Pathways and Priorities in California's Healthcare Workforce

Insights from Black Women and Latinas

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February 2026

Research Direction and Implementation

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This report is a joint effort of Hispanas Organized for Political Equality (HOPE) and Black Women Organized for Political Action (BWOPA-TILE).

Executive Summary

Healthcare workforce shortages in the United States are projected to increase substantially over the next two decades.[1] These shortages not only limit access to care but also threaten the health outcomes of the nation's growing aging population. In California, rising demand for health care – shaped by demographic shifts, the lasting effects of the COVID-19 pandemic, and the need for future public health preparedness – has heightened the urgency of strengthening and sustaining the healthcare workforce.

Addressing workforce shortages also requires examining who is represented within healthcare professions and how persistent challenges in access to training and career advancement contribute to these gaps. Despite comprising approximately 40% of the California population, Latinos represent only 16% of Registered Nurses. According to the California Health Care Foundation's 2023 Midwifery Workforce Snapshot, Latinas represent 12% of licensed midwives and 10% of licensed nurse-Midwives. Similarly, Black women remain significantly underrepresented in healthcare professions both nationally and within California. Although Black Californians constitute approximately 5.3% of the state's total population, they account for only about 2% of licensed midwives and 4% of nurse-midwives. For decades, Black physicians have comprised only 3% to 3.9% of California's total physician workforce.[2]

These figures highlight the importance of closely examining structural barriers that limit the education, training, recruitment, retention and advancement of Black women and Latinas in healthcare careers. Across the healthcare career pipeline, from early exposure and education to workforce entry and professional advancement, Black women and Latinas encounter significant obstacles. They remain underrepresented across various healthcare disciplines, including family medicine, pharmacy, and dermatology, and experience disparities in compensation and access to advancement opportunities (Okoro et al., 2024).

Access to early healthcare career pathways is influenced by the affordability of healthcare education, with financial constraints, rising student debt,[3] limited transfer pathways, and restricted seats in competitive programs such as nursing significantly reducing opportunities for access to healthcare fields. Beyond education and training, women often encounter challenges when transitioning into the workforce, including limited mentorship opportunities, a lack of paid training options, and competing family and caregiving responsibilities (Greer & Kirk, 2022).

To better understand these experiences and elevate opportunities to turn insight into action, Hispanas Organized for Political Equality (HOPE) and Black Women for Political Action (BWOPA) commissioned EVITARUS, a California based public opinion research firm, to conduct quantitative and qualitative research to better understand their experiences, priorities and considerations of Black women and Latinas pursuing or considering careers in the healthcare field.

The resulting 2026 California Equity in Healthcare Workforce Development Report amplifies the voices and identified priorities of Black women and Latinas on career aspirations, opportunities, and experiences. The report draws from an online survey of 800 Black women and Latinas conducted from November 5-12, 2025, and two online focus groups among women who identify as Black, Latina or both. Together, these findings illuminate pathways toward building a healthcare workforce where talent is supported, valued, and able to thrive.

1. https://nihcm.org/newsletter/rising-healthcare-workforce-shortage#hcworkforce
2. https://calmatters.org/commentary/2022/11/california-black-doctor-education-health-care/
3. https://csahq.org/2025/08/05/how-loan-policy-threatens-female-and-urim-anesthesiology-trainees/

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Key Findings

Limited advancement opportunities amid financial strain:

A large majority of Black women and Latinas in California feel there are too few opportunities for advancement, with financial pressures posing significant challenges. Nearly all cite the rising cost of living (98%) and housing affordability (95%) as major concerns. Four in ten report that reductions in financial aid programs (40%) or a recent job loss (41%) have negatively impacted their ability to pursue career goals.

Education and training systems are not meeting workforce needs:

Nearly two-thirds (65%) of Black women and Latinas rate California's community colleges, public universities, and career or job training programs as only fair or poor in adequately preparing them for high quality opportunities and the jobs of the future, signaling misalignment between education systems and workforce pathways.

Mentorship gaps limit entry and persistence in healthcare careers:

Black women and Latinas report that the mentoring support meant to help them enter careers and the healthcare workforce is often inadequate or negative. More than half (56%) report having been discouraged from a family member, professor, counselor, or teacher from pursuing a particular career path. Among those interested in healthcare, only about half (49%) say they were encouraged to pursue a healthcare profession.

Trust and access shape healthcare career interest:

Among women who have regular access to a health care provider only one third (32%) trusted them a lot, while over two thirds of the women (63%) only trusted them a little or somewhat. More than half (57%) say that having greater access to a hospital, clinic or health care center closer to where they live where they could either study, volunteer or train would make them more interested in pursuing a healthcare career.

Healthcare careers are valued but perceived as demanding:

While more than three-quarters (80%) of Black women and Latinas feel that healthcare jobs are highly important for their local communities, 69% of these women also describe these jobs as very stressful and emotionally taxing.

Clear solutions emerge from lived experience:

Black women and Latinas consistently identify practical supports as critical to pursuing healthcare careers, including hands-on learning experiences to gain fieldwork exposure (92%), flexible class and internship schedules like night classes or online/hybrid formats (92%), and financial assistance such as scholarships and aid that cover childcare and transportation costs (90%).

Key Recomendations

Black women and Latinas face intersecting challenges driven by rising living costs and affordability, gaps in education and training systems, and underrepresentation in healthcare professions. Their experiences point to several priority actions for building a more equitable and representative healthcare workforce:

Expand financial supports to reduce economic barriers:

Increase financial aid, scholarships, and loan forgiveness programs, while addressing the broader cost-of-living pressures—particularly housing, childcare, and transportation—that limit the ability to pursue and persist in healthcare education and careers.

Simplify and strengthen pathways to healthcare degrees and careers—including early exposure and accessible training options:

Strengthen education-to-career pathways by investing in education and training programs aligned with workforce needs, including expanded transfer pathways, increased capacity in high-demand healthcare programs, and clearer connections between education, certification, and employment. Increase early exposure to healthcare careers through high school and postsecondary initiatives, hands-on learning experiences, and community-based programs. Provide flexible and locally accessible training opportunities that allow individuals to study, volunteer, and gain practical experience in healthcare careers, while broadening awareness of the full range of professions beyond commonly known roles.

Increase mentorship, paid training, and workforce supports:

Support programs that provide culturally responsive mentorship, paid internships, apprenticeships, and structured on-ramps into healthcare careers, with particular attention to flexible schedules and wraparound supports that address caregiving and work responsibilities.

