Expanding and Supporting a Diverse Health Care Workforce

Findings and Recommendations for Higher Education and Health Care Systems

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Black/African American and Hispanic/Latinx people are **underrepresented in the medical and nursing workforces** compared with their shares of the overall population.

A diverse health care workforce can **improve access to and satisfaction with care and health outcomes**, and shared identities between providers and patients may improve health equity.

Evidence suggests **pathway programs are a promising strategy** for increasing diversity in health professions, but federal and state policies, a lack of long-term institutional and funder commitment, and limited access to robust funding have hindered program growth, sustainability, and evaluation.

Targeted actions by key stakeholder groups can help strengthen and expand effective programs.

Evidence demonstrates that a diverse, representative health care workforce is important to improving health care access, patient satisfaction with care, and health outcomes, particularly for patients of color (HHS 2011). Given this, one might expect the US health care workforce to reflect the diversity of the US population. However, despite decades of awareness of this issue, little has changed, and today the shares of medical and nursing students who are Black/African American and/or Hispanic/Latinx are significantly lower than their shares of the population (table 1).

To better understand this challenge and identify promising policies and practices for sustainably increasing the representation of Black/African American and Hispanic/Latinx people in the physician and nursing workforces, Urban Institute researchers conducted a national study of pathway programs in medicine and nursing. These programs, also known as pipeline programs, provide academic, financial, and social supports to encourage more students from systemically and structurally excluded groups to enter health care professions.

The study found that though pathway programs are a promising strategy for increasing diversity in health professions, no diversification-specific, targeted pathway programs for nurses exist. Also, many challenges threaten the effectiveness and reach of pathway programs for medical students and physicians, including insufficient and unstable funding, anti–affirmative action policies, and a lack of institutional buy-in. Here we summarize key findings and recommendations from the full study for higher education and health systems, including community colleges, nursing and medical schools, hospitals, and nursing and medical associations.

TABLE 1

Black and Latinx Enrollment in Medical and Baccalaureate Nursing Schools

	Overall US population (2020)	US medical school enrollment (2021)	US baccalaureate nurse enrollment (2019)
Black/African American	13.4	11.3	11.2
Hispanic/Latinx	18.5	12.7	12.9

Sources: "QuickFacts," US Census Bureau, accessed May 9, 2022, https://www.census.gov/quickfacts/fact/table/US/PST045221; Association of American Medical Colleges, "Medical School Enrollment More Diverse in 2021," news release, December 8, 2021, https://www.aamc.org/news-insights/press-releases/medical-school-enrollment-more-diverse-2021; and "2019-2020 Race and Ethnicity of Students Enrolled in Nursing Programs," American Association of Colleges of Nursing, accessed May 12, 2022, https://www.aacnnursing.org/Portals/42/News/Surveys-Data/EthnicityTbl.pdf.
Note: Data exclude people who identify with two or more races (2.8 percent of the population in the 2020 Census).

THE CASE FOR HEALTH CARE WORKFORCE DIVERSITY

Current events have increased recognition of the importance of a diverse health care workforce, and recent nursing and medical school enrollment numbers show progress. However, we still have a significant way to go. Addressing workforce representation disparities and ensuring the US health care workforce better reflects the population it serves will require action from many health care system stakeholders, including community colleges, four-year colleges and universities, nursing and medical programs and schools, and health care systems that educate and employ nurses, physicians, and health care policymakers and administrators.

These stakeholders help recruit, admit, train, advise, and endorse the next generation of nursing and medical students; provide mentorship, fellowships, ongoing professional training and development, and other types of professionalization support to practicing nurses and physicians; establish policies and procedures, implement programs in the context of health systems, and set standards for training and practice in schools, programs, and health care systems; and, in some cases, enforce policies and penalties for violations or noncompliance with rules and established procedures. Many leaders and program staff members in higher education and health care systems are deeply committed to advancing health equity and addressing health care workforce challenges, but more attention and action are needed. Below we highlight five study findings relevant for higher education and health care systems.

Pathway programs are instrumental to the diversification of the health care workforce. These programs provide systemically and structurally excluded students with the skills, resources, and supports to mitigate academic, financial, and other barriers to success. Though considerable efforts and investments have been made to recruit Black/African American and Hispanic/Latinx students into medical professions, comparable pathway programs are lacking for nursing students and professionals from systemically and structurally excluded groups.

Financial support is critical to address a key barrier. Participants in our study emphasized that the cost of pursuing a nursing or medical career poses a considerable barrier for students, particularly those from low-income backgrounds. Study participants identified a need for tuition support, including scholarships, as well as wraparound financial assistance to cover not just tuition but other expenses, including food, housing, transportation, exam preparation courses and materials, and applications.

Culturally effective mentorship and advising must be prioritized and often need improvement. Several studies suggest having a mentor or a role model from the same racial and ethnic background has a positive impact on students' interest and retention when pursuing a career in health care (Akinla, Hagan, and Atiomo 2018; Bonifacino et al. 2021; Farkas et al. 2019). Among our study participants, mentorship was deemed the most vital support, ideally throughout educational development and clinical practice. Both medical and nursing focus group participants in our study noted deficiencies in the academic advising they received while in high school and higher education.

