



PROFESSIONAL STATUS SURVEY 2018: EXECUTIVE SUMMARY

Facts about the Genetic Counseling Profession

Did you know...?

- ✓ Genetic Counselor was named one of the “25 Amazing Healthcare Support Jobs” for 2016 in an article published by U.S. News and World Report¹.
- ✓ The U.S. Bureau of Labor Statistics² projects a growth rate of 29% for genetic counseling positions over the years 2016 to 2026. This far exceeds the average growth rate of 7% for all occupations.
- ✓ Genetic counselors work in a variety of settings, including university medical centers, private and public hospitals/medical facilities, diagnostic laboratories, health maintenance organizations, not-for-profit organizations, and government organizations and agencies.
- ✓ Genetic counselors can work in multiple areas of practice, including prenatal, cardiovascular disease, cancer, metabolic disease, neurology, pediatrics, infertility, pharmacogenetics, genomic medicine, and others.
- ✓ Increasing demands for genetic expertise in varied fields provides genetic counselors new ways of using their training in genetic counseling. These include working in **administration, research**, public and professional education, web content development, public health, laboratory support, public policy, and consulting.
- ✓ The average salary for a full-time genetic counselor is \$88,498³ but can reach up to \$246,000 depending on specialty area and experience.
- ✓ Most genetic counselors have a Master’s degree in human genetics or genetic counseling.
- ✓ Nine of ten genetic counselors (91%) report they are satisfied with their current job.
- ✓ The National Society of Genetic Counselors (NSGC), founded in 1979, promotes the professional interests of genetic counselors and provides a network for professional communications. As of 2018, NSGC has over 3,600 members.
- ✓ The American Board of Genetic Counseling (ABGC) is a not-for-profit organization incorporated in 1993 for the purpose of certifying and recertifying genetic counselors. As of the date of this survey, ABGC has over 4,600 certified genetic counselors, an increase of 95% over the number of certified genetic counselors in 2008.
- ✓ The Accreditation Council for Genetic Counseling (ACGC) accredits genetic counseling training programs. As of May 2018, there are 43 accredited training programs in the U.S. and Canada.
- ✓ The Canadian Association of Genetic Counsellors (**CAGC**) was formed in 1987 with the goal of promoting high standards of practice, facilitating and supporting professional growth and increasing public awareness of the genetic counselling profession in Canada. **CAGC** has a membership of over 340 genetic counselors.

¹<http://money.usnews.com/money/careers/slideshows/25-amazing-health-care-support-jobs-for-2016>

²<http://www.bls.gov/ooh/healthcare/genetic-counselors.htm>

³Data from the PSS 2018.

About the Survey

The National Society of Genetic Counselors (NSGC) administers a biennial Professional Status Survey (PSS) to its members. Since the survey was first administered in 1980, results from the NSGC PSS have served many purposes, including establishing benchmarks for salaries and benefits for genetic counselors, identifying workforce issues, and gauging job and professional satisfaction in the genetic counseling community. Data from the PSS originates from genetic counselors who provide **direct patient care** as well as those who do not provide direct care and work in commercial diagnostic laboratories, research, and public health.

The published reports from the PSS provide a detailed profile of the current genetic counseling community and identify new and emerging trends in this growing profession. The analysis also provides information useful to individual genetic counselors and those who interact with them, including prospective employers, human resource departments, medical associations, as well as individuals who are considering entering the profession or obtaining genetic counseling services.

The 2018 PSS

The Professional Status Survey (PSS) was administered from January 8th, 2018 through February 28th, 2018 to genetic counselors who are either full or new members of the National Society of Genetic Counselors (NSGC), the Canadian Association of Genetic Counselors (CAGC), or diplomates of the American Board of Genetic Counseling (ABGC).



A total of 2,543 completed surveys were received from the 4,780 solicited from the three organizations, resulting in a 53% percent response rate. This is an equivalent response rate to NSGC Professional Status Surveys administered in previous years, and demonstrates the widespread interest in sharing professional information. The response rate also reflects the commitment genetic counselors have to their profession and to the NSGC.

