



American Dental Association
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2005 Public Opinion Survey Oral Health of the US Population

CONSUMERS

Reports the most up-to-date information on the oral health of the US population. Topics include oral hygiene habits and dentist visits, use and knowledge of amalgam, teeth whitening, knowledge of specialty areas in dentistry, and sources of oral health information as reported by consumers.

June 2006





American
Dental
Association

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Survey Center

2005 Public Opinion Survey

Oral Health of the US Population

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ISBN 1-60122-004-9

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INTRODUCTION

The American Dental Association's (ADA) Division of Communications' Department of Public Information and Education along with the Survey Center have periodically surveyed consumers regarding a range of issues relevant to the dental profession. The ADA's Survey Center contracted with International Communications Research to conduct the 2005 *Public Opinion Survey* using an omnibus type survey format. Information was gathered over six months to gauge the opinions and experiences of adults in the United States about dental health care. Each month's questions covered a different topic including: oral hygiene habits and visits to the dentist, use and knowledge of amalgams, teeth whitening and bleaching, ADA Seal of Acceptance, knowledge of specialty areas in dental practice, and use of iPods/MP3s for podcasts. The information gathered from the 2005 *Public Opinion Survey* is reported in two volumes. Information on oral hygiene habits and dental visits, use and knowledge of amalgams, teeth whitening and bleaching, knowledge of dental specialty areas, and sources of dental health information (including podcasts and visits to Web sites), in the *Oral Health of the US Population* volume¹. The other title in the series is: *ADA Seal of Acceptance*.

METHODOLOGY

The 2005 *Public Opinion Survey* was conducted during six months between June and November 2005. Results are based on telephone interviews with a nationally representative sample of over 1,000 adults with 50% men and 50% women. International Communications Research uses a fully-replicated, stratified, single-stage random-digit-dialing sample of telephone households. One adult respondent is randomly chosen to be surveyed from each household using a computerized procedure based on the "Most Recent Birthday Method". All surveys also contain a set of demographic questions including gender, age, race, household income, education level, etc.

Results are weighted to provide nationally representative estimates of the U.S. population age 18 and greater. The weighting process takes into account the disproportionate probabilities of household selection due to the number of separate telephone lines and the probability associated with the random selection of an individual household member. It also adjusts for key demographics such as age, sex, region, and education.

Because this is a sample, and not an actual population, an associated margin of error applies. At a 95% level of confidence, the margin of error for this sample of 1,011 is +/- 3.1%. This essentially means that we can be 95% certain that, for any percentage result for the total sample, the "true" percentage is within 3.1 percentage points of that which is actually reported.

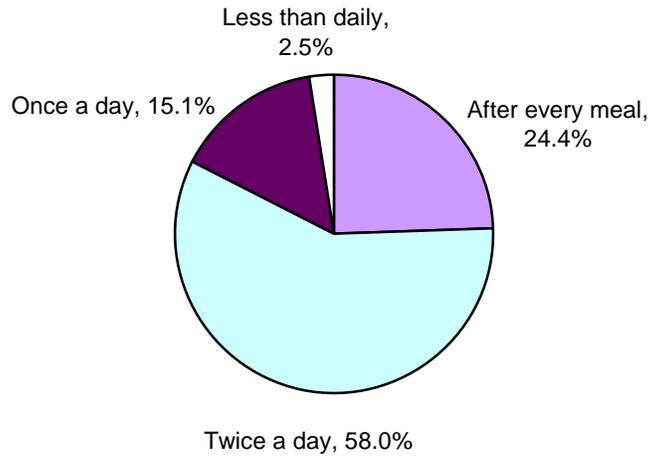
The purpose of this survey data is descriptive. Unless otherwise noted, differences between subgroups of survey respondents should not be assumed to be statistically significant.

¹ Previous year's *Public Opinion Survey* report are available for purchase from ADA Catalog Service by calling (800) 947-4746 or visiting online at <http://www.adacatalog.org>.

DENTAL HABITS AND VISITS TO THE DENTIST

The first section of this report examines the questions that were asked of respondents in June 2005 which relate to dental habits and most recent dental visits. Respondents were asked the frequency with which they brush their teeth and clean their teeth using dental floss or interdental cleaners. As seen in Figure 1, 24.4% of respondents reported that they brush their teeth after every meal and another 58.0% brush their teeth at twice a day.

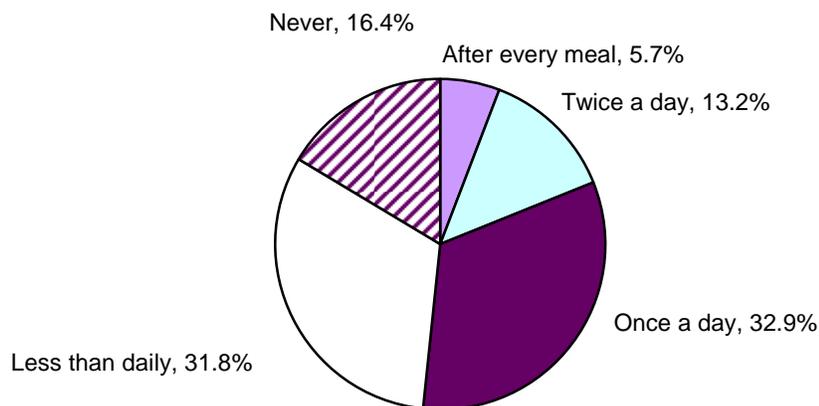
Figure 1: Frequency with Which Respondents Brush Their Teeth



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Figure 2 gives information on the flossing habits of respondents. About one-third of respondents (32.9%) reported that they use dental floss or interdental cleaners once a day and 18.9% floss more often than once a day.

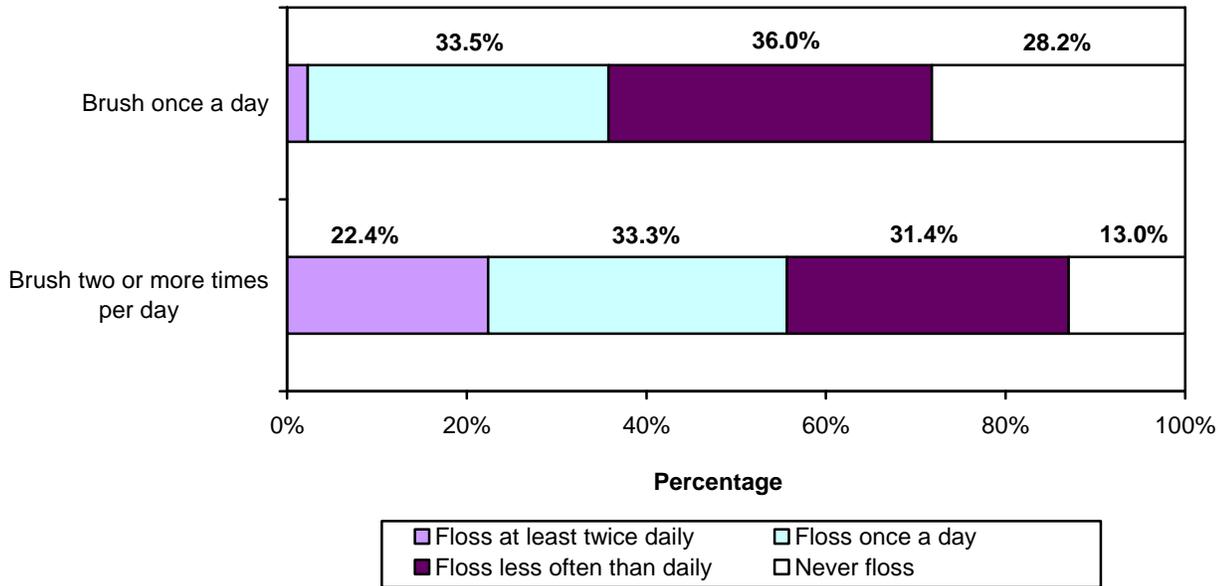
Figure 2: Frequency with Which Respondents Use Dental Floss or Interdental Cleaners



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Frequency of flossing is compared between respondents who brush daily and those who brush two or more times per day (see Figure 3). Of respondents who brush their teeth more than once a day: 55.7% floss at least once a day while 13.0% never floss their teeth. Of respondents who brush their teeth once a day: 35.8% floss at least once a day while 28.2% reported that they never floss their teeth. Too few respondents brush their teeth less than once a day to report their flossing habits.

Figure 3: Frequency with Which Respondents Use Dental Floss, by Frequency of Teeth Brushing



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Some notable differences were seen among different groups' brushing and flossing habits. Women were more likely than men to brush two or more times per day (women: 89.0%, men: 75.3%) and they were more likely to floss their teeth one or more times per day (women: 57.0%, men: 46.1%). Only 71.1% of respondents in the North Central region of the U.S. reported that they brush their teeth two or more times per day. Respondents who were at least 65 years old, who did not have a high school degree, and those who had a household income under \$25,000 were less likely than other groups to brush their teeth two or more times per. Nearly all respondents (96.8%) of Hispanic origin reported that they brush their teeth two or more times per day.

Table 1: Frequency with Which Respondents Brush Their Teeth and Use Dental Floss

	Brush teeth at least twice daily		Floss teeth at least once daily	
	Number ²	Percent	Number	Percent
All Respondents	818	82.4%	539	51.8%
Gender				
Male	373	75.3	244	46.1
Female	445	89.0	295	57.0
Region³				
North East	175	86.4	114	50.3
North Central	185	71.1	130	48.8
South	283	84.7	182	53.6
West	175	86.7	113	53.1
Metropolitan area ⁴	601	83.1	406	53.0
Non-metropolitan area	217	79.4	133	46.2
Children in household				
Children present	296	88.2	175	49.4
No children present	516	78.8	359	53.5
Education				
Less than high school	62	75.1	36	40.9
High school graduate	240	80.6	155	51.1
Some college	180	84.8	126	55.4
College graduate	318	90.5	212	57.3
Household Income				
Less than \$25,000	133	73.9	92	49.6
\$25,000 - \$74,999	334	82.5	200	49.0
\$75,000 or more	203	87.4	147	55.1
Race/Ethnicity				
Hispanic	40	96.8	23	-- ⁵
Non-Hispanic	773	80.4	514	50.4
White	659	79.3	442	50.6
African American	70	83.3	41	44.3
Age Group				
Under 30	127	86.5	68	46.8
30 – 49	308	88.1	184	51.6
50 – 64	243	78.8	183	58.2
65 or older	140	66.5	104	50.2

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

² Number of respondents who reported an answer.

³ The U.S. states are broken into four regions as follows:

North East: CT, ME, NH, RI, VT, MA, NJ, NY, PA

North Central: IL, IN, MI, OH, WI, IA, KS, MN, MO, ND, NE, SD

South: DE, MD, DC, FL, GA, NC, SC, VA, WV, AL, KY, MS, TN, AR, LA, OK, TX

West: AZ, CO, ID, MT, NB, NM, UT, WY, AK, CA, HI, OR, WA.

