

Workers in key government public health occupations earn salaries well below the private sector, reveals study

February 12 2024



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A majority of public health occupations in health departments around the country pay workers substantially less compared to pay for workers in the same occupations in the private sector, according to new research

at Columbia University Mailman School of Public Health. While earlier studies have compared salaries between different occupations within health departments or asked respondents if they are satisfied with their salary, until now, few contrasted salaries for the same occupations within government versus the private sector or asked directly about wage competition.

The findings are [published](#) in *American Journal of Public Health*.

"Considering the potential recruitment challenges caused by salary disparities, several policy solutions might be considered including improvements in federal data on the public health workforce, with clearer salary information and workforce renumeration," said Heather Krasna, Ph.D., EdD, associate dean, Career and Professional Development at Columbia Mailman School. "For occupations paying lower wages, increases in salary should be considered if this is an option. Otherwise job seekers should focus on benefits, [work-life balance](#) and meaningful public service work as a motivator."

Using the U.S. Department of Labor's Occupational Employment and Wage Survey (OEWS), a semiannual mail survey on employment and wage estimates, Krasna and colleagues used May 2022 OEWS data, the most recent information available. OEWS estimates are based on data from every state, across all surveyed industries, and from establishments of varying sizes.

Referencing previous studies matching Standard Occupational Classification (SOC) codes with health department occupations, the researchers selected 44 standard codes and contrasted median salaries in OEWS for workers in each occupation within state or local [government](#) with workers in the same occupations outside government.

Of 44 occupations, 30 paid at least 5% less in government than the

[private sector](#). Occupations with the severest salary disparities, with median annual salaries paying between 20% and 47% lower in either local or [state government](#) as compared with the private sector, included management, leadership, program management, program evaluation, and policy occupations as well as computer-related occupations and epidemiologists.

Some occupations had higher salaries in local and state government than in private industry, according to Krasna. Six occupations, primarily in [social work](#) or counseling, paid 24% to 39% more in government. Overall, those with the largest wage advantage in government were primarily in community and social service occupations or related human services roles.

Salary differences for many—but not all—occupations appear substantial, especially for technical, research, management, and leadership roles, according to Krasna. "Based on the limited federal data available, many public health [occupations](#) in local or state government appear to face serious wage competition, especially from the for-profit sector, and particularly from professional, scientific, and technical services, and from large health care organizations," she noted.

"We urge that health departments consider adjusting their salaries, marketing their strong benefits or public service mission, or use creative recruitment incentives such as student loan repayment programs for hard-to-fill roles for a sustainable public health workforce. When epidemiologists can earn \$23,000 more and emergency management directors \$33,460 more by quitting their jobs in [health departments](#) to work in private industry, we might wonder who will respond to the next pandemic or public health emergency."

Co-authors are Malvika Venkataraman and Isabella Patino, Columbia Mailman School of Public Health.

More information: Heather Krasna et al, Salary Disparities in Public Health Occupations: Analysis of Federal Data, 2021–2022, *American Journal of Public Health* (2024). [DOI: 10.2105/AJPH.2023.307512](https://doi.org/10.2105/AJPH.2023.307512)

Provided by Columbia University's Mailman School of Public Health

Citation: Workers in key government public health occupations earn salaries well below the private sector, reveals study (2024, February 12) retrieved 9 May 2024 from <https://medicalxpress.com/news/2024-02-workers-key-health-occupations-salaries.html>

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