



Reflections

On Increasing Diversity in the Health Professions

A health workforce that mirrors our state's ethnic and racial diversity is an important strategy for improving the health of Californians. The California Wellness Foundation has been making grants to increase diversity in the health professions since 2001. This issue of Reflections looks at the Foundation's grantmaking in this field; offers lessons learned from grants given to academic preparedness programs, research and advocacy efforts, and leadership development programs; and offers some thoughts on areas for future attention.



Grantmaking for a Healthier California

Reflections

Reflections is a series produced by The California Wellness Foundation to share lessons learned and information gleaned from its grantmaking practices and strategies. This document and others in the series are available on the Internet at www.tcdf.org.

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preface



A significant body of research indicates that a workforce that more closely mirrors the racial and ethnic diversity of our state will increase access to care and improve the quality of care that is delivered. When we think of a diverse health workforce, we think of providers who bring an understanding of cultural health beliefs, and methods that respect those beliefs, into the health care system. We also know that physicians of color typically provide more care for the poor and uninsured and more frequently practice in areas with shortages of providers than their nonminority peers. As such, building a more diverse cadre of physicians, nurses, dentists and allied health professionals is a crucial strategy for improving the health of underserved communities in California.

This edition of Reflections is authored by Saba Brelvi, program director for our Foundation's grantmaking in this issue. She oversees a portfolio of grants that includes pipeline programs, scholarships, outreach and retention programs, fellowships and loan repayment programs for underrepresented ethnic minorities. Other grantees educate California policymakers and advocate for public and institutional policies that promote diversity in the health professions in our state. The Foundation has also instituted a leadership recognition program, the Champions of Health Professions Diversity Award, to publicly recognize and financially reward individuals in California who have made substantial contributions to this issue.

Recently, national attention regarding the need for a diverse health workforce has emerged, with groundbreaking reports published by the Institute of Medicine and the Sullivan Commission. Efforts to advance each report's policy agenda are being led by the authors and other contributors who worked diligently on them in a new organization — the Sullivan Alliance. With a research base established by recognized scholars, and grassroots policy advocates addressing the quality of education options available for students of color and the challenges of financing a postsecondary education, as well as a growing number of mentoring and support programs at under- and postgraduate institutions, we are beginning to see a field of professionals coalesce around the need to increase diversity in the health professions.

We hope this document will be useful to those considering funding around this issue. We encourage your comments and feedback.

Gary L. Yates, President and CEO
The California Wellness Foundation

By Saba Brelvi, TCWF program director

Reflections on Increasing Diversity in the Health Professions

The California Wellness Foundation (TCWF) has been making grants to increase diversity in the health professions for almost four years. At this juncture, we're taking an opportunity to reflect on the need for a diverse health care workforce in the state and our rationale for prioritizing this topic, on the decisions we've made on how best to address this issue, and on the tremendous work done by organizations we have funded to support youth and adults from traditionally underrepresented backgrounds in their efforts to pursue careers in health. It

has taken us a significant amount of time to become familiar with the terrain and to get to know the players in these efforts. We've had some early successes and have learned important lessons that will guide us in future grantmaking. The need for increasing diversity in the health professions often flies below the radar of policymakers, advocates and other funders. Nonetheless, we are committed to continuing these efforts, firm in the belief that diversifying our state's workforce is critical to improving the health of all Californians.

As is evident in almost any health facility in the state, the physicians, nurses, dentists and allied

health professionals of California look distinctly different from the Californians whom they treat. While one-third of the state's 36 million residents are Latino, only four percent of doctors, six percent of dentists, and four percent of registered nurses (RNs) in the state are



The California Rural Indian Health Board supports training and career development opportunities for practitioners to improve the quality of care provided at tribal clinics.

Latino. African-Americans account for six percent of the state's population but only account for three percent of its doctors, less than two percent of its dentists and four percent of its RNs. While some Asian and Asian-American groups are well-represented in certain health

professions, others are underrepresented; for example, although the state has more than 65,000 Hmong residents, only a small handful of Hmong men and women are trained as physicians.

