

**ADEA**  
**Trends in Dental**  
**Education**  
**2022-23**



## ADEA Trends in Dental Education 2022-23

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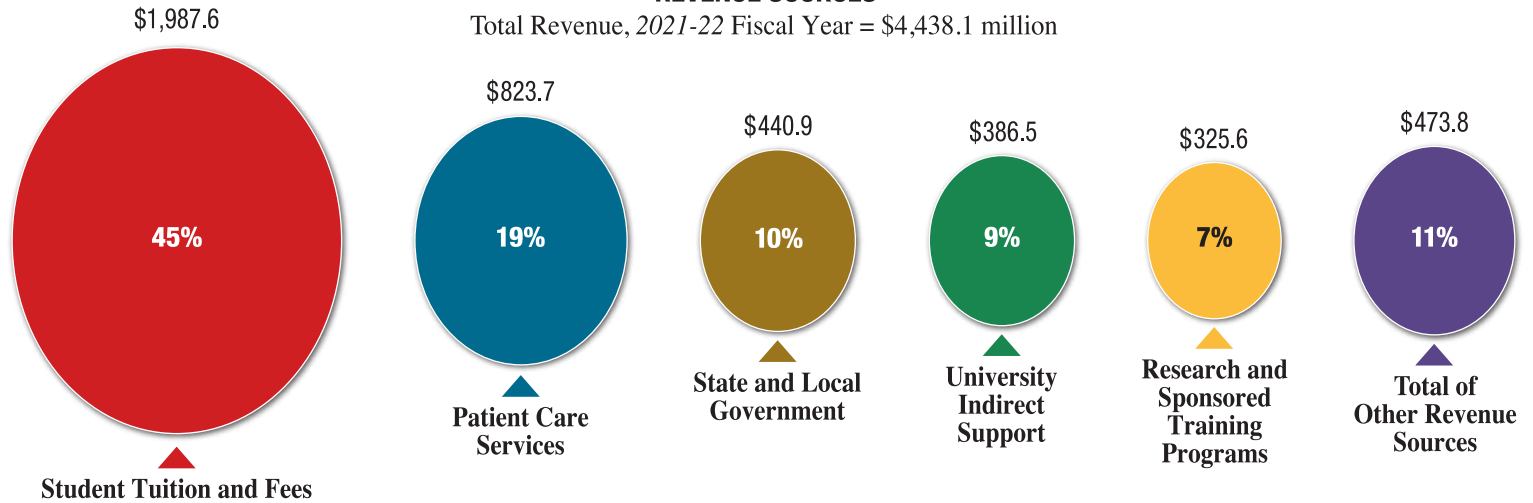


# Revenue Sources and Expenditures of U.S. Dental Schools, 2021-22 Fiscal Year

Student tuition and fees together with patient care service revenue generated almost two thirds of revenue for accredited U.S. dental schools in 2021-22. Educational expenses and providing patient care accounted for 54% of all expenditures.

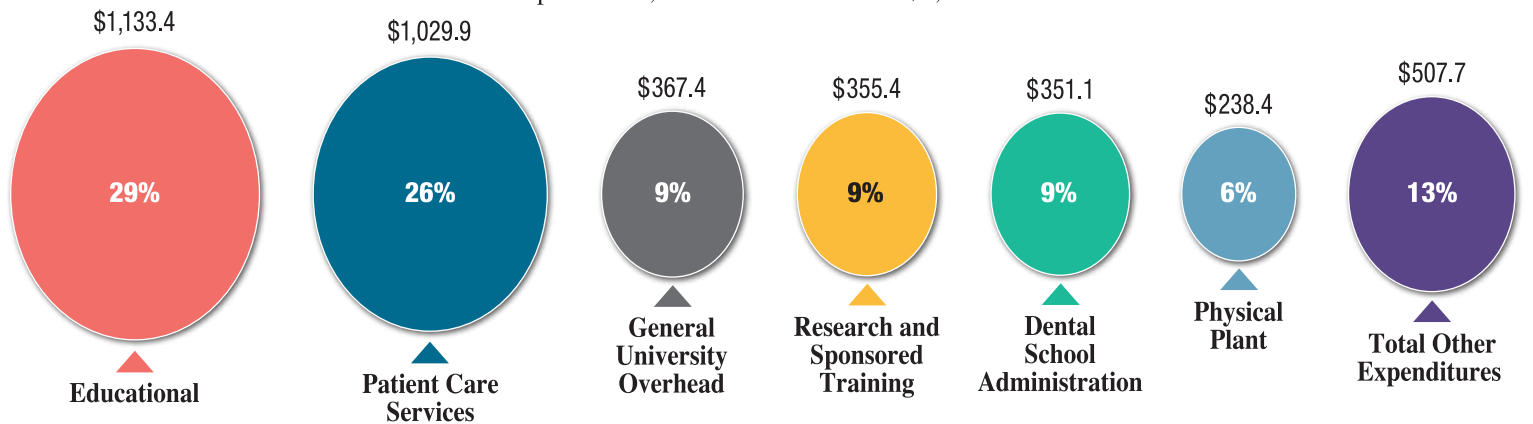
## REVENUE SOURCES

Total Revenue, 2021-22 Fiscal Year = \$4,438.1 million



## TYPES OF EXPENDITURES

Total Expenditures, 2021-22 Fiscal Year = \$3,983.3 million



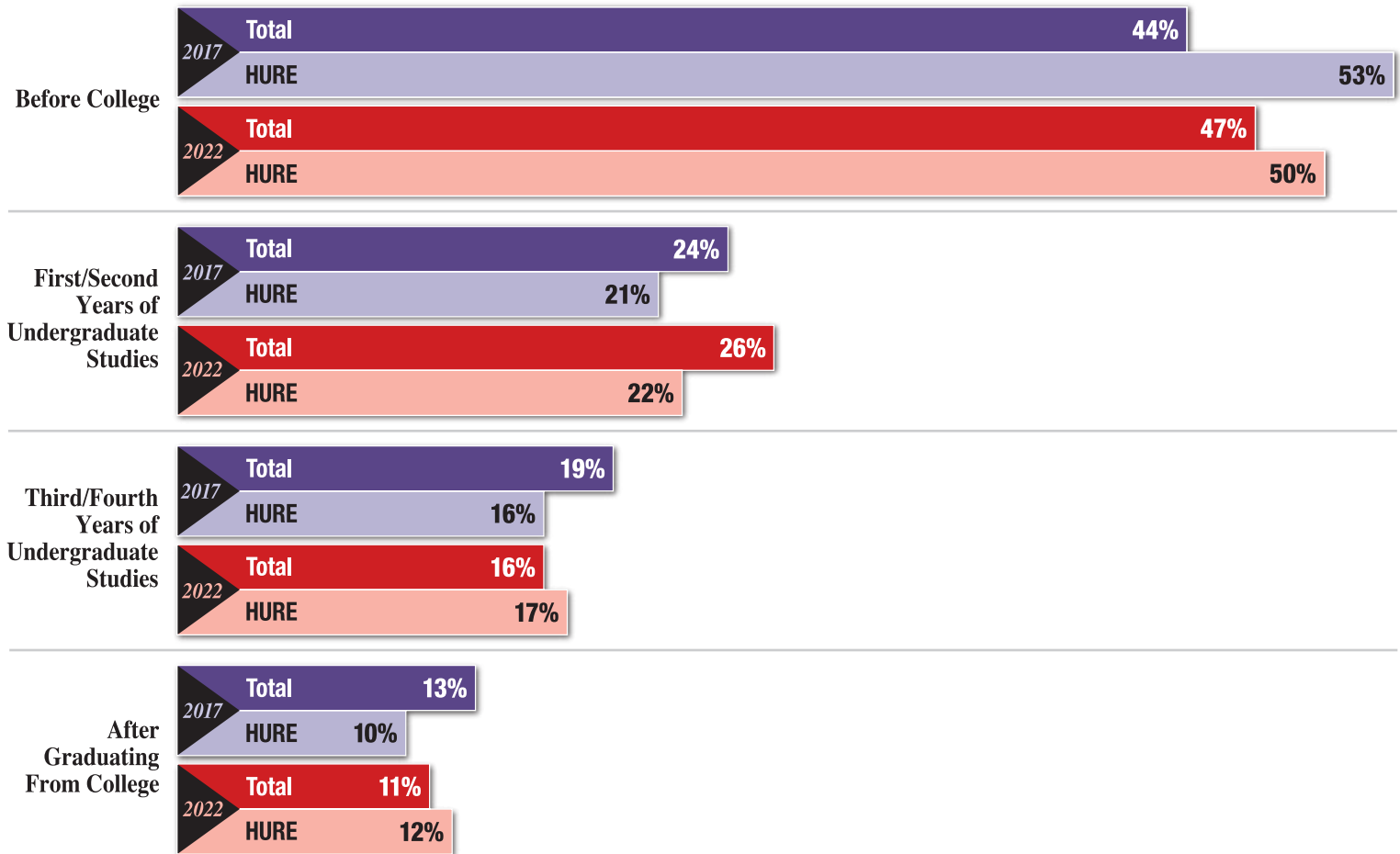
Notes: Percentages might not total to 100% due to rounding. "Total Other Revenue Sources" includes: continuing education revenue, auxiliary enterprises revenue, Graduate Medical Education revenue, gifts, endowment earnings, financial aid, federal educational revenue and other. "Total Other Expenditures" includes: continuing education, financial aid expenses, computer services, library and learning resources, major capital expenditures, and other costs. Revenue and Expenditure source categories are from the the Group III-Financial Management section of the ADA Survey of Dental Education, 2021-22 Fiscal Year, as collected by the ADA Health Policy Institute on behalf of the Commission on Dental Accreditation. The audit of colleges and universities prepared by the American Institute of Certified Public Accountants is the basic reference manual for the construction and interpretation of the ADA survey.

Source: ADEA analysis of American Dental Association, Health Policy Institute, 2021-22 Survey of Dental Education (Group III).

# When Do Students Decide to Pursue Careers in Dentistry?

Almost half of the predoctoral senior students in the Class of 2022 who responded to the ADEA Survey of U.S. Dental School Seniors decided to become a dentist before going to college, slightly more than their 2017 counterparts. Historically underrepresented racial and ethnic (HURE) graduating student responses followed a similar pattern in 2017 and 2022.

Timing of Decision to Pursue a Career in Dentistry, Total and HURE, 2017 and 2022



Notes: The number of respondents to this question was 3,035 total and 432 for HURE students in 2022, and 4,772 total and 650 for HURE students in 2017. The changes between 2017 and 2022 are statistically significant at 90% confidence level, except for third/fourth years of undergraduate studies and after college for the HURE respondents. HURE includes the following four race and ethnicity categories: 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. These four race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions. The HURE definition is based on the parity gap between the share among the U.S. population and the share among professionally active dentists for each of the race and ethnicity categories defined by the U.S. Department of Education for reporting data from higher education institutions.


Source: Istrate EC, Cooper BC, West KP. Dentists of Tomorrow 2022: An Analysis of the Results From the ADEA 2022 Survey of U.S. Dental School Seniors. American Dental Education Association, Education Research Series. Issue 4, September 2022.

# Top Five Reasons for Choosing a Dental School

Among 2022 dental school graduating seniors, cost of attendance was the top reason for choosing a specific dental school, followed by proximity to family and friends. Among historically underrepresented racial and ethnic (HURE) students, academic reputation ranked first, followed by cost of attendance.

## All Students

**Rank**



**1** **Less Expensive Than Other Schools**  
(e.g., Due to In-state Tuition, Financial Aid, etc.)




**2** **Proximity to Family/Friends**



**2** **Academic Reputation**



**3** **The Only School That Offered Me a Place**




**4** **Specific Opportunities**  
(e.g., clinical procedures performed, the chance to work with specific technologies or faculty)

## HURE Students

**Rank**




**1** **Academic Reputation**



**2** **Less Expensive Than Other Schools**  
(e.g., Due to In-state Tuition, Financial Aid, etc.)



**3** **Proximity to Family/Friends**



**4** **Culture at the School/Program**  
(e.g., Size and Social Opportunities)



**5** **The Only School That Offered Me a Place**

Notes: The number of respondents to this question was 3,011 in total and 431 for HURE students in 2022. The reasons were identified based on the frequency of how often the survey respondents indicated a reason as their top selection criterion. HURE students include the following four race and ethnicity categories: Non-Hispanic Black or African American, Hispanic or Latino, Non-Hispanic American Indian or Alaska Native, and Non-Hispanic Native Hawaiian or Other Pacific Islander. These four race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions. The HURE definition is based on the parity gap between the share among the U.S. population and the share among professionally active dentists for each of the race and ethnicity categories defined by the U.S. Department of Education for reporting data from higher education institutions.

