

MEDICAL SCHOOL HOTLINE

Liaison Committee on Medical Education Accreditation, Part VII: Diversity/Pipeline Programs and Partnerships

Winona K. Lee MD

The Medical School Hotline is a monthly column from the John A. Burns School of Medicine and is edited by Satoru Izutsu PhD; HJMPH Contributing Editor. Dr. Izutsu is the vice-dean of the University of Hawai'i John A. Burns School of Medicine and has been the Medical School Hotline editor since 1993.

This article is part of an ongoing series describing various components of the John A. Burns School of Medicine (JABSOM) medical education curricula, activities, and initiatives relevant to the Liaison Committee on Medical Education (LCME) accreditation standards.¹ JABSOM's LCME visit will take place in early 2017. This article provides an overview of JABSOM's diversity/pipeline programs and partnerships.

Introduction

Physicians must be prepared to care for Hawai'i and the nation's communities, whose patient populations are rapidly rising in the United States. In Hawai'i, Native Hawaiian and other Pacific Islanders (NHOPIs) compose 26.2% of the total population, but account for only 3.7% of the total physician workforce.² Diversity in medicine is important as the literature has demonstrated that minority physicians are more likely, than white physicians, to care for minority, poor, uninsured, rural, and Medicaid patients as well as practice in underserved areas.^{3,4} With the physician workforce shortage faced by Hawai'i, it is critical to produce local physicians who will be committed to practice in rural and underserved communities throughout Hawai'i.

The University of Hawai'i at Manoa (UHM) John A. Burns School of Medicine (JABSOM) continues to demonstrate a commitment to promote diversity in medicine. It is based in the Department of Native Hawaiian Health. This is the only clinical department in a U.S. medical school focused on improving the health of indigenous populations, through its longstanding diversity pipeline programs such as the Native Hawaiian Center of Excellence and the 'Imi Ho'ola Post-Baccalaureate Program.⁵ The following are examples of how JABSOM continues to address the following LCME requirement related to diversity.

Diversity/Pipeline Programs and Partnerships (LCME Element 3.3)

"A medical school has effective policies and practices in place, and engages in ongoing, systematic, and focused recruitment and retention activities, to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community. These activities include the use of programs and/or partnerships

aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes."

In 2015, JABSOM created its first institutional diversity policy. A Diversity Task Force Committee composed of clinical department chairs, faculty, students, and representatives from JABSOM Admissions, Human Resources, Medical Education, Office of Student Affairs, and representatives from the UHM Office of Student Equity, Excellence, and Diversity met for a year to create this guiding document for diversity-related activities at JABSOM. The policy, was approved by the JABSOM Executive Committee and JABSOM General faculty, and is used to monitor and evaluate the effectiveness of JABSOM's pipeline programs and other initiatives that support school-defined diversity among its student body and faculty.

JABSOM's Institutional Diversity Statement⁶

"The John A. Burns School of Medicine (JABSOM) embraces diversity and inclusion as part of our shared Hawaiian, Asian and Pacific values. These shared values are responsive to our unique location in the center of the Pacific. We uphold that an environment of inclusiveness, equal opportunity and respect for the similarities and differences in our communities advances our mission of education, research and innovation, community service and clinical healing."

JABSOM is committed to preparing a culturally competent health and science workforce that meets the needs of Hawai'i. We strive to reflect the demographics of Hawai'i, including representation of Native Hawaiians and Pacific Islanders, individuals from rural areas of Hawai'i, first generation college students, and those from economically, socially, and educationally disadvantaged backgrounds. JABSOM is cultivating a transformative teaching and learning environment that promotes the recruitment and retention of students, faculty, and staff, who represent the diverse population of Hawai'i.

A Diversity Dashboard Working Group, composed of leaders of JABSOM's diversity programs, Admissions Office, and Human Resources Office, insures that the Institutional Diversity Policy is upheld and diversity outcomes are monitored. This working group submitted the first annual JABSOM Employee

and Student Diversity Report to the JABSOM Executive Committee in October 2015. Highlights from this report are described below.

JABSOM's Student Diversity and Pipeline Programs

'Imi Ho'ola Post-Baccalaureate Program

'Imi Ho'ola's (Hawaiian meaning "those who seek to heal") goal is to support diversity of the physician workforce and produce physicians who demonstrate a strong commitment to practice in underserved communities in Hawai'i and the Pacific. Since 1973, 'Imi Ho'ola has upheld its mission to improve health care in Hawai'i and the Pacific by increasing the number of physicians through an educational program that addresses disadvantaged students' academic and professional needs. Up to twelve students from economically, socially, and/or educationally disadvantaged backgrounds are enrolled in the post-baccalaureate program each year.

