# Diversifying the Integrated Care Workforce: A Call to Action Florencia Lebensohn-Chialvo, PhD, University of San Diego, Assistant Professor Laura E. Sudano, PhD, LMFT, University of California, San Diego, Associate Director, Integrated Behavioral Health Ronak V. Shah, MD, Urgent Care, Wake Forest Baptist Community Physicians Caitlin MacMillen, DD, University of California, San Diego, Assistant Clinical Professor Andrea N. Trejo, MA, University of Georgia, Doctoral Student

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# Faculty Disclosure

The presenters of this session  $\underline{\text{have NOT}}$  had any relevant financial relationships during the past 12 months.



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### Conference Resources

Slides and handouts shared by our conference presenters are available on the CFHA website at

https://www.cfha.net/page/Resources\_2019 and on the conference mobile app.





Learning (	Objectives
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### At the conclusion of this session, the participant will be able to:

- Describe benefits associated with a more diverse healthcare workforce.
- List strategies associated with increased recruitment and retention of underrepresented minorities in health professions.
- Apply strategies to recruit, retain and support underrepresented minority providers in integrated care settings.



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### Bibliography / Reference

- Buche, J., Beck, A. J., & Singer, P. M. (2017). Factors Impacting the Development of a Diverse Behavioral Health Workforce. http://www.behavioralhealthworkforce.org/wp.content/uploads/2017/05/FA2P1\_Workforce-Diversity\_Final-Report.pdf

  2. Hurnan Resource & Services Administration (2016). Supporting Diversity in the Health Professions. Rockville, MD: U.S. Department of Health and Human Services.
- Health and Human Services. https://www.htms.ago/adv/sorycommittees/bhpradv/sory/cogme/Publications/diversityresourcepaper.pdf 13. Snyder, C. R., Stover, B., Sallman, S. M., & Frogner, B. K. (2015). Facilitating Rocial and Ethnic Diversity in the Health Workforce. http://depts.wishingion.edu/workforce/2.8.2015
- http://depts.wasningront.euruwnii rusquicocon results from the health-care workforce begins at the pipeline: A Syear synthesis of processes and outputs of the scholarships for disadvantaged students program. Evaluation & the Health Professions, 40(2), 127–150. doi:/10.1177/0162787.5157.809

  5. McDuagle, L. Way, D. P., Lee, W. K., Morfin, J. A., Makis, B. E., Matthews, D.,... Clinchot, D. M. (2015). A national long-term outcomes evaluation of US premedical postbacculaureate programs designed to promote health care access and workforce diversity. Journal of Health Care for the Poor and Underserved, 26(5), 631–647. doi/10.1353/mpu.2015.0088

  11. Designed of Lisabits work is wrown Granices: Health Resources and Services Administration, National Center for Health
- evaluation of US premedical postbaccious rests puspernic ward for 1353/hpu2015.0088
  Health Care for the Poor and Underserved, 26(3, 61-647, 03/101.353/hpu2015.0088
  6. U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Worlforce Analysis (2017). Sex Reve, and Ethnic Deversity of U.S. Health Occupations (2011-2015), Rockville, Maryland.
  7. Callahan, J.L., Smotherman, J.M., Dziurzynski, K.E., Love, P.K., Kilmer, E.D., Nemann, Y.F., & Ruggero, C.J. (2018). Diversity in the professional psychology trainingsworkforce poliptice. Results from doctoral psychology student population data. Training and Education in Professional Psychology, 12(4), 273-285.

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### Learning Assessment

- A learning assessment is required for CE credit.
- A question and answer period will be conducted at the end of this presentation.



### Session Ground Rules

Respect confidentiality of others
Listen actively and respectfully
Speak from your own experience
Avoid generalizations and assumptions
Any other suggestions?

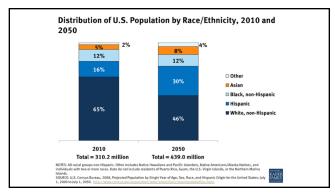
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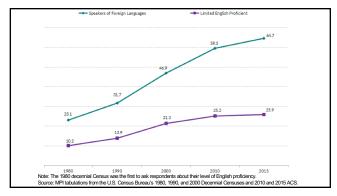
### Pair & Share

What about the session topic made you want to learn more or connect with others?



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Rank	Languages Spoken at Home	Total	Bilingual Share (%)	LEP Share (%)
	Total	64,716,000	60.0	40.0
1	Spanish or Spanish Creole	40,046,000	59.0	41.0
2	Chinese	3,334,000	44.3	55.7
3	Tagalog	1,737,000	67.6	32.4
4	Vietnamese	1,468,000	41.1	58.9
5	French	1,266,000	79.9	20.1
6	Arabic	1,157,000	62.8	37.2
7	Korean	1,109,000	46.8	53.2
8	German	933,000	85.1	14.9
9	Russian	905,000	56.0	44.0
10	French Creole	863,000	58.8	41.2

Notes: Chinese includes Chinese, Mandarin, and Cantonese; French includes Patois and Cajun; German includes Pennsylvania Dutch. Source: Migration Policy Institute (MPI) tabulation of data from the U.S. Census Bureau 2015 American Community Survey (ACS).

