



**Creating a Diverse,  
Equitable, and Inclusive Culture  
That Benefits Physicians, Patients,  
and the Health Care System**

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**There's a wide diversity gap in health care:** The people practicing medicine often don't reflect the patients they serve. [Recent data](#) from the American Association of Medical Colleges underscore this point. Hispanic people are **18.5%** of the U.S. population but represent only **5.8%** of physicians. For Black Americans, the disparity is **13.4%** versus **5%**, and for Native Americans and Alaska Natives, the disparity is **1.3%** versus **0.3%**.

Many studies, such as [this one](#) published by Inquiry in 2018, connect the lack of a diverse workforce to escalating racial disparities in health care, illustrated in these statistics:



Black Americans' life expectancy at birth is 4+ years shorter than White Americans'. ([CDC, 2019](#))



In most states, Black and American Indian/Alaska Native people are more likely to die from conditions like diabetes that are treatable with timely, quality care. ([The Commonwealth Fund, 2021](#))



Children born to Black and Native Hawaiian/Other Pacific Islander women are more than 2x as likely to die in infancy versus those born to white women. ([Kaiser Family Foundation, 2020](#))



# By the Numbers: Medicine’s Racial Disparities

	U.S. General Population (%)	Physician Population (%)
Hispanic	18.5	5.8
Black	13.4	5
Native Americans/ Alaska Natives	1.3	0.3
White	71	56.2

Source - [Diversity in Medicine, Facts and Figures 2019: AAMC](#)

## Defining DEI

You know the words “diversity,” “equity,” and “inclusion”— but what do they mean in the context of health care? Here’s a refresher:



### Diversity

Diversity connotes including people who bring different interests, perspectives, heuristics, and modeling to the complex issues plaguing society, particularly sociopolitical determinants of health that affect racial and ethnic populations.” Source - [Circulation: Cardiovascular Quality and Outcomes, January 2023](#)



### Equity

“Equity aims to ensure equal treatment, access, opportunity, and advancement for people and including employees in the workplace.” Source - [TechTarget](#)

“Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health.” Source - [Center for Disease Control](#)



### Inclusion

“Inclusion refers to a community where all members are and feel respected, have a sense of belonging, and can participate and achieve their potential.” Source - [University of Iowa](#)

“Giving patients a voice to help provide and receive high-quality care and encouraging the presence of a diverse healthcare staff in the treatment experience of patients.” Source - [Relias](#)



## Why DEI in Medicine Matters to Providers

Increasing the diversity of the medical profession can improve the conditions for providers, whether they're physicians, nurses, medical assistants, or office staff. Here are just a few of the ways a comprehensive DEI strategy can benefit healthcare providers and their organizations:

### Better Performance

Research has demonstrated that a commitment to diversity can have great benefits—even before providers leave training. “There is evidence that diverse training environments improve learning outcomes, including active thinking, empathy, intellectual engagement, and motivation,” note the authors of [this 2021 Journal of Surgical Education article](#). These students “are therefore better equipped to work comfortably and effectively in diverse environments.”

### Increased Fulfillment

An organizational commitment to DEI and combating systemic healthcare inequities helps many ChenMed providers feel connected to a powerful mission. “You often miss many big life moments as a doctor. When you can work with a team dedicated to serving people from the most vulnerable populations, who historically struggle to access quality health care, it helps you feel like what you do is worthwhile,” says Faisal Syed, ChenMed’s National Director of Primary Care.

### A Stronger Workforce

Like employees in other industries, medical professionals are more likely to join, stay, and thrive in organizations where they feel recognized and respected. According to [recent Press Ganey data on DEI in health care](#), “employees’ intent to stay at an organization is associated with the value their employer, managers, and peers place on the presence and treatment of people from different backgrounds.”

## Why DEI in Medicine Matters to Patients

A more diverse medical profession can also promote better health outcomes for patients.



Studies have shown that **medical providers from underrepresented backgrounds are more likely to serve those communities after their training**, according to the [Journal of Surgical Education](#). Increasing the diversity of the medical profession, therefore, can improve healthcare equity by expanding access to care for underserved communities.

**Medical providers who share similar a background with their patients often communicate more clearly with them.** As the [Journal of the American Heart Association reported in 2021](#), studies have shown that there can be “strained communication between White physicians and severely ill Black patients, based on cultural differences and unconscious biases that can have dire consequences for patients.”

There is evidence that **access to medical providers who reflect patients’ backgrounds can improve their compliance with care plans.** A [Stanford Health Policy study](#) of 1,300 Black men in Oakland, Calif., is an oft-cited example: Men who were randomly paired with a Black doctor followed through on more preventive services, such as flu shots and diabetes and cholesterol screenings, than those who saw non-Black doctors.