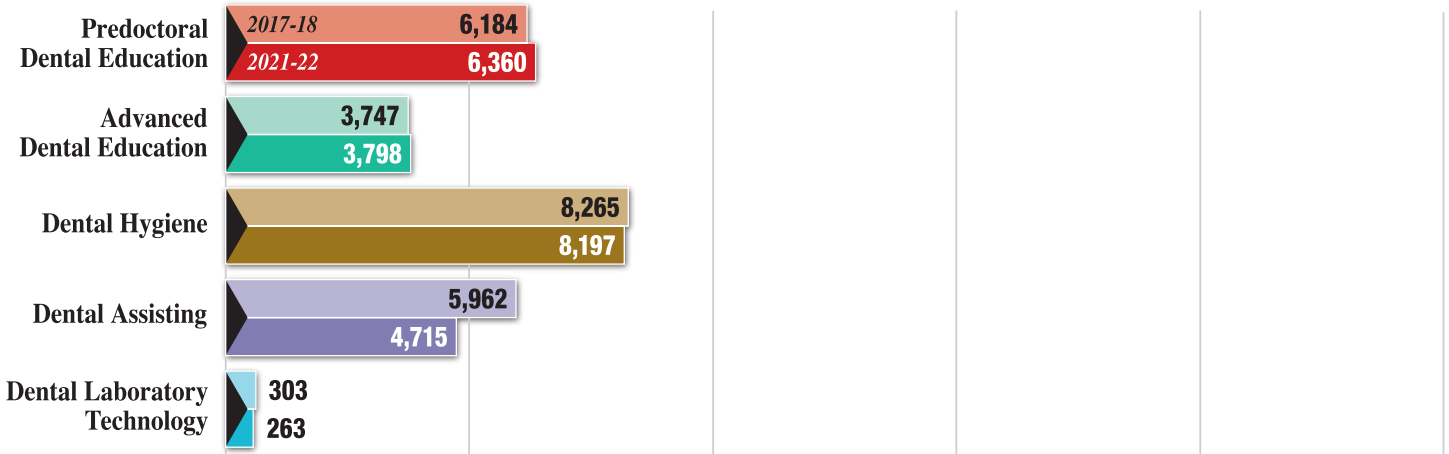
Source: American Dental Education Association Survey of Dental School Seniors, Class of 2022.

# First-year and Total Enrollments by Dental Education Program

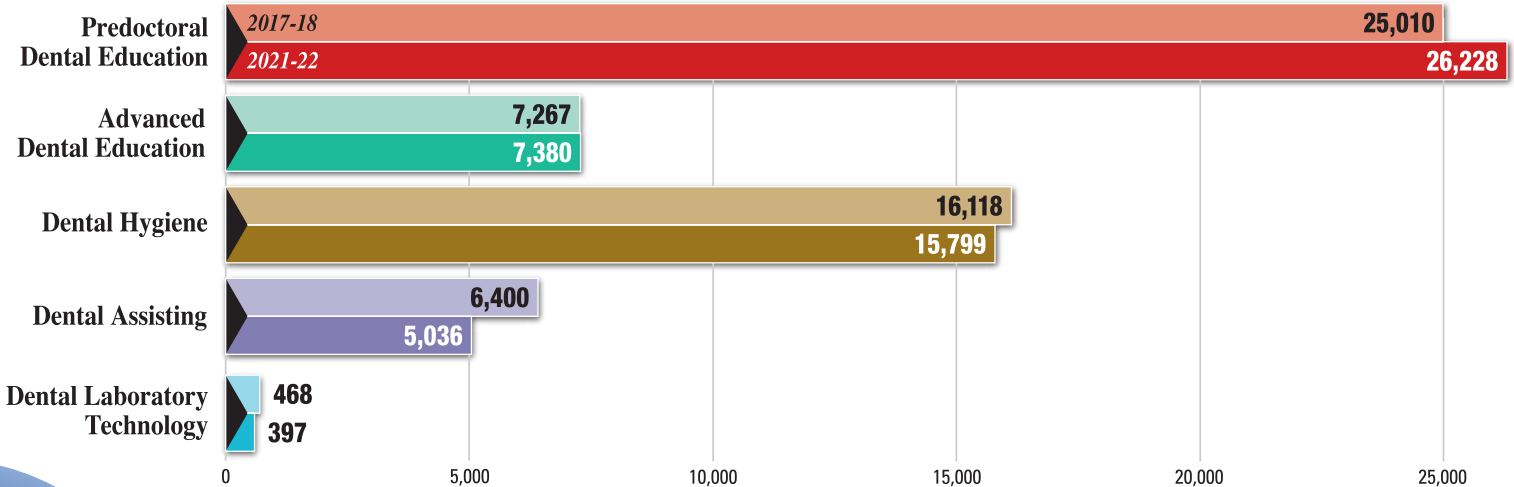
2017-18 and 2021-22 Academic Years

Accredited predoctoral and advanced dental education programs first-year classes increased between 2017-18 and 2021-22, while first-year enrollments decreased for allied dental education programs. Total enrollment recorded the same trend across dental education programs. The decline in the number of accredited allied dental education programs contributed to the drop in first-year and total enrollment in accredited allied programs.

## First-year Enrollment by Type of Dental Education



## Total Enrollment by Type of Dental Education

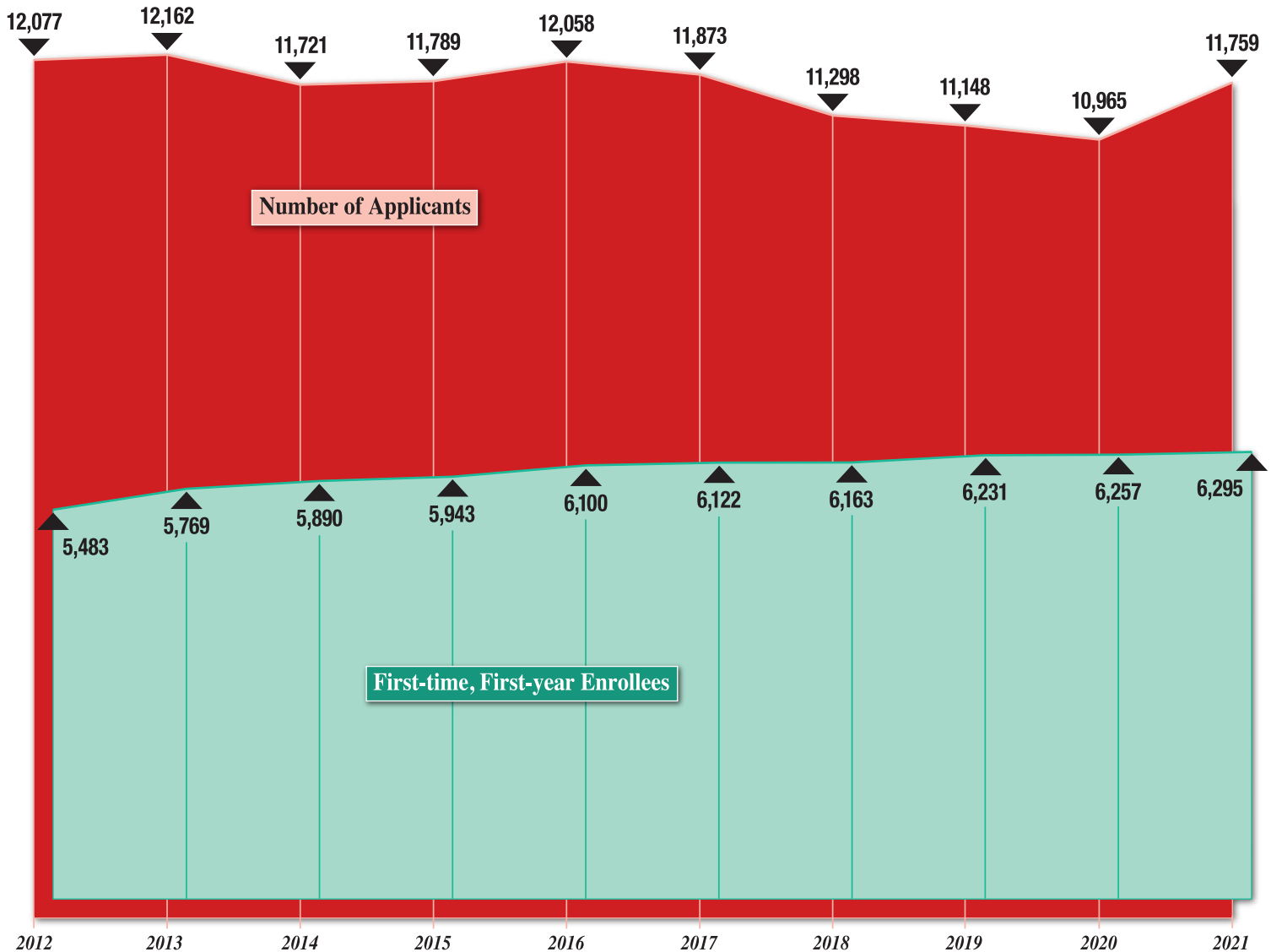


Notes: First-year enrollment for predoctoral students includes repeaters. The American Dental Association does not specify if the first-year enrollment in allied dental education programs and advanced dental education programs represents only first-time enrollees or includes repeaters. A dental therapy program was accredited in October 2020.

Sources: Analysis of American Dental Association, Health Policy Institute, Surveys of Dental Education, Surveys of Advanced Dental Education, Surveys of Dental Hygiene Education Programs, Surveys of Dental Assisting Education Programs, Survey of Dental Laboratory Technology Education Programs, 2017-18 and 2021-22.

# Applicants and Enrollees in U.S. Dental Schools

First-time, first-year enrollment increased steadily between 2012 and 2021, mainly due to several new dental schools opening and some existing schools increasing class sizes. Meanwhile, the number of applicants registered a volatile trend over the same period. The number of applicants in 2021 was larger than in the previous year, but still below the 2012-2017 highs.

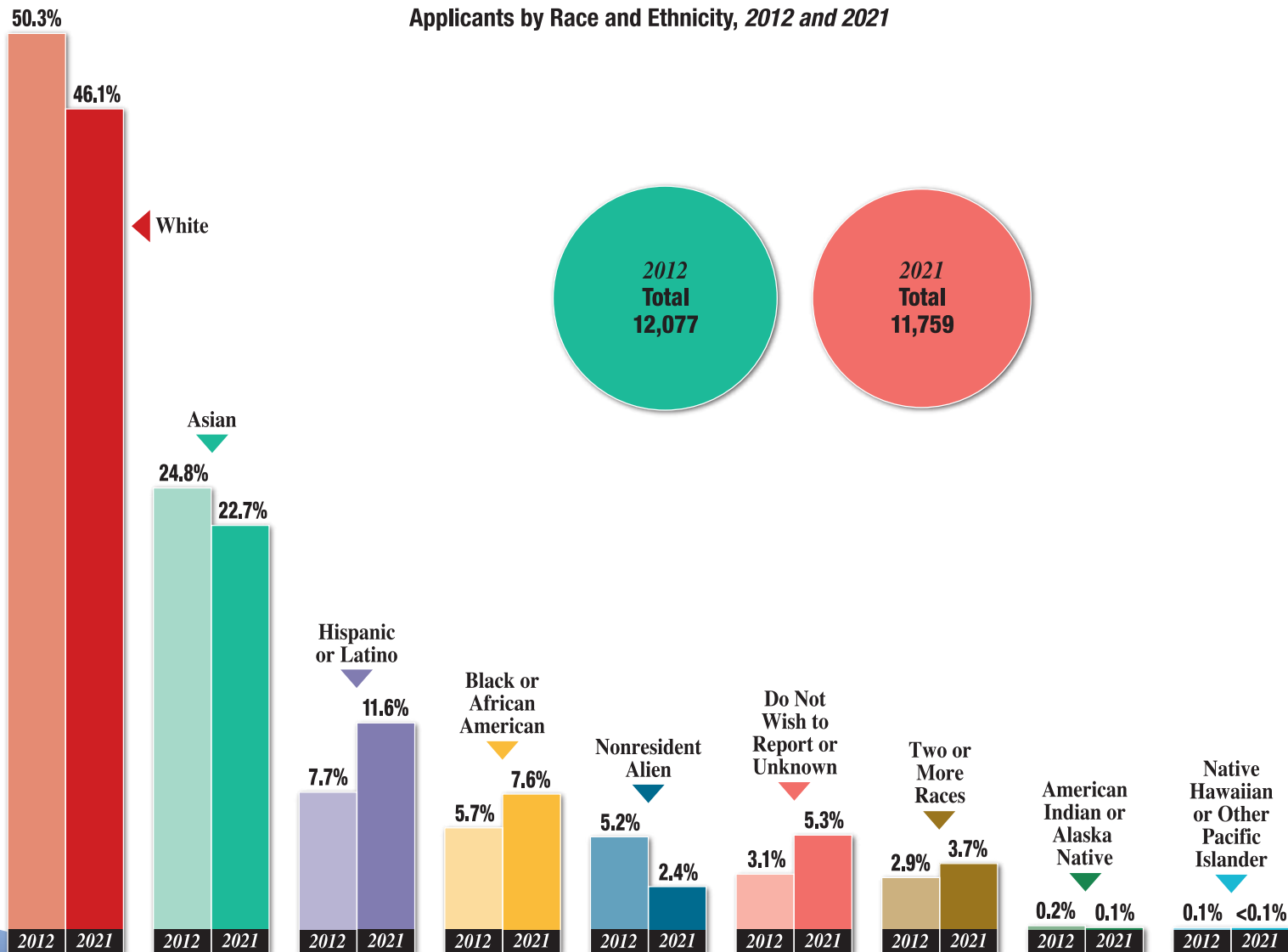


Notes: Applicants are individuals who applied for entry into a predoctoral dental program at one or more U.S. dental schools in a given year. First-time, first-year enrollees are matriculated individuals for the first time at a U.S. dental school in a given year. ADEA calculates the "first-time, first-year enrollees" indicators based on an analysis of ADEA Associated American Dental Schools Application Service (ADEA AADSAS®) and Texas Medical & Dental Schools Application Service (TMDSAS) data.