Student recruitment is conducted quarterly on O'ahu as well as on the neighbor islands, which target middle school, high school, and college students from underserved communities. The curriculum prepares students for the rigors of medical school, with a student-centered, team-based teaching approach. Emphasis is the integration of concepts in the sciences and humanities and further development of students' communication, critical thinking, and learning skills. Throughout the program the students' community-based perspectives of health, medical professionalism and leadership is emphasized. Upon successful completion of the program, students matriculate into JABSOM as first-year medical students.

The program's retention activities for graduates enrolled at JABSOM include a formal student peer mentoring network, remediation services by program faculty, and the assignment of faculty advisors for each student. These activities are available throughout the students' four years of medical school.

Long-term Outcomes:

Of the total Native Hawaiians that graduated from JABSOM from 1978-2015, 38% (n=89/233) accessed JABSOM through 'Imi Ho'ola.

A retrospective analysis utilizing the program's centralized student database of program alumni (N=146) who matriculated

and/or graduated from JABSOM was conducted with the following outcomes:

- Majority of students originate from Hawai'i or the Pacific Basin (99.3%)
- 58.2% are females and 41.8% are males
- Of the 146 graduates, 32.2% were Native Hawaiian, 26.7% Filipino, and 24.0% are Asian
- 78.9% of students originate from rural communities
- 28.1% self-reported English as their second language

Native Hawaiian Center of Excellence (NHCOE)

The Native Hawaiian Center of Excellence seeks to improve the health of Native Hawaiians through education, research, and community partnership. NHCOE empowers Native Hawaiian students and faculty to succeed in medicine and other health professions.

NHCOE recruitment activities include the following: (1) health careers presentations and health fairs conducted statewide for K-12 and college students; (2) Native Hawaiian Pathways to Medicine Program, a workshop series for aspiring Native Hawaiian pre-medical students, created to improve the competitiveness for medical school admission utilizing cultural empowerment, mentorship, and social support networks; (3) Native Hawaiian Interdisciplinary Health Program, seminars that bring together Native Hawaiian pre-medical and Social Work students to learn about multi-disciplinary teamwork, inquiry-based learning, and importance of culture competency in caring for future patients/clients; (4) Nanakuli Pathways to Health, a program created to "grow our own healers" by partnering with a public middle and high school where 70% of students are Native Hawaiian, having medical students mentor these students.

NHCOE retention activities for Native Hawaiian students include the following: (1) preparing for Step 1 and 2 United States Medical Licensing Exam preparation support, (2) funding to support student health disparities research projects and presentations at national conferences, (3) advising and mentoring services for Native Hawaiian medical students, (4) functioning as lead unit for all cultural competency training for medical students at JABSOM.

Outcomes 2009-2015:

- Over 4,500 K-12 and college students exposed to the health professions
- 96 JABSOM students and graduates participated in the NHCOE pipeline
- 84 Native Hawaiians trained through the Pathway to Medicine Program and the Native Hawaiian Interdisciplinary Health Program
- Of the 84 Native Hawaiians students who participated in the NHCOE pipeline programs, 26% were successfully accepted to US medical schools to date, which include JABSOM, Cornell, Dartmouth, UC Davis, and UC San Diego
- 100% of JABSOM 1st and 2nd year medical students participated in cultural competency training

Ethnicity	Percentage of graduates that accessed JABSOM through the 'Imi Ho'ola Post-Baccalaureate Program (1978-2015)
Hawaiian	89/233 (38%)
Filipino	60/185 (32%)
Chamorro	19/34 (56%)
Samoan	14/17 (82%)
Micronesian	11/20 (55%)

'Imi Ho'ola Graduates = 242, JABSOM Graduates = 2,245 (1978 - 2015)

Area Health Education Center (AHEC)

The mission of the Hawai'i/Pacific Basin Area Health Education Center (AHEC) is to improve the health of the underserved through education. Areas of concentration include 4 areas of education: (1) educating and recruiting students to health professions (K-12), (2) educating health professions students in rural and underserved communities of Hawai'i, (3) recruiting health care professionals to rural communities and continuing medical education for health care providers, (4) providing community-based education for underserved communities.

Recruitment activities include the Health Professionals Speaker's Bureau, support for the Pre-Health Career Corps Program, Medical Student Mentorship Program, Teen Health Camp, Teen Mentorship Academy, and Pre-Health Advising Center.

