5 keys to student diversity: Changing the face of medical education

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Looking to spearhead diversity solutions at your school? One physician educator shares five steps educators can take to develop effective programs that increase the number of underrepresented students in medicine.

Despite medical classes becoming more diverse, the rate in which underrepresented minorities enter medical school still significantly lags behind those who are traditionally well-represented. Among students in certain racial and ethnic groups, enrollment has even declined. This is particularly true for African-American men in medicine, William McDade, MD, PhD, former chair of the AMA Council on Medical Education and deputy provost for research and minority issues at the University of Chicago, told a group of educators at the AMA’s CHANGEMEDED conference in October.

“There were only 500 black men nationally who matriculated into medical school this past year … and it’s not just a one-off [incident] because you can see that 2013 and 2014 data” from the Association of American Medical Colleges shows roughly the same enrollment numbers, Dr. McDade said.

He also noted that there are currently twice as many African-American women in medical school than black males and that the number of Latino physicians in medicine has actually worsened over the past 30 years, according to recent research published in Academic Medicine.

But beyond drastic declines in underrepresented minorities, these numbers underscore a greater issue at hand: “You might even ask yourself, ‘What difference does it make if we don’t change the face of medicine?’” Dr. McDade said. “There’s strong evidence that suggests that racial, ethnic and linguistic diversity in health care providers is correlated with better access to and quality care of minority populations.”

How medical schools can diversify student enrollment, address health care disparities


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“A central goal of the physician workforce of tomorrow should be to eliminate health care disparities,” and medical schools are well-positioned to help accomplish this, Dr. McDade said. Schools looking to create new diversity solutions and train culturally-competent physicians can:

**Develop curricular innovations that focus on health care disparities and the social determinants of health**

Schools must “[recognize] that all physicians in any future scenario will have to learn about cultural and social determinants of health and be trained accordingly,” Dr. McDade said, noting that the AMA’s Accelerating Change in Medical Education initiative has already begun spearheading such curricular developments.

For instance, schools that focus on population health and big data are creating new ways for students to measure health care disparities, Dr. McDade said. Last year, New York University School of Medicine, one of the founding members of the AMA’s Accelerating Change in Medical Education Consortium, launched a novel toolset, Health Care by the Numbers, which allows students to analyze real clinical data for more than 2.5 million patients from 29 hospitals in New York and answer population health questions.

Dr. McDade said curricula that immerse students in health care delivery science and teach quality improvement and cultural competency also will prepare future physicians to care for diverse patients in the country’s rapidly evolving health care system.

**Use Liaison Committee on Medical Education (LCME) Standards to garner support**

The 2015-2016 LCME Standards urge educators to diversify medical training by creating effective pipeline programs to prepare applicants in their defined diversity categories. Educators can reference these standards during key conversations with medical school leaders about the importance of creating actionable diversity solutions, Dr. McDade said.

For example, “LCME Standard 3.3 asks medical schools to make sure they are focused on increasing diversity outcomes with respect to students, staff, senior admin staff and other relevant matter [for the] academic community,” Dr. Mc Dade said.

He also recommends referencing LCME Standard 7.6, which asks schools to ensure that medical schools graduates know how to address issues related to racial and gender bias within system-based practice.

**Create premedical post-baccalaureate programs for underrepresented students**


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Why? While enriching diversity among medical students, research shows (PDF) that graduates of premedical post-baccalaureate programs also are more likely to enter medical residencies in underserved communities.

Dr. McDade noted that a large percentage of students training in these underserved areas also pursued residencies within primary care specialties, such as family medicine and internal medicine.

Enhance admissions processes to promote diversity

Schools can adapt a holistic review process, which offers a way to relieve “some of the cognitive pressure” that emerges when schools only admit medical students based on a narrow range of application criteria, such as GPAs and test scores, Dr. McDade said.

Some medical schools have already adapted holistic review processes that are proving effective. For instance, a national study of admissions in university health programs in 2014 found that students admitted to medical school through a holistic review process performed just as well as those who were not. Schools that used a holistic review process “experienced increased diversity, no change to student success metrics and an improved teaching and learning environment,” according to the study.

Develop a research agenda that measures and promotes the results of diversity-based programs

If your institution offers diversity- based programs, be sure to ask: Has an increase in racial diversity within medical school led to improved educational outcomes? “If you can show this, that’s fabulous, and we need you to come up with studies that indicate the value of diversity in a quantitative way,” Dr. McDade said.

He encouraged educators to explore research projects that quantify the impact of diversity programs in medical schools. When creating a research proposal, Dr. McDade recommended starting with this list of 10 expert questions to ensure your research project effectively assesses diversity changes at your institution.

Ways to promote med school diversity and minority health

- Read how one school successfully created and implemented a strategic diversity action plan. Plus, five key steps educators can take to create a diversity action plan at their own school.
- Find out why the number of black men in medicine hasn’t increased since 1978, and follow these 5 med ed solutions to help boost diversity.
- Learn how one school’s holistic solution is boosting the number of Hispanic physicians.
- See how these medical schools are tackling challenges in health disparities and cultural competencies.

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Learn about the 21 medical students the AMA Foundation recently selected as future minority physician leaders. Read their unique perspectives on being students of color in medical school and how they plan to succeed while promoting diversity in medicine.

Educate yourself and your peers on the 5 myths of diversity in medical education.

Watch this Google Hangout to learn more ways schools and students are promoting diversity in medical education.

Visit the AMA Minority Affairs Section Web page, which features the latest on AMA policies, news and events to promote diversity in medicine and public health.