

CALIFORNIA'S

# LATINO PHYSICIAN CRISIS

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# The Current State of the Latino Physician Workforce:

## California Faces a Severe Shortfall in Latino Resident Physicians

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# EXECUTIVE SUMMARY

The U.S. Census Bureau projects that the Latino population will reach 111.2 million by 2060, which would be 28% of the total U.S. population (U.S. Census Bureau, 2017 National Population Projections). Despite the continued growth of the Latino population, the Latino physician rate per 100,000 Latinos declined from 135 in 1980 to 105 in 2010, while for the Non-Hispanic White (NHW) population, the rate of NHW physicians increased from 211 to 315 during the same time (Sanchez et al., 2015). At the state level, Latinos in California --- compared to Latinos in Texas, Florida and New York --- have the lowest rate of Latino physicians at 50 per 100,000 population (nearly half the national Latino physician rate), while the NHW population in the same state enjoyed a rate of 390 NHW physicians per 100,000 NHWs (24% higher than the national NHW physician rate of 315) (Sanchez et al., 2015).

The Latino physician shortage is, in part, the result of U.S. medical schools admitting and graduating very few Latino medical students. In California, medical schools admit and graduate so few Latino medical students that they will take 500 years to graduate enough Latino physicians to make up the Latino physician shortage for 2015 (Hsu et al., 2018).

Residency training is the next stage of physician education, and the Latino physician scarcity is reflected in the shortage of Latino resident physicians. This policy brief reports on the Latino residents in training in the four states with the largest Latino populations: California (15,477,304), Texas (11,156,514), Florida (5,371,385), and New York (3,811,945) (U.S. Census Bureau, Annual Estimates from 2010-2017). Our comparative research analysis suggests that Latino resident physicians are most under-represented in California's Latino healthcare workforce. If left unaddressed, the Latino resident shortage can exacerbate the overall Latino physician shortage, worsen the already inadequate access to high quality care, depress the already inadequately limited cultural, social, and linguistic physician proficiency, and impact the overall healthcare outcomes of Latinos.

## METHODOLOGY

**Identifying the Latino Resident Physician Shortage:** We used the U.S. Census Bureau, 2017 American Community Survey 5-year estimates (2013-2017), to determine the total number of Latinos living in the states of California, Florida, New York, and Texas. The U.S. Census Bureau defines Hispanic as those whose origin are Mexican, Puerto Rican, Cuban, Central or South American or other Hispanic/Latino, regardless of race.

To determine the number of Latino resident physicians in the states of California, Florida, New York, and Texas, we used a special report provided by the Association of American Medical Colleges (AAMC) on Hispanic, Latino, or of Spanish Origin Residents (alone or in combination) by specialty and Graduate Medical Education (GME) year over time (2001-2017). \*We will refer to all those who fall within these two categories as Latino for the remainder of the report.

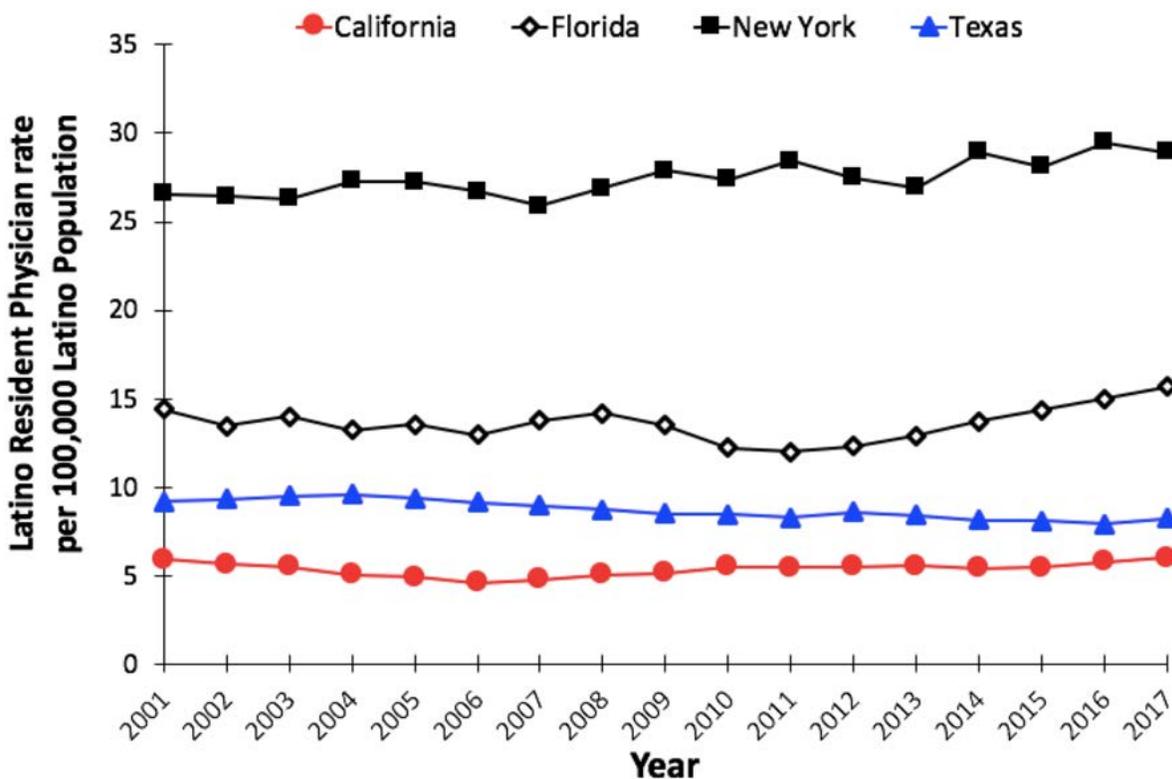
Appendix Table 1 summarizes the total number of Latino resident physicians and the number of Latinos in each state over time. Latino resident physician rates or ratios were determined for every 100,000 Latinos examined.