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Introduction

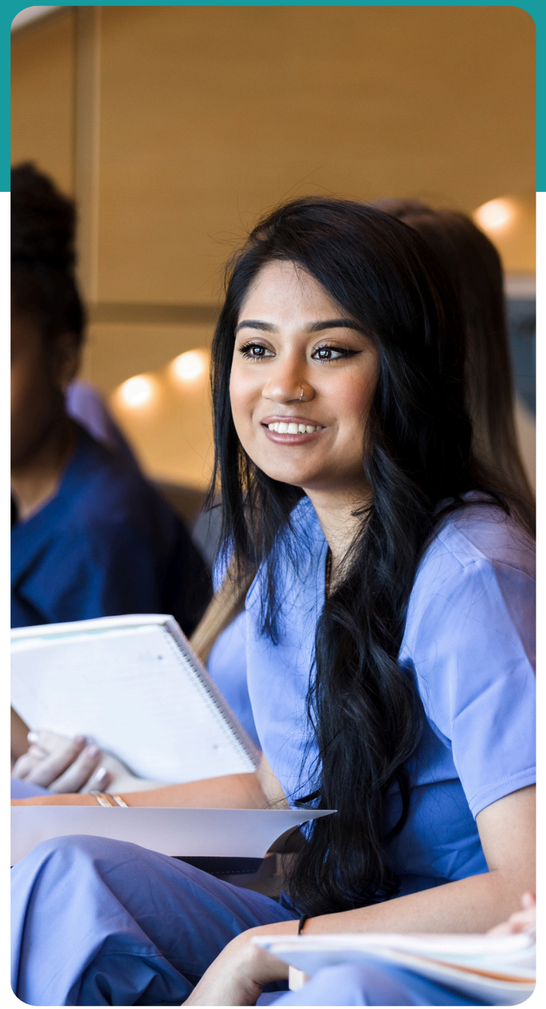
In the United States, healthcare workforce shortages are projected to rise significantly over the next twenty years. The Association of American Medical Colleges has projected a shortage of over 85,000 physicians by 2036.[4] Similarly, the National Center for Health Workforce Analysis has estimated that by 2037 there will be a 6% projected shortage, which is equivalent to nearly 275,000 registered nurses.[5] These workforce shortages deeply impact access to care and have detrimental consequences on the health outcomes of the U.S. population.

As the aging U.S. population ages and demand for medical and long-term care services increases, addressing these workforce shortages is critical to maintaining a functional and accessible healthcare system. The aging population is already generating heightened demand for medical services across multiple specialties beyond primary care, including obstetrics and gynecology (OB/GYN), oncology, neurology, psychiatry, and others. Numerous specialties are currently operating at or near the minimum per capita levels recommended by the Council on Graduate Medical Education, and in several regions of California, they remain below the advised thresholds.[6] In the context of a post-COVID-19 landscape—and with the need to prepare for future public health emergencies—it is essential to understand how lack of representation of certain groups within healthcare professions may contribute to these workforce shortages. These workforce gaps point to the need for closer examination of persistent disparities in training, recruitment and retention in healthcare professions, especially among Black women and Latinas.

Although Latinos constitute nearly 20% of the U.S. population, they account for only about 6% of physicians. By contrast, other groups are far more likely to be represented in healthcare—approximately 60% of physicians identify as white, and about 17% identify as Asian (Anaya et al, 2022). In California, Latinos make up roughly 40% of the state's population. However, they represent only 10% of registered nurses.

Similarly, data from the California Health Care Foundation's 2023 Midwifery Workforce Snapshot reveals substantial disparities in midwifery representation: just 12% of licensed midwives and 10% of nurse-midwives are Latina. California Latinos account for approximately 8.4% of physicians and surgeons, 11.3% of occupational therapists, and 16% of physician assistants—percentages that fall well below their share of the state's overall population.[7] Given the underrepresentation of Latinas in California's healthcare workforce and the increasing demand resulting from healthcare shortages, Latinas are well-positioned to meet the growing workforce needs. Latinas constitute a relatively younger demographic both statewide and nationally, which further supports their potential entry into the healthcare sector.[8]

Despite comprising 14% of the U.S. population, Black Americans remain markedly underrepresented in the healthcare workforce. A 2021 study from the University of California, Los Angeles found that only 5.7% of Physicians nationwide identified as Black (Rivero, 2021). In California, where the Black population is approximately 5.3%, there is still a limited representation in the healthcare workforce. The California Health Care Foundation's 2023 Midwifery Workforce Snapshot revealed that only about 2% of licensed midwives and 4% of nurse-midwives were Black. Black Californians account for approximately 3.9 of physicians and surgeons, 2.1% of occupational therapists, and 4.2% of physician assistants—percentages that fall below their share of the state's overall population.[9]



4. https://nihcm.org/newsletter/rising-healthcare-workforce-shortage#hcworkforce
5. https://data.hrsa.gov/topics/health-workforce/nchwa/workforce-projections
6. https://www.chcf.org/resource/california-physicians-almanac/
7. https://hcai.ca.gov/visualizations/race-ethnicity-of-californias-health-workforce/
8. https://latinas.org/wp-content/uploads/ESLR2017.pdf
9. https://hcai.ca.gov/visualizations/race-ethnicity-of-californias-health-workforce/

Introduction

Scholarship suggests that the lack of representation and healthcare workforce stratification is even more dire for Black women and Latinas (Anaya et al, 2022). Black women and Latinas remain greatly underrepresented in certain healthcare professions such as physicians, surgeons, and fields like family medicine, pharmacy, academic medicine, dermatology, as well as in leadership positions. (Okoro et al, 2024). Conversely, empirical research indicates that Black women and Latinas are disproportionately concentrated in lower-wage healthcare occupations and the long-term care sector, including roles such as licensed practical nurses (LPNs) and aides (Dill & Duffy, 2022).

A range of structural factors shape the recruitment, education, and retention outcomes for Black women and Latinas within California's healthcare workforce. These factors operate across the entire career trajectory and range from limited early exposure to healthcare professions, to restricted educational pathways and training experiences, and constrained hiring and advancement practices.

Black women and Latinas in California who aspire to enter the healthcare workforce confront a shortage of health-focused Associate Degree for Transfer (ADT) programs, as well as limited training and educational opportunities within CSU campuses. Existing seat caps further restrict access, resulting in qualified applicants—disproportionately Black women and Latinas—being denied admission due to insufficient program capacity (Reddy et al., 2022). In the absence of a streamlined transfer pathway, these students must navigate a fragmented and opaque transfer system characterized by inconsistent requirements and significant barriers to completing the necessary prerequisites for advancement (Reddy et al., 2022).

