



Highlights

- Active dental hygienists are unevenly distributed across the state.
- There is a substantial maldistribution of active dental hygienists in New York City.
- There is wide regional variation in the ratio of dental hygienists to dentists in the state.
- The vast majority of dental hygienists in New York work in private dental offices and more than half (52%) work full time.
- Over 90% of the state's dental hygienists graduated from a New York dental hygiene school.
- The vast majority of New York's dental hygienists are female, older than dental hygienists nationwide and not as diverse as the state's population.

BACKGROUND

Access to oral health services in the U.S. is uneven and often results in oral health disparities. Groups at greatest risk for limited access to oral health services include the poor, children, racial/ethnic minorities, rural populations, and the elderly. Concerted efforts have been made to expand access to needed services. One recent example is the federal health reform mandate that insurance exchanges include a children's dental benefit as part of their essential benefits package. The success of such a mandate depends on the supply and distribution of oral health professionals available to serve children eligible for this dental benefit. Dental hygienists are important providers of preventive and prophylactic oral health services. Detailed information about New York's active dental hygiene workforce can help to inform programs and policies designed to increase access to needed oral health services for vulnerable populations.

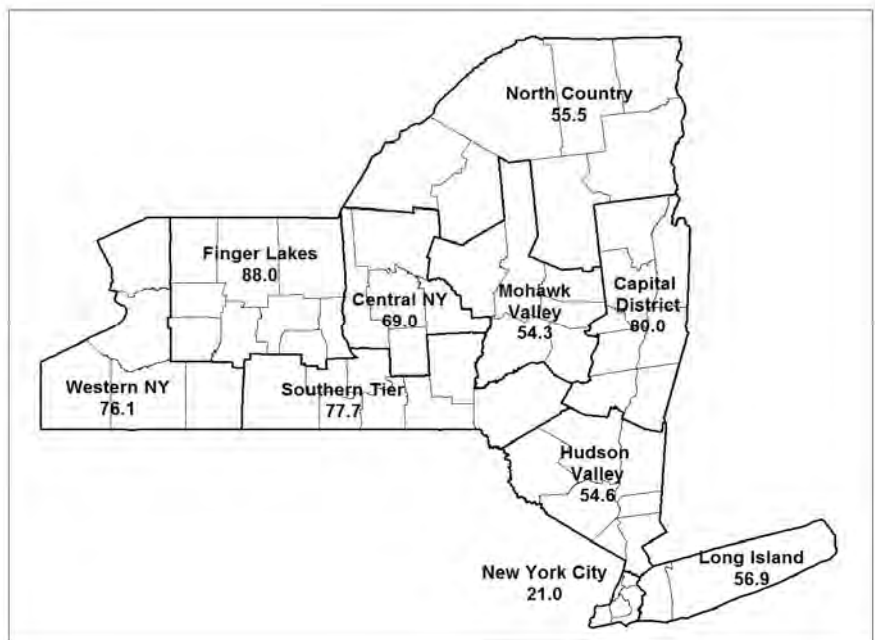
This research brief examines the demographic, educational, and practice characteristics of the state's active dental hygienists. Data for this brief were drawn from a re-registration survey of dental hygienists licensed in New York. In 2012, there were about 10,600 licensed dental hygienists in the state. Since September 2007, the Center, with support from the New York State Departments of Health and Education, has conducted a survey of dental hygienists at the time of license renewal. Between September 2007 and May 2012, 5,643 surveys were completed, representing just over 53% of the licensed dental hygienists in the state. More than 98% of the survey respondents reported actively working in dental hygiene, while 2% reported being retired.

KEY OBSERVATIONS

Active dental hygienists are unevenly distributed across the state.

With an estimated 47 active dental hygienists per 100,000 population statewide, New York was slightly higher than the national rate of 41 active dental hygienists per 100,000 population.¹ However there was substantial regional variation in the distribution of dental hygienists in the state, ranging from 88 active dental hygienists per 100,000 population in the Finger Lakes region to 21 per 100,000 in New York City.

