



## The Evolving Pipeline of Hispanic Dentists in the United States

Zeeshan Raja, BDS, MPH, Cynthia Wides, MA, Aubri Kottek, MPH, Paul Gates, DDS, MBA, and Elizabeth Mertz, PhD, MA

---

**Objective:** Improving the racial and ethnic diversity of the nation's dentists is critical in efforts to reduce disparities in access to care and health outcomes and to better address the oral health needs of an increasingly diverse US population. Half of all Hispanic/Latino (H/L) dentists in the US are foreign born, and about 1 in 4 were initially trained outside the US. This study examines the trends in H/L dentists' education and pathways to practice, analyzes practice patterns of H/L dentists by pathway, and describes the licensure and educational environment for foreign-trained dentists (FTDs), with a focus on opportunities to enhance workforce diversity and improve access to care for both underserved and H/L populations.

**Methods:** Mixed methods were employed for this study. Data from a 2012 national sample survey of underrepresented minority dentists in the US were coded to reflect three pathways to practice for H/L dentists: 1) US-trained only, 2) FTD only, and, 3) completing an International Dentist Program/Advanced Standing (IDP/AS) program. Descriptive and multivariate statistics were computed to determine dentist and practice characteristics. States' practice acts and educational programs were analyzed in conjunction with interviews conducted with key stakeholders in dental education and state policy to gauge the impact of changing licensure pathways and the growth of IDP/AS programs on H/L dentists and their practices.

**Results:** Evolving licensure laws in concert with IDP/AS program expansion are changing the pathways to practice for H/L FTDs. Younger FTDs complete IDP/AS programs at higher rates than do older graduates, who historically could obtain licensure directly with their foreign credentials. Among H/L dentists, being initially foreign trained predicts greater service to H/L patients and to publicly insured patients. However, the most important factor predicting service to publicly insured patients was their primary work setting, with those in nontraditional settings (e.g., safety net) providing greater service to this population. The biggest predictor of H/L dentists having had a first job in nontraditional settings was having completed a dental residency and expressing personal motivation to treat underserved patients. Being an FTD or an FTD who completed an IDP/AS program did not predict current or initial work as a dentist in a nontraditional setting.

**Conclusions:** There is a confluence of policy issues impacting the pipeline of H/L dentists in the US, which may affect future supply and practice patterns. With no clear strategy for increasing the H/L dentist pipeline, the current system is likely to continue under producing culturally competent providers needed to serve the significant and growing H/L population in the US.

**Key Words:** Dentists, Underrepresented Minorities, Hispanic/Latino, Workforce Diversity, Practice Patterns

**HWRC Website Link:** [http://www.oralhealthworkforce.org/wp-content/uploads/2017/09/OHWRC\\_Evolving\\_Pipeline\\_of\\_Hispanic\\_Dentists\\_2017.pdf](http://www.oralhealthworkforce.org/wp-content/uploads/2017/09/OHWRC_Evolving_Pipeline_of_Hispanic_Dentists_2017.pdf)