

Diversity Equity and Inclusion in Psychiatry 2023 Statistics Fact Sheet

Presented by the DEI Interest Group
of the Loma Linda University Psychiatry Residency

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Foreword

Systemic discrimination is a significant problem in medicine, mirroring other realms of American life. While there have been efforts to address this over recent decades, improvements have been small and incremental. One important prerequisite to further progress is for the medical community to continually seek out, uncover, and shed light on current disparities. This document represents our humble efforts to this end, attempting to include the context our local community in San Bernardino County, California, and the Inland Empire whenever possible. While this initial endeavor is limited in scope, we hope to expand on it the coming years.

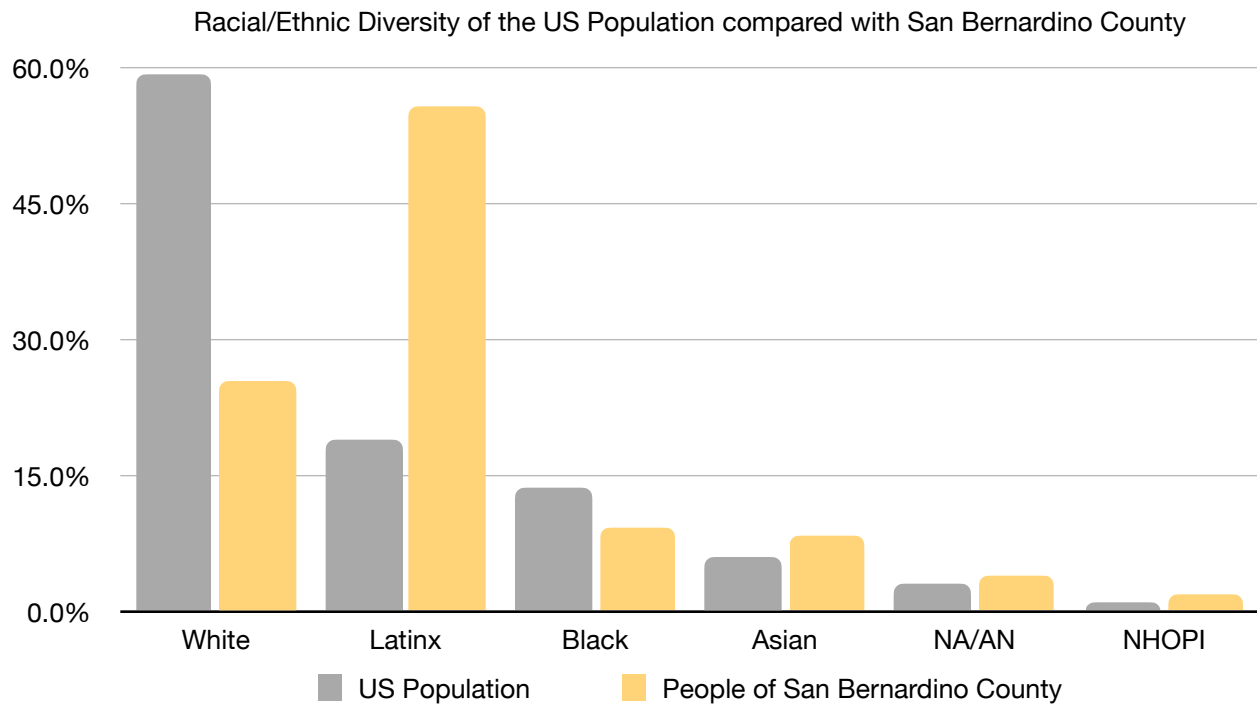
Ethnic and racial statistical measures are very imperfect. For example, drawing a distinction between humans as “Black” and “White” is inextricably linked to cruel oppression throughout history. Similarly, the tendency to classify people from so very many unique cultural heritages as “Asian” comes across as rather obtuse and out-of-touch. So why use such terms? The social systems in which we live and work have been designed to favor some people over others, in some cases implicitly and in others explicitly. Our intent is not to perpetuate stereotypes or bias, but rather to embark on a course that hopefully limits bias over time.

