

# The HPOG University Partnership Research Grants

## Introduction

The Health Profession Opportunity Grants (HPOG) Program, established by the Patient Protection and Affordable Care Act of 2010 (ACA), funds training in high-demand healthcare professions targeted to Temporary Assistance for Needy Families (TANF) recipients and other low-income individuals. In 2010, the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services awarded grants for five-year project periods to 32 HPOG grantees in 23 states.

ACF's Office of Planning, Research and Evaluation (OPRE) is using a multipronged research and evaluation strategy to assess the success of the HPOG Program. The research and evaluation activities examine program implementation, systems change resulting from HPOG programs, and outcomes and impacts for participants. The HPOG University Partnership Research Grants (HPOGUP) are one component of OPRE's strategy. HPOGUP funds studies conducted by university researchers that have partnered with one or more HPOG grantees to answer specific questions about how to improve HPOG services within local contexts. This brief presents an overview of each HPOGUP grant and discusses the contributions these studies are making to the body of knowledge regarding the education and training, employment, and advancement of low-income job-seekers.

| Grantee Partnership Information      |   | Program Partner Context   |   |                | HPOGUP Research Study  |  |   |
|--------------------------------------|---|---|---|----------------|--|--|---|
| HPOGUP Grantee                       | Program Partner   | Target Population   | Healthcare Training Offered*  | Program Size** | Primary Methods  | Primary Focus  | Research Sample Size  |
| <b>Brandeis University</b>           | New Hampshire Office of Minority Health and Refugee Affairs (Concord, NH)<br><i>State Agency</i>                              | TANF recipients, low-income individuals, minority adults, incumbent workers                     | Nursing Assistants; Registered Nurses; Licensed and Vocational Nurses   | 1,230          | Qualitative in-depth interviews with healthcare employers, job developers, and incumbent minority workers  | Determine best practices for developing a diverse workforce and related career mobility pipeline                       | 100 interviews  |
| <b>Loyola University</b>             | Gateway Technical College (Kenosha, WI)<br><i>Higher Education Institution</i>  | TANF recipients, low-income individuals   | Nursing Aides, Orderlies, and Attendants; Registered Nurses; Licensed and Vocational Nurses                               | 608            | Surveys of program participants; focus groups of staff, employers, alumni, and current students; administrative data   | Evaluate empowerment-based workforce development models  | 448 survey respondents  |
|                                      | Southland Health Care Forum (Chicago Heights, IL)<br><i>Community-Based Organization</i>                                      | TANF recipients, low-income individuals   | Medical Assistants; Nursing Assistants; Registered Nurses   | 475            |  |  | 385 survey respondents  |
|                                      | Instituto del Progreso Latino (Chicago, IL)<br><i>Community-Based Organization</i>  | Low-skilled Latinos   | Nursing Aides, Orderlies, and Attendants; Licensed and Vocational Nurses; Registered Nurses                               | 239            |  |  | 8 survey respondents (all LPN)  |
| <b>North Dakota State University</b> | Cankdeska Cikana Community College (Fort Totten, ND)<br><i>Higher Education Institution</i>                                   | Tribal TANF recipients, low-income individuals  | Nursing Assistants; Licensed and Vocational Nurses; Registered Nurses   | 150            | Interviews with faculty and program participants; focus groups with program participants; surveys of program participants, nursing directors, hospital administrators, and employers | Explore the recruitment and retention of American Indians into professional nursing programs                           | 98 interviews; 1,071 survey respondents; 77 focus group participants        |
| <b>Northwestern University</b>       | Community Action Project of Tulsa County, Inc. (Tulsa, OK)<br><i>Community-Based Organization</i>                             | Low-income parents of young children enrolled in CAP Tulsa's early childhood education programs | Nursing Assistants; Nursing Aides, Orderlies, and Attendants; Patient Care Technician                                     | 248            | Parent surveys, interviews, and assessments; child assessments, teacher questionnaires, focus groups, partner agency interviews, administrative data                                 | Examine two-generation program effects on family, parent and child outcomes  | 338 baseline survey respondents   |
| <b>Temple University</b>             | Temple University, Center for Social Policy & Community Development (Philadelphia, PA)<br><i>Higher Education Institution</i> | TANF recipients, low-income individuals, minority adults  | Medical Office Clerk, Secretary, Specialist; Community Health Workers; Medical Records and Health Information Technicians | 513            | In-depth interviews with participants and training staff, alumni focus groups, GIS mapping   | Examine how participant networks and community contexts facilitate or impede success in workforce development programs | 181 participant interviews; 9 staff interviews; 50 focus group participants |

