

Diverse Teams, Better Outcomes: Exploring Diversity in Healthcare Management

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Abstract

Health policy and management research provides a crucial insight in this era of polarization and division among increasingly diverse communities: meaningfully embracing diversity through inclusive leadership, which welcomes employees from all levels of the organization and engages diverse viewpoints to make all healthcare workers feel free to express themselves and take part, can save lives. Through the definition of terms and discussions of the benefits of diversity, this article presents the importance of diversity in healthcare settings. In addition to analyzing the demonstrated benefits of diversity, our goal was to comprehend the obstacles that exist so that we might successfully remove them at the systemic, institutional, and individual levels.

Keywords: cultural competence; diversity; healthcare; management

Introduction

In this historical period, headlines frequently display evidence of polarization and divisiveness. Instead of being exclusively American, the trend toward discord and separation appears to be spreading around the world, from Haiti to Hong Kong and many populations in between. Despite the fact that these significant social movements are outside the purview of management and health policy research, one important finding from our discipline is that embracing diversity in roles and viewpoints through inclusive leadership can enhance health outcomes on a number of metrics. According to the Oxford English Dictionary, “diversity” is defined as “the practice or quality of including or involving people from a range of different social and ethnic backgrounds and of different genders, sexual orientations, etc.”¹

The globe has become more accessible because to technology, and people are no longer working or living in isolated environments due to immigration and travel, especially in the absence of a pandemic. It's normal to live and work with people who are different from you. We honour the variety of the human experience and advance our field by accepting these distinctions. A history of oppression and enduring implicit bias necessitate a greater focus on characteristics like gender identity, ability, ethnicity, sexual identity, creed, socioeconomic background, age, military experience, learning style, personality, education level, geographic background/country of origin, language, marital status, caretaker status, occupation, and appearance.² Diversity must be taken into account not only for inclusion and belonging but also for employment or selection procedures (e.g., for training programs or schools).

The literature on cultural competency in healthcare settings has largely focused on implementing various interventions for stakeholders. Client preferences for health services are greatly influenced by cultural competence, which makes its economic value indisputable. The ability of a clinical entity (a single clinician, a team of clinicians, or a clinical facility) to successfully respond to the cultural values and

practices of its clients is referred to in this context as cultural competency in healthcare. The objective is to establish the best possible setting for clients to receive services at their most effective level and to encourage their choice for that particular organization over rivals for therapeutic services in the future.³

The clinical entity must constantly learn about the material and non-material facets of the client population's culture and comprehend how these factors relate to therapeutic relationships in order to become culturally competent. Providing high-quality healthcare services requires this continuous learning process. As a result, the authors would like to suggest that the clinical context itself plays an equally important role as the doctors in fostering cultural competency. The institutional agency is largely dependent on unwritten conventions that shape the mindset and conduct of its employees, particularly the medical professionals in hospital environments. The organization may be significantly impacted by these unspoken guidelines, which may even influence its physical infrastructure.⁴

Cultural humility needs to be engrained in healthcare professionals' fundamental mindset, along with an openness to lifelong learning and a readiness to acknowledge the relative depth of their customers' cultural knowledge in comparison to their own. To improve the cultural competency of healthcare settings, it is crucial to include the client population's cultural knowledge into the day-to-day operations of hospitals.⁴