Figure 1: Active Dental Hygienists per 100,000 Population by Region



1. American Community Survey 2006-2010. Five year estimates. U.S. Census Bureau.

There is a substantial maldistribution of active dental hygienists in New York City.

There were only 21 dental hygienists per 100,000 population in New York City, less than half of the statewide rate of 47 per 100,000 population. Within New York City, there was wide variation in the rate of dental hygienists per 100,000 population in each of the five boroughs. New York County (Manhattan) had the highest rate, about 53 dental hygienists per 100,000 population, followed by Richmond County with about 40 dental hygienists per 100,000 population. However, the rates were substantially lower in Queens, Kings (Brooklyn), and Bronx counties with approximately 12 dental hygienists or less per 100,000 population.

Figure 2: Active Dental Hygienists per 100,000 Population by the Counties of New York City

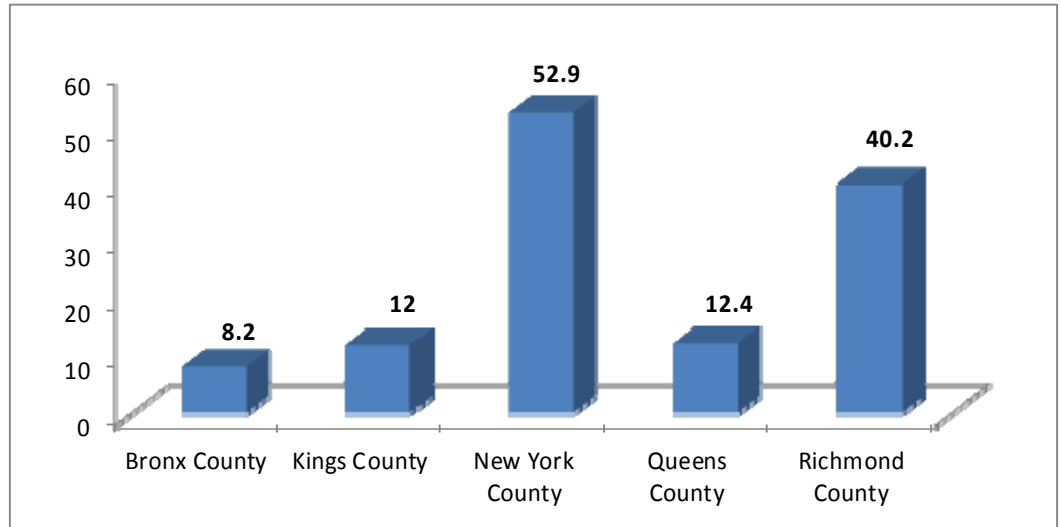
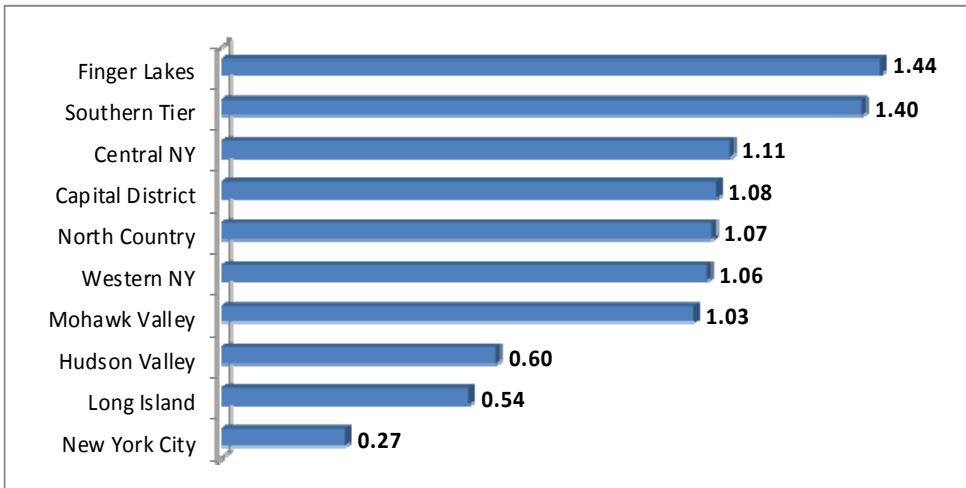


