



# 2

## Unpacking the workforce shortage: entry and exit rates

Specialist addiction practitioners in Aotearoa work across a range of organisations including the public health system, the private health system, non-governmental organisations (NGOs), and in self-employment.

Data exists to support an understanding within occupation types or organisation types, however there is no single data source that monitors the addiction workforce across these different areas. NGOs are particularly difficult to monitor as the NGO workforce is comprised of many separate organisations. As such, much of what is known about the addiction workforce employed in NGOs is based on point-in-time survey data.

To generate a picture of the movement of specialist addiction personnel into and out of addiction practice, the review used dapaanz membership data as a proxy. Entry and exit rates were based on an anonymised analysis by the Workforce Analytics and Intelligence Team at Te Whatu Ora of dapaanz registration over three years to June 2023.

### At the time of the review:

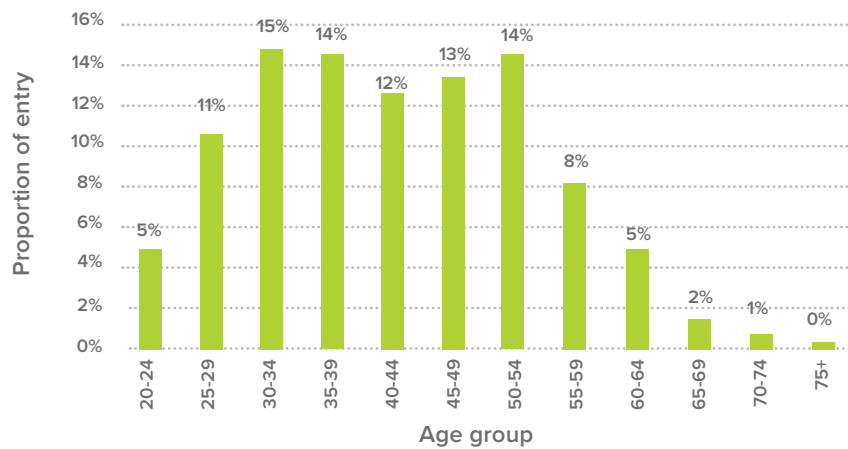
- Size estimates put the total addiction workforce at less than 2,000 FTE.
- There were 1842 dapaanz members and 1183 of these were registered practitioners.
- The vacancy rate for the Te Whatu Ora addiction workforce was 10.9%.
- The vacancy rate for the NGO addiction workforce was around 10%.
- The Te Whatu Ora addiction workforce remained static in size between 2018 and 2022.
- The NGO addiction workforce grew by approximately 8% (or 71 FTE) over the same period.
- The addiction workforce tends to be older than the general healthcare workforce – 76% of addiction specialists are over the age of 40 and 54% of the Te Whatu Ora alcohol and drug workforce are over the age of 50.

### Entry into the addiction workforce

The diagram below shows the age distribution of all new addiction practitioners entering the workforce, using an average from 2021-2023.

Around a third of new entrants are between 20 and 34 years old and slightly more than that — 39% — are entering the workforce between the ages of 35 and 49. The diverse ages and life stages of new entrants to practice may in itself present challenges and be a contributing factor in some of the higher-than-expected exit rates across some of these age groups.

### Age group distribution of all new addiction practitioners



(each bar represents the proportion of new entrants to the profession in that age group; the total of all age groups is 100%)



## Exit from the addiction workforce

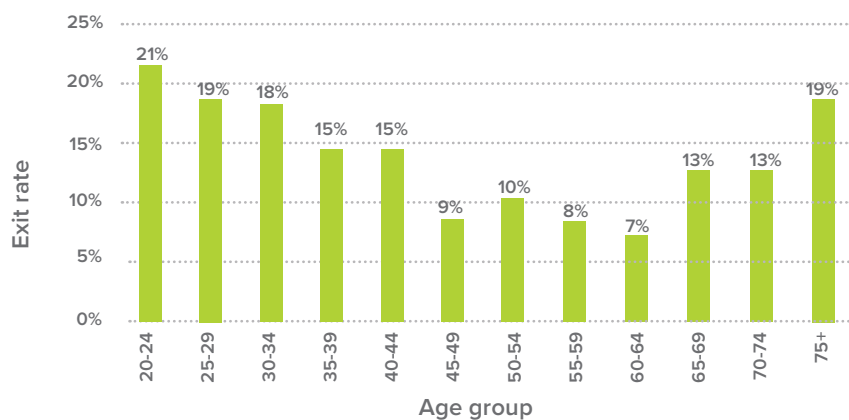
There is a relationship between people leaving the addiction sector and age. The diagram below shows the exit rate by age group using an average from 2020-2022. Each bar shows the percentage of people leaving the addiction sector by age group during the study period. For example, during this period, 21% of addiction practitioners aged 20-24 left the sector – this was a higher exit rate than for any other age group.

A higher proportion indicates that more people in this group are leaving as a proportion of the number of members that there are in this age group.

The two age groups exiting the sector at the highest rate proportionate to the members in their age group are 20-24-year-olds and 75+.

In contrast to other allied health professions working in the mental health and addiction sector, the exit rates remain quite high across all age groups and particularly from 25 to 44 years, where other professions may see a drop off in the exit rate as people settle into their roles and the sector.

## Exit rate of all addiction practitioners by age



Across this research series, we explore some of the reasons why we are experiencing an addiction workforce shortage. We also examine the findings from the review that help us to understand the challenges experienced by the workforce at different career or life stages, and we consider some of the opportunities to support the existing and grow the future addiction workforce.

The age profile of people entering and exiting the addiction workforce, and how it differs from other health workforces may be a useful place to start in identifying moments when kaimahi may require additional support or development to retain them in the sector. This profile shows us what is happening within the addiction workforce and deepens the understanding of how people enter and exit our profession.



### Other snapshots in this series:

1. The addiction workforce in Aotearoa | 1a. Profile of the addiction workforce | 2. Unpacking the workforce shortage
3. Why are people leaving? | 4. Ways to improve workforce retention | 5. Opportunities for growing the addiction workforce
6. Growing the workforce: Recruitment ideas and challenges | 7. Growing the workforce: New entrants and early career professionals

### About dapaanz and the 2023 addiction workforce review

Dapaanz represents the professional interests of people working in addiction treatment. We are dedicated to supporting our members in their mahi and careers, while fostering excellence in addiction practice.

We oversee the addiction intervention competency framework, which defines the addiction scope of practice, and we are kaitiaki of Tikanga Matatika, the code of ethics for the sector.

Our current focus is ensuring our members feel supported and nurtured so that they are excited about being addiction practitioners today and in the future.

In 2023, dapaanz commissioned a mixed methods review of the addiction workforce in Aotearoa. Drawing on multiple datasets, both published and unpublished, from a range of sources including Te Whatu Ora, Te Pou, and dapaanz, the data were organised into a coding framework and triangulated to identify overlapping patterns. A series of workshops and discussions were undertaken with sector representatives to gather additional insights and further feedback on the data findings. The review also distilled a number of findings from national and international literature.



**dapaanz**