

Forensic Odontology: Psychological Aspects Reflected in the Dental Mirror

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Abstract:

Forensic dentists can feel pressured to deliver expert opinion or deal with psychological issues that might rise from their investigative involvement in cases associated with death, adult/child abuse and disaster victim identification. Their regular exposure to these elements of their professional practices can negatively impact the enjoyment of mental health and possibly require the assistance of a psychiatrist, a clinical psychologist, or a counselor. Our objective is to inform individuals who aim to become forensic dentists and those who already have a career in the field, exposing some characteristics of its professional demands, relating them to some insights on how the fulfillment of these duties influence positively or negatively the psychological states undergone by these professionals, and briefly but responsibly to illustrate how mental health professionals can act in the sense of building autonomy and self-care skills in their clients, so that forensic dentists can continue working without suffering, unnecessarily and/or quietly. We conclude by recommending that it is urgent that further research and discussion on the nature and reverberations of the professional and bio psychosocial suffering of forensic dentists must be developed, for a society that disregards the care for its carers denies, from its start, the very significance of what means to 'care for'. the psychological and emotional impacts on forensic odontologists of conducting work within challenging arenas touched upon the context of mass casualty incidents, and were those of Webb, Sweet, and Pretty . However, we understand that the focus of their analyses took into consideration the presence of a multi-professional team, hence, occurring within a setting that includes

the presence of professionals of other theoretical fields that cooperatively work together for the resolution of the stressful demands they mutually confront. In this sense, for the ambience of camaraderie that is synergistically formed in this context, the forensic dentist is not isolately left to cope with the arousal of painful contents, as she can tune into the presence of these others who are embodiedly united in a possibly traumatic experience as if relating to them as 'empathetic witness' of the shared suffering that is confronted, what may contribute for a better elaboration of the same.

The 'fear of dentists' or odontophobia is avoidance behavior and its psychosomatic components can impact the oral health of the patients , what has aesthetic, salutary, and psychosocial effects. Psychology is often considered part of the undergraduate dental curricula and its teaching in them addresses topics related to patients such as 'psychological management of the patient', care for 'anxious patients' and 'children with problematic behaviour' . Hence, the education and training of dentists to be) aim to prepare them to recognize and manage difficulties that can be assessed on what is happening within the patient/client, that is, that whom is an 'otherness', hence, dentists 'witness' through their experience of this alterity (who needs their aid) the affective states that are experienced by her, and that may compromise the efficiency of their work. Consequently, it could be assumed that, generally speaking and considering that exceptions to this case might be encountered, the discussion of psychological theories, techniques, and interventions within the field of Odontology is mainly directed to

instrument dentists to care for others, and not for themselves.

The reality portrayed in crime dramas aired on the media is glamorous as opposed to the life of forensic odontologists . Dentists rarely face death of patients so coping with death in the work environment can be a psychological challenge , as it can be another difficulty the fact that they must deal with the handling