Rising costs of healthcare education and training disproportionately impede Black women and Latinas, limiting their opportunities to enter and succeed in healthcare professions. For students with limited financial resources or those balancing caregiving responsibilities, these substantial upfront costs can serve as powerful deterrents. Access to job training, post-graduate training, and internship opportunities is also uneven, with many positions remaining unpaid, further limiting opportunities for individuals who are already socioeconomically disadvantaged. As women transition from training into the workforce additional factors including access to career guidance, mentorship, and workplace flexibility play an important role in their ability to advance and sustain healthcare careers (Green and Kirk, 2022).

Within this broader landscape, HOPE and BWOPA commissioned the research detailed in this report.

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Methodology Statement

The 2025 California Equity in Healthcare Workforce Report is based upon qualitative and quantitative research conducted by EVITARUS under the direction of Dr. Shakari Byerly and Dr. Angela X. Ocampo. The focus group and survey were supplemented by a by a review of relevant research related to the key structural challenges that hinder the recruitment, education, and retention of Black/African American women and Latinas in California's healthcare workforce.

The qualitative research was conducted August 7, 2025, and included two (2) online focus groups among women between age 18 – 29 who were students or early in their careers, including one group among Black/African American women and a second among Latinas. The focus group among Black/African American women included eight (8) participants, and the focus group among Latinas included four (4) participants. The aim of qualitative research is to foster in-depth discussion and uncover rich insights through personal experiences and narratives rather than to generate findings that are statistically generalizable. Screening procedures verified that participants met at least one of the following educational eligibility criteria:

- Currently enrolled in a community college;
- Currently enrolled in a four-year university;
- Having some college experience, but no longer enrolled;
- Having graduated from high school, community college; and
- Having graduated from a four-year university within the past two (2) years.

Screening procedures also ensured that each focus group included a regionally diverse set of participants across California. Participants were recruited from a panel of residents who had previously opted-in to participate in market research and public opinion studies. Each participant received an honorarium in appreciation of their participation and in recognition of their time and insights as a part of the focus group discussion.

The quantitative research was conducted from November 5 – 12, 2025, and included an online survey in both English and Spanish, among 800 California women ages 18 or older who identify as Black, Latina, or both. The survey sample was designed to reach women most likely to be early to mid-career, and drawn from a commercially available database of California residents provided by Market Systems Group (MSG) and supplemented by a registration-based sample (RBS) drawn from voter registration rolls to ensure regional coverage. MSG has developed and continues to evolve a robust Consumer Graph that begins at the address level and provides an integrated data framework connecting information from hundreds of sources. These sources include public records, phone directories, U.S. Census data, consumer surveys, and other proprietary datasets. By unifying these inputs, the Consumer Graph enables targeting both the individual and household level, enriching each record with demographic attributes and contact information. All survey respondents were offered an incentive for completing the survey.

Poststratification weights were applied using a raking procedure separately to the data collected among Black/African American women and Latinas, respectively, to align the distribution with the adult population of Black/African American women and Latinas in California by region. The weights were calibrated using the 2023 American Community Survey for population estimates by race/ethnicity and region.

Research and sampling design, implementation, weighting, tabulation, and data analysis were conducted by EVITARUS. The survey instrument was produced in consultation with HOPE and BWOPA, as well as with a panel of advisors working in the healthcare workforce.

Detailed Findings

1. Perspectives on Job Opportunities and Aspirations

Black women and Latinas who participated in the focus groups reported strong personal motivation and clear aspirations to pursue careers across the healthcare field. Their motivations often stemmed from a desire to provide patient-centered care, support their communities, and make a meaningful difference in the lives of others.

However, despite these desires, Black women and Latinas reported that, overall, there are few opportunities for women like them to get ahead in their careers, which limits their prospects and aspirations for pursuing a future career in the healthcare field. When asked about their most serious concerns in California today, 82% said that the rising cost of living is an "extremely serious" and 16% a "very serious" concern. Similarly, 77% of Black women and Latinas identified housing affordability as an "extremely serious" and 16% a "very serious" concern. These concerns negatively impact their perceptions of opportunity, with only 28% of survey respondents reporting that there is either a "great deal" or a "good" amount of opportunity for them to get ahead.

Other issues identified by Black women and Latina survey respondents as "extremely serious," which negatively impact their perceptions of opportunity, included cuts in federal financial aid and loan programs for college students (60%), the shortage of well-paying jobs (57%), as well as the lack of health and mental health care providers trained to understand and be sensitive to diverse communities they are serving (54%).

Black women and Latinas were asked if recent personal events or events happening in their communities or the larger society had influenced their ability to consider educational or career opportunities. In response, roughly two in five reported being affected by job loss (41%) and cuts to financial aid programs (40%).

Latinas and Black women speak on the opportunities and challenges in pursuing their academic and professional goals.

"I hope for myself in 2035 that I will be working as a Registered Nurse, since that is what I am currently in college [for]. I feel like I will be excited/happy because I'll be done with school. Also, I would feel grateful to know that I will actually be working in that experience, because since a younger age I have always wanted to be in healthcare to help others in need. I feel like […]job wise, I know I will be helping out elderly/younger patients in need, making sure they are taken care of." –

