Osteopaths

2017 Factsheet

Osteopaths are registered healthcare practitioners who provide direct manual therapy interventions including exercise prescription and lifestyle advice to improve movement, reduce pain and manage and/or treat a range of physical impairments.

To gain registration as an osteopath, practitioners must complete a minimum five-year undergraduate, or four-year combined undergraduate/Master program of study, approved by the Osteopathy Board of Australia.

The following analysis of the osteopathy workforce is drawn from the number of osteopaths with general registration who were employed (2,023 in 2017) unless otherwise stated.

Workforce

Figure 1: Osteopathy registrations, 2017

The number of registered osteopaths increased by 17.1% from 1,968 in 2014 to 2,304 in 2017 (average annual increase of 5.4%). The number of employed osteopaths ("workforce") increased by 16.5% from 1,737 to 2,023 over the same period (an average annual increase of 5.2%).

Table 1: Osteopaths, 2014-2017

<table>
<thead>
<tr>
<th>Year</th>
<th>Registered</th>
<th>Employed</th>
<th>Clinicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>1,968</td>
<td>1,737</td>
<td>1,679</td>
</tr>
<tr>
<td>2015</td>
<td>2,061</td>
<td>1,833</td>
<td>1,766</td>
</tr>
<tr>
<td>2016</td>
<td>2,172</td>
<td>1,914</td>
<td>1,847</td>
</tr>
<tr>
<td>2017</td>
<td>2,304</td>
<td>2,023</td>
<td>1,957</td>
</tr>
</tbody>
</table>

Avg. Annual Growth:
- 5.4%
- 5.2%

Demographics

In 2017, female osteopaths comprised 53.4% of the workforce; an increase from 51.7% in 2014.

Figure 2: Gender distribution, 2014-2017

In 2017, the average age of the workforce was 38.8 years, an increase from 38.5 years in 2014. The proportion of female osteopaths aged 35-44 years increased from 15.4% of the workforce in 2014 to 18.4% in 2017.

Figure 3: Age and gender distribution, 2014 and 2017

Quick Facts - 2017

<table>
<thead>
<tr>
<th>Data Point</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average age</td>
<td>38.8</td>
</tr>
<tr>
<td>Average weekly hours</td>
<td>33.3</td>
</tr>
<tr>
<td>% female</td>
<td>53.4</td>
</tr>
<tr>
<td>% born in Australia</td>
<td>80.5</td>
</tr>
<tr>
<td>% Aboriginal and/or Torres Strait Islander</td>
<td>0.7</td>
</tr>
<tr>
<td>% with Australian qualifications</td>
<td>84.8</td>
</tr>
<tr>
<td>% in major cities</td>
<td>80.1</td>
</tr>
</tbody>
</table>
Replacement Rate
In 2017, there were 3.2 new registrants for every osteopath that did not renew their registration from 2016.

Hours Worked
In 2017, osteopaths worked an average of 33.3 hours per week in total, and worked an average of 3.9 hours per week in non-clinical roles.

Table 2: Average hours per week, 2014-2017

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>30.2</td>
<td>30.0</td>
<td>29.7</td>
<td>29.4</td>
</tr>
<tr>
<td>Non-clinical</td>
<td>3.9</td>
<td>3.7</td>
<td>4.0</td>
<td>3.9</td>
</tr>
<tr>
<td>Total</td>
<td>34.0</td>
<td>33.7</td>
<td>33.7</td>
<td>33.3</td>
</tr>
</tbody>
</table>

In 2017, male osteopaths worked an average of 37.7 hours per week, decreasing from 38.7 hours in 2014. Female osteopaths worked an average of 29.4 hours per week, decreasing from 29.7 hours in 2014. Males aged 35-44 worked the longest hours on average, at 40.7 hours per week.

Figure 5: Average hours per week by gender and age group, 2014 and 2017

Principal Role
In 2017, 96.7% of the osteopaths worked as clinicians - remaining unchanged from 2014.

Table 3: Principal role, 2014 and 2017

<table>
<thead>
<tr>
<th>Principal role</th>
<th>2014</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Headcount</td>
<td>%</td>
</tr>
<tr>
<td>Clinician</td>
<td>1,679</td>
<td>96.7</td>
</tr>
<tr>
<td>Administrator</td>
<td>22</td>
<td>1.3</td>
</tr>
<tr>
<td>Teacher or educator</td>
<td>19</td>
<td>1.1</td>
</tr>
<tr>
<td>Researcher</td>
<td>5</td>
<td>0.3</td>
</tr>
<tr>
<td>Other</td>
<td>12</td>
<td>0.7</td>
</tr>
<tr>
<td>Total</td>
<td>1,737</td>
<td>100</td>
</tr>
</tbody>
</table>

Endorsement
In 2014 and 2017, 0.1% of the osteopathy workforce held an acupuncture endorsement.