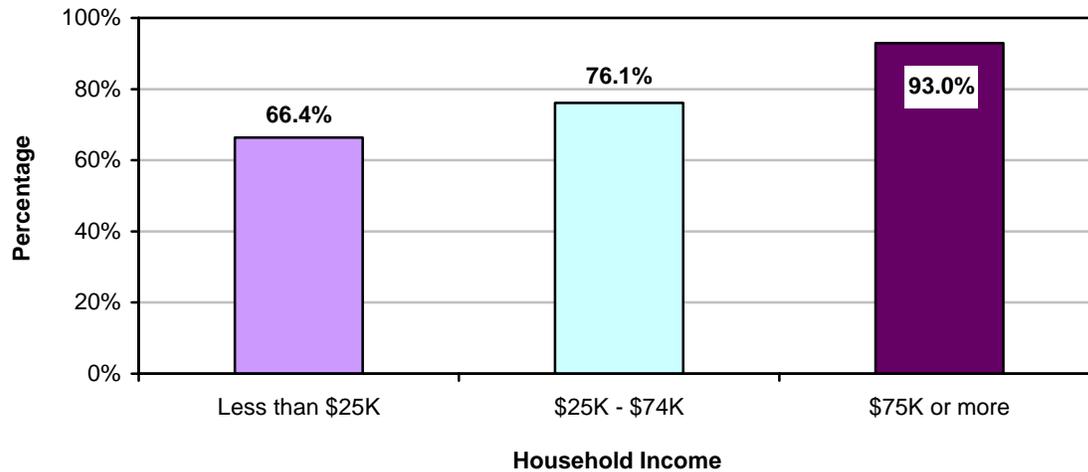
⁴ Metropolitan area includes those residing in center city of metro area, center city county of metro area, an MSA county, or a non-central city county of metro area.

⁵ This category had too few respondents to allow for reliable statistical analysis.

Respondents were asked to indicate whether or not they had a dentist at the time of the survey. More than three-fourths (78.7%) of respondents reported that they currently did have a dentist. Employed people were more likely than those unemployed to have a dentist (82.1% and 72.4% respectively). Nearly four-fifths of Whites (79.6%) reported that they currently have a dentist and 65.5% of Blacks currently have a dentist.

The percentage of respondents with a dentist also varies by household income. Figure 4 below indicates that the likelihood of having a dentist increases with household income. Nearly all respondents (93.0%) with a household income of \$75,000 or more have a dentist while 66.4% of those with a household income under \$25,000 have a dentist currently.

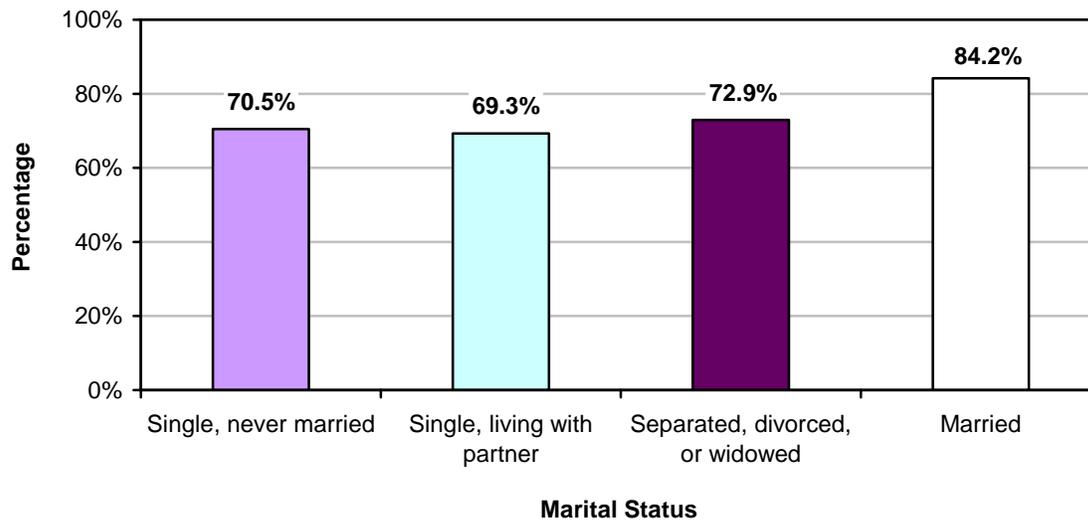
Figure 4: Percentage of Respondents Who Have a Dentist, by Household Income



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Married respondents are more likely than respondents who are single and respondents who are separated, divorced, or widowed to have a dentist. As many as 84.2% of married respondents reported that they currently have a dentist.

Figure 5: Percentage of Respondents Who Have a Dentist, by Marital Status

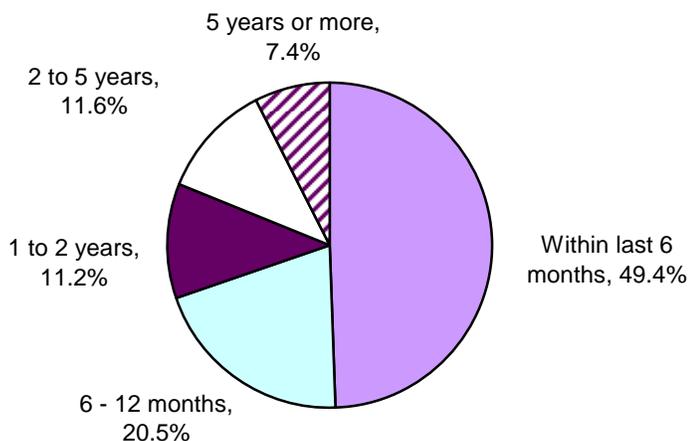


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Figure 6 displays the length of time since respondents last visited their dentist. While 49.4% of respondents last visited the dentist less than six months ago and another 20.5% last went within a year, 7.4% have not been to the dentist in the last five years.

Groups with the lowest percentage of respondents who last visited the dentist within six months include: respondents who rent their home (40.1% have been to the dentist in the last six months), respondents without a high school degree (38.7%), respondents with a household income under \$25,000 (37.7%) and Black respondents (33.4%).

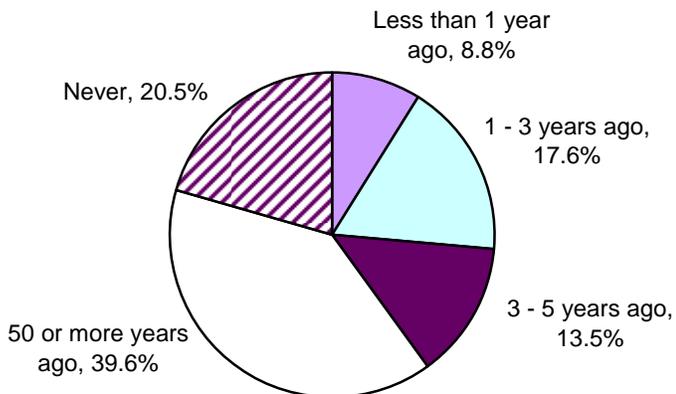
Figure 6: Length of Time Since Last Dental Visit



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

All respondents were asked when they last changed their dentist. As seen in Figure 7, about one-fifth of respondents (20.5%) reported that they have never changed dentists and another 39.6% have not changed dentists in the last five years. Respondents residing in the South region of the U.S. (24.8%), those in non-metropolitan locations (32.1%), those without a high school degree (37.4%), and respondents under age 30 (37.4%) were most likely to have never changed dentists before.

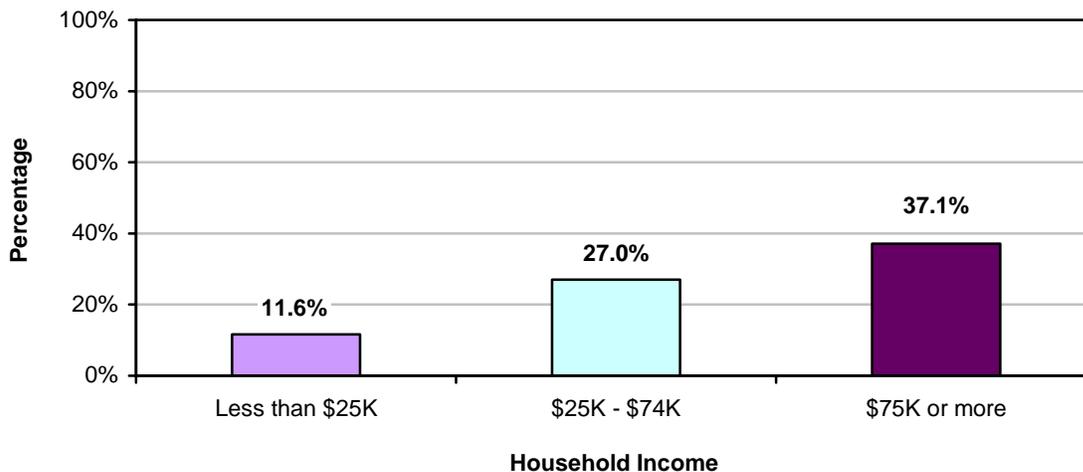
Figure 7: Length of Time Since Last Changed Dentists



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

About one-fourth of respondents (25.3%) reported that, to their knowledge, they were screened for oral cancer by their dentist in the past. Figure 8 shows the percentage of respondents who know that they have been screened for oral cancer by household income grouping. Respondents who had a household income of \$75,000 or more were about three times as likely as those with a household income under \$25,000 to believe that had been screened for oral cancer in the past.

Figure 8: Percentage of Respondents Believing They Were Screened for Oral Cancer, by Household Income



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Respondents in the North Central region of the U.S. (29.4%) were more likely than respondents in other regions to believe that they have been previously screened by their dentist for oral cancer. About one-fifth of respondents in the North East region (20.2%) reported that they thought they had been screened in the past. About three out of ten respondents who own their home (29.9%) reported that they thought they had been screened for oral cancer in the past while 14.1% of those renting thought that they had been screened.

AMALGAM

In July 2005, respondents were asked a series of questions concerning whether they had a cavity filled, the types of filling received, opinions and knowledge of dental fillings. About one-third of respondents (34.1%) indicated that they had a cavity filled within the last three years. Table 2 below shows the percentage of respondents who had a cavity filled by gender, region, education, household income, and age group.

Respondents who had a cavity filled in the last three years were also asked what type or color filling they received. Overall, 59.6% of respondents reported that they had received a tooth-colored filling while 35.0% received a silver-colored filling and fewer than 20 respondents received a gold-colored or other type of filling. The percentage of respondents who had received a tooth-colored filling is given in Table 2. Respondents in the South region of the U.S., respondents that did not have children in their household, and those age 65 or older were most likely to have received a tooth-colored filling.