\* *Healthcare training offered* displays the top three healthcare training Standard Occupational Classification (SOC) codes for which the highest number of participants began training. Data comes from the HPOG Performance Reporting System (PRS), a participant-tracking and management system used by all HPOG grantees, and was extracted July 29, 2015. Counts are duplicated; participants who began more than one program in the same SOC are counted for each program they began in that SOC.

\*\* *Program size* is the number of new enrollees each year across Years 2 through 5 of the HPOG program. Data comes from the HPOG PRS, extracted June 18, 2015. The PRS was implemented at the beginning of Year 2 of the program; an additional 211 individuals were reported as enrolled in Year 1 across all HPOG grantees, before the PRS started, but were never entered into the PRS. They are not included in this table.

**Project Title:** Study of Employment and Advancement of Racial, Ethnic and Linguistic Minorities for New Hampshire Health Profession Opportunity Project (HPOP)

**Project Website:**  
[www.iasp.brandeis.edu/research/RWG/EmploymentNH.html](http://www.iasp.brandeis.edu/research/RWG/EmploymentNH.html)

**Principal Investigators/Key Staff:** Janet Boguslaw, Sandra Venner, Laurie Nsiah-Jefferson, and Jessica Santos

**Research Institution:** Brandeis University, Institute on Assets and Social Policy (IASP), Heller School for Social Policy and Management

**HPOG Program Partner:** New Hampshire Office of Minority Health and Refugee Affairs (OMHRA)

\*HPOG is referred to as HPOP in New Hampshire.

Brandeis University and its HPOG program partner, the New Hampshire Office of Minority Health and Refugee Affairs (OMHRA), identified the need for a different kind of collaboration with employers in order to support the training, hiring, retention and advancement of racial, ethnic, and linguistic minorities entering or seeking to advance in health professions through the New Hampshire Health Profession Opportunity Project (HPOP). The U.S. workforce is increasingly diverse, and this trend is true for New Hampshire as well. Yet, many diverse populations face institutionally-based challenges in hiring, retention, or advancement in their careers despite their own efforts and motivation. This study focuses on the complementary processes of organizational change in the workplace and workforce development, as well as the role of key community stakeholders in supporting a diverse workforce. The dual purposes are to reduce health disparities and to increase employment career pathways to ensure a diverse and stable workforce.

Brandeis conducted 100 in-depth, qualitative interviews of NH healthcare employers, job developers, and incumbent healthcare workers to identify and understand barriers and opportunities for developing a diverse workforce and related career mobility pipeline. Through a series of discussions with industry associations and project partners about these findings, IASP engaged key stakeholders to shape new and existing training programs, support employer staff diversity efforts, and leverage new funding opportunities for research and sustainability of this work. Project reports, issue briefs, and forthcoming case studies draw from the analysis of the qualitative data and national research to provide guidance for employers, workforce development educators, community leaders, and healthcare associations, with particular applicability for the NH context.

Overall findings emerging through this work can inform practical and actionable recommendations. First, today's health career paths are non-linear, and are shaped by personal and professional networks. In many situations and contexts, diverse health professionals have to work harder to access and leverage these networks. Training and education alone cannot overcome these structural issues. Second, the development of a diverse workforce across all staff positions and levels in healthcare requires explicit and intentional collaboration, communication, and sharing of resources between employers, educators, community leaders, and the public sector.

**Project Title:** Sustaining Career Pathways for American Indian Health Professionals in North Dakota: Building Apprenticeship and Workforce Options with the Next Steps HPOG Project

**Project Website:** [www.ndsu.edu/nursing/](http://www.ndsu.edu/nursing/)

**Principal Investigator/Key Staff:** Loretta Heuer

**Research Institution:** North Dakota State University, Sponsored Programs, Vice President for Research, Creative Activities, and Technology Transfer (VPRCATT)

**HPOG Program Partner:** Cankdeska Cikana Community College (CCCC)

The North Dakota State University School of Nursing partnered with the Cankdeska Cikana Community College HPOG program, "Next Steps", to engage in research projects with the intent of: 1) identifying best practices for supporting the recruitment and retention of American Indian people into professional nursing programs in North Dakota, and 2) exploring how to encourage interest in health careers among American Indian youth.

State nursing educators and employers were convened through annual conferences to generate ideas and strategies for improving the recruitment, retention, and employment of American Indian students in the nursing profession. Thirty-five multi-disciplinary professionals generated 184 items that were reduced to 32 strategies and six themes; a conceptual model was created based on this data and has been used as the foundation for ongoing research in this area.

Video interviews were conducted with Next Steps student nurses and mentors to identify promising practices used by Next Steps to support student success; excerpts have been used to develop multiple Recruitment and Retention of American Indians into Nursing videos. An oral history project, Voices of American Indians in Nursing, was also completed with 13 nurses representing multiple generations and career choices. Video from the interviews is being used to produce a documentary, which can be used as a recruitment tool.

To encourage American Indian students' interest in health careers, a series of educational opportunities were initiated and evaluated. For example, Health Careers For You was geared for 11-14 year olds and taught by medical students, residents, and faculty from the Icahn School of Medicine at Mount Sinai and the Mailman School of Public Health at Columbia University. Pre- and post-tests, course evaluations, and focus groups were used to assess curriculum content and student engagement. Findings underscore the need for better data about youth perceptions of education and employment. To that end, 12 high schools located on or near North Dakota Indian Reservations were surveyed using a combined Education and Employment Hope survey. Over 500 students completed the survey. The data will be of value to local schools and tribal nations, and will provide a comprehensive look at American Indian students as a whole in terms of their aspirations and perceived self-sufficiency.



**Project Title:** Evaluation of Empowerment Pathways to Self-Sufficiency in Health Professions Career Development for Low-Income Individuals

**Project Website:**  
[www.luc.edu/faculty/phong](http://www.luc.edu/faculty/phong)

**Principal Investigators/Key Staff:** Philip Hong, Terri Pigott, Timothy O'Brien, Whitney Key, and Nuri Lim

**Research Institution:** Loyola University of Chicago (Loyola)

**HPOG Program Partner:** Gateway Technical College (Kenosha, Wisconsin), Southland Health Care Forum (Chicago Heights, Illinois), and Instituto del Progreso Latino (Chicago, Illinois)

Loyola University of Chicago (LUC) partnered with three HPOG grantees from ACF Region V—(1) Gateway Technical College in Kenosha, WI; (2) Southland Health Care Forum in Chicago Heights, IL; and (3) Instituto del Progreso Latino in Chicago, IL—to evaluate empowerment-based workforce development models (the extent to which one's psychological self-sufficiency (PSS) affects one's economic self-sufficiency (ESS), employment placement, and retention outcomes in health professions).

Program participants were asked to participate in surveys at four different time points (start of program, middle of program, end of program/employment, and six-month follow-up). The surveys collected basic demographic information and measured employment-related intrapersonal and non-cognitive skills and perceived barriers to employment. A series of rigorous statistical analyses were conducted to develop the PSS metric and to test the extent to which PSS contributes to economic outcomes. The PSS metric is comprised of employment hope, measured by the Short Employment Hope Scale, and perceived employment barriers, measured by the Perceived Employment Barrier Scale. ESS was measured by the WEN Economic Self-Sufficiency Scale. As of April 2015, 833 students (92% of total participating HPOG students at the partner sites) had completed the first survey, 577 (69%) the second survey, and 326 (56%) the third survey. Over the four survey points, about 70 percent reported having increased their employment hope and 57 percent reported having decreased their perceived employment barriers. As hypothesized, results indicated that PSS significantly contributes to ESS—specifically, increases in PSS lead to growth in ESS outcomes. This suggests that workforce development practitioners should focus on clients' PSS when working with them to achieve ESS outcomes.