– Black Woman, 21 Years Old, Bay Area

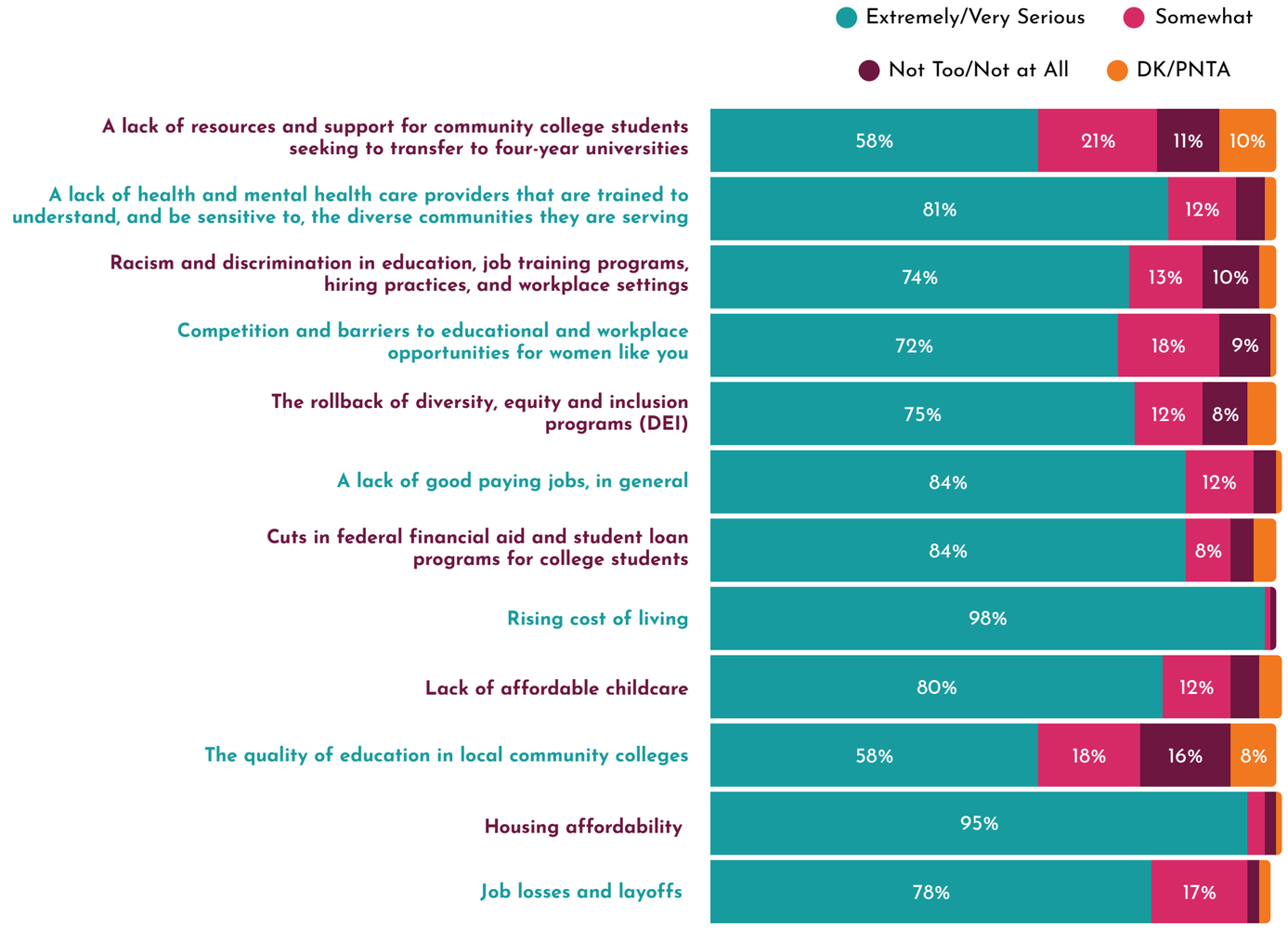
"Unfortunately, my home life wasn't very big on 'go to college, do this, push that.' It was more just like survival mode. As long as you have your high school diploma, that's the main thing, because a lot of my family did not have that or they dropped out and had to get their GED and things like that. It was just basically get a job and start working as soon as you can. … [MY GRANDMOTHER] helped me go and look for that schooling and to go and apply, because I don't really know where to start since that wasn't something that was engrained for a long time."

– Latina Mother, 29 Years Old, Los Angeles

Nearly all respondents identify the rising cost of living and housing affordability as the most serious problem they face in California today.

Q: To what extent are the following issues a serious problem (or not) in California today?

**Percentages below 3% are not displayed. Items were delivered in three randomized blocks.*



"For me, it's finances. My family supports me verbally, but financially They can't really contribute to anything. I kind of grew up in a single-ish parent home, and I moved out to L.A. myself. Everything I've had to do I've had to just get it for myself. As I pursue careers that require a lot of money and bigger loans and good credit, sometimes I will be looking for grants or scholarships. I feel like sonography is kind of limited. I go to an unaccredited school, so it is kind of harder to find funding for that. "

– Black Woman, 29 Years Old, Los Angeles

"Just being a woman and a Latina at that, especially if you are brown too. … It's just like financial aid, all the ways we are socioeconomically affected and already have more barriers than most people. Already pursuing higher education is way harder for Latinas. Having children or access to birth control or things like that affect us disproportionately more than other groups. Having an administration that is stripping away women's rights does affect my education too, because it is hard enough for me to take care of myself on a daily basis."

– Latina, 22 Years Old, Bay Area

2. Career and Educational Experiences among Black women and Latinas

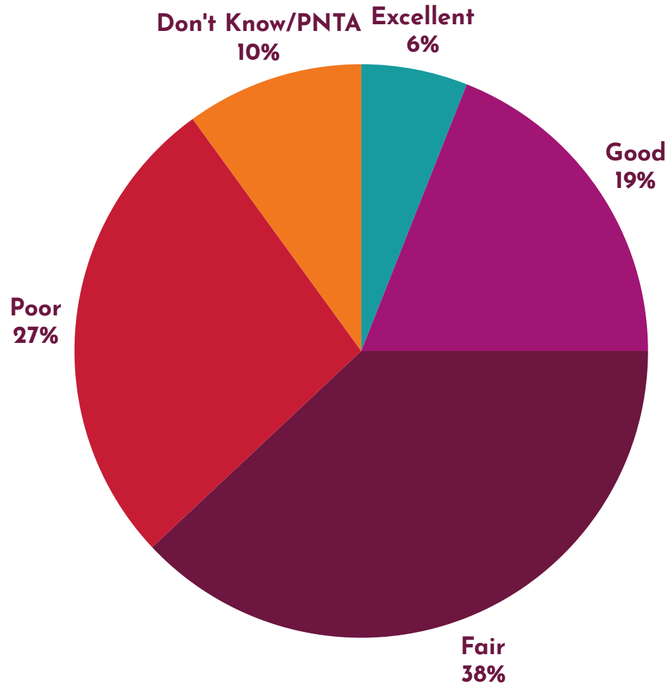
A significant number of Black women and Latinas reported challenges when entering healthcare educational pathways, including interpersonal, structural and educational challenges.

Over half of Black women and Latinas surveyed (56%) reported being discouraged by a teacher, counselor, professor, family member or someone else from pursuing a certain career path or line of work. Regarding educational entry points, nearly two-thirds (65%) of Black women and Latinas reported that California's community colleges, public colleges and universities, along with job training and other career education programs, are doing either "a poor job" (27%) or only doing "a fair job" (38%) of preparing them for high-quality opportunities and jobs in the future.

Black women and Latinas who participated in the focus groups and were either currently or formerly in school reported experiencing challenges with education or training that hindered their academic progress. They noted difficulty understanding required coursework, along with challenges due to lack of guidance or mentorship. Many of these issues were intensified by financial hardship and the high cost of education and training. Eight out of ten Black women and Latinas surveyed (81%) reported that they either "strongly agree" or "somewhat agree" that the required training or degree in healthcare costs too much to complete.