Most sources of gender demographic data referenced in this document distill vast swaths of the American population to “male” and “female,” disregarding non-binary people. This has the potential to come across as insensitive. And yet, the fact remains that women in medicine earn millions of dollars less than men over the course of their careers ([Whaley et al., 2021](#)) and have long been underrepresented in the field. By using this data, our intent is not to exclude, but rather to shed light on a very specific form of discrimination.

It is with reverence that we approach these topics, hoping for a more just, equitable, and inclusive future.

Racial/Ethnic Diversity in our Local Community

As we move to address the disparities in representation in medicine and psychiatry, it is vital that we stay in touch with our local communities amid shifting societal and professional demographics. The racial and ethnic makeup of our own San Bernardino County differs significantly from that of the US population at large.



San Bernardino County Population

- Latinx: **55.8%**
- White (not Hispanic or Latinx): **25.4%**
- Black or African American: **9.4%**
- Asian: **8.5%**
- Native American and Alaska Native (NA/AN): **2.2%**
- Native Hawaiian and Other Pacific Islander (NHOPI): **0.5%**

Note: from [US Census Bureau](#)

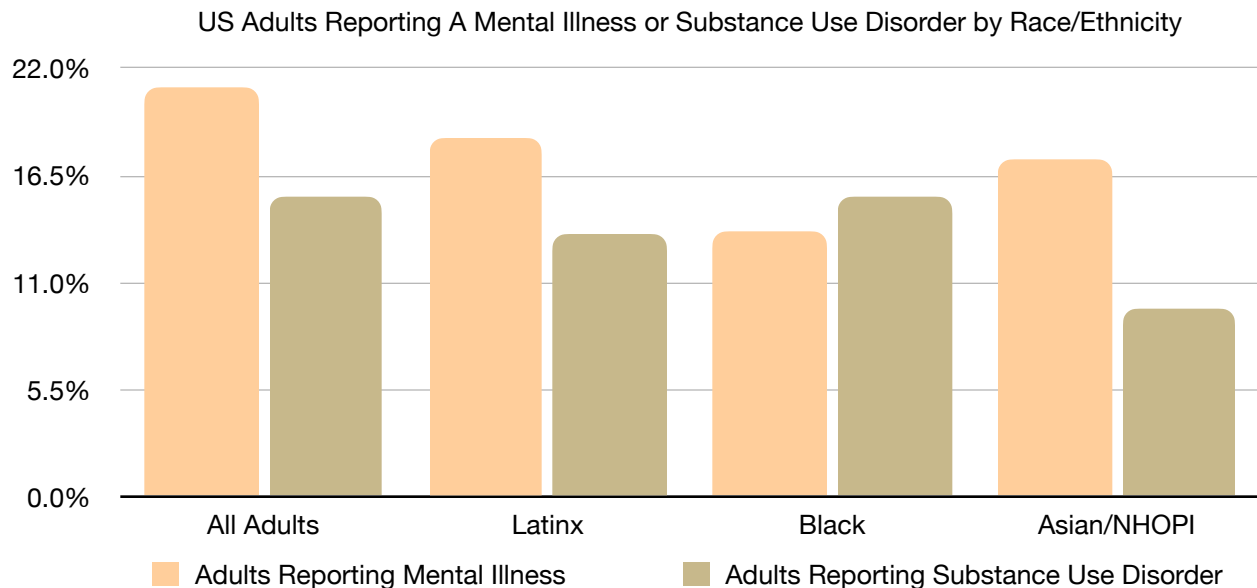
United States Population

- White (not Hispanic or Latinx): **59.3%**
- Latinx: **18.9%**
- Black or African American: **13.6%**
- Asian: **6.1%**
- Native American and Alaska Native (NA/AN): **1.3%**
- Native Hawaiian and Other Pacific Islander (NHOPI): **0.3%**

Note: from [US Census Bureau](#)

Mental Illness Does Not Discriminate

Rates of reported mental illness and substance use disorders are relatively similar across racial and ethnic populations in the United States. Adult perception of mental illness and readiness to self-report having a disorder is likely influenced by multiple forms of stigma (different explanatory frameworks between cultures, racism, disempowerment, etc.), potentially accounting for some of the variance that does exist below.

