2014 Arkansas Health Workforce Report

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Executive Summary

Key findings from this second annual report of diversity in the Arkansas health care workforce include:

- Most professions were skewed toward one gender. Dental hygienists, for example, were 99% female, while general surgeons were 91% male. Pharmacists enjoyed the most diversity in terms of gender, as the profession was 51% male and 49% female in 2013.

- Each profession was predominately white. In fact, there were only three professions (i.e., general nurses, podiatrists, and social workers) in which the proportion of white workers was less than 90%. Optometrists were 99% white, making them the least diverse profession, whereas social workers were 78% white and 19% African American, making them the most diverse group in 2013.

- Age distribution varied by profession. Dental assistants were, on average, the youngest profession with an average age of 38; general surgeons, on the other hand, were the oldest, with an average age of 57. Several professions had at least some active healthcare workers who were over the age of 70 (e.g., optometrists, physicians), and many had workers who were under the age of 30 (e.g., speech therapists, dieticians).

- Geographic distribution followed a similar pattern for most professions. The highest concentration of workers tended to be in the central, northwest, and northeast regions of the state. Some professions were absent in a large number of counties. Podiatry, for example, lacked active professionals in 57 counties, and specialty surgeons were absent from 45 counties. Other professions enjoyed much greater dispersion. For example, pharmacists and nurses were active in all 75 counties.

- Despite the legislative mandate requiring licensing boards to capture and report data on demographic characteristics of those licensed in Arkansas, data were not consistently provided. Nine of the seventeen healthcare professions covered in this report failed to report some or all of the required demographic data.
Introduction

In Arkansas and nationally, the population is becoming increasingly diverse, which reflects a need to create a workforce that reflects the population. Healthcare professionals must be able to understand the different cultures, health behaviors, and perspectives of their patients, and a diverse workforce is essential for this to occur. Diversity in healthcare allows for increased cultural competence, increasing trust and communication between professionals and patients. In addition, because healthcare careers generally provide greater economic benefits in relation to other career paths, greater representation in the field leads to benefits for a wider range of individuals, families, and communities.

In order to understand more clearly where Arkansas stands with regard to diversity in the healthcare workforce, examination of current data is necessary. This examination is made possible by Arkansas Act 1489 of 2009, which requires state agencies, boards, and commissions that license health professionals in the state to provide demographic data on licensees yearly. This report was developed utilizing this information, and incorporates the most recent data provided for selected health professionals in Arkansas, with a focus on race, age, gender, and geographic distribution.

All data were obtained from Arkansas’ professional licensing boards through the Arkansas Department of Health. Licensee location information was derived from facility location when available and residence location if necessary. Individuals were considered to be “active” in Arkansas if they: 1) worked in Arkansas; 2) lived in Arkansas; or 3) worked/lived in a state bordering Arkansas (i.e., Louisiana, Mississippi, Tennessee, Missouri, Oklahoma, or Texas). In this report, only professionals who were classified as both having an active license and being active in Arkansas were included in the analysis in order to most accurately portray the current workforce.
In 2013 there were 1,355 dentists licensed in Arkansas.

In 2013, dentists tended to be older, with more than half over the age of 50.

In addition, the majority of dentists were white, with only 6% being other races or ethnicities.

Dentists were also much more likely to be male than female.

The majority of dentists were located in Pulaski County, with other high proportions found in the northwest.

Of particular concern, seven counties (Newton, Perry, Clay, Lee, Cleveland, Calhoun, and Lafayette) had no active dentists.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 3,538 dental assistants practicing in Arkansas.

In general, dental assistants tended to be young – more than 80% were under the age of 50, with an average age of 38.

No race or gender data were provided for dental assistants.

Geographically, each county had at least one practicing dental assistant. However, most dental assistants were located in central, northwest, and northeast Arkansas.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 1,534 dental hygienists practicing in Arkansas.

Dental hygienists tended to be young, with over 70% under the age of 50. The average age of dental hygienists in Arkansas in 2013 was 42.

Dental hygienists were also overwhelmingly white, with African American, Latino, and other races/ethnicities making up less than 3% of the profession.

This group was also largely female, with only about 1% of them male.

As with other professions, most dental hygienists were located in the central, northeast, and northwest regions of the state. Eight counties (Madison, Newton, Montgomery, Woodruff, Nevada, Lafayette, Calhoun, and Cleveland) had no active dental hygienists in 2013.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 3,484 general physicians active in Arkansas.