Outcomes 2014-2015:

- Health careers recruitment activities for 3,433 students
- Inter-professional training for 300 students per year in Hawai'i and Pacific
- 8,000 hours of CME for over 2,000 providers
- Annual Health Workforce Summit
- State Loan Repayment Program
- Physician Workforce Assessment for State of Hawai'i

Health Careers Opportunity Program (HCOP)

The University of Hawai'i Health Careers Opportunity Program (HCOP) strives to build diversity in the health work force by providing students from socially, educationally, or economically disadvantaged backgrounds an opportunity to develop the skills needed to successfully enter and graduate from health professions schools. Established using federal funding in 2001, HCOP was institutionalized utilizing state funds at the University of Hawai'i in 2008. Recruitment activities include a summer residential academic and health enrichment program, college campus visits for high school and college students interested in the health professions, and health career exploration presentations and activities. Recently HCOP established a formal partnership with the Philippine Medical Association of Hawaii (PMAH) to expand mentoring efforts for students interested in health professions.

Outcomes 2001-2014:

- A total of 414 high school & college students participated in residential summer programs
- Participant Gender: 84.5% (n=350) females, 15% (n=62) males, 0.5% (n=2) unknown
- Participant Ethnicity: 25.5% Native Hawaiian, 48.3% Filipino, 3.1% Samoan, 2.9% Other Pacific Islander
- Conducted 900 hands-on health career exploration activities
- Completed 3,000 on-campus visits for students interested in attending the University of Hawai'i Manoa and Kapi'olani Community College

JABSOM's Faculty Diversity

JABSOM is committed to diversity of both its students and faculty. Prior to faculty recruitment, every department identifies underrepresented groups and promotes faculty diversity that reflects the diversity of Hawai'i. Each department works with JABSOM's Human Resources Office to implement an EO/AA compliant process during active recruitment. JABSOM's Human Resources Office also assists departments by identifying potential additional venues for reaching underrepresented candidates. Retention of underrepresented faculty is strengthened through active community engagement of the faculty with multiple ethnic and cultural groups in the community. Faculty diversity, including department chairs and other administrative roles, reflect a rich mix of ethnicity, gender, life experiences and seniority. For example, JABSOM faculty is comprised of 10% Native Hawaiian/Pacific Islander, 3% Black/African American, 3% Hispanic, 24% Japanese-American, and 7% South Asian/Asian Indian. A majority (9 of 15) of the clinical and basic science department chairs/directors is of ethnic backgrounds.

Conclusion

JABSOM has been successful in achieving its desired diversity goals. As a result, diversity is one of the institution's major strengths. With an approved institutional diversity policy with clear definitions and methods to track and monitor diversity outcomes, JABSOM has demonstrated commitment to the necessary resources and developed the expertise needed to support and expand recruitment and retention initiatives that ensure student and faculty diversity.

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Author's Affiliations:

Diversity Officer, Association of American Medical Colleges
Director, 'Imi Ho'ola Post-Baccalaureate Program, Department of Native Hawaiian Health; John A. Burns School of Medicine, University of Hawai'i at Manoa

References

1. Sakai DH, Kasuya RT, Fong SFT, Kaneshiro RA, Kramer K, Omori J, Takanishi D, Wong C, Hedges J. Liaison Committee on Medical Education Accreditation Part I: The Accreditation Process. *Hawaii J Med Public Health*. 2015;74(9):311-314.
2. Ambrose A, Arakawa R, Greidanus B, Macdonald P, Musa C, Shibuya K, Tavares T, Yamada S. Geographical maldistribution of Native Hawaiian and Other Pacific Islander physicians in Hawaii. *Hawaii J Med Public Health*. 2012;71(4 Suppl 1):13-20.
3. Institute of Medicine. (2003). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Healthcare*, Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care, Board on Health Sciences Policy. Washington, DC: National Academy of Sciences.
4. Lakhani SE. Diversification of U.S. Medical Schools via Affirmative Action Implementation. *BMC Med Educ*. 2003;3(6).
5. Izutsu S, Kaholokula KJ, Lee W, Mau MK, Look M, Carpenter DA, Trask-Batti M, Coen L. Medical School Hotline: the Department of Native Hawaiian Health at the John A. Burns School of Medicine. *Hawaii J Med Public Health*. 2012;71(11):329-331.
6. JABSOM Institutional Diversity Policy. (2015). JABSOM Website. Retrieved from <http://jabsom.hawaii.edu/wp-content/uploads/2014/03/SIGNED-DIVERSITY-POLICY-DTD-2-13-15.pdf>.