A growing body of evidence indicates that a racially and ethnically diverse cadre of health professionals is beneficial on multiple levels. (Studies cited in this article are listed in the bibliography on page 15.) Providers of color increase access to care for underserved Californians because they tend to practice in minority and low-income communities more than their peers. They are able to provide care



that recognizes and accounts for the cultural beliefs and mores of their patients. They can serve as role models and mentors for racially and ethnically diverse students who may not have access to other health professionals, and they can contribute to the fields of health and medicine by ensuring that the priorities of underserved communities are considered in decisions regarding research, funding and education.

Research is slowly emerging to suggest that *all* students attending universities and professional schools benefit from a diverse educational community. In 2003, Justice O'Connor wrote in the majority opinion for *Grutter v. Bollinger*, an affirmative action case at the University of Michigan Law School, that a critical mass of racial and ethnic diversity was “in the compelling interest” of both the nation and the university.

Finally, increasing diversity in the health professions is an important workforce development strategy as well. Jobs in the health care sector, particularly among the allied health professions, are among the fastest growing in the economy, and they provide employment opportunities that pay a living wage. The business imperative for increasing diversity in

the health professions is also clear. In addition to ensuring that the underserved will be better able to receive care, thus bringing down health care costs, employing a diverse group of providers will competitively position health care institutions that are marketing their health plans to California’s “majority minority” population.

Barriers to Diversification of the Health Workforce

Even with this clearly identified need to diversify the health professions and the obvious distance we have to go in California before we achieve that parity, students of color face significant barriers to successfully pursuing health careers. The United States has a long history of excluding minorities from the health professions, and

although the civil rights movement ensured equal access under the law, many educational institutions still fall short of achieving this milestone. Financial restrictions, a public climate of hostility towards race and ethnicity-based considerations, and long-standing social

and economic forces also play a part in preventing more appropriate diversification of the state’s health workforce.



At many California universities, chapters of the Chicano/Latino Medical Student Association help create a supportive environment for underrepresented students.

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The difficulty of education financing can serve as a significant barrier to the successful pursuit of a health career for Californians. Students in the California State University (CSU) and University of California (UC) systems have seen multiple fee increases in the past few years: Undergraduate students at CSU campuses have faced a cumulative fee increase of 76 percent since 2002. In the last two years, UC undergraduates have had their fees increased 23 percent, and graduate students have had increases of more than 30 percent. The UC professional school fees have been raised dramatically as well — some schools have seen their tuitions go up almost 40 percent in two years.

These fee increases are compounded by federal legislation regarding college attendance. Legislation passed by Congress in early December 2004 will likely make more than 80,000 low-income students ineligible for federal Pell grants and will reduce the grant amounts for thousands of others. Students who complete studies at health professions educational institutions face what can appear to be insurmountable levels of debt; accounting for inflation, debt levels have risen by more than 150 percent since the 1980s. In 2003, the average debt owed by a private medical school graduate in the United States was \$135,000; for public medical school graduates, the total was \$100,000. For dentists, the average debt upon graduation was \$115,000. Although education for allied health professions tends to be less

expensive, training can still run well into the tens of thousands, an insurmountable sum for many California families. A recent national survey asked students who were qualified for medical school, but did not apply, about their reasons for not applying. For students of color, the prohibitive costs of medical schools were the *primary* reason they cited for not pursuing medical careers. State and private loan repayment arrangements are one way to entice students to pursue health careers; both the state government and nonprofit organizations offer loan forgiveness or repayment in exchange for students providing care in underserved communities when they have completed their training.

In addition, at the state and federal levels, the climate appears to be increasingly hostile towards explicit discussions of health disparities between different racial and ethnic groups and the resulting policies needed to correct these inequalities. California's Proposition 209, passed in 1996, is probably the most well-known effort at the state level to eliminate state policies that specifically address barriers faced by people of color — in this case, students of color applying to public universities. In December 2003, the federal government released a Department of Health and Human Services report on racial and ethnic disparities in health that, in the final edit, had removed the word “disparities” and downplayed the different health status levels among people of color. These instances reflect a growing institutional bias in the public sector against



recognition of, and specific actions to combat, the different circumstances and challenges faced by many people of color, whether regarding their health care or their educational attainment.