Figure 3: Ratio of Dental Hygienists to Dentists by Region



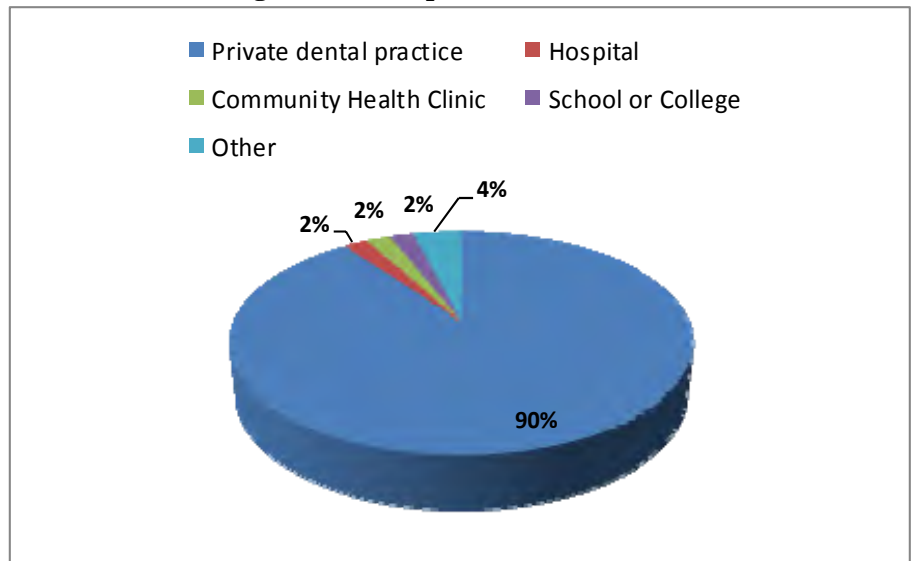
There is wide regional variation in the ratio of dental hygienists to dentists in the state.

The Finger Lakes had the most dental hygienists per dentist with 1.44, followed by the Southern Tier region with 1.40. The Central New York, Capital District, North Country, Western New York, and Mohawk Valley regions had comparable ratios of approximately one dental hygienist per dentist. In the Long Island region there were .54 dental hygienists for every dentist. New York City had the fewest with .27 dental hygienists per dentist.

The vast majority of dental hygienists in New York work in private dental offices and more than half (52%) work full time.²

Ninety percent of active dental hygienists reported a private dental practice as their principal work setting, as did 89% of dental hygienists who reported a secondary practice location. The remainder reported working in hospitals community health clinics, schools or colleges, or other settings.

Figure 4: Principal Practice Location



2. Full time is defined as 30 or more hours per week.

Over 90% of the state's dental hygienists graduated from a New York dental hygiene program.

Among dental hygienists who reported attending a New York dental hygiene program, well over half graduated from SUNY Farmingdale (17%), Erie County Community College (15%), CUNY College of Technology (13%), and Hudson Valley Community College (13%). About 86% of New York's dental hygienists reported graduating from a high school in the state.

