# Equity in Practice: Legislative Concerns and Accreditation in the PA Profession

Susan Salahshor, PhD, PA-C, DFAAPA – Program Director, Ottawa University

Christine Thorpe, EdD, Ed.M., CHES – CEO, Stronger Tomorrow Wellness, LLC

Jonnae Atkinson, MD, MS, FAAFP – Associate Professor, Baylor College of Medicine

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PAEA

## Session Objectives

At the end of the session, participants will be able to:

- Examine the legislative concerns related to BAJEDI in the US and its impact on PA education

- Analyze the impact of health equity on PA patient care and training.

- Consider opportunities for advocacy and policy change

- Apply recommendations for programs to meet accreditation requirements within the parameters of state policies
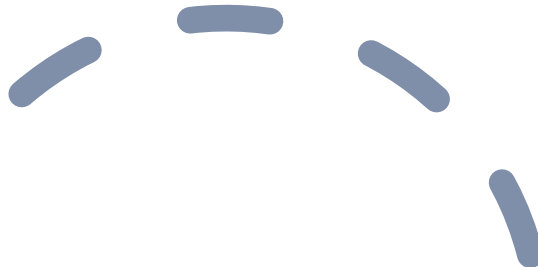
# Where Anti-DEI Legislation Has Been Proposed[1]
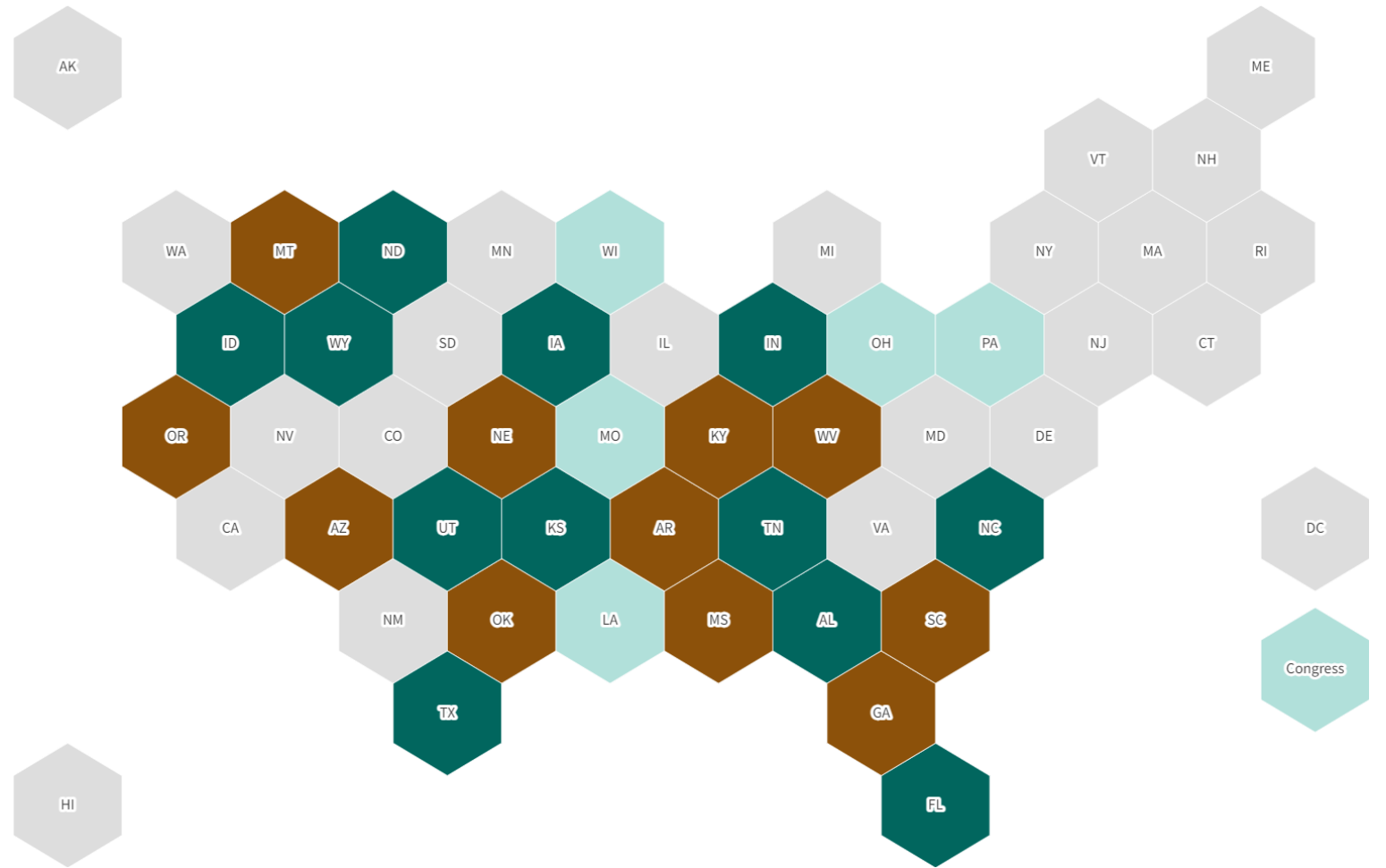
# Types of Restrictions[1]