Source: American Dental Education Association, U.S. Dental School Applicants and Enrollees Reports, 2021 Entering Class.

# Diversity Among Predoctoral Dental Applicants

Between 2012 and 2021, the predoctoral dental applicant share increased among Hispanic or Latino applicants (four percentage points), followed by Black or African American (two percentage points). Applicants declaring two or more races and those not wishing to disclose their race or ethnicity witnessed significant increases in their proportion of predoctoral applicants. During the same time, white, Asian, nonresident alien, and American Indian/Alaskan Native groups experienced decreases in their share of applicants.

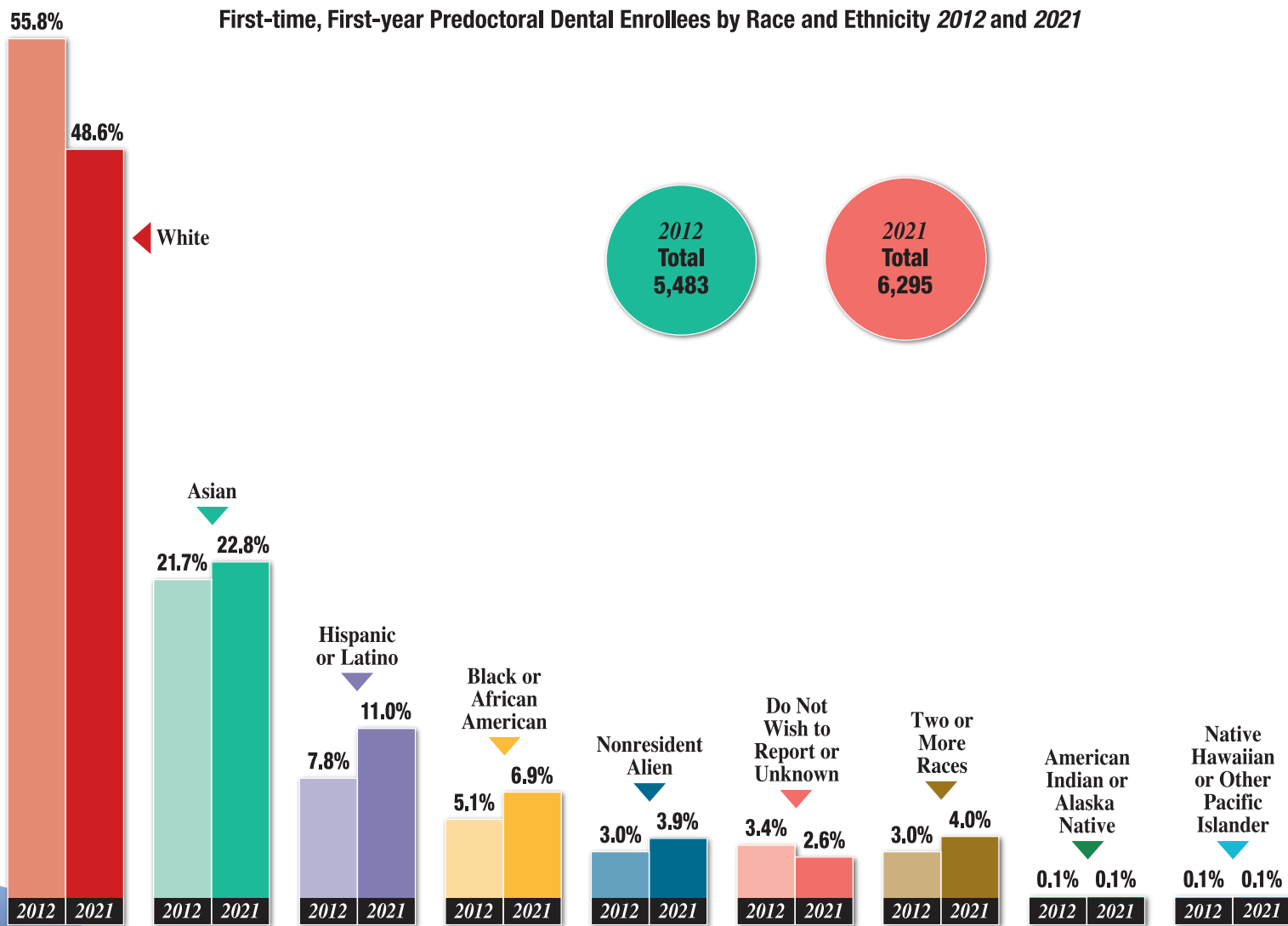


Note: The race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions.  
 Source: American Dental Education Association, U.S. Dental School Applicants and Enrollees, 2012 and 2021 Entering Classes.



# Diversity of First-time, First-year Predoctoral Dental Enrollees

Between 2012 and 2021, the representation of Hispanics or Latinos, followed by Black or African American and Asian students, increased among first-time, first-year predoctoral dental enrollees. During the same time, white students became a smaller share of new enrollees while American Indian/Alaskan Native and Native Hawaiian or Pacific Islander students continued to represent only 0.1% of the total number of first-time, first-year predoctoral dental enrollees.

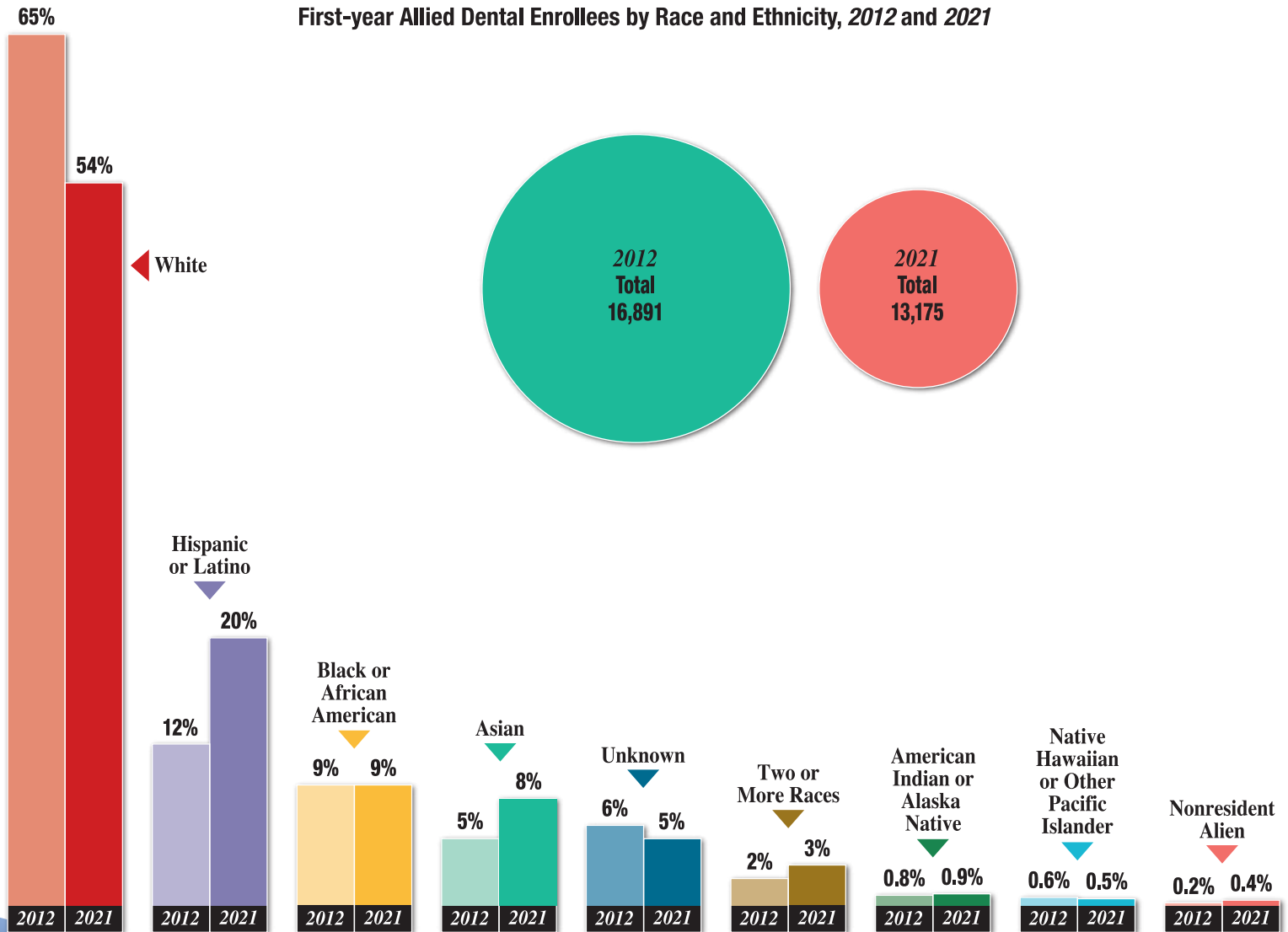


Note: The race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions.  
 Source: American Dental Education Association, U.S. Dental School Applicants and Enrollees, 2012 and 2021 Entering Classes.

# Diversity of First-year Allied Dental Enrollees

Between 2012 and 2021, the representation of Hispanics or Latinos, followed by Asian and multiracial students, improved among first-year enrollees at accredited allied dental education programs. Over the same period, the share of white first-year allied dental enrollees declined precipitously (by close to 11 percentage points). Black or African American students also saw a slight decline (0.7 percentage points) in their proportion among first-year allied dental enrollees.

First-year Allied Dental Enrollees by Race and Ethnicity, 2012 and 2021



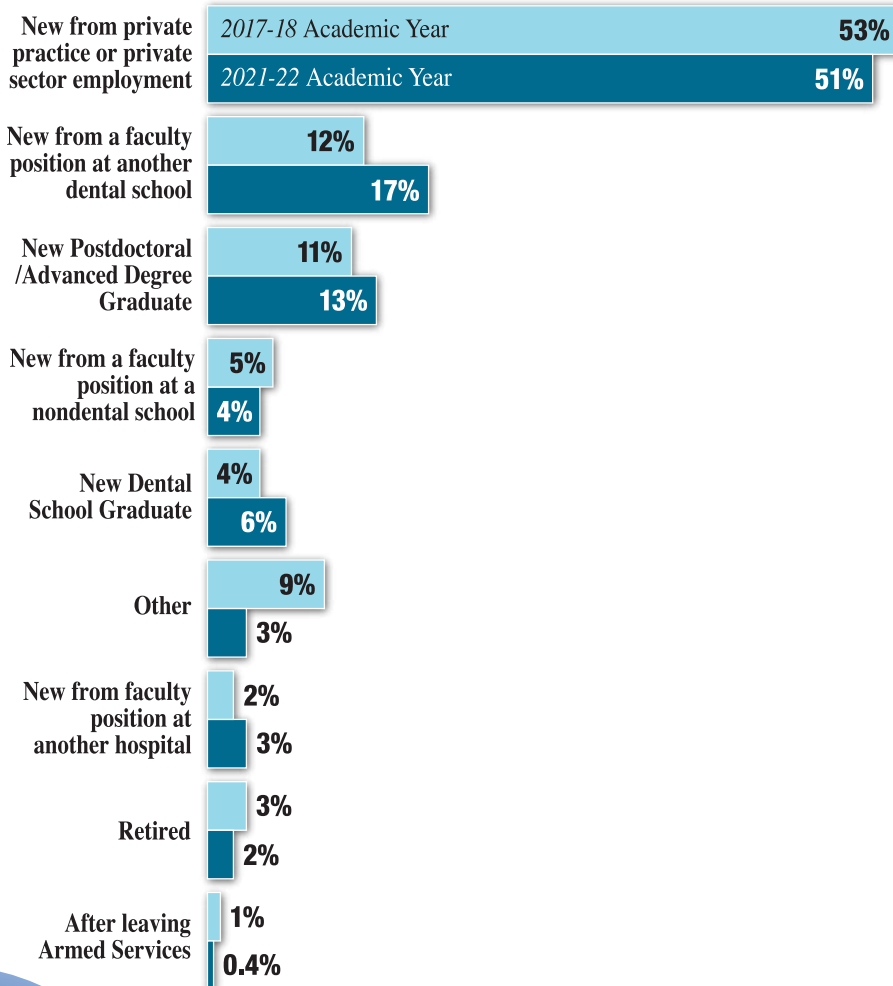
Notes: A dental therapy program was accredited in October 2020. The race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions.

Source: ADEA Analysis of American Dental Association, Health Policy Institute, Surveys of Dental Education, Surveys of Dental Assisting Education Programs, Surveys of Dental Laboratory Technology Education Programs, 2012-13 and 2021-22.