## Why DEI in Medicine Matters to the Health Care System

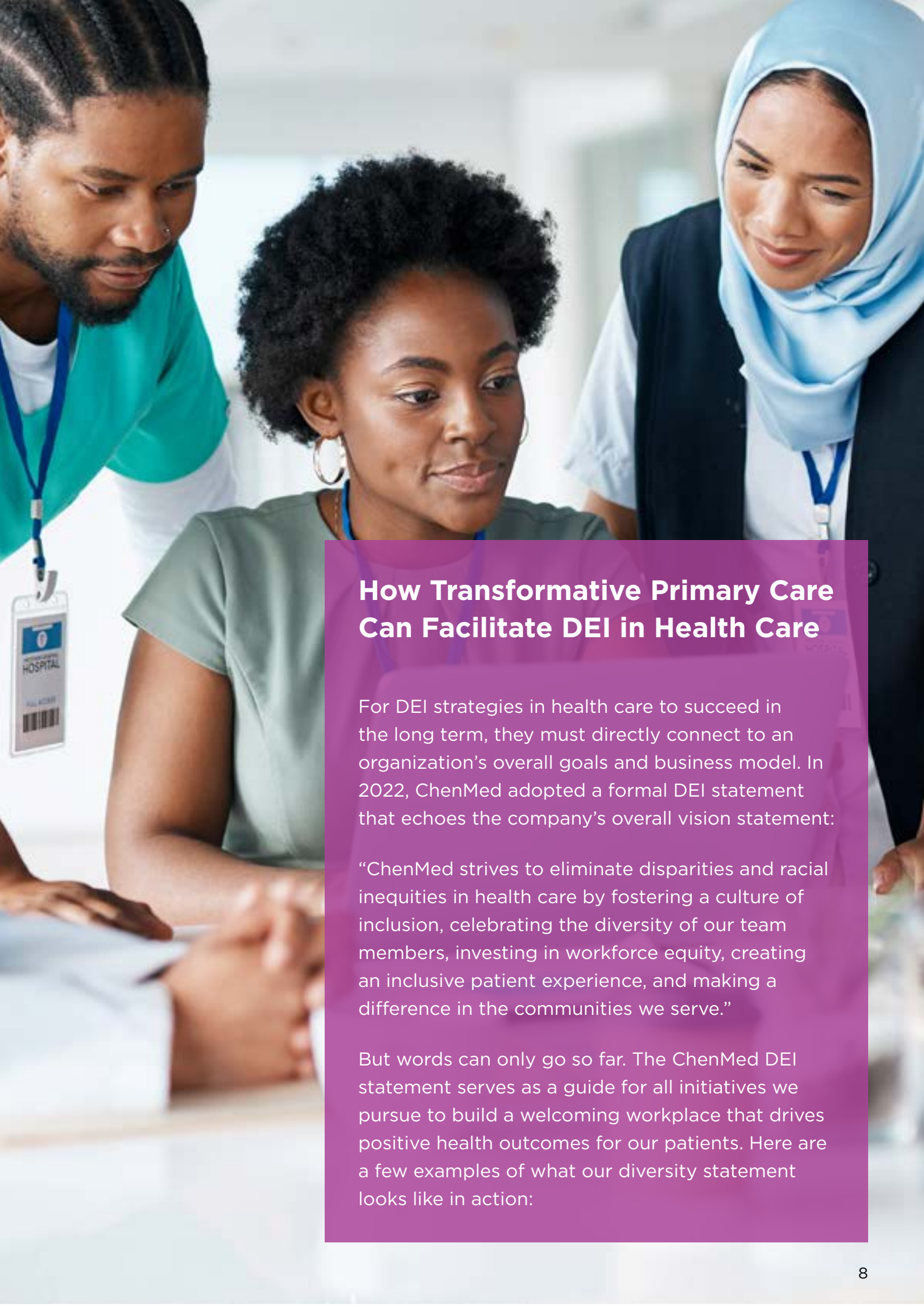
In addition to individual-level benefits for patients and providers, a commitment to DEI can have broader impacts on medical organizations and the American healthcare system.

For starters, a comprehensive DEI strategy can facilitate important structural shifts that healthcare organizations must make to address explicit and implicit biases. A [2022 article](#) in the Annual Review of Public Health argued that “provider-level interventions should be accompanied by interventions that systematically change structures inside and outside the health care system if the country is to succeed in influencing biases and reducing health inequities.” An organization that incorporates “compositional diversity,” the authors note, enables patients who speak different languages to communicate clearly with providers; allows providers to make crucial observations related to social determinants of health; and ensures policies and procedures do not reflect biases that can adversely impact certain groups of patients.





Hiring and empowering medical professionals from underrepresented backgrounds can provide a positive model to young people in similar communities. Minority physicians can illustrate that medicine is a career path open to people who look, speak, and believe as they do. Given the diversity gaps highlighted in this paper's introduction, this kind of modeling and motivation is essential. According to a [2020 report by the AAMC](#), the United States would need 118,000 more Black physicians to have workforce representation in line with the population. But at the current rate medical colleges are graduating Black doctors, it would take four decades to achieve equity. Increasing the number of Black physicians and providing work environments that help retain them may encourage more Black students to pursue medicine, speeding the attainment of racial equity in the healthcare workforce.