- Prohibits DEI Offices and Staff
- Prohibits DEI Training
- Prohibits funding for DEI programs and services
- Prohibits preferential consideration for employment or admission based on race and ethnicity

# Legislative Examples

| State | Bill | Purpose | Effective Date |
|---|---|---|---|
| **Alabama**[2] | SB 129 | Prohibits promotion, sponsoring, or maintenance of DEI offices/programs | 10/1/24 |
| **North Dakota**[3] | SB 2247 | Prohibits training that includes "specified concepts," like the belief that "an individual, by virtue of the individual's race or sex, is inherently privileged, racist, sexist, or oppressive, whether consciously or subconsciously | 4/24/23 |
| **Texas**[4] | SB 17 HB 5127 | Prohibits DEI offices, diversity training for students and employees, and "ideological oaths and statements" | 1/1/2024 |

# DEI Legislation and Accreditation Standards

- Despite legislative changes, several graduate medical education accreditation bodies including ARC-PA, believe that aspiring medical providers will be best prepared for clinic practice in a diverse society if they learn in an environment characterized by, and supportive of, diversity and inclusion.

- Accreditation standards that facilitate DEI training remain in place such as ARC-PA standard A1.11

- Data suggest that a *large majority* of programs (83%) reviewed by the ARC-PA from March 2021-2024 were able to adequately meet the DEI standard

# The Supreme Court's affirmative action decision has had a mixed impact on enrollment so far

Preliminary data from certain selective schools show that while some have seen dramatic percent changes in the demographic makeup of their incoming class since last year, others haven't seen much change at all.

