



DIVERSIFYING THE
BEHAVIORAL HEALTH
WORKFORCE IN COLORADO

Report, Recommendations, & Strategic Plan

Table of Contents

EXECUTIVE SUMMARY 3

ABOUT 5

BACKGROUND 5

STRATEGIC PLAN..... 7

FURTHER RECOMMENDATIONS..... 11

REFERENCES / RESOURCES..... 12

EXECUTIVE SUMMARY

Coloradans from diverse cultures and with unique identities face significant challenges finding affirming and culturally responsive behavioral health care. One significant barrier involves a statewide shortage of providers across the board. Waitlists are as long as 18 months at some large, urban healthcare providers. Burnout, low pay, few opportunities for providers without advanced degrees, and the COVID-19 pandemic entering into year three are all contributing factors.

The search is even harder for people from historically underrepresented or marginalized communities who prefer to work with someone who shares their identity. Most of the current workforce is not representative of the communities, cultures, and identities of the people in need of services across Colorado.

There are numerous contributing factors to the current lack of representation in the field and labor shortage. Salaries for providers in community health and not-for-profit settings are not competitive with the rest of the healthcare industry. Many providers report making less than a living wage and needing to supplement with additional work or leave the field entirely. Low salaries also make it difficult to pay off student loans.

Providers working in inequitable systems can experience burnout. Burnout can also occur for practitioners without identity-sharing peers or mentors due to factors such as feelings of isolation and a lack of belonging.^{1,2} Many post-secondary academic institutions continue to lack a diverse student population for many reasons ranging from cost to the application process to navigating higher

education for first-generation or immigrant students. Efforts to increase diversity in the field often engage people from communities lacking representation; however, the emotional labor disproportionately falls on them even though they may not be compensated for their time or have the decision-making power to make implement change.

The pandemic highlighted and exacerbated these behavioral health workforce issues in Colorado and the US. Over the past few years, Colorado legislators and healthcare leaders have worked on researching the current climate, securing funding, and setting strategic goals to address the issues, including creating and supporting a more diverse pool of providers that better represents our communities.

The **Diversifying the Behavioral Health Workforce Project** team compiled data collected from a variety of stakeholders to inform a plan and recommendations for a strategic, collaborative approach to **1)** increasing representation in the pool of behavioral health providers available in Colorado; and **2)** improving systems to recruit better and retain a more diverse workforce.

The key areas of focus can be thought of through the lens of the career pathway:

- 1 Recruitment**
- 2 Matriculation/Graduation**
- 3 Employment**
- 4 Retention/Leadership**

1 Recruitment

By promoting mental health, well-being, and social support networks from elementary through high school and creating positive, culturally responsive interactions with providers, students can be exposed to the benefits of behavioral health services and see the potential of working in the field. Strategic leaders are encouraged to create opportunities to listen to, engage, and include people from communities underrepresented in the field in the design and implementation of new and improved systems and programs. Seeking consultation with people from diverse communities should include compensation for their wisdom, ideas, and time. Some ideas include:

- ✔ Creating opportunities for young people to contribute through school peer programs
- ✔ Expanding roles for people with high school diplomas, associate's, and bachelor's degrees
- ✔ Creating information campaigns to educate communities on behavioral health experiences and services for increased engagement in services
- ✔ Holistic recruitment policies and practices for higher education institutions to increase equitable access to education



2 Matriculation/Graduation

Students from diverse communities have unique needs that require awareness and resources for the greatest number of students to succeed in higher education. Students and providers report numerous barriers in navigating the higher education system and financial hardship while enrolled and following graduation. Students should be provided with culturally responsive support and resources throughout their education to ensure graduation and entry into the field. These supports include:

- ✔ Increase the need-based scholarships available for people from underrepresented communities.
- ✔ Evaluate and improve the curricula of higher education programs to ensure culturally responsive and inclusive curricula are being taught to all students.
- ✔ Create mentoring and peer support opportunities for people with shared identities and cultures to guide and strengthen professional networks.



