



Diversifying the nation's behavioral health workforce

SAMHSA Minority Fellowship Program at ANA celebrates 45 years.

By Bridgette M. Brawner, PhD, MDiv, APRN

LESS THAN one-third of graduates from U.S. master's and doctoral programs are members of underrepresented ethnic minority groups. This is critical because a substantive body of evidence underscores the importance of having a behavioral health workforce that mirrors the population served.

Additionally, as we think about pipelines into nursing, advanced practice nursing, and nursing education, people tend to gravitate toward fields where they can say, "That person looks like me. If they did it, I can do it to." When addiction counselors, psychiatric mental health nurse practitioners, chief nursing officers, university faculty, and others have shared experiences with the communities they work with, the individuals they encounter achieve better outcomes. For students, that can range from having a meltdown in an advisor's office about being ostracized as a minority at a majority institution or attending regularly scheduled appointments because you believe your provider "gets you."

Our profession is one of the most trusted in the nation. Diversifying the nursing workforce enhances this trust as individuals see themselves in their care providers. Over the past 45 years, the Substance Abuse and Mental Health Services Administration (SAMHSA) Minority Fellowship Program (MFP) at the American Nurses Association (ANA) has worked to address the issue of underrepresented ethnic groups in behavioral health by producing more than 400 of the nation's leading behavioral health nurse professionals.

Most notably, our program has trained an unprecedented number of nursing clinicians and scholars who are transforming the landscape of behavioral health in a variety of areas. Whether it's the first-generation college student who becomes the founder and chief executive officer of a nurse-managed outpatient treatment



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program, or the person whose family fled an oppressive political regime and now conducts research on refugee health, our fellows' uniqueness brings rich insights to mental health and substance abuse prevention and treatment around the globe.

Through their teaching, research, practice, and service, MFP fellows and alumni contribute to the reduction and eradication of health disparities, as well as the creation of health equity for all—with an emphasis on underserved ethnic minority populations. We have fellows who go on to assume leadership roles in direct clinical care, conduct research focused on behavioral health in ethnic minority populations, develop policies focused on behavioral health equity,

and develop pedagogical skills to educate a behavioral health nursing workforce to be culturally and linguistically competent.

The existence of our program speaks to the much-needed dialogue about nursing's role in providing culturally competent and linguistically appropriate healthcare services. I take pride in serving as chair of the National Advisory Committee for this phenomenal training program and look forward to the ways in which we will continue to enhance diversity in the workforce. I encourage you to consider how you can foster diversity in your institution or organization as well and create awareness of the MFP for those individuals we can serve. In the end, I believe such efforts will transform behavioral healthcare for the world's most marginalized groups, and society will be the better for it.

Learn more about the MFP at ANA at emfp.org. ★

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