■ Black/African American ■ Hispanic/Latino ■ Asian/Asian American ■ White
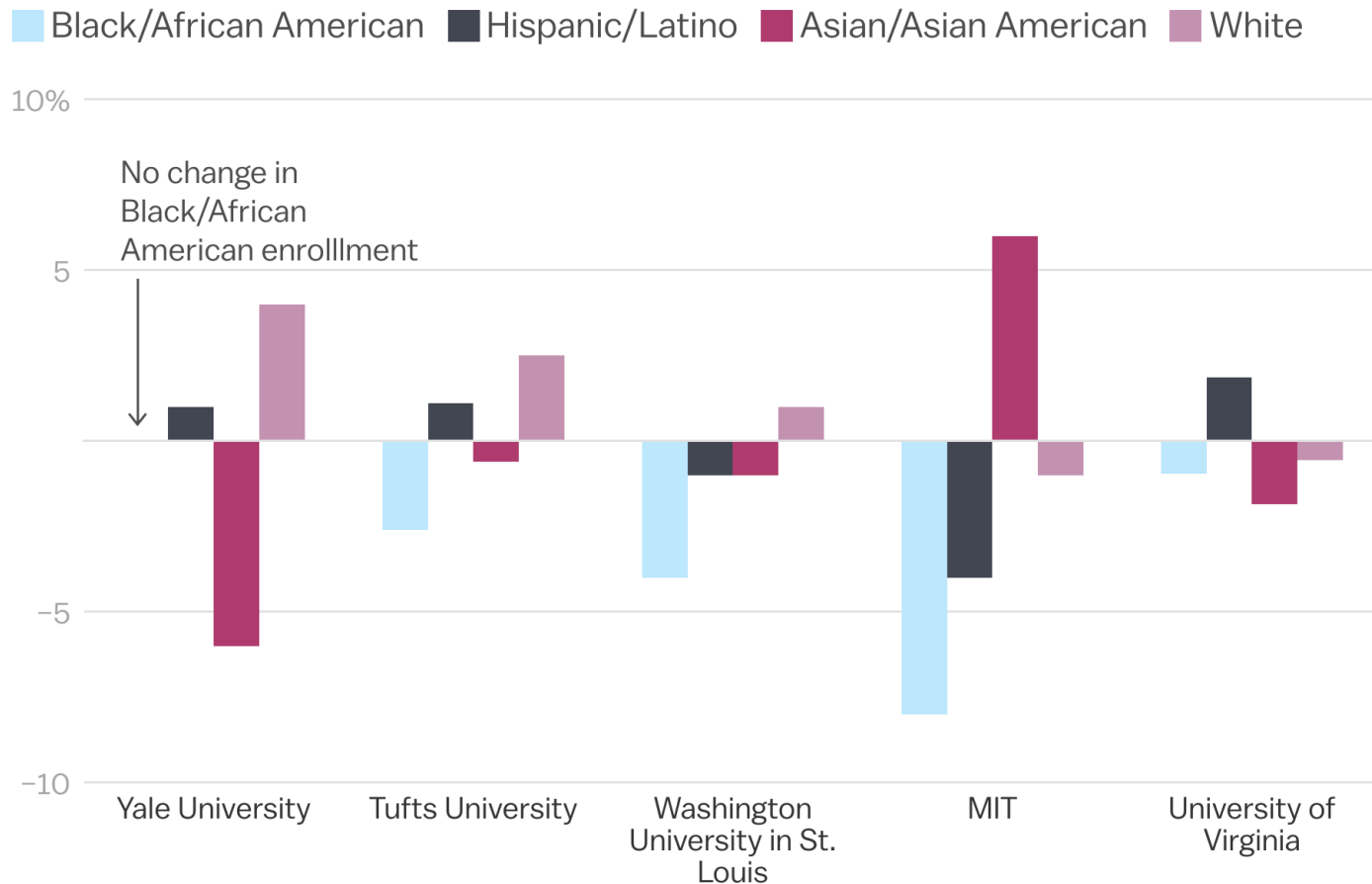


Data on percent changes between 2024 and 2023, excluding international students. Data from MIT is based on differences in 2024 figures and four-year averages in 2023.

Source: Institutional data

*Vox*

# Legislative Impact[5]

- Undergraduate Admissions Data
  - Drop in enrollment of undergraduate students who have identified as Black, Hispanic, and/or Native American and Pacific Islander from approximately 25% to 16%

# PA Profession vs. National Demographics

## PAs at end of 2023[6]

- Total PAs: 178,708
- New PA-Cs: 11,762
- Military Status: 4,506

## United States, 2022

- Adults 25-64: 171,714,000[7]
  - 18-24: 31,328,000 (48.9% Female)
- Race/Ethnicity data: 18-64
- 28.7% with functional disability[8]
- 7.6% identify LGBTQ+[9]
- 24.4% adults >$100K; 14.1% 75-99K; 26.4% $50-74K; 35% adults <$50K[7]
- *No PA data on ability status, sexual orientation, or socioeconomic status

| | PAs[6] | National[7] |
|---|---|---|
| Male | 28.8% | 50.2% |
| Female | 71.2% | 49.8% |
| Non-binary | <0.1% | N/A |
| Prefer not to Answer | 0.1% | N/A |
| White | 79.9% | 75.1% |
| Black/African American | 3.4% | 14.0% |
| Asian | 6.8% | 6.8% |
| Native Hawaiian/Pacific Islander | 0.3% | 0.3% |
| American Indian or Alaskan Native | 0.4% | 1.3% |
| Other | 2.6% | n/a |
| Multi-Race | 2.5% | 2.5% |
| Prefer not to answer | 4.2% | n/a |
| *Hispanic* | 7.2% | 19.5% |
| Veteran | 3% | 4% |

# Health Equity and Patient Care

- According to the CDC **1 in 4 adults in the U.S. have a disability**.[8] Data suggest that primary care physicians and specialist noted the lack of sufficient knowledge, experience, and skills among themselves and clinic staff concerning care for people with disabilities resulting in barriers to access to care.[10]