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## **Health Disparities**

Health disparities continue to disproportionately impact minority communities:

- Higher infant mortality rates
- Lower life expectancy
- Higher age-adjusted mortality rates
- Higher rates of chronic illnesses

National Academies of Sciences, Engineering, and Medicine. 2017. Communities in action: Pathways to health equity. Washington, DC. The National Academies Press. doi: 10.17226/24624.

Compared with the majority population, members of racial and ethnic minority groups are:

- Less likely to have access to mental health services
- **Less likely** to use community mental health services
- More likely to use inpatient hospitalization and emergency rooms
- More likely to receive lower quality care.

(Wang, et al., 2005; Samnaliev, et al., 2009; Alegria, et al., 2008)

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### Workforce Development

Two identified solutions:

- Increase training in cultural and linguistic competencies for the existing workforce.
- 2. Increase efforts to diversify the workforce by addressing
  - the training-to-workforce pipeline.

    Racial and ethnic diversity among health professionals is associated with better access to healthcare and improved healthcare quality for underserved populations (Human Resource & Services Administration (2016).

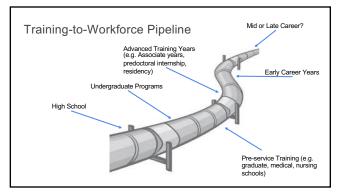
    Healthcare professionals who identify as part of a minority group are more likely to practice in underserved communities with higher service needs (Buche, Beck & Singer, 2017).

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Table 1. Example of Underrepresentation in the Health Professions.				
Profession	Race/Ethnicity	Percentage in the Healthcare Workforce, %	Percentage in the U.S. Population, %	Considered Underrepresented?
Physicians	Hispanic (all races)	6.0	16.6	Yes
	Non-Hispanic Black or African American	5.3	12.3	Yes
	Non-Hispanic Asian	20.0	4.8	No
	Non-Hispanic American Indian or Alaska Native	0.2	0.7	Yes
	Non-Hispanic Native Hawaiian	0.03	0.2	Yes
	Non-Hispanic White	72.2	63.2	No
	Multiple races	1.4	2.2	Yes
Registered	Hispanic (all races)	5.4	16.6	Yes
nurses	Non-Hispanic Black or African American	10.7	12.3	No
	Non-Hispanic Asian	8.8	4.8	No
	Non-Hispanic American Indian or Alaska Native	0.4	0.7	Yes
	Non-Hispanic Native Hawaiian	0.1	0.2	Yes
	Non-Hispanic White	78.6	63.2	No
	Multiple races	2.2	2.2	No

Race/Ethnicity	U.S. Population (%)1	Counselors (%) <sup>2</sup>	Social Workers (%) <sup>2</sup>	Psychologist (%) <sup>3</sup>
Non-Hispanic White	62.3	64.6	60.6	83.6
Hispanic/Latinx	17.1	10.7	12.0	5.0
Black	12.6	18.8	21.5	5.3
Asian	5.1	2.8	3.0	4.3
American Indian/ Alaskan Native	0.8	0.8	0.8	0.2
Native Hawaiian and Other Pacific Islander	0.2	0.1	0.1	0.0
Multiple/ Other Race	3.0	2.2	2.0	1.6

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# **Potential Strategies**

- High school outreach
- Targeted outreach and recruitment at Minority Serving Institutions (e.g. HSIs,
- HBCUs) and BA/BS to MD pipeline programs
- Holistic admissions, including discussion about racial/ethnic biases in tests like GRE
- Increased financial assistance
- Meaningful mentorship
- Diversification of faculty
- Social support efforts (e.g. community building)
- Curriculum changes (e.g. courses about working with underserved communities, health disparities)

  <u>Diversity Plans</u> or Statements

Complexity of being an "Ally"	
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Funding Opportunities	
Federal Grants and School-based Loans and Scholarship Programs	
State Healthcare Workforce Efforts (e.g. <u>California</u> , <u>California Wellness</u> <u>Eoundation</u> , <u>Rural Health</u> )	
Professional Organization or Discipline-Specific Funding (e.g. MFT, Social Work,	
Psychology, Medical Education)	
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Activity	
What questions could you ask at your home institution to better understand the culture around diversity, inclusion, and equity?	
What suggestions could you make to improve the diversity of your faculty, staff, students/trainees?	
What resources do you have access to that you could leverage to start promoting (small) institutional change?	
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