Over 82% of dental hygienists in New York reported an associate degree as their highest degree, compared to 65% of dental hygienists nationwide. Active dental hygienists in New York were about half as likely to report a bachelor's degree or higher (18%) as their highest degree compared to dental hygienists in the U.S. overall (35%).³

Figure 5: Dental Hygiene Program Attended by New York Graduates

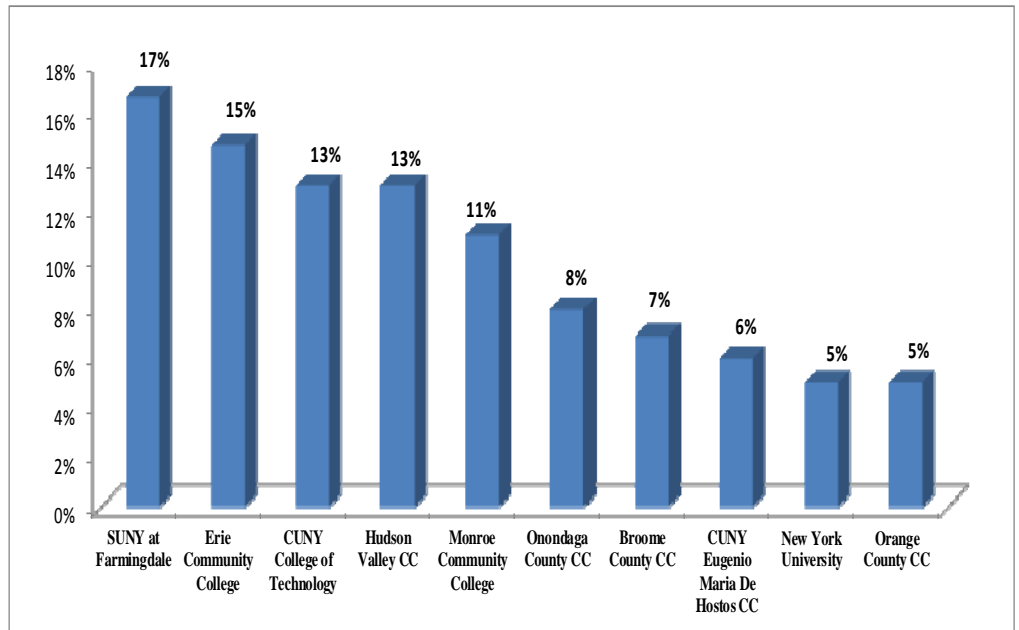
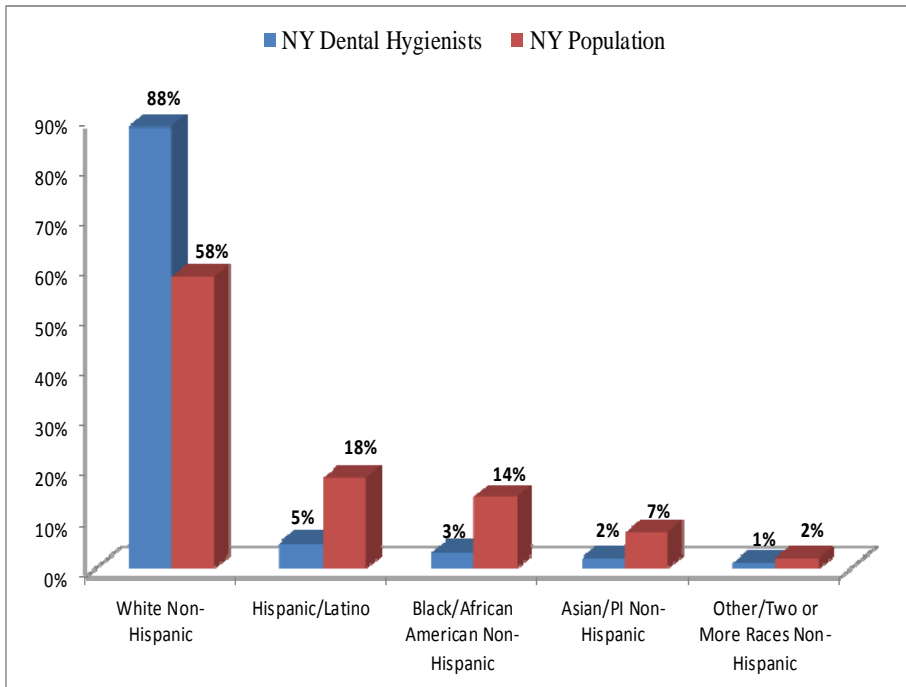


Figure 6: Race/Ethnicity of New York Dental Hygienists Compared to New York's Population



The vast majority of New York's dental hygienists are female, older than dental hygienists nationwide, and not as diverse as the state's population.

