with from dental school (the loans contracted to finance partially or all the cost of the predoctoral degree) and their predoctoral education debt, which is the outstanding education debt the senior students had when they entered dental school.

**Source:** American Dental Education Association Surveys of Dental School Seniors, Classes of 2019 to 2024.



The percentage of ADEA Predoc Survey respondents graduating with debt increased between 2019 and 2024. While in 2019, 77% of respondents reported graduating with education debt (dental school debt and/or outstanding pre dental debt), by 2024, the proportion had reached 80%. For students participating in the ADEA Predoc Survey, the percent of those graduating with dental school debt also expanded, from 75% in 2019 to 78% in 2024.

On average, ADEA 2024 Predoc Survey respondents financed more than two-thirds of their dental education through debt (67%). They covered the rest of their expense to a large degree through a combination of financial support from family and friends (17%) and grants and scholarships (11%). Savings (3%), part-time employment (1.2%) and other sources (0.8%) were smaller sources of funding for a doctoral degree for the 2024 respondents. Respondents to the ADEA 2019 Predoc Survey had a similar pattern of funding sources.

Federal loans persisted as the top source of financing a doctoral education degree between 2019 and 2024. Eighty-five percent of 2024 respondents who contracted loans for dental school used federal direct unsubsidized loans at a higher rate than their 2019 colleagues. More than three quarters (79%) of ADEA 2024 Predoc Survey participants graduating with debt took federal direct Grad PLUS loans, which was more than the 2019 response cohort (72%). Less than one in six (14%) respondents graduating with dental school debt used Health Professions Student Loans—much less than the graduating cohort five years before. ADEA 2024 Predoc Survey respondents mentioned employing a variety of other loans to finance their dental school degree, from private loans from lenders, personal loans from family, loans directly from the school and state loan programs.

Dental school grants remained the most used source of grants and scholarships. Almost three quarters of the 2024 respondents who mentioned using grants and scholarships benefitted from a grant from their dental school, higher than the proportion of the 2019 respondent cohort (68%). The other scholarships and grants most cited by 2024 respondents who received grants and scholarships were state government grants (17%), U.S. armed forces scholarships (11%) and scholarships for disadvantaged students (10%). While still small, 8% of 2024 respondents who mentioned receiving grants and scholarships benefitted from the National Health Service Corps (NHSC) scholarships—double than the percentage of the 2019 cohort. The least cited grant and scholarship resource, the Indian Health Service (IHS) scholarship, was used by a larger percentage of the 2024 respondents (2%) than 2019 participants.



U.S. DENTAL  
SCHOOLS  
CONTINUED  
THEIR MISSION  
TO TRAIN  
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ORAL HEALTH  
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CARE THROUGH  
THEIR CLINICS  
TO LOCAL  
COMMUNITIES.

## 7 CONCLUSIONS.

In the 2023-24 academic year, a new generation of dentists graduated from 66 accredited U.S. dental schools. Based on the responses to the ADEA Predoctoral Survey, students decided to pursue a career in dentistry earlier than their counterparts from five years before. They stated high, but slightly lower levels of well-being during dental school than the 2019 graduating class. Predoctoral dental students graduated confident in their preparedness to practice and getting ready to enter the oral health workforce. Professional choices upon graduation were similar to 2019, with private practice increasing in popularity and a smaller share of students intending to practice in a public setting, such as a nonprofit or government service. Students continued to be involved in activities at a high rate in intra- and inter-professional education during dental school, but at a lower level than in 2019. The average education debt for those respondents graduating with debt continued to increase in nominal terms, and the share of those graduating with education debt rose compared to 2019. U.S. dental schools continued their mission to train and educate oral health professionals and provide oral health care through their clinics to local communities.

### ENDNOTES

<sup>1</sup> The 14 clinical areas included in the ADEA Predoctoral Senior Survey for assessment of senior students' perception of adequacy of clinical experience are Restorative—Direct Restorations, Extraction, Geriatric Dentistry, Fixed Prosthesis, Removable Prosthesis, Treatment Planning, Preventive, Examination and Diagnosis, Pediatric Dental Care, Periodontal Therapy, Dentistry for Individuals with Special Needs, Endodontic Therapy, Restoration of Implant, and Surgical Placement of Implant.