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Principal Work Sector
In 2017, 3.1% of the workforce reported that in their principal role, they worked only in the public sector - an increase from 3.0% in 2014.

Figure 6: Sector in which clinical hours were worked, 2014 and 2017

Principal Work Setting
In 2017, 69.6% of osteopaths worked in a Group private practice setting, a decrease from 70.4% in 2014, and 28.2% worked in Solo private practice, an increase from 27.3% in 2014.

In 2017, osteopaths working in Commercial/business services reported the highest average weekly hours (34.2) and those in Locum private practice reported the lowest average weekly hours (27.3).

Table 4: Principal work setting, 2014 and 2017

<table>
<thead>
<tr>
<th>Principal work setting</th>
<th>2014</th>
<th></th>
<th>2017</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Headcount</td>
<td>Avg. total hours</td>
<td>Headcount</td>
<td>Avg. total hours</td>
</tr>
<tr>
<td>Group private practice</td>
<td>1,223</td>
<td>34.3</td>
<td>1,409</td>
<td>33.9</td>
</tr>
<tr>
<td>Solo private practice</td>
<td>475</td>
<td>33.5</td>
<td>570</td>
<td>31.8</td>
</tr>
<tr>
<td>Educational facility</td>
<td>19</td>
<td>38.1</td>
<td>22</td>
<td>34.2</td>
</tr>
<tr>
<td>Commercial/business service</td>
<td>NP</td>
<td>15.0</td>
<td>7</td>
<td>34.3</td>
</tr>
<tr>
<td>Other</td>
<td>NP</td>
<td>27.3</td>
<td>7</td>
<td>30.3</td>
</tr>
<tr>
<td>Locum private practice</td>
<td>10</td>
<td>29.5</td>
<td>4</td>
<td>27.3</td>
</tr>
<tr>
<td>Residential aged care facility</td>
<td>NP</td>
<td>55.0</td>
<td>4</td>
<td>32.0</td>
</tr>
<tr>
<td>Total</td>
<td>1,737</td>
<td>34.0</td>
<td>2,023</td>
<td>33.3</td>
</tr>
</tbody>
</table>

Initial Qualification
The workforce survey asks osteopaths where they obtained their initial qualification. In 2017, 84.8% of the workforce obtained their initial qualification in Australia and 9.7% obtained their initial qualification overseas.

In 2017, osteopaths had, on average, worked 12 years in the profession and intended to work for another 21 years. In 2014, osteopaths had worked 11 years on average and intended to work for another 22 years.

Working Intentions

Distribution

State and Territory

In 2017, the jurisdictions with the highest rates of full-time equivalent osteopaths per 100,000 population (FTE rate) were VIC and the ACT. Between 2014 and 2017, the total FTE rate increased from 6.6 to 7.2 and VIC had the largest FTE rate increase (2.0).

Table 5: Distribution by state/territory, 2017

<table>
<thead>
<tr>
<th>State / Territory</th>
<th>Headcount</th>
<th>Total FTE</th>
<th>Avg. total hours</th>
<th>(^2)FTE rate per 100,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSW</td>
<td>515</td>
<td>441.2</td>
<td>32.6</td>
<td>5.6</td>
</tr>
<tr>
<td>VIC</td>
<td>1,154</td>
<td>1,099.0</td>
<td>33.2</td>
<td>16.0</td>
</tr>
<tr>
<td>QLD</td>
<td>197</td>
<td>182.9</td>
<td>35.3</td>
<td>3.7</td>
</tr>
<tr>
<td>SA</td>
<td>33</td>
<td>31.1</td>
<td>35.8</td>
<td>1.8</td>
</tr>
<tr>
<td>WA</td>
<td>52</td>
<td>43.3</td>
<td>31.7</td>
<td>1.7</td>
</tr>
<tr>
<td>TAS</td>
<td>39</td>
<td>31.8</td>
<td>31.0</td>
<td>6.1</td>
</tr>
<tr>
<td>ACT</td>
<td>NP</td>
<td>NP</td>
<td>38.1</td>
<td>7.6</td>
</tr>
<tr>
<td>NT</td>
<td>NP</td>
<td>NP</td>
<td>33.0</td>
<td>0.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,023</strong></td>
<td><strong>1,772.0</strong></td>
<td><strong>33.3</strong></td>
<td><strong>7.2</strong></td>
</tr>
</tbody>
</table>

Note: ‘Not stated/Unknown’ is excluded from table but included in the total.