# FINDINGS

**The Latino Resident Physician Shortage:** Figure 1 provides the ratio of Latino resident physicians to the Latino population in the states of California, Florida, New York, and Texas from 2001 to 2017. We found that California had the worst Latino resident physician shortage. In 2011, the national average was 36.6 residents and fellows per 100,000 (AAMC Center for Workforce Studies, 2013). In the same year, California had 5.4 residents and fellows per 100,000 Latino population (~85% lower than the national average of 36.6), followed by Texas and Florida. New York had the highest rates in the Latino resident physician workforce: 28.4 for every 100,000 Latinos (only 22% lower than the national average of 36.6 residents per 100,000 population).

**Figure 1. A Seventeen-Year Overview of Latino Resident Physicians in California, Florida, New York, and Texas.**



**Filling the Latino Resident Physician Shortage:** Although California is the world's 6th largest economy, it performs very poorly in the field of medical education because of conscious policy decisions made in the 1980s and 1990s to limit medical education --- and specifically resident training --- to try to avoid a once-predicted "physician surplus." This was largely accomplished by reducing residency slots to "squeeze out" International Medical Graduates (IMGs) from the physician workforce (Mullan et al., 2013). The consequences of these policy decisions fall heavily on the Latino population of the state.

Although understanding the ratio of Latino resident physicians to the Latino population adds a layer of urgency to addressing California's Latino physician shortage, future research evaluation of Latino physicians (MDs), Osteopathic physicians (DOs), and resident physicians in the healthcare workforce pipeline, their medical specialties, and their geographic location are necessary for addressing the disproportionate Latino physician-to-patient shortage in California and other states.

# POLICY CONSIDERATIONS

The Latino physician and resident shortage in California impacts the overall well-being of all Californians, whereby the capacity to integrate the state's plurality into medical professions is critical to close the healthcare workforce gaps. If physicians are unable to speak the primary language of patients, navigate through cultural nuances, or commit to practicing in medically underserved communities, their ability to treat patients is imperiled. For starters, this undermines the provision of quality healthcare services for all residents and presents critical public health concerns. Reducing the impact of the California Latino physician and resident shortage will require tailored policy interventions with short-term and long-term outcomes. This includes retooling medical education and residency training programs, and implementing strategies for expanding primary care capacity to meet the needs of all Californians.



## **1** INCREASE MEDICAL SCHOOL ADMISSIONS FOR LATINOS

Expand enrollment in existing California medical schools, including private institutions, and increase the admission of students with community college transfer and CSU backgrounds ---institutions severely under-represented in the state's medical school admissions.

## **4** EXPAND THE NUMBER OF INTERNATIONAL MEDICAL GRADUATES IN CA

Expand existing pool of IMG's in California by recruiting students trained as physicians in Latin American countries so they can meet the needs of medically underserved areas with high Latino populations (e.g. the Central Valley and Inland Empire).

