AAVMC Statement on U.S. Veterinary Workforce
March 2024

Significant shortages of veterinarians exist across all sectors of professional activity and at all levels of specialization. Although precise numbers are difficult to quantify and specific predictions about future needs are subject to interpretation, the available evidence indicates that these shortages are a result of systemic, long-term trends in pet ownership and demand for veterinary services, along with limited capacity for training veterinary professionals, and are expected to continue unless the veterinary medical profession takes action.

DEMAND

Since 1980, U.S. households that purchase veterinary services have steadily increased expenditures at an inflation-adjusted rate of 2.9% per year. When considered along with growth in the number of households purchasing such services over the past 10 years, overall demand for veterinary services in the U.S. pet healthcare market has been increasing at an inflation-adjusted rate of over 6% per year.

Because about 75% of U.S. veterinarians are engaged in pet healthcare, a shortage in this sector has dramatic effects on the rest of the profession. As a result of the shortage, compensation packages in companion animal practice have increased substantially in recent years. Anecdotal evidence suggests that these compensation packages have effectively made other career pathways comparatively less attractive, likely tipping the career-choice scales for many candidates. Although a shortage of veterinarians stemming from several complex factors has already been recognized for years in the food animal and public health sectors, increasing compensation in companion animal practice is exacerbating this pre-existing situation. Similar compensation-related impacts should be expected for other career options, including research, teaching, diagnostic medicine, clinician scientists, and government service.

The shortage of specialty-trained veterinarians is especially pronounced. Insufficient capacity in primary care is frequently leading to extended wait times for appointments, often resulting in patients that are more seriously ill on presentation, and thereby more likely to require referral to a specialist. In addition, because veterinary healthcare teams are feeling overworked and overwhelmed, cases are increasingly being referred to specialists or routed through emergency services due to already stretched capacity for thorough and thoughtful case work-up, diagnosis, and treatment/management in the general practice.

Recent analysis revealed that the number of open positions for specialists exceeds the number of anticipated candidates available in the current employment market by as much as four
times. This situation is of particular concern for academic veterinary medicine, where as many as 50% of the faculty are trained in a recognized clinical specialty. In fact, review of current AAVMC internal data reveals a full 10% shortage of veterinary faculty. Because of specialists’ critical roles in this segment of the market – teaching and research – a prolonged shortage could have a disproportionate negative impact across the industry for years to come on access to care and scientific discovery.

SUPPLY

Since 2007, the number of U.S. veterinarians has been increasing at a rate of only 2.7% each year, and a substantial shortage exists today. In 2019, there were 2,000-3,000 more open jobs than veterinarians available to hire. Since at least 2014, 20-30% of US veterinarians every year have expressed a desire to work fewer hours, even if it meant lower compensation. It would require 4,500 to 6,000 additional FTE veterinarians to fully meet the desire to work less.

One commonly suggested remedy for the veterinarian shortage is expanded and more effective use of non-veterinary staff, especially credentialed veterinary nurses/technicians. However, analysis of this U.S. market indicates that over 50,000 additional nurses/technicians are needed to maximize productivity in companion animal practice today. Further, it would take 30 years of these graduates at current training capacity to meet projected needs in 2030. Clearly, this is not an immediate solution.

IMPLICATIONS

Because of the current veterinary workforce shortage, veterinary healthcare teams are feeling overworked and overwhelmed – burnout is high. But there are also broader societal impacts:

- Animal welfare implications exist for millions of pets and other animals. With inadequate access to veterinary care, greater rates of morbidity and mortality are likely across animal species and surrender of pets is expected to occur with greater frequency.
- Restricted access to veterinary care for underserved pet owners will have a disproportionate negative impact in historically disadvantaged communities, both in the near term and in the long run.
- The critical importance of pets to the overall wellbeing of humans, both physical and mental health, is becoming increasingly widely recognized. Assuring adequate access to veterinary healthcare will markedly improve public health, and decrease healthcare costs, for millions of pet owners.
- Zoonotic diseases – those that can be transmitted from animals to humans – are much more common than most people realize. In addition, the safety of animal-origin foods depends heavily on access to adequate veterinary care. From this perspective, the public health implications of a shortage of veterinarians are clear.
- For animal diseases and emergencies of major economic importance, such as African Swine Fever and Avian Influenza, veterinarians are our first line of defense for biosecurity, emergency preparedness and response. A veterinary workforce with inadequate capacity places our food systems and food security at risk.
ACTION

As a vital component of the U.S. healthcare and food systems, the veterinary workforce shortage warrants immediate attention. Although the situation is complex and multifactorial, several action steps should be considered:

- Increase veterinary student recruitment and enrollment with particular emphasis on diversity, equity, and inclusion.
- Explore innovative educational models and new training structures to increase capacity and minimize the total length of time for entry into the profession.
- Increase capacity to train veterinary nurses and technicians.
  - Develop and expand both Associate (AS) and Bachelor (BS) degree programs.
  - Increase engagement in Veterinary Technician Specialist (VTS) programs.
  - Initiate a profession-wide discussion to consider a new mid-level professional, similar in concept to a nurse practitioner or physician assistant.
- Enhance effectiveness of veterinary healthcare teams by encouraging a team-based approach to healthcare delivery so that each professional can work to the full scope of their training.
  - With progressive case management and care coordination in mind, clearly define distinct and complementary roles for credentialed veterinary nurses/technicians (trained at all levels), veterinarians, veterinary assistants, and a potential mid-level practitioner.
- Encourage veterinarians to choose careers that contribute to addressing the critical needs of underserved populations and develop innovative business models to ensure economic sustainability of serving these markets.
- Increase training capacity for veterinary faculty across veterinary specialties. Explore innovative training paradigms and collaborative public/private partnerships.
- Develop an ongoing research initiative focused on the veterinary workforce, with initial emphasis on efficiency of healthcare delivery as it relates to staffing, workflow, turnover, and attrition/retention. In addition, develop a better understanding of demand for veterinary medical services to enable robust projections of workforce needs.

SUMMARY

The current shortage of veterinarians in the U.S. is having a significant impact on access to healthcare for animals and the wellbeing of the veterinary healthcare team. AAVMC stands ready to work with partners from academia, veterinary medical associations, industry, and other stakeholders to ensure that veterinary medical colleges, and higher education more generally, effectively respond to the current shortages.


This statement should be cited as: