Why Do People Work in Public Health? Results and Implications of a Worker Recruitment and Retention Study

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Presenter Disclosures

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(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose
Council on Linkages Between Academia and Public Health Practice

To improve public health practice, education, and research by:

- Fostering, coordinating, and monitoring links among academia and the public health and healthcare community;
- Developing and advancing innovative strategies to build and strengthen public health infrastructure; and
- Creating a process for continuing public health education throughout one’s career.

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20 National Public Health Organizations:
- American Association of Colleges of Nursing
- American College of Preventive Medicine
- American Public Health Association
- Association for Prevention Teaching and Research
- Association of Accredited Public Health Programs
- Association of Public Health Laboratories
- Association of Schools and Programs of Public Health
- Association of State and Territorial Health Officials
- Association of University Programs in Health Administration
- Centers for Disease Control and Prevention
- Community-Campus Partnerships for Health
- Health Resources and Services Administration
- National Association of County and City Health Officials
- National Association of Local Boards of Health
- National Environmental Health Association
- National Library of Medicine
- National Network of Public Health Institutes
- National Public Health Leadership Development Network
- Quad Council of Public Health Nursing Organizations
- Society for Public Health Education

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Background

- Goal of strengthening the public health workforce
- Interest in mapping the pipeline of public health workers
- Focus on understanding recruitment and retention
- Desire to develop evidence-based strategies
- **BUT** little data
Public Health Workers Survey

Purpose: Explore how and why individuals enter and remain in public health and their satisfaction with the work environment

Design:
- 28 questions
- Distributed online

Audience:
- Active US public health workers
- Identified using TRAIN
Survey Topics

- Demographics
  - Years employed, work settings, professional roles, and entry points

- Recruitment Factors
  - Organizational and personal

- Retention Factors
  - Organizational and personal

- Organizational Environment
  - Leadership, management, and professional development
Limitations

- Data are self-reported
- Not possible to identify all public health workers
- Findings may not be generalizable
- Did not survey people who left public health
Results – Basic Demographics

- 11,640 participants
- 54% aged 45-64 years
- 72% female
- 78% white
- 81% non-Hispanic
- 78% employed full-time
- 49% employed in public health for >10 years
## Results – Education

<table>
<thead>
<tr>
<th>Highest Degree Completed</th>
<th>Entry into Public Health</th>
<th>Time of the Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School or Associate’s</td>
<td>33%</td>
<td>28%</td>
</tr>
<tr>
<td>Bachelor’s</td>
<td>37%</td>
<td>32%</td>
</tr>
<tr>
<td>Master’s or Higher</td>
<td>22%</td>
<td>31%</td>
</tr>
</tbody>
</table>

Public Health Degrees | 9%                      | 11%                |
Results – Professional Roles

% of Survey Respondents

- Nurse: 25%
- Administrator/Director/Manager: 20%
- Health Educator: 15%
- Service Provider (Non-clinical): 10%
- Emergency Responder/Planner: 7.5%
- Allied Health Professional: 7.5%
- Environmental Health Specialist: 5%
- Faculty/Educator: 5%
- Data Analyst: 2.5%
- Lab Professional: 2.5%
- Researcher: 2.5%
- Physician: 2.5%
- Student: 2.5%
- No Response: 2.5%
Results – Work Settings

% of Survey Respondents

State Government: 45%
Local Government: 25%
Healthcare Services: 20%
Non-profit: 15%
Academic Institution: 10%
Private Industry: 5%
Federal Government: 2%
Unemployed: 2%
Self-employed: 1%
Tribal Government: 1%
Territorial Government: 1%
No Response: 0%
Results – Employment in Governmental Public Health

- Previously employed, 5%
- Never employed, 35%
- Currently employed, 60%
Results – Entry into Governmental Public Health

% of Survey Respondents

- Healthcare Services
- Private Industry
- Other Governmental Agency
- Other Undergrad Program
- Non-profit
- Unemployed
- Public Health Grad Program
- Other Grad Program
- Associate Degree Program
- Self-employed
- Public Health Undergrad Program
- Other Advanced Degree Program
- High School
- Retired
- Other Doctoral Program
- Public Health Doctoral Program
- No Response

The Council on Linkages Between Academia and Public Health Practice
Results – Recruitment & Retention Factors

Recruitment
- Specific work activities
- Job security
- Competitive benefits
- Identifying with mission
- Enjoy living in the area
- Ability to telecommute

Retention
- Job security
- Specific work activities
- Competitive benefits
- Identifying with mission
- Public service commitment
- Family member/role model working in public health
Results – Organizational Environment

➤ Leadership:
  ➤ High: Employees held to high professional standards
  ➤ Low: Atmosphere of trust and mutual respect

➤ Management:
  ➤ High: Addressed concerns about safety and security
  ➤ Low: Addressed concerns about leadership issues

➤ Professional Development:
  ➤ High: Opportunities to learn from one another
  ➤ Low: Sufficient funds and resources for professional development
Implications and Opportunities

- Strategies to ensure a sufficient workforce
- Career opportunities to move between healthcare, private industry, and governmental public health
- Emphasis on continuing education and training to build skills and competence for public health practice
- Focus on activities, job security, and benefits in recruitment and retention
- Build leadership and management skills
Additional Information

- Council on Linkages: www.phf.org/councilonlinkages


- Questions: kamos@phf.org