LUC also conducted seven focus groups of staff, employers, alumni, and current students from two HPOG program partner sites to supplement the quantitative data. The study used this qualitative data to further examine the extent to which HPOG program participation affected PSS and to explore what key programmatic components of HPOG significantly influenced economic success. Students reported that the HPOG program has helped them overcome fear, and build confidence and a sense of achievement in their pursuit of a healthcare career. They felt the HPOG program was a "once in a lifetime" opportunity that has made a lasting impact on their lives. They underscored holistic staff support—characterized by accessibility, accountability, and encouragement—as a critical program component. From the qualitative data, it appears that PSS at the individual student level is nurtured and sustained through the supports the HPOG program provides, namely instructors, tutors, program staff, and peer groups.



**Project Title:** Building Capacities/Making Connections: A Multi-Year Study of Human and Social Capital Development through the Health Information Professions Career Pathways Initiative (HIP)

**Project Website:**  
<http://cspcd.temple.edu/node/213>

**Principal Investigators/Key Staff:** Cheryl Hyde, Karin Garg, and Eian Moore

**Research Institution:** Temple University, School of Social Work

**HPOG Program Partner:** Temple University, Center for Social Policy and Community Development (CSPCD)

Building Capacities/Making Connections (BC/MC) is a collaborative effort between the Temple University, School of Social Work and its Center for Social Policy and Community Development (CSPCD) in order to study the Center's HPOG training program—"Health Information Professions Career Pathways Initiative (HIP)." This research examines issues pertaining to: (1) training participants' increased workforce capacities and access to labor market opportunities; (2) participants' pre-existing and enhanced networks, positive and negative in nature, that impact career development success; (3) whether participant engagement in the HIP project is helped and/or hindered by these networks; (4) how these networks may be positively affected by virtue of participation in HIP; and (5) how participants' community contexts facilitate or challenge program performance and network enhancement.

This mixed method study collected community and individual level training participant data. BC/MC conducted in-depth interviews with 181 out of 202 HIP program participants across 10 cohorts at the start of their training. Follow-up interviews are conducted at time of exit and then at six-month intervals in order to document changes in employment, networks, and engagement. The interview protocol, designed specifically for this research, combines the Arizona Social Support Inventory with items from several social capital/civic engagement surveys, and focuses on participant social support networks, community involvement, and trust in various social institutions. These data are augmented by information from six participant alumni focus groups and individual interviews with HIP training staff. Finally, GIS mapping was done in order to generate community profiles for the 181 participants. The overall findings indicate that participants are caught in "urban silos" (sparse, isolated neighborhoods and networks) that significantly curtail access to opportunities, including the labor market. Specifically, they have small networks that do not connect them with needed resources for employment success and reside in economically depleted communities with few avenues into viable labor markets. Moreover, participants tended to not recognize the potential to develop or enhance networks through training program contacts. These findings suggest that in addition to the development of individual skills (human capital), training programs need to understand the support networks of participants and proactively develop specific labor market networking opportunities (social capital) rather than assume that participants will be able to build such bridges on their own.

NORTHWESTERN  
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**Project Title:** CareerAdvance<sup>SM</sup>: A Dual-Generation Program's Effects on Families and Children

**Project Website:**

[www.ipr.northwestern.edu/research-areas/child-adolescent/NU2gen/](http://www.ipr.northwestern.edu/research-areas/child-adolescent/NU2gen/)

**Principal Investigators/Key Staff:**

P. Lindsay Chase-Lansdale, Teresa Eckrich Sommer, and Terri Sabol (Northwestern University); Christopher King (University of Texas at Austin); Jeanne Brooks-Gunn (Columbia University); Hirokazu Yoshikawa (New York University)

**Research Institution:**

Northwestern University, Institute for Policy Research

**HPOG Program Partner:**

Community Action Project of Tulsa County, Inc. (CAP)

Educational disadvantage sets both parents and children up for increased economic hardship and limited life opportunities over time. Two-generation programs are designed to address this dual disadvantage by serving the educational (and by association income) needs of parents and children at the same time. CAP Tulsa is an anti-poverty agency in Tulsa, Oklahoma that embraces a two-generation approach for families, offering Head Start services for young children and stackable career training for their parents. Known as CareerAdvance<sup>SM</sup> Healthcare, the program prepares parents for high-demand careers in nursing, healthcare technologies, and medical assisting, among others, and supports them with intensive and high quality social and financial supports. These include: career coaching, family support, small peer cohorts, tuition coverage for college coursework, and incentives for school attendance and performance. The CAP Family Life Study is a quasi-experimental, mixed-methods study of the implementation and effectiveness of CAP Tulsa's CareerAdvance<sup>SM</sup> Healthcare program, led by Northwestern University's Institute for Policy Research with the University of Texas at Austin's Ray Marshall Center and in collaboration with researchers from New York University and Columbia University.