3 Employment

Recent graduates and others face new barriers early in their careers. Low wages make it difficult to earn a living wage or pay down student loan debt. Having too few peers with a shared identity can contribute to providers feeling isolated as they contend with systems that may not actively value and support them. Newer providers could use supports such as:

- ✔ Licensure support makes it easier for people to obtain licenses, providing increased pay and career opportunities.
- ✔ Flexible work opportunities encourage well-being for providers disproportionately impacted by the socio-political environment and inequitable systems.
- ✔ Professional development and coalitions support ongoing learning and support networks.



4 Retention / Leadership

To retain providers and provide opportunities for longevity in their careers, providers need targeted support to address systemic pain points and support their well-being, whether personal, social, professional, or financial. Diverse providers are in such a high need that efforts to support people in their careers would have a significant return on investment. Ideas include:

- ✔ Subsidizing costs for providers to stay or advance in the field and improving insurance reimbursements
- ✔ Fostering ongoing support resources for peer groups and mentorship opportunities that are developmentally relevant across the career path
- ✔ Creating training and opportunities for providers to have variety in their career and leadership opportunities

Behavioral health statistics in Colorado show there is a great need for culturally responsive providers who are representative of the communities in our state. The well-being of our communities depends on deliberate, impactful change. By implementing collaborative, strategic efforts across the state and within local communities, Colorado can create a more diverse behavioral health workforce and support the well-being of our family, friends, and neighbors. Although strategic efforts take time, there is no time better to start than now.



ABOUT

In the fall of 2021, four behavioral health organizations in the Denver Metro area came together with a shared mission to respond to the problem of a lack of diversity in the pool of behavioral health providers available to serve the community. They formed a collaboration: The Diversifying the Behavioral Health Workforce Project.

The four organizations that form the collaboration are:

- ✔ Envision: You
- ✔ Jacquelyn D. Stanton Consulting
- ✔ La Cocina
- ✔ Maria Droste Counseling Center

This project was made possible through the financial support provided by sponsors Colorado Access and Rose Community Foundation.



Jacquelyn D. Stanton Consulting

Overview

The project exists to grow and nourish the provider pool in Colorado by actively removing barriers and improving systems to support providers from diverse backgrounds in seeking and maintaining careers in the behavioral health field. The project team has developed a multi-year plan to recruit, train, and support the next generation of diverse behavioral health providers.

The project team completed this report to align with the current and upcoming statewide efforts to fund and implement system changes and improvements to recruit and retain people from diverse communities in the behavioral health field. This project provides salient information for behavioral health leaders, policymakers, change agents, educators, and funders to help inform practices and policies that support a future where Coloradans seeking behavioral health support have access to culturally affirming and responsive care.

BACKGROUND

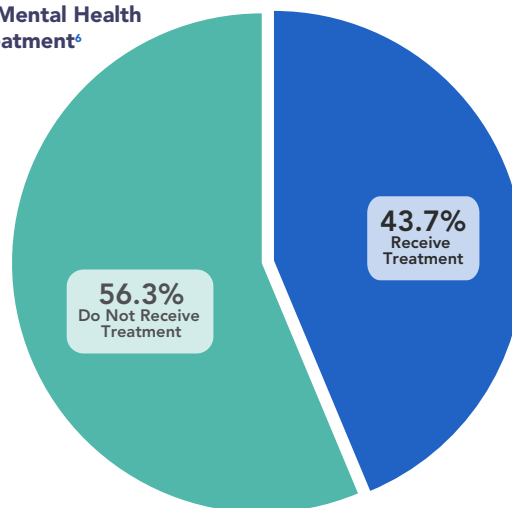
Culturally affirming and responsive care in behavioral health are integral for achieving the greatest outcomes for people who belong to historically marginalized and underrepresented communities. The best path to achieving these outcomes is recruiting and retaining a diverse workforce representing the communities served. That includes diversity in race, ethnicity, gender identity, sexual orientation, ability, citizenship or residency status, country of origin, and primary or preferred language.

