

After Affirmative Action: Diversity at California Medical Schools

In 1996, Californians approved Proposition 209, a ballot initiative codifying the elimination of race-conscious admissions at the state's public institutions. The University of California's Board of Regents had banned such admissions a year earlier by issuing a Special Policy 1 (SP1). Similar ballot initiatives have been adopted in Washington state (1998) and Michigan (2006). The impact of these ballot initiatives on racial and ethnic diversity in medical schools has been difficult to determine, although Grumbach, Mertz, and Coffman found "dramatic reductions in the number of [underrepresented minority students] who are applying to, gaining admission to, and matriculating in medical schools in California."¹ This *Analysis in Brief* extends their data set through 2007 and examines changes in in-state minority applicants accepted by and matriculating to California medical schools.²

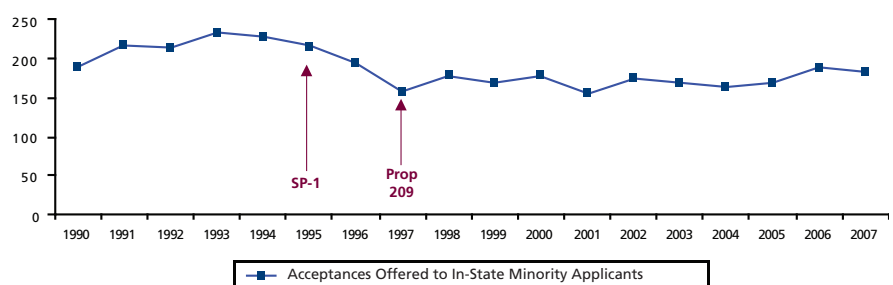
Background

In California, the most populated state in the country, the percentage of minority residents exceeds that of non-Hispanic white residents.^{3,4} Data from 1997 to 2007 indicate that minority California applicants to medical school are slightly more likely to be accepted than are their non-minority counterparts, 45.8 percent versus 43.5 percent, respectively.

The number of California minority applicants to California medical schools decreased after the implementation of SP1 and Proposition 209 (as did applications per minority applicant), but because of an overall decrease in the U.S. applicant pool,



Figure 1: Number of Acceptances Offered to Minority California Residents by California Medical Schools, 1990-2007*



* For this report, applicants identifying themselves as Hispanic/Latino, Black/African American, American Indian/Alaska Native, or Native Hawaiian/Other Pacific Islander are considered to be "minority" residents.

these changes cannot be directly associated with ending affirmative action. Acceptance rates and class sizes at California's medical schools, however, have remained relatively constant. Therefore, this report focuses on changes in in-state minority students being accepted by and matriculating to California medical schools.

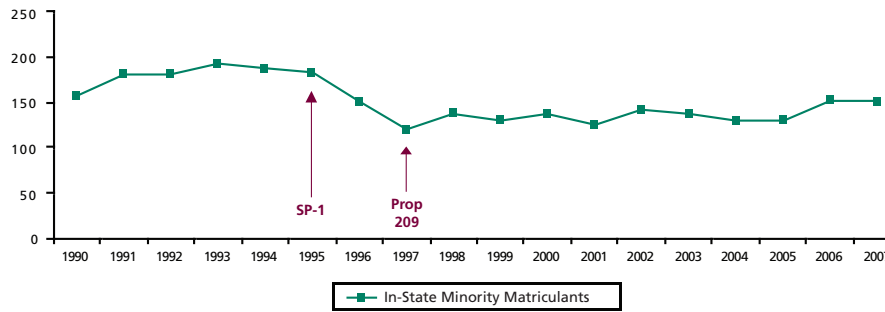
Results

Acceptances. Medical schools offer only sufficient acceptances to fill their classes, so acceptance rates vary little. As Figure 1 demonstrates, however, the number of minority California residents accepted to one or more California medical school fell from 233 in 1993 to 157 in 1997 and 156 in 2001. As a percentage of those accepted to California medical schools, in-state minorities fell from 22.5 percent in 1993 to 15.1 percent in 1997. From 1997 to 2007, the average number of minority California applicants being offered acceptance in state has been 171, or 62 fewer minority acceptances per year since the peak.

