The Health Careers Opportunity Program (HCOP) at El Paso Community College (EPCC) is designed to assist individuals from academically and economically disadvantaged backgrounds to enter and graduate from programs leading to careers in the Allied Health Professions. The HCOP utilizes a 5-week Summer Institute for prospective students, which includes non-credit academic and remedial courses, counseling, and field trips to area health care providers. During the academic year, HCOP students receive peer tutoring and mentoring. Goals and objectives of the HCOP include: (1) identifying, recruiting, and enrolling a maximum of 65 minority and disadvantaged students who have potential for future success in an Allied Health Profession; (2) assessing a minimum of 110 potential HCOP students and securing assurance of needed financial aid for 75 of these students; (3) providing workshops during the Summer Institute on the availability and application procedures for obtaining financial assistance in baccalaureate and graduate health professions schools; (4) providing motivational experiences, role model exposure, counseling services, and academic support for HCOP Summer Institute "trainees"; and (5) identifying and enrolling in baccalaureate and graduate health professions schools 15% of HCOP students who have completed the Summer Institute and/or graduated from EPCC's 2-year allied health programs. During the past 2 years, 140 students completed HCOP application requirements, 71 entered and successfully completed the Summer Institutes, 21 students are enrolled in health programs at the college, and 8 students have transferred to four-year institutions. (PAA)
El Paso Community College
Health Careers Opportunity Program
(HCOP)

by
Linda A. Shields
Project Director
El Paso Community College
Health Careers Opportunity Program
(HCOP)

by Linda A. Shields
Project Director

According to the Ninth Annual Status Report 1990, *Minorities in Higher Education*, Hispanics are one of the largest and fastest growing minority groups in the United States, but their participation in higher education is much lower than their proportion of the college age population. Texas' Hispanic population increased by more than 1.4 million or 44% between 1980 and 1989 yet almost half of all Hispanic adults had not finished high school compared with one-fifth or 21.2% of non-Hispanics.

El Paso, Texas is located at the far tip of Texas and is flanked by the states of Chihuahua, Mexico and New Mexico. Of the 600,000 inhabitants in the District's service area, 62% are Hispanic, of whom 29% live below the poverty level. Approximately 75% of those over 25 years of age have not completed high school and only 8% report any education beyond high school. Persons under 18 years of age account for over 40% of El Paso's population. Consequently, a large number of students enrolled at El Paso Community College are young, Hispanic and from a low-income family that has little or no experience dealing with a postsecondary education environment.

![Proportions of Population by Age & Racial/Ethnic Groups](image)

Of the 17,689 students enrolled during Spring 1991, 78% were Mexican-American, 3% were Black and 18% White. Women comprised 61% of the enrollment. Figures supplied by the EPCC Financial Aid Office reveal that 78% of students enrolled in 1990-91 were on Financial Aid. Ninety percent of those students came from families whose income was less than $15,000 and for students who live independently of their families, 50% had an income of less than $8,000.

The Health Careers Opportunity Program is federally funded from the Health Resources and Services Administration which is a subsidiary of the Public Health Service's Bureau of Health Professions which provides grants to Health Professions Schools, Allied Health Profession Schools, and Public or nonprofit Private Health or Educational entities. The funds are intended to design and implement programs to assist individuals from disadvantaged backgrounds to enter and graduate from Health professions schools or from programs providing education in the Allied Health Professions.

The focus of the Health Careers Opportunity Program is to assist the academically and economically disadvantaged student.

An academically disadvantaged student is defined as an individual who comes from an environment that has inhibited the individual from obtaining the knowledge, skills and abilities required to enroll and graduate from a health professions school or from a program providing education or training in an Allied Health profession. An economically disadvantaged student is one who comes from a family with an annual income below a level based on low income thresholds according to family size.
The problems addressed by this project is the under-representation of Hispanics and Blacks from disadvantaged backgrounds in the health care work force. Statistics on the national, state and local level reflect this need and projections for the future show an increasing need for Hispanics and Blacks to serve their growing populations in this region. In the El Paso area, the College is serving a large population of academically and economically disadvantaged students. It is found that disadvantaged students in EPCC’s Health Occupations programs lack awareness of the various health careers available to them; do not have role models to motivate them toward their goals; need an opportunity to upgrade academic skills, particularly in math and sciences; are unaware of Financial Aid and scholarships available to them and how to secure such help; require special support services to prevent them from dropping out and to help them experience success in their goals; lack support, encouragement and assistance required to further their education in health care professions.

The Health Careers Opportunity Program Goals and Objectives

Recruitment

To identify, recruit, and enroll a maximum of 65 minority and disadvantaged students who have potential for future success in an Allied Health Profession.

Financial Aid

To assess a minimum of 110 potential HCOP students and complete the necessary forms and follow-up activities to secure assurance of needed financial aid for 75 of these students.

To provide workshops during the summer training program on availability, sources, eligibility, and application procedures for obtaining financial assistance in Baccalaureate and Graduate Health Professions schools.

Preliminary Education

To develop and offer a Health Career Summer Institute which provides a minimum of six non-credit academic courses to the trainees.

Retention

To provide motivational experiences, role model exposure, counseling services, and academic support to the HCOP trainees.

Facilitation of Entry

To identify and enroll in baccalaureate or graduate health programs, fifteen percent of HCOP students who have successfully completed the summer training program and/or graduated from EPCC’s two-year allied health programs.

