Check for updates

OPEN ACCESS

EDITED BY Andrea Cioffi, University of Foggia, Italy

REVIEWED BY Qian Luo, George Washington University, United States

*CORRESPONDENCE Yang Zou ⊠ yang6127z@gmail.com

SPECIALTY SECTION

This article was submitted to Health Policy and Management, a section of the journal Frontiers in Health Services

RECEIVED 01 November 2022 ACCEPTED 12 January 2023 PUBLISHED 13 February 2023

CITATION

Zou Y (2023) Improving healthcare workforce diversity. Front. Health Serv. 3:1082261.

doi: 10.3389/frhs.2023.1082261

COPYRIGHT

© 2023 Zou. This is an open-access article distributed under the terms of the Creative Commons Attribution License (CC BY). The use, distribution or reproduction in other forums is permitted, provided the original author(s) and the copyright owner(s) are credited and that the original publication in this journal is cited, in accordance with accepted academic practice. No use, distribution or reproduction is permitted which does not comply with these terms.

RETRACTED: Improving healthcare workforce diversity

Yang Zou*

Department of Medical Ethics and Health Policy, Perelman School of Medicine, University of Pennsylvania, Watkinsville, GA, United States

KEYWORDS

diversity, healthcare, workforce, patient care, healthcare policies

The world is increasingly becoming a global ellage, resulting in an increasingly diversified patient population. Ideally, given the ease of movement patients seek healthcare outside their countries of origin. This has created on urgent need to develop a diversified workforce to cater to this changing demographic (1) By improving healthcare workforce diversity, stakeholders can offer a complete range of services and meet the needs of an increasingly diverse patient population. Valious sources of diversity will need to be explored if a truly diverse workforce is to be neveloped. In a global environment, all stakeholders must share the responsibility for improving diversity within the healthcare workforce.

Diversity and inclusion are two key features that are frequently mentioned in the delivery of quality healthcare services. Frequenciare practitioners will nearly always play a role in addressing diversity issues, including cultural sensitivity and awareness within their service provision (2). Some of the sources of diversity they have to contend with include language, which is the most important factor, then it comes to comprehending and communicating with the patient, then there is a main which is a highly variable construct that can have a significant impact on healthcare reperience, and these factors will affect the ability of the healthcare practitioner to driver optimal care (3). Consequently, there is a need to develop a culturally competent workfore that can appreciate these differences and incorporate them during patient care.

Other assues that emerge as a result of the increased diversity of patients in the healthcare setting include sexuality, faith claims, and gender identity. Sexuality affects the ability of the healthcare practitioner to deliver care sensitively, in addition to potentially hurting the patient's clinical care (4). Gender identity and sexuality are seen as significant issues that need to be addressed by healthcare practitioners as part of their role, which the experience of transsexual healthcare workers can evidence. Finally, an individual's faith and spirituality can sometimes impact how they accept and understand the illness, thus impacting their healthcare experience (4). Ultimately these factors play a crucial role in patient outcomes creating a need for a diverse workforce.

The creation of Diversity in the Healthcare Workforce promotes the inclusion of all members of society to practice medicine and take ownership of their communities. Inclusion is one aspect that should be emphasized as it prepares the healthcare workforce for patients with diverse backgrounds (5). Improving healthcare workforce diversity will encourage providers to increase awareness of these issues and empower them with the necessary skills to respond holistically to the demands of an increasingly diversified patient population (5). Moreover, healthcare providers and their institutions must address the needs of the specific patient populations that are not being served and promote inclusion to create a more fulfilling relationship between them and their patients. Through this approach, the healthcare organization can improve patient outcomes through a holistic treatment approach.

