

Why the AMA is committed to a diverse physician workforce

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The strength of our medical workforce—and our nation—is rooted in diversity. One requirement to advance health equity is to promote greater diversity among medical school applicants and enrollees. We know from research and experience that all patients, but particularly those from marginalized communities, benefit from a diverse physician workforce and are even likely to see improved outcomes. Diversity also enhances students' learning environments and fosters greater innovation.

Achieving diversity within the physician community, especially racial equity, has been historically challenging and has not yet reached levels that are representative of our nation's racial and ethnic diversity. Census data shows that less than 10 percent of physicians are African Americans, Latinos, Native Americans and Alaska Natives combined.

That's why we're concerned any time actions occur that may undermine these efforts, such as the agreement reached between the Texas Tech University Health Sciences Center School of Medicine and the U.S. Department of Education Office of Civil Rights to no longer consider race in making admissions decisions.

While this agreement does not set a legal precedent, it does require the Trump administration to clarify policy changes. More importantly, while there is still much more to be done, we cherish the progress our country has made to ensure the civil and human rights of people—and we do not want to see further voluntary acts or agreements removing race considerations from the admissions process. Removing race further raises questions about whether medicine can and will recruit the best students from all backgrounds.

The AMA has been a part of this debate before. As the AMA stated in an amicus brief in *Fisher v. University of Texas at Austin*, a 2016 decision by the U.S. Supreme Court that further upheld this practice: "Removing the ability of medical schools to consider applicants' race and ethnicity as one of many personal attributes would undermine their ability to assess the entirety of each individual's background, thus frustrating the goal of best serving the public's health."

High-quality care, no matter who you are

Just last year, the AMA Board of Trustees and the entire House of Delegates strengthened our existing policy to improve health equity nationwide. One of those changes formalized opposition to legislation that undermines any effort to properly employ affirmative action in promoting student body diversity. And we support the use of holistic assessments of medical school applicants to achieve this same goal.

The AMA is committed to providing equal access to high-quality care to all patients, no matter who they are, where they live or what they look like. Communities of color—including African Americans, Latinos, and Native Americans—live with chronic diseases such as diabetes, hypertension and asthma at higher rates than whites. They live sicker and die younger than white Americans due to multiple factors including discrimination and systemic racism experienced in and out of the health care system, reduced access to high-quality care, and lack of insurance coverage, to name a few.

Fortunately, multiple studies have demonstrated that patients who share racial or gender characteristics with the physicians treating them demonstrate higher rates of both treatment compliance and personal satisfaction.

Achieving greater diversity in the future physician workforce demands greater attention to this issue today. Recognizing the larger historical context, power structures and economic interests that affect diversity, one strategy AMA has committed to is supporting existing pipeline programs, similar to the one at Morehouse School of Medicine in Atlanta. Such programs encourage students that are underrepresented in medicine to pursue careers in health care.

The AMA will never relinquish its leadership role in promoting diversity in the physician workforce, knowing more needs to be done. Affirmative action has a rightful place in medical school admission policies when it meets the requirements for narrow tailoring and strict scrutiny laid down by the courts. Advancing equity is a critical goal we need to meet on the journey toward providing optimal care for all Americans.