- According to the CDC more than **1 in 5 adults in the U.S. are obese**.[11] Data suggest that perceptions and/or experiences of weight bias from primary care health care professionals negatively influence engagement of obese patients with the primary care service.[12]

- According to the data form the CDC Maternal Mortality Review Committee in 36 U.S. states from 2017 to 2019, **among pregnancy-related deaths with information on place of last residence, 82% of decedents lived in urban counties versus 18% in rural areas.**[13]

- A study by Rasu et al using a national U.S. database found that the odds [0.67, (0.47–0.96)]of **individuals of Hispanic ethnicity receiving opioid treatment for nonmalignant chronic pain in an outpatient clinical setting is significantly lower than that of non-Hispanic individuals.**[14]

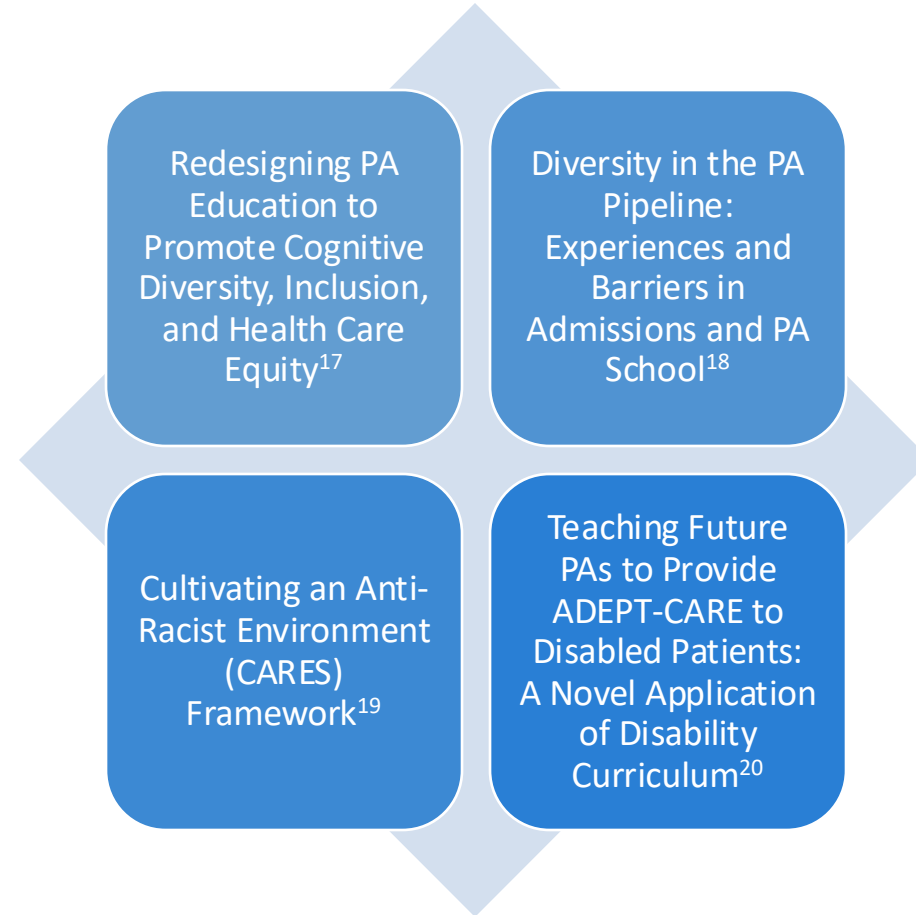# Opportunities for Advocacy in the Clinical Space



- **Make clinical space more inclusive**
  - Intake process
  - Medical equipment

