Racial and Ethnic Diversity at Medical Schools—Why Aren’t We There Yet?

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National discourse has galvanized organizations throughout society to identify and address inequities based on race and ethnic group. In medicine, diversity at all levels — from the frontline workforce to executive suites and from classrooms to laboratories — is an essential component of efforts to achieve equity. More than a decade ago, one of us examined data from the Faculty Roster of the Association of American Medical Colleges (AAMC) and found minimal progress in the proportion of medical school faculty belonging to racial and ethnic groups that are underrepresented in medicine (URM). Such trends disappear or are reversed when shifting U.S. population dynamics are accounted for. Similar stagnation in the relative diversity of medical school matriculants has been reported. Recent AAMC data suggest little improvement in representation among faculty: 5.5% of medical school faculty are Hispanic, Latinx, or of Spanish origin; 3.6% are Black or African American; and 0.2% are Native American or Alaskan Native.

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Authors: James Guevara