Table 2: Respondents Who Had a Cavity Filled

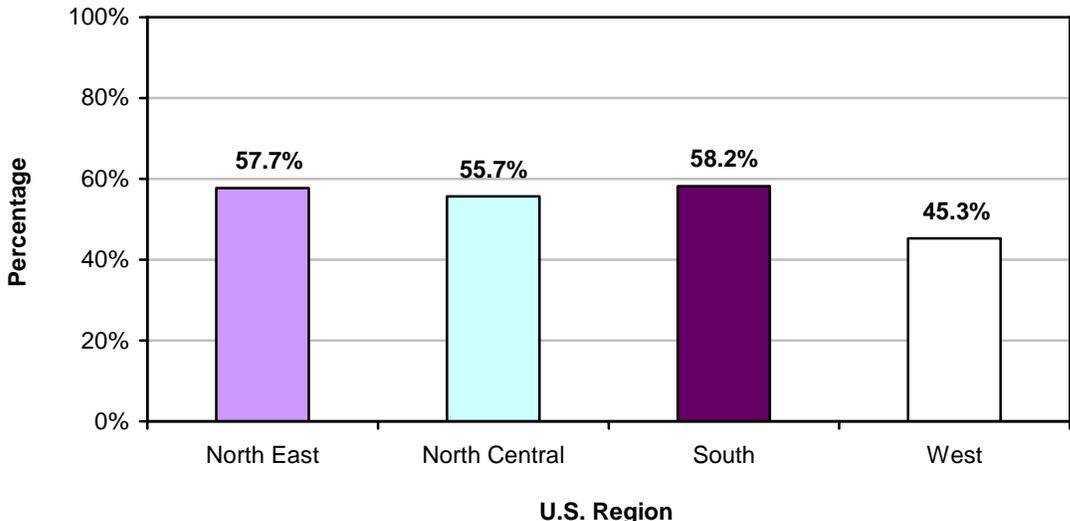
	Had a Cavity Filled		Received Tooth Colored Filling	
	Number	Percent	Number	Percent
All Respondents	362	34.1%	193	59.6%
Gender				
Male	185	35.6	100	60.6
Female	177	32.5	93	58.8
Region				
North East	79	34.5	39	63.3
North Central	83	33.6	45	51.0
South	122	32.0	67	67.4
West	78	37.8	42	53.9
Metropolitan area	287	35.2	161	62.7
Non-metropolitan area	75	29.0	32	40.7
Children in household				
Children present	115	39.4	50	49.4
No children present	245	31.0	143	68.5
Education				
Less than high school	13	-- ⁶	6	--
High school graduate	85	28.7	50	62.6
Some college	93	41.4	42	59.4
College graduate	158	40.3	86	58.1
Household Income				
Less than \$25,000	46	24.5	27	--
\$25,000 - \$74,999	167	37.6	82	55.4
\$75,000 or more	92	36.1	55	64.3
Age Group				
Under 30	56	44.1	27	--
30 – 49	120	31.5	61	58.5
50 – 64	102	30.1	57	53.8
65 or older	84	32.7	48	74.3

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

⁶ This category had too few respondents to allow for reliable statistical analysis.

More than one-half of respondents (54.2%) who had a cavity filled within the last three years were told by their dentist the various dental filling options available. As shown in Figure 9, 45.3% of respondents in the West region of the U.S. reported that their dentist discussed the various filling options with them. In metropolitan areas, 52.8% of respondents were told about the various dental filling options by their dentist while 62.6% of those residing in a non-metropolitan county were told about dental filling options.

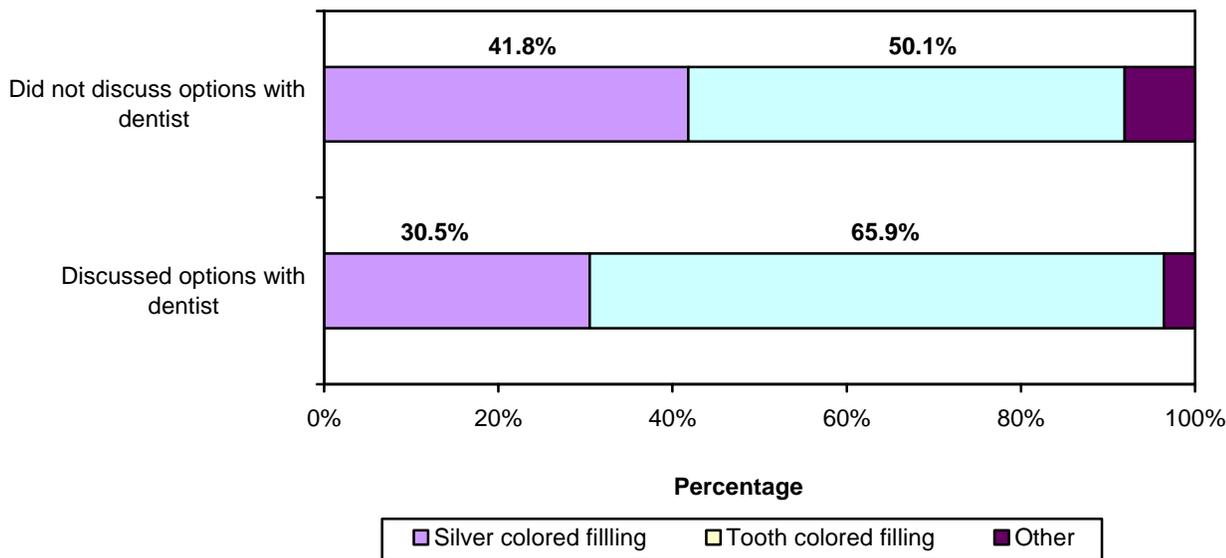
Figure 9: Percentage of Respondents Whose Dentist Discussed Various Filling Options, by U.S. Region



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Figure 10 shows the type of filling last received by respondents who discussed options with their dentist and those who did not discuss options with their dentist. Respondents whose dentist discussed the various dental filling options with them were more likely to have received a tooth-colored filling than were those whose dentist did not discuss options (65.9% and 50.1% respectively.)

Figure 10: Type of Filling Last Received

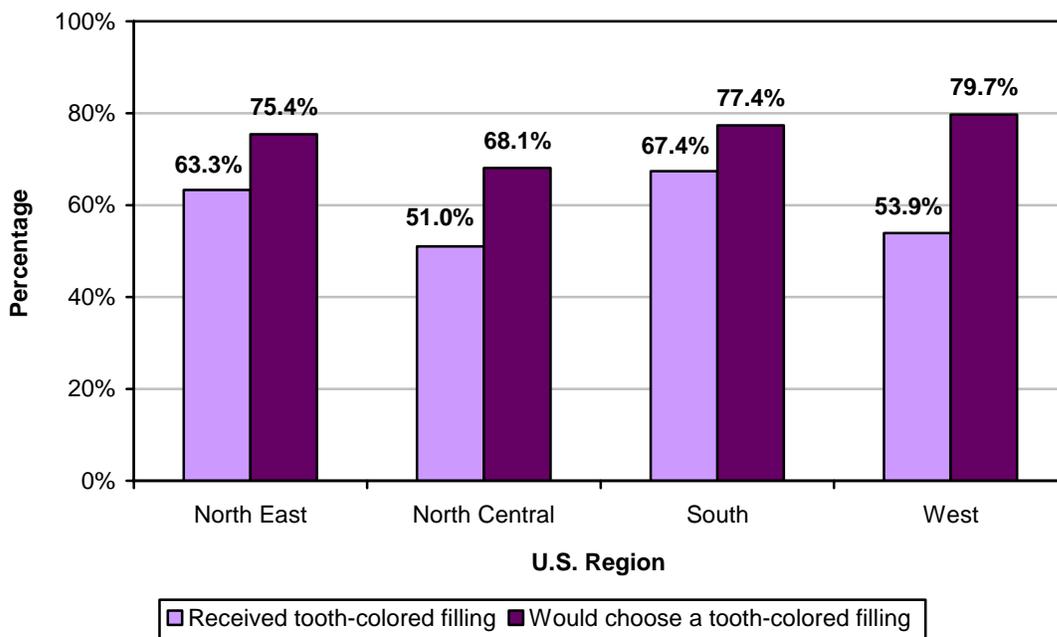


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

All respondents were asked what color or type of filling they would choose if they had to choose one color or type. While 59.6% of respondents who had a cavity filled in the last three years received a tooth-colored filling, 83.9% of those who had a cavity filled reported that they would choose tooth-colored filling if they had to choose one color to fill their cavities. Of respondents who did not have a cavity filled in the last three years, 71.7% reported that they would choose a tooth-colored filling.

Figure 11 shows the percentage of respondents who received a tooth-colored filling in the last three years compared with the percentage of respondents who would choose tooth-colored fillings if they had to choose one type. Those in the North Central were less likely than other groups to have received a tooth-colored filling or to desire one. Respondents in the West region of the U.S. were most likely to choose a tooth-colored filling but not very likely to have received one.

Figure 11: Percentage of Respondents Who Received a Tooth-Colored Filling and Respondents Who Would Choose a Tooth-Colored Filling, by U.S. Region

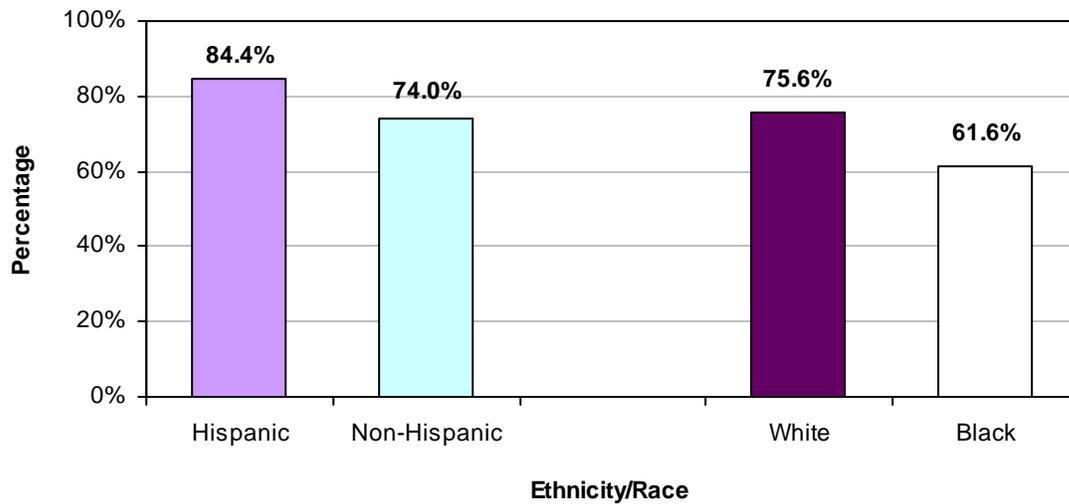


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Respondents without a high school degree and those with a household income level of less than \$25,000 were less likely than other respondents to report that they would choose a tooth-colored filling. When compared to other groups, about 15 to 20% fewer respondents with no high school degree or those with a household income under \$25,000 would select tooth-colored fillings given the choice. Females are more likely than males to choose tooth-colored fillings if they had to choose one color (79.7% and 70.6% respectively.)

