The Division of MCH Workforce Development, in HRSA’s Maternal and Child Health Bureau, sponsored the 2017 Diversity and Health Equity Peer Learning Collaborative for MCH Training Programs (DHEC). The collaborative, which began in January 2017 and ended in October 2017, was designed to facilitate sharing and highlight successes, challenges, and solutions to more effectively address diversity and health equity within MCH Training programs.

Participating teams were interested in:
- Improving training program or institution’s practices around diversity or health equity
- Revamping existing practices related to training on cultural and linguistic competence
- Using new resources, tools, and best practices related to diversity, cultural and linguistic competence and health equity initiatives

Eight teams were competitively selected to participate in the collaborative. Teams were asked to identify a policy or practice change to address over the course of the Collaborative. Each team consisted of at least three core members and larger home teams. Home teams were made up of trainees, faculty, partners within the university (e.g. Office of Diversity, Admissions Office), and local partners such as individuals from neighboring educational institutions or community agencies.

Collaborative members participated in:
- A kick-off, face-to-face meeting in Birmingham, Alabama
- Monthly webinars and web-based team sharing opportunities, featuring guest speakers
- An online forum, sharing updates and resources
- Individualized technical assistance

**IMPACT OF DHEC PARTICIPATION**

- Increased communication and collaboration across MCH training programs, universities and university systems
- Strengthened commitment to cultural and linguistic competence, diversity and health equity
- Strong team collaboration creating a solid foundation for future work
- Collaborative efforts with outside partners including community based organizations and public schools
- Increased leadership opportunities for trainees
- Better understanding of the unique nature of diversity and culture in home state and university
- Connections and new relationships with other university entities such as Offices of Health Equity, Multicultural Student Affairs, and other campus-wide initiatives
- Increased awareness of implicit bias as it exists on campus and within training program
- Commitment to create and maintain intentional time and space to meet and discuss diversity and health equity
- Broader vision of diversity and inclusion and its connections to health equity
- Increased comfort with speaking about diversity concepts

“Our team wants to build upon and elevate our work in this area, drawing in more administration, and working on a school-wide level.”
COLLABORATIVE TEAMS AND PROJECT DESCRIPTION

<table>
<thead>
<tr>
<th>Team</th>
<th>MCH Program(s)</th>
<th>Project Description</th>
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<tbody>
<tr>
<td>University of Alabama at Birmingham/Alabama Maternal and Child Health Leadership Network</td>
<td>COE, LEAH, LEND, Nutrition, Pipeline, PPC</td>
<td>Increase diversity in the MCH workforce by exposing high school students from racial/ethnic minority populations and economically-disadvantaged backgrounds to careers in MCH fields and creating mentor opportunities.</td>
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<tr>
<td>Indiana University/ Riley Child Development Center</td>
<td>LEND</td>
<td>Develop a robust diversity plan for the LEND program including a partnership with their School of Medicine Diversity Office.</td>
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<tr>
<td>University of Missouri and St. Louis University School of Public Health</td>
<td>LEND</td>
<td>Develop a training to improve instructor skill in engaging students in productive dialogues around diversity, with a focus on implicit bias.</td>
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<tr>
<td>Tulane University</td>
<td>COE</td>
<td>Increase understanding of issues of diversity and health equity for students and faculty using the APHA webinar, <em>Quantifying Racism to Understand and Address Health Disparities</em> as a basis for discussion.</td>
</tr>
<tr>
<td>University of Minnesota</td>
<td>COE, LEAH, LEND, Nutrition</td>
<td>Develop a workshop to train grant faculty, students and the broader community on systemic racism.</td>
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<tr>
<td>University of New Hampshire and University of Maine</td>
<td>LEND</td>
<td>Increase the numbers of racially- and ethnically-diverse long-term LEND trainees through the development of graduate and undergraduate “pipelines” at both universities.</td>
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<tr>
<td>University of Washington</td>
<td>COE, LEAH, LEND, Pipeline, PPC</td>
<td>Enhance awareness of MCH careers among under-represented students by setting up a clinical preceptor program between UW LEND and a HRSA-funded pipeline program.</td>
</tr>
<tr>
<td>University of Wisconsin-Madison and University of Wisconsin-Milwaukee</td>
<td>LEND, Pipeline, PPC</td>
<td>Improve collaboration across programs and create a pathway for supporting UW-Milwaukee Pipeline program graduates during the first year of graduate training in MCH disciplines and increase their application and admission to the LEND and PPC training programs at UW-Madison.</td>
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</tbody>
</table>

“We will need to continue to ‘bust the myth’ that there is no diversity in New Hampshire and Maine by exploring normative beliefs, assumptions, and implicit biases with our trainees and faculty.”

“Our participation in the DHEC has contributed to an improved feeling of efficacy for our team. This has been achieved in part through taking time to reflect on accomplishments. In addition, increased team knowledge and identification of supports in our university and practice group was helpful.”