Matriculants. Apart from increases at Loma Linda and Keck-USC (both private schools), California medical school class sizes remained constant from 1990 to 2006. In 2007, the University of California system's medical schools increased matriculation. Figure 2 demonstrates, however, that the number of minority California residents matriculating in state has decreased from a high of 192 in 1993 to lows of 119, 124, and 129 in 1997, 2001, and 2004, respectively. As a percentage of medical school students studying in California, in-state minorities fell from 23.1 percent in 1993 to 14.3 percent in 1997. Since then, the percentage of in-state minority students at California medical schools has averaged 16.4 percent, down 6.7 percent for a decade.

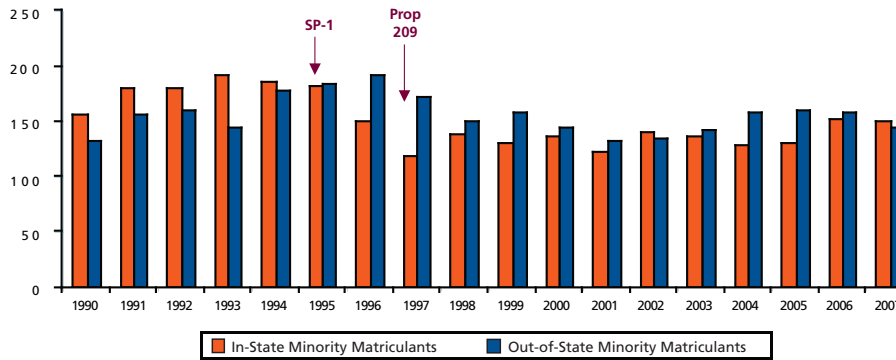
Figure 3 presents the number of minority California residents matriculating in and out of state over the study period. Since 1995, more than half (52.8 percent) of all minority

Figure 2: Number of Minority California Residents Matriculating to California Medical Schools, 1990-2007*



* For this report, applicants identifying themselves as Hispanic/Latino, Black/African American, American Indian/Alaska Native, or Native Hawaiian/Other Pacific Islander are considered to be "minority" residents.

Figure 3: Number of Minority California Residents Matriculating to Medical School In and Out of State, 1990-2007*



* For this report, applicants identifying themselves as Hispanic/Latino, Black/African American, American Indian/Alaska Native, or Native Hawaiian/Other Pacific Islander are considered to be "minority" residents.

students accepted from California have matriculated out of state, and more minority California residents have matriculated out of state in all but two of these years.

Discussion

After affirmative action was halted, the University of California system (including five medical schools) and the state's three private medical schools have continued an array of programs, including automatic admissions for top high school students, outreach, academic enrichment, and financial aid, to support diversity efforts. Despite these efforts, in-state minority acceptances and matriculants to California medical schools have not recovered.

The variation in matriculation rates of minority California residents to California medical schools, especially when compared with the constancy in class size, illustrates the vulnerability of minority student applicants when significant changes to admission practices occur. Minority students from California may perceive an unwelcome climate at the state's medical schools. The percentage of minority Californians matriculating out of state is high, compared with a state like Texas, where an average of 83 percent of minority acceptances matriculate in state. This may be especially detrimental to efforts to diversify California's physician workforce, where in 2008 only 5 percent of physicians are Latino and 3 percent are African American.⁵

There remains much to learn about the impact of SP1 and Proposition 209 on medical education, and higher education, in California. For example, this report includes California's private medical schools because (1) they were part of Grumbach et al.'s original data set, and (2) although they can exert broader latitude in admissions practices, the pool of applicants they consider from California's public universities is affected nonetheless. Future studies of this type of related effect will be important.

References

- 1 Grumbach K, Mertz E, Coffman J. Underrepresented Minorities and Medical Education in California: Recent Trends in Declining Admissions. A Report by the Center for California Health Workforce Studies. San Francisco: University of California, March 1999.
- 2 Data from the AAMC Data Warehouse: Applicant-Matriculant File, as of December 20, 2007.
- 3 U.S. Census Bureau State & County QuickFacts: California. <http://quickfacts.census.gov/gfd/states/06000.html>. Accessed 6/18/2008.
- 4 For this report, applicants identifying themselves as Hispanic/Latino, Black/African American, American Indian/Alaska Native, or Native Hawaiian/Other Pacific Islander were considered to be "minority" residents.
- 5 Grumbach K, Odom K, Moreno G, Chen E, Vercammen-Grandjean C, Mertz E. Physician Diversity in California: New Findings from the California Medical Board Survey. A Report by the Center for California Workforce Studies. San Francisco: University of California, April 2008.

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Acknowledgment: Oswald Umuhoza and Kehua Zhang, Ph.D., provided research assistance for this report.

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