As shown in Figure 12, 84.4% of Hispanics would choose tooth-colored fillings, while 75.6% of Whites and 61.6% of Blacks would choose tooth-colored fillings.

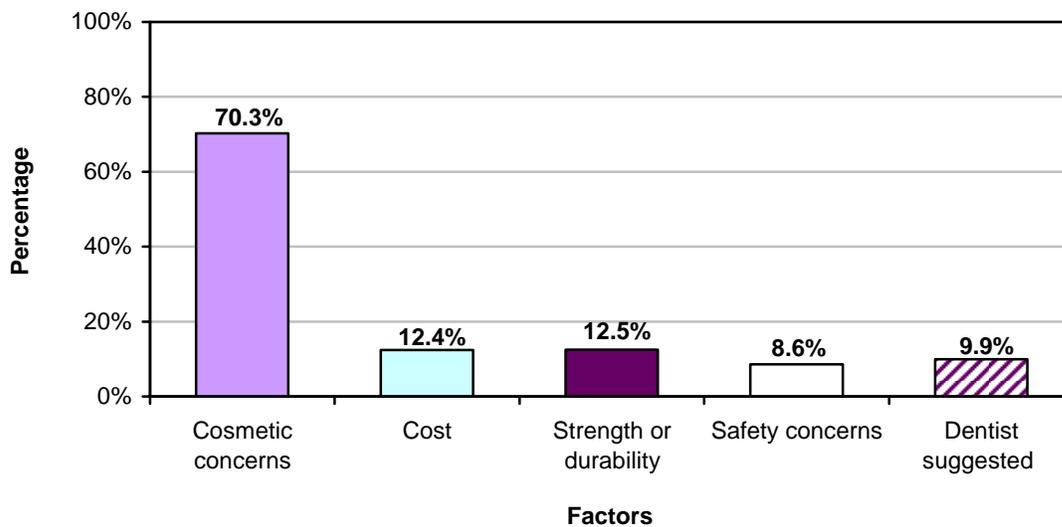
Figure 12: Percentage of Respondents Who Would Choose a Tooth-Colored Filling, by Race and Ethnicity



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Respondents were asked to report the factors that influence their decision regarding which color or type of dental filling to use in filling cavities. More than one factor could be reported by respondents. Results are shown in Figure 13. The majority of respondents (70.3%) cited cosmetic concerns as a factor that influences their decision regarding color or type of dental filling.

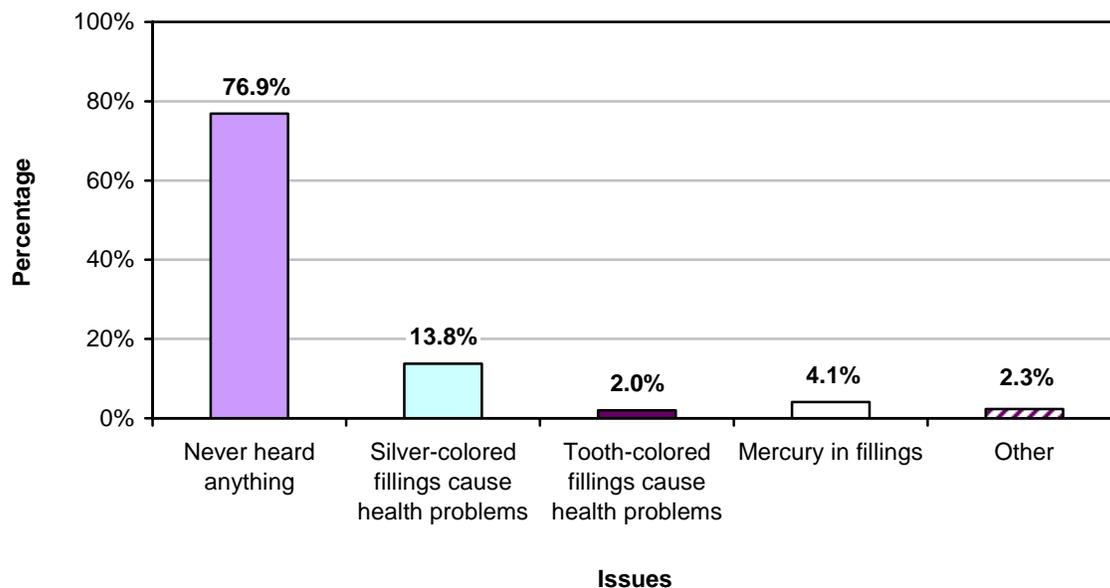
Figure 13: Factors Influencing Decision of What Color/Type Filling To Use



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

As shown in Figure 14 below, the majority of respondents (76.9%) had not heard of any possible health-related issues associated with dental fillings. Groups that were most likely to not have heard of any possible health-related issues associated with dental fillings include respondents in non-metropolitan areas (80.2%), respondents without a high school degree (85.9%), respondents with a household income under \$25,000 (88.2%), and Hispanics (85.3%). Familiarity of possible health-related issues in dental fillings is directly related to education level. Of those who have a college degree, 63.8% reported that they had never heard of such health-related issues.

Figure 14: Percentage of Respondents Who Heard About Possible Health-Related Issues Associated with Dental Fillings

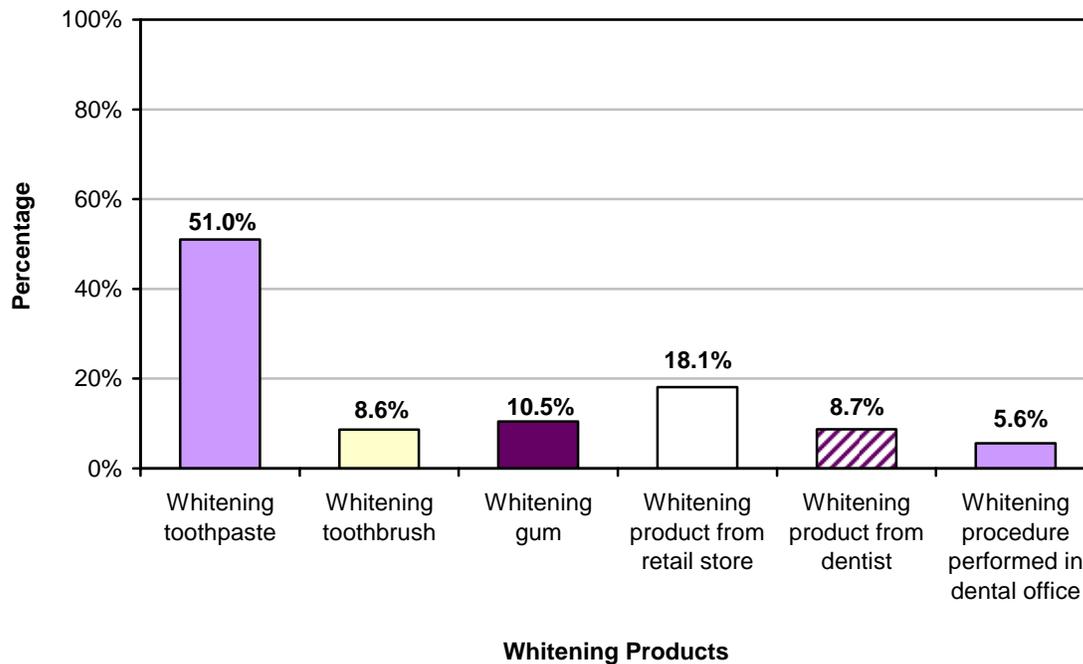


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

TOOTH WHITENING

Respondents were asked whether they have used any of the following products in the past six months: whitening toothpaste, a tooth-whitening toothbrush, tooth-whitening gum, tooth-whitening products or kits purchased from a retail store, tooth-whitening products or kits received from a dentist, and tooth whitening procedure performed in the dentist office. Figure 15 shows the response to this question. About one-half of respondents (51.0%) reported that they have used whitening toothpaste in the last six months.

Figure 15: Percentage of Respondents Who Used Teeth-Whitening Products

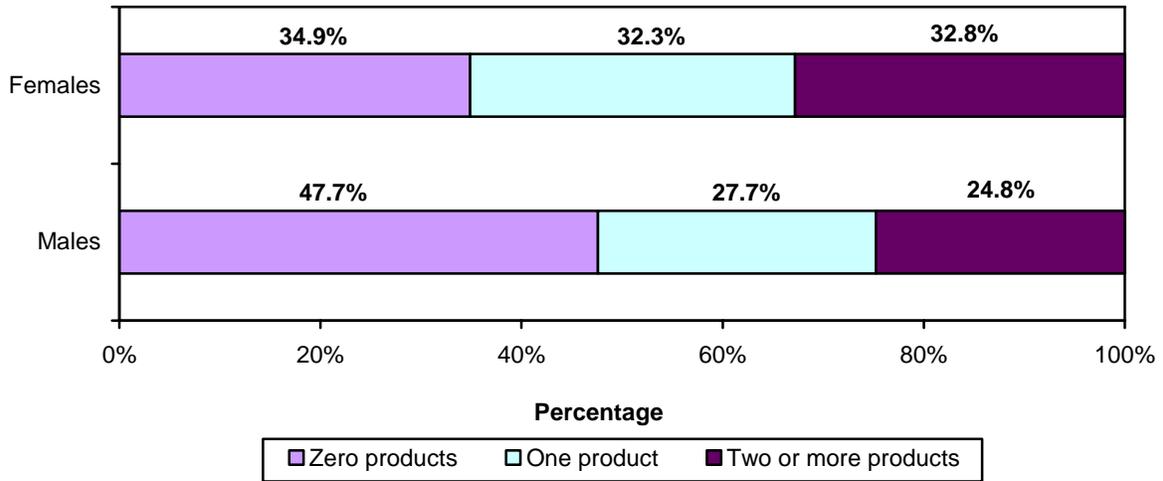


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

The majority of respondents who have used whitening toothpaste in the last six months used it at least once a day (85.6%). Of respondents who used a tooth-whitening toothbrush, 78.0% used it once a day or more often. On average, respondents who purchased whitening products or kits from a retail store purchased four products in the past six months. Those who have received whitening products from their dentist used an average of 2.4 products in the last six months. An average of 2.1 whitening procedures were performed in a dental office for respondents who have been to the dental office for whitening in the past six months.

The percentage of respondents who reported using no whitening products, one whitening product, or two or more whitening products in the past six months is shown by gender in Figure 16 and by age group in Figure 17. Of all respondents, 41.1% have not used any whitening product in the last six months (including whitening toothpaste, whitening toothbrush, whitening gum, whitening product/kit purchased from retail store or received from dentist, or whitening procedure performed in dental office.) Females were more likely than males to have used two or more whitening products in the last six months (32.8% versus 24.8% respectively).