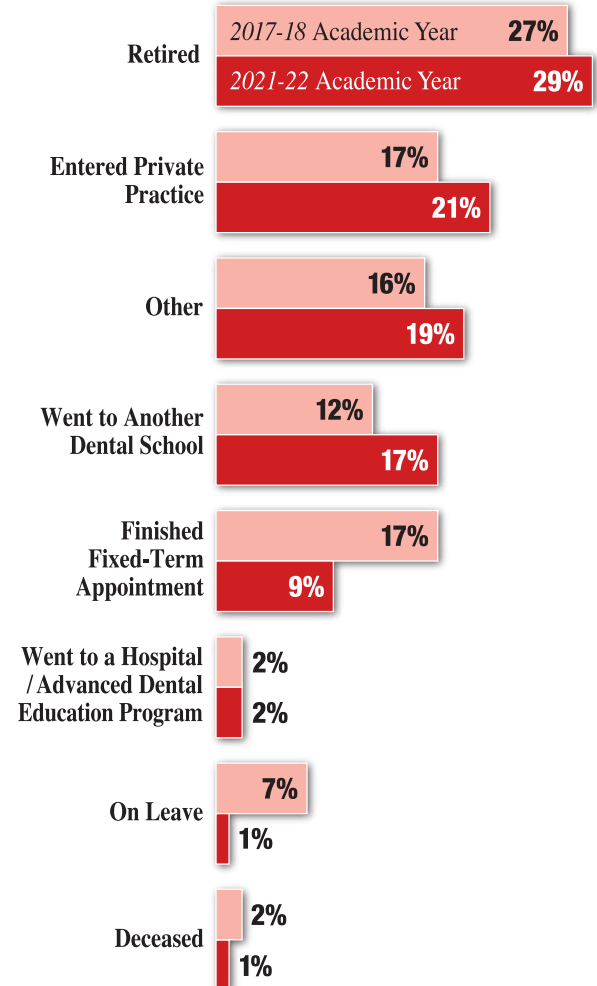
# Dental School Faculty: Where They Come From and Where They Go

The largest sources of new dental school faculty between 2017-18 and 2021-22 are private practice or private sector employment. Retirement remained the largest source of dental school faculty separations between 2017-18 and 2021-22, increasing slightly over the five-year period. Leaving for a position at another dental school saw the highest jump as a source of faculty separations (almost six percentage points), followed by entering private practice (four percentage points). Completing a fixed-term appointment has become a less important source of faculty departures.

### Sources of New Full-time and Part-time Dental Faculty



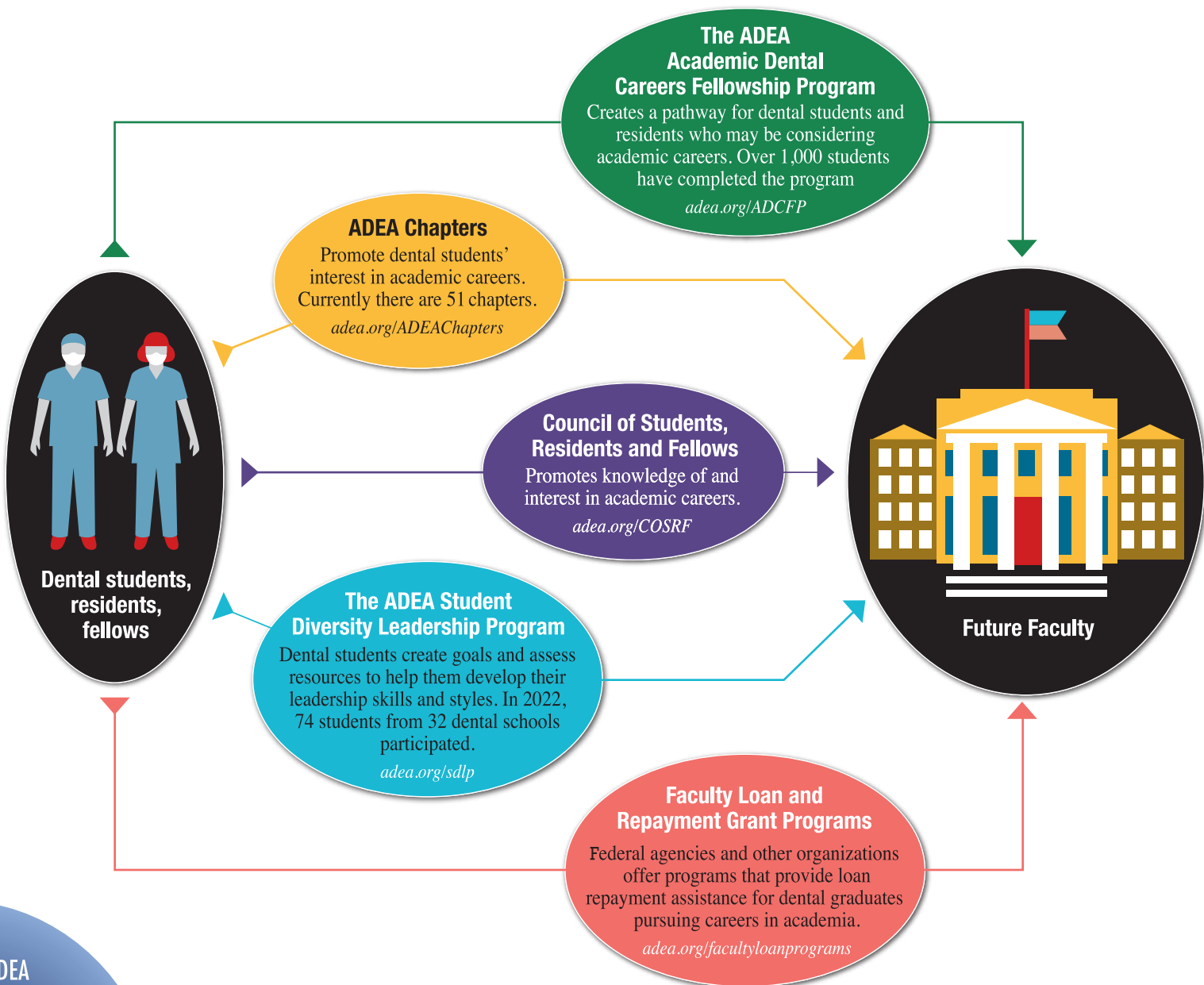
### Reasons for Dental Faculty Separations



Notes: Percentages may not total 100 due to rounding. This analysis reflects full-time and part-time faculty vacancies for which accredited dental schools reported the source of new faculty members and the reason for faculty separations. Sixty-four accredited dental schools provided this information to ADEA for the 2017-18 academic year and 61 did so for 2021-22. Source: American Dental Education Association, 2017-18 ADEA Survey of Dental School Faculty and 2021-22 ADEA Faculty Census.

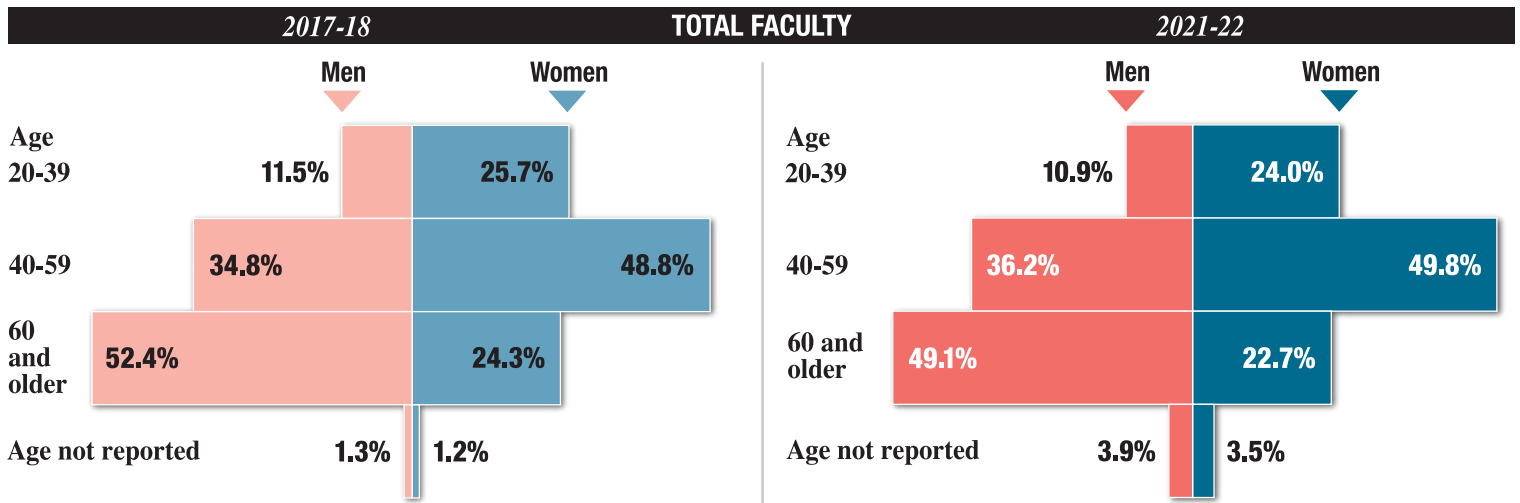
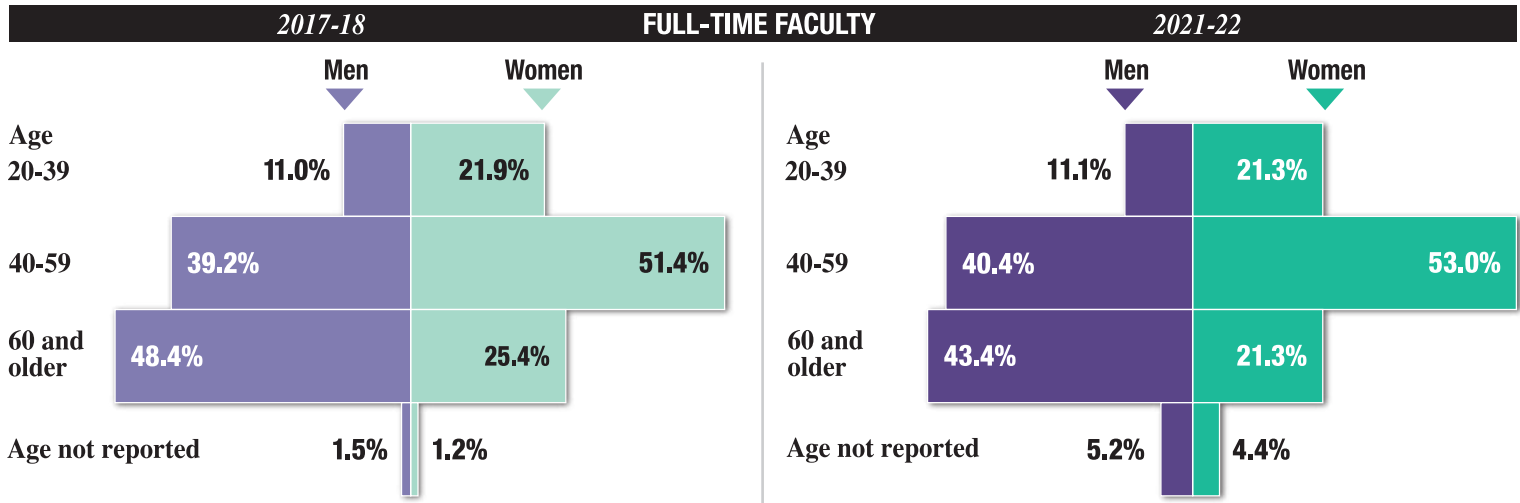
# Resources for Future Faculty

For dental students, residents and fellows who opt to pursue a rewarding career as dental school faculty, a variety of resources—financial and experiential—help support the pathway to an academic career.



# Faculty at U.S. Dental Schools by Age and Gender

The age distribution among men and women faculty at accredited U.S. dental schools remained relatively steady over the five-year period. The highest percentage of men faculty are age 60 or older, and for women age 40 to 59. The proportion of full-time and part-time women faculty aged 20 to 39 was more than double that of men in this age group in 2021-22 (24% relative to 11%).



Notes: Percentages may not total 100% due to rounding. Dental school faculty includes faculty teaching predoctoral, allied dental and advanced dental education students at accredited U.S. dental schools who have full- or part-time status during the respective academic year. For 2021-22, ADEA also collected the number of faculty who reported to their schools their gender as one of the following: transgender man, transgender woman, genderqueer/gender non-conforming, different gender identity or did not provide their gender identity. For 2017-18, ADEA also collected the number of faculty who did not wish to report their gender identity to their employer. For dental school faculty, dental schools report the gender and date of birth data to ADEA based on what the faculty provide them for the school's administrative records. Date of birth, which is used to calculate age, was a required field in 2017-18 and was optional in 2021-22. ADEA does not collect the data directly from the faculty members. For 2021-22, dental schools did not report the date of birth for the overwhelming majority of the faculty with gender not listed as woman or man or with gender unknown. Sixty-three dental schools provided ADEA data on their faculty gender and date of birth information in 2017-18 and 56 schools did so in 2021-22.

