



# HealthVoices

Achieving Greater Health Equity: Georgians Support Workforce Diversity

Issue 1, 2009

Georgia health consumers believe that expanding the diversity of the health care workforce will result in greater access to health care, greater patient satisfaction, more effective control of disease, better management of patient's health conditions and improved health outcomes. Yet, many Georgians continue to experience wide variations in their access to health care due, in part, to the lack of a diverse, culturally competent health care workforce.

As a catalyst for better health and health care, Healthcare Georgia Foundation recently conducted a statewide poll to learn Georgian's views on the importance of a diverse health care workforce and its role in addressing health disparities among underserved communities in the state. This policy brief highlights the findings of that poll to amplify the voices of health consumers and their views on ways to improve access to affordable, high quality health care.

## *Health Disparities In Georgia*

*Healthy People 2010*, defines health disparities as: *differences in health status and access for population groups characterized by race-ethnicity, gender, disability, education or income, geographic location or sexual orientation.*<sup>1</sup> Over 40% of Georgians are African Americans, Latinos, Asian and Pacific Islanders, and Native Americans. With this increasingly diverse population and over 13% of Georgians living in poverty, the state experiences serious disparities in health and health care. The 2008 *Georgia Health Disparities Report*<sup>2</sup> examined health and health care disparities by county and found gaps in health status, health care access and diversity of health care providers.

The Institute of Medicine landmark report, *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*, explored how persons of color experience the health care environment, and how this experience contributes to unequal access.<sup>3</sup> While individual behavior, environment, genetics and socioeconomic status affect health, the IOM found that access to a diverse and culturally competent health care workforce is also an important factor in achieving greater health equity.

The findings of the 2008 Healthcare Georgia Foundation poll on Georgian's perceptions on diversity among health professions highlight the need for our state to respond to the rapidly shifting demographics and economic conditions in our state by **embracing a broader concept of a diverse and culturally competent health care workforce.**

*"The scarcity of minorities in the nation's health care workforce is not only an equity issue but a compelling state and national interest."*

Former HHS Secretary  
Louis W. Sullivan, M.D.



## Achieving Greater Health Equity: Georgians Support Workforce Diversity

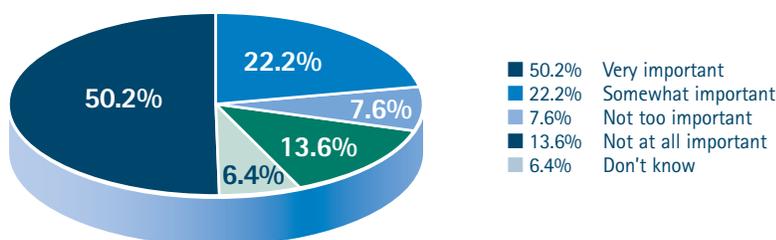
### Key Findings

A statewide poll of Georgians conducted by the University of Georgia Survey Research Center found that:

- A majority of Georgians (66%) believe the state does not have enough registered nurses, family practice doctors, and specialists to meet the need. More than 72% of Georgia health consumers believe it is very important or somewhat important to have enough black and Latino doctors, registered nurses and other health professionals to reflect the diversity of patients served (Table 1).
- Sixty-nine percent of Georgians report that it is very likely or somewhat likely that having doctors, nurses and other health professionals of similar race and ethnicity to the patients they serve contributes to **expanded access to health care** (Table 2). These opinions are stronger among females than males and among non-whites than white health consumers.
- More than seventy percent of Georgia health consumers report that it is very likely or somewhat likely that having a similar racial/ethnic composition of doctors, nurses, and other health professionals contributes to **improved health outcomes and greater patient satisfaction** (Table 2).

Table 1

Importance of Having Enough Black/Latino Doctors, Registered Nurses, and Other Health Professionals to Reflect Racial and Ethnic Diversity of Patients Being Served:



- More than 64% of Georgians report that it is very likely or somewhat likely have having a similar racial/ethnic composition of doctors, nurses and other health professionals serving patients of that group contributes to **more effective control of disease and better management of a patients health conditions** (Table 2).
- To increase the number of health professionals from the state's racial and ethnic populations, 73% of Georgians favor public funding of the state's public medical schools, universities and community colleges, and 76% [favor state government providing scholarships] for qualified students from the state's racial and ethnic populations to pursue a career in the health professions.

### Implications and Conclusions

Critical shortages of health professionals in Georgia were well documented by the Georgia's Task Force on Health Professions Education.<sup>4</sup> Their report identified shortages in nursing, behavioral health, pharmacy, dentistry, allied health and medicine as well as areas of geographic maldistribution and gender and race/ethnicity imbalances. While the report recommends strategies for addressing overall workforce shortages, the need to expand training in health professions for racial and ethnic minority populations in the state requires greater attention.

