



## Georgia Board for Physician Workforce Cultural Competency and Diversity in Medical Education and the Physician Workforce February 2006

Georgia's population is growing and becoming increasingly diverse. With diversity, comes a greater need for physicians to be able to transcend cultural and language barriers and work effectively with patients in order to diagnose medical conditions and deliver appropriate healthcare. This fact sheet explores what is meant by culturally competency, why it is important, and what can be done to further promote diversity and cultural competency in the medical education system and the physician workforce.

### What is Cultural Competency?

The topic of cultural competency in healthcare is not new, but has received more attention during the past decade as a result of statements by the Institute of Medicine (IOM) and the American Medical Association (AMA), and the creation of national standards for culturally and linguistically appropriate services in healthcare by the U.S. Department of Health and Human Services.

"Culturally competent medical practice describes a skill set that enables a physician, in a culturally discordant encounter, to respectfully elicit from the patient and the family, the information needed to make an accurate diagnosis and negotiate mutually satisfactory goals for treatment."<sup>1</sup>

### Why is Cultural Competency Important?

There are a number of factors which influence healthcare decisions. Physicians must understand these factors, as well as recognize their own personal biases when administering medical care to patients of diverse backgrounds. A patient's health beliefs, health knowledge, health literacy, and health-relevant family relationships impact the choices they make related to their healthcare.

### Diversity in the Population and the Physician Workforce

- By 2015, the Office of Planning and Budget projects that approximately 40% of Georgia's population will be minority (i.e., either non-white or Hispanic). Specifically, projections indicate 10% of the state's population will be Hispanic, 28% African-American/Black, 59% Non-Hispanic White and 3% other minorities. According to the U.S. Census Bureau, Georgia ranks 10<sup>th</sup> among the 50 states in the percentage of minority residents (38%).
- Georgia has achieved some success in diversifying its physician workforce. The percentage of African-American physicians rose from 7.6% to 12.7%, and the proportion of those reporting to be "other" ethnicities increased nearly four-fold since 1994.
- However, Census figures indicate additional effort is needed to make Georgia's physician workforce more reflective of the population. For example, nearly 30% of Georgians are African-American, compared with only 12% of the physician workforce.

#### Percentage of Physicians by Race

Year	% White	% African American	% Asian	% Other
1994	84.9	7.6	6.6	0.9
1996	84.1	8.1	6.9	0.9
1998	80.2	8.9	7.8	3.1
2000	79.0	10.3	8.1	2.6
2002	77.4	11.9	7.7	3.0
2004	77.1	12.7	6.8	3.4

<sup>1</sup> *Academic Medicine* (2003) 78: 577-587. "A Strategy to Reduce Cross-cultural Miscommunication and Increase the Likelihood of Improving Health Outcomes." Dr. Kagawa-Singer and Ms. Kassim-Lakha for the AAMC Commonwealth Fund Project.

- Another indicator of Georgia's increasingly diverse population is the prevalence of English as a second language. In 2000, there were 15 counties in which 10% or more of the residents spoke a language other than English. As an another example, 1 in 5 residents in Echols, Gwinnett, Habersham, Hall, and Whitfield counties spoke a foreign language at home. The majority of these residents speak Spanish, but many other languages are also represented.

### Diversity in the Medical Education System

The Association of American Medical Colleges (AAMC) defines underrepresented minorities in medicine as those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population.

Based on 2003 Census estimates, **Georgia's population, by race, is characterized as: 67.5% White; 28.7% African-American; 2.5% Asian; and 1.3% Other Races or Multi-Race.** Figures reported by the Office and Planning and Budget indicate **approximately 6.2% of Georgia's population is Hispanic/Latino.**

The table below shows the race/ethnic diversity of **teaching faculty** at Georgia's medical schools and residency training programs.

<b>Race/Ethnicity of Teaching Faculty in Georgia's Medical Schools and Residency Training Programs 2004-2005 Academic Year</b>					
	<b>% White</b>	<b>% African American</b>	<b>% Hispanic</b>	<b>% Asian</b>	<b>% Other</b>
<b>Medical School Faculty</b> (n=2,671)	67%	11%	4%	17%	1%
<b>Residency Training Program Faculty</b> (n=2,423)	73.5%	6.5%	3%	16%	1%

Source: GBPW Survey of Medical Schools and Teaching Hospitals; Percentages for Residency Training Program faculty are based on the 6 out of 10 Teaching Hospitals that reported data.

The race/ethnic diversity of **students and residents** training at Georgia's medical schools and residency training programs is reflected in the following table.

<b>Race/Ethnicity of Students and Residents in Georgia's Medical Schools and Residency Training Programs 2004-2005 Academic Year</b>					
	<b>% White</b>	<b>% African American</b>	<b>% Hispanic</b>	<b>% Asian</b>	<b>% Other</b>
<b>Medical Schools</b> (n=1,589)	67%	16%	1%	14%	2%
<b>Residents</b> (n=1,723)	62%	11%	5%	19%	3%

Source: GBPW Survey of Medical Schools and Teaching Hospitals; Percentages for Residents are based on the 6 out of 10 Teaching Hospitals that reported data.

## How Are Future Physicians Being Trained in the Area of Cultural Competency?

As determined through a recent survey administered by the Georgia Board for Physician Workforce, Georgia's medical schools provide instruction in cultural competency. However, the training varies in content and method. Medical schools most commonly utilize lectures and small group discussions to teach students about cultural competency. Though the number of educational hours devoted to the topic varies, all of the medical schools have defined educational objectives related to the development of skills in cultural competency.

At the residency level, our survey determined that physicians in training (or residents) gain experience primarily through direct interaction with patients of diverse backgrounds, who seek treatment at Georgia's teaching hospitals. (See the following table on race/ethnicity of patients served by Georgia's teaching hospitals.) Members of the teaching faculty also evaluate residents in the area of cultural competency and provide feedback. Lectures, conferences/workshops, case studies, and video monitoring of residents are additional methods used to promote cultural competency among new physicians getting ready to enter practice.

Race/Ethnicity of Patients Served at Teaching Hospitals and Non-Teaching Hospitals					
	% White	% African American	% Hispanic	% Asian	% Other
Teaching Hospital	43.5	47.0	5.0	.7	3.8
Non-Teaching Hospital	65.6	25.6	4.8	1.1	2.9

Source: Department of Community Health, Annual Financial Questionnaires

## What Can Be Done to Further Promote Cultural Competency?

- Strengthen the pipeline by increasing efforts to retain under-represented minorities in all levels of the education system.
- Minimize barriers to obtaining a medical education. For example:
  - identify and address obstacles/motivations for minority entry into medical education;
  - determine the impact medical education debt has when under-represented minority students are deciding whether to attend medical school; and,
  - explore whether more scholarship assistance, rather than loans, would encourage more under-represented minorities to pursue medicine as a career.
- Enhance recruitment and retention of minority faculty at both the medical school and residency program level.
- Consider qualitative and quantitative factors in medical school admission and residency selection process (i.e., look beyond test scores).
- Implement voluntary cultural competency training for practicing physicians through professional associations, continuing medical education (CME), etc.

For more information, please contact the Georgia Board for Physician Workforce at (404) 206-5420 or 1718 Peachtree St, NW, Suite 683, Atlanta, Georgia 30309