

## **Minority Women in Medicine**

Being a woman and a minority presents challenges and opportunities. Historically women have maneuvered their way within the medical profession working as hard as men but not receiving the equivalent amount of pay or recognition. Minorities in medicine have also struggled with discrimination and lack of opportunity. Being both minority and female erects the barriers of being either four-fold. Then you ask, "Where are the opportunities?" Minority women in medicine are beacons of hope. They aspire to work hard and succeed in spite of and because of the difficulties that they face. If you interviewed a few of them, you would find a group of individuals who have had a number of adversities confront them throughout their lives yet succeeded because of their strength of spirit, sheer determination, and commitment to their communities. Strength of spirit creates a sense of destiny in life that is greater than you as an individual and serves as protection from criticism or discouragement from others. It is an inner flame that takes you through those dark times when you question even yourself... "was this what I was meant to do" or "maybe it might be easier to be a physical education teacher." The sheer determination to succeed is witnessed by their studying in medical school twice as hard and as long to offset the lack of educational opportunities. Only 10% of Hispanic children attend preschool, 30% are taught by teachers that are certified in the subject they are teaching, 40 to 50% drop out of high school, and only 20% attend a 4 year college. It is not surprising that of those Hispanics that enter college, only 0.4% successfully graduate from medical school.

Commitment to community is the perspective of matriarchal societies. In matriarchal societies such as Native American and other indigenous groups, the day to day activities are group activities and commitment to the group as a whole is paramount. Mindy Fullilove (a Psychiatry Professor at Columbia University) has written about the denigration of the entire society when one faction within a community is allowed to suffer from benign neglect. The whole is one and therefore even if one faction of a community is unhealthy, that society as a whole is also affected. Being a woman and a minority opens up for us a broader world-view in that we strive to succeed for not only ourselves, but for our communities.

Two recent reports have emphasized the importance of expanding minority representation in medicine. One is the Institute of Medicine Report entitled “Unequal Treatment: Confronting Racial and Ethnic Disparities in Health” and the “Color of Medicine” Report Commissioned by the Robert Wood Johnson Foundation. Both reports allude to the increasing number of underrepresented minorities within the aging population of which women will make up a large part. Both reports also allude to studies that have shown that minority physicians will see mostly minority patients in their practice and that minority patients prefer to see a minority physician. This is due in part to the culturally and linguistically competent services these physicians will provide. Women also prefer to see a female physician because of their preference for gender sensitive care. In order for our country to impact the racial and ethnic health disparities that exist in our country, particularly with respect to women of color, we need to assure that there are an increasing number of underrepresented minority women entering the medical workforce.

I am the third director of the University of Texas Health Science Center at San Antonio’s Medical Hispanic Center of Excellence. The first director of the Center was Dr. Miguel Medina. The most valuable lessons he taught and modeled were the importance of “giving forward” and gender equality. Giving forward is the process of giving someone assistance with the expectation that that individual in turn will do the same for future generations. He provided me (and many other men and women) with the opportunities within our careers through the MHCOE that were not there for him. I, in turn, am making sure that those same opportunities and more are there for current medical students. He also equally encouraged male and female medical students to enter medicine and academics.

As the Director, I understand the difficult road Latina medical students might have traveled. I also understand the pressures they feel from the collision with traditional cultural values and beliefs. For example, because their families may have limited financial resources and the students feel a commitment to their families, Latinas are

sometimes faced with returning home to become caregivers to an elderly parent or grandparent. It is difficult for Latina students to witness their families' financial problems while they obtain financial assistance for their education that would exceed what their families might earn in a lifetime! Latinas also face pressure to have children from parents or in-laws even though they are in medical school. The MHCOE supports and encourages Latina medical students with a number of life situations. I believe that this support they receive from the center, coupled with their own strength of spirit that got them there to begin with, will empower them to successfully complete their medical education. We provide students hope when they are feeling pretty hopeless. We want to assure that they will succeed and become beacons of hope to future generations of Hispanic students that will follow. The motto of Fuerza Unida, a California Latina activist group, says it all. *La mujer luchando. El mundo transformando (Hispanic women in struggle transform the world).*