

Occupational Mobility Among Individuals in Entry-Level Health Professions

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BACKGROUND

Given that entry-level healthcare jobs are among the fastest growing jobs in the U.S., public perception is that the healthcare industry may provide an opportunity for upward mobility. Recent work in the long-term care sector, however, found that half of the exiting healthcare workers, most of which are in entry-level occupations (i.e., those requiring less than a bachelor's degree), left the labor force or found themselves unemployed rather than move up a career ladder. This trend brings about concerns that the health workforce pipeline may not be sufficient to keep up with the demand for these types of workers. In this study, we explored the career transitions among individuals in select entry-level allied health occupations to determine whether they stayed in healthcare and/or moved up in occupational level over time, and the individual characteristics associated with different career pathways.

METHODS

This study used data from the Panel Study of Income Dynamics (PSID), which is a nationally representative and publicly available longitudinal household survey. We identified five entry-level allied health occupations in which there was at least one respondent employed at our study's base year (2005): nursing/psychiatric/home health aides, occupational therapy aide/assistant, physical therapy aide/assistant, dental aide/assistant, and medical assistants and other healthcare support occupations. We identified four career trajectories:

- **Stayers:** individuals who consistently reported the same allied health occupation in the base year and follow-up waves
- **Swirlers:** individuals who temporarily changed their occupation in a follow-up wave, but eventually re-entered the same allied health occupation as reported in the base year
- **Movers:** individuals who changed their occupation in the follow-up waves such that their last reported occupation was not the same as the base year occupation, but still was a healthcare occupation
- **Leavers:** individuals who changed their occupations in the follow-up waves such that their last reported occupation was not a healthcare occupation at all

We used a pooled person-year sample between 2003-2013 to compare socio-demographic characteristics across these four career trajectories, and relied on logistic regressions to identify significant predictors of an individual following one of these four career trajectories.

KEY FINDINGS

- About half of our sample were in the same occupation at the base year and through the study period, where 40% were stayers and 10% were swirlers.
- Among those who left their baseline occupations, about two-thirds stayed within the healthcare industry, while one-third left healthcare altogether.

CONCLUSIONS AND POLICY IMPLICATIONS

This study found limited evidence of career advancement within healthcare in that only a few of the individuals in entry-level allied health occupations moved into occupations that require higher education such as for nursing occupations. What remains unknown is whether those who left healthcare achieved career advancement, and the reasons for why they left healthcare. Switching fields is not necessarily bad for society, but highlights concerns for the pipeline of available individuals to work in healthcare where job opportunities are rapidly growing. To ensure a sufficient pipeline of healthcare workers to meet the growing demand for healthcare services, a multi-pronged approach is required. For example:

- Employers could facilitate retention and advancement by creating career advancement options and opportunities such as offering tuition remission programs to help employees gain additional education and training; engaging in deliberate succession planning.
- Educational institutions as well as health professional organizations could clarify career options and pathways for early careerists.
- Employers and educational institutions could work together to develop more mentoring and apprenticeship opportunities.

KEY FINDINGS *continued*

- Generally the share of workers' in each of the entry-level allied health occupations steadily declined over time, while the "other" occupation category remained stable. (Table 1)
- Within healthcare occupations, the most common occupations to which individuals moved were licensed practical/ vocational nurse and registered nurse. Other common non-healthcare occupations to which individuals moved included: office and administrative, personal care and services, sales, building and grounds, production, construction trades, and food services. (Figure 1)
- Women, and non-Hispanic Black individuals had higher odds of staying in the same healthcare occupation, relative to the comparison groups. Single individuals and those with a Bachelor's degree had lower odds of staying in the same occupation through the study period, relative to the comparison groups.
- Individuals who had more children, were Hispanic/Latino, or attained a Master's degree significantly increased the odds that the individual left healthcare as an occupation altogether.
- Individuals who were ever unemployed during their career trajectory had significantly higher odds of leaving a healthcare occupation for a non-healthcare occupation.