Nearly Two-Thirds of Black Women and Latinas Say California's Education and Training Programs Are Not Meeting Workforce Needs

Q: For this next question, please think about California's system of community colleges, public colleges and university, job training and career education programs. Thinking about these programs and women who are entering the workforce or changing jobs, how would you describe the job being done by the State of California in preparing them for high quality opportunities and the jobs of the future?



Latinas and Black women identify finances and mentorship as major determinants of their educational path.

"Finances, for sure. Then just not really having a mentor and kind of like a person I have seen go that route, because just like she said, I have [a] similar situation. I don't really have that support, that foundation. My mom always engrained in me to be a doctor, but there is no more outside of that. There is no real help outside of that, no real knowledge about what education looks like the support that you need while going through housing and things like that. So big on finances and mentorship. I think a big part of me navigating my future has been a lack of direction, a lack of seeing people in the same field or just seeing people get it done. The passion is there, I just don't have finances and mentorship."
– Afro-Latina, 29 Years Old, Lower Southern California

"I'd just like to know exactly what I need and how much it is, just the basic information of how to just get started. When I would look online, I would just type in a medical score, how to be a medical assistant or x-ray technician or things like that. It's a lot of information, but I don't know which one is more suited for myself."
– Latina Mother, 29 Year Old, Los Angeles

"I went to school for a little bit and I dropped out. I don't know. Like someone mentioned earlier, not having some guidance. I'm out here figuring it all out on my own."
– Black Mother, 25 Years Old, Central Valley

"I think [UNDERPAID] that is also a big turnoff for people when it comes to working in healthcare, because the amount of schooling and the amount of money that you put into being able to get a degree to work in the medical field often does not end up paying off in the long run, because of the pay scales."
– Latina Mother, 25 Years Old, Bay Area

"Even outside of going through federal funding, whether it's through my school or home institution, signing up for internships like for me through the National Science Foundation, because they have a lot of internships and grants for STEM majors was a huge support system for me, and that also got taken away because there is no more federal funding for that. Mostly it is for people like me who also rely on financial aid – federal funds, grants, whatever. That is a huge thing because it's harder to find more personalized stuff. I don't know, I think if you are from a big city like San Francisco where everything is super competitive and stuff, you've really got to get on it."
– Latina, 22 Years Old, Bay Area

3. Perceptions of Healthcare System and Healthcare Careers

While a large share of Black women and Latinas reported having access to a clinic, hospital, or health center near where they live (86%), about one-third (32%) of those with regular access said they trust these facilities "a lot." Surveyed women noted that having a hospital or clinic nearby—where they could study, volunteer, or train—would increase their interest in pursuing a healthcare career. One-third (31%) reported it would make them "much more" interested, and 26% said it would make them "somewhat more" interested, for a combined majority of 57%.

Overall, Black women and Latinas view healthcare careers as very important for their communities and see these jobs as meaningful pathways to create positive change. Among the survey participants, 80% of them reported that healthcare careers were "extremely" or "very" important to the local community. Close to half of the women "strongly agree" (47%) that pursuing a career in healthcare provides a solid pathway to a good stable career, followed by 39% who "somewhat agree."

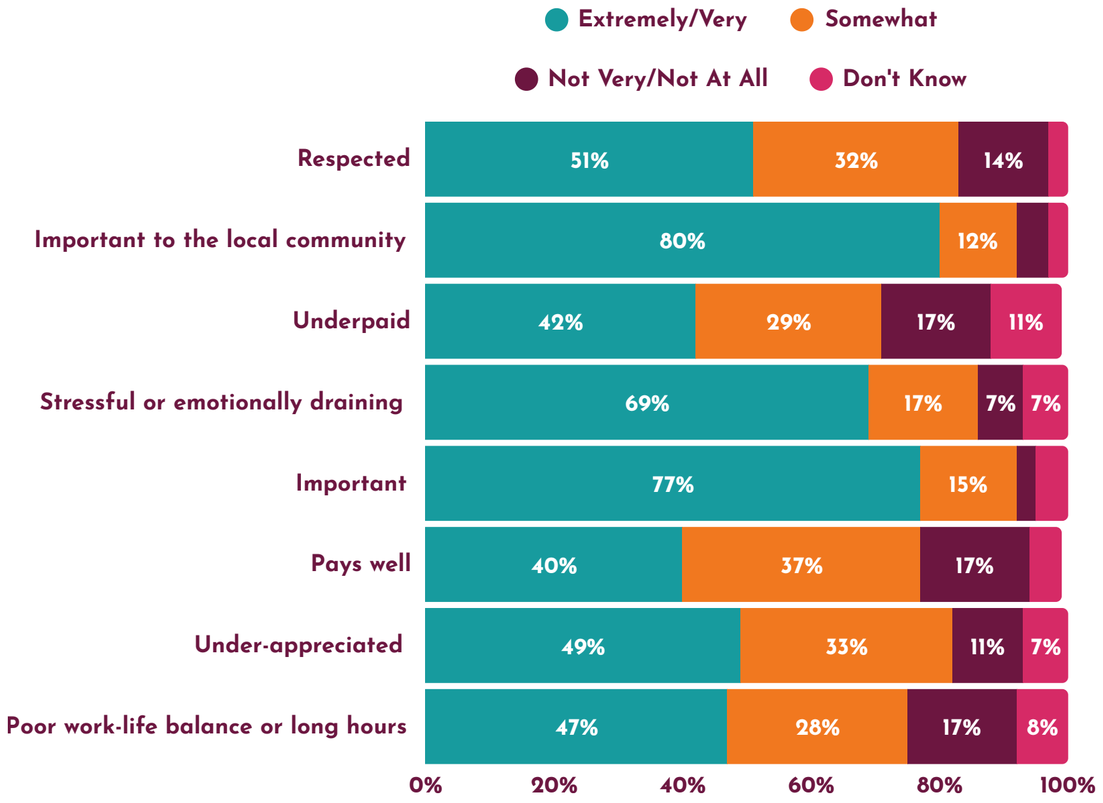
Black women and Latinas also recognize that many of these careers provide stable professional opportunities and play an important role in meeting public health needs. A significant majority of the women reported either "strongly agreeing" or "somewhat agreeing" that increasing the number of healthcare workers is important for preparing for future pandemics (91%). In addition, 82% of Black women and Latinas also agree that since the COVID-19 pandemic, there has been a strong demand for healthcare workers.

A large majority of Black women and Latinas (85%) report either "strongly agreeing" or "somewhat agreeing" that pursuing a career in healthcare is a solid and stable career pathway.