The vast majority of dental hygienists in the state were female (99%). This was somewhat higher than the percent nationally (96%).⁴ The median age of dental hygienists in New York (47) was older than the median age of dental hygienists in the U.S. (41).⁵

Non-Hispanic Whites were overrepresented among dental hygienists in New York relative to the state's population (88% compared to 58%).⁶ Hispanics/Latinos were underrepresented among dental hygienists in New York compared to the state's population (5% versus 18%), as were Blacks/African Americans (3% versus 14%) and Asians (2% versus 7%). New York's active dental hygienists were comparable in racial/ethnic composition to all active dental hygienists in the U.S. (Non-Hispanic White 87%, Hispanic/Latino 6%, Asian 4%, Black/African American 3%, Two or More Races/Other 1%).⁷

3-5. American Community Survey 2006-2010. Five-year estimates. U.S. Census Bureau.
 6. U.S. Census Bureau. 2010 Decennial Census.
 7. American Community Survey 2006-2010. Five-year estimates. U.S. Census Bureau

METHODS

Data for this research brief were drawn from an ongoing survey of New York's licensed dental hygienists conducted by the Center for Health Workforce Studies. Between September 2007 and May 2012, over 5,600 surveys were completed and entered into a database, representing 53% of licensed dental hygienists in New York.

A respondent was determined to be an active dental hygienist if the individual reported working in dental hygiene (in a clinical, administrative, or educational capacity) either full time or part time. Dental hygienists who did not report one of the three activities or who reported being retired were excluded from the analysis. The region in which a dental hygienist practiced was based on the principal practice zip code reported on the survey. If the principal practice zip code was missing or located outside of New York, the secondary practice location zip code was used for determining regional rates if located in New York. To estimate total dental hygienists in a region, data were weighted (weight = N/n).

With a response rate of 53% of all licensed dental hygienists in New York, results should be interpreted cautiously. However, as the number of survey responses increases, this limitation will be greatly reduced and a more detailed profile of dental hygienists practicing in New York will be developed, including analysis at county and subcounty levels.

CONCLUSION

New York's active dental hygienists, on average, are older than dental hygienists nationally and much less diverse than the state's population, with many fewer Black/African American, Asian, and Hispanic/Latino dental hygienists relative to the general population. The majority of dental hygienists in the state graduated from a New York dental hygiene education program and are more likely to report an associate degree as their highest degree, compared to dental hygienists nationally.

New York's dental hygienists are unevenly distributed across the state, with many fewer per 100,000 population in New York City compared to the rest of the regions of the state. Further, there is a substantial maldistribution of the limited supply of active dental hygienists in New York City, with more in New York County (Manhattan) and fewer in Bronx, Kings, and Queens counties. It will be important to fully understand the implications of this maldistribution on access to preventive and prophylactic oral health services, particularly for underserved populations.

Findings from an analysis of the dental hygienist re-registration survey make a vital contribution to our understanding of dental hygiene services in New York. The survey is a meaningful tool for monitoring the state's oral health workforce and helps to inform programs and policies designed to increase access to oral health services.

Center for Health Workforce Studies

This brief was prepared by the Center for Health Workforce Studies at the School of Public Health, University at Albany, State University of New York. Center staff who worked on the report include Tracey Continelli, Mark Dionne, Margaret Langelier, and Jean Moore. Support for this analysis was provided by the New York State Department of Health and the New York State Education Department.

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