



# HIGHLIGHTS

*of the report on  
Health Equity and  
Racial and Ethnic  
Workforce Diversity*

## *How to Address the Shortage of Racially and Ethnically Diverse Health Professionals*

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» ALTHOUGH THEIR NUMBERS ARE GROWING IN COLORADO AND THE NATION, RACIAL AND ETHNIC MINORITIES ARE STRICTLY THE MINORITY IN THE HEALTH CARE WORKFORCE. For instance:

- Racial and ethnic minorities are underrepresented across all health professions in Colorado with the exception of certified nurse aides.
- Almost all (98%) of Colorado's local health department top executives are white.
- Nationally, people of color make up 14 percent of physicians, 5 percent of dentists, 14 percent of nurses, and 17 percent of city and county public health officials.
- Almost all (98%) senior managers in health care organizations across the nation are white.

This situation does not match the evolving racial and ethnic makeup of the nation or Colorado. People of color make up more than 30 percent of Coloradans and 35 percent of the U.S. population. Given that communities of color experience a disproportionate burden of morbidity and mortality, increasing workforce diversity is vital to eliminating health disparities. Studies show providers of color are more likely to practice in underserved areas with greater racial and ethnic minority populations and serve patients of color who are uninsured or underinsured.

The Colorado Trust paper, *Health Equity and Racial and Ethnic Workforce Diversity*, examines the makeup of the health care workforce in Colorado and nationally, health equity provisions in the 2010 Patient Protection and Affordable Care Act (ACA) that pertain to workforce diversity and misconceptions that stand

as barriers to diversifying the health care workforce. It also highlights how some Colorado organizations are increasing their workforce diversity and provides recommendations for health care organizations. These recommendations come from recipients of grants and the technical assistance providers under the Equality in Health initiative, a seven-year effort funded by The Colorado Trust to reduce racial and ethnic health disparities in Colorado.

**"There is a comfort level that is almost immediately apparent when [patients] are served by someone like them. It makes a phenomenal difference."**

*– Kraig Burlison, Chief Executive Officer,  
Inner City Health Center, Denver*

# HEALTH EQUITY AND RACIAL AND ETHNIC WORKFORCE DIVERSITY

## OPPORTUNITIES

The ACA presents opportunities for health care organizations to address fundamental health inequities. The ACA includes workforce diversity provisions designed to:

Assess...	Develop...	Train...	Increase...	Encourage...
» Whether current workforce meets health care needs of all individuals	» Strategies to increase workforce diversity » Information on health care workforce issues	» Workforce on how to provide culturally and linguistically appropriate services to diverse communities	» Financial support for students in health profession programs » Availability and accuracy of workforce data » Retention and representation of minority faculty members in health care programs	» Utilization of community health workers

## BARRIERS

To make the most of the available opportunities to diversify the workforce, however, health care organizations will need to address misconceptions such as:

- Believing that an organization does not need to focus on diversity because it is already diverse
- Expecting no qualified people of color to apply for job openings
- Assuming that a person of color will automatically improve the organization's relationship with diverse communities
- Presuming that all people of color are culturally inclusive
- Believing everyone should be treated the same rather than equitably.

## SUCCESS FACTORS

In spite of the barriers, a number of organizations in Colorado and across the nation are making strides in diversifying their health care workforce. These organizations have taken steps to make workforce diversity a priority, including:

STEP	METHODS
ANALYZING STATUS	<ul style="list-style-type: none"> <li>■ Examine patient, community and staff demographics</li> <li>■ Review staff perceptions of the organization and its diversity and staff capacity to serve diverse communities</li> <li>■ Identify areas for policy development</li> <li>■ Assess organizational readiness for change</li> </ul>
DEVELOPING STRATEGIES	<ul style="list-style-type: none"> <li>■ Assess the organization's needs related to workforce diversity</li> <li>■ Create recruitment strategies for people of color to join the staff or board</li> <li>■ Create a desirable work environment for people of color</li> <li>■ Evaluate policies and procedures to determine where changes are needed</li> </ul>
COMMUNICATING STRATEGIES	<ul style="list-style-type: none"> <li>■ Assure staff and board understand how diversity relates to goals and mission</li> <li>■ Articulate staff and board roles in increasing diversity</li> <li>■ Strengthen relationships with diverse communities</li> </ul>
MONITORING PROGRESS	<ul style="list-style-type: none"> <li>■ Form an advisory council to gauge success of efforts</li> <li>■ Track changes in patient and staff demographics</li> <li>■ Develop surveys to assess changes in patient and staff perceptions</li> <li>■ Provide suggestions for continued growth</li> </ul>
EXPANDING EFFORTS	<ul style="list-style-type: none"> <li>■ Involve board members and volunteers in diversity efforts</li> <li>■ Increase racial and ethnic makeup of board and volunteers</li> </ul>

Greater workforce diversity is an element that can lead to improved patient experiences and reduced health disparities while also creating a more inclusive environment for staff and patients alike. Increasing diversity across all health professions is an ambitious goal, however. To help assure that the health care workforce is both diverse and culturally inclusive, organizations, regardless of size, geographic location or current staff demographics, can take steps to increase their own diversity. The combined impact of these efforts can help determine whether health disparities are perpetuated or eradicated.