## How Transformative Primary Care Can Facilitate DEI in Health Care

For DEI strategies in health care to succeed in the long term, they must directly connect to an organization's overall goals and business model. In 2022, ChenMed adopted a formal DEI statement that echoes the company's overall vision statement:

“ChenMed strives to eliminate disparities and racial inequities in health care by fostering a culture of inclusion, celebrating the diversity of our team members, investing in workforce equity, creating an inclusive patient experience, and making a difference in the communities we serve.”

But words can only go so far. The ChenMed DEI statement serves as a guide for all initiatives we pursue to build a welcoming workplace that drives positive health outcomes for our patients. Here are a few examples of what our diversity statement looks like in action:



## Improving Patient Care with a Diverse, Team-Based Approach

The American physician population skews predominantly white (63.9%) and male (62.9%), according to the [2022 AAMC Physician Specialty Data Report](#). But ChenMed's demographics are far more representative of the populations we serve—low-income seniors who live in underserved neighborhoods. Of our more than 6,000 team members in 15 states, 51% identify as a racial or ethnic minority, and 72% are female.

Our employees don't just share backgrounds with our patients; many of our care team staff live in the communities that we serve. When new patients join a ChenMed center, they may feel more comfortable sharing health concerns or information about their socioeconomic challenges with a staff member who has this kind of shared experience. Sometimes this person is the primary care physician—but it doesn't have to be. By learning and sharing important information on behalf of the patient, this staff member can help build trust between the patient and their care team. In turn, the physician will gain a better picture of what social determinants of health the patient may face and what hesitations they have about their care plan—all of which can be the difference between a positive health outcome and a poor one.





## Facilitating Continuous Learning and Active Engagement

We build upon the diversity of our staff with continuous training and resources that celebrate and increase their knowledge of different cultures. This also deepens our staff's understanding of how culture can affect the way patients feel about health care. These include:

**Cultural Days and Heritage Months:** ChenMed marks important observances like [Black History Month](#) and [Women's History Month](#) with various resources that facilitate celebration and learning. Activation toolkits are created for leaders to use with their teams during huddles during that day or month. The kits include important dates and historical facts, discussion prompts, reading suggestions, and activities that teams can participate in with one another and speak about with patients.

**Employee Resource Groups (ERGs) and Mentorship Programs:** Nearly 500 employees who share similar backgrounds and interests have formed the [four current ChenMed ERGs](#). These groups are:

- **AWARE2:** All Working Together to Achieve Racial Equity and Equality
- **CHARISMA:** ChenMed Healthcare Allies Respecting Individuality and Sexuality of Members and Associates
- **WIN:** Women Inspire Network
- **VET:** Veteran Engagement Team

These groups are self-governed, meet monthly, and host occasional virtual and in-person events. Recently, ChenMed launched a formal ERG mentorship program that has attracted more than 100 staff.



## Promoting DEI from the C-Suite Down

DEI strategies are more likely to succeed when they receive repeated and vocal support from an organization's highest-ranking officers. ChenMed executives, up to and including CEO Christopher Chen, frequently and publicly state that addressing racial disparities in health care is [a moral imperative](#) that ChenMed takes to heart.

ChenMed leaders are also frequent participants in Fireside Chats hosted several times per year. These events often touch on the intersection of race and medicine. One recent session explored the Black female physician experience, featuring a discussion between two physicians about the challenges they faced and the different paths they took toward their present careers.

# More Than Morality: An Investment in DEI Delivers Results

A DEI strategy like ChenMed's is not always an easy path to follow. It requires substantial time and financial investment. It requires hiring diverse employees and empowering them to identify and help remedy structural issues of equity and inclusion in the organization. And it requires leadership not only to be on board with the strategy but also out front as its most prominent promoters.

Despite the challenges, a comprehensive, effective DEI strategy is absolutely worth the investment. ChenMed's swift and recent growth suggests that our approach to DEI is attractive to a growing number of physicians and medical professionals. It took ChenMed nearly 20 years to cross the 1,000-employee mark in 2017. But it took just five years for ChenMed to surpass 6,000 employees. In 2017, ChenMed centers were in 6 states. In 2023, at the time of this writing, ChenMed centers operate in 15 states — and counting.

Healthcare professionals are actively seeking the kind of environment that ChenMed is fostering through its commitment to DEI. This approach allows staff of many different backgrounds to feel seen, appreciated, and celebrated. And it allows them to practice the impactful kind of medicine they envisioned when choosing this as their profession.



**Ready to join ChenMed  
in the quest to eradicate  
racial disparities in  
health care?**

[See the positions for which  
we're currently recruiting.](#)



**Want to learn more  
about our DEI strategy  
and how it impacts  
patient care?**

[Start a conversation  
with us today.](#)

