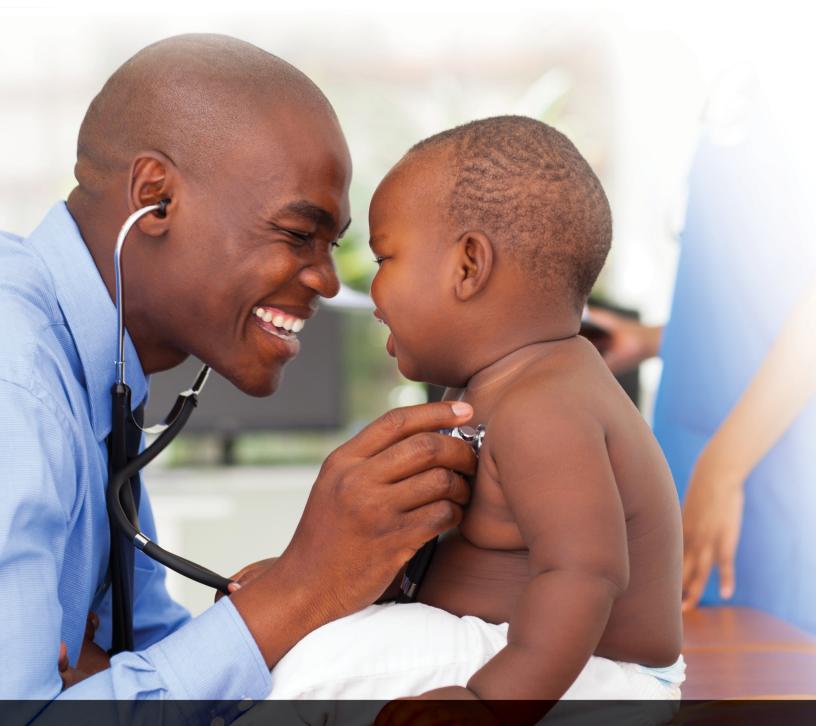


The Need for More Doctors of Color in Greater Cincinnati:

A Call to Action for Investing in the Health of Our Community





Summary

Greater Cincinnati is making significant progress toward a shared vision of becoming one of the nation's healthiest communities. Yet the progress is not shared by all. For some of the most vulnerable segments of our community, the vision is far from being realized.

A Mount Adams resident can expect to live nearly 25 years longer than someone living in Lower Price Hill, just five miles across the city. North Avondale residents have a life expectancy that is more than eight years longer than their immediate neighbors in Avondale.¹ In addition, people living in neighborhoods with a high percentage of Black and Latino residents are significantly more likely to develop conditions such as high blood pressure, diabetes and obesity, and less likely to have ready access to quality healthcare.²

Nationally, Blacks are 60 percent more likely to die from a stroke than Whites³, and in Ohio babies of color are dying at 2.5 times the rate of White babies.⁴

This disparity of health outcomes became strikingly evident during the coronavirus pandemic, when death rates from COVID-19 for Blacks and other persons of color are far exceeding those of White Americans.⁵

"Disproportionately high numbers of African Americans live lives of quiet desperation on society's margins here, voiceless, isolated in dangerous, unhealthy, and poor communities. Cincinnati and the Tristate region will not fulfill their long-term promise as desirable places to live and do business unless these economic and social gaps between Black and White are significantly closed," wrote Dr. Odell M. Owens, now President and CEO of Interact for Health, in *The State of Black Cincinnati* published by the Urban League of Southwest Ohio in 2015.

Built over generations, these disparities continue to create barriers to Greater Cincinnati's aspirations to become a model for a healthy community. Increasing evidence shows unconscious bias, or ingrained or unintentional stereotypes by providers, leads to negative outcomes for minorities.⁶ Other research shows Black men are more likely to have preventive tests and other procedures when ordered by a Black doctor.⁷

To improve the health of our community, The Doctors Foundation identified the disproportionately low numbers of Black and Latino physicians in Greater Cincinnati as an evidence-based target for intervention and investment. Local estimates suggest

