

Making the Case for Workforce Diversity In Public Health

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At the Colorado Turning Point Initiative, we are focused on reducing racial and ethnic health disparities. One of our strategies toward this end is working for increased racial and ethnic diversity at the Colorado Department of Public Health and Environment, our program's home. Like so many states, the racial and ethnic composition of Colorado is growing. People of color make up approximately 25 percent of our state's inhabitants, and in Denver, ethnic minorities now make up the majority (50.1 percent) of the population. In the Health Department, however, only 12.9 percent of health professionals are people of color, and none are in senior staff positions.

Traditionally, the case for diversity has leaned toward the "remedial" argument to correct past inequalities, but our goal was different. We wanted to argue that workforce diversity could help improve health outcomes. After examining strategies from the human resources and business fields, we found the "business case" for diversity appealing, first because it links workforce diversity to outcomes, and second, because it is proving effective in today's economic times.

In brief, the business model is about using a diverse workforce to improve an organization's bottom line. It holds that diversity, when properly harnessed, improves productivity, innovation, and performance, creating a competitive advantage in a global marketplace. A diversity of perspectives, experiences, and thoughts facilitates a higher level of creative problem solving and decision-making, which in turn attracts a wider client base. Diverse employees help an organization recognize new markets and increase its ability to provide more tailored services. A diverse workforce also projects a more positive public image in the community.

Because support from senior management is a critical predictor of a successful diversity initiative, the business model

is a useful framework for showing senior management how workforce diversity will contribute to the success of the organization.

Translating the business case for public health

Colorado Turning Point initially wondered how to translate rhetoric from the business case about bottom lines, marketplaces, and competition—not terms used everyday in public health. The recent University of Michigan Supreme Court ruling demonstrated that we simply needed to state the business case in terms that resonate with public health, just as Michigan framed the business case in a way that made sense for higher education. In June 2003, the Supreme Court upheld racial and ethnic diversity as a compelling and constitutional state interest. In presenting its case, Michigan founded its diversity rationale on the educational benefits of a diverse student body. Through its ruling, the Supreme Court recognized the interrelationship between diversity and excellence.

In formulating public health's business case for diversity, we too should see the



Colorado Turning Point's diverse staff: Elizabeth Krause, Jill Hunsaker, Judy McCree Carrington, Donald Lim.

value in diversity for the sake of excellence and for ensuring that the U.S. public health system is one of the best in the world. We also need to focus on the functional utility of a diverse workforce in light of the changing demographics and racial and ethnic health disparities that exist. In Colorado, for example, the state has recognized the value of all its inhabitants' equal opportunity to be healthy, regardless of race or ethnicity. The business case can help us demonstrate how a diverse workforce facilitates this goal.

Taking steps toward a diverse workforce

The Colorado Turning Point Initiative is taking action on several fronts to promote workforce diversity. Most importantly, we are leading by example. Director Jill Hunsaker has intentionally hired one of the most diverse staffs in the department. She also co-chairs the Department's Employee Diversity Advisory Committee (EDAC), and all Turning Point staff are active participants. She has made a point of garnering support from senior staff for EDAC's diversity agenda—a fundamental piece of the business model, which was missing in past years. The HR director and chief medical officer have openly expressed support for promoting diversity among health professionals and senior staff. One result of this support is that a number of diversity goals are included in the draft version of the department's new strategic plan. This is on target with the business model, which advises that an organization's diversity strategy should be linked to a significant business need or objective.

Additionally, EDAC is currently developing an assessment of the organizational climate, as well as an assessment of minority recruitment, hiring, promotion, and retention practices. An EDAC subcommittee is in the research phase of creating the department's own business case for diversity. Finally, to increase future leadership, each year the Colorado Turning Point Initiative raises funds and offers scholarships for health professionals of color to participate in a year-long leadership training institute.

Threats to population health are complex and multi-systemic. They demand creative, innovative solutions. Evidence from the crucible of the business world demonstrates that a diverse workforce can enhance the kind of public health problem solving that will lead to timely health outcomes relevant for all of Colorado's inhabitants—which are, after all, public health's bottom line. ■

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Examples of Translating the Business Case

What is public health's bottom line? Public health's bottom line is not profit, but it does have a bottom line: our ultimate effectiveness at promoting and protecting the health of a diverse public, usually measured in health outcomes. Each failing in serving communities of color diminishes our bottom line.

Who are public health's clients? All members of the public are technically our clients, but at a more tangible level, public health's clients are the diverse recipients of the direct services (for example, clinics and WIC) offered by most health departments. According to the business case, workforce diversity can help us attract new clients and improve our ability to tailor services to client needs.

What are public health's markets? Public health expends considerable resources on marketing prevention messages and programs. A diverse workforce will help us better identify, communicate with, and engage our diverse markets.

What is public health's competition? Our competition comes in many forms (for example, media, policy, social norms). To compete effectively, we must thoroughly know what we are up against. We need the expertise and experience of health professionals who know minority communities and can help us identify the forces that compete, for example, with the health of Vietnamese youth or Mexican elders.