Finally, students of color interested in pursuing the health professions face well-documented social barriers. They often attend schools in low-income communities where they are not adequately prepared to graduate from high school, to attend college or to attain professional degrees; teachers and faculty are not adequately trained in methods of teaching and supporting



At a 2003 TCWF-sponsored event, Sen. Deborah Ortiz spoke to grantees and guests about state policies to support students of color pursuing health professions training.

students of color; and professional mentors of color are few and far between. The result, then, is that students of color are less likely to stay in school, less likely to graduate from college, and less likely to be represented in all but the entry levels of the health professions.

Ironically, these barriers persist at a time when California's health workforce is extremely

underresourced. Not only is there a significant disparity between the racial and ethnic make-up of patients and that of providers, but many parts of the state continue to be medically underserved, with fewer providers available than are needed for adequate provision of care. The nursing shortage has reached the halls of Sacramento and the headlines of state newspapers, and other professions — mental health providers, for example — are also in need of expansion and diversification.

The silver lining, perhaps, is that there is increasing publicity regarding health workforce diversity and recognition of increasing diversity in the health professions as a legitimate public health issue, perhaps even a public health crisis. In 2004, two high-profile organizations — the Institute of Medicine and the Sullivan Commission — issued national reports that speak strongly to the need for policy changes to address health workforce diversity. A number of the recommendations are a natural fit for funders interested in partnering with local health professions schools, including implementing changes in the makeup and charge of admissions committees; supporting efforts to alter institutional climates to ensure an emphasis on diversity; providing increased financial resources for students of color pursuing health careers; and working with accreditation bodies and committees to ensure the inclusion of diversity-related standards. A growing body of evidence supporting workforce diversity is

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being created, nonprofit health advocacy organizations are beginning to engage in workforce diversity work, and a community of individuals and organizations working on the issue in California is slowly emerging.

TCWF's Grantmaking

In light of the obvious need for increased diversity in the health workforce, as well as the challenges highlighted above, the Foundation's Board of Directors in 2001 decided to make increasing diversity in the health professions one of the Foundation's priorities. To date, the Foundation has distributed more than \$11 million in grants that address the issue of diversity in the health professions. Grants are commonly given to organizations that provide pipeline programs, scholarships, mentoring programs, internships and fellowships that support and advance career opportunities for people of color in the health professions, including the allied health and public health professions. Organizations that support people of color in the health professions through strategic partnerships, leadership development, continuing education and networking activities are also eligible for funding. In addition, the Foundation funds organizations that educate policymakers about public and institutional policies that promote diversity in the health professions.

The Foundation's work to increase diversity in the health professions is heavily influenced by

two factors: 1) health workforce diversity is in the very early stages of developing as a "field"; and 2) TCWF represents one of the few sources of funding in the state directed towards this issue. These factors provide guiding principles: The Foundation must work to increase awareness of the issue, continue to "seed" the field and support promising new support and advocacy efforts, and simultaneously fund broadly in order to maintain existing programs. The Foundation's funding goes beyond supporting diversity in medicine, nursing and dentistry — it also supports the allied health professions. Creating opportunities for people of color to join one of the many allied health professions is an important component of diversifying the health professions. Allied health professionals, including respiratory therapists, physical therapists and home health providers, play important roles in the delivery of health care, and these positions can serve as an entry point for a career ladder into other health-related jobs.

A crucial aspect of working on the issue of increasing diversity in the health professions is building the case for the importance of diversity, examining the barriers to diversity, identifying solutions to these problems, and advancing solutions among the state's policymakers and opinion leaders. During the past three years, our Foundation has provided more than \$1 million for research regarding various aspects of workforce diversity in California. Currently funded efforts include: the exploration of



differences in retention rates among premedical students of various ethnic groups; the identification of exemplary nursing programs that recruit and graduate large numbers of Latino students; and the ethnic and racial diversity in the rural health workforce. Through the dissemination of products produced by these grants, the Foundation's goal is to increase the awareness of decision-makers about the connection between a lack of diversity in the health professions and health disparities among racial groups, and to inform the development of public policies that advance the field.