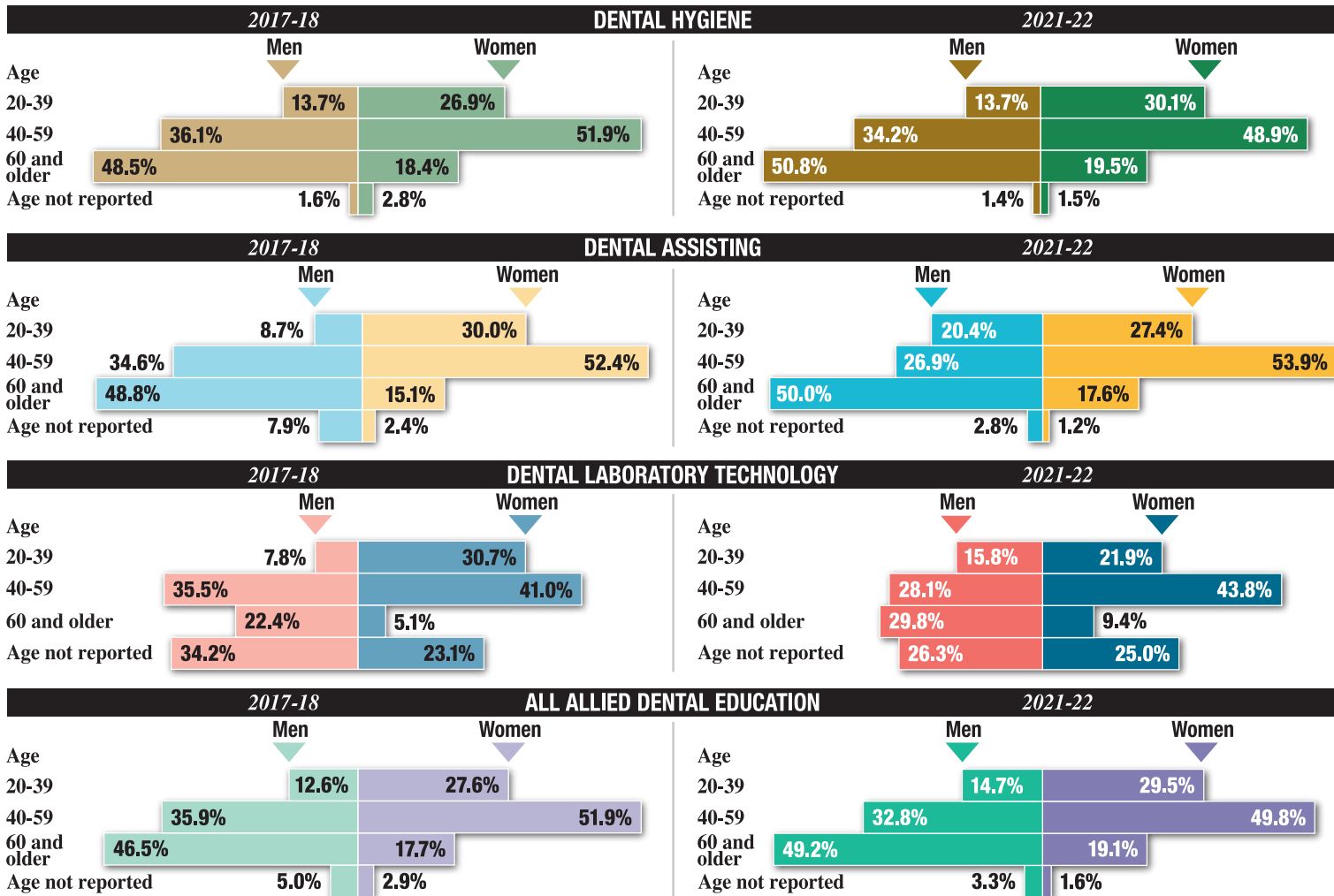
Source: American Dental Education Association, 2017-18 ADEA Survey of Dental School Faculty and 2021-22 ADEA Faculty Census.



# Faculty at U.S. Allied Dental Education Programs by Age and Gender

The age distribution among women and men faculty at accredited U.S. allied dental education programs remained relatively steady between 2017-18 and 2021-22. The 40-59 age group is the only category recording slight declines for both women and men. This is the largest age group for women faculty in allied dental education and second largest for men.

**Percent of Faculty at Accredited U.S. Allied Dental Programs by Age and Gender, 2017 and 2021**

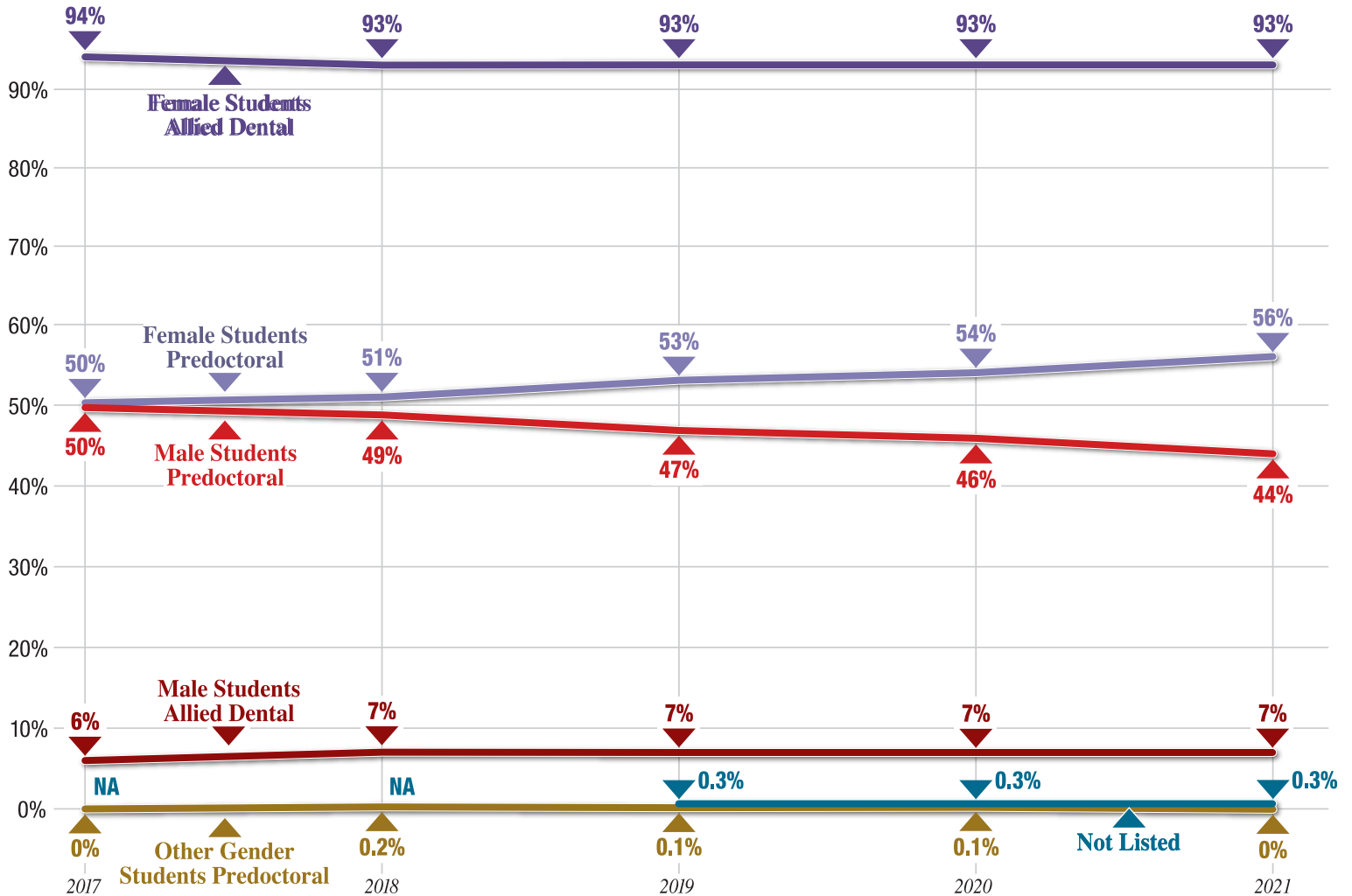


Notes: Percentages may not total 100% because of rounding. The American Dental Association has started reporting an "other" gender category for faculty at allied dental education programs with the 2017-18 Survey of Allied Dental Education. This category collects responses for those who prefer not to report gender, do not identify as either men or women, or whose gender information is not available. The age distribution data for this gender category is not reported here, due to the lack of data for 2017-18.

Source: ADEA analysis of American Dental Association, Health Policy Institute, Surveys of Dental Hygiene Education Programs, Surveys of Dental Assisting Education Programs, Surveys of Dental Laboratory Technology Education Programs, 2017-18 and 2021-22.

# Gender Distribution of First-year Predoctoral and Allied Dental Students

The overwhelming majority of first-year enrollees at accredited allied dental education programs were women between 2017-18 and 2021-22. Women became the majority of first-year enrollees in predoctoral programs in 2017-18. This trend continued over the coming years, with women reaching 56% of the first-year predoctoral enrollees in 2021-22.



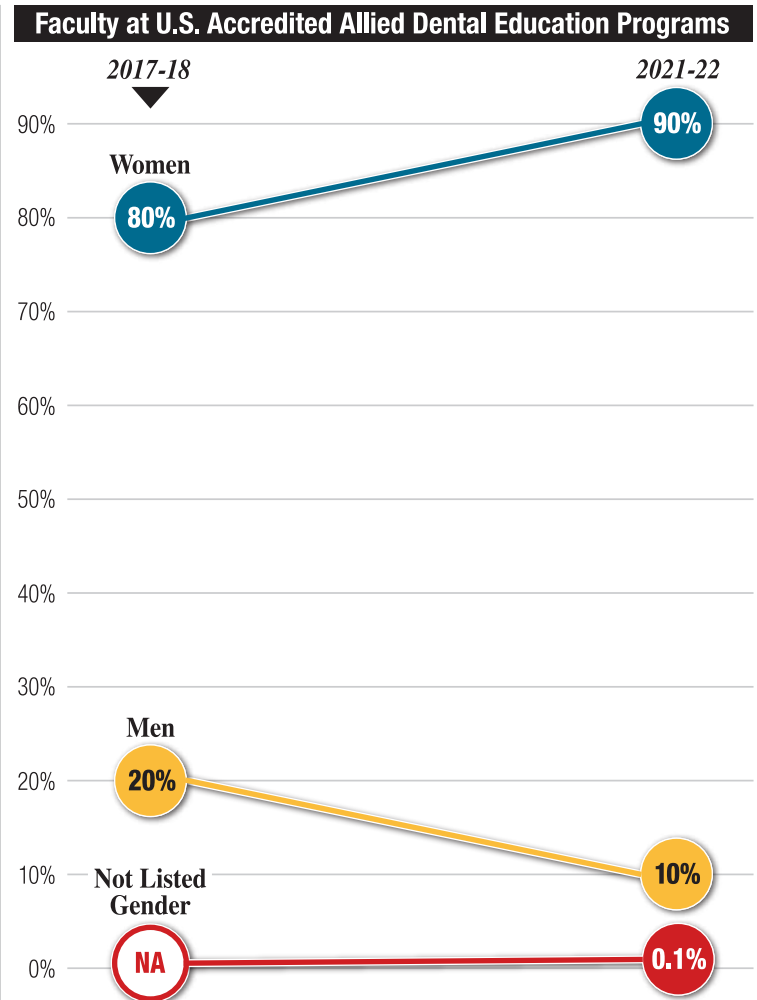
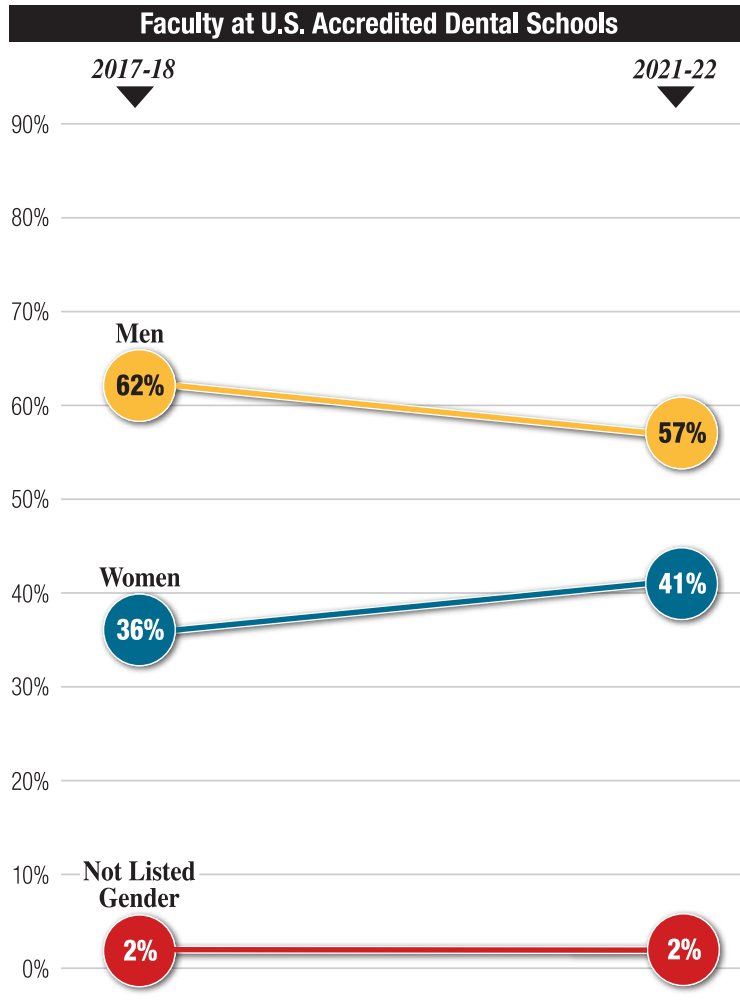
Notes: Percentages may not total 100% because of rounding. The American Dental Association (ADA) first-year enrollment for predoctoral students by gender includes repeaters. The ADA does not specify if the first-year enrollment in allied dental education programs represents only first-time enrollees or includes repeaters. ADA introduced an "Other" gender category for reporting first-year enrollment by gender for predoctoral students in 2015-16 and for allied students in 2019-20. This category collects responses for those who prefer not to report gender, do not identify as either women or men, or whose gender is not available. ADEA calls this category "not listed" gender.