However, surveyed Black women and Latinas also view these careers as highly stressful, frequently underpaid, and physically and emotionally demanding. Seven out of ten Black women and Latinas (69%) described healthcare careers are "extremely" or "very" stressful and emotionally draining. Focus group participants echoed these findings, as many voiced concerns over the treatment and compensation of healthcare workers and of Black women and Latinas specifically.

Respondents See Health Care Careers as Vital to Their Communities and as Pathways to Stability—But Report High Stress, Low Pay, and Poor Working Conditions

Q: In general, how well would you say that each of the following describes jobs and careers in healthcare?



Latinas and Black women talk about their perceptions of healthcare system and healthcare careers.

"The hope, just like everyone else, is to be in the medical field as well. I just got accepted to a nurse practitioner program. So I am going to be doing that. I want to go into women's health. That is big for me. I personally struggle with endometriosis, and it took me over ten years to get that diagnosis and that surgery. So I want to try to help […]other people and speed up that process. I hope to feel similar to [NAME], stable in all ways. That is big for me mentally, emotionally, physically. And just fulfilled."

– Afro-Latina, 29 Years Old, Lower Southern California

"I have family that work in the medical field, and they, just from their personal experiences, have turned me off from the medical field, especially as women and Latinas …They don't treat their workers well…really they just kind of overwork them and underpay them like most jobs do. But I don't know, I feel like what it has become isn't a quality career or life for anyone to have, especially if you are POC or a woman in general."

– Latina, Age 22, Bay Are

4. Prioritizing Resources and Support Systems

To address the structural factors negatively impacting the prospects of Black women and Latinas in the healthcare workforce, participants emphasized the importance of mentors, financial resources, and greater support in navigating the steps needed to pursue a healthcare career.

Black women and Latinas rank several resources as "extremely helpful" for pursuing and continuing a career in the healthcare field. A majority report that hands-on learning experiences to gain fieldwork exposure (69%), flexible class and internship schedules such as night classes or online/hybrid formats (68%), technical training, apprenticeship pathways including paid training opportunities (68%), and financial supports, including scholarships and other financial aid to help cover child care and transportation costs (77%), would help women like them successfully pursue training and employment in healthcare.

Additionally, a majority of Black women and Latinas reported that additional resources such as tutoring, mentorship, research opportunities and student organizations or clubs (57%) as well as academic counseling, such as transfer guides, sample course maps and information about costs and time-to-degree (58%) would be "extremely helpful" to help women such as themselves navigate healthcare career educational pathways.

These sentiments were echoed by Black women and Latinas in the focus groups, who highlighted the importance of having a mentor and receiving guidance, particularly as they navigated courses, financial aid applications, and training program fit. Additionally, focus group participants expressed that flexible courses and training opportunities that were attentive to their daily schedules and caretaking responsibilities were the most important and consequential for pursuing a career in healthcare.

Latinas and Black women speak on what supports would have been most helpful to pursue a job or career in healthcare.

"I guess kind of a mentor would have been nice, to have someone guiding me to the right programs and what stuff I need to be focusing on and helping me find grants and other stuff. Just everything, figuring out how to do everything, because doing it on your own is a lot of work. Mentally and physically, it's a lot of work."

– Black Woman, 25 Years Old, Bay Area

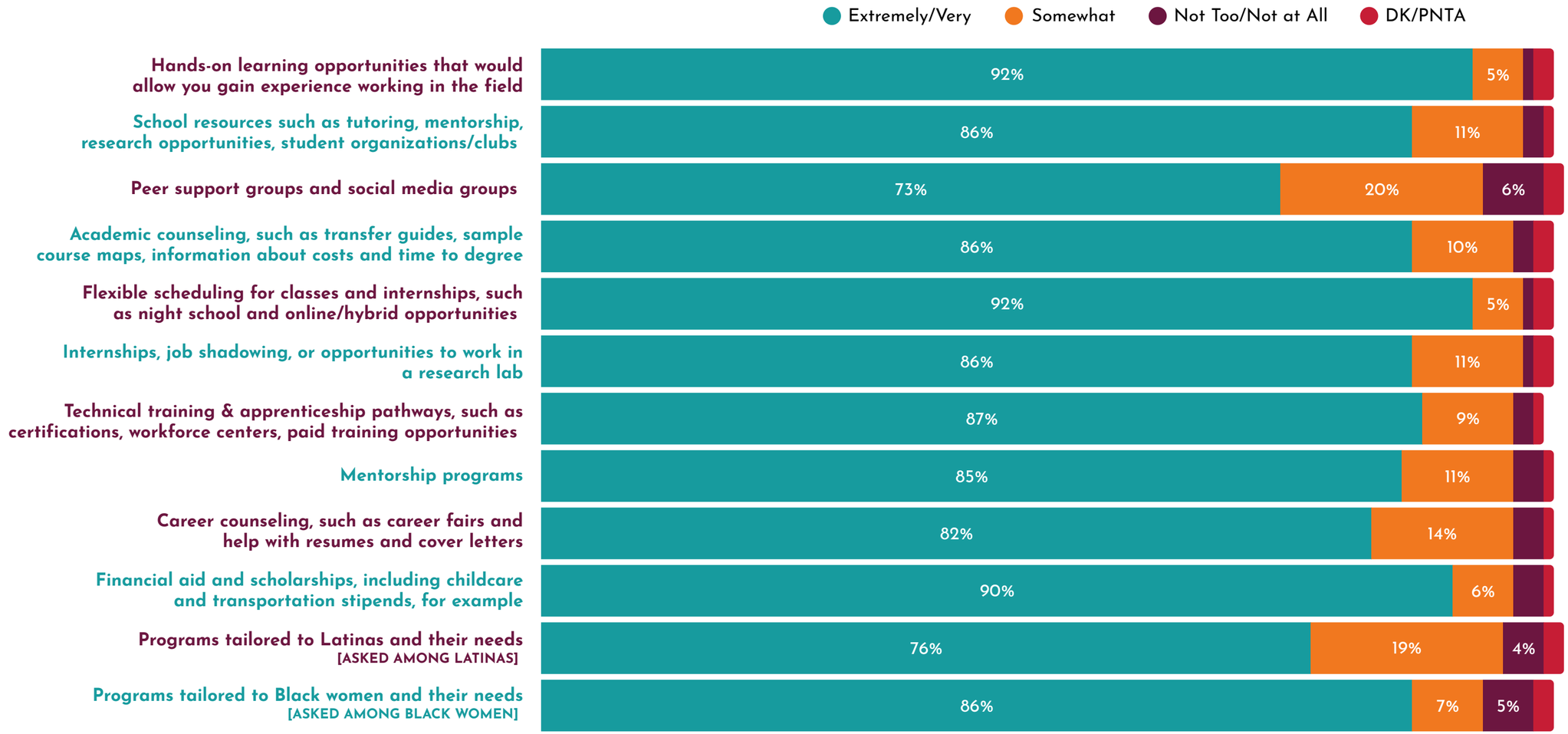
"When I first started transitioning into school, school kind of took a big toll into my work life. For example, I was always working like early morning shifts/graveyard. So having the night classes and evening classes available, it kind of helped in a sense to help you schedule. I had a lot of parents in my classes as well that had kids, that had to drop the kids off or pick up the kids from school."