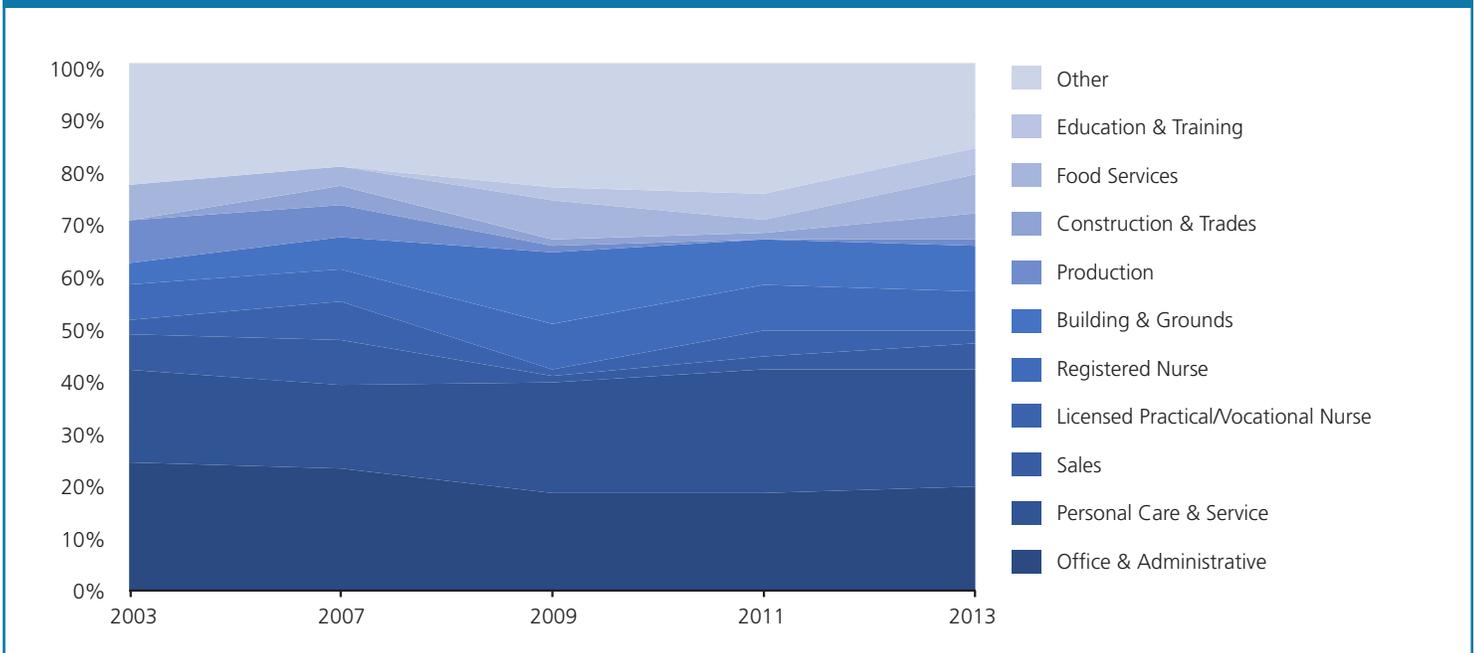
Table 1.

Percentage of Individuals in Selected Healthcare and "Other" Occupations by Wave (Individual N=294)

Wave	2003	2005 (base)	2007	2009	2011	2013
Nursing/ Psychiatric/ Home Health Aide	32%	70%	39%	23%	21%	18%
Medical Assistants and Other Healthcare Support Occupations	10%	19%	7%	10%	6%	7%
Dental Aide/ Assistant	4%	9%	4%	3%	3%	2%
Occupational Therapy Aide/ Assistant	0%	0%*	0%	0%*	0%*	0%*
Physical Therapy Aide/ Assistant	2%	2%	1%	1%	1%	1%
Other Occupations	25%	0%	28%	28%	28%	28%
Missing	27%	0%	20%	34%	41%	44%
Total	100%	100%	100%	100%	100%	100%

*the actual value is 0.003%, implying 1 out of 294 individuals reported to be an occupational therapist aide/assistant in 2005, 2009, 2011, and 2013.

Figure 1: Percentage of "Other" Occupations Held by Individuals Originating in Entry-Level Health Occupations Across Waves (Individual N=294)



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