Verified Advantages

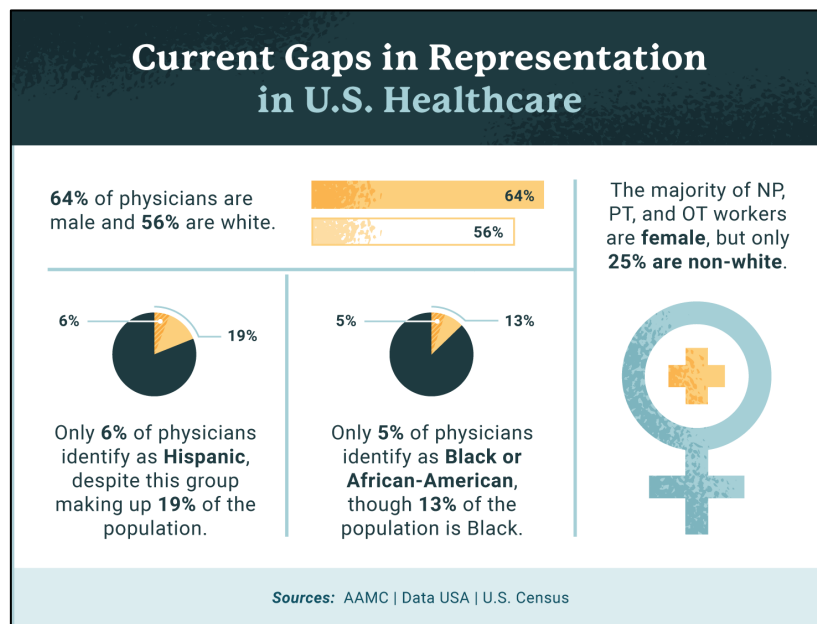
Several studies have demonstrated that when there is diversity in the workplace, employees are more productive and provide better health care.⁵ According to Hewlett et al. [9], more diverse groups produce better results in terms of both performance and originality. When people can concentrate on their work in a comfortable setting, both individuals and teams can perform better. Additionally, when everyone may express their thoughts, new ideas and a wider viewpoint can be presented.⁶ Increased diversity is associated with improved problem-solving skills. Diversity improves work output and health care delivery, and as diversity is given more attention in practice and research, there will likely be a steady rise in the data showing better health outcomes.⁷



Hindrances

“Unconscious bias” or “implicit bias” is described as an attitude or reflexive behaviour that alters our perceptions and affects our behaviour, decision-making and interactions.⁸ It is crucial to remember that the effect may not align with our professed values and can be either positive or detrimental. Inadvertent bias is known as unconscious bias. Gender bias, ethnic bias, handicap bias, affinity bias, and attractiveness bias are some examples of its manifestations. The results showed a blatant bias in favour of the male applicant. One of the noteworthy studies demonstrating bias was a randomized double-blind study in which faculty were given the application materials of identical students with the only distinction being the applicants randomly assigned male or female gender. Both male and female faculty members displayed this bias.⁹

The Implicit Association Test (IAT), which is affordable, available online, and can offer feedback on one's own unconscious bias for introspection, is a tool for measuring unconscious prejudice.¹⁰ To address these prejudices, more study is required. In order to advance diversity, equity, and inclusion, it becomes critical to reduce unconscious bias at the individual and organizational levels. Unconscious biases can be addressed, and acknowledging their existence is the first step.¹¹



The Reality

Over the past 50 years, there has been a significant rise in our global interconnectedness and the diversity that results. In addition to the fact that the world's population has doubled in the past 50 years, more individuals than ever are traveling across international borders; in 2014, there were 1.4 billion tourists worldwide.¹² Furthermore, over a billion people—nearly 15% of the world's population—are migrants, with 70% shifting within their own countries and 30% relocating outside.¹³ The majority of our immigrant groups now are Chinese, Indian, and Mexican; their linguistic and cultural distinctions both threaten and enhance the status quo. In summary, as the population becomes more diverse, there are always opportunities and challenges to interact with varying perspectives and experiences.

Window of Opportunity in Healthcare Sector

There is a great deal of variation in the viewpoints, backgrounds, and training of healthcare professionals, which helps broaden our understanding of how to provide appropriate and successful care for a range of people. Foreign-born workers are a boon to the US healthcare workforce, accounting for 20% of other direct care workers and 25% of doctors and registered nurses.¹⁴ Even while many criticize the additional time and effort needed to lead a diverse workforce, motivate a group of individuals with different worldviews, or simply deal with coworkers whose viewpoints may offend, the key question is not whether to engage but how to engage.