– Black Woman, 21 Years Old, Bay Area

Black Women and Latinas Identify Hands-On Training, Flexible Schedules, and Financial Aid as Key to Succeeding in Health Care Careers

*Q: How helpful would you find the following resources and support if you were to pursue a job or career in healthcare?**

**Percentages below 4% are not displayed. Items were delivered in three randomized blocks.*



5. Healthcare Workforce Development Priorities

Considering the increasing healthcare workforce shortage and the role that the underrepresentation of Black women and Latinas plays in exacerbating this shortage, it is critical to identify and implement pathways to increase the number of Black women and Latina healthcare workers.

Surveyed Black women and Latinas identified several priority areas for increasing representation and expanding opportunities for Latinas and Black women in healthcare professions. Survey respondents rated the following areas as "extremely important" to achieving these goals:

- **Expanding financial aid, loan forgiveness, and scholarship opportunities (79%)**
- **Increasing the availability of affordable transfer pathways and degree programs in health fields at community colleges and universities (74%)**
- **Improving working conditions and support systems in place for people working in healthcare (74%)**
- **Expanding early exposure to science, technology, engineering, and mathematics (STEM) and health career opportunities in high school (73%)**
- **Increasing paid healthcare internship opportunities (72%)**

These priorities were echoed by focus group participants who expressed the importance of increasing the number of Black women and Latinas in healthcare professions, investing earlier in the primary and secondary education of Black and Latina girls.

Black women and Latina participants emphasized that access to healthcare professionals, including providers who identify as Black/African American or Hispanic/Latino, is essential to quality care. Among Black women, 77% said it was "extremely important" to have health professionals who identify as Black or African American.

Among Latinas, – a smaller share though still a majority – (50%) reported that it was "extremely important" to have healthcare professionals who identify as Hispanic or Latino.

Given the importance that Black women and Latinas in California place on having a healthcare workforce that reflects the communities it serves, survey respondents expressed concern about the limited representation and visibility of Black women and Latinas within healthcare professions. Nearly one in four Black women (72%) said they are "extremely concerned", with an additional 16% reporting they are "very concerned" about the small number of doctors who identify as Black or African American in the state. Among Latinas, one in three (37%) reported being "extremely concerned", followed by 31% who said they were "very concerned" about how few Latinos and Latinas hold healthcare licenses in California, despite representing 40% of the state's population.

Furthermore, Black women and Latinas who participated in this study recognize that closing representation gaps in healthcare not only supports future generations of healthcare practitioners but also has a meaningful impact on their communities. 68% of Black women and Latinas stated that having more Black women and Latinas in healthcare would help address health disparities affecting Black and Latino communities.

Latinas and Black women identified priority areas for improvement across key stages of the education-to-career pathway.

"As a lot of Black girls are going into these courses and healthcare fields, they are not actually pursuing it like all the way. Sometimes they drop out or the barriers come up. So they don't actually get these jobs, which is why we lack diversity still in the hospital. So I definitely agree. I work in a hospital now. There is mainly Hispanics and Filipinos and Whites. So, I feel like, again, we are still a little bit somewhat limited to all of this."

– Black Woman, 26 Years Old, Inland Empire

"Even as an esthetician, sometimes when I have a client that comes, they're like, "Oh, you're Black. I'm going to stick with you. Or I requested you because you're Black." I can only imagine how that is when you are in the healthcare field. I can't even really think of a time, maybe once, when I had a Black doctor or nurse that I'm just being in the presence of. "

– Black Woman, 29 Years Old, Los Angeles

"When I was in high school, we had a CNA [Certified Nursing Assistant] program that the seniors could take. So, they did their normal classes three days a week, and then the last two days of the week they would get to go and work in the care facilities to [get] more hands-on training. Then when you graduate, you get your high school diploma, and you can go take your license test to be a CNA. Having that hands-on experience really let me know that this is something I want to do."

– Black Woman, 25 Years Old, Bay Area

"I think [SUPPORT SHOULD START] right out the gate of high school. … So it starts young. The second that you see these kids dropping out of school or not going to school or messing around doing whatever, it is often because they just don't have a support and they don't have the stability. Even though I am lucky, I never really went through it like that, I definitely felt the impacts of that. I definitely felt like I had to advocate for myself constantly growing up, and I had to really pursue my passions and stuff without really help of anybody."

– Latina, 22 Years Old, Bay Area

"I just wish that we had more positive and more of a push for our younger Latinas, little kids … that you can do what you need to do, what you want to do. We are all going to be there to help, because a lot of times there is not a lot of help. You don't get the support that you need, especially as a young person going through things. A lot of mental health and stuff like that. Personally for me, it was really hard. Just knowing that the future generation to have something that would help with that and also have representation and just have someone say, 'Yes, I know exactly how you feel. I know exactly how I can help you.' That is something that I think is really needed."

– Latina Mother, 29 Years Old, Los Angeles

Policy Recommendations

Developing and Strengthening the California Healthcare Workforce

Developing and strengthening the California healthcare workforce requires a multipronged approach from policymakers, philanthropy organizations, educational institutions, healthcare training facilities and healthcare employers.

Our recommendations focus on three key areas: enhancing financial supports to build the workforce, prioritizing policies and programs that simplify pathways to healthcare degrees and increase transparency, and addressing mentoring, trust, and access gaps while improving working conditions.

Policy Recommendations

Enhancing Financial Supports to Build the Healthcare Workforce:

The study findings emphasize the critical role of financial assistance and expanded pathways for advancement in helping individuals enter and progress within the healthcare workforce, particularly amid increasing financial pressures.

