

Advancing the Work of Recruitment of Underrepresented Minorities to Family Medicine

Simone Ilia, DO | Carla Da Goia Pinto, MD, MPH

PRiMER. 2026;10:16.

Published: 4/29/2026 | DOI: 10.22454/PRiMER.2026.263301

To the Editor:

We read with great interest the recent article by Wong et al, titled “Promoting Diversity and Health Equity: Recruitment and Best Practices in Education,” that described a successful approach to increasing recruitment of underrepresented minority (URM) residents.¹ The authors incorporated a thoughtful, practical model that consisted of a holistic application review, faculty development, and intentional bias training. We want to emphasize the incredible work already accomplished and encourage future studies to further develop their work.

The increase in URM applicants who matched in the author’s program is impressive. Many programs struggle to consistently recruit URM residents. Prior studies have described several factors that influence medical students’ rank list and the influence of gender and URM status on residency program rankings.² Among URM applicants, patient population and visible gender and ethnic diversity among residents and faculty were cited as key considerations for choosing a program.³ This recent study not only builds on these findings, but also offers a valuable framework that may be adaptable across institutions.

We recognize the value of bias training for faculty and the addition of more diverse topics to the curriculum included in this study. From our experience and prior research, bias training is inherently valuable. Studies have shown that bias training increases awareness of personal bias.⁴ Future studies could further explore how these components influence both applicant perceptions and program culture over time.

While prior studies had indicated that diversity in faculty and patient population was key in recruitment of URM residents, this study proves that high-impact, modifiable factors do exist. These findings open the door for further investigation to explore why residents choose a specific program. Wong and colleagues’ study also showed that meaningful progress in the recruitment of URM residents can occur in a short amount of time with the correct tools. Additional feedback captured through process evaluations from key stakeholders (DEI committee, faculty, and residents) on the implementation of this model may be considered in future studies to help guide other residency programs toward effective and sustainable strategies for creating a diverse and inclusive training environment.

Wong et al’s work demonstrates that progress in equity-focused recruitment is achievable and replicable. While different recruitment strategies may help residents initially choose a program, it is program culture and structure that keeps them satisfied with their training experience. Ultimately, the goal in recruiting URM residents is not only to get them in the door, but also to help them find a place where they feel safe and they belong.

Author Affiliations

Simone Ilia, DO - Department of Clinical Medicine, University of Tennessee Nashville Family Medicine Residency, Murfreesboro, TN

Carla Da Goia Pinto, MD, MPH - Department of Family & Community Medicine , University of Illinois at Chicago, Chicago, IL

References

1. Wong J, Adetoye M, Parker-Featherstone E, et al. Promoting diversity and health equity: recruitment and best practices in education. *PRiMER Peer-Rev Rep Med Educ Res*. 2025;9:32. doi:10.22454/PRiMER.2025.166556
2. Agawu A, Fahl C, Alexis D, et al. The influence of gender and underrepresented minority status on medical student ranking of residency programs. *J Natl Med Assoc*. 2019;111(6):665-673. doi:10.1016/j.jnma.2019.09.002
3. Boatright D, London M, Soriano AJ, et al. Strategies and best practices to improve diversity, equity, and inclusion among US Graduate Medical Education programs. *JAMA Netw Open*. 2023;6(2):e2255110. doi:10.1001/jamanetworkopen.2022.55110
4. Carnes M, Sheridan J, Fine E, Lee YG, Filut A. Effect of a workshop to break the bias habit for internal medicine faculty: A multisite cluster randomized controlled study. *Acad Med*. 2023;98(10):1211-1219. doi:10.1097/ACM.0000000000005271

Copyright © 2026 by the Society of Teachers of Family Medicine