Many advocacy organizations are involved in efforts to diversify the health workforce as well. Their work focuses on building coalitions of individuals and organizations interested in this issue, raising the awareness of policymakers regarding the issue, and identifying and publicizing policy solutions — at state, local, and institutional levels — to address the lack of health workforce diversity. The Foundation is also funding organizations that are building the advocacy capacity of individuals and groups who are usually absent from conversations regarding health workforce diversity policies, including physicians of color, low-wage workers and high school students themselves.

The Foundation has also provided more than \$8 million in grants to help build the diversity of the future health care workforce. These include programs that both introduce students



Los Angeles-based SCOPE offers a Health Career Training Ladder program to place low-income residents in health careers that offer livable wages.

to health professions through internships and provide academic enrichment, tutoring and parent education. The organizations supported with these funds have provided more than 8,000 individuals with academic enrichment programs in middle and high schools; more than 1,000 students with recruitment and retention programs; scholarships for 124 individuals; and career advancement opportunities for 114 people of color already in the health professions. One cluster of grants reflects the range of organizations working to introduce young people to the health professions while improving academic preparedness. Grantees include school districts, nonprofit organizations, health care institutions and universities. Common dimensions of these middle and high school pipeline programs include academic enrichment and tutoring (especially in math and science), mentoring, academic counseling, and internship opportunities at health care facilities. Some programs, especially those geared towards

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students who are considered high risk, have built psychosocial support — both counseling and case management — into their services as well. Educating parents about college admissions and financial aid is an important component of many of these programs. Most efforts reflect collaborative arrangements among multiple entities — schools, hospitals and universities — that are working together in their communities to ensure that a racially and ethnically diverse group of high school graduates is prepared for entry into college or the health care field.

Another cluster of grants addresses the challenges of recruiting, retaining, supporting and graduating students of color in the health professions. The majority of organizations receiving support for these efforts are community colleges or four-year universities. These institutions work with students from the community college level through doctoral programs, providing various types of support necessary to retain students of color; they support their movement from one academic level to the next; and they enable them to become more academically competitive in

Preparing Students for Success

At a Central Valley school district, where the dropout rate is close to 30 percent and the ratio of students to college counselors numbers something like 800-to-1, Dr. Katherine Flores is molding students from Latino, Southeast Asian and African-American backgrounds into the next generation of Central Valley health providers. The Sunnyside Doctor's Academy and the Junior Doctors Academy provide young people from disadvantaged backgrounds in Fresno public schools with a rigorous academic curriculum and the tools necessary to pursue health careers. Young people participate in internships at local health facilities, tour college campuses, receive supplemental tutoring, and go on study trips. Dr. Flores and her staff work with parents to ensure that students are able to make and keep their commitments to the program; for many students this requires foregoing athletic and other after-school activities. For students from rural areas outside Fresno, it requires long commutes to school each morning and home late in the evenings. Nevertheless, the program receives many more applications than there are available slots, due in no small part to the program's well-known success. Of the 66 students who graduated from the program in 2003 and 2004, 100 percent completed high school and were accepted to four-year colleges and universities. Ten of these students were selected for early conditional acceptance to the University of California San Francisco, one of the nation's most prestigious medical schools, upon college graduation.



their specific health profession. Students are provided services that include academic tutoring and advising, postbaccalaureate programs geared towards students from disadvantaged backgrounds, internship placements, opportunities to conduct research, study skills and standardized test

preparation, financial support to attend professional conferences, parent education and support, and faculty mentoring. Most grantees operate programs on campuses that provide multiple types of support, based on the needs of the student population.



The Stanford Medical Youth Science Program brings low-income, underrepresented high school students to the Stanford campus for science courses and health-related internships.

The provision of scholarships is an important component of our funding because the cost of attending health professions schools has become prohibitively expensive for low- and middle-income students. Several grants provide scholarships to students of color in the health professions. A number of these grantees are

organizations devoted exclusively to providing scholarships; some work within just one health profession and others work in particular geographic areas. USC Keck School of Medicine, for example, received a grant from TCWF to provide full-tuition scholarships for two students of color — and has used the

Researchers Assess Supportive Environments for Latino Nurses

What are the best ways for recruiting, retaining and graduating Latino nurses and which programs in the state are using these techniques? The Tomas Rivera Policy Institute in Los Angeles is looking into these questions as part of its two-year project aimed at increasing Latino participation in the nursing professions. Researchers are surveying nursing programs across California, identifying exemplary programs that are successfully recruiting and graduating Latino nurses, and conducting in-depth analyses of these programs to determine what makes them successful. Staff at the institute will disseminate the results of their research to education and training providers, state government officials and industry associations. Regional briefings will be held to ensure that stakeholders in various parts of the state learn about the research findings.