Empirical Data in Medical Practice

An increasing body of empirical research that identifies trends for effectively interacting with diversity in healthcare organizations is adding to the wealth of theoretical literature on the subject. It has been said that the core of inclusive leadership and learning is the ability to involve diverse viewpoints and transform potential conflict into innovative problem solving and teamwork.¹⁵ Most recently, the capacity to establish a culture that encouraged performance improvement was associated with notable decreases in risk-standardized mortality rates in the two-year, longitudinal Leadership Saves Lives study of ten hospitals.¹⁶ Furthermore, three characteristics of the guiding coalitions (i.e., quality improvement teams) in the six successful hospitals stand out as examples of inclusive leadership that effectively tapped into and navigated a range of viewpoints, professional identities, and experiences within hospital teams:

1. incorporating employees from various departments and organizational levels;
2. promoting genuine involvement from the members; and
3. employing unique conflict resolution techniques (e.g., having clear role definitions, striving to bring minority viewpoints to light, and collectively revisiting the shared goal of saving lives).¹⁷

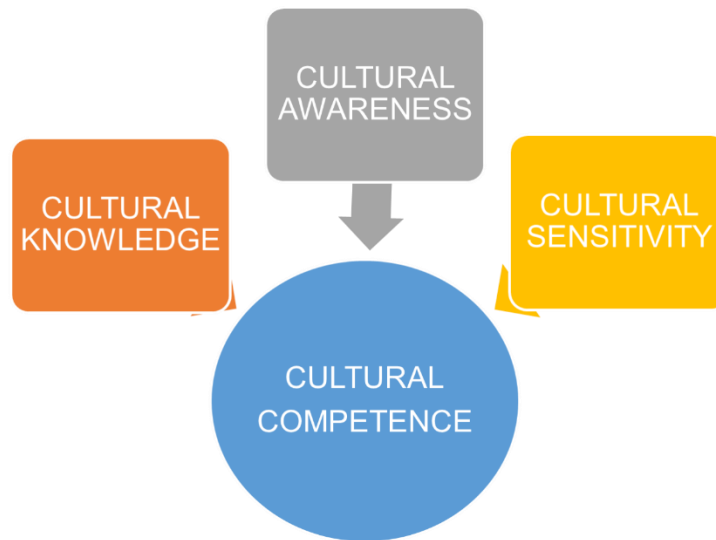
According to this research, health results can be significantly impacted by effectively incorporating diversity of perspectives, backgrounds, and staff roles.

Establishing Cultural Competence

A systematic approach that focuses on institutionalizing standards that meet the cultural demands of clients is necessary to promote cultural competency among therapists. Its direct effect on patients' perceived satisfaction with clinicians' services highlights the importance of institutionalizing cultural competence. To accomplish this change, it is essential to override restrictive institutional regulations.¹⁸ However, long-standing conventions that do not foster cultural competency continue to provide difficulties in many healthcare settings. The effectiveness of ad hoc or regular cultural competence training programs is outshone by the introduction of new standards that push physicians to be extremely sensitive to the cultural characteristics of their clients. As a result, cultivating a scientific mindset to systematically investigate the culture of the clients may serve as the foundation for the new norms, and internalizing them clearly requires an organization-wide and group effort.

Critical conversations that challenge accepted practices can be the first step in creating these new standards. Practitioners can explore topics like how social stratification functions in particular cultural contexts, how it affects clients' capacity to communicate in official healthcare settings, how visible the practitioner's cultural identity is in relation to client cultural sensitivity, and whether or not having clients from different cultural backgrounds influences how they interact with healthcare settings.

Healthcare settings can overcome current obstacles and provide an environment that promotes successful cross-cultural interactions by establishing and encouraging new standards that assist doctors' comprehension and sensitivity to varied cultural backgrounds. Adopting this strategy will help patients as well as healthcare professionals' professional development, leading to a more cohesive and efficient healthcare system as a whole.



Conclusion

There is no denying that diversity in the workforce has a good influence and provides definite advantages. A larger talent pool, greater employee trust and engagement, fresh viewpoints, creativity, better decision-making, enhanced performance, and stronger company profiles and profits are just a few of the obvious benefits of having a diverse workforce. Diversity is not only the correct thing to do, but it is also necessary. Diversity fosters a more cohesive atmosphere, giving the healthcare organization all the resources it needs to be successful.

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