Various strategies have been developed and adopted to improve diversity within the healthcare industry. These strategies have, however, varied in their approach, scope, and effectiveness. Some of these strategies include sensitivity training for healthcare providers, a common strategy used to improve diversity in the healthcare workforce (1). The main aim of this strategy is to improve cultural sensitivity within the community by providing prospective healthcare providers with the knowledge and skills necessary to meet the needs of their diverse patients (5). This is achieved by increasing awareness on various issues such as race, ethnicity, sexual orientation, gender identity, and body stature, among several others. Orientation programs are also used to promote diversity in the healthcare workforce. These programs focus on individual development, which covers professional issues such as credentialing; there are also personal development skills that help a newcomer adapt to the new setting. Finally, policies and legislation that aim to eliminate discrimination and ensure that the healthcare system is inclusive of all people have been developed to encourage inclusion and diversity within the healthcare workforce. These policies.

These remedies are, however, normative as such, are limited in their effectiveness. Some of the weaknesses of the proposed strategies include the fact that they are not culturally specific (4). Healthcare providers need to develop knowledge, awareness, and skills to respond to the needs of various clientele, which is limited in implementation. The strategies also lack a clear framework that should be adopted, which makes them challenging to implement (4). The diversity in the healthcare workforce should be approached cautiously by the healthcare industry as a whole since the creation of this initiative can lead to unintended negative impacts on their working practices (3). Finally, these measures are not easily adaptable to various situations that demand divently within the healthcare sector.

The local government in various jurisdictions should be held accountable for developing and adopting policies that will be used diversity and inclusion within the various healmeare invitutions under its care. Given the government's or eright role in the healtheare industry, it is better placed to support the creation of a diverse healtheare workforce that can deliver quality healtheare services to the community (1). Local governments hould, however, be cognizant of certain considerations when creating appropriate policies that will ensure inclusion and diversity within the various healtheare institutions within other jurisdictions. Such considerations include the following: has that prohibit healtheare discrimination; policies that promote an inclusive environment; and ensuring that senior providers and decision-makers in various institutions acknowledge the issue and respond to it.

Overall, improving healthcare workforce diversity is not an easy endeavor for the healthcare industry. Many factors need to be considered and addressed to achieve this goal. Strategies developed by the healthcare sector should incorporate policy and legislative measures and culturally specific programs (1). Moreover, these policies should be in line with existing legislation since they directly impact the operation of these organizations, in addition to creating a sense of inclusion within the healthcare workforce. These policies' success depends on their mode of implementation and cultural diversity, so these strategies must be implemented effectively and consistently to avoid any negative impact on their working standards. These strategies should be re-evaluated and modified as necessary to ensure a successful result. Finally, the healthcare industry should be held accountable for the implementation of these stratigies and be expected to demonstrate ment to diversity in the workforce. the necessary comm.

Author contributions

Z is the primary and the only author who contributed to this article. All author contributed to the article and approved the submitted version.

Conflict of interest

The author declares that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Publisher's note

All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

References

1. Borkowski M, Borkowski P. The role and tasks of the local government in the promotion of public health. Zeszyty Naukowe Gdańskiej Szkoły Wyższej. (2018) 18 (1):9-16. doi: 10.24426/zngsw.v18i1.15

2. Darker CD, Nicolson GH, Carroll A, Barry JM. The barriers and facilitators to the implementation of National Clinical Programmes in Ireland: using the MRC framework for process evaluations. *BMC Health Serv Res.* (2018) 18(1):1–10. doi: 10.1186/s12913-018-3543-6

3. Petkovic J, Riddle A, Akl EA, Khabsa J, Lytvyn L, Atwere P, et al. Protocol for developing guidance for stakeholder engagement in health and healthcare guideline

development and implementation. Syst Rev. (2020) 9(1):1–11. doi: 10.1186/s13643-020-1272-5

4. Rotenstein LS, Reede JY, Jena AB. Addressing workforce diversity—a quality-improvement framework. N Engl J Med. (2021) 384(12):1083–6. doi: 10.1056/NEJMp2032224

5. Stanford FC. The importance of diversity and inclusion in the healthcare workforce. J Natl Med Assoc. (2020) 112(3):247–9. doi: 10.1016/j.jnma.2020.03.014