Scope of the PSS

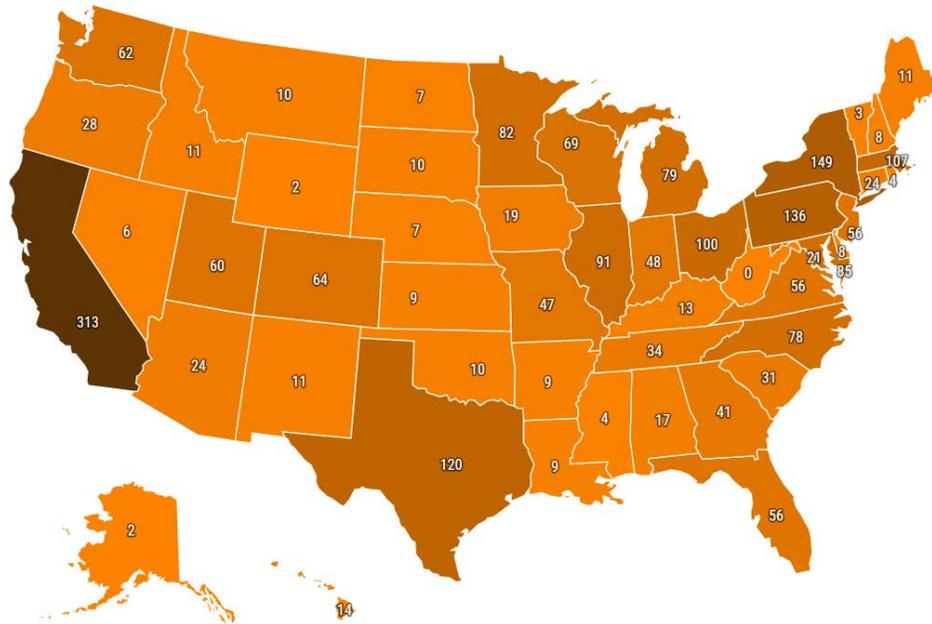
The Professional Status Survey addresses more than 200 questions in the following areas:

- Genetic Counselor Preparation and Education
- Salary and Benefits
- Job Satisfaction
- Job Descriptions
- Work Environment
- Board Certification/Licensure/Credentialing
- Faculty Appointments
- Professional Activities

Geographical Representation

The 2018 PSS generated responses from every U.S. state except West Virginia. Over half of survey respondents (52%) work in ten U.S. states (in descending order; generated from work zip codes): California, New York, Pennsylvania, Texas, Massachusetts, Ohio, Illinois, Maryland, Minnesota, and Michigan.

Figure 1. PSS Respondents: United States



Canadian genetic counselors represent a growing share of respondents to the PSS: 5% in 2016, and 7% in 2018. The increase in percentage and overall number of Canadian respondents is due, in large part, to the new 2018 PSS partnership with **CAGC**. The majority of Canadian respondents work in Ontario (51%), followed by British Columbia (18%).

Please note that the PSS analysis does not show any survey responses by geographical regions where there are fewer than five respondents.

Figure 2. PSS Respondents: Canada



Data Analysis & Methodology

The online administration of the PSS was completed in February 2018. The survey data were independently analyzed by Boston Information Solutions using SPSS⁴ version 25. The data were further validated to eliminate inconsistencies, duplicates, outliers, input errors and other data anomalies.

Frequencies and means reported are based on the number of respondents who answered the specific question. Statistical comparisons of group differences, such as T-tests and Chi-Square procedures, are calculated at $p < .05$. More information can be found in the *Demographics & Methodology Report*.

Geographic Data

The 2018 PSS asked genetic counselors to furnish their home zip codes, their work zip codes, and their employer's zip code if they **work remotely**. Descriptive and comparative geographical data seen throughout the series of PSS reports (U.S. states, major metro areas, NSGC regions, and Canadian provinces) are derived from the work zip codes reported by genetic counselors.

