



Editor's Note: This article is an edited version of a paper written for the Association of Catholic Colleges and Universities. It is printed here with their kind permission.

Fill Vacancies and Address Diversity

A CATHOLIC HIGHER EDUCATION IMPERATIVE

BETH A. BROOKS, PhD, RN, FACHE; BARBARA Q. DECKER, JD; BO BONNER, MDiv; and RYAN MARR, PhD

The need to expand health care education in the United States is critical, not just to fill the growing number of job vacancies in the health care sector, but to diversify the health care workforce.

Shortages in the number of health care professionals is a serious concern for the quality of U.S. health care delivery. Although the public often focuses on physicians and nurses, evidence indicates that 32 occupations in the health professions will experience shortages in the near future.

According to the U.S. Bureau of Labor Statistics, the health care industry will add 2.3 million jobs over the next decade, representing about 1 in 4 new jobs.¹ At the same time, communities are experiencing notable deficiencies in the number of providers. The Health Resources and Service Administration of the U.S. Department of Health and Human Services estimates that there are 6,100 U.S. communities designated as primary care health profession shortage areas (HPSAs), 4,900 designated as dental HPSAs, and 4,000 designated as mental health HPSAs. This widespread labor shortage will be accompanied by an equally disconcerting lack of diversity.

The underrepresentation of minorities within the health professions — compared to their numbers in the general population — is considered one of the major contributors to health disparities. It also contributes to a lack of culturally

competent care, a dearth of researchers and an inadequate research agenda to study the health of minority populations. The health care leadership and faculty pipelines are affected, as is health policy. In too many cases, a person's race, ethnicity, socioeconomic status and other factors still influence health status, access to health care and health outcomes.

New academic and community partnerships are needed to tackle this crisis by directly addressing the country's growing health care needs while providing a working model for expanding and diversifying the health care workforce. From occupations in the life, physical and social sciences, to social service and personal care occupations, there are many places for higher education to play a role in growing and diversifying the health care workforce. For Catholic higher education, certain theological issues make the case more fundamental.

SUBSIDIARITY AND *KENOSIS*

From a Catholic theological perspective, cultural and ethnic diversity is characteristic of the body of Christ and should be joyfully celebrated. In this



respect, Catholics ought to be at the forefront of encouraging diversity within the various structures that make up the social order.

When Catholics call for greater diversity within organizations and spheres of society, we are not seeking to assuage guilt or feel better about our communities. Rather, Catholics recognize that the goal of diversity, especially in an occupational field such as health care, is closely connected to promotion of the common good.

Catholic social teaching points a way forward on this matter by emphasizing the importance of subsidiarity in seeking justice. Briefly stated, subsidiarity holds that social and political issues should be dealt with at the most immediate (or local) level that is consistent with their resolution. *The Compendium of the Social Doctrine of the Church* powerfully captures the significance of this organizing principle: “The principle of subsidiarity protects people from abuses by higher-level social authority and calls on these same authorities to help individuals and intermediate groups to fulfill their duties. This principle is imperative because every person, family and intermediate group has something original to offer to the community.”²²

This quotation highlights two key ideas, both of which must be upheld if we truly hope to foster diversity in the health care workforce. First, existing leaders within the health professions will have to be courageous in creating and supporting initiatives that empower members of underrepresented populations to pursue health care careers, and then to assume positions of leadership once they have entered the field. Second, these initiatives must not be imposed from the top down, but they must be driven by intentional collaboration, creating space for those who are underrepresented to take up real and meaningful roles in enacting change attuned to the specific needs of their communities.

To move from abstract ideas to action requires meaningful dialogue among various stakeholders within the organization or community. It is important to have in mind a bedrock theological principle for all action in the Catholic moral life, and that is the imitation of Jesus Christ. At the heart of this is the concept of *kenosis*, the Greek word expressing “emptied himself” in Philippians 2:6-

8: “Though [Christ] was in the form of God, [he] did not regard equality with God something to be grasped. Rather, he emptied himself, taking the form of a slave, coming in human likeness; and found human in appearance, he humbled himself, becoming obedient to death, even death on a cross.”

In this image from Scripture, we have the guide for every action we would take on behalf of the

Subsidiarity holds that social and political issues should be dealt with at the most immediate (or local) level that is consistent with their resolution.

underserved and the misfortunate. Do our actions reflect a willingness to empty ourselves for the benefit of others? Do our actions show that we have a humble view of our position of authority, so that we are willing to relinquish some of our status or power for the good of making a particular community stronger? There are myriad questions that we will have to ask if we would achieve the lofty goal set before us, but if we keep in mind the kenotic spirit of Jesus Christ, we will more likely make the correct practical decisions on a day-to-day basis.

BRIDGING THE DIVERSITY GAP

Universities have created a number of initiatives to increase diversity at all levels in education programs for the health professions — certificate, associate degree, bachelor’s degree and beyond. Still, overcoming numerous challenges to bridging the diversity gap in the health professions will require creative thinking and practical, policy-level mechanisms. Such mechanisms must garner broad support among health profession leaders, community members and other key stakeholders.

Resurrection University in Chicago offers a case study. Part of Presence Health, Resurrection comprises colleges of nursing and allied health fields. Because of Resurrection’s urban location and focus on adult learners, many of its students are retooling their careers or directly transferring to its upper-division program. This presents the university with the opportunity to quickly transi-



tion seasoned members of the workforce into new jobs within the various health care professions.

Each year, Resurrection admission recruiters visit a wide array of community colleges and use transfer guides to help students develop an academic program of course credits that will transition seamlessly between the college and the university. Transfer guides save time and money for students by helping them complete general education courses in a timely fashion and meet course requirements for a degree.