- ¹ Cincinnati Health Department, Life Expectancy Study
- $^{\scriptscriptstyle 2}$ Survey of Health Status, Access, and Needs, Center for Closing the Health Gap
- ³ US Department of Health and Human Services https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=28
- 4 Ohio Department of Health https://odh.ohio.gov/wps/wcm/connect/gov/dd1865co-909c-4378-a8eo-61e28364bbae/2018+Ohio+Infant+Mortality+Reportpdf?MOD=AJPERE S&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIKONoJOooQO9DDDM3000-dd1865co-909c-4378-a8eo-61e28364bbae-n1Z1tQk
- ⁵ https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/covid19-racial-disparities
- ⁶ American Public Health Association https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4638275/
- 7 National Institute of Economic Research https://www.nber.org/papers/w24787



that as few as three percent of physicians here are Black or Brown, compared with five percent of Blacks and 5.8 percent of physicians nationally, according to the Association of American Medical Colleges. There are efforts underway to increase minority physicians in our community that have delivered some success.

For example, in August 2019, the University of Cincinnati's College of Medicine reported it had welcomed its most ethnically diverse class ever,⁸ exceeding competing medical school programs for the first time in terms of Black, Latino or Native American students.⁹

"When taking on something large, formidable and long-term, it's important to focus on what area you can have the most impact on in terms of reach and investment. Always look for opportunities to leverage – do more together than alone."

- Cincinnati healthcare leader

To sustain that trend, the Doctors Foundation recommends a focused effort to provide Black and Latino medical students, residents and early-career doctors the proven support and resources they need—including one-on-one physician mentoring—to encourage them to stay and practice here.

By convening the region's largest health systems as partners and advocates, these sustained investments can break down barriers and drive progress toward better care, lower costs and a healthier community for all.

The Landscape – Health Equity is a Key Factor in Healthcare Performance

Today's patients are more diverse than ever before – by 2044, more than half of Americans will be people of color. More than 22 million Americans cannot always access care where and when they need it 10 – particularly underserved populations such as those in Greater Cincinnati. These, along with myriad other factors are mandating the transformation of the system.

"While patients ultimately have to take responsibility for their own lives, it is helpful to have a doctor who understands, and doesn't dismiss, behavior patterns that are often rooted in a cultural history."

- Damon Tweedy, MD, author: Black Man in a White Coat

Addressing this challenge is fundamental to helping resolve the "tale of two cities" as described in *The State of Black Cincinnati*. "Despite having made tremendous strides in the delivery of care since 1966," the report said, "we continue to have a burgeoning gap between the health outcomes of African-Americans and other citizens."

As the healthcare industry continues its effort to integrate care and lower cost, the challenges to healthcare transformation are exacerbated when many patients do not have full access to

quality, affordable care. Nationally, the costs of racial and ethnic health disparities in preventable diseases including diabetes, hypertension and stroke were estimated at \$337 billion during the decade ending in 2018.¹¹

⁸ UC announcement 8-7-19; https://www.uc.edu/news/articles/2019/08/n20847877.html

⁹ https://www.dispatch.com/article/20150705/NEWS/307059916

¹⁰ "The State of the Physician Workforce," Association of American Medical Colleges, 11/2/18

^{11 &}quot;Healthcare and the Competitive Advantage of Racial Equity," FSG/Policy Link

A commitment to health equity – defined by the Robert Wood Johnson Foundation as, "Everyone has a fair and just opportunity to be as healthy as possible," – pays benefits in the core of any healthcare network, which is the interaction between physician and patient.

The Doctors Foundation does not take the position that only Black and Latino doctors can provide quality care to patients of color. Physicians of all backgrounds care for their patients with skill and compassion.

"Choice is important. For example, some women are more comfortable with women providers. We need enough diverse physicians to give people choices—but be careful about the message. We're not saying non-minority physicians aren't providing good care to minorities."

- Cincinnati-based Black physician

However, we recognize that patients of color generally value receiving care from a provider who looks like them. Research makes two things clear:

- Patients respond positively to physicians who relate to their circumstances and culture, thereby helping to put the patient at ease and building trust. Patients who trust their healthcare providers take better care of themselves, follow prescribed treatments and show better outcomes.
- Simply having more physicians of color in a practice can measurably increase the "cultural competency" of that practice, resulting in better care for all patients.¹² At times, Black physicians also may bring helpful perspectives in treating non-Black patients dealing with chronic diseases and fewer resources.

The Challenge: Attracting and Nurturing More Physicians of Color

Decades of effort initially increased the percent of Black and Latino medical students nationally, but progress has stagnated.