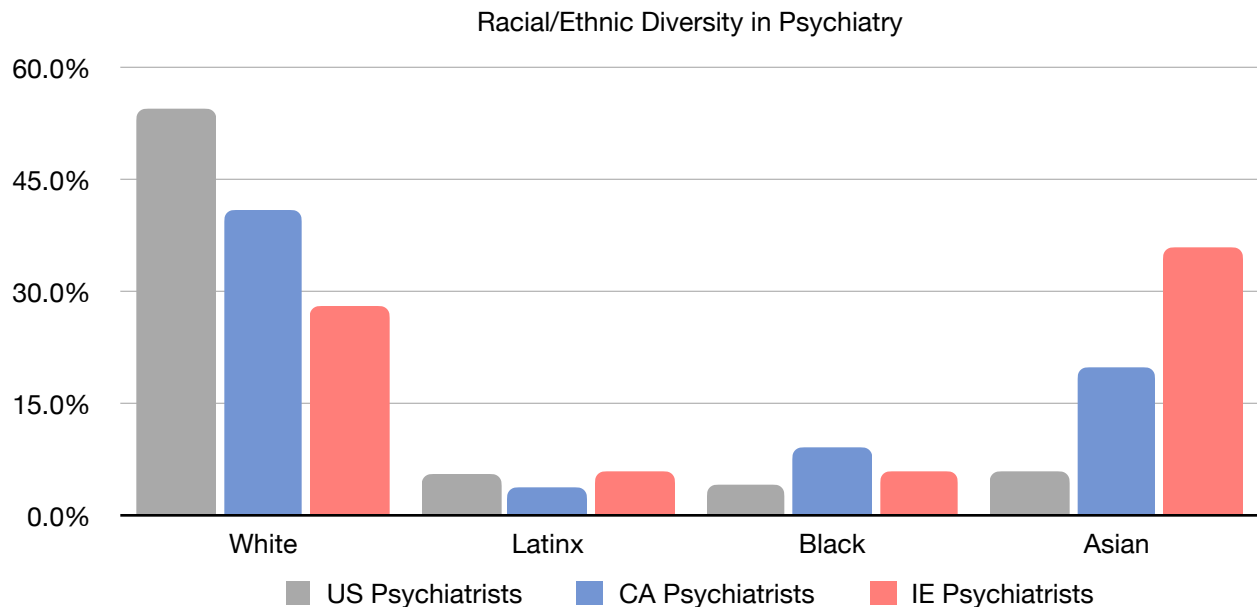


US Adults Reporting A Mental Illness or Substance Use Disorder

- All Adults reporting substance use disorder: **15.4%** (38.7 million)
- All Adults reporting mental illness: **21%** (52.9 million)
- Black or African American Adults reporting substance use disorder: **15.4%** (4.7 million)
- Black or African American Adults reporting mental illness: **17.3%** (5.3 million)
- Latinx Adults reporting substance use disorder: **13.5%** (5.7 million)
- Latinx Adults reporting mental illness: **18.4%** (7.7 million)
- Asian/NHOPI Adults reporting substance use disorder: **9.7%** (1.5 million)
- Asian/NHOPI Adults reporting mental illness: **13.8%** (2.1 million)

Note: from [National Survey of Drug Use and Health - NSDUH](#), which does not offer these statistics specific to White Adults (included in All Adults); NHOPI stands for Native Hawaiians and Other Pacific Islands

Racial/Ethnic Underrepresentation in Psychiatry



Psychiatrists Practicing in the Inland Empire (IE)

- Inland Empire Psychiatrists who are White: **28%**
- Inland Empire Psychiatrists who are Hispanic or Latinx: **6%**
- Inland Empire Psychiatrists who are Black or African American: **6%**
- Inland Empire Psychiatrists who are Asian: **36%**

Note: from [Healthforce Center at UCSF](#); same original source was limited by 21% of Inland Empire Psychiatrists declining to report; each region in California had a similar rate of Psychiatrists declining to report (range 21%-35%)

Psychiatrists Practicing in California (CA)

- California Psychiatrists who are White: **41%**
- California Psychiatrists who are Hispanic or Latinx: **4%**
- California Psychiatrists who are Black or African American: **2%**
- California Psychiatrists who are Asian: **20%**

