Equity as shared power
A Demand for Diverse Health Professionals

- By 2020, nearly 2/3 of U.S. jobs will require post-secondary education & training

- California is projected to need nearly 450,000 new health workers by 2020

- California’s aging and racially & ethnically diverse population requires culturally responsive prevention and treatment strategies

Public Policy Institute of California (2017)
Health Equity

Achieving health equity =

• Acknowledging institutional racism as a root cause of generational poverty

• Creating fair opportunities for ALL to experience and maintain optimal health

• Collaborating with internal and external partners to improve the societal sectors that influence health and self-sufficiency (e.g. employment, education)
Education: The Equalizer

College-and-Career Preparedness → a multi-sectoral approach to address racial inequities in the health care system

Education Is A Key Social Determinant of Health
2013 - Richmond Public Health Solutions Project

Goal – Develop career pathway from a community disproportionately affected by health inequities, racism, poverty, and incarceration to ensure a patient-centered health workforce that reflects the racial and lived experience of the communities served.
2013 - Richmond Public Health Solutions Project

- High School Health career curriculum and project-based learning
- Paid CCHS, community-based summer internships & clinical shadowing
- Healing-centered youth and adult trainings
- Mentorship, prof development, college readiness workshops/field trips
- Young Men of Color Pilot – EMS Exposure
- CCHS employment application assistance
Program Successes

• 1000+ students reached, 150 paid internships, 12 interns hired, 5 interns’ research published, 3 certified EMTs

• Intern Demographics: 52% Hispanic, 24% Asian American, 21% African American, and 3% Caucasian; 70% female

• 5 high schools reached including Mt. McKinley HS (Juvenile Hall)
Program Successes

• Interns surveyed in senior year (2016): 100% planned to attend college; 11% planning AA degree; 37% planning Bachelor’s degree; and 52% Graduate degree or higher

• Interns meeting WCCUSD math standards (32%) and English standards (66%) two times the rate of those without internships

• CCHS Career Pathways Workgroup; 2 school district Health Advisory Boards
What will happen when Funding Ends

- Students at five high schools in Contra Costa County will not have access to education about health careers or opportunities for internships
- Fewer students of color will plan to attend college
- Health benefits associated with higher education will decrease
- California will be less likely to meet its goal for a racially and ethnically diverse health care work force
Community Health Improvements Expected with Sustained Funding From a California Wellness Trust

- Increase educational attainment for Contra Costa youth
- Increase employment among high school and college graduates in health related fields
- California’s health system more likely to have sufficient capacity of racially and ethnically diverse workers
Community Health Improvements Expected with Sustained Funding From a California Wellness Trust

• Decrease intergenerational poverty and wealth inequities in the county

• Decrease SDOH risk factors for chronic disease, interpersonal and community violence

• Improved health outcomes for communities of color
Community Health Improvements Expected with Sustained Funding From a California Wellness Trust

Expand program to include:

• College and Career Mentorship and Peer Ed for young men of color and juvenile reentry populations

• Healing-centered training for teachers and preceptors and Racial Equity organizational assessments

• Youth-participatory research and youth-adult hiring teams
“As we light a path for others, we naturally light our own way.”

-Mary Anne Radmacher
Contact Information

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