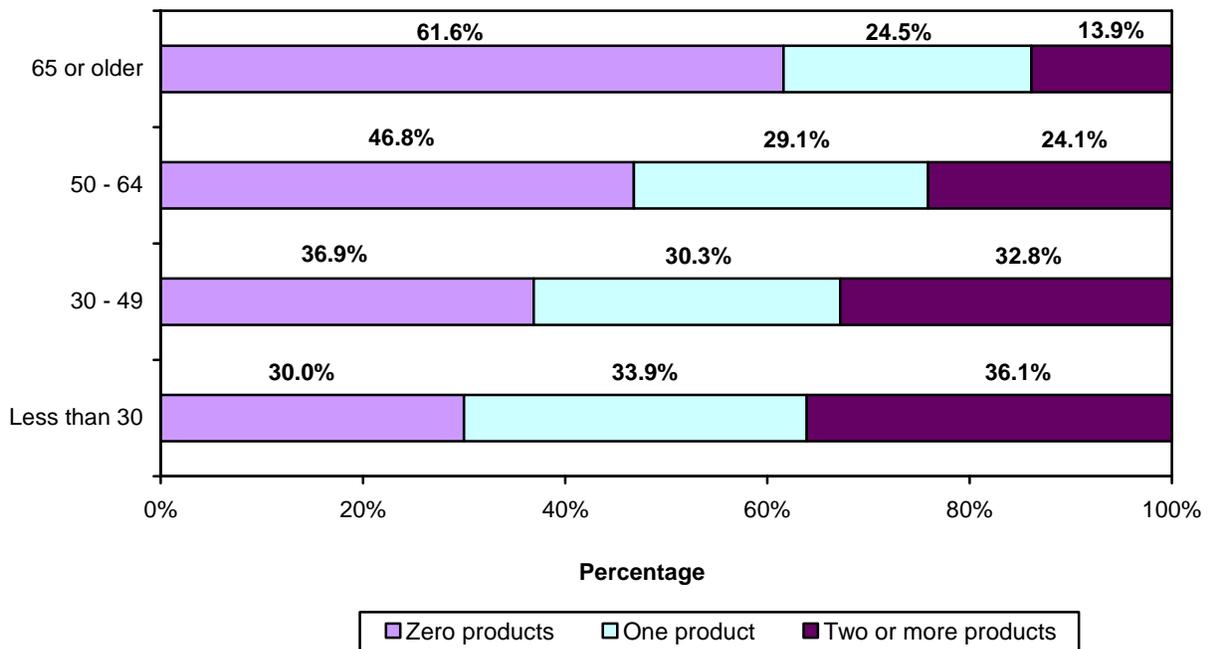
Figure 16: Number of Whitening Products Used, by Gender



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Usage of whitening products appears to decrease with age. Only 13.9% of respondents age 65 or older reported that they have tried two or more whitening products in the last six months while 70.0% of respondents under age 30 have tried at least two different types of whitening products.

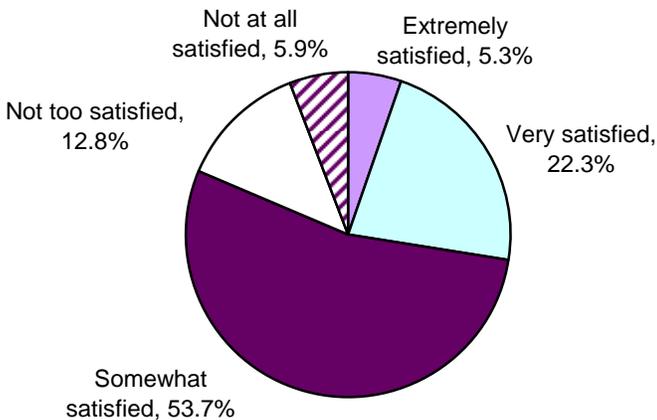
Figure 17: Number of Whitening Products Used, by Age Group



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

When asked whether they were satisfied with the results of the whitening, 27.6% of respondents reported that they were extremely satisfied or very satisfied with the whitening product they used. Another 53.7% of respondents were somewhat satisfied and 18.7% were not too satisfied or not at all satisfied.

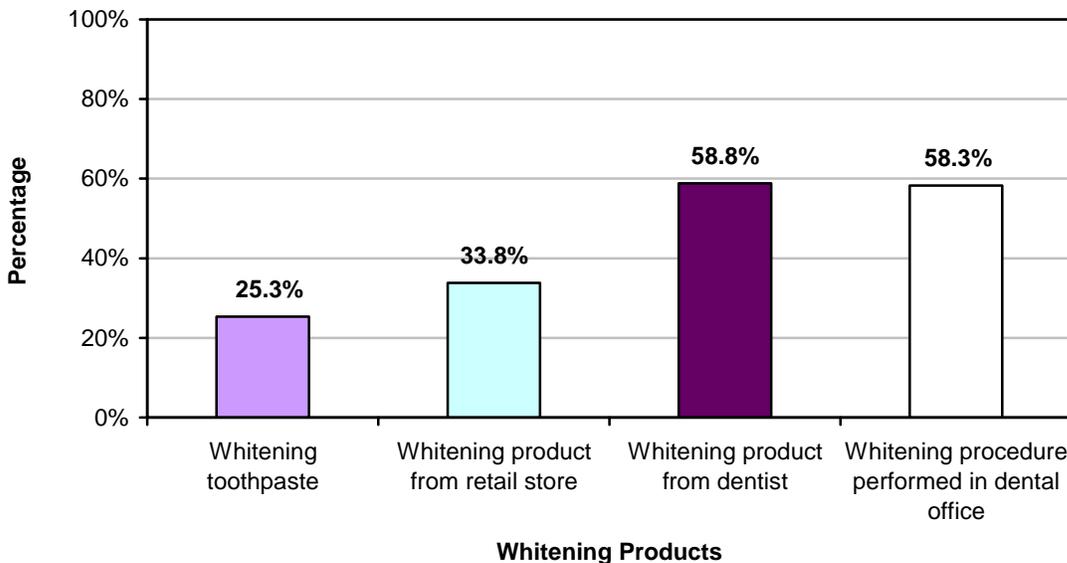
Figure 18: Percentage of Respondents Satisfied with Whitening Products



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Figure 19 shows the percentage of respondents who were extremely satisfied or very satisfied with the results of whitening by the type of whitening product used. Respondents who used whitening products that were purchased in retail stores were less satisfied than those who received whitening products or procedures from their dentist. Fewer than 30 respondents were extremely satisfied or very satisfied with the results of whitening toothbrushes or whitening gum.

Figure 19: Percentage of Respondents Extremely/Very Satisfied with Results of Whitening, by Type of Product Used

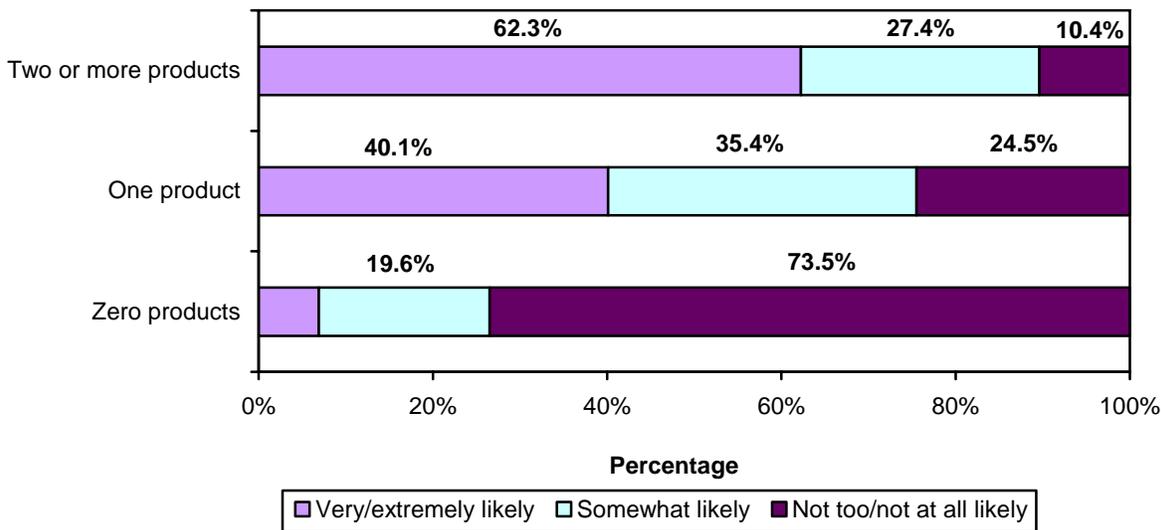


Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

About 18.5% of respondents who had received whitening products experienced discomfort or sensitivity with their teeth or gums. Of those who reported experiencing discomfort or sensitivity with their teeth or gums, 43.1% reported that the sensitivity lasted less than one day. Another 40.8% experienced sensitivity for one to several days.

All respondents were asked how likely it is that they would use a tooth whitening product in the future. About one-third of respondents (33.0%) were very likely or extremely likely to use a whitening product in the future. However, a greater percentage of respondents, 40.4%, were not too likely or not at all likely to use them in the future. The greater the number of whitening product respondents used in the last six months, the greater the likelihood that they would use a whitening product in the future. Figure 20 shows the likelihood of using a whitening product in the future by respondents who have used zero products, one product, or two or more products in the past. Fewer than 30 respondents who used no whitening products in the past reported that they were extremely likely or very likely to use a whitening product in the future.

Figure 20: Likelihood of Using Whitening Products in the Future by Number of Products Used in Past



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

RECOGNITION OF DENTAL SPECIALTY AREAS

In the October 2005 survey, respondents were asked if they know what specialty areas of dental practice (outside of general practice) are recognized by the ADA and if they know that a dentist that calls himself/herself a specialist must limit their practice exclusively to the specialty and have completed an accredited education program of at least two or more years beyond the dental degree.

Table 3 below shows the percentage of respondents who were aware that the ADA recognizes specialty areas of dental practice, the percentage who were aware that specialists are limited to practicing only in their area of specialty (the area in which they completed an accredited education program), and the percentage who have been referred to a dental specialist in the past.

Overall, 42.5% of respondents reported that they are aware that the ADA recognizes specialty areas of dental practice and 35.3% of respondents reported that they are aware of specialists training and practice requirements. About two-fifths of respondents (40.3%) had been referred to a dental specialist in the past. Females, respondents residing in a metropolitan region and those with household incomes of at least \$75,000 were most likely to report that they had been referred to a dental specialist.