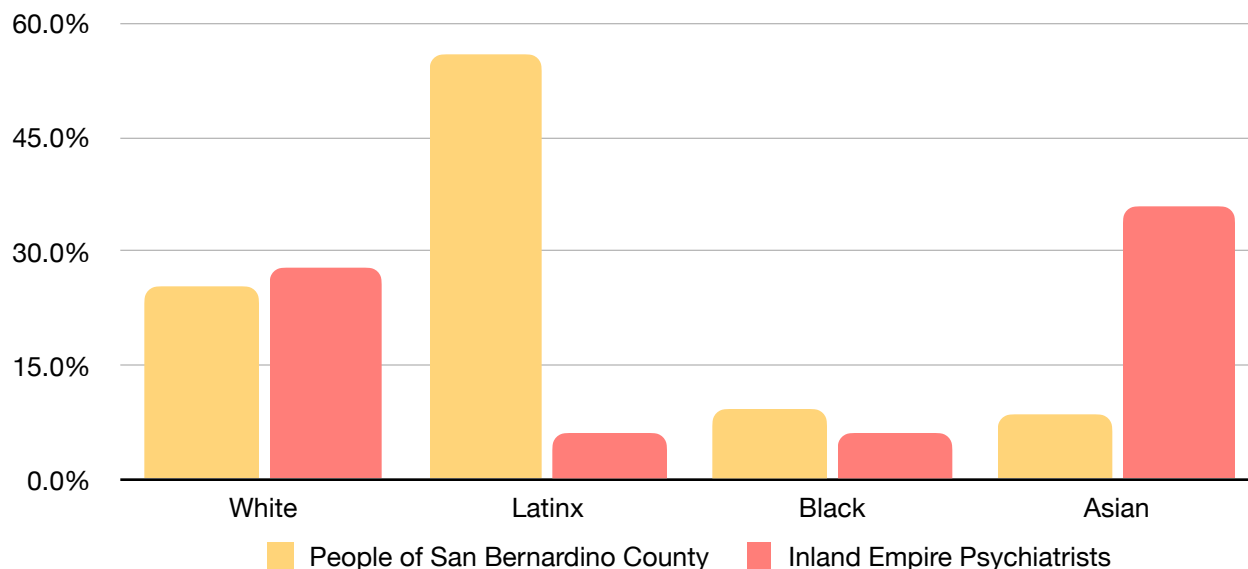
Note: from [Healthforce Center at UCSF](#); original source was a Medical Board of California survey from 2015, and was limited by 30% of California Psychiatrists declining to report

Psychiatrists Practicing in the United States (US)

- US Psychiatrists who are White: **54.7%** (22,294)
- US Psychiatrists who are Hispanic or Latinx: **5.8%** (2,373)
- US Psychiatrists who are Black or African American: **4.4%** (1,775)
- US Psychiatrists who are Asian: **15.7%** (6,392)

Note: from [Wyse, R., Hwang, WT., Ahmed, A.A. et al., 2020](#); while published in 2020, demographic data above was gathered in 2013