## **2** RETAIN LATINO MD GRADUATES WHO ATTEND MEDICAL SCHOOLS OUT-OF-STATE

Incentivize out-of-state MD graduates with meaningful loan repayment programs if they commit to primary care practice in California for at least 5 years. Additional incentives can be integrated for particular underserved regions.

## **5** EXPAND CALIFORNIA MD PROGRAMS

Expand California MD programs to emphasize primary medical care for underserved communities in the form of new medical schools (rural MD schools and/or California State University MD programs).

## **3** DEVELOP K-12 PIPELINE PROGRAMS

Implement programs within the primary and secondary education system that propel Latino students to pursue a career in healthcare and equip them with the skills needed to succeed.

## **6** INCREASE THE NUMBER OF CA RESIDENCY SLOTS

Increase the number of California primary care residency slots by expanding training opportunities in state hospitals and community clinics of medically and linguistically underserved communities.

# APPENDIX

**Table 1: Ratio of Latino Resident physicians per 100,000 Latinos in the states of California, Florida, New York, and Texas over time.**

GME Year*	California				Florida			
	Latino Residents <sup>1</sup>	Total Latino Population	Latino Population per 100,000	Resident rate per 100,000 population	Latino Residents <sup>1</sup>	Total Latino Population	Latino Population per 100,000	Resident rate per 100,000 population
2001	671	11,383,962	114	5.9	412	2,861,659	29	14.4
2002	660	11,705,795	117	5.6	406	3,013,530	30	13.5
2003	665	12,030,015	120	5.5	442	3,160,322	32	14.0
2004	624	12,335,567	123	5.1	440	3,331,269	33	13.2
2005	615	12,523,379	125	4.9	462	3,414,414	34	13.5
2006	603	13,074,155	131	4.6	472	3,642,989	36	13.0
2007	634	13,220,888	132	4.8	517	3,757,424	38	13.8
2008	682	13,457,397	135	5.1	545	3,845,964	38	14.2
2009	702	13,681,370	137	5.1	538	3,988,758	40	13.5
2010	774	14,089,411	141	5.5	519	4,253,197	43	12.2
2011	782	14,359,500	144	5.4	523	4,355,051	44	12.0
2012	800	14,537,661	145	5.5	553	4,484,201	45	12.3
2013	815	14,719,327	147	5.5	594	4,610,316	46	12.9
2014	811	14,988,770	150	5.4	657	4,788,870	48	13.7
2015	828	15,184,545	152	5.5	713	4,962,905	50	14.4
2016	885	15,280,776	153	5.8	768	5,126,578	51	15.0
2017	930	15,477,306	155	6.0	842	5,370,860	54	15.7

GME Year*	New York				Texas			
	Latino Residents <sup>1</sup>	Total Latino Population	Latino Population per 100,000	Resident rate per 100,000 population	Latino Residents <sup>1</sup>	Total Latino Population	Latino Population per 100,000	Resident rate per 100,000 population
2001	784	2,952,390	30	26.6	642	6,987,005	70	9.2
2002	795	3,007,143	30	26.4	674	7,244,849	72	9.3
2003	803	3,054,405	31	26.3	714	7,498,587	75	9.5
2004	844	3,092,293	31	27.3	743	7,749,995	77	9.6
2005	825	3,028,658	30	27.2	740	7,903,079	79	9.4
2006	838	3,139,590	31	26.7	765	8,385,118	84	9.1
2007	818	3,159,732	32	25.9	769	8,600,385	86	8.9
2008	874	3,248,527	32	26.9	774	8,870,472	89	8.7
2009	913	3,274,177	33	27.9	776	9,149,688	91	8.5
2010	941	3,434,888	34	27.4	805	9,533,880	95	8.4
2011	994	3,496,401	35	28.4	811	9,791,628	98	8.3
2012	977	3,553,686	36	27.5	856	9,960,910	100	8.6
2013	971	3,606,708	36	26.9	854	10,154,405	102	8.4
2014	1062	3,670,289	37	28.9	845	10,408,238	104	8.1
2015	1047	3,725,193	37	28.1	864	10,672,216	107	8.1
2016	1105	3,747,614	37	29.5	862	10,883,279	109	7.9
2017	1103	3,811,654	38	28.9	917	11,158,751	112	8.2

\*GME Year: Graduate Medical Education Year

<sup>1</sup>Total number of Hispanic, Latino, or of Spanish Origin Resident Physicians per year.

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