

# Minority Dentists: Why Do We Need Them?

By L. Jackson Brown, DDS, PhD, and Vickie Lazar, MA, MS  
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The current status of the minority dentist workforce is an important issue for the profession and the nation it serves. While some minorities have entered the profession in increasing numbers, other minorities are not as well represented, either among current dental students or practicing dentists.

## Who are the dentists?

**Racial and ethnic distribution.** African American, Hispanic, and American Indian dentists are well underrepresented in dentistry when compared to the general U.S. population. Data from the American Dental Association's (ADA) periodic census of dentists, called, Distribution of Dentists in the United States by Region and State, show in 1996, 87.9 percent of profession-ally active dentists were White, 2.2 percent were African American, 2.8 percent Hispanic, 0.2 percent American Indian, and 5.9 percent Asian American. (See Figure 1).

**Age.** The average age of professionally active dentists in 1996 was 46.8 years. White and African American dentists were on average older (47.8 years and 47.5 years, respectively). Hispanic, Asian American, and American Indian dentists averaged 42.1, 42.2, and 43.9 years of age, respectively.

**Practice.** More than 70 percent of professionally active dentists across the five race categories indicated they practiced general dentistry, research, or administration area in 1996. Among active private practitioners of all five races, more than 70 percent practiced full-time. Similarly, more than 70 percent of active private practitioners across the five race categories were owners of their practices.

## Where are the dentists?

Data from the ADA's annual Survey of Predoctoral Dental Educational Institutions, show growth and distribution of minority dental students and practicing dentists.

**Dental school enrollments.** Overall U.S. dental school enrollments decreased 11.3 percent, from 18,673 in academic year 1986-1987, to 16,570 in 1996-1997. During the same period, enrollment of White students decreased 25.2 percent, Hispanic students decreased 24.7 percent, and African American student enrollment decreased 13.7 percent.

In contrast, Asian American student enrollment increased 103.4 percent during the same period, from 1,805 to 3,672. American Indian student enrollment also increased 48.2 percent, from 56 in 1986-1987, to 83 in 1996-1997.

In 1986-1987, Whites represented 78.6 percent of all dental school enrollees, but their representation decreased in 1996-1997 to 66.3 percent. While enrollee representation remained constant for African Americans, Hispanics and American Indians, it changed dramatically for Asian Americans: in 1996-1997, they were 22.2 percent of all enrollees—up from 9.7 percent in 1986-1987. (See Table 1.)

**Dental school graduates.** From academic years 1986-1987 to 1996-1997, the overall number of dental school graduates in the U.S. decreased 23.1 percent, from 4,957 to 3,810 respectively.

During the same period, the number of White graduates decreased 35.8 percent, and the number of American Indian graduates dropped slightly, from 10 to 9. The number of African American graduates increased 5.1 percent, from 195 to 205; and the number of

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Table 1: Dental School Enrollments and Graduates, by Race, 1986/87-1996/97

Year	DENTAL SCHOOL ENROLLMENTS					DENTAL SCHOOL GRADUATES						
	Total	White	African American	Hispanic	American Indian	Asian	Total	White	African American	Hispanic	American Indian	Asian
1986/87	18,673	14,686	1,032	1,094	56	1,805	4,957	4,162	195	208	10	382
1987/88	17,885	13,531	994	1,201	60	2,099	4,717	3,869	210	231	11	396
1988/89	17,094	12,445	984	1,276	63	2,326	4,581	3,660	227	221	14	459
1989/90	16,412	11,701	983	1,278	57	2,393	4,312	3,288	193	296	14	521
1990/91	15,951	11,185	940	1,254	53	2,519	4,233	3,165	216	320	8	524
1991/92	15,882	11,152	907	1,187	51	2,585	3,995	2,854	204	348	12	577
1992/93	15,980	11,187	943	1,152	48	2,650	3,918	2,796	174	296	12	640
1993/94	16,250	11,241	972	1,141	50	2,846	3,778	2,699	171	288	12	607
1994/95	16,353	11,326	928	967	56	3,076	3,875	2,766	194	292	13	603
1995/96	16,552	11,028	951	966	73	3,433	3,908	2,724	201	300	8	660
1996/97	16,570	10,984	891	824	83	3,672	3,810	2,674	205	209	9	693

Source: American Dental Association, Survey Center,

1996/97 Survey of Predoctoral Dental Educational Institutions: Academic Programs, Enrollment, and Graduates, Volume 1.



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Asian American graduates increased 81.4 percent, from 382 to 693 during that period.