Racial/Ethnic Underrepresentation in Inland Empire Psychiatry



San Bernardino County Population Compared with IE Psychiatrists

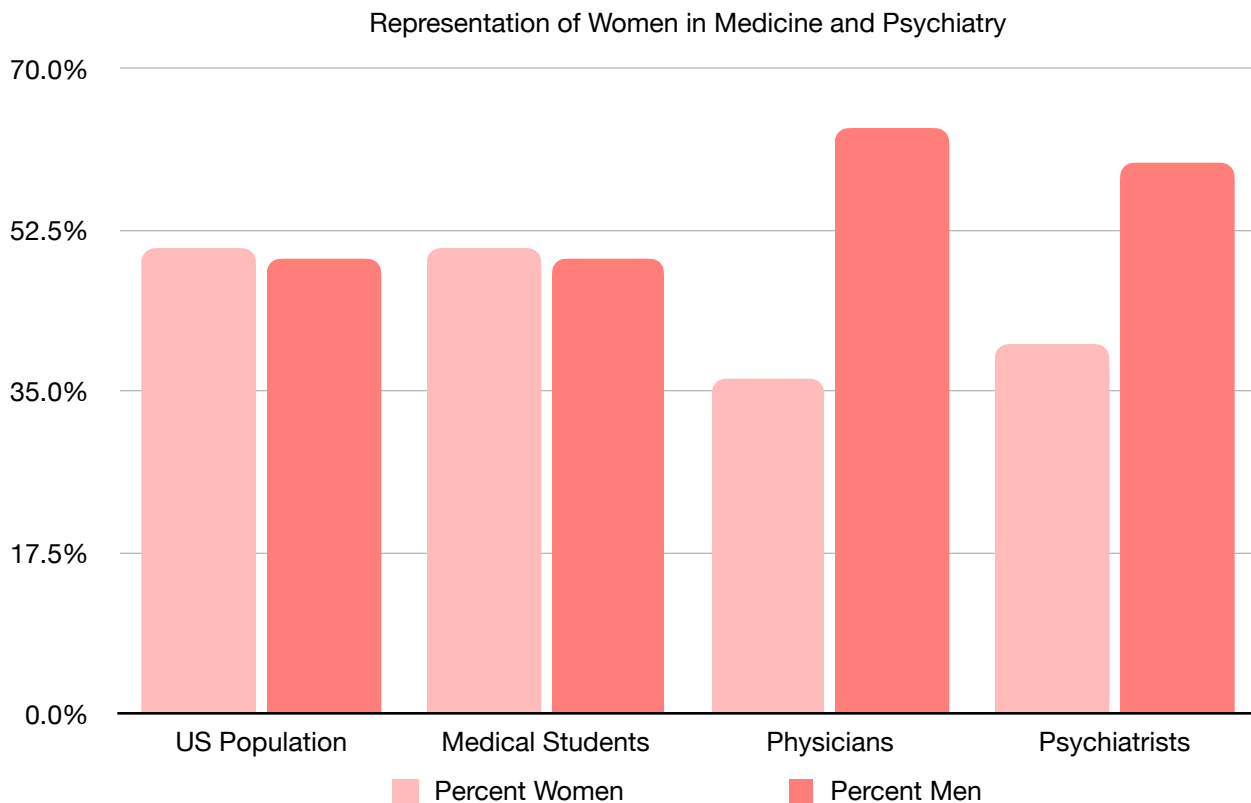
- People of San Bernardino County who are White (not Hispanic or Latinx): **25.4%**
- Inland Empire Psychiatrists who are White: **28%**
- People of San Bernardino County who are Asian: **8.5%**
- Inland Empire Psychiatrists who are Asian: **36%**
- People of San Bernardino County who are Hispanic or Latinx: **55.8%**
- Inland Empire Psychiatrists who are Hispanic or Latinx: **6%**
- People of San Bernardino County who are Black or African American: **9.4%**
- Inland Empire Psychiatrists who are Black or African American: **6%**

Note: San Bernardino County demographics presented earlier in this document from the [US Census Bureau](#) are compared with the Inland Empire Psychiatrist demographic data from [Healthforce Center at UCSF](#)

Women in Medicine and Psychiatry

Historically, women have been underrepresented in the field of medicine. While it is heartening that 2019 marked the first year that the percentage of women US medical schools slightly outnumbered men, women continue to be significantly outnumbered by men in the physician workforce.

Addressing representation for women in terms of presence is only half of the battle. A significant gender pay gap exists in medicine, with women earning nearly 25% less than men (even after adjusting for hours worked, clinical revenue, speciality, and practice type ([Whaley et al., 2021](#))).