<sup>2</sup> The 15 clinical areas included in the ADEA Predoctoral Senior Survey for assessment of senior students' confidence in their skills are Health Promotion and Disease Prevention, Including Caries Management; Restoration of Teeth; Recognizing the Complexity of Patient Treatment and Identifying When Referral Is Indicated; Patient Assessment, Diagnosis, Comprehensive Treatment Planning, Prognosis and Informed Consent; Local Anesthesia and Pain and Anxiety Control, Including Consideration of the Impact of Prescribing Practices and Substance Abuse Disorder; Evaluation of the Outcomes of Treatment, Recall Strategies and Prognosis; Periodontal Therapy; Screening and Risk Assessment for Head and Neck Cancer; Communicating and Managing Dental Laboratory Procedures in Support of Patient Care; Replacement of Teeth, Including Fixed, Removable and Dental Implant Prosthodontic Therapies; Dental Emergencies; Pulpal Therapy; Oral Mucosal and Osseous Disorders; Hard and Soft Tissue Surgery; and Malocclusion and Space Management.

## METHODOLOGICAL APPENDIX

TABLE  
A1

**U.S. Dental School Senior Student Demographics and 2024 ADEA Senior Predoc Survey Response Sample, 2023-24 Academic Year**

	2023-24 SENIOR STUDENT POPULATION		2024 ADEA SENIOR STUDENT SURVEY RESPONSE SAMPLE	
BY TYPE OF SCHOOL	COUNT	%	COUNT	%
PRIVATE	3,095	45%	1,162	32%
PRIVATE/ STATE-RELATED	346	5%	231	7%
PUBLIC	3,419	50%	1,945	61%
BY U.S. CENSUS REGION OF THE DENTAL SCHOOL	COUNT	%	COUNT	%
MIDWEST	1,533	22%	651	21%
NORTHEAST	1,901	28%	760	21%
SOUTH	1,972	29%	1,196	37%
WEST	1,454	21%	731	22%
<b>TOTAL NUMBER OF U.S. DENTAL SCHOOLS WITH A PREDOCTORAL SENIOR CLASS/ RESPONDING TO THE SURVEY</b>	66	–	66	–
<b>TOTAL SIZE OF SENIOR CLASS/ RESPONSE SAMPLE</b>	6,860	100%	3,338	100%

**Notes:** Percentages may not total 100% because of rounding.

Senior students in dental doctoral degrees at U.S. dental schools include the third-year students at the University of Pacific, Arthur A. Dugoni School of Dentistry (Dugoni School) and the fourth-year students at the remainder of U.S. dental schools. Dugoni School has a three-year dental doctoral degree program. The senior student population figures reflect the number of senior students that received the ADEA Survey of Dental School Seniors, as reported by school representatives to ADEA in January-February 2024. The ADEA Predoc Survey is conducted at the end of the academic year.

Census Regions and Divisions are groupings of states that subdivide the United States, according to the U.S. Census Bureau “Census Regions and Divisions of the United States.” U.S. Census Bureau, Geography Division, Internet Release Date: May 2018.

For the purposes of this analysis, ADEA includes Puerto Rico within the South Census region of the United States, even though U.S. Census Bureau does not include U.S. territories within the Census Regions and Divisions.

Several chi-square independence tests (by type of school - P-value: 96.7% and by region P-value: 99.8%) fail to reject the null hypothesis that the distribution of students in the response group is the same as the distribution of senior students in the population by type of institution and geographical region of the dental school.

**Source:** Analysis of American Dental Education Association Survey of Dental School Seniors, Class of 2024.

TABLE A2

**The Demographic Characteristics of the 2019 and 2024 Response Samples to the ADEA Senior Predoc Survey**

DEMOGRAPHIC CATEGORY	2019		2024	
	OVERALL	HURE	OVERALL	HURE
<b>GENDER IDENTITY (%)</b>				
Man	41	38	38	34
Woman	49	60	58	66
Not Listed/Other	10	2	4	1
<b>AGE BASED ON THE BIRTH YEAR REPORTED</b>				
Median Age (years)	28	28	28	28
<b>DEMOGRAPHIC GENERATION (%)</b>				
Generation Z	0.04	–	48	38
Millennials	97	95	51	60
Generation X	3	4	1	1
Boomers	0.5	1	0.03	–
<b>RACE AND ETHNICITY (%)</b>				
American Indian or Alaska Native	0.1	0.8	0.2	1.1
Asian	20	–	21	–
Black	3	24	5	27
Hispanic	9	73	12	71
Two or More Races	3	-	3	-
Native Hawaiian or Other Pacific Islander	0.3	2	0.1	0.5
Nonresident Alien	5	–	5	–
Unknown	9	–	10	–
White	50	–	45	–
HURE	12	100	17	100
<b>U.S. CENSUS REGION BASED ON STATE OF PERMANENT LEGAL RESIDENCE (%)</b>				
Midwest	21	11	19	10
Northeast	18	14	18	12
South	31	53	41	60
West	25	21	22	18
Outside the United States	6	2	0.1	–

**Notes:** Percentages may not total 100% because of rounding. The percentages are calculated from the total responses to the specific demographic question, so the totals vary from question to question.