Remote Workers

Approximately one third (32%) of genetic counselors who responded to the PSS **work remotely**, either some or all of the time. About half of the remote workers are required by their employer to do so as part of their position, and the other half have a flexible role and can decide to work a given number of hours or days remotely.

Among genetic counselors who **work remotely** 100% of the time (434 genetic counselors, 54% of remote workers), nine of ten (90%) work in a different state than their employer. Our analysis found that the salaries of the remote workers were statistically aligned with the state where they physically work compared to the state of their employing company. In other words, a remote worker who is employed by a California company and works in Colorado is more likely to have a salary on par with Colorado workers than California workers. Therefore, genetic counselors who **work remotely** 100% of the time are included among other workers in the U.S. state or Canadian province where they work.

Salary Data

Information about the salaries of genetic counselors is one of the most useful aspects of the PSS. The accuracy and specificity of the compensation analyses depends on the willingness of genetic counselors to divulge this sensitive information and trust that it will be held in the strictest confidence.

Over the past two decades, the NSGC has adhered to a strict policy whereby no aggregate salary information will be shared when $N < 5$, or in cases where any individual or group of genetic counselors might be personally identified. Additionally, PSS data are analyzed by professionals with no affiliation to the NSGC and who are not in the genetic counseling community.

Of the 2,543 total respondents to the 2018 PSS, a record 2,122 (83%) shared salary information. Canadian dollars were converted to U.S. dollars for comparability, as were the handful of salaries reported by genetic counselors who lived or worked outside the U.S and Canada. Statistical outliers (extreme high and low salaries) were removed before analyses were performed using an

⁴ SPSS (Statistical Package for the Social Sciences) is a widely used program for statistical analysis in social science.

Interquartile Range Rule of 3. Unless otherwise noted, salary comparisons are for full-time genetic counselors (part-time salaries were not converted into full-time equivalents). Salary information for part-time workers is reported separately. More detailed information about compensation levels for genetic counselors can be found in the *Salary & Benefits Report*.

Genetic Counselor Positions

The majority of PSS respondents reported working full-time (defined as 37.5 or more hours per week). Most respondents to the PSS provide **direct patient care** as a regular part of their jobs (59%), while 25% do not provide **direct patient care**, and 16% provide both⁵. Also, over the past two decades the percentage of genetic counselors who do not provide **direct patient care** has grown as the profession has expanded to include new roles⁶.



Three-quarters of genetic counselors work in one of just four settings: university medical center (30%), diagnostic laboratory (commercial, non-academic) (18%), or a public or private hospital or medical facility (31%). As would be expected, those who provide **direct patient care** were more likely to be employed in a hospital or other medical setting than those in **non-direct patient care** or **mixed** positions. Conversely, those who had no direct patient contact were more likely to be employed in a commercial, non-academic diagnostic laboratory.

Cancer and Prenatal were the most frequently cited specific practice areas by a substantial margin – together, they were chosen by 78% of the respondents. This is similar to the total found in the 2016 survey. As in 2016, the next two most common areas reported were Pediatrics and General Genetics.

Table 1. Top 5 Areas of Practice	Direct patient care		Non-direct patient care		Mixed position		Total	
	N	Percent	N	Percent	N	Percent	N	Percent
Cancer	773	52%	214	35%	155	39%	1,142	46%
Prenatal	609	41%	102	17%	91	23%	802	32%
Pediatrics	431	29%	56	9%	94	24%	581	23%
General Genetics	404	27%	91	15%	76	19%	571	23%
Preconception	302	20%	64	10%	69	18%	435	18%

⁵ One quarter of the respondents report no **direct patient care** activities. Among those who hold a **mixed** position, only 19% report providing **direct patient care** more than half the time. Because of the importance of this factor, the analyses shown in the PSS reports are presented in tables that separate out the position types as well as totals across the different position types. Statements about differences across groups are made when the difference is statistically significant.