The full research sample includes 338 parents: 160 CareerAdvance<sup>SM</sup> Healthcare participants and 178 in a matched comparison group who have equivalent levels of motivation for healthcare training and similar demographic characteristics. Research team members used a broad array of data sources in this effort, including parent surveys, child and parent assessments, teacher questionnaires, focus groups, in-depth parent interviews, regular CAP Tulsa and partner agency interviews, and agency administrative data. The study participants come from diverse racial and ethnic backgrounds and have relatively low levels of education and employment rates at baseline. The main evaluation of CareerAdvance<sup>SM</sup> Healthcare is on-going; however, preliminary analyses find evidence that persistence in the CareerAdvance<sup>SM</sup> Healthcare program is high compared to other job training programs. After 16 months of participation, 76 percent of parents achieved at least one career training certificate in the healthcare field and nearly 30 percent received more than one certificate (Sabol, et al., under review).

## CONSIDERATIONS FOR POLICY & PRACTICE

Though each of the HPOGUP studies employs unique, mixed-methods approaches to answer different research questions, collectively the studies contribute to the body of knowledge on factors that affect the education and training, employment, and advancement of low-income individuals seeking jobs in the health sector. Based on the preliminary findings, the studies' investigators collaborated to develop several recommendations for local education and training programs, and state and federal agencies to consider in order to apply this knowledge.

### Enhance Individual and Social Supports in Workforce Training Programs

- Implement a combination of individual coaching, mentoring, and peer groups to expand participants' social networks and supports, which can help participants enhance their psychological self-sufficiency and progress toward education and employment goals, and economic self-sufficiency.
- Assemble a team of program staff with collective expertise in education, training, employment, and supportive services, and have them deliver their support to participants through an intensive and well-coordinated client-centered service delivery model.
- Teach networking skills and facilitate opportunities for participants to apply these skills and expand their networks to include positive ties that can provide pathways into labor markets.
- Support job retention and advancement by providing post-training support through, for example, alumni groups, networking opportunities, and the provision of career guidance.

### Engage Employers as Partners

- Facilitate communication and collaboration between employers and education and training providers to identify and provide training for skills critical to employment, including "soft skills" or "work readiness skills."
- Work with hiring managers and Human Resources departments to establish effective methods for screening and interviewing candidates to identify desired skills and reduce potential bias when hiring low-income and/or diverse professionals.
- Provide tools to assist employers in becoming culturally competent organizations with an appreciation of the benefits of workforce diversity and knowledge of employment strategies that can maximize these benefits to improve the workplace environment and quality of care.
- Work with employers to support career advancement in the workplace through continued professional development, education, and training for staff; articulated career pathways; and organizational policies designed to ensure equity of opportunity at all levels.

### Create and Apply Knowledge through Research-Program Partnerships

- Recognize the mutually beneficial nature of research-program partnerships and support them at an early stage.
- Encourage research partners to have an ongoing presence at program sites to provide technical assistance in preserving the integrity of the research, and to foster a culture of data understanding and use.
- Establish continuous feedback loops for research partners to share key insights and findings with program partners and other stakeholders to support continuous program improvement, and for program partners to provide contextual information to assist research partners with interpreting and understanding findings.

### Improve Data Collection and Utilization to Support Research and Practice

- To help ensure the collection of consistent and reliable data, coordinate data collection activities with concurrent program outreach and activities schedules. Instructor awareness of and buy-in for the research can also facilitate the collection of high quality follow-up data.
- Fully engage employer sites in collaborative research partnerships to enhance post-placement data collection, which can, in turn, help to more effectively demonstrate the impact of education and training programs.
- Support the collection and analysis of workforce diversity data at the organizational, sector, and state levels as a first step towards equity of opportunity in health professions.
- Set clear expectations with program partners about the timing of impact results, emphasizing the need to prevent program or research bias from premature results sharing, while also attending to a program's need to use impact results to sustain or expand funding.

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**The views expressed in this publication do not necessarily reflect the views or policies of the Office of Planning, Research and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services.**