The United States is facing a primary care physician shortage. By 2030, the Association of American Medical Colleges projects that the country will need between 14,800 and 49,000 more primary care physicians to meet demand. This shortfall highlights the urgent need to identify and train students for practice in primary care. Researchers at the UC Davis Center for a Diverse Healthcare Workforce suggest that community college students may be one potential answer to this complex problem.

In their recent study “Community College Pathways to Medical School and Family Medicine Residency Training,” Dr. Efrain Talamantes and colleagues found that community college students are more likely to specialize in family and community medicine. Further, the study found that community college students are more likely to be underrepresented in medicine, “Notably, 33% of whites, 35% of Asians, 32% of blacks or African Americans, 51% of Latinos, and 42% of first-generation college students within the family medicine residency workforce attended community college.” This represents an important contribution to diversity in the health care workforce, since only 10.5% of medical school graduates were Hispanic or Latino according to the Association of American Medical Colleges.

Yet, community college students often face barriers to gaining admission to medical school. In an accompanying editorial titled, “Building a Pipeline to Equity,” Dr. Amanda Kost suggests that medical school admissions look at community college students with a different lens. She writes, “Community college should not be a barrier for medical school admission. On the contrary, it should be valued for not only the education it provides, the spaces it builds and offers disadvantaged students, but also for the pipeline it creates for those who otherwise could not apply to medical school… We need to [strengthen community college pathways to medical school] for our students, with the aim of improving educational equity in this country. Every patient deserves a family physician and every

KEY MESSAGES

Mentorship: “Nurturing early interest in family medicine during high school and community college may be a strategy to increase the supply and diversity of the primary care physician workforce in the United States.”

Admissions: “Our study’s findings highlight the need to reassess the importance of community college attendance in the medical school admissions processes as a potential means to ameliorate the primary care shortage.”

Healthcare Equity: “Community college students come from a variety of backgrounds. They understand what it means to have to use a public transportation system and to grow up in an underserved community. Not only do community college students offer an opportunity to provide more cultural humility or humble care to our patients, but the type of care that our patients really look for.”
“Community colleges offer a very important population of students that we need and we want to see in medical school. These are the types of students we need because they reflect our patient population.”

- Dr. Efrain Talamantes

About the Center

The mission of the Center for a Diverse Healthcare Workforce at UC Davis is to promote best practices nationally and challenge the healthcare field to advance diversity in the workforce through:

- Community-informed research
- Innovative communications and storytelling
- Communities of practice

Our research agenda focuses on:

- Nontraditional pathways to health careers
- Admissions policies and practices
- Creating an inclusive educational environment
- Provider placement and efforts to address maldistribution

In summary, the benefits of strengthening community college pathways to medical school are three-fold: 1) community college students are more likely to practice in underserved communities, 2) the community college student population is diverse and has the potential to diversify the primary care workforce, and 3) community college students are a potential mechanism for addressing the shortage of primary care physicians. Additionally, a diverse and culturally humble primary care workforce ensures that diverse patient populations will receive more culturally and linguistically sensitive care.


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