⁶ The 2018 PSS is the first to ask about **direct patient care** versus non-direct care, so direct comparisons with the 2016 PSS results are not available. The 2016 PSS asked respondents to self-classify their work as “Clinical,” “Non-Clinical,” or “Mixed.” Of those who answered this question 58% percent said they were in a clinical position, 22% said “non-clinical,” and 17% described their position as “mixed.”

Within their primary **area of practice**, the top roles reported by genetic counselors were clinical care (71%), student supervision (31%), and clinical coordination (28%). Responses varied greatly across those in **direct patient care** positions, **non-direct patient care** positions, and **mixed** positions, as would be expected. For more information please see the *Work Environment Report*.

Salary & Benefits

The average yearly gross salary reported by full-time genetic counselors was \$88,498. This is significantly higher⁷ than 2016's average of \$81,377. The median salary for a full-time genetic counselor was \$82,000, compared to \$75,000 in 2016.

Salaries differed by the type of position a genetic counselor holds. In general, full-time genetic counselors in non-direct care positions earned the most, followed by genetic counselors in **mixed** positions, and then those in **direct patient care** positions.



Table 2. Full-Time Genetic Counselors	N	Mean	Median	Min	Max
Direct patient care	1,105	\$79,364	\$76,000	\$29,626	\$175,000
Non-direct patient care	536	\$105,356	\$99,558	\$46,769	\$226,700
Mixed position	332	\$91,708	\$86,247	\$35,100	\$246,306

The top ten benefits offered to full- and part-time genetic counselors are shown below. For more information about genetic counselor salaries, benefits, and other forms of compensation, please see the *Salary & Benefits Report*.

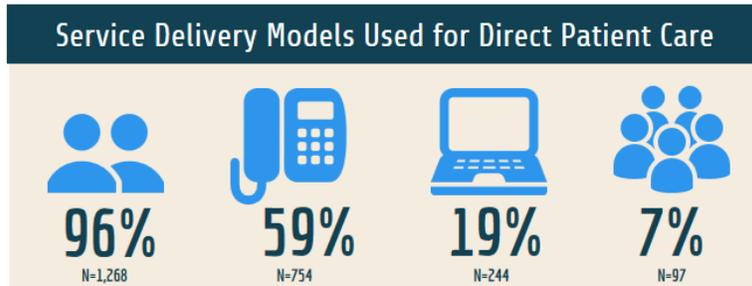
Table 3. Benefits	Full-Time		Part-Time		Total	
Health insurance	2,074	95%	200	67%	2,274	92%
Dental insurance	2,005	92%	180	60%	2,185	88%
Life insurance	1,884	87%	174	58%	2,058	83%
Continuing Education/Conference funding	1,829	84%	192	64%	2,021	82%
Vision plan	1,860	86%	160	54%	2,020	82%
Disability (short or long term) insurance	1,849	85%	170	57%	2,019	82%
Retirement savings (with employer match)	1,671	77%	168	56%	1,839	74%
Pre-tax expense accounts (childcare, medical)	1,408	65%	143	48%	1,551	63%
Accidental death and dismemberment insurance	1,372	63%	132	44%	1,504	61%

Respondents could select more than one item, so the total will not add up to 100%. Percentages reflect the total number of respondents indicating each item divided by the total number who responded to the question.

⁷ $p < .01$.

Service Delivery and Access to Care

The most common delivery method reported among genetic counselors is still in-person (96%), followed by phone (59%), web-based or video (19%), and group counseling (7%). Please note that survey respondents could indicate more than one service delivery model as genetic counselors may employ more than one model in providing **direct patient care**. Therefore, the percentages below will add up to more than 100%.



Percentages include **direct patient care** providers and **mixed** care providers who provide direct care to patients more than 50% of the time.

