

Advancing Diversity at San Francisco Department of Public Health Behavioral Health Services

Background

- Expanding healthcare workforce diversity is critical to addressing health inequities within systems serving diverse populations.
- Despite projections that individuals from minoritized backgrounds will make up more than half of the U.S. population by 2060, the physician workforce does not represent these demographic trends.

Objectives

- To understand the demographics of the psychiatric prescriber workforce in the San Francisco Department of Public Health (DPH)'s Behavioral Health Services (BHS).
- To explore recruitment, retention, and DEI factors impacting the workforce.

Methods

- Expert consultation and review of research on current evidence-informed/best practices for curating an equity-minded demographic survey of behavioral health prescriber (DOs, NPs, MDs).
- Community & stakeholder input on survey content and reflections on the project through participation in meetings with prescribers and medical directors within the system.

The "Good"

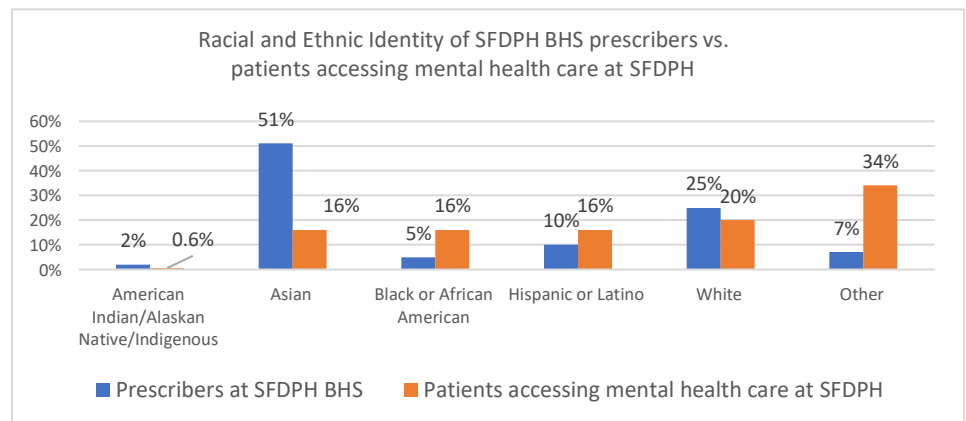
- Most prescribers at SFDPH BHS are satisfied with their work.
- There are some consistencies in recruitment and retention factors (figure 1).
- Access to opportunity and cultural competency were factors that were significantly associated with satisfaction in working at SFDPH BHS. [1]

Figure 1: Top 5 Recruitment & Retention Factors

	Reason for joining	Reason for staying
Opportunity to work with specific population or area of interest	83%	75%
Benefits (medical/life insurance, PTO)	56%	75%
Colleagues/Social/Cultural Environment	56%	73%
Salary/Pay rate	31%	54%
Workload expectations	31%	50%

The "Growth"

- Black prescribers are under-represented in comparison to Black clients accessing care at SFDPH BHS.
- Higher need for linguistic diversity especially around Spanish language access.
- Concerns around systemic ability to handle issues around discrimination.



Next Steps/Recommendations

- There should be systemwide intentional disaggregation of client/patient ethnographic data to better understand the need for culturally congruent care.
- Expanding structural resources and community awareness of available infrastructure focused on handling issues around discrimination.