Meaningful reform is required because Colorado is the lowest ranking state regarding mental illness and lack of access to mental health care. According to the Colorado News Collaborative, nearly 50 million adults experience mental illness, and more than half of Colorado adults living with mental illness do not receive treatment.⁶

Suicide is one of the leading causes of death in the United States. Colorado's suicide rate is alarmingly high, ranked 44 out of 50 states and DC for adults who had seriously considered suicide.⁵

One out of every two LGBTQ+ individuals have considered suicide. Substance use disorder is a major problem in Colorado, and many people living with substance use challenges do not receive proper care. In 2020, there were 987 known opioid overdose deaths in Colorado which have increased since 2018.⁵ Over 33% of Colorado adults reported symptoms of anxiety or depression and were not receiving needed counseling or therapy compared to the United States average of 26.9% of people.⁵

Coloradans In Need of Mental Health Treatment⁶



Black, Indigenous, and People of Color (BIPOC) individuals are disproportionately affected by mental health challenges. For example, 14.5% of youth who identified as more than one race reported having severe major depression compared to 10.6% of other youth.⁶ Hispanic and Black women are less likely to receive adequate care than cisgender men.⁵ Indigenous people were nearly three times more likely not to receive mental health care than the rest of Coloradans.⁶

Project Objectives

To address these issues in our state, the project team created a plan to promote and achieve the following objectives:

- Ensure safety, increase equity in care, and improve health outcomes for Coloradans, particularly for people from underrepresented groups.^{3,4,5,6}
- Provide quality, culturally relevant, and identity-affirming care.^{5,7}
- Reduce the impact on social safety nets, crisis centers, hospitals, and prisons/jails.⁸
- Support a healthier workforce, reduce stress, and increase provider well-being.³
- Bring awareness to mental health issues and decrease the stigma of seeking care.^{4,5}



Project Activities

Through quantitative and qualitative research, the project team gathered and analyzed data to influence systemic change in removing barriers that providers from diverse backgrounds may experience in seeking careers in the behavioral health field. The project team engaged with over 60 stakeholders from 30+ organizations representing a variety of roles and disciplines across the Denver metro area. These participants represented diverse cultural and spiritual groups and unique identities to hear from people who belong to historically underrepresented or marginalized communities. The team sought to understand their experiences through focus groups and surveys and invited ideas on actionable steps to recruit and retain a more diverse workforce.

A brief environmental scan identified new and emerging research and efforts. This project aligns with state efforts to fund and implement strategies to improve the workforce shortage and the problem of a lack of diversity in the field. For example, Colorado passed [Colorado House Bill 22-1278](#), which established a Behavioral Health Administration (BHA) to ensure Coloradans have access to behavioral health services. The BHA will lead a collaboration across all payers, state departments, and sectors to coordinate care for holistic services from prevention to recovery. Statewide efforts will focus on achieving goals and implementing recommendations provided by stakeholders such as this project, the CO Department of Human Services "[A Blueprint for Reform](#)", and "[Stakeholder Recommendations to Address the Behavioral Health Workforce Shortage](#)."

National innovative efforts were also identified to learn from and inform efforts in Colorado that are proving to be successful in other states. For instance, in Northern California, UnitedHealth Group is partnering with UC San Francisco through a \$4 million partnership grant to increase the workforce and diversify the talent pool for child and adolescent psychiatrists and psychiatric nurse practitioners. They are developing the next generation of providers with specialized training to care for underserved communities in rural and urban areas. Targeted areas for change include training for providers, partnering with diverse higher education institutions, and increasing the diversity of academic faculty and staff.

STRATEGIC PLAN

As outlined in this Strategic Plan, there are four areas where collaborative, strategic efforts can have the greatest impactful change. It is provided as a tool for organizations, government entities, and academic institutions to consider and include in their endeavors to hire, retain, and support people from diverse communities in the behavioral health workforce.