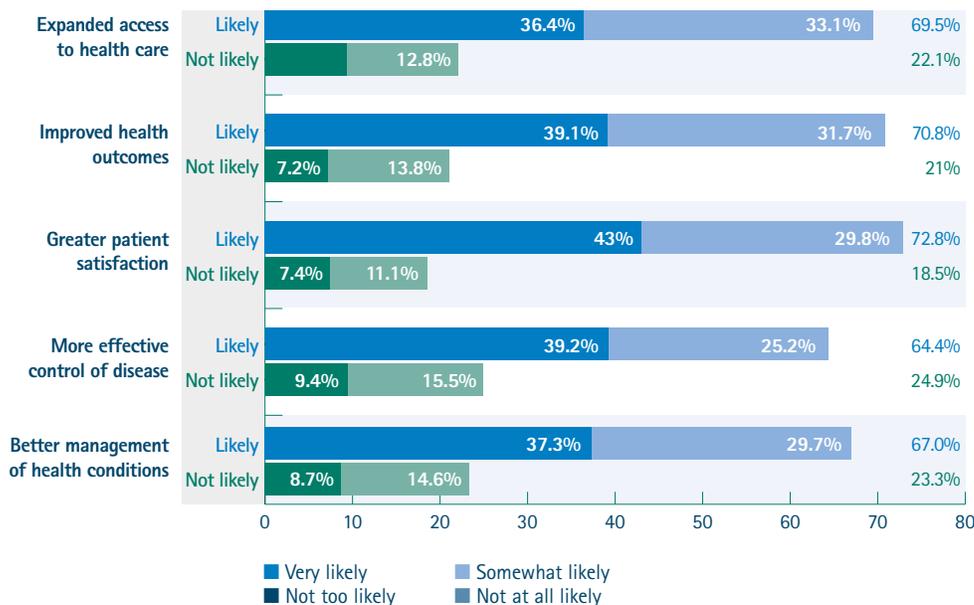
Research has shown that racial and ethnic differences in getting needed medical care are minimal for people who have a regular source of health care. And people are more likely to seek regular health care from a health professional who understands their language and culture.<sup>5</sup> The findings of this 2008 poll indicate that Georgians



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**Table 2**

Impact of Having Health Professionals with Similar Racial or Ethnic Backgrounds



support having a more racially and ethnically diverse work force that would provide greater access to health care and improve the quality of care for underserved communities. Georgians support providing scholarships to students from Georgia's racially and ethnically diverse populations and providing support to Georgia universities to expand the diversity of health professionals in the state. As Georgia policymakers consider opportunities to expand the health care work force in the state, they should also address the need for a more diverse and culturally competent work force.

**Table 3**

Annual Estimates of the Population by Sex, Race, and Hispanic Origin for Georgia: April 1, 2000 to July 1, 2007

Georgia's Demographic Profile	
Race/Ethnicity	Percentage of Georgia's Population
White	65.6
Black	30.0
American Indian/Alaska Native	0.3
Asian	2.8
Native Hawaiian/Pacific Islander	0.1
Multi-Racial	1.2

Source: Population Division, U.S. Census Bureau  
Release Date: May 1, 2008

## In Summary

- Compounding the insufficient number of health professionals in Georgia are the workforce shortages within selected regions and ethnic communities in our state.
- Georgia's health professional workforce should reflect the social and ethnic diversity of the state (Table 3).
- Increasing the number of health professionals from Georgia's racial and ethnic populations is perceived to contribute to improved access to care, improved health outcomes, greater patient satisfaction, more effective control of disease, and better management of health.

In our opinion, the key to a diverse health care workforce is committed leadership. Once achieved, there is evidence that a diverse workforce increases organizational effectiveness and produces a competitive advantage.



## Endnotes

- 1 U.S. Department of Health and Human Services, Healthy People 2010 Objectives, 1998.
- 2 Georgia Department of Community Health's Office of Health Improvement and the Minority Health Advisory Council, Georgia Health Equity Initiative, 2008.
- 3 Institute Of Medicine, Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care, National Academy Press, 2002.
- 4 Board of Regents of the University System of Georgia, Final Report of the Task Force on Health Professions Education, June 2006.
- 5 Commonwealth Fund, Racial and Ethnic Disparities in U.S. Health Care: A Chartbook, March 2008.
- 6 Eleanor Hooks, Ph.D., Beyond Translation and Tolerance: Cultural Competence in Health Care Organizations, Healthcare Georgia Foundation, Publication #31, February 2009.

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The Survey Research Center at the University of Georgia conducted Health Care Workforce Diversity Survey with a grant from Healthcare Georgia Foundation. Data were generated from a telephone interview of a RDD (Random Digit Dial) probability sample of 504 Georgia residents 18 years old or older, conducted between December 3rd and December 16th, 2007. The purpose of the survey was to learn Georgian's views on the importance of a diverse health care workforce. Estimates based a sample of this size are subject to sampling error of +/- 4.5% at the 95 percent confidence interval. Sampling error is the probable difference in results between interviewing a sample of the population of adult Georgians versus interviewing the entire population of adults in Georgia. Sample surveys are subject to other sources of error such as non-response error and error associated with the wording of questionnaire items. The cooperation rate for the study was 27.2%.

Healthcare Georgia Foundation is a catalyst for better health and health care in Georgia. Through strategic grantmaking, Healthcare Georgia Foundation supports organizations that drive positive change; promotes programs that improve health and health care among underserved individuals and communities; and connects people, partners, and resources across Georgia.

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For further information, please contact Amy Hall 404-653-0990 or [ahall@healthcaregeorgia.org](mailto:ahall@healthcaregeorgia.org).

Prepared by Martha Katz, Donna Bradshaw, and Gary Nelson, Healthcare Georgia Foundation.

Healthcare Georgia Foundation is a statewide, private independent foundation whose mission is to advance the health of all Georgians and to expand access to affordable, quality health care for underserved individuals and communities.

