

Diversity initiatives do not increase representation of minorities on medical school faculty

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From 2000 to 2010, the presence of a minority faculty development program at U.S. medical schools was not associated with greater underrepresented minority faculty representation, recruitment, or promotion, according to a study appearing in the December 4 issue of *JAMA*, a medical education theme issue.

"Minority physicians and scientists have been inadequately represented among medical school faculty when compared with their representation in the U.S. population. Although their representation has increased over time, underrepresented minority faculty are less likely to be promoted and spend a longer period in a probationary rank. In addition, underrepresented minority faculty have been less likely to hold senior faculty and administrative positions and less likely to receive National Institutes of Health research awards," according to background information in the article. To increase the recruitment and retention of underrepresented minority faculty, a number of medical schools in recent years have developed minority faculty development programs. "Although it is clear that efforts to enhance diversity and inclusion are increasing, it is not clear whether minority faculty development programs are effective in general at enhancing the recruitment and retention of underrepresented minority faculty."

James Guevara, M.D., M.P.H., of the Children's Hospital of Philadelphia, and colleagues conducted a study to determine whether

minority faculty development programs targeting underrepresented minority faculty are associated with increases in underrepresented minority faculty representation, recruitment, and promotion. The study consisted of an analysis of the Association of American Medical Colleges Faculty Roster, a database of U.S. medical school faculty, and included full-time faculty at schools located in the 50 U.S. states or District of Columbia and reporting data from 2000-2010.

Underrepresented minority faculty were defined as faculty self-reported to be black, Hispanic, Native American, Alaskan Native, Native Hawaiian, or Pacific Islander faculty.

The overall number of underrepresented minority faculty increased during the study period (from 6,565 (6.8 percent) in 2000 to 9,009 (8.0 percent) in 2010) as did the percentage of newly hired faculty self-reporting underrepresented minority status (from 9.4 percent in 2000 to 12.1 percent in 2010) and newly promoted (6.3 percent to 7.9 percent). Hispanic faculty members increased from 3.6 percent in 2000 to 4.3 percent in 2010, while black faculty members increased 3.2 percent to 3.4 percent.

Of 124 eligible schools, 36 (29 percent) were identified with a minority faculty development program in 2010. Schools with minority faculty development programs had a similar increase in percentage of underrepresented minority faculty as schools without minority faculty development programs (6.5 percent in 2000 to 7.4 percent in 2010 vs. 7.0 percent to 8.3 percent). After adjustment for faculty and school characteristics, minority faculty development programs were not associated with greater representation of minority faculty, recruitment, or promotion.

In subgroup analyses, minority faculty development programs that were present for ≥ 5 years and had more components were associated with

greater increases in underrepresented minority faculty representation.

The researchers add that the percentage of underrepresented minority faculty increased modestly from 2000 to 2010 at U.S. medical schools.

"Although the definition of underrepresented minority is evolving to reflect local and regional perspectives, findings from this study demonstrate that faculty who are underrepresented in medicine, relative to the general population, have seen little increase in absolute or percentage representation across all schools during this time period, while the prevalence of individuals of underrepresented minority status in the general population had increased to greater than 30 percent by 2010," the authors write.

"This relatively small increase may have been the result of an increase in the percentage of faculty hires that involve underrepresented minority faculty and efforts to increase the pipeline of medical school faculty."

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