

KAISER OAKLAND PEDIATRICS RESIDENCY ANTI-DISCRIMINATION STATEMENT

This statement is drafted by pediatric residents at the Kaiser Permanente Oakland Medical Center.

We are honored to serve our Oakland community and take great pride in providing equitable care for our diverse patient population. It is important to us that the children in our community feel safe, respected, and welcomed when they seek care. We aspire to work towards a future where our residency program and broader healthcare teams are as diverse as the patients we serve; we know that representation in medicine improves healthcare outcomes while also inspiring the next generation. Here at KP Oakland, we welcome colleagues from underrepresented backgrounds and all others who are dedicated to fostering healthier, more equitable communities.

Why this matters in Oakland

We have the privilege to work in an incredibly diverse city. According to US Census Data, 22% of the population of Oakland identifies as Black or African American and 27.2% identifies as Hispanic or Latinx [8]. According to the UCLA Williams Institute at the School of Law, the San Francisco Bay Area has the highest percentage of individuals identifying as LGBTQ+—6.7% of the population—of any major metropolitan area [9]. Dozens of languages are spoken in this city, which has a long history of welcoming immigrants from around the world.

Many studies have shown that racial and cultural concordance can result in better health outcomes. It has been associated with reduced infant mortality in Black babies [1], as well as improved satisfaction, communication, and medication adherence [2-5]. Other studies have shown the intersectional nature of identity and bias in healthcare. Though the medical community realizes and acknowledges the impact of diversity, equity, and inclusion on patient outcomes and health, a recent study from the AAP showed that from 2007 to 2019, rates of residents recruited from groups that are historically underrepresented in medicine (URM) have been unchanged [7].

Our efforts

In the past several years, we as residents have worked with our program to make the following improvements to recruit and support URM trainees and ensure that all of us have a strong foundation of knowledge and skills to address injustices in healthcare:

- We have advocated for dedicated academic half day sessions focusing on racial health inequities because we believe that educating ourselves on these topics is part of developing our clinical knowledge and expertise.
- We strive to incorporate discussion of racial health inequities into regular didactic sessions. Morning conferences and case conferences are required to include updates on racial and other health inequities relevant to the topic of discussion. Recognizing social and structural drivers of health and disease is an integral part of practicing medicine, not separate from other aspects of our education. Further, we believe these discussions should not be confined to didactics alone; addressing health inequities should be included in our daily work.

- We strive to have recruitment practices that prioritize diversity, including attending national conferences such as SNMA and LMSA. Creating visibility for potential residents and fostering a sense of community for existing residents and faculty will help create a lasting and sustainable focus on diversity, equity, and inclusion.
- We have accomplished the creation of an Associate Program Director position exclusively focused on diversity, equity, and inclusion work so that residents at our program can feel supported in engaging in this work with mentors who come from the community we serve.
- Our Resident EID committee continues to propose and develop resident-driven efforts to foster an authentically inclusive community of action focused on anti-racism and anti-discrimination. Our ongoing projects include creating an EID curriculum and rounding structure for the NICU, attending and supporting pipeline events for middle and high school students interested in medicine and science, and hosting inter-program social events to foster a sense of community at our training site.

In addition to resident-led efforts, our residency program allows dedicated time and mentorship for community health and advocacy projects through REACH and the MPH track. The KP Oakland Medical Center also has programming to support URM trainees across departments and to work with local schools and nonprofit organizations to broaden the pipeline to health careers.

This statement reflects our commitment to anti-discrimination and our goals for the future. There is always more work to be done.

References

1. Vespa J, Medina L, Armstrong DM. *Demographic Turning Points for United States: Population Projections for 2020 to 2060*. Washington, DC: US Census Bureau; 2020
2. Thornton RL, Powe NR, Roter D, Cooper LA. Patient-physician social concordance, medical visit communication and patients' perceptions of health care quality. *Patient Educ Couns*. 2011;85(3):e201–e208
3. Saha S, Komaromy M, Koepsell TD, Bindman AB. Patient-physician racial concordance and the perceived quality and use of health care. *Arch Intern Med*. 1999;159(9):997–1004
4. Shen MJ, Peterson EB, Costas-Muñiz R, et al. The effects of race and racial concordance on patient-physician communication: a systematic review of the literature. *J Racial Ethn Health Disparities*. 2018;5(1):117–140
5. Traylor AH, Schmittiel JA, Uratsu CS, Mangione CM, Subramanian U. Adherence to cardiovascular disease medications: does patient-provider race/ethnicity and language concordance matter? *J Gen Intern Med*. 2010;25(11):1172–1177
6. Cummings, Linda; Listening to Black Californians: How the Health Care System Undermines Their Pursuit of Good Health. *California Health Care Foundation*. Oct 2022. Retrieved from [<https://www.chcf.org/program/listening-to-black-californians/>].
7. Kimberly Montez, Emma A. Omoruyi, Kenya McNeal-Trice, Wendy J. Mack, Lahia Yemane, Alissa R. Darden, Christopher J. Russell; Trends in Race/Ethnicity of Pediatric Residents and Fellows: 2007–2019. *Pediatrics* July 2021; 148 (1): e2020026666. 10.1542/peds.2020-026666

8. U.S. Census Bureau (2022). *Oakland City Demographics*. Retrieved from [\[https://www.census.gov/quickfacts/oaklandcitycalifornia\]](https://www.census.gov/quickfacts/oaklandcitycalifornia).
9. Conron, K.J., Luhur, W., & Goldberg, S.K. Estimated number of US LGBT adults in Large Metropolitan Statistical Areas (MSA). (December 2020). The Williams Institute, UCLA, Los Angeles, CA.