- **Expand access to services**

- **Legislative Advocacy**
  - Educate the community and leaders about the challenges you encounter

| PAEA Reports [15-16] | First Year Student (M%/MDN #) | Graduating Student (M%/MDN #) | Faculty (n=649) | Program Directors (n=220) | Medical Directors (n=20) |
|---|---|---|---|---|---|
| Female | 79.6%/30.5 | 70.2%/31 | 69.6% | 62.3% | 35% |
| Male | 35.4%/9 | 23%/10 | 28.5% | 35.4% | 65% |
| Unknown/Other | 43.3%/1 | 2.1%/NR | 0.5% | 2.3% No answer | 0% |
| Hispanic | 11.5%/3 | 8.2%/3 | 5% | 4.6% | 20% |
| White | 76.9%/30 | 68.9%/30.5 | 85.5% | 89.1% | 75% |
| Unknown | 27.1%/3 | 12.8%/4 | 3.1 % No answer | 3.2% no Answer | 5% no answer |
| Other | 9.7%/3 | 2.2%/2 | 2.2% | 0 | 0 |
| Asian | 5.9%/5 | 9.6%/4 | 2% | 0 | 5% |
| Multi-race | 3.6%/3.5 | 2.2%/2 | 2% | 0.9% | 10% |
| Native Hawaiian Pacific Islander | 3.1%/1 | 2.8%/1 | .3% | 1.4% | 0 |
| Black/African American | 3%/4 | 3.6%/2 | 4.3% | 5% | 5% |
| American Indian or Alaska Native | 1.4%/1 | 0.5%/1 | 0.6% | 0.5% | 0 |
| Age (Mean/Mdn) | 24.9/25 | Not provided | 45.9/43.5 | 51.1/50 | 53.4/51 |

# Health Equity and PA Education

Redesigning PA Education to Promote Cognitive Diversity, Inclusion, and Health Care Equity[17]

Diversity in the PA Pipeline: Experiences and Barriers in Admissions and PA School[18]

Cultivating an Anti-Racist Environment (CARES) Framework[19]

Teaching Future PAs to Provide ADEPT-CARE to Disabled Patients: A Novel Application of Disability Curriculum[20]

# Opportunities for Advocacy in PA Education

Retention, Outreach, Alignment, Diversity (ROAD) Framework[21]

Cultivating an Anti-Racist Environment (CARES) Framework[19]

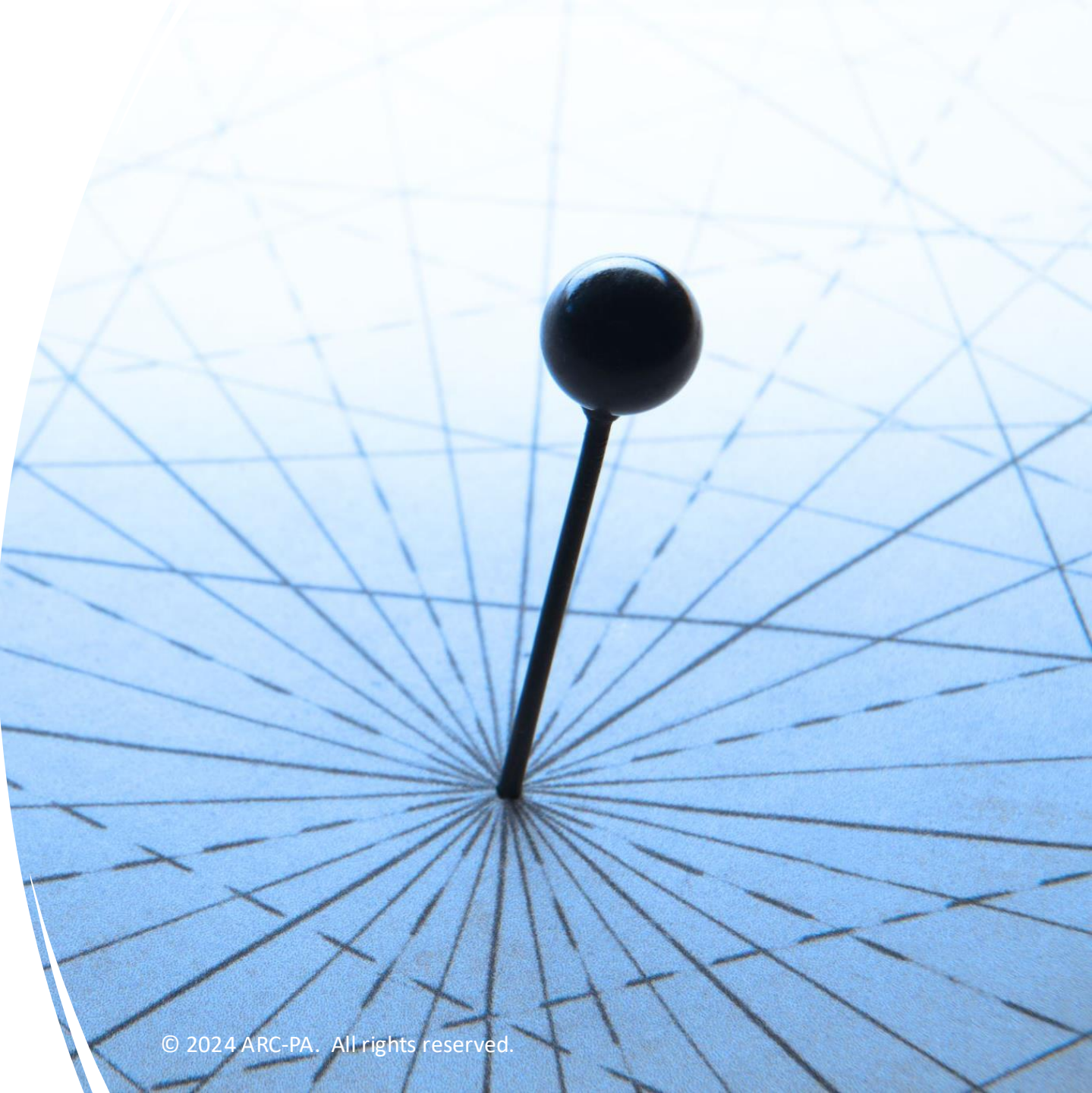Mentorship: Racial, Access, Cultural, Empathy (RACE) Framework[22]