Academic, career, and social supports are important components for successful pathway programs. Participants highlighted that additional coursework, clinical training, and other forms of academic support before entering professional school help students develop skills to succeed. Study participants also emphasized that emotional support from peers, faculty members, mentors, and family members can ensure students have the tools and resources to persist in rigorous training programs.

Relatedly, institutional environments, though not controlled by pathway programs, can affect participants' experiences. Study participants agreed, sharing that though pathway programs can provide emotional support to and build the self-esteem of program participants, they can seldom shield participants from discrimination and hostility in school and the workplace.

Ensuring the nation's best and brightest are afforded opportunities is a matter of fairness and contributes to addressing systemic racism. Many advocates, funders, policymakers, physicians, and nurses have recently renewed calls for health care workforce diversification to advance equity for students, professionals, and patients (Saizan et al. 2021).[1] Nationally recognized racial inequities in COVID-19 and maternal health outcomes, and more pressing calls to address all forms systemic racism following George Floyd's murder, have catalyzed a movement to shed light on how systemic racism has limited the academic and professional pathways for health care professionals from systemically and historically excluded groups, especially Black/African American and Hispanic/Latinx people (Chen et al. 2021).[2]

RECOMMENDATIONS FOR HIGHER EDUCATION AND HEALTH CARE SYSTEMS

As study participants frequently mentioned, community colleges, four-year colleges and universities, medical and nursing schools, and health care systems play an integral role in ensuring meaningful progress toward a health care workforce that more closely reflects the diverse demographics of the United States and a health care system that better serves all patients.

Actions that higher education institutions and health care systems can take to advocate for, promote, implement, and hold institutions accountable for diversity, equity, and inclusion (DEI) initiatives in medical and nursing education, training, and workplaces include the following.

- **Improve institutional practices and policies to foster an environment and culture of inclusion** by
  - » committing to creating inclusive learning and working environments and integrating DEI principles in institutional policies, practices, operations, and instructions;
  - » making financial and institutional investments in faculty diversification efforts; and
  - » providing financial incentives to nursing and medical schools and residency programs to meet or exceed DEI metrics and have formal DEI-oriented mentoring programs.

- **Establish or expand programs that provide comprehensive, continuous support** for students and professionals from systemically and structurally excluded groups in the following ways:
  - » Invest in communities surrounding institutions by recruiting for health care programs locally and creating pathways for ancillary health care professionals to upskill.
  - » Provide low-cost trainings, summer academic enrichment programs, and virtual or hybrid mentorship and internship programs that offer opportunities to engage students throughout their academic and professional careers.
  - » Adopt cohort model approaches where program participants receive academic supports, mentoring, and other program resources from acceptance into through graduation from medical or nursing school.
  - » Ease students' financial burdens, including by investing in wraparound funding, paid internships, and accelerated programs and by using sliding-scale tuition for students depending on financial assistance.

- **Build effective adviser and mentor programs** that pursue continuous improvement and feedback through the following actions:
  - » Systematically assess academic advising policies and practices and develop resources, guidance, and training for advisers to remove implicit bias from their processes.
  - » Add accountability mechanisms to academic advising so academic advisers receive regular, anonymous feedback to help refine their approaches.
  - » Develop partnerships between colleges, universities, and medical and nursing schools to offer high-quality advising support in these institutions.
  - » Share emerging best practices for academic advising among higher education institutions.
  - » Advocate for legislation or institutional policy changes that mandate implicit bias training for advisers.
  - » Develop culturally and linguistically appropriate student-centered resources for academic advisers, such as guidance on financing education, to use when advising prospective nursing and medical students from systemically and structurally excluded groups.

- **Improve access to academic and social supports** and improve participants' experiences in the following ways:
  - » Invite input and collaboration from existing and prospective pathway program participants to determine what supports are needed and how they should be structured.
  - » Increase access to quality STEM (science, technology, engineering, and mathematics) education by facilitating low- or no-cost training opportunities for elementary, middle, and high school teachers in school districts with fewer resources.
    - » Involve supportive family members in the pathway and STEM experiences when possible.
    - » Ensure teachers are compensated when developing new, creative, and supportive programming for students.
  - » Improve access to academic enrichment programs, including summer intensives, workshops, and bridge programs, by recruiting candidates who may not meet traditional metrics of achievement but are motivated and demonstrate an exceptional work ethic.
  - » Critically evaluate the traditional metrics of enrichment programs to be more accommodating of students who may succeed with additional support.

- **Introduce or strengthen policies and practices** that remove barriers for students from systemically and structurally excluded groups by
  - » mandating the adoption of holistic admissions practices in nursing and medical schools in the short term;
  - » structuring funding opportunities and grant requirements in ways that incentivize and support investments in data collection and evaluation infrastructure; and
  - » provide access to specialized training for advisers, including how to finance medical education for students and program participants who wish to pursue specialty medicine.

We acknowledge that some challenges, such as restrictions on affirmative action policies, can be outside of the control of higher education and health care system leaders and arise from oppositional forces or are imposed through policy or court action.

To learn more about these findings and recommendations, see our full report, Improving and Expanding Programs to Support a Diverse Health Care Workforce, at https://urbn.is/39XZOiy.

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NOTES

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