

LETTER TO THE EDITOR

Scholarship on the Minority Tax for Medical Students: Advancing the Cause for Change

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We appreciate this thoughtful letter¹ on the article we coauthored, “Minority Tax on Medical Students: A Review of the Literature and Mitigation Recommendations,”² and we agree about the importance of pipeline programs to recruit and then support underrepresented in medicine (URiM) trainees in the medical field, especially academic medicine. The frustration the letter authors expressed as learners experiencing the minority tax is valid and echoes the sentiments from the articles reviewed in the original manuscript. In fact, the idea to complete this narrative review was sowed when Kristina Dortche, a coauthor and URiM medical student who collaborated with Renée Betancourt, a faculty member, to increase health equity concepts in a family medicine clerkship