Understanding Early Admission Processes: Implications for PA Workforce Diversity and Healthcare Equity[23]

AAPA DEI Resources

PA Foundations Grants

PAEA DEI Toolkit

- [Inclusion Starts with I](Inclusion Starts with I)

# Meeting Accreditation Requirements

In 2020, the ARC-PA introduced standards to ensure institutions demonstrate a commitment to prepare PA students that can recognize and address the healthcare needs of patients from all backgrounds to deliver equitable care.[24]

Health equity is crucial for PA practice as it ensures that all patients receive fair and just access to healthcare, regardless of their socioeconomic status, race, or ethnicity.

The standards also ensure that institutions support diversity, equity, and inclusion (DEI) efforts within PA programs.
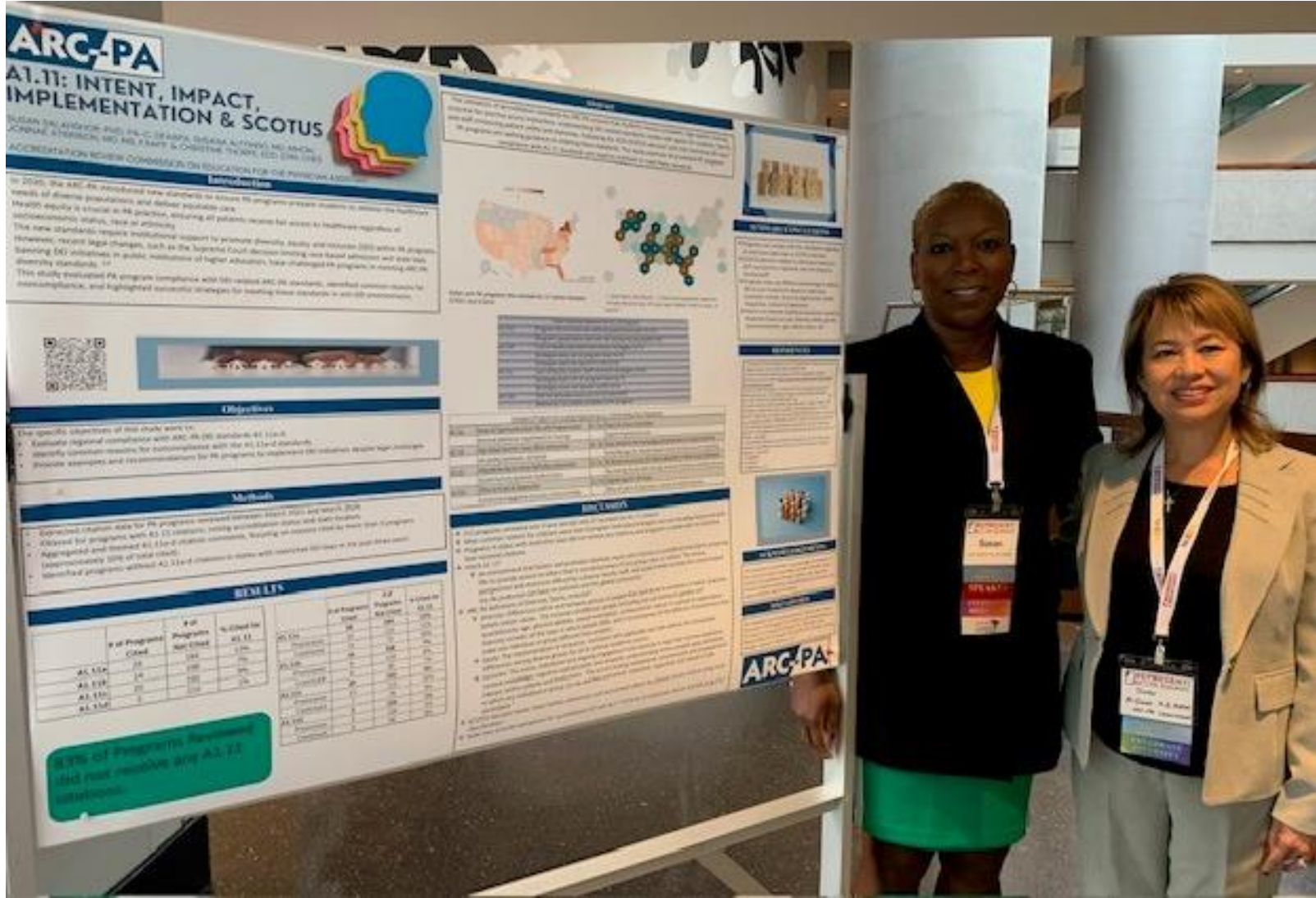
# A1.11

