Happy Thursday, Mount Sinai Community –

Last month, Governor Kathy Hochul announced that the state will commit more than $2.4 million to diversity programs designed to encourage students from backgrounds traditionally underrepresented in medicine—including those who are Black, Hispanic/Latino, Pacific Islander, and Native American—to go to and complete medical school in New York.

This week, we’re taking a deeper dive into physician diversity. To understand the importance of a diverse physician workforce and learn more about the ways Mount Sinai is working to expand opportunity, we spoke with David Muller, MD, Dean for Medical Education and Professor and Chair of the Leni and Peter W. May Department of Medical Education at Mount Sinai.

Q: Why is investing in diversity initiatives important? Can you speak to the need for programs that encourage students from backgrounds traditionally underrepresented in medicine to consider careers in this field?

A: Medicine has historically been practiced within the racist framework that impacts the rest of American society. The lives and well-being of people of color are not valued equally, and this has manifested as massive disparities in health outcomes, as well as blatant abuse in biomedical research. In addition, despite decades of
institutional and national efforts at diversifying the student body in medical schools, almost no meaningful progress has been made in recruiting, admitting, and retaining Black men in the profession. For these reasons it is imperative that we diversify the physician workforce. There is ample evidence demonstrating that students/physicians of color are more likely to serve communities that continue to have inadequate access to health care and poor quality of care, but there are many barriers to achieving this diversity, including a lack of financial resources, racial disparities within public school systems, a lack of role models in the medical field, lack of access to clinical and research experiences, and young people of color constantly, but incorrectly, being told that they are not smart enough, not good enough, and not worthy of aspiring to careers in medicine.

As a society, we need to tackle every one of these barriers and leave no stone unturned until we get this right. It is worrisome that despite decades of initiatives, progress has been nominal. We need more radical solutions and we need to take on the systems and structures that are holding us back.

Q: What is the Icahn School of Medicine at Mount Sinai already doing to increase physician diversity? What initiatives are in place and/or in development to diversify every entering class, and ultimately the workforce?

A: Icahn Mount Sinai has for decades had extensive programs and initiatives in place, from pathways reaching all the way back to middle school, to targeted recruitment at historically black colleges and universities and undergrad campus affinity groups, to targeted scholarships supported by generous donors, and an explicit articulation in our mission statement, our spoken word, and our curriculum that this is our highest priority. For example, we were among the first schools in the nation to recruit candidates with DACA status (also known as “Dreamers”); we have been intently focused on recruiting Black and Latino students; and we have a recruitment pathway for veterans that is the only one of its kind in the nation.

Q: Can you share more about the Center for Excellence in Youth Education and how pathway programs play into the diversification of the health care workforce?

A: Our Center for Excellence in Youth Education helps more than 200 students each year from grade seven through college prepare for careers in science and health care. As a unit of Mount Sinai Health System's Office for Diversity and Inclusion, CEYE operates a range of school-year and summer programs geared to youth belonging to groups that are underrepresented in medicine.

Pathway programs—which have been operating at Mount Sinai for decades—are crucial in helping young people understand their full potential and opening their eyes to opportunities and careers that they may never have been encouraged to consider otherwise. The more opportunities there are to put students of diverse backgrounds
on a path to enter the health care field, the better, and that’s exactly what we’re doing with initiatives like CEYE and Sinai Peers Encouraging Empowerment through Knowledge (SPEEK), a youth peer educator program through Mount Sinai’s Adolescent Health Center.

**Q:** How will these efforts affect the field of medicine in the long term? What will diversity in medicine accomplish at both the community and state level and beyond?

**A:** Achieving true diversity isn’t limited to improving the numbers or proportions of Black and brown students in a class. It really means changing our culture: the way we think, act, speak, decide, share power, privilege, and influence. The only way to do that is to change the backgrounds future physicians come from: what they’ve had to struggle with growing up, how they’ve confronted adversity and oppression, what they’ve witnessed happening in their communities and families when they’ve sought care, and how that has motivated their desire to join the profession. Those are the future physicians whose entirely different mindset will allow us to set different priorities, make different decisions, and achieve different breakthroughs.

We sincerely appreciate David’s insight on this critically important aspect of diversity in health care, and we encourage readers to take a look back at past Bulletins on the ways in which we’re working to support diversity in medicine, like our Bulletin on Closing the Gap for Black Residents.

All the best,

Angela and Shawn

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**Join Us for an Upcoming Event**

**Chats for Change: From Slavery to Mass Incarceration: The Impact of the 13th Amendment**—Chats for Change is a production of Icahn Mount Sinai’s Racism and Bias Initiative. The 13th Amendment to the United States Constitution holds that “neither slavery nor involuntary servitude, except as a punishment for crime whereof the party shall have been duly convicted, shall exist within the United States, or any place subject to their jurisdiction”, but what does this mean for us today? Join us as we explore the history of “post-slavery America” and the correlation between the ratification of the 13th Amendment and modern-day mass incarceration. Join facilitators Ashley Michelle Fowler, MEd, and Jay Johnson, CHES, for this conversation on Tuesday, December 13, from 12-1 pm.

Register on Zoom.