Training Minority Physicians

The Charles R. Drew University of Medicine and Science is a true cornerstone institution in the efforts to increase the diversity of the health professions. The university distinguishes itself as the only Historically Black College and University (HBCU) in California and the only allied health and medical school in the nation that is designated as both an HBCU and a Hispanic Serving Institution. The school's history is tied to that of South Los Angeles, and the university, in conjunction with King/Drew Medical Center, works to improve the health and well-being of some of the nation's most impoverished citizens. Drew's physician training program is a joint effort with UCLA, in which students take their first two years of medical school classes at the UCLA David Geffen School of Medicine and then move to Drew and the King/Drew Medical Center for clinical rotations and training in years three and four. Drew University trains more than one-third of Los Angeles County's minority physicians.

grant to leverage matching funds. Still others work on various health and education issues facing specific communities of color — and are using grant funds to provide scholarships to young people in these communities. A grant to The Inland Empire Scholarship Fund enabled the organization to provide scholarships to Latino students pursuing health careers; a similar grant to the California Rural Indian Health Board provides scholarships for Native American health professions students across California. Other grantees are educational institutions that receive TCWF funds to provide scholarships to enrolled students as a way of successfully recruiting a more diverse group of health professions students.

Many institutions and health care employers are challenged to find ways to move existing

employees up health career ladders. A cluster of grants provides educational and career advancement opportunities for these individuals, who may not have the needed skills to advance in their fields. Several community-based health organizations provide funding for their employees of color to go back to school or to get more advanced training. In areas where recruiting traditionally underrepresented providers is difficult, grantees use grant funding to retain interns and staff from these communities. Others provide opportunities for underemployed health care workers, usually immigrants, to move up career ladders.

Another strategy pursued by TCWF is recognizing and encouraging leaders working on increased diversity in the health professions. To recognize individuals who have, over the



course of their careers, made significant strides towards diversifying California's health workforce, the Foundation has developed its annual Champions of Health Professions Diversity Award. Three champions are selected each year through a confidential nomination and selection process, and each is



TCWF Program Director Saba Brelvi (right) with the 2005 recipients of the Champions of Health Professions Diversity Award: Sherry Hirota, Elia Gallardo and Martin Waukazoo.

presented with a \$25,000 award at a dinner held in conjunction with the Foundation's annual conference on increasing diversity in the health professions. The champions come from a wide variety of fields — honorees have been former state employees, advocates, professors, college counselors and hospital nurses. They

have dedicated their professional lives to helping students and changing systems to ensure that people of color can succeed in the health professions. While some are well-known in the field, others are unsung heroes, quietly continuing their work without recognition by anyone other than the

students they help. The award honors their efforts and raises their profile across the state.

In addition to recognizing these individuals, TCWF provides these awards as a vehicle for highlighting the importance of increasing health workforce diversity. The Foundation

Helping Immigrants Re-Enter Health Professions

The Welcome Back Centers, located in several cities across the state, work with health professionals who have been trained in other countries. In California, these individuals often work in low-wage jobs outside the health field, since training and certification from other countries can be difficult to transfer. Welcome Back provides case management, test preparation, licensing and registration assistance, and job placement services to clients who were trained in Central and South America, Africa, Asia and the Middle East. Health-related English classes are an important component of the program as well, as they help students to learn the medical terminology that they will need for careers in nursing, dentistry, medicine or the allied health professions in the state. By providing this training, the Welcome Back Centers, which work in conjunction with community colleges in the communities they serve, tap into the health care skills and expertise already held in immigrant communities and diversify the health professions by bringing existing providers into the state's health care community.