History, Definition, Data, Intent

A1.11 The sponsoring institution, in a manner consistent with its own mission and applicable laws, demonstrates a commitment to student, faculty and staff *diversity, equity,* and *inclusion* by*:*

a. supporting the program in having a documented action plan for *diversity, equity,* and *inclusion,*

b. supporting the program in implementing recruitment strategies,

c. supporting the program in implementing retention strategies,

d. making available resources which promote *diversity, equity,* and *inclusion.*

# Intent of the A1.11 Standard

An environment that fosters and promotes diversity, equity and inclusion is considered essential to preparing PAs to provide service to others that is not exclusionary of any group, race, or culture. The various perspectives and resources offered by a diverse faculty, staff, and student body increase the overall impact the PA profession can have on patients and the global community.[25]

83% of PA programs reviewed from March 2021-2024 did not receive any A1.11 citations

# ARC-PA Definition: Diversity

Differences within and between groups of people that contribute to variations in habits, practices, beliefs and/or values. The inclusion of different people (including but not limited to gender and race/ethnicity, age, physical abilities, sexual orientation, socioeconomic status) in a group or organization. Diversity includes all the ways in which people differ, and it encompasses all the different characteristics that make one individual or group different from another.[24]

Examples:

Faculty & Staff: Education module followed by discussion and dialogue

Student/Learner: Program/School DEI training, climate survey

## ARC-PA Definition: Equity

The implementation of resources, consistent with applicable law, that address the remediable differences among diverse groups for all to achieve academic success.[24]

Examples:

Faculty & Staff: salaries are the same regardless of gender based on the job description/experience.

Student/Learner: The program has tools to help that are comparable to other master's programs in the institution.

# ARC-PA Definition: Inclusion

The active, intentional and ongoing engagement with diversity in ways that increase awareness, content knowledge, cognitive sophistication and empathic understanding of the complex ways individuals interact within systems and institutions. The act of creating involvement, environments and empowerment in which any individual or group can be and feel welcomed, respected, supported, and valued to fully participate.[24]

Examples

Faculty & Staff: resource groups, college social events, community events

Student/Learner: school/institution group organization, community events

# ARC-PA Data Review, 2024

The utilization of accreditation standards to maintain compliance by ARC-PA is necessary to ensure that students receive quality training essential for practice.