For example, the proportion of Black medical students rose from 5.6 percent in 1980 to 7.7 percent in 2016, still well short of the general population.¹³ And, while the number of Black medical school students increased 23 percent from 2014 to 2017, they still only comprised six percent of medical school graduates and residents nationally.¹⁴

In Greater Cincinnati, fewer than 100 Black or Latino physicians (5 percent) are practicing today, out of more than 2,000 total physicians, according to the Academy of Medicine of Cincinnati. Blacks and Latinos represent 46 percent of the total population in the city of Cincinnati¹⁵ and 29 percent in Hamilton County.¹⁶

The University of Cincinnati's College of Medicine (UCCOM), the region's largest medical school, serves as an example. The college is taking steps to review applications to identify high-potential Black and Brown students and residents, and to

¹² "Achieving cultural proficiency: The intersection of health and culture," Jovonni R. Spinner, MPH, CHES, public health advisor with the U.S. Food and Drug Administration's Office of Minority Health and Health Equity, 10/3/19

^{13 &}quot;After decades of effort, African-American enrollment in medical school still lags," USA Today, 2/28/19

^{14 &}quot;The State of the Physician Workforce," Association of American Medical Colleges, 11/2/18

¹⁵ https://www.census.gov/quickfacts/cincinnaticityohio

¹⁶ https://www.census.gov/quickfacts/hamiltoncountyohio

MANY MINORITIES STILL UNDER-REPRESENTED AMONG MEDICAL SCHOOL GRADUATES AND RESIDENTS							
Actual 2017 Composition	American Indian of Alaska Native	Asian	Black or African American	Hispanic, Latino or of Spanish Origin	Native Hawaiian or Other Pacific Islander	White	Multiple Race/ Ethnicity
Graduates	0%	21%	6%	5%	0%	56%	8%
Residents	0%	27%	5%	8%	0%	53%	4%
Population 25-29 Yrs.	1%	7%	15%	21%	0%	55%	2%

Source: American Academy of Medical Colleges

offer enhanced mentoring. The college offers several scholarships targeted to increasing the diversity of the medical student population, including the Gaston Scholars Program for students from traditionally under-represented groups; the Lucy Oxley, MD, African American Medical Student Scholarship Endowment Fund; and the Cincinnati Medical Association (CMA) Scholarship Fund for medical students who demonstrate financial need, diverse background and strong potential for academic excellence.

The college also established programs such as "Second Look," which offers a stipend and direct contact with current residents during a month-long visiting clerkship. The program also provides funds for travel and hotel, an in-depth look at the city and UCCOM programs, and networking with minority faculty and residents. The Doctors Foundation provided grant support for several of these efforts.

In fall 2019, the college enrolled its most ethnically diverse class ever. Out of 183 total students, 46 (25 percent) came from under-represented populations that included Black, Latino and Native American groups. Specifically regarding Black students, the number has increased from 11 in the Class of 2021, to 19 in the class of 2024.

In describing the potential impact of such a class, Dr. Mia Mallory, associate dean for diversity, equity and inclusion at the College of Medicine, said, "Patients do better when they are taken care of by people who look like them. So, we're trying to grow talented physicians that look like them and are more likely to go back into the community they came from."

Nationally, most medical schools have programs for specific under-represented populations, but far fewer offer programs to retain minority doctors in their local community.¹⁷ Practicing physicians face increasing time demands, so mentoring and career development programs often are pushed back or pushed aside. When graduating medical students complete their residency in a different community, they often do not return to Greater Cincinnati. More than half of residents establish a practice in the same state as their residency.¹⁸ This important transition point is also an opportunity to provide support and mentorship, which are acknowledged as important, but not institutionalized by non-academic health systems in our region.

¹⁷ After decades of effort, African American enrollment in medical school still lags," USA Today, 2/28/19

¹⁸ https://www.aamc.org/data-reports/students-residents/interactive-data/table-c6-physician-retention-state-residency-training-state



What is Working: Programs that are Underway

In many sectors of Greater Cincinnati, several programs are underway to reduce health and workforce disparities.