The Robert Wood Johnson Foundation's Academic Progression in Nursing initiative has helped develop a set of non-nursing, foundational courses for bachelor of science in nursing programs that can be adopted across the board by nursing schools at universities and community colleges. This standard set of requirements allows students to transfer credits more easily and prevents many of them from having to repeat courses. That, in turn, helps nurses advance their education more quickly and at less expense. Other health professions already have implemented similar programs, to the great benefit of their students, and Resurrection has followed in their path.

In another non-traditional approach, Resurrection's partnership with Concordia University, a four-year liberal arts university in the Chicago area, allows interested students to begin their program of study at Concordia and then finish their health professions degree at Resurrection, which is one of the few remaining upper-division universities focused solely on health professions. The College of Nursing offers Bachelor of Science in Nursing and Master of Science in Nursing degrees and expects to add a Doctor of Nursing Practice program. In allied health, Resurrection offers programs in imaging technology, health informatics and information management. The university's strategic and long-range plan outlines strategies to grow the university by adding post-baccalaureate certificate and degree programs in allied health.

Resurrection also has implemented several innovative programs aimed at increasing diversity in the health professions. "Men in Nursing," a special-focus open house, has been running

annually since 2003. With the enrollment of men in the College of Nursing's pre-licensure BSN program hovering at 16 to 18 percent — significantly higher than the national average — there is reason to believe the program aids in the recruitment of men. The university has added a "Men in Health Care" open house, which highlights careers in imaging technology, health care informatics and information management (formerly known as medical records), as these specialties rank among the top 10 fastest growing health professions in the country.

COORDINATION, COLLABORATION

Resurrection has dedicated a great deal of effort to coordinating a smooth process with community college partners, including an agreement to share important retention and graduation data and actively recruit pre-licensure students for bachelor's degree programs.

Resurrection also has established a partnership with Instituto Health Sciences Career Academy, a charter high school located three miles from Resurrection's campus in a largely Hispanic community. The academy focuses on preparing high school students for a career in one of the health professions, whether at the certificate, associate degree, bachelor's, or graduate level.

It encourages young people who are on the path to becoming nurses and physicians, while at the same time informing students that additional opportunities exist within the health care field.

The partnership provides the opportunity to meet urban youth at a vital stage in their education and to expand their vision of opportunities in the health care professions. It encourages young people who are on the path to becoming nurses and physicians, while at the same time informing students that additional opportunities exist within the health care field.

To this end, the faculty at Resurrection regularly holds brown-bag lunch sessions to talk about various careers in health care. Each year, young

men from the high school attend the open houses focused on men in health professions. Instituto's students graduate with a certificate in either nursing or medical assisting — high-demand, entry-level jobs in health care. Besides being able to immediately enter the workforce, the school's graduates also are ideal candidates for matriculation at Resurrection. Like many institutions, Resurrection University offers support services for the students who end up enrolling, including reading and writing tutors, peer tutors, professional tutors, academic advising, internships, and national and international service learning courses.

Resurrection's student population is 66 percent minority, many of whom are parents juggling a multitude of competing priorities. In response, the university started the CARES Fund, a program that provides students in difficult financial situations with cash to buy items such as diapers and baby formula, or to pay the rent. Generous donors have supported scholarships for students pursuing a second degree.

The university's accelerated program and evening and weekend courses appeal to adults with family and job commitments. The university also admits students three times per year, and nearly all of the faculty work 12-month contracts.

Resurrection has made an extra effort to recruit minority faculty, a difficult aim in the health professions, given the severe shortage of faculty of color with terminal degrees. The ultimate goal is to have a level of ethnic diversity among the faculty that more closely resembles the student body.

Alongside these institutional efforts, Resurrection has continued to advocate for increased federal funding to underwrite both the marketing and infrastructure that will be necessary for cultivating greater diversity in the health care professions. Alongside key programs that are already in place, such as Title VII and Title VIII of the Public Health Service Act, the university is looking for funding to expand minority faculty repre-

sentation. Resurrection also is a vocal proponent for affirmative action in college admissions so as to foster more diverse ethnic and socioeconomic representation within the health care workforce.

A PRESCRIPTION FOR IMPROVED OUTCOMES

Greater racial and ethnic diversity among health professionals will improve the access to and quality of health care for all Americans. What's more, if students in the health field can be educated in a timely and thorough manner, the opportunity already exists — and is growing — for them to progress into well-paying jobs.

If we, as educators, respond to this call to aid the common good, we will be fulfilling some of the most basic roles that Christ calls his followers to fill. Will we empower the poor and needy, by providing a true avenue for subsidiarity? Will we imitate the self-giving Spirit of Christ, his *kenosis*, by emptying ourselves into the community most in need of education?

If we do so, we will truly adhere to our mission.

BETH A. BROOKS is president of the Brooks Group, LLC, a health care consultancy in Chicago. She is the immediate past president of Resurrection University.

BARBARA Q. DECKER is president; **BO BONNER** is director of campus ministry; **RYAN MARR** is assistant professor of philosophy, all at Mercy College of Health Sciences, Des Moines, Iowa.

NOTES

1. Bureau of Labor Statistics, "Employment Projections: 2014-24 Summary," news release, Dec. 8, 2015. www.bls.gov/news.release/ecopro.nr0.htm.
2. Pontifical Council for Justice and Peace, *Compendium of the Social Doctrine of the Church*, chap. 4, para. 187. www.vatican.va/roman_curia/pontifical_councils/just-peace/documents/rc_pc_justpeace_doc_20060526_compendio-dott-soc_en.html.

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

www.chausa.org

HEALTH PROGRESS®

Reprinted from *Health Progress*, September - October 2017
Copyright © 2017 by The Catholic Health Association of the United States
