

Increase Diversity in the Occupational Therapy Workforce

Support the Allied Health Workforce Diversity Act: S.1679/H.R.3320

As Congress seeks ways to improve health care outcomes in our country, it should ensure the health care workforce in the United States evolves to mirror the makeup of the population. The Institute of Medicine raised concerns about the diversity of the health care workforce in their 2004 study, *In the Nation's Compelling Interest: Ensuring Diversity in the Health Care Workforce*. Racial and ethnic minorities largely receive lower quality health care than non-minorities. Overall, increasing diversity will lead to improved access to care, greater patient choice and satisfaction, and better education experience for health professional students, among many other benefits.

Occupational therapy practitioners support the health and participation of clients through engagement in meaningful occupations (i.e., everyday activities). OTs and OTAs help clients who have experienced (or are at risk for experiencing) illness, injury, or disability to engage in their meaningful roles, habits, and routines, all of which are linked to their culture, background, and experience.

In addition to the reasons stated above, a more diverse health care workforce is important because:

- Patients who receive care from members of their own racial and ethnic background tend to have better outcomes
- Health professionals from underrepresented and minority backgrounds are more likely to practice in medically underserved areas
- Minority groups disproportionately live in areas with provider shortages
- A more diverse workforce and student population increases the sense of belonging and improves the quality of occupational therapy services to underserved populations

Having a more diverse workforce will help address the shortages of allied health professionals, and it is especially crucial to address these shortage in a post-COVID-19 era, as the needs for occupational therapy will increase resulting from the role OT plays in COVID-19 long haulers recovery. The nation must ensure health care providers reflect the communities they serve while improving the ability of the health care workforce to effectively address the needs of all Americans. Estimates show that the burden of racial and ethnic health disparities will cost the United States \$363.1 billion a year in lost productivity and health care spending by 2050.

The bipartisan Allied Health Workforce Diversity Act (S.1679/ H.R.3320), introduced by Sens. Bob Casey (PA) and Lisa Murkowski (AK) in the Senate, and Reps. Bobby Rush (IL-01) and Markwayne Mullin (OK-02) in the House, will increase the number of individuals currently underrepresented in the professions of occupational therapy, physical therapy, respiratory therapy, speech-language pathology, and audiology.

This legislation creates a program administered by the Health Resources & Services Administration (HRSA) and funding to ensure the flexibility to adapt and change the groups that are underrepresented, in order to grow with a changing health care workforce. The funding proposed in this bill allows the higher education programs for these professions to strengthen and expands the comprehensive use of evidence-based strategies shown to increase the recruitment, enrollment, retention, and graduation of students from underrepresented and disadvantaged backgrounds. These strategies include outreach to the community, the creation or expansion of mentorship and tutoring programs, and providing scholarship and stipends to students.

This bipartisan legislation moves our nation closer to the goal of a health care workforce that mirrors society. It would provide HRSA with the tools and flexibility to reduce shortages, lower costs, and increase the quality of our nation's health care workforce.