Table 3: Percentage of Respondents Who Were Familiar with Dental Specialty Areas and Who Have Been Referred to a Dental Specialist

	Aware that ADA recognizes specialty areas of dental practice		Aware of specialists training/requirements		Been referred to a dental specialist	
	Number	Percent	Number	Percent	Number	Percent
All Respondents	472	42.5%	370	35.3%	428	40.3%
Gender						
Male	233	42.5	166	31.8	179	31.1
Female	239	42.5	204	38.5	249	48.8
Region						
North East	95	39.1	69	31.0	96	44.0
North Central	115	45.3	89	36.2	103	42.7
South	157	41.9	130	38.1	144	35.8
West	105	43.5	82	33.5	85	42.0
Metropolitan area	358	43.7	284	36.5	326	42.2
Non-metropolitan area	114	37.5	86	30.1	102	32.4
Household Income						
Less than \$25,000	79	34.0	79	35.4	71	32.2
\$25,000 - \$74,999	178	42.8	88	32.1	174	41.9
\$75,000 or more	140	59.2	138	39.2	107	48.0
Age Group						
Under 30	54	27.6	58	32.1	56	34.9
30 – 49	162	43.9	115	33.4	136	40.2
50 – 64	166	57.3	129	45.3	138	47.2
65 or older	90	38.7	68	29.3	98	38.2

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

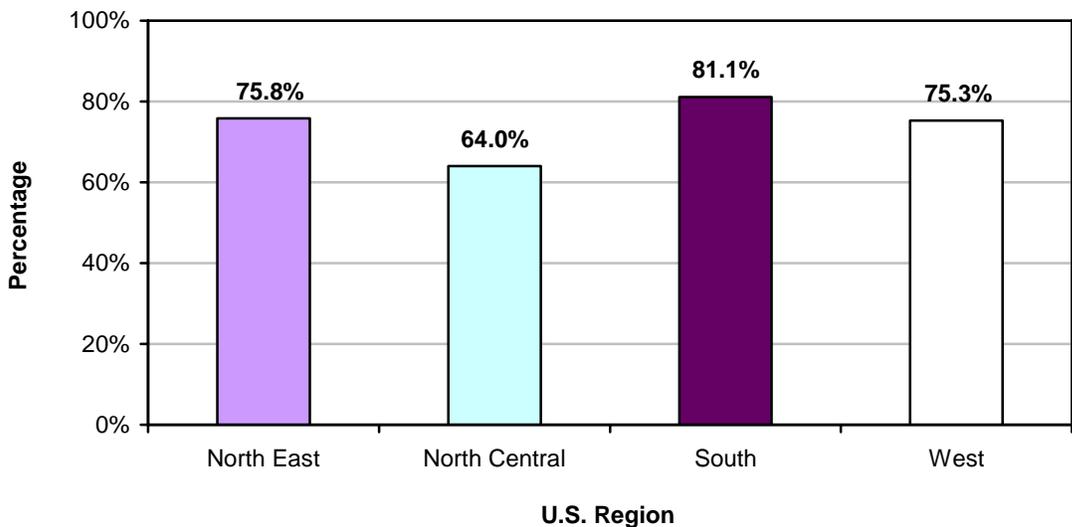
Of respondents who said they were aware that the ADA recognizes specialty areas of dental practice, 52.4% were also aware that specialists are limited to practicing in their area of specialty. Fewer than one-fourth of respondents (22.8%) who were not aware that the ADA recognizes specialty area knew that specialists are limited in their practice area.

Of the 40.3% respondents that reported that they had been referred to a specialist by their dentist, 43.0% were referred to an oral and maxillofacial surgeon and 18.3% were referred to an orthodontics and dentofacial orthopedist.

Respondents that had been referred to a dental specialist were asked if they felt that they were well informed about the qualifications and/or credentials of the dental specialist they saw. Overall, 74.4% of respondents felt that they were well informed of the credentials of their dental specialist. Respondents who saw an orthodontics and dentofacial orthopedist were more likely to be informed of the dentist's credentials than those who saw an oral and maxillofacial surgeon (83.9% and 68.7% respectively).

Knowledge of credentials also differed by U.S. region. Figure 21 shows the percentage of respondents from each U.S. region who felt that they were well informed about the qualifications and/or credentials of the dental specialist they saw. Respondents in the South region were most likely to feel informed of a dental specialist's credentials while those in the North Central region were least likely to feel informed.

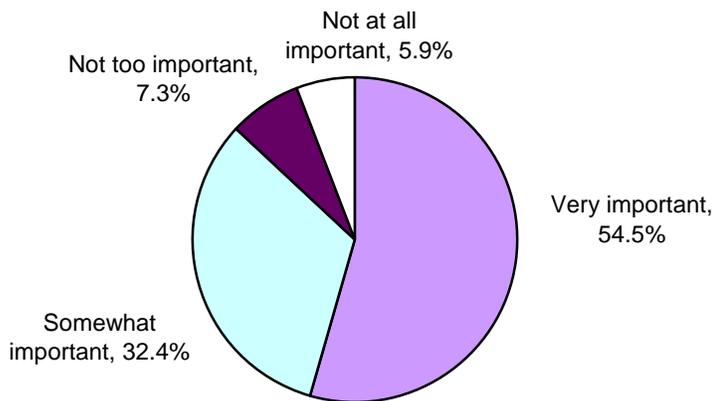
Figure 21: Percentage of Respondents with Knowledge of Dental Specialist's Credentials, by U.S. Region



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

More than half of respondents (54.5%) thought it was very important and 32.4% thought it was somewhat important for the ADA to recognize non-specialty interest areas in general dentistry (such as anesthesiology, oral medicine or implantology).

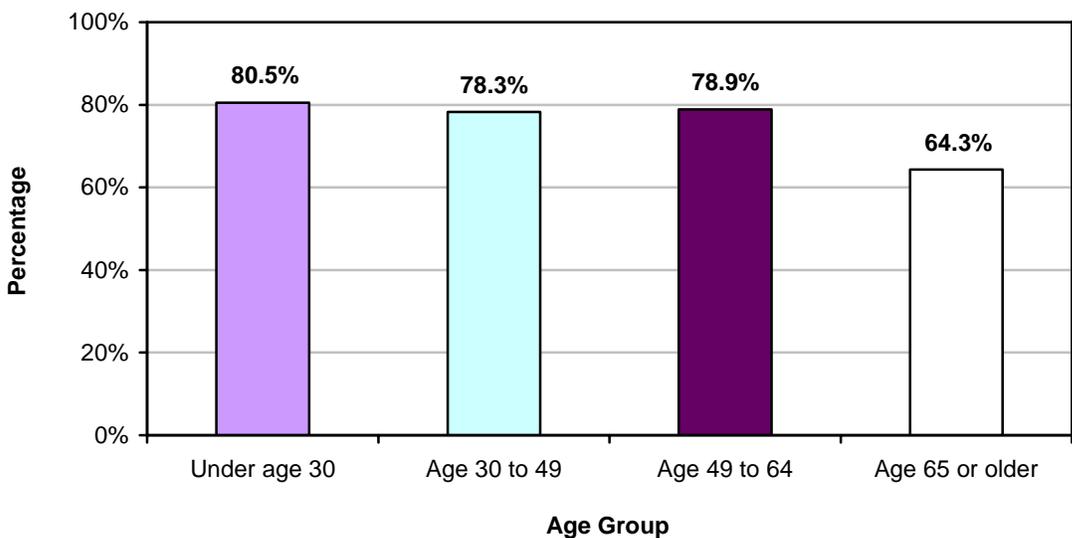
Figure 22: Percentage of Respondents Who Feel It Is Important for the ADA to Recognize Non-Specialty Interest Areas in General Dentistry



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Respondents were asked if the ADA did have a process to recognize non-specialty interest areas in general dentistry, would that help them to better identify the focus/emphasis of a general dentist's practice. Of all respondents, 77.1% thought that a process where the ADA recognizes non-specialty interest areas in general dentistry would help them better identify the focus of a dentist's practice. Figure 23 below shows the percentage of respondents by age group that feel recognition would help to identify the focus of a dentist's practice.

Figure 23: Percentage of Respondents Who Feel that ADA Recognition of Non-Specialty Interest Areas Would Help Them Better Identify a General Dentist's Focus/Emphasis, by Age Group



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

SOURCES OF INFORMATION ON ORAL HEALTH

Respondents were asked if they had to choose a new dentist, would the fact that the dentist was a member of the American Dental Association (ADA) make them more likely to select him or her, less likely to select him or her, or would it make no difference in the decision. As seen in Table 4, the fact that a dentist was a member of the ADA would make 51.2% of respondents more likely to choose that dentist and it would make no difference to 48.3% of respondents. Females, respondents in the South region, respondents residing in metropolitan locations, respondents with a college degree, and respondents age 50 to 64 years were more likely to place importance on ADA membership when choosing a new dentist.

Table 4: The Likelihood that ADA Membership Would Make a Difference in Choosing a New Dentist

	More Likely		No Difference	
	Number	Percent	Number	Percent
All Respondents	553	51.2%	437	48.3%
Gender				
Male	257	47.8	242	51.8
Female	296	54.4	195	45.1
Region				
North East	113	50.3	88	49.4
North Central	141	48.8	114	50.6
South	198	56.5	133	42.9
West	101	46.2	102	53.8
Metropolitan area	422	53.6	298	46.0
Non-metropolitan area	131	40.8	139	58.9
Education				
Less than high school	26	-- ⁷	60	72.3
High school graduate	150	46.9	157	53.0
Some college	125	56.4	94	43.2
College graduate	233	64.6	116	34.9
Age Group				
Under 30	74	42.7	75	57.3
30 – 49	208	55.5	144	43.8
50 – 64	185	61.3	112	38.3
65 or older	86	37.7	106	61.8

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

⁷ This category had too few respondents to allow for reliable statistical analysis.

Respondents were asked about their sources of information on dental health, issues, and problems. Table 5 shows that 40.4% of respondents got their dental health information from their dentist. About 14.4% of respondents do not use any source for information on dental health. Other sources of dental health information include schools, the American Dental Association, radio, flyers/pamphlets/brochures, dental hygienist, and word-of-mouth.

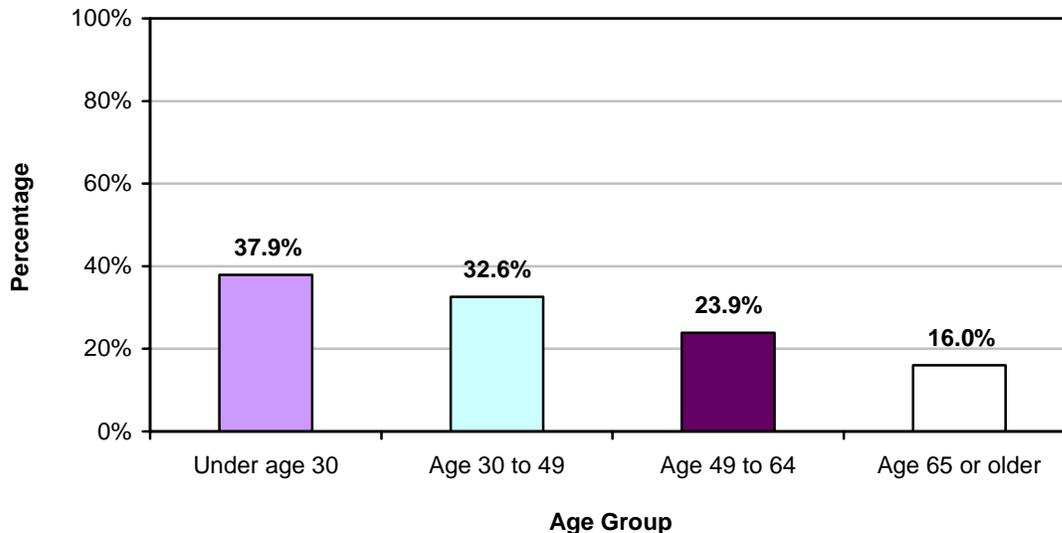
Table 5: Sources of Information on Dental Health

	Number	Percent
Dentist	426	40.4%
Television	85	8.3
Magazines	81	6.7
Family	44	5.4
World Wide Web/Internet	42	5.4
Friends	32	3.8
Newspapers	41	3.7
Other	116	12.1
None	104	14.4

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

In the November survey, respondents were asked how often they visited health-related Web sites in the past month, which Web sites they visited and which search engine is their first choice when searching for health information. About 29.3% of respondents reported that they have visited health-related Web sites in the past month. Younger respondents (37.9%), those with a college degree (41.7%), and respondents whose household income was at least \$75,000 (39.6%) were most likely to have visited a health-related Web site in the past month. The percentage of respondents who have visited a health-related Web site in the past month by age group is given in Figure 24 below.