STRATEGIC PLAN 1 OF 4

1 RECRUITMENT

Listen		
<p>Goal</p> <p>Listen to diverse youth about how they view behavioral health and what would make those careers attractive.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➔ Embed in existing school mental health clubs, youth advisory councils. ➔ Listen to their needs and learn from their experiences. ➔ Provide Youth/Teen Mental Health First Aid. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Youth-serving organizations ✔ Schools
Expose		
<p>Goal</p> <p>Expose youth to the field and provide career trajectory opportunities.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➔ Establish post-secondary fellowship opportunities, including mental health first aid, exposure to career options, and application support. ➔ Collaborate with existing support programs in high schools through post-secondary education to establish a behavioral health track. ➔ Establish STEM-like marketing to create engagement and reduce stigma. ➔ Provide job shadowing opportunities. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Department of Education ✔ Department of Higher Education ✔ Community Colleges ✔ Youth-Serving Organizations ✔ High Schools
Expand		
<p>Goal</p> <p>Expand professional roles and reimbursement for people with education ranging from high school diplomas to associate's and bachelor's degrees and support career advancement in the profession.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➔ Build peer support models and other behavioral health career opportunities (e.g., health navigators) that don't always require graduate degrees but rather certifications. ➔ Create opportunities for these professional roles to progress in the field over time. ➔ Ensure a trajectory that is financially sustainable and rewarding to people over time. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Department of Education ✔ Department of Higher Education ✔ Community Colleges ✔ Insurance Payers ✔ DORA ✔ Community Mental Health Centers ✔ Funders
Revise		
<p>Goal</p> <p>Review and revise recruitment practices to be holistic in their standards and reach people from underrepresented communities.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➔ Analyze recruitment strategies used by behavioral health programs and provide recommendations for advancing holistic practices. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Colleges and Universities ✔ Department Higher Education ✔ Accreditation Bodies

2 MATRICULATION / GRADUATION

Provide		
<p>Goal</p> <p>Provide need-based scholarships and other financial support for tuition and education costs.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Evaluate the number of current scholarships available and their eligibility criteria. ➤ Partner with private, public, and government sectors to offer more need-based scholarships for people from underrepresented communities. ➤ Communicate availability of scholarships and ensure the application process is accessible. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Department of Higher Education ✔ Colleges and universities ✔ Private, public, and government entities
Review		
<p>Goal</p> <p>Review and revise academic curricula, making them more relevant and inclusive of people from all cultures and identities.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Work with academic leadership to review curricula and readings. ➤ Work with school administrations to establish plans for creating relevant curricula. ➤ Offer clinical training rotations. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Colleges and universities ✔ Field Placement Sites
Formalize		
<p>Goal</p> <p>Formalize culturally informed mentorship for students.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Create a cohort model support group that serves as an affinity or mentorship group during and beyond school. ➤ Create clusters or student groups across programs, fields, and schools. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ DORA ✔ Internship sites ✔ Colleges and Universities ✔ Internship sites
Fund		
<p>Goal</p> <p>Fund and resource peer support activities and learning experiences.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Fund student organizations and affinity groups. ➤ Fund graduate-level work experiences, training, and supervision to enable students to effectively learn and fund the service organizations to cover training costs that are not reimbursable. ➤ Support tuition, room, and board. ➤ Provide need-based scholarships. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Colleges and universities ✔ Internship sites ✔ CO Behavioral Health Administration ✔ Payers