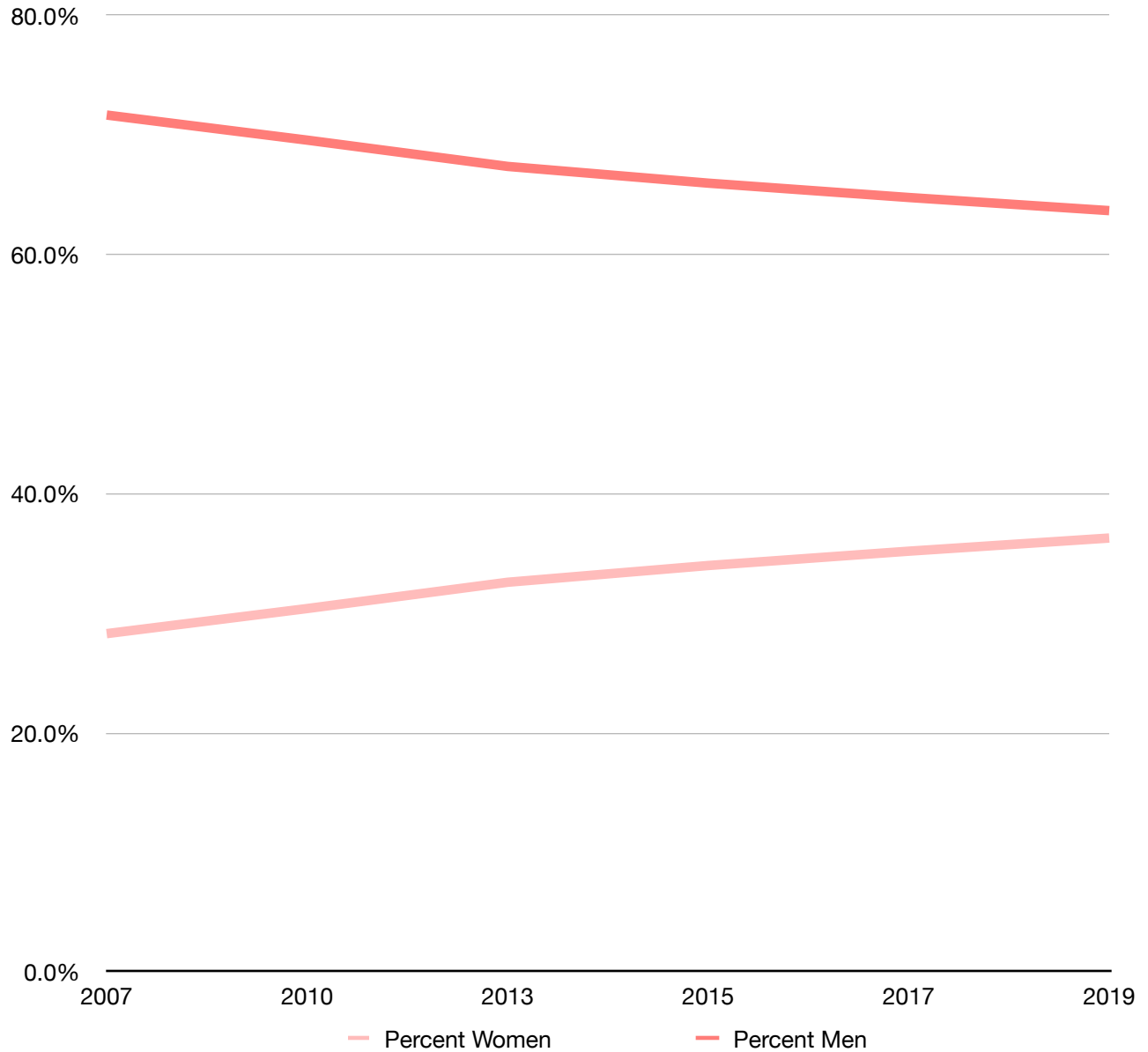


Representation of Women in Medicine and Psychiatry

- US Population: Women 50.5%, Men 49.5%
- Medical Students: Women 50.5%, Men 49.5%
- Physicians: Women 36.3%, Men 63.7%
- Psychiatrists: Women 40.2%, Men 59.8%

Note: US Population demographics are from [US Census Bureau \(2021\)](#); breakdown of American physicians by sex and specialty is from [AAMC \(2019\)](#); 2019 was the first year that [women slightly outnumbered men in US medical schools](#)