ADEA adheres to the current U.S. Department of Education’s guidelines for reporting race and ethnicity data for postsecondary education institutions.

Demographic generations identification based on birth years and generational boundaries as explained by Michael Dimock, Defining generations: Where Millennials end and Generation Z begins, Pew Research Center, January 17, 2019, accessed on June 14, 2022, available at <https://www.pewresearch.org/fact-tank/2019/01/17/where-millennials-end-and-generation-z-begins/>

Census Regions and Divisions are groupings of states that subdivide the United States, according to the U.S. Census Bureau “Census Regions and Divisions of the United States.” U.S. Census Bureau, Geography Division, Internet Release Date: May 2018.

For the purposes of this analysis, ADEA includes Puerto Rico within the South Census region of the United States, even though U.S. Census Bureau does not include U.S. territories within the Census Regions and Divisions.

**Source:** American Dental Education Association Survey of Dental School Seniors, Classes of 2019 and 2024.

TABLE  
A3

**Well-being Statement and Abbreviated Form, 2024**

ABBREVIATED STATEMENT	FULL STATEMENT OF WELL-BEING
Coping With the Pressure of Dental Schoolwork	I can cope with the pressure of my dental schoolwork.
Dental Schoolwork is a Positive Challenge	I find my dental schoolwork to be a positive challenge.
Emotionally Drained During Dental Schoolwork	During my dental schoolwork, I often feel emotionally drained.
Need More Time to Relax After a Day of Dental School	After a day of dental school, I tend to need more time than in the past to relax and feel better.
Negative Talk About Dental Schoolwork	It happens more and more often that I talk about my dental schoolwork in a negative way.
New and Interesting Aspects in Dental Schoolwork	I always find new and interesting aspects in my dental schoolwork.
Think Less While at Dental School	Lately, I tend to think less while at dental school and do my dental schoolwork almost mechanically.
Do My Dental Schoolwork Almost Mechanically	There are days when I feel tired before I arrive at dental school.

Source: American Dental Education Association Survey of Dental School Seniors, Class of 2024.

TABLE  
A4

**Preparedness to Practice Statement and Abbreviated Form, 2024**

ABBREVIATED STATEMENT	FULL STATEMENT OF PREPAREDNESS TO PRACTICE
<b>Ethical/Professional Values</b>	I understand the ethical and professional values that are expected of the profession.
<b>Communication Skills</b>	I have the communication skills necessary to interact with patients and health professionals.
<b>Management of Common Conditions</b>	I have a fundamental understanding of common conditions and their management.
<b>Continuing Education</b>	I believe that continuing education requirements are necessary for practitioners.
<b>Basic Skills in Clinical Decision-making</b>	I have basic skills in clinical decision-making and the application of evidence-based information to dental practice.
<b>Working With Diverse Staff and/or Patients</b>	I believe I am adequately prepared to work with diverse, multicultural staff and/or patients.
<b>Clinical Skills to Begin Practice in General Dentistry</b>	I am confident that I have acquired the clinical skills required to begin practice in general dentistry.
<b>Legal and Regulatory Context</b>	I understand the legal and regulatory context within which dental care services may be provided.
<b>Leading a Successful Team</b>	I am prepared to lead a successful team; I can hire and retain staff, create a positive work culture, manage conflicts, etc.
<b>Individuals With Special Needs</b>	I can assess the treatment needs of individuals with special needs.
<b>Management of a Successful Business</b>	I am prepared to manage a successful business; I can manage finances, enact a business plan, ensure efficient scheduling and billing, obtain appropriate credentialing, etc.

**Source:** American Dental Education Association Survey of Dental School Seniors, Class of 2024.





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### FOR MORE INFORMATION CONTACT:

Emilia C. Istrate Ph.D., M.A.I.S.

Senior Vice President of Policy and Education Research

[ADEAdata@adea.org](mailto:ADEAdata@adea.org)

# ADEA

THE VOICE OF  
DENTAL EDUCATION

**ABOUT ADEA:** The American Dental Education Association (ADEA) is The Voice of Dental Education. Our mission is to lead and support the health professions community in preparing future-ready oral health professionals. Our members include all 87 U.S. and Canadian dental schools, more than 800 allied and advanced dental education programs, over 50 corporations and approximately 15,000 individuals. Our activities encompass a wide range of research, advocacy, faculty development, meetings, and communications, including the esteemed *Journal of Dental Education*<sup>®</sup>, as well as the dental school application services ADEA AADSAS<sup>®</sup>, ADEA PASS<sup>®</sup>, ADEA DHCAS<sup>®</sup> and ADEA CAAPID<sup>®</sup>.

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655 K Street, NW, Suite 800 ▪ Washington, DC 20001 ▪ 202-289-7201 ▪ [adeadata@adea.org](mailto:adeadata@adea.org)