

## Developing Metrics for Six Health Workforce Equity Domains

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**ISSUE:** The vision of Health Workforce Equity (HWE) is a diverse workforce with the competencies, opportunities, and courage to ensure that all people attain their full health potential. As we have previously proposed, HWE spans six different domains: (1) who enters the workforce, (2) how they are educated and trained, (3) how they are distributed, (4) whom they serve, (5) how they practice, and (6) under what conditions they work.<sup>1</sup> To improve policies in each area, it is important to identify valid measures to track progress and hold specific decision-makers accountable for HWE performance. This project aimed to identify, define, and report on a set of draft measures for these domains, thereby serving as proof of concept for HWE and further work. In this first effort, we have focused on measurement at the state level, as state-level decision-makers are one of the most critical stakeholder groups affecting workforce policy.

**METHODS:** We selected HWE measures using an iterative approach and guiding criteria. First, the research team identified a preliminary list of measures based on those frequently cited in the published scholarly literature. The data source for this was a series of HWE evidence reviews conducted and published by the Mullan Institute.<sup>2</sup> The preliminary measures were honed based on their feedback following a workshop with content experts. A final set of measures was determined based on four guiding criteria: 1) a preference for publicly available data, 2) nationally representative data, 3) applicability of the data at the state level, and 4) reflection of the problem (rather than consequences) associated with each HWE domain.

Data sources for each measure were selected in collaboration with a team of quantitative data analysts with experience with health workforce-relevant datasets. Many data sources were from federal government agencies, including the Centers for Medicare & Medicaid Services, Health Research & Services Administration, Bureau of Labor Statistics, and the U.S. Census Bureau. The private data source most often selected for HWE measurement was the American Medical Association Physician Master File. The data team collected and cleaned state-level reporting using the most recent data available for each measure. Although methods specific to developing each measure varied, they were all standardized and aggregated to convey measurement at the state level.

**FINDINGS:** We identified, collected, and reported data for 21 HWE measures (two are used for more than one domain).<sup>3</sup> Broadly, these measures capture state-level performance related to health workforce diversity, the social mission of health professions education, distribution of high-need health care workers, clinician Medicaid acceptance and care for underserved populations, healthcare delivery that addresses the root causes of health disparities, occupational health and safety, and worker compensation. We observed wide variation across states for many HWE measures, suggesting the measure would be particularly useful for assessing performance.

**DISCUSSION:** This project represents the first attempt to measure the pioneering concept of HWE – a necessary precursor to establishing greater accountability and improving outcomes in this area. The variation we observed across states for the 21 measures identified speaks to the potential role of state policy levers in advancing – or hindering – HWE. Developing a better understanding of which policies and other state-level factors explain this variation will be an important next step in advocating for and implementing HWE best practices and policies. Additionally, the set of measures identified in this study could form the basis for constructing a state-level interactive tool that tracks health workforce equity in the United States over time and ranks states on their performance to encourage greater accountability.

**Key Words:** Health workforce equity; Measurement and evaluation; State policy

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<sup>1</sup> Pittman P, Chen C, Erikson C, Salsberg E, Luo Q, Vichare A, Batra S, Burke G. Health Workforce for Health Equity. *Med Care*. 2021 Oct 1;59(Suppl 5):S405-S408. doi: 10.1097/MLR.0000000000001609. PMID: 34524235; PMCID: PMC8428843.

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<sup>2</sup> Pittman P. The health workforce equity evidence review series: introduction and executive summary. Fitzhugh Mullan Institute for Health Workforce Equity, George Washington University. May 2022. [www.gwhwi.org/hweseries.html](http://www.gwhwi.org/hweseries.html)

<sup>3</sup> Health Workforce Equity Measures. Fitzhugh Mullan Institute for Health Workforce Equity.  
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