The implementation of DEI related standards for accreditation sets the baseline for programs to create safe/brave spaces for students, faculty, and staff and translate into safety in patient care.

In light of the SCOTUS decision in 2023[26] and new restrictive state laws regarding DEI,[1] PA programs have sought clarification on how to satisfy the expectations of the standards.

# Methods & Results

- ARC-PA conducted review of citation data from PA programs reviewed between March 2021-2024

- 212 programs reviewed over 3-year period; only 37 received any A1.11 citation.

- Most common reasons for citations were lack of program level plan/strategies and not including faculty and staff.

- Programs in states with restrictive laws did not receive any citations and programs in states with no restrictive laws received citations

- SCOTUS decision leaves intact holistic admissions and recruitment efforts for diverse classes without using racial classification[26]

- State laws provide exemptions for accreditation (UT[27] and AL[2]). TX limits to veterinary, dental, and MD programs.[4]

# Results

|  | # of Programs Cited | # of Programs Not Cited | % Cited for A1.11 |
|---|---|---|---|
| A1.11a | 28 | 184 | 13% |
| A1.11b | 14 | 198 | 7% |
| A1.11c | 20 | 192 | 9% |
| A1.11d | 2 | 210 | 1% |

|  | # of Programs Cited | # of Programs Not Cited | % Cited for A1.11 |
|---|---|---|---|
| A1.11a | 28 | 184 | 13% |
| Provisional | 14 | 112 | 11% |
| Continued | 14 | 72 | 16% |
| A1.11b | 14 | 198 | 7% |
| Provisional | 8 | 118 | 6% |
| Continued | 6 | 80 | 7% |
| A1.11c | 20 | 192 | 9% |
| Provisional | 13 | 113 | 10% |
| Continued | 7 | 79 | 8% |
| A1.11d | 2 | 210 | 1% |
| Provisional | 2 | 124 | 2% |
| Continued | 0 | 86 | 0% |

# Results

| | Most Common Reasons for A1.11 Citations |
|---|---|
| A1.11a | Program did not have own defined goals/action plan (n=13) |
| | Program's goals/action plan did not include faculty/staff (n=6) |
| A1.11b | Lack of faculty and staff recruitment strategies (n=7) |
| | Strategies were not at program level (n=4) |
| | Strategies were not specific to DEI (n=3) |
| A1.11c | Lack of faculty and/or staff retention strategies (n=8) |
| | Strategies were not at program level (n=7) |
| | Strategies were not specific to DEI (n=4) |
| A1.11d | Did not describe resources for faculty/staff |
| | Resources not readily available to PA program |

A visual map to help meet
A1.11 and its substandards

| A1.11a  Action Plan | | Diversity | Equity | Inclusion |
|---|---|---|---|---|
| | Students | | | |
| | Staff | | | |
| | Faculty | | | |
| | | | | |

| A1.11b Recruitment Strategies | | Diversity | Equity | Inclusion |
|---|---|---|---|---|
| | Students | | | |
| | Staff | | | |
| | Faculty | | | |
| | | | | |

| A1.11c Retention Strategies | | Diversity | Equity | Inclusion |
|---|---|---|---|---|
| | Students | | | |
| | Staff | | | |
| | Faculty | | | |
| | | | | |

| A1.11d Resources | | Diversity | Equity | Inclusion |
|---|---|---|---|---|
| | Students | | | |
| | Staff | | | |
| | Faculty | | | |

# Summary

- Programs have been able to meet the standards, regardless of restrictive state legislative laws or SCOTUS
- The SCOTUS decision is related to admissions decisions, NOT recruitment in general, and not related to faculty/staff.
- PA programs may use different terminology to address DEI at their institution based on state laws.
  - Examples include, Access & Opportunity, Health Disparities, Culture & Experience

**The goal is to improve healthcare outcomes caused by disparities based on <u>race</u>, <u>ethnicity</u>, <u>ability</u>, <u>gender</u>, <u>sexual orientation</u>, <u>age</u>, <u>veteran status</u>, etc.**

Questions?

You can also send questions to:
accreditationservices@arc-pa.org

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# Equity in Practice: Addressing Legislative Concerns and Accreditation Standards in the PA Profession

**Thank you for helping us gather attendance data!**