Recruitment plays a major role in the dissemination of health career and financial aid information. The HCOP Team, along with the Health Occupations Division Marketing Committee, participate in numerous Career Days and classroom presentations at the high schools. Additionally, we invite interested students to come to our campus and tour the various program laboratories and then on to tour local hospitals. We also use local television and radio spots to promote the programs.

The recruitment instruments include brochures (HCOP and Health Occupation Division), book covers that can be given away during presentations and at exhibits, and videos explaining the various health programs. The most effective recruitment tool we use are former students who have successfully
completed the training program and are now enrolled in a health profession program. The students are role models for high school students thinking about entering the health profession.

During the year 1990-91, the recruitment team presented health career information to approximately 6,230 prospective allied health students.

During the past two years of the Program, 736 students indicated interest in HCOP, with 140 completing the application requirements. Seventy-one students entered and successfully completed the Summer Institutes. Thus far, 21 students are enrolled in health programs with 34 completing basic requirements. Eight students have transferred to four-year institutions. It is expected that ten students will graduate and enter the work force in May '92.

Of the 39 students who completed the Summer Institute in 1991, 39 were financially disadvantaged; 38 Hispanics and 1 disadvantaged White; 30 females and 9 males; 36 first-generation and 3 non first-generation.

The students were evaluated and selected by a committee, composed of the Activity Coordinator, HCOP Counselor, Division Chair of Health Occupations, and two Allied Health Faculty. The following criteria were used for evaluation:

- Minority Student
- First Generation College Student
- Previous/Present Enrollment in Vocational/Technical Courses
- Applicant's GPA
- Financial Need
- Biosketch
- Letter of recommendation
- Potential for Success

The applicants were then rank ordered and the first 45 were sent letters of acceptance. Alternate and secondary alternate lists were also maintained as replacements should one or more of the forty five selected be unable to attend.

The HCOP Summer Institute was five weeks in duration with students attending non-credit academic classes from 8-5 pm, Monday through Friday. The students were also required to attend "field trips" on Saturdays. The Summer Institute is designed around two basic elements: an academic/instructional component and a motivational component.

The Academic Component of the Summer Institute is structured around an analytical based learning experience including courses such as College Level Reading, English Enrichment, Exploration into the Sciences, Computers in Health, Biology and Human Anatomy, Examining Medical Terminology and Enhanced Mathematics.

One of the goals of the academic component is to provide intense short-term instruction to enable students to progress beyond the remedial levels, or move up within the remedial range, in math, English, reading and biology. In addition, it serves to introduce medical terminology, use of computers in health, and concepts in chemistry.

The motivational component provides the students with an opportunity to visit local health care facilities and supports an atmosphere of cohesiveness for the group along with a broad overview of the health care professions, which enhances the career decision making process. Our goal is to motivate the students toward success in meeting their goals.
Before beginning the summer training program, the students were given pre-tests in English, math, reading and biology. The pre-tests consisted of the usual EPCC testing program used for placement of new students in either remedial or college level course; the ASSET test for math and English, the Nelson-Denny for reading, and an EPCC comprehensive test of biological concepts.

Post-tests were administered in the classroom on the last day of the Institute by the Instructor for each subject. The Nelson-Denny was again used for reading, the written portion of the English placement test determined English placement, and the final examinations from Biology and Math instruction served to place the students in those subjects.

Results from the pre and post-tests showed a definite improvement in academic skills with many students scoring out of the remedial levels and into the college level courses.

Immediately following the Summer Institute, 9 students enrolled in the second summer session, 6 of whom had previously attended EPCC. All 9 students carried a full load of at least 6 hours for the five-week session and all were enrolled in at least one subject in which they had instruction in the summer training program. Eight of the 9 students made grades of A and B and the other student passed all 3 courses she was carrying with C's. We were very pleased with the results of the Summer session and are eager to see what the ensuing semesters will bring.

Also, we felt the motivational component of the Institute was working. The students attending the Summer session were now more motivated as they had a definite educational goal, they were part of a select group with a common interest in health occupations and they had encouragement and support from the HCOP personnel.

During the academic year, the students are provided workshops, receive peer tutoring and mentoring, and are monitored as to their progress in academic courses. HCOP also puts out a monthly newsletter informing students about dates of registration, testing, workshops, and other events. We also congratulate students on achievements. The integration of academics and social is proving to be a strong motivator in the retention component. The students feel a part of a group and, therefore, are more apt to stay in school rather than dropout.

Increasing the number of minority and disadvantaged practitioners in the health and allied health professions is an integral part of the overall strategy to improve access and quality of health care for underserved citizens throughout this land. Healthcare shortages exist throughout the country and are expected to become critical by the year 2000. The minority and disadvantaged population bears the brunt of untimely deaths, chronic diseases, substance abuse, homicide, and infant mortality. The demand for trained health care personnel has further increased with the rise in catastrophic diseases such as AIDS.

The health professional workforce shortage has been well documented in recent articles and reports, such as, USA Today (May 1990) and Minorities and Women in Health Fields, (U.S. Department of Health and Human Services, 1990 ED) The shortage of qualified minority health professionals is more acute and represents a major problem for states such as Texas. In order to meet the workforce demands of the year 2000 and beyond, Texas must provide innovative and creative programs that will prepare minorities and women for these and other careers. Consequently, no issue is more important to contemporary higher education than establishing model educational programs that address the need to prepare health professionals and other technologists for the immediate and future workplace.