Figure 24: Percentage of Respondents Who Have Visited a Health-Related Web Site in the Past Month, by Age Group



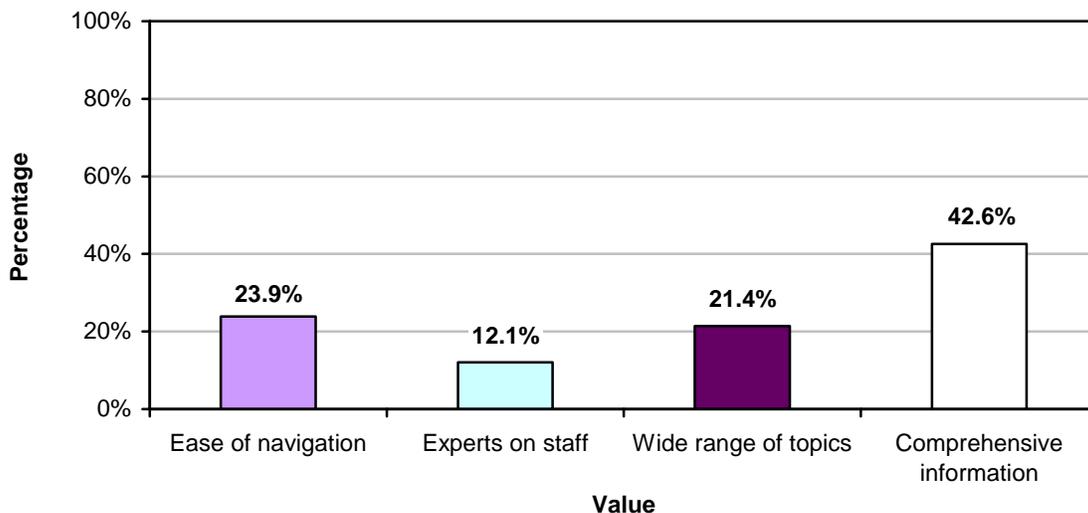
Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

The most popular health-related Web site was WebMD. About 7.7% of respondents who have been to a health-related Web site in the past month, reported that they visited WebMD. Unprompted, no respondents reported that they have visited ADA.org for health information and fewer than ten respondents have visited other Web sites such as the American Medical Association, Centers for Disease Control, healthchoice.com, healthfinder.gov, Kaiser, the Mayo Clinic, Medline, or National Institutes of Health in the last month. A total of 30 respondents (10.3%) reported that they have visited the ADA's Web site for oral health information in the last two years.

The majority of respondents (54.3%) reported that Google was their first choice of search engines or Web sites when searching for health information. About one-fifth of respondents (19.2%) mentioned that Yahoo! was their first choice and fewer than 30 respondents chose another search engine such as MSN or WebMD as their first choice in searching for health information.

Respondents were asked whether they use a Web site's search function (by entering a word or phrase) or whether they use the top or side navigation bars most often when visiting health-related Web sites. About three-fourths of respondents (74.5%) reported that they use a Web site's search function most often. When asked what they value most in a health-related Web site, 42.6% of respondents reported that comprehensive information was the most valued feature in a health-related Web site.

Figure 25: What Respondents Value Most in a Health-Related Web Site



Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

As the popularity of iPods and MP3 players has increased recently, the November 2005 survey focused on questions concerning use of iPods and MP3 players and prevalence of podcast subscriptions. Respondents were asked if they owned an iPod or MP3 player, whether they download or subscribe to podcasts, and whether they would be interested in podcasts on topics relevant to oral health. About 14.8% of respondents reported that they own an iPod or MP3 player. Those with a higher level of education, those with a greater household income, and younger respondents were more likely to own an iPod or MP3 player than were other respondent groups. Only ten respondents reported that they currently download or subscribe to podcasts. Of those ten respondents, two reported that they were interested in podcasts in oral health related podcasts.

Appendix A

Demographic Profile of Respondents

Table A-1: Demographic Profile of Respondents

	June		July		August		October		November	
	N	Percent	N	Percent	N	Percent	N	Percent	N	Percent
All Respondents	1,020		1,007		1,010		1,015		1,022	
Gender										
Male	514	48.3%	503	48.3%	506	48.3%	510	48.4%	473	48.3%
Female	506	51.7	504	51.7	504	51.7	505	51.7	549	51.7
Region										
North East	207	19.0	197	19.0	214	19.0	207	19.0	216	19.0
North Central	263	22.5	247	22.6	238	22.6	245	22.5	238	22.5
South	341	35.8	356	35.8	352	35.8	354	35.8	367	35.8
West	209	22.7	207	22.6	206	22.6	209	22.7	201	22.7
Metropolitan area	742	81.9	749	82.5	762	82.2	741	81.1	725	81.5
Non-metropolitan area	278	18.2	258	17.5	248	17.8	274	18.9	297	18.5
Children in household										
Children present	342	40.8	303	38.9	292	35.3	326	39.3	338	38.3
No children present	668	50.2	695	61.1	704	64.7	676	60.7	684	61.7
Education										
Less than high school	93	16.3	67	16.4	62	16.3	73	16.4	69	16.1
High school graduate	315	34.1	288	33.3	307	33.9	292	34.0	274	34.6
Some college	221	23.7	219	24.0	240	23.8	227	23.7	244	23.6
College graduate	362	25.9	381	26.2	366	26.0	383	26.0	407	25.7
Household Income										
Less than \$25,000	195	25.8	193	25.4	211	29.0	215	29.2	183	23.8
\$25,000 - \$74,999	411	50.0	433	52.2	394	49.6	397	48.3	425	53.0
\$75,000 or more	239	24.2	224	22.4	203	21.4	224	22.5	236	23.2
Marital Status										
Single, never married	123	16.9	138	19.2	166	23.1	151	19.7	162	22.7
Single, living w/ partner	56	7.7	65	8.4	61	7.4	48	6.9	43	6.0
Married	611	57.0	557	53.6	549	49.8	586	54.0	580	51.7
Divorced, widowed, or separated	217	18.4	240	18.7	223	19.6	222	19.4	233	19.6
Race/Ethnicity										
Hispanic	42	13.2	49	12.8	57	12.8	51	13.1	48	13.1
Non-Hispanic	970	86.8	947	87.2	944	87.2	954	86.9	965	86.9
White	836	82.5	831	83.5	815	83.6	811	82.5	815	82.5
African American	85	11.9	71	12.1	82	12.1	87	12.0	84	11.8
Other race	41	5.6	36	4.5	37	4.3	46	5.6	49	5.7
Age Group										
Under 30	154	23.5	148	22.5	170	24.8	161	23.5	156	23.6
30 – 49	358	38.9	353	40.5	334	37.8	337	38.5	366	37.8
50 – 64	307	22.9	286	22.6	270	22.7	287	23.5	309	23.9
65 or older	201	14.7	220	14.5	236	14.7	230	14.6	191	14.7

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Appendix B
Sampling Tolerances

When interpreting survey results, it should be borne in mind that all sample surveys are subject to sampling error, that is, the extent to which the results may differ from what would be obtained if the whole population had been interviewed. The size of such sampling errors depends largely on the number of interviews.

The following tables may be used in estimating the sampling error of any percentage in this report. The computed allowances have taken into account the effect of the sample design upon sampling error. They may be interpreted as indicating the range (plus or minus the figure shown) within which the results of repeated samplings in the same time period could be expected to vary, 95 percent of the time, assuming the same sampling procedures, the same interviewers, and the same questionnaire.

The Table B-1 shows how much allowance should be made for the sampling error of a percentage:

Table B-1: Recommended Allowance for Sampling Error of a Percentage in Percentage Points (at a 95% Confidence Level⁸)

	Sample Size					
	1,000	800	500	300	200	100
Percentages near 10	2	2	3	4	4	6
Percentages near 20	3	3	4	5	6	8
Percentages near 30	3	3	4	6	7	10
Percentages near 40	3	4	5	6	7	10
Percentages near 50	3	4	5	6	7	11
Percentages near 60	3	4	5	6	7	10
Percentages near 70	3	3	4	6	7	10
Percentages near 80	3	3	4	5	6	8
Percentages near 90	2	2	3	4	4	6

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

Table B-1 would be used in the following manner: suppose a reported percentage is 33 for a group which includes 1000 respondents; go to row "percentages near 30" in the table and go across to the column headed "1000." The number at this point is 3, which means that the 33 percent obtained in the sample is subject to a sampling error of plus or minus 3 points. In other words, it is that very probably (95 chances of 100) the true figure would be somewhere between 30 and 36, with the most likely figure the 33 obtained.

⁸ The chances are 95 in 100 that the sampling error is not larger than the corresponding figure in Table B-1.

When comparing survey results between two samples, such as, for example, men and women, the question arises as to how large a difference between them must be before one can be reasonably sure that it reflects a real difference. In Table B-2, the number of points which must be allowed for in such comparisons is indicated.

Table B-2 is divided into two sections: percentages near 20 or 80 and percentages near 50. For percentages in between, the error to be allowed for is between those shown in the table.

Table B-2
Recommended Allowance for Sampling Error of the Difference in Percentage Points
(at a 95% confidence level ⁹)

Percentages near 20 or percentages near 80						
Sample Size:	1,000	800	500	300	200	100
1,000	4					
800	4	4				
500	5	5	5			
300	6	6	6	7		
200	7	7	7	8	8	
100	9	9	9	10	10	12
Percentages near 50						
Sample Size:	1,000	800	500	300	200	100
1,000	5					
800	5	5				
500	6	6	7			
300	7	7	8	9		
200	8	8	9	10	11	
100	11	11	12	12	13	15

Source: American Dental Association, Survey Center, 2005 *Public Opinion Survey*.

⁹The chances are 95 in 100 that the sampling error is not larger than the corresponding figure in Table B-2.