Each general physician was over the age of 30, and most were over the age of 50. More than half were between the ages of 40 and 60, and the average age of general physicians in Arkansas was 52.

No race data were provided for general physicians.

General physicians were overwhelmingly male; only about 1 in 4 Arkansas general physicians were female.

General physicians are relatively evenly distributed throughout the state; all but one state has at least one physician (Cleveland County). Like other professions, most general physicians are located in the central, northwest, and northeast regions of the state.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 3,539 specialty physicians practicing in Arkansas.

No specialty physicians were under the age of 30, and most were over the age of 50. The average age of specialty physicians in Arkansas was 54.

No race data were provided for specialty physicians.

Specialty physicians were generally male; only about 1 in 5 were female.

Despite there being a greater number of specialty physicians compared to general physicians, the distribution of specialty physicians was much more imbalanced, with twenty-two counties in the state having no active specialty physicians. In addition, Pulaski and Washington counties combined accounted for almost 60% of all specialty physicians in the state.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 289 general surgeons practicing in Arkansas. No surgeons were under the age of 30, and almost 70% were over the age of 50. As a result, the average age of general surgeons was 57.

No race data were provided for general surgeons. Male general surgeons greatly outnumbered female surgeons, with about nine times as many males as females.

General surgeons were sparsely distributed throughout the state, with the highest proportions located in the central, northwest, and northeast regions. Thirty-five counties had no active general surgeon.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 505 specialty surgeons practicing in Arkansas.

No surgeons were under the age of 30, and more than half were over 50. The average age of specialty surgeons in 2013 was 55.

No race data were provided for specialty surgeons.

More than 9 in 10 specialty surgeons were men.

Specialty surgeons were distributed unevenly in the state, and forty-five counties had none practicing there. In addition, more than 40% of all specialty surgeons in Arkansas were located in Pulaski County.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 60,033 nurses active in Arkansas.

Generally, nurses tended to be younger, with 60% under the age of 50 and more than 10% under the age of 30. The average age of nurses in 2013 was 46.

Nurses tended to be white, but almost 1 in 10 were African American, a proportion higher than that found in many other health professions in the state.

Nurses tended to be female; in 2013 females outnumbered male at a rate of 9 to 1.

Nurses were relatively evenly distributed throughout the state. Every county had at least one active nurse. As expected, nurses tended to be active in the central and northwest areas of the state.

*Note: These data may include duplicate licenses as nurses may hold multiple licenses in different specialties. Percentages may not add to 100% due to rounding.
In 2013, there were active 614 specialty nurses (including certified nursing midwives and registered nurse anesthesiologists) in Arkansas.

Specialized nurses tended to be relatively distributed in terms of age, with a little more than half being under the age of 50. The average age of specialty nurses in 2013 was 49.

Specialty nurses were generally white, with about 3% making up other races and ethnicities.

Interestingly, despite the fact that general nurses were more likely to be female, specialty nurses were more likely to be male, likely due the inclusion of anesthesiologists which were mostly males.

Specialty nurses were concentrated in the central northwest regions of the state, and 22 counties had no specialty nurses.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 445 active optometrists in the state.

In terms of age, optometrists were relatively evenly distributed, with about half below the age of 50 and half above. The average age of optometrists in Arkansas in 2013 was 50.

In addition, optometrists were generally white, with other races and ethnicities making up less than 2% of the profession.

Optometrists were also more likely to be men, with nearly 3 out of every 4 in Arkansas being male.

As with other professions, optometrists were more often located in central, northwest, and northeast regions of the state. Sixteen counties had no practicing optometrist, while Pulaski and Washington counties accounted for almost 30% of all of Arkansas’ optometrists.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 4,138 active pharmacists in the state.

Pharmacists tended to be slightly younger, but in general were distributed relatively evenly in terms of age. The average age of pharmacists in 2013 in Arkansas was 49.

More than 9 out of every 10 pharmacists in the state were white, but around 8% were of other races or ethnicities. This makes pharmacists one of the more racial diverse professions in the state.

Pharmacists were also evenly divided between males and females.

Pharmacists were relatively evenly distributed geographically in the state as well, with the expected concentrations in central, northwest, and northeast regions of the state. No counties were lacking a licensed pharmacist in 2013.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 94 active podiatrists in the state.

Podiatrists were more likely to be between the ages of 40 and 49. The average age of podiatrists in Arkansas in 2013 was 51.