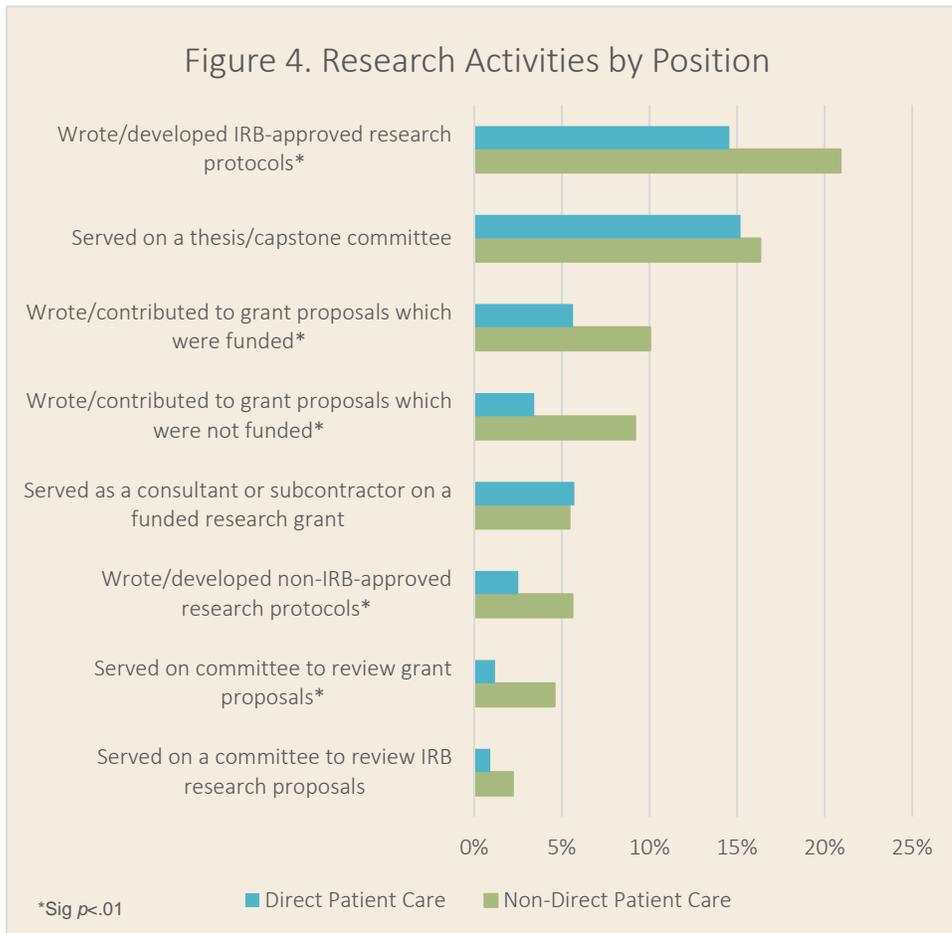
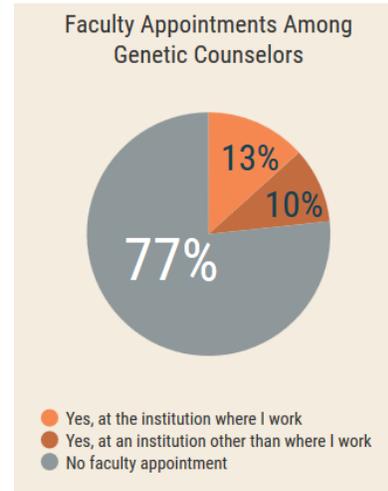
The graph below shows that, for new patients, the wait time (**third next available appointment**) to see a genetic counselor is significantly less than to see a genetic counselor accompanied by a physician. More information by **area of practice** can be found in the *Service Delivery & Access to Care Report*.



Professional Contributions

Approximately 23% of genetic counselors who responded to the 2018 PSS had faculty appointments. The most common appointment was as an adjunct instructor (16%), followed by assistant professor (14%), and instructor (12%).

