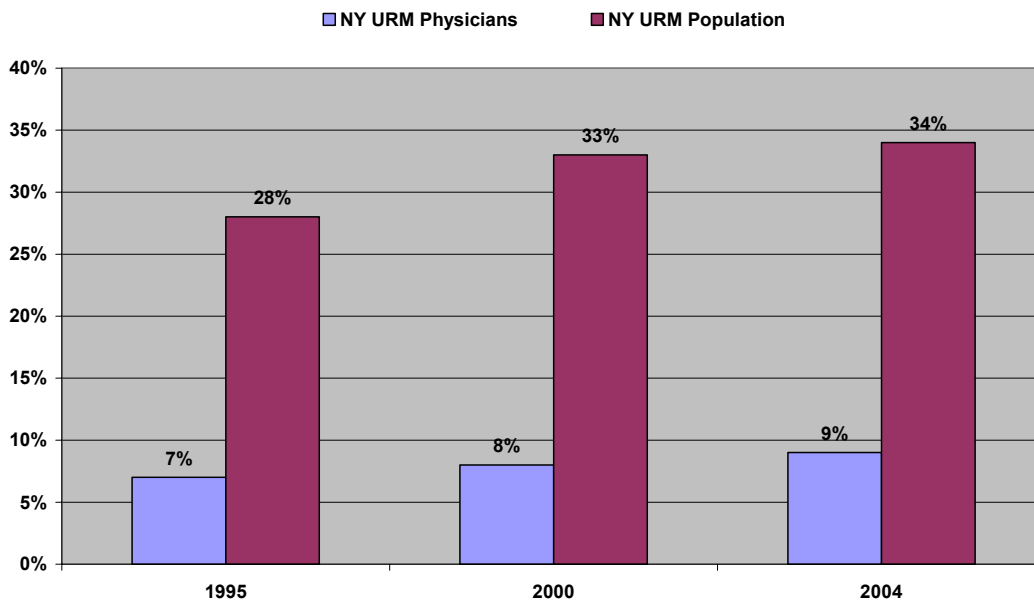


June 2006

New York's Physician Workforce is not as Diverse as its Population

Physicians in New York are not representative of the population in terms of their race and ethnicity, according to a recent report from The Center for Health Workforce Studies (the Center) at University at Albany. New Yorkers from minority groups that are underrepresented in medicine¹ (Blacks/African-Americans, Hispanics/Latinos, and American Indians) account for a growing proportion of New York's population, but the number of underrepresented minority (URM) physicians has not grown accordingly and is only a small segment of the state's physicians. In 2004, 34% of New York's population was underrepresented minorities, but URM physicians accounted for only 9% of physicians in the state (compared to 7% in 1995) (see Figure 1). The disparity between the race/ethnicity of the state's population and its physician workforce is expected to further widen in future years.

Figure 1. Comparison of the Percentages of Underrepresented Minority Physicians and Population in New York, 1995 - 2004



Source CHWS, NYS Physician Re-registration Survey 2000 - 2005

The Center collects data on New York's medical workforce through an ongoing survey of the state's physicians as they renew their licenses on a two-year cycle. For this report, data on physician characteristics and practice patterns were analyzed for active, patient care physicians in the state who graduated from U.S. medical schools.

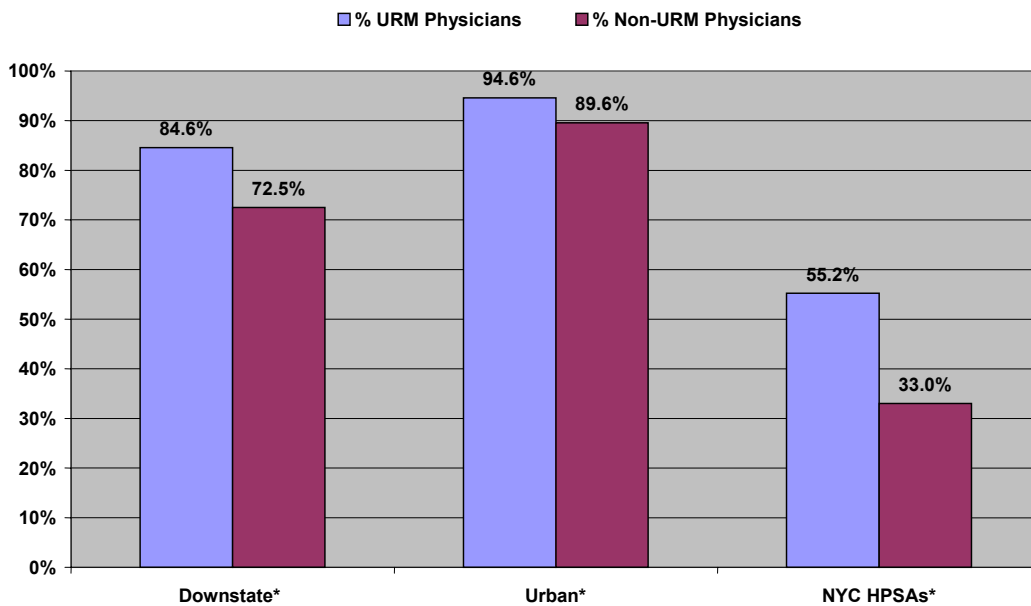
¹ The Association of American Medical Colleges defines underrepresented minority physicians as those in racial and ethnic categories that are underrepresented in medicine relative to their number in the general population.

The findings of this report are a concern because research has shown that a diverse physician workforce is associated with better access to care for minority patients. Studies have found that members of minority groups are more likely to visit physicians from their own racial or ethnic background, and also report greater comfort and satisfaction with the health care they receive.

The Center’s study found that in 2004:

- New York’s URM physicians were much more likely to be female than other physicians, and nearly half of URM physicians were age 44 or younger compared to about 37% of other physicians.
- URM physicians were more likely to report a principal specialty in primary care or obstetrics/gynecology.
- URM physicians were more likely than all other physicians to practice in hospitals and freestanding clinics. In fact, URM physicians were three times more likely to practice in freestanding clinics than other physicians.
- URM physicians were much more likely to practice in urban areas in downstate New York. Additionally, more than half of URM physicians in New York City practiced in federally-designated Health Professional Shortage Areas (HPSAs) compared to about one-third of all other physicians in New York City.

Figure 2. Percentage of URM and Non-URM Physicians Practicing Downstate, in Urban Counties, and in NYC HPSAs



Source CHWS, NYS Physician Re-registration Survey 2004 – 2005

This report was prepared to assist state policy makers and planners in better understanding the contribution of URM physicians in meeting the health care needs of New Yorkers. In addition to improving the cultural diversity of New York’s medical workforce, URM physicians may play an important role in improving access to and quality of care for minority and underserved populations in the state. In order to better meet the health care needs of all New Yorkers, a variety of strategies to assure a more diverse physician workforce should be considered, including programs to recruit and retain more underrepresented minorities in the field of medicine.

Copies of reports may be downloaded from the Center’s web site at: <http://chws.albany.edu>.