In 2017, osteopaths in the ACT worked the most hours per week on average (38.1 hours) and those in TAS worked the fewest (31.0 hours).

Remoteness Area

In 2017, 97.1% of osteopaths worked in either major cities or inner regional locations, compared to 97.3% in 2014.

Between 2014 and 2017, the largest shift in average hours worked was in outer regional areas, decreasing from 35.2 hours per week in 2014 to 31.6 hours in 2017. However, due to the increase in the number of osteopaths in outer regional areas, the FTE rate in increased by 0.4.

Table 6: Distribution by remoteness area, 2017

<table>
<thead>
<tr>
<th>Remoteness Area</th>
<th>Headcount</th>
<th>Total FTE</th>
<th>Avg. total hours</th>
<th>(^2)FTE rate per 100,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major cities</td>
<td>1,620</td>
<td>1,437.5</td>
<td>33.7</td>
<td>8.1</td>
</tr>
<tr>
<td>Inner regional</td>
<td>344</td>
<td>285.2</td>
<td>31.5</td>
<td>6.5</td>
</tr>
<tr>
<td>Outer regional</td>
<td>NP</td>
<td>NP</td>
<td>31.6</td>
<td>2.4</td>
</tr>
<tr>
<td>Remote</td>
<td>NP</td>
<td>NP</td>
<td>38.0</td>
<td>0.3</td>
</tr>
<tr>
<td>Very remote</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,023</strong></td>
<td><strong>1,772.0</strong></td>
<td><strong>33.3</strong></td>
<td><strong>7.2</strong></td>
</tr>
</tbody>
</table>

Note: ‘Not stated/Unknown’ are excluded from table but are included in the total.

Other Work Location Outside Major Cities

In 2017, 6.3% of the osteopathy workforce reported that they had worked in a regional, rural or remote location, in addition to their principal job location. Of these respondents, 71.1% had worked in an inner regional location, and 15.6% had worked in an outer regional location.

Modified Monash Model

In 2017, the majority (81.1%) of FTE osteopaths were located in a major city or a location considered as MMM1 under the Modified Monash Model (MMM) classification system, down from 81.7% in 2014.

(See [www.doctorconnect.gov.au](http://www.doctorconnect.gov.au) for more information on the MMM.)

MMM1 locations had the highest FTE rate of osteopaths (8.2), followed by MMM4 (7.0) FTE. The lowest FTE rate was in MMM6 locations (0.3) – noting that there were no osteopaths in MMM7.
Tele-Health

The workforce survey asks osteopaths to report their hours practiced via tele-health in osteopathy in the previous year.

Note: Tele-health is the use of telecommunication techniques for the purpose of providing telemedicine, medical education, and health education over a distance.

A total of 70 osteopaths (3.5%) provided a response to the Tele-Health question in 2017. On average, these respondents practiced via Tele-Health for 16.2 hours per week, with the majority (82.9%) of Tele-Health services provided by osteopaths based in a major city.

Table 7: Tele-Health osteopaths by remoteness location, 2017

<table>
<thead>
<tr>
<th>Major cities</th>
<th>Inner regional</th>
<th>Outer regional</th>
<th>Remote</th>
<th>Very remote</th>
</tr>
</thead>
<tbody>
<tr>
<td>82.9%</td>
<td>12.9%</td>
<td>4.3%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Note: The tele-health workforce remoteness location refers to the location of the Practitioner, not the location of the person receiving the service.

References

2) ABS - 3218.0 - Regional Population Growth, Australia, 2016-17, Released 31/08/18.

Notes

1) ‘NP’ denotes figures that are not published (suppressed) for confidentiality reasons
2) The 2013-2016 NHWDS have been revised due to an error in recoding the missing values for job role. As such the figures may not match those that were previously published.
3) FTE number measures the number of standard-hour workloads worked by employed health practitioners. The FTE number provides a useful measure of supply because it takes into account both the number of practitioners who are working and the hours that they work. FTE number is calculated based on the total hours worked in a ‘standard working week’. The standard working week is assumed to be 38 hours, equivalent to 1 FTE for all practitioners with the exception of medical practitioners where it is assumed to be 40 hours.

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