One in five genetic counselors reported being involved in research activities (21%). Genetic counselors who do not provide **direct patient care** were significantly more likely to be engaged in research activities than genetic counselors who provide **direct patient care**⁸.



⁸ $p < .01$

A large proportion of genetic counselors who responded to the PSS were involved in teaching. The most commonly taught audiences were genetic counselors and/or genetic counseling students (69%), followed by medical students (51%), and physicians (47%).

Well over half of genetic counselors who responded to the 2018 PSS (64%) reported that they authored or co-authored publications in 2016-2017. The most common publications were abstracts and/or posters (46%), followed by peer-reviewed original research (24%), and website content and/or web education modules (13%).

In addition, many genetic counselors who responded to the PSS (44%) contributed posters and/or presentations at professional meetings in 2016 and 2017. For more information about the professional activities undertaken by genetic counselors, please see the *Professional Overview & Satisfaction Report*.

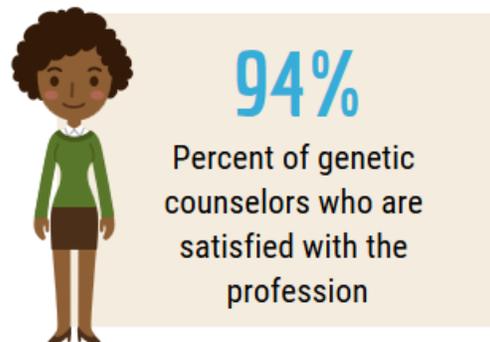
Table 4. Posters/Presentations at Professional Meeting 2016-2017	N	Percent
No posters/presentations	1,398	56%
Yes, poster presentation(s) at a genetics-focused meeting	803	32%
Yes, platform presentation(s)/workshop(s) at a genetics-focused meeting	284	11%
Yes, poster presentation(s) at a non-genetics-focused meeting	178	7%
Yes, platform presentation(s)/workshop(s) at a non-genetics-focused meeting	162	7%

Respondents could select more than one item, so the total will not add up to 100%. Percentages reflect the total number of respondents indicating each item divided by the total number who responded to the question.

Satisfaction with the Genetic Counseling Profession

Almost all genetic counselors who responded to the 2018 PSS (94%) reported they are “satisfied” or “highly satisfied” with the genetic counseling profession. This high level of satisfaction exists regardless of position type (**direct patient care, non-direct patient care, or mixed**).

For more information please see the *Professional Overview & Satisfaction Report*.



Find Out More

Six reports were authored to document results from the 2018 PSS. Please contact the NSGC if you would like copies of the reports.

1. **The Demographics & Methodology Report** shows who responded to the 2018 PSS by gender, race/ethnicity, geographic representation, education, years of experience, and many other variables of interest.
2. **The Salary & Benefits Report** provides detailed analyses of salaries in the genetic counseling profession. The report also provides information about per diem and hourly rates, bonuses and commissions, average raises and extra income, benefits, vacation time, conference funding and employer-funded extras for genetic counselors.
3. **The Work Environment Report** provides information from genetic counselors about the nature of their work, areas of practice, and involvement in professional activities.
4. **The Service Delivery & Access to Care Report** details how genetic counselors deliver their services to clients, weekly caseloads, and patient access to genetic counselors.
5. **The Professional Overview & Satisfaction Report** examines the various facets of satisfaction with the genetic counseling profession.
6. **The Executive Summary** provides a high-level overview of the survey responses of most interest to members of the NSGC and others who may be interested in the results of the 2018 PSS.

The National Society of Genetic Counselors (NSGC), incorporated in 1979, is the leading voice, authority and advocate for the genetic counseling profession, representing more than 3,600 health professionals. NSGC advances the various roles of genetic counselors in health care by fostering education, research, and public policy to ensure the availability of quality genetic services and is committed to ensuring that the public has access to genetic counseling and genetic testing.

For additional information about NSGC, visit www.nsgc.org.

For additional information about genetic counselors, please visit www.aboutgeneticcounselors.com

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