3 EMPLOYMENT

Ease		
<p>Goal</p> <p>Ease the path toward licensure with improved systems and increased funding.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Provide free licensure preparation courses. ➤ Create accessible exams. ➤ Reduce barriers for people graduating from nonaccredited programs or with international degrees. ➤ Reduce barriers to reciprocal licensure with other states. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Colorado Immigrant Rights Coalition ✔ Latino Community Foundation ✔ US Department of Education ✔ Loan Forgiveness ✔ DORA
Flex		
<p>Goal</p> <p>Provide flexible employment opportunities and funding to support dynamic work opportunities across the lifespan.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Expand opportunities for independent contractors serving underserved populations to access loan forgiveness. ➤ Create variety in work opportunities that yield exposure to roles in research, administration, leadership, private practice contract roles, and telehealth/remote work. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Service organizations ✔ CDPHE
Train		
<p>Goal</p> <p>Fund postgraduate work opportunities that support new clinician development (i.e., Reasonable volumes of work, comprehensive training and development and supervision).</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Reimburse service organizations for supervision and revenue gaps for time focused on training and development with new clinicians. ➤ Allow activities to qualify for loan forgiveness or defer loan repayments during pre-licensure. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Payers ✔ HRSA – National Health Service Corps ✔ Government funding
Build		
<p>Goal</p> <p>Build a coalition of service organizations supporting new clinicians.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Secure funding to organize and establish a coalition of small to mid-sized, not-for-profit service organizations committed to developing new clinicians. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Service organizations ✔ Foundations

4 RETENTION & LEADERSHIP

Subsidize		
<p>Goal</p> <p>Subsidizing costs for providers from diverse communities to stay and advance in the field.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Reduce costs for licensure and continuing education requirements by expanding deemed status to service organizations committed to training. ➤ Reimburse for supervision and mentorship. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Payers ✔ Service Organizations ✔ Government ✔ Foundations ✔ Payers ✔ CO Department of Health Care Policy & Financing (HCPF)
Foster		
<p>Goal</p> <p>Foster ongoing Peer Support and mentoring programs with resources and funding.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Provide ongoing support at developmentally appropriate steps and create space for people to participate. ➤ Create a cohort for networking. ➤ Provide support to practice interviewing skills. ➤ Licensure support. ➤ Professional consultation across the career lifespan. ➤ Supporting and growing mentors through pay and professional development. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ CO Department of Human Services ✔ Behavioral Health Administration ✔ Community Mental Health Centers
Develop		
<p>Goal</p> <p>Develop professionals by providing accessible, culturally informed, and cost-effective training and supervision.</p>	<p>Action Steps</p> <ul style="list-style-type: none"> ➤ Fund programs that develop and nourish effective, culturally responsive supervisors. ➤ Provide coaching to advance career roles into leadership and higher earning potential. ➤ Provide accessible and cost-effective training to agencies and leaders on culturally informed care. ➤ Design pathways to executive leadership, legislative committees, research, and evaluation, with training in data, business and administration, finance, and policy. 	<p>Potential Partners</p> <ul style="list-style-type: none"> ✔ Service organizations ✔ Advocacy groups ✔ Colleges and Universities ✔ Nonprofit training organizations

FURTHER RECOMMENDATIONS

1. Encourage workforce diversity as a current priority in Colorado. The myriad of efforts will need alignment and communication for all stakeholders to ensure progress.
Recommendation: Statewide sharing from lead government agencies of priorities, efforts, funding, and up-to-date progress on goals.
2. Systemic change requires an understanding of the root causes of the problem and a multidimensional approach to change.
Recommendation: Adoption of a “career lifespan” perspective for implementing targeted solutions along the career pathway.
3. Research, collaboration, implementation of ideas, and evaluation need resources to be productive.
Recommendation: Ensure funding is prioritized and provided to bring new ideas to fruition.
4. Strategic efforts of this scale will benefit from collaborative efforts.
Recommendation: Promote collaboration across diverse groups of stakeholders for greater outcomes.
5. People from underrepresented communities have unique perspectives on the problem at hand. To gather the most relevant and culturally responsive ideas for action, we must include stakeholders from these communities at every stage of the work.
Recommendation: Center the voices of people from underrepresented communities in the research, design, and implementation of change efforts. This can best be done through a Human-Centered design approach.

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