The number of Hispanic graduates increased slightly from 208 to 209. However, Hispanic graduate numbers peaked at 348 in 1991-1992, then fell sharply from 300 in 1995-1996 to 209 in 1996-1997.

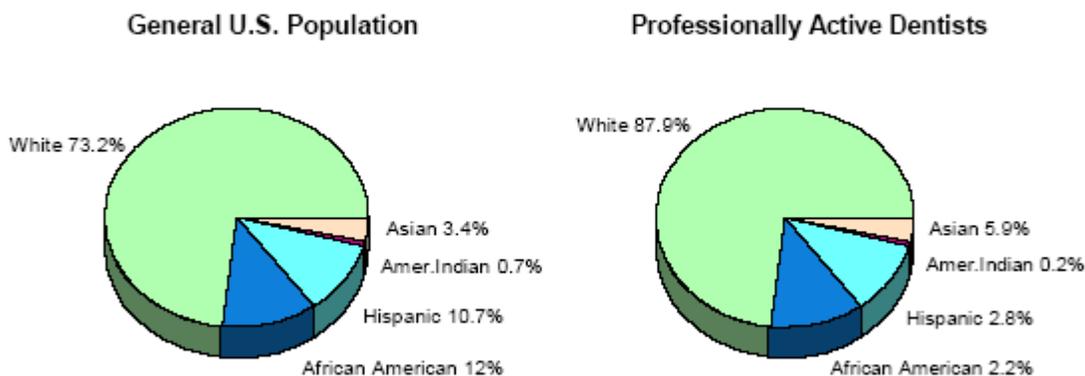
In 1996-1997, African Americans represented 5.4 percent of all dental school graduates, up from 3.9 percent in 1986-1987. The distribution of Hispanic and American Indian graduates remained stable, but increased from 7.7 percent to 18.2 percent for Asian Americans. (See Table 1.)

**Regional distribution.** In 1996, there were 152,205 professionally active dentists in the U.S. While the largest percentage distribution of the resident population was in the South Atlantic region (17.9 percent), the largest percentage distributions of dentists were in the Middle Atlantic and Pacific regions (18 percent in both regions). The smallest percentage was in the East South Central region (4.9 percent).

Most White professionally active dentists were found in the East North Central and Middle Atlantic regions (17.7 percent and 17.4 percent, respectively).

For African American professionally active dentists, the largest percentage distribution was in the South Atlantic region (31.1 percent). Roughly one quarter of Hispanic dentists worked in the Pacific and South Atlantic regions (25.2 percent and 24.9 percent, respectively). And 30.4 percent of American Indian dentists were in the Pacific region. The majority of Asian American dentists were located in the Pacific region (60.9 percent).

**Figure 1. Racial Distribution of General U.S. Population and Professionally Active Dentists, 1996**



Source: U.S. Bureau of the Census, 1998; and *Distribution of Dentists in the United States by Region and State, 1996*, American Dental Association, Survey Center.

## Why do we need more minority dentists?

Aside from the social issue of reaching parity—having the same proportion of minority dentists as their representation in the general population—the underrepresentation of minority dentists may be an underlying factor when considering the unmet needs of minority patients. Oral health problems disproportionately affect minority populations in the U.S. A September 1998 article in the *Journal of the American Dental Association*, reported that African American and Mexican American children were about twice as likely to experience caries and had higher levels of untreated caries than their non-Hispanic White counterparts.

Specifically, they found that 18.0 percent of children 6-14 years of age, and 36.1 percent of children ages 15-18, had one or more decayed permanent teeth. Among White, non-Hispanic children of the same age groups, the rates were 8.5 percent and 17.8 percent, respectively. Furthermore, data from a recent ADA survey, *1996 Dentist Profile Survey*, showed that underrepresented minority dentists are likely to provide oral health care to minority populations. Over three quarters (76.6 percent) of White dentists' patients were White, while African American dentists reported that approximately three out of five of their patients (61.8 percent) were African American. Among Hispanic dentists, 45.4 percent of their patients were Hispanic and 43.6 percent were White. Almost one third (62.7 percent) of the patient base of American Indian dentists was White, while 10.1 percent were American Indian. Asian American dentists indicated that about one quarter (25.1 percent) of their patients were Asian American and 47.5 percent were White. African American and Hispanic dentists may be more culturally attuned to the needs of patients from their own subcultures. The outreach to a growing minority patient base is an important reason why the dental workforce should reflect the Nation's diversity.

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