Source: ADEA analysis of American Dental Association, Health Policy Institute, Surveys of Dental Education, Surveys of Dental Hygiene Education Programs, Surveys of Dental Assisting Education Programs, Surveys of Dental Laboratory Technology Education Programs, 2017-18 to 2021-22.



# Women Faculty in Academic Dentistry

Women are increasingly a larger proportion of faculty in dental schools and accredited allied dental education programs. At dental schools, there is a trend toward more women, with the share of faculty not wishing to report their gender or not identifying as either woman or man remaining steady. Faculty at accredited allied dental programs is majority women, increasing 10 percentage points over the past five years.



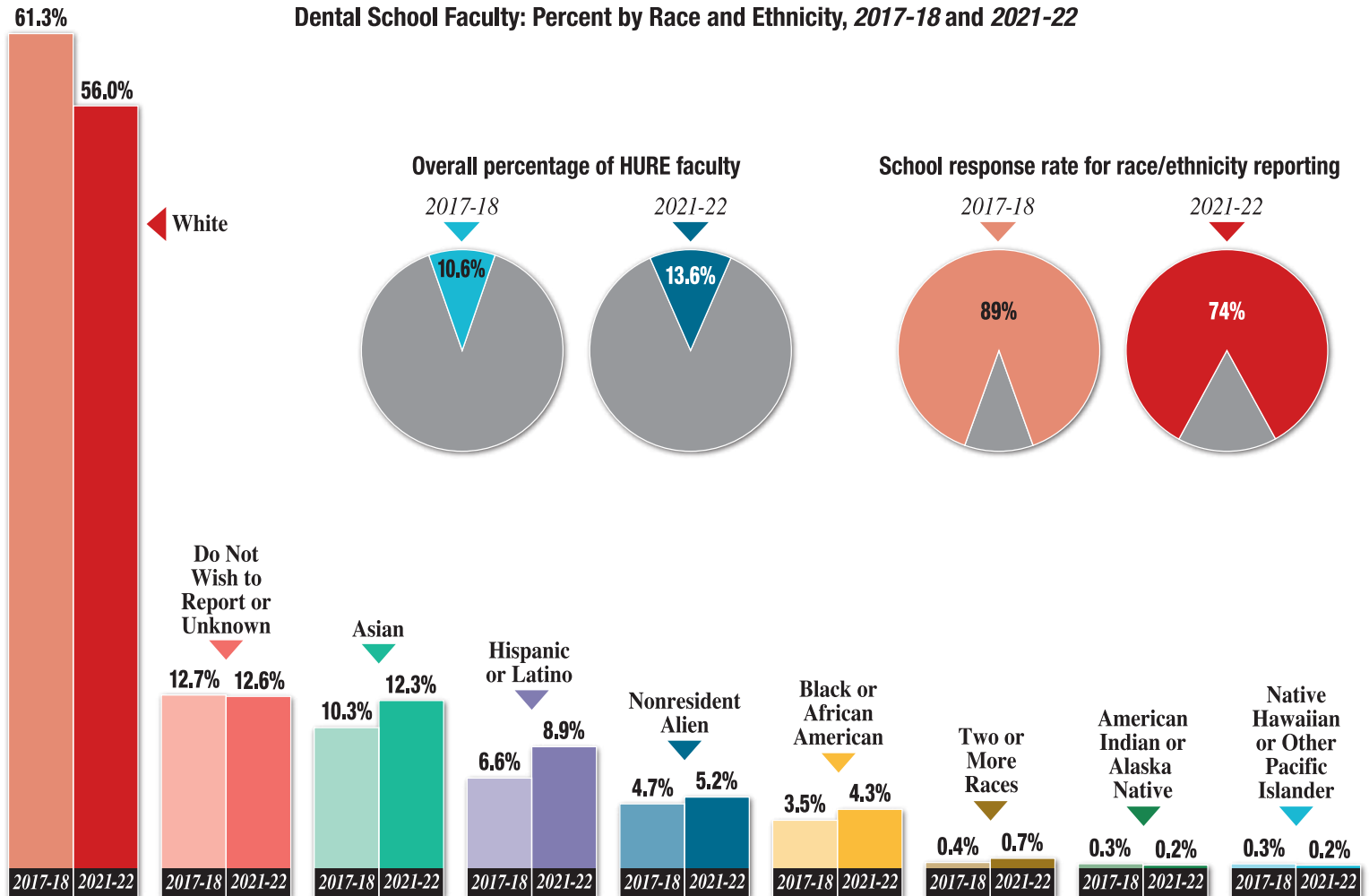
Notes: Percentages may not total 100% because of rounding. Dental school faculty includes faculty teaching predoctoral, allied dental and advanced dental education students at accredited U.S. dental schools who have full- or part-time status during the respective academic year. Therefore, there might be an overlap between the counts of dental school and allied dental education faculty. For 2021-22, the percentage of "not listed" gender for dental school faculty includes faculty who reported to their schools their gender as one of the following: transgender man, transgender woman, genderqueer/gender non-conforming, different gender identity or did not provide their gender identity. For 2017-18, the "not listed" gender reflects only the percentage of faculty who did not wish to report their gender identity to their employer. For dental school faculty, dental schools report their gender data to ADEA, based on what the faculty provide them for the school's administrative records. ADEA does not collect the data directly from faculty members. Sixty-three dental schools provided ADEA data on their faculty gender information in 2017-18 and 59 schools did so in 2021-22. ADA has started reporting an "other" gender category for faculty at allied dental education programs with the 2017-18 Survey of Allied Dental Education. This category collects responses for those who prefer not to report gender, do not identify as either women or men, or whose gender is not available. ADEA calls this category "not listed" gender.

Source: ADEA Analysis of 2017-18 ADEA Dental School Faculty Survey and 2021-22 ADEA Faculty Census; American Dental Association, Health Policy Institute, 2017-18 and 2021-22 Surveys of Dental Hygiene Education Programs, Dental Assisting Programs, and Dental Laboratory Technology Programs.



# Diversity in Academic Dental School Faculty

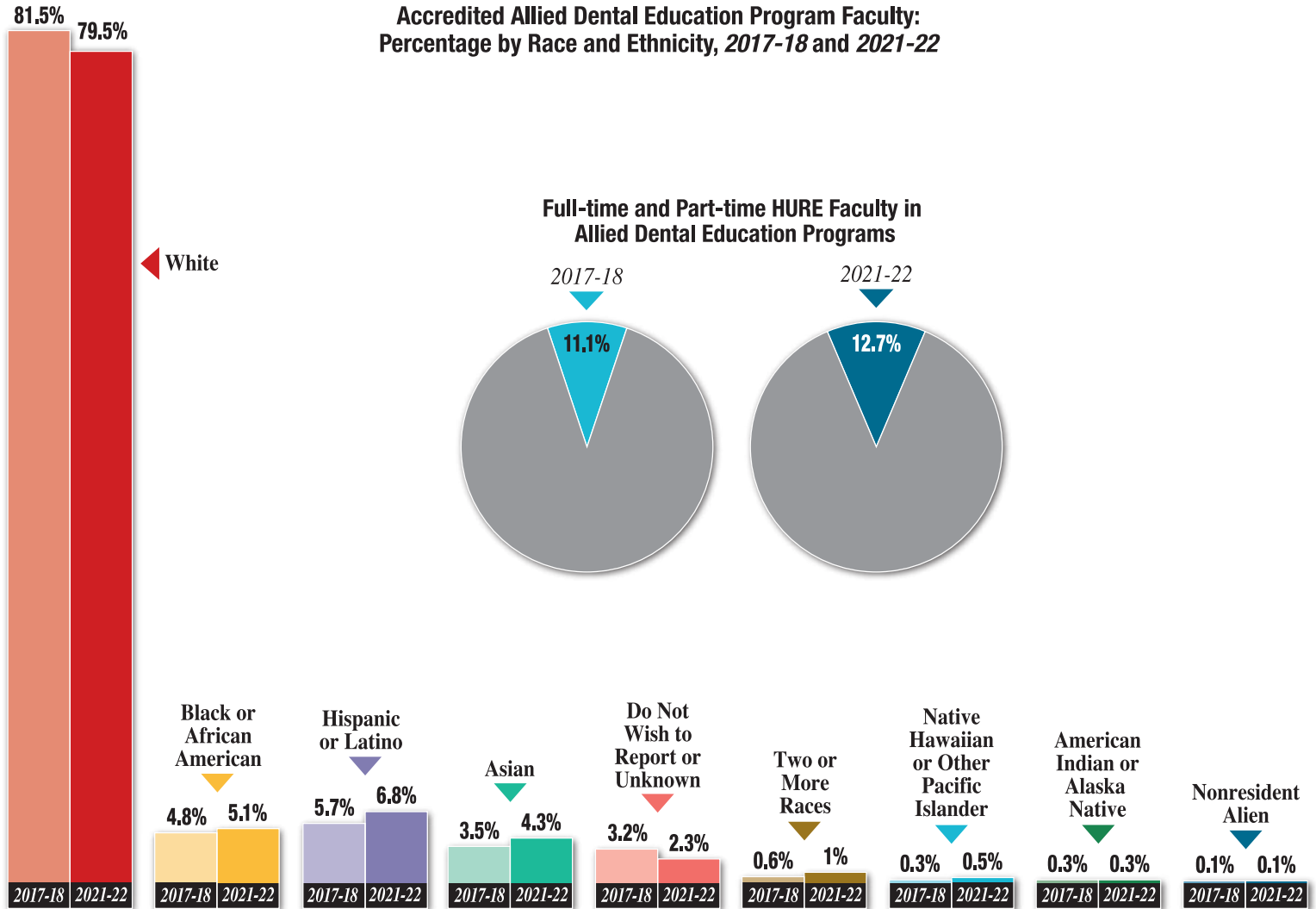
Between 2017-18 and 2021-22, the overall percentage of historically underrepresented racial and ethnic (HURE) faculty members in dental schools increased by three percentage points. This increase was driven mainly by the rise in the representation of Hispanic or Latino faculty and, to a lesser extent, African American faculty. Overall, white faculty represented fewer U.S. dental school faculty in 2021-22 than five years earlier, while Asian, nonresident alien and multiracial faculty gained more representation.



Notes: Percentages may not total 100% because of rounding. Dental school faculty includes full- and part-time faculty at accredited dental schools in the United States. Historically Under-represented Race and Ethnicity (HURE) faculty includes the following four race and ethnicity categories: non-Hispanic American Indian or Alaska Native, non-Hispanic African American, Hispanic or Latino of all races, and non-Hispanic Native Hawaiian or Other Pacific Islander. These four race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions. The HURE definition is based on the parity gap between the share of the U.S. population and the share of professionally active dentists for each of the race and ethnicity categories defined by the U.S. Department of Education for reporting data from higher education institutions. Dental schools report the legal status and the race and ethnicity data for faculty members to ADEA, based on what the faculty provide them for the school's administrative records. ADEA does not collect the data directly from the faculty members. Only dental schools that reported race and ethnicity data for at least one faculty member are included in this analysis. Schools that reported "do not wish to report or unknown" for legal status and/or race and ethnicity faculty member are excluded from this analysis. 59 dental schools provided ADEA data on their faculty race and ethnicity information in 2017-18 and 52 schools did so in 2021-22, respectively. Sources: Analysis of American Dental Education Association Survey of U.S. Dental School Faculty, 2017-18 and ADEA Faculty Census, 2021-22.

# Diversity in Allied Dental Program Faculty

Between 2017-18 and 2021-22, the proportion of historically underrepresented racial and ethnic (HURE) faculty members in accredited allied dental education programs increased slightly. This increase was driven by a higher percentage of Hispanic or Latino faculty and, to a lesser extent, African American and Native Hawaiian or Other Pacific faculty. Overall, white faculty represented fewer of the U.S. allied dental education program faculty in 2021-22 than five years earlier, while Asian and multiracial faculty gained more representation.