US Physician Workforce: Percentage of Men vs Women Over Time

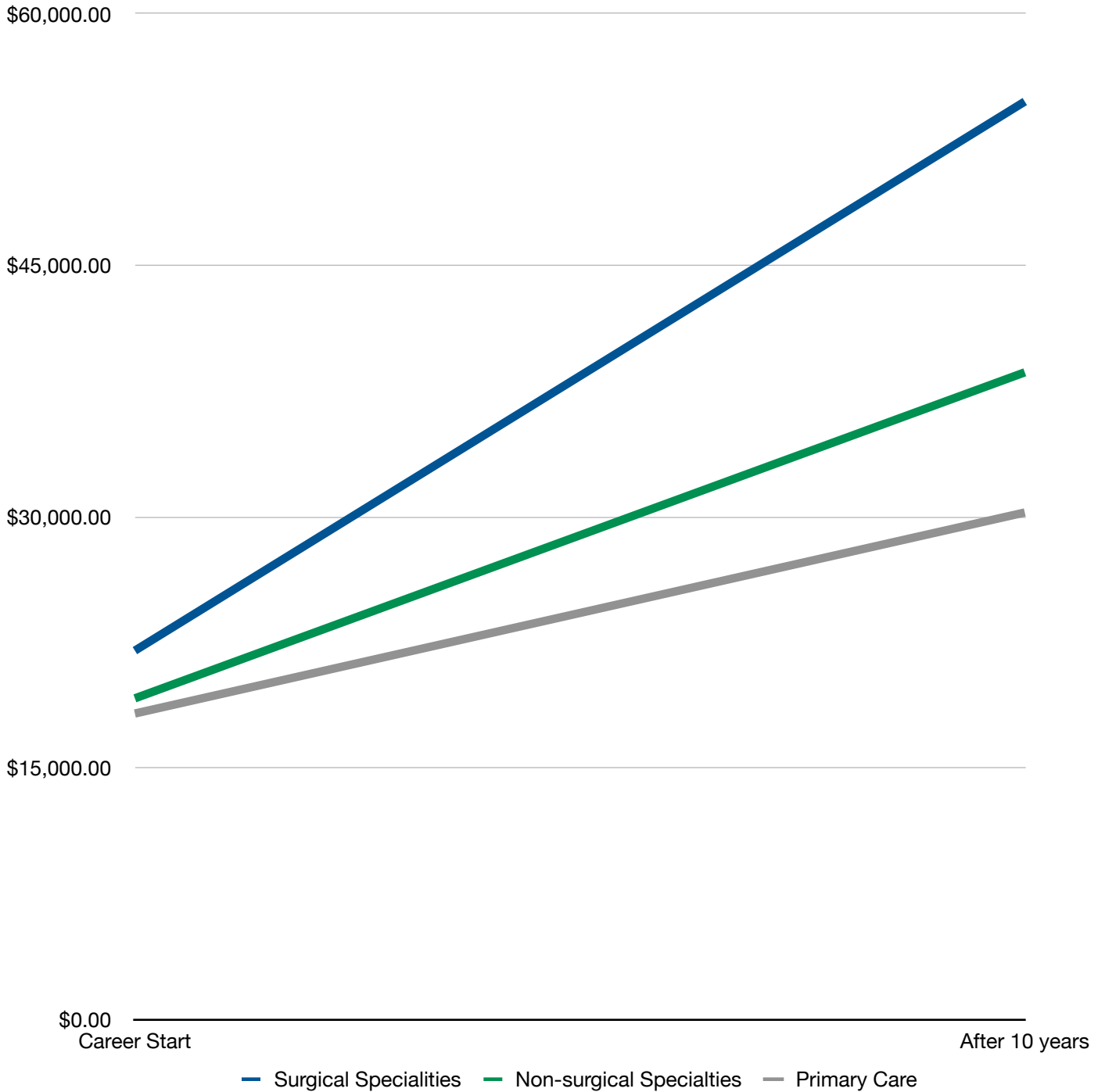


The Slowly Growing Presence of Women in Medicine

- 2007 Physicians: Women 28.3%, Men 71.7%
- 2010 Physicians: Women 30.4%, Men 69.6%
- 2013 Physicians: Women 32.6%, Men 67.4%
- 2015 Physicians: Women 34.0%, Men 66.0%
- 2017 Physicians: Women 35.2%, Men 64.8%
- 2019 Physicians: Women 36.3%, Men 63.7%

Note: from [AAMC Physician Specialty Data Report](#)

Gender Pay Gap in Medicine Increases Over the First 10 Years of Practice



The Gender Pay Gap in Medicine

- Surgical Specialties, Career Start: Women make \$21,999 less
- Surgical Specialties, after 10 Years of Practice: Women make \$54,777 less yearly
- Non-surgical, Career Start: Women make \$19,150 less yearly
- Non-surgical, after 10 Years of Practice: Women make \$38,611 less yearly
- Primary Care, Career Start: Women make \$18,245 less yearly
- Primary Care, after 10 Years of Practice: Women make \$30,245 less yearly

Note: from ([Whaley et al., 2021](#))