Appendix C

**2005 *Public Opinion Survey*
Instruments**

June 2005 Survey

1. How often do you brush your teeth? **(Do NOT read choices)**
 1. After every meal/ Three times a day or more
 2. Twice a day
 3. Once a day
 4. Several times a week
 5. Once a week or less
 6. Never

2. How often do you clean your teeth using dental floss or inter-dental cleaners? **(Do NOT read choices)**
 1. After every meal/ Three times a day or more
 2. Twice a day
 3. Once a day
 4. Several times a week
 5. Once a week or less
 6. Never

3. Do you currently have a dentist?
 1. Yes
 2. No
 3. Not sure **(Do not read)**

4. Please tell me how long it has been since you went to the dentist? **(Do NOT read choices)**
 1. Within the last month
 2. 1 month to less than 3 months
 3. 3 months to less than 6 months
 4. 6 months to less than 1 year
 5. 1 year to less than 2 years
 6. 2 years to less than 3 years
 7. 3 years to less than 5 years
 8. 5 years or more
 9. Never
 10. Not sure

5. When did you last change dentists?
 1. Less than one year ago
 2. One year to less than 3 years ago
 3. Three years to less than 5 years ago
 4. Five or more years ago
 5. Never
 6. Not sure (Do not read)

SAMPLE

6. Please tell me all your sources of information on dental health. (**Do not read list.** Choose all that apply. Record first response, and probe further by asking for what other sources they use.)
1. The American Dental Association/ADA
 2. Dental hygienist
 3. Dentist
 4. Family
 5. Friends
 6. Magazines
 7. Newspapers
 8. Organizations such as state dental societies/associations
 9. Radio
 10. Schools
 11. Television
 12. World Wide Web or Internet
 13. Other (Specify)
 14. None
 15. Not sure (**Do not read**)
7. If you had to choose a new dentist, would the fact that the dentist was a member of the American Dental Association make you more likely to select him or her, less likely to select them, or would it make no difference in the decision?
1. More likely
 2. Less likely
 3. No difference
 4. Not sure (**Do not read**)

SAMPLE

July 2005 Survey

1. Did you have a cavity filled within the last 3 years?
 1. Yes
 2. No
 3. I have no dentist **(Skip to 4.)**
 4. Don't know **(Skip to 4.)**

2. Did your dentist discuss the various dental filling options with you?
 1. Yes **(Read next question and then skip to 5.)**
 2. No **(Skip to 4.)**
 3. Do not recall

3. What type or color filling(s) did you receive? **(Do NOT read choices. Choose all that apply.)**
 1. Gold-colored fillings
 2. Silver-colored fillings
 3. Tooth/white-colored fillings
 4. Do not recall
 5. I had a crown
 6. Other _____

4. If you had to choose **one** color or type of filling to use to fill your cavities, which would you choose? **(Do not read choices.)**
 1. Gold-colored fillings
 2. Silver-colored fillings
 3. Tooth/white-colored fillings
 4. Depends if front or back tooth
 5. Don't know
 6. A crown
 7. Other _____

5. What factors influence your decision regarding which color or type of dental fillings to use to fill your cavities? **(Do NOT read choices. Choose all that apply.)**
 1. Cosmetic concerns or the way it looks
 2. Cost
 3. My dentist suggested it
 4. Safety concerns
 5. Strength or durability
 6. Temporary vs. permanent
 7. Tooth – front vs. back
 8. Other _____

6. What have you heard about the possible health-related issues associated with any type of dental filling in teeth? **(Do NOT read choices. Choose all that apply.)**
 1. Never heard anything / Nothing
 2. That silver-colored fillings are bad for you / Cause health problems
 3. That tooth/white-colored fillings are bad for you / Cause health problems
 3. Not sure
 4. Other (please specify) _____

7. To your knowledge, has your dentist ever screened you for oral cancer?
 1. Yes
 2. No

SAMPLE

August 2005 Survey

1. Now we are going to talk about tooth whitening and bleaching products.

In the past six months which of the following types of tooth whitening products have you used, if any?

(INSERT PRODUCT)

1. Yes
2. No

(DO NOT ROTATE)

- a. Whitening tooth paste
- b. A tooth-whitening toothbrush
- c. Tooth Whitening gum
- d. Tooth whitening products or kits purchased from a retail store
- e. Tooth whitening products or kits you received from your dentist
- f. Tooth whitening procedure performed in the dentist office

2. **(If Q1a-c=1)** How often do you use (ENTER PRODUCT)?

1. More than once a day
2. Once a day
3. Several times a week
4. Once or twice a week
5. Less than every week

- a. Whitening tooth paste
- b. A tooth-whitening toothbrush
- c. Tooth Whitening gum

SAMPLE

3. **(If Q1d-f=1)** In the past six months, how many times would you say you've used a full course of treatment of:
(INSERT TREATMENT)

___ ENTER NUMBER OF TIMES (1-30)

- d. Tooth whitening products or kits purchased from a retail store
- e. Tooth whitening products or kits you received from your dentist
- f. Tooth whitening procedure performed in the dentist office

4. **(If Q1a-f=1)** How satisfied were you with the results of the whitening? Would you say...?
(READ LIST. ACCEPT ONE RESPONSE.)

5. Extremely satisfied
4. Very satisfied
3. Somewhat satisfied
2. Not too satisfied
1. Not at all satisfied

IF AD-1e OR 1f IS "YES", INCLUDE WORDING IN PARENTHESES.

5. During or after your tooth whitening (by your dentist), did you experience discomfort or sensitivity with your teeth or gums?

1. Yes
2. No

6. **(If Q5=1)** How long did the discomfort or sensitivity last?
(IF RESPONDENT SAYS - STILL SENSITIVE, ASK HOW LONG IT HAS BEEN SENSITIVE)
(DO NOT READ LIST. ACCEPT ONE RESPONSE.)

- 01 A few minutes
- 02 Less than an hour
- 03 Several hours
- 04 1 day
- 05 Several days
- 06 1 week
- 07 Several weeks
- 08 1 month
- 09 2 to 3 months, or
- 10 More than 3 months

7. **(If Q5=1)** Are you still experiencing discomfort or sensitivity?

- 1. Yes
- 2. No

8. How likely are you to use a tooth whitening product in the future?

- 5. Extremely likely
- 4. Very likely
- 3. Somewhat likely
- 2. Not too likely
- 1. Not at all likely

SAMPLE

October 2005 Survey

1. Do you know what specialty areas of dental practice (outside of general practice) are recognized by the American Dental Association?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

2. Do you know that a dentist that calls himself/herself a specialist must limit their practice exclusively to the specialty and have completed an accredited education program of at least two or more years beyond the dental degree?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

3. Has your dentist ever referred you to a dental specialist?
 1. Yes
 2. No **(skip to Q6)**
 3. Don't know **(Do not read) (skip to Q6)**

4. **(If Q3=1)** What was the specialty? **(Do not read choices. Choose all that apply.)**
 1. Endodontics
 2. Public Health Dentistry
 3. Oral & Maxillofacial Pathology
 4. Oral & Maxillofacial Radiology
 5. Oral & Maxillofacial Surgery
 6. Orthodontics and Dentofacial Orthopedics
 7. Pediatric Dentistry
 8. Periodontics
 9. Prosthodontics

5. **(If Q3=1)** Did you feel you were well informed about the qualifications and/or credentials of the dental specialist you saw?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

6. In general, how important do you feel it is for the American Dental Association to recognize non-specialty interest areas in general dentistry, such as anesthesiology, oral medicine or implantology?
 1. Very important
 2. Somewhat important
 3. Not very important
 4. Not at all important
 5. Not sure **(Do not read)**

7. If the American Dental Association did have a process to recognize non-specialty interest areas in general dentistry, would that help you to better identify the focus/emphasis of a general dentist's practice?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

November 2005 Survey

1. Do you own an iPod or MP3 player?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

2. **(If Q1=1)** Do you know what a podcast is?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

3. **(If Q2=1)** Do you currently download or subscribe to podcasts?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

4. **(If Q3=1)** How often do you listen to podcasts? **(READ LIST)**
 1. Daily
 2. Weekly
 3. Monthly
 4. Rarely
 3. Don't know **(Do not read)**

5. **(If Q3=1)** Are you interested in podcasts on topics relevant to your oral health?
 1. Yes
 2. No
 3. Don't know **(Do not read)**

6. **(If Q3=1)** Which of the following oral health subjects interest you? **(Rotate.)**
Does this subject interest you?
 - a. Whitening
 1. Yes
 2. No
 3. Don't know **(Do not read)**

 - b. Implants
 1. Yes
 2. No
 3. Don't know **(Do not read)**

 - c. Halitosis
 1. Yes
 2. No
 3. Don't know **(Do not read)**

 - d. Crowns
 1. Yes
 2. No
 3. Don't know **(Do not read)**

SAMPLE

6. (If Q3=1) Which of the following oral health subjects interest you? (Rotate.)

- e. Fillings
 - 1. Yes
 - 2. No
 - 3. Don't know (Do not read)

- f. Cosmetic Dentistry
 - 1. Yes
 - 2. No
 - 3. Don't know (Do not read)

- g. Dental Careers
 - 1. Yes
 - 2. No
 - 3. Don't know (Do not read)

- h. Do any other oral health subjects interest you?
 - 1. Yes
 - 2. No
 - 3. Don't know (Do not read)

8. How often have you visited health-related Web sites in the past month? (READ LIST.)

- 1. 1-5 times
- 2. More than 5 times
- 3. None

9. (If Q8=1 or 2) What Web sites do you visit for health information? (Do not read choices. Choose all that apply.)

- 01 ADA.ORG
- 02 AMA
- 03 CDC/Centers for Disease Control
- 04 Google
- 05 Healthchoice.com
- 06 Healthfinder.gov
- 07 Kaiser
- 08 Mayo Clinic
- 09 Medline
- 10 MSN
- 11 NIH/National Institutes of Health
- 12 WebMD
- 13 Yahoo
- 97 Other (SPECIFY) _____

10. When searching for health information, which search engine or Web site is your first choice? (Do not read choices. Choose only one.)

- 01 ADA.ORG
- 02 AMA
- 03 CDC/Centers for Disease Control
- 04 Google
- 05 Healthchoice.com
- 06 Healthfinder.gov
- 07 Kaiser
- 08 Mayo Clinic
- 09 Medline
- 10 MSN
- 11 NIH/National Institutes of Health
- 12 WebMD
- 13 Yahoo
- 97 Other (SPECIFY) _____

11. When you visit a health-related Web site, which do you use most often, the site's search function by entering a word or phrase or do you use the top or side navigation bars? **(ACCEPT ONLY ONE.)**

1. Web site's search function
2. Navigation bars
3. Don't know **(Do not read)**

12. Which one of the following do you value most in a health-related Web site?
(READ LIST. ACCEPT ONLY ONE.)

(ROTATE 1-4)

1. Ease of navigation
2. Experts on staff
3. Wide range of topics
4. Comprehensive information

13. How often have you visited the American Dental Association's Web site for oral health information in the last two years? **(READ LIST.)**

1. Never
2. 1-5 times
3. 6-10 times
4. More than 10 times

SAMPLE



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211 East Chicago Avenue
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ISBN 1-60122-004-9

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ITEM-NUMBER POS-2005