- The Center for Closing the Health Gap is raising awareness of the importance of health and wellness, and the lack of access to healthy food, in city neighborhoods. The Center also supports an educational campaign to equip minority patients with questions and topics to address with their physicians.
- *The Health Collaborative's* workforce pipeline initiatives, including its TAP Health and HealthFORCE programs, have familiarized hundreds of high school students with the medical professions through exhibits and interactions with health professionals from across the region.
- The Cincinnati Medical Association, whose members are Black physicians in the region, has initiated an endowed scholarship program to support medical students of color, and begun an online community for physicians to socialize.
- Greater Cincinnati health systems are actively taking steps to diversify their workforces, including allied health
 professions, as well as hiring diversity and inclusion officers for the first time. However, these programs typically
 have not included a focus on physician diversity as an integral part of these initiatives.
- Health systems also are developing programs to require *cultural training* for medical providers. The training is
 designed to enhance provider sensitivity to patients' unique needs based on social determinants and other factors.
- Alternative funding models are available; for example, a grant from bi3, Bethesda Inc.'s initiative to transform
 health, is helping TriHealth and Cincinnati Public Schools expose diverse high school students to a variety of
 healthcare careers, as well as matching them with mentors to encourage them to study healthcare in college.
- A new program, Black Men in Medicine Cincinnati, has just formed to mentor Black males who are currently in medical school by pairing students with residents and attending physicians.
- Enhanced recruitment and a holistic application process at UC's College of Medicine have steadily increased the
 percentage of Black and Latino students.

Each of these efforts targets a specific section of the pipeline, with its own challenges and opportunities.



Opportunity: Where Should We Intervene and Invest?

The Doctors Foundation recognizes that there are an incredible number of competing health priorities, exacerbated by the COVID-19 pandemic and disruption of even basic care offered by every healthcare provider and health system.

"We have to build career interest early in their lives. Giving them exposure to health systems and hospitals is a fundamental part of that. "

 Heleena McKinney, manager, Healthcare Workforce Innovation, The Health Collaborative

Yet the collision of social determinants, cultural considerations in the patient/physician care dynamic, and progress in beginning to fill the physician pipeline cannot be ignored. Focusing specifically on physician conversions may allow regional minority physician cultivation efforts to be narrowcast – and be correspondingly more effective. For example:

- The Doctors Foundation identified an opportunity to fill a gap toward the end of a physician's education and early career by mobilizing physicians and health systems in a coordinated effort to develop sustainable and rewarding careers for physicians of color in Greater Cincinnati. As a result, the Foundation has refined its mission and is reorganizing its board to enhance its ability to realize this mission.
- In a 2015 survey conducted by the Health Collaborative of Greater Cincinnati, 19 respondents identified the top potential strategies for improving recruitment and retention:
 - Expand internal professional development programs
 - Enhance physician recruitment
 - Use a regional recruitment campaign

While no single strategy will solve the problem, enlisting the region's health system and physician leaders in a collaborative campaign with intense focus and incremental financial support for medical students, medical residents and young physicians can help surmount barriers and make our region a more equitable place to receive healthcare.

"Our mentoring effort has to be cross-cultural and open to all genders. The critical issues of Black males have to be the focus of our efforts to make any progress."

– Alvin Crawford, MD

With a commitment to mentoring and supporting minority medical students and residents as they transition into careers, enlisting the region's major health systems, and piloting innovative funding models, the opportunity to enhance the number of Black and Brown physicians in Greater Cincinnati is greater than ever. Doing so takes a substantial step toward realizing a vision of a healthier region for all.

¹⁹ Survey: Greater Cincinnati Workforce Diversity Strategies," The Health Collaborative, November 2015

History and current events highlight the significance of healthcare disparities in our minority communities. Addressing these issues is key to the health, prosperity, and well-being of our entire region. We now have new programs that are proven to attract, train, and retain physicians of color. The time for health systems and independent physician practices to act is now.

– Chris Lewis, MD, president, The Doctors Foundation

The Doctors Foundation

The Doctors Foundation promotes high quality and accessible healthcare in Greater Cincinnati and Northern Kentucky by facilitating the recruitment and retention of a diverse physician population.

The non-profit Foundation was organized in 2005. It was subsequently funded by settlement monies from a lawsuit filed by The Academy of Medicine of Cincinnati, the Butler County Medical Society, and the Northern Kentucky Medical Society – against three health insurance companies. The medical societies contended that low reimbursement rates negatively affected the retention and recruitment of physicians to this region. In 2010, the Foundation became an independent grantmaking foundation.

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