Bringing Advocates Together

Although TCWF annually convenes organizations and institutions working in the health professions, a statewide gathering in a state as large as California doesn't provide enough opportunity for an examination of workforce diversity issues and challenges at a citywide or regional level. At the 2004 conference, representatives from several Bay Area organizations connected and determined that a regional gathering would prove useful to them in their work. The Greenlining Institute, a well-known advocacy organization, recently received a three-year grant to build a coalition of organizations and individuals in the local area that is working to diversify the health professions. Members of the newly formed group come from a number of different fields that include community colleges and four-year institutions, pipeline programs, mentoring programs, researchers and ethnic-based advocacy groups. Collectively, the group aims to develop policy recommendations that would lead to more effective diversification of the health workforce and to use the established networks of Greenlining and other members to convey those recommendations to opinion leaders in the state.

develops and implements a strategic communications plan for the award, with the goal of raising the visibility of the issue among policymakers and opinion leaders. Thus far, nine champions have been recognized by the Foundation, and numerous media outlets have provided coverage of the award and the issue of health workforce diversity. Notably, feature stories in *La Opinión* and *Hoy*, two major Southern California, Spanish-language daily newspapers with statewide readerships, have attracted the attention of community leaders. In 2005, a panel discussion at Town Hall Los Angeles, a civic forum that has long been respected as a venue for policy discussions, featured TCWF grantees and other local leaders

offering their perspectives on the issue of increasing diversity in the health professions.

Because the "field" of diversity in the health professions is just beginning to coalesce, organizations that do the work to prepare and train students of color in the health professions often work in isolation, disconnected from others doing similar work. The Foundation annually brings together more than 70 organizations, including grantees, other practitioners and funders, across the state. The conference offers participants an opportunity to meet one another, to learn first-hand about efforts in other parts of California, to share promising strategies and to

brainstorm about common programmatic challenges. Conference attendees discuss needed systemwide changes and identify policy priorities that advocacy groups can use in crafting their work over the course of the year. The conference also serves as a vehicle for organizations from

different fields to come together around common issues. At the 2005 conference, community clinic and safety net advocates, who struggle with recruiting providers of color, heard from community college administrators about the importance of a fully funded community college system in training allied health professionals. The conference highlighted the potential for these organizations to become allies — and work towards improving access to higher education — and to become a vehicle for training health providers of color. As a result, new allegiances were born.

Looking to the future, the Foundation is considering an additional strategy to raise the visibility of these issues through a public education campaign with two distinct objectives: to inform and educate policymakers, opinion leaders and the public about the need to increase diversity in the health professions; and to inform underrepresented minority



At TCWF's annual conference, grantees learn about successful models such as the Sunnyside Doctor's Academy in Fresno, founded by Dr. Katherine Flores.

youth about opportunities to pursue careers in the health professions. The campaign will mark a significant departure from the Foundation's work on this issue. After several years of making grants and convening those in the field, we will be embarking on a high-visibility effort to bring

attention to policies that can increase health professions diversity. In addition, a broad effort including a comprehensive website and targeted outreach to provide young people with relevant information to support their pursuit of careers in health care will complement the work of many of our grantees across the state.

With close to four years of grantmaking behind us, lessons are just beginning to emerge. Our early efforts have yielded a number of successes, as seen in the work of grantees highlighted throughout this article. We have also learned much from efforts that didn't go as planned. We now recognize that overcoming the cumulative effects of inadequate preparation in reading, math and science; the absence of career and educational counseling; and the difficult lives lived by high-risk young people of color require sustained commitment and significant funding. We've learned that it is definitely not too early

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to start working with youth in middle school to prepare them for successful careers in health. We've learned that building this field requires "seeding" research and data analysis so that organizations have the evidence they need to influence their funders or institutional supporters. We've seen the tremendous gains that entry-level health workers can make with consistent support and opportunities from their employers and local community colleges. We have also learned, much to our dismay, that not nearly enough recognition is given to this pressing public health issue and that many individuals work to increase the diversity of the health care workforce without support from educational institutions, organizations or individuals in leadership positions. It is our intent that our grantmaking dollars, along with the value we add through convening our grantees and recognizing the true champions of this work, will enable young people — who might otherwise not pursue higher education — to graduate from college, apply to and graduate from health professions schools, and provide care in this state. Until the health professions are truly reflective of the people receiving care, Californians will continue to be denied care that is of the quality they deserve.



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