Recommended Policy Pathways

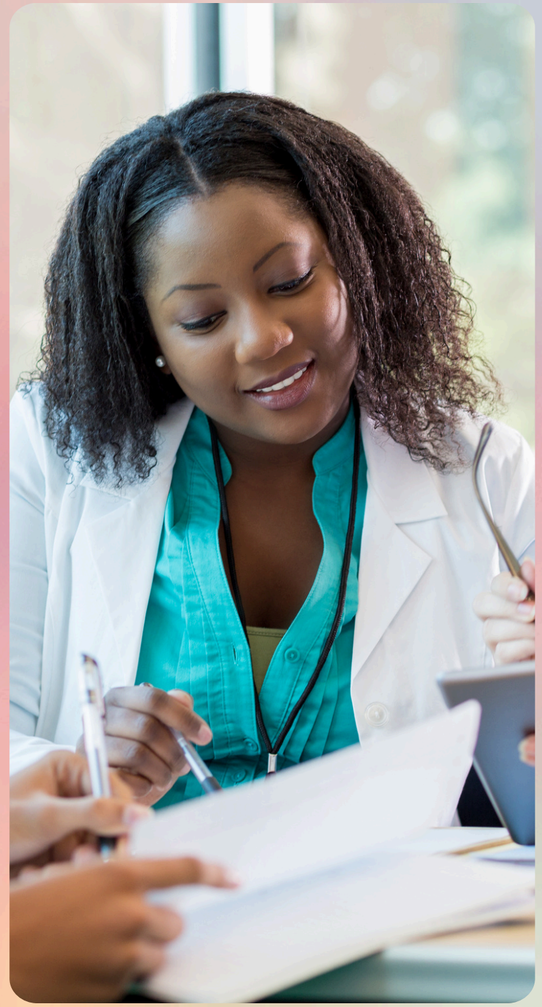
- Enhance, expand and establish new state-funded initiatives—such as the Healthcare Access Initiative (HCAI)[10], Cal Grant[11], and the Song-Brown Program[12]—to provide grants, scholarships, and loan forgiveness for students pursuing healthcare training programs.
- Increase the availability of financial aid directly offered by educational institutions.
- Strengthen existing social service programs that alleviate financial pressures related to rising cost of living, housing affordability and recent job loss.
- Expand and strengthen the availably of paid internships programs and on-site training programs offered by private healthcare employers and healthcare facilities.
- Continue to align state health workforce expansion funds with documented shortages in behavioral health, public health, primary care, and reproductive health, prioritizing training pipelines that advance underrepresented groups into high-demand roles.

Prioritize Policies and Programs That Simplify Pathways to Healthcare Degrees and Increase Transparency

Current education and training systems are not adequately meeting the needs and demands of the healthcare workforce. Study participants reported that educational institutions and career training programs often failed to prepare them for future roles and advancement opportunities and were difficult to navigate, offering limited flexibility and lacked clarity regarding coursework requirements and expectations.

Recommended Policy Pathways

- Develop and implement clear, supported transfer pathways with priority or guaranteed consideration for admission to at least one CSU or UC campus, consistent with existing state policy frameworks[13].
- Expand access of existing degree programs, apprenticeships and training programs while also increasing seat capacity, prioritizing high-demand fields and those experiencing the greatest workforce shortages.
- Streamline and improve transparency around coursework, training and requirements to complete training and certification in healthcare fields, particularly at the postsecondary level (community colleges, CSU and UC programs, and certificate and licensure pathways).
- Expand access to dual enrollment programs that allow high school students to take college-level courses, increasing early exposure to science, technology, engineering, and mathematics (STEM).



Policy Recommendations

Address mentoring, lack of trust, and access gaps in healthcare while improving working conditions:

The study findings revealed that women lacked trust in health care providers, experienced limited mentorship and guidance throughout their educational journey, and reported challenging working conditions.

Recommended Policy Pathways

- Enhance trust in health care providers and facilities by promoting patient-centered care that is accessible and within the reach of all communities.
- Support programs that provide guidance and mentorship at all career stages, ensuring they are culturally responsive and attentive.
- Implement and expand flexible work schedules, including Alternative Workweek Schedules (AWS), while ensuring compliance with California labor laws regarding overtime, breaks, and employee-approved schedule adjustments.
- Strengthening healthcare workforce support by improving pay, staffing, scheduling, adequate leave, and integrated support for both caregiving and work responsibilities.
- Sustain and expand state investments in Community Health Worker and Promotora training, certification, and workforce pathways, recognizing their essential role in culturally responsive, community-based care.
- Integrate CHWs and Promotoras into interdisciplinary care teams across primary care, behavioral health, and maternal health settings.

These policy proposals aim to support the overall healthcare workforce development and address the challenges faced by Black women and Latinas in the healthcare workforce and by enhancing financial assistance, strengthening healthcare training programs, and improving trust, mentorship, and working conditions.

10. https://hcai.ca.gov/workforce/financial-assistance/
11. https://csac.ca.gov/cal-grant
12. https://hcai.ca.gov/workforce/financial-assistance/grants/song-brown
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Appendix

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Appendix - Survey Sample Characteristics

A total of 800 California Women participated in the study.

Race/Ethnicity	%
Black Women	47%
Latinas	46%
Afro-Latinas	7%

Survey Sample Demographic Snapshot

Education	Employment	Career Stage	Household Income*	Women with Children
17% High School or Less	**72%** Employed (Full Time, Part Time and Self-Employed)	**48%** Early career (1-10 years)	**45%** Less than $50,000	**47%** Single Parent
31% Technical Vocational or Some Community College	**11%** Student	**25%** Mid-career (11-20 years)	**27%** $50,000 - $99,999	**50%** Non-Single Parent
37% 2 or 4-year College Degree	**12%** Not employed, but looking for work	**12%** Late career (21 or more years)	**15%** $100,000 or more	**3%** Don't Know / Prefer not to answer
14% Post Graduate Degree	**17%** Not Employed, Not Looking / Retired / Homemaker	**15%** Not Sure / N/A	**12%** Don't Know / Prefer not to answer	• 42% are their households sole earners.

About HOPE

Hispanas Organized for Political Equality (HOPE)® is a nonprofit, nonpartisan organization committed to ensuring political and economic parity for Latinas through leadership development, advocacy, and education—strengthening all communities and advancing the status of women. HOPE prepares and supports Latinas as civic leaders while providing inclusive leadership opportunities open to all who want to learn from the Latina perspective. HOPE advances civic education, fosters community leadership, and advocates for fair and informed policy solutions that expand opportunity for every community. For more than 35 years, HOPE's innovative programs have trained and inspired over 65,000 participants nationwide, while our public education and advocacy efforts have reached millions more.
Learn more at www.latinas.org.

About BWOPA-TILE

Black Women Organized for Political Action (BWOPA) mission is to activate, motivate, promote, support, and educate African-American women about the political process, encourage involvement, and to affirm our commitment to, and solving of, those problems affecting the African-American community. Committed to the recruitment, training and skills building, TILE provides programs to develop and incubate a generation of African-American women leaders, so that these women are represented at local and national decision-making tables.
Learn more at www.bwopatileleads.org.

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