Podiatrists were more likely to be white, but 1 in 10 were African American and 5% were of other races or ethnicities.

Podiatrists were more likely to be men than to be women, with the latter making up only 16% of the workforce.

Podiatrists were the health profession with the greatest imbalance in distribution. Fifty-seven counties had no active podiatrist, and more than half of all those active were located in either Pulaski, Washington, or Craighead counties.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 563 active chiropractors in the state.

No age, race, or gender data were provided for chiropractors.

In 2013, chiropractors were more likely to be active in the central or northwest regions of the state. Fourteen counties had no active chiropractor, whereas nearly 40% were located in Pulaski, Washington, and Benton counties.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 646 active dieticians in the state.

Dieticians tended to be younger in 2013, with more than 60% under the age of 50; 16% were under the age of 30. The average age of dieticians in the state was 45.

No race or gender data were provided for dieticians in 2013.

Dieticians had a typical distribution in the state, with a higher concentration found in the central and northwest regions. Eighteen counties had no active dietician, and more than half were located in Pulaski, Faulkner, and Washington counties.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 2,821 active physical therapists in the state.

No age data were provided for physical therapists.

About 9 in every 10 physical therapists were white, with about 1 in every 10 of other races or ethnicities.

A little more than two-thirds of physical therapists were women in 2013.

Physical therapists were distributed similarly to other health professions in the state, with higher concentrations found in the central, northwest, and northeast regions of the state. One county (Lafayette) had no active physical therapists.

*Note: Percentages may not add to 100% due to rounding.
In 2013, there were 3,471 active social workers in the state.

Social workers were relatively evenly distributed in terms of age, with only a slightly higher proportion being under 50. The average age of social workers in 2013 was 48.

Social workers were more diverse than any other health profession in 2013, with almost 1 in 5 being African American.

Social workers were overwhelmingly female, with only 15% being male in 2013.

Social workers tended to be active in the central and northwest regions of the state, but were otherwise relatively evenly distributed. Only one county (Calhoun) lacked any active social workers in 2013.

*Note: Percentages may not add to 100% due to rounding.*
In 2013, there were 2,386 active speech therapists in the state.

Speech therapists tended to be young, with more than 75% under the age of 50; 17% were under the age of 30.

Speech therapists tended to be white, with only 6% being of other races or ethnicities.

Speech therapists were also overwhelmingly female, with only 5% male in 2013.

Speech therapists were distributed similarly to other health professions, with concentrations in the central and northwest regions of the state. Nearly 1 in every 5 was located in Pulaski County. One county (Scott) had no active speech therapists in 2013.

*Note: Percentages may not add to 100% due to rounding.*
Conclusions

Workforce diversity is an important issue for Arkansas, and increased diversity in the state could have positive effects on both the health of minority populations and the quality of care in Arkansas. This report examines demographic data provided by the state’s various healthcare workforce licensing boards to the Arkansas Department of Health, and seeks to illustrate age, race, gender, and geographic disparities found within various segments of the workforce. This report was, in part, made possible by the Arkansas General Assembly’s 2009 mandate that required all licensing boards to provide this information on its licensees.

Despite Act 1489, 2013 data were frequently missing, preventing a complete analysis of workforce characteristics. Of the 17 professions examined, 8 were missing race data, 3 were missing gender data, and 3 were missing age data. This is actually a decline from last year’s report, when only 2 were missing gender data and 1 was missing age data.

Racial disparities are a reality in Arkansas’ workforce. The racial and ethnic diversity found in the state’s population is not necessarily reflected in the healthcare system. Gender and age disparities are evident as well.

Healthcare professionals are not, in many cases, equitably distributed throughout the state. While it is not unexpected that professionals would be clustered in the population centers found in the central and northwestern parts of the state, it is of some concern that some counties (e.g., Lafayette and Calhoun) were lacking active workers for 10 of the 17 professions. Such geographic disparities can be harmful when they prevent an individual or family from accessing care they need.

Few differences were evident between the data obtained this year and that obtained last year. While some professions may have improved or declined in terms of diversity, any differences were slight and possibly due to chance. To see true development and improvement (or decline) over time, frequent and complete reporting is required over a long period to allow for policy changes to manifest in workforce improvements.

This report highlights important issues in workforce diversity in Arkansas. While awareness is important in the early stages of demographic data collection and can form the basis of future development, systematic and ongoing demographic data collection is imperative to maintain momentum in understanding our changing workforce.
References