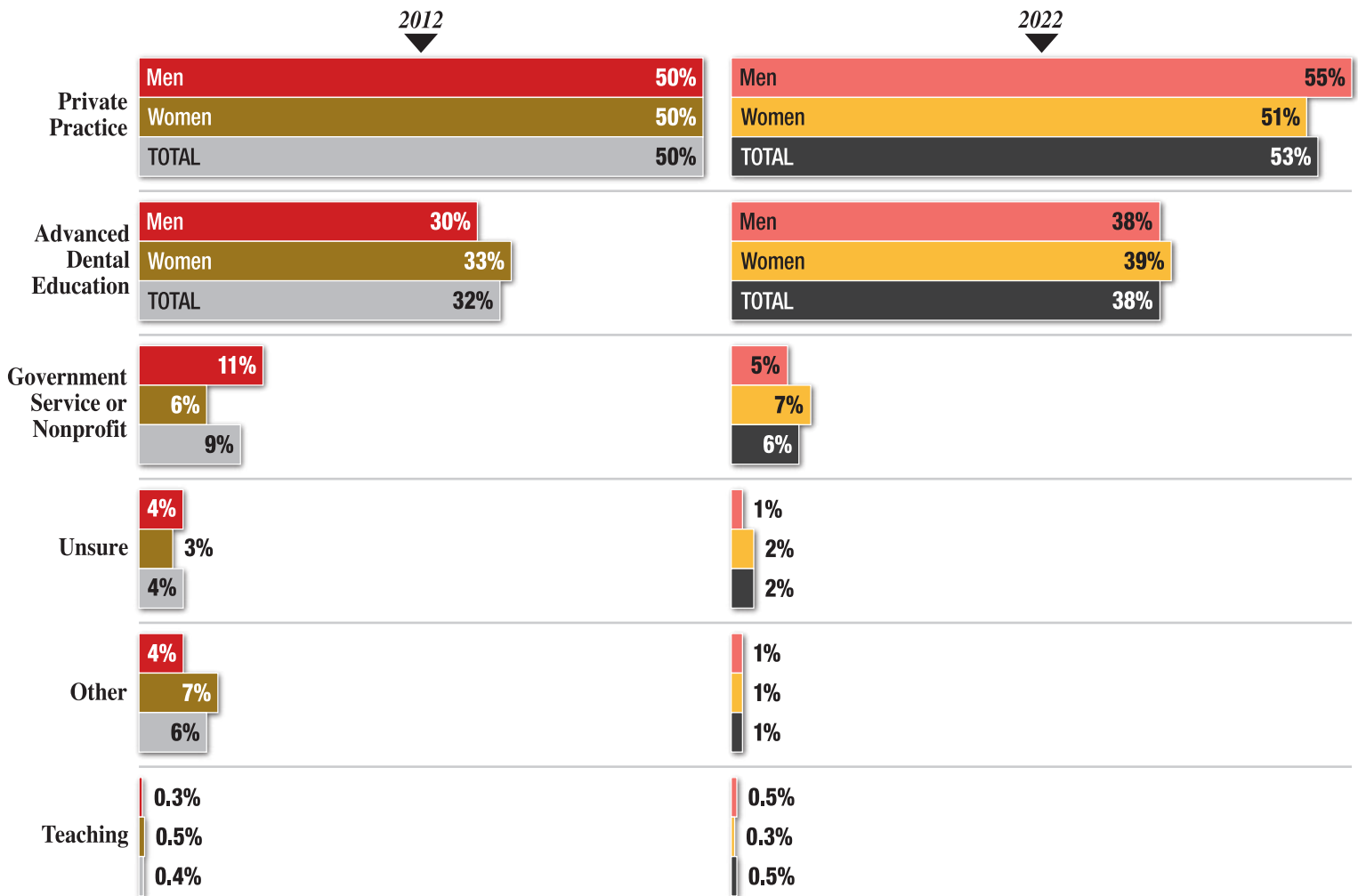
Notes: Percentages may not total 100% because of rounding. Historically Underrepresented Race and Ethnicity (HURE) faculty includes the following four race and ethnicity categories: non-Hispanic American Indian or Alaska Native, non-Hispanic African American, Hispanic or Latino of all races, and non-Hispanic Native Hawaiian or Other Pacific Islander. These four race and ethnicity categories are defined by the U.S. Department of Education for reporting data from higher education institutions. The HURE definition is based on the parity gap between the share among the U.S. population and the share among professionally active dentists for each of the race and ethnicity categories defined by the U.S. Department of Education for reporting data from higher education institutions.

Sources: ADEA analysis of American Dental Association, Health Policy Institute, Surveys of Dental Hygiene Education Programs, Surveys of Dental Assisting Education Programs, Surveys of Dental Laboratory Technology Education Programs, 2017-18 and 2021-22.

# Predoctoral Dental Students' Immediate Professional Plans Upon Graduation

Slightly over half of dental school seniors responding to the ADEA Senior Survey in 2022 planned to join a private practice and 38% applied to continue their studies. In both cases, it's more than what their 2012 counterparts stated as professional plans. In 2022, more women than men predoctoral seniors who responded to the ADEA Senior Survey planned to pursue advanced education, consistent with 2012 respondents' preferences.

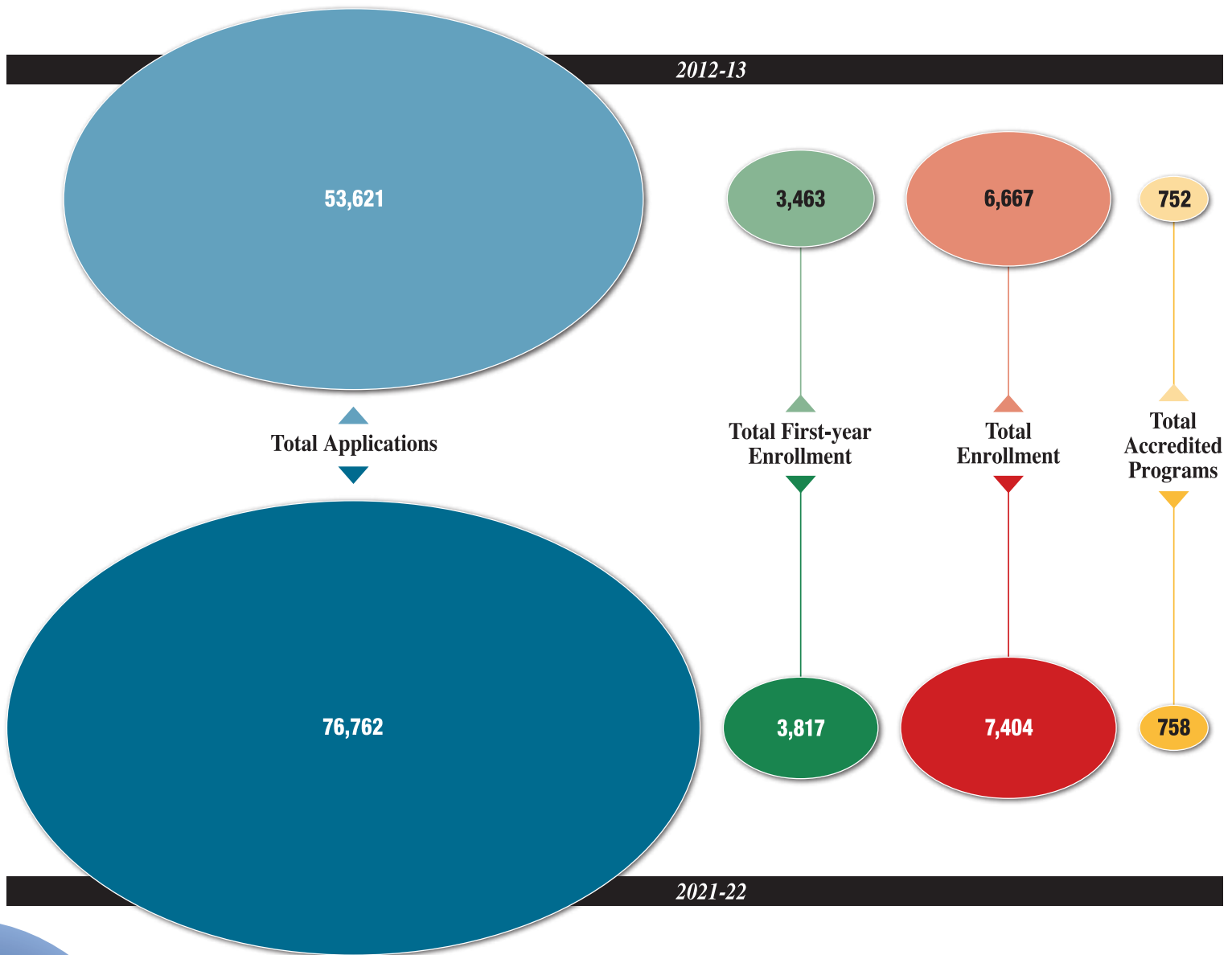
Percentage of Survey Respondents by Immediate Professional Plans Upon Graduation, 2012 and 2022



Notes: Percentages may not total 100% due to rounding. The total number of respondents to the ADEA survey who provided information about their immediate plans after graduation was 3,849 in 2012 (2,013 men and 1,833 women) and 2,853 in 2022 (1,179 men and 1,542 women). The difference is represented by senior students who identify with other genders or did not wish to report their gender identity. The "Other" category includes working in another position related to dentistry, but not those mentioned in the survey, and working in a position not related to dentistry. The 2012 ADEA survey did not ask about plans to practice dentistry in a nonprofit setting upon graduation.

Sources: American Dental Education Association Surveys of Dental School Seniors, Classes of 2012 and 2022.

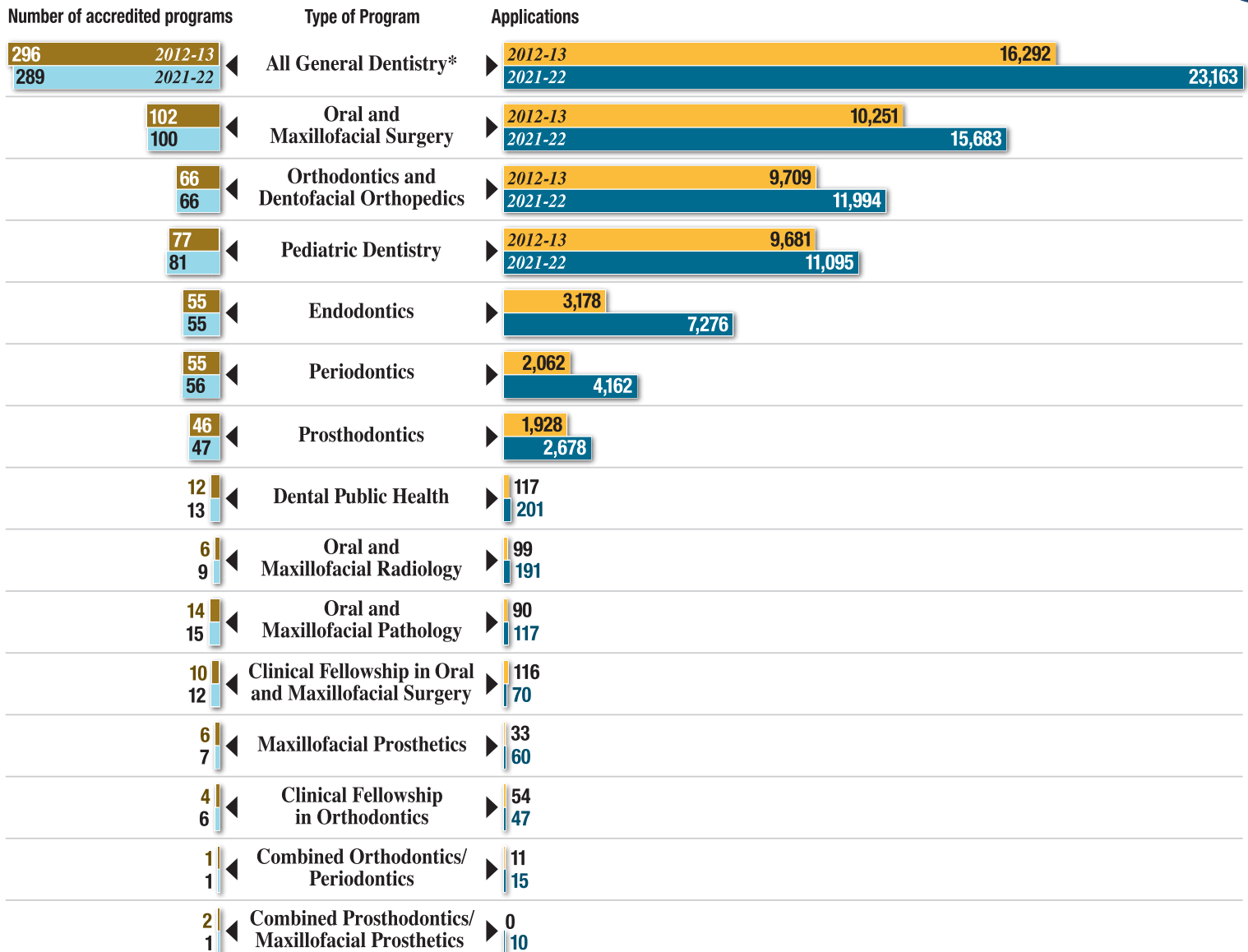
# Overview of Applications to and Enrollments in Accredited Advanced Education Programs



Note: The number of programs reflects the number of accredited advanced dental education programs in operation in the specified academic year.  
 Source: American Dental Association, Health Policy Institute, 2012-13 and 2021-2022 Surveys of Advanced Dental Education.

# Applications to Accredited Advanced Dental Education

Overall, between the 2012-13 and 2021-22 academic years, the number of applications to the majority of accredited advanced dental education programs have increased. Applications to Clinical Fellowships in Oral and Maxillofacial Surgery and in Orthodontics have declined.

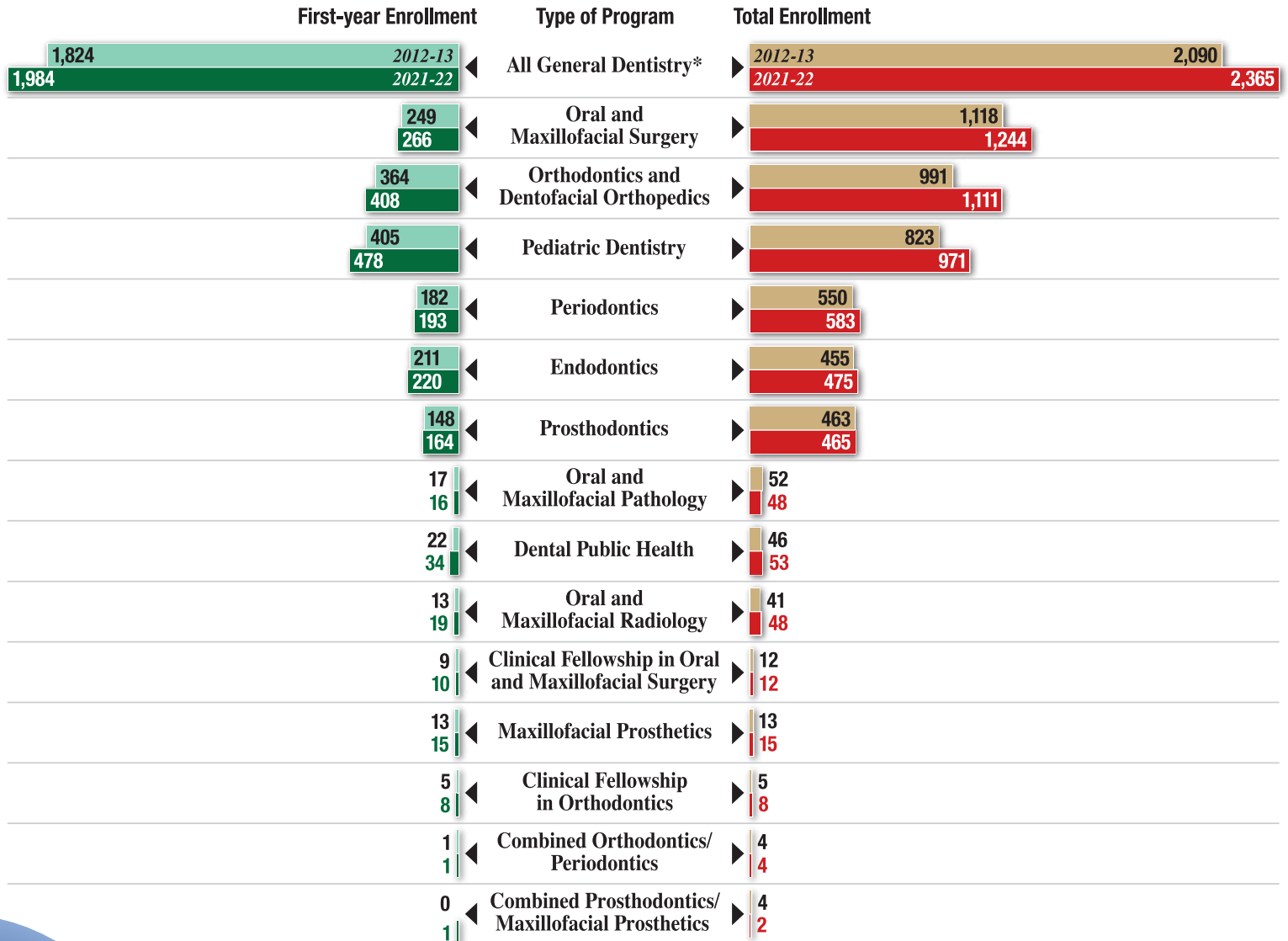


Notes: All General Dentistry includes General Practice Residency, Advanced Education in General Dentistry, Dental Anesthesiology, Orofacial Pain, and Oral Medicine. Application figures represent the total number of applications examined by all programs, and counts applicants more than once if they applied to multiple programs. The number of programs reflects the number of accredited advanced dental education programs in operation in the specified academic year.

Source: American Dental Association, Health Policy Institute, 2012-13 and 2021-22 Surveys of Advanced Dental Education.

# First-year Enrollment in Accredited Advanced Dental Education

Overall, between the 2012-13 and 2021-22 academic years, first-year enrollment and total enrollment in the majority of advanced dental education programs, with the exception of Oral and Maxillofacial Pathology, have increased as more dental school graduates pursue advanced dental education.



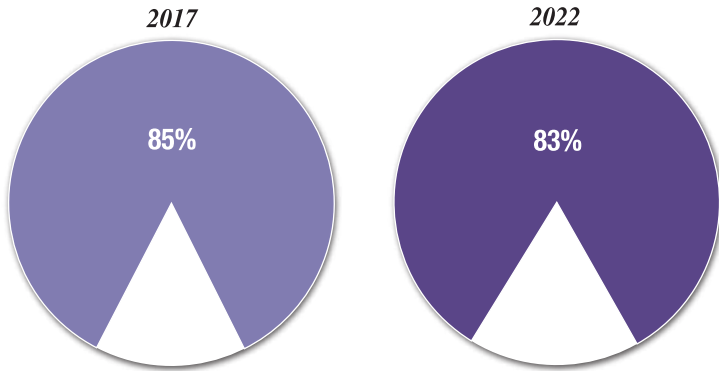
Notes: All General Dentistry includes General Practice Residency, Advanced Education in General Dentistry, Dental Anesthesiology, Orofacial Pain, and Oral Medicine. The number of programs reflects the number of accredited advanced dental education programs in operation in the specified academic year.

Source: American Dental Association, Health Policy Institute, 2012-13 and 2021-2022 Dental Education.

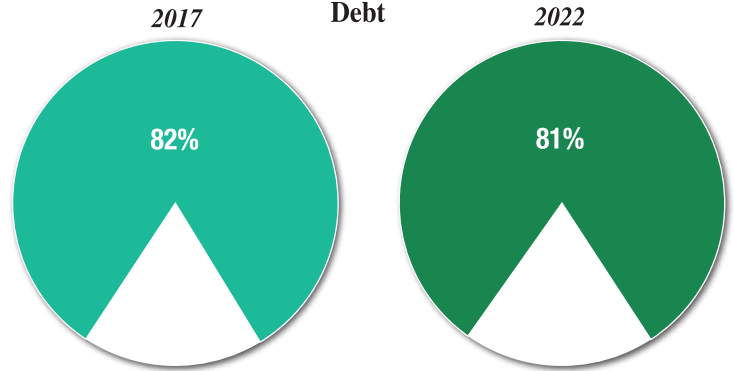
# A Look at Education Debt



Percentage of Respondents Graduating With Education Debt



Percentage of Respondents Graduating With Dental Education Debt



Average Education Debt and Average Dental School Debt, 2017 to 2022 for ADEA Senior Survey Respondents, in 2022 Dollars



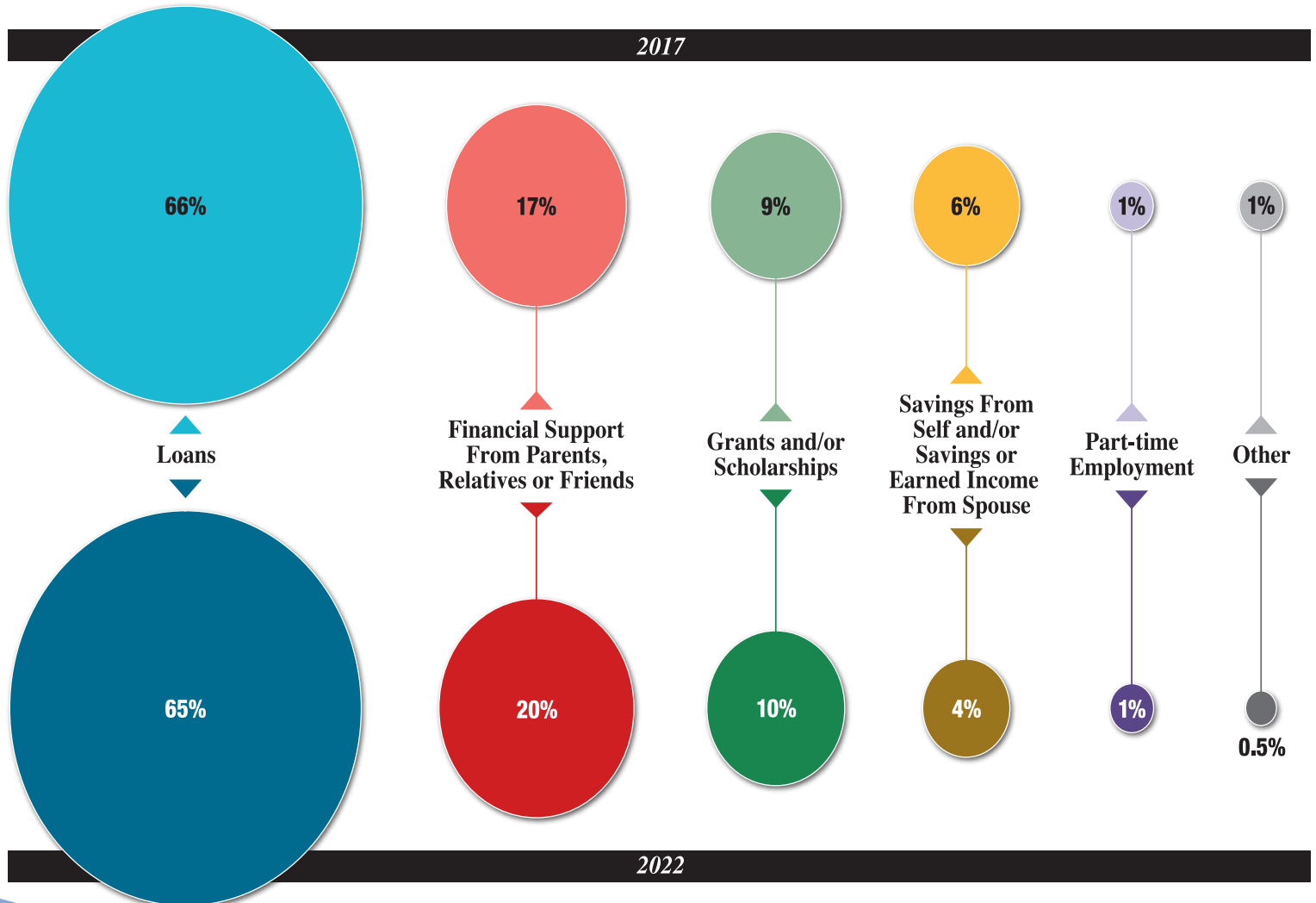
Notes: The number of respondents expecting to graduate with dental school debt was 2,376 in 2022 and 4,097 in 2017. The response rates for this survey question vary between 35% in 2020 and 75% in 2017. A response rate reflects the number of respondents for the debt question relative to the senior student 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 of the cost of the predoctoral degree) and their predental education debt, which is the outstanding education debt the senior students had when they entered dental school. Debt values are adjusted to 2022 dollars with the U.S. Bureau of Labor Statistics Consumer Price Index for all urban consumers.

Sources: American Dental Education Association. Survey of Dental School Seniors, Classes of 2017 to 2022.

# How Are Students Paying for Dental School?

The senior predoctoral students of the Class of 2022 responding to the ADEA survey are funding their dental education with loans and using grants and scholarships at about the same rate as the Class of 2017 respondents to the ADEA Senior Survey. Federal loans remain the top source of debt for financing dental school.

**Funding Sources for Dental Doctoral Education, Average of the Percentage of Each Funding Source as Stated by ADEA Survey Respondents, 2017 and 2022**



Notes: Percentages may add up to more than 100% due to rounding. The number of respondents to this question was 2,871 in 2022 and 4,882 in 2017. Sources: American Dental Education Association. Surveys of Dental School Seniors, Classes of 2017 and 2022.



# Dentistry: A Rewarding Career

There's a reason the dental professions have consistently ranked at or near the top of the U.S. News & World Report 100 Best Jobs list for the past several years.

Dental careers offer:



Professional autonomy



Flexible work hours



Financial and job security



Opportunities to work as part of a health care team

The U.S. Bureau of Labor Statistics predicts:



Employment growth of 6%, equating to 8,400 new dentist jobs through the year 2031

Employment of dental hygienists is projected to grow 9% from 2021 to 2031, faster than the average for all occupations

U.S. News & World Report 2023 Best Jobs:



Dentist is #4 in Best Healthcare Jobs

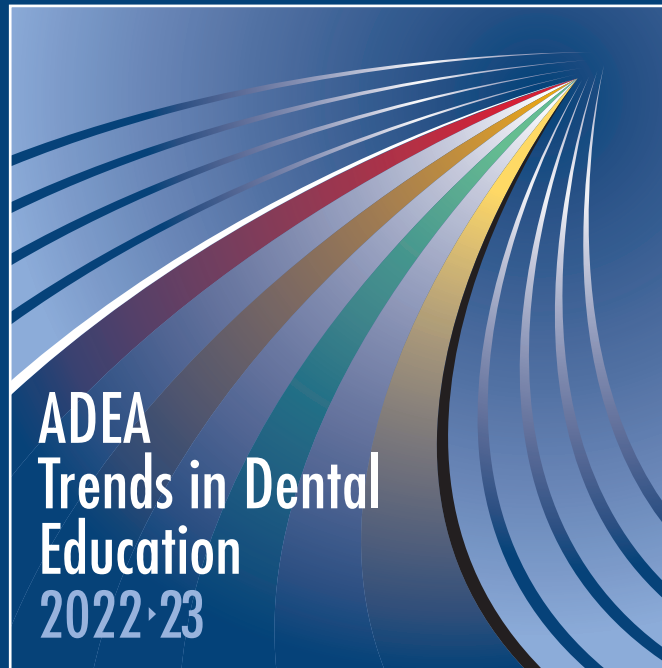


Dental Hygienists #2 in Best Healthcare Support Jobs

**Best of all: Dentists make a difference in the lives of their patients and in their communities.**

Sources: U.S. News & World Report. 100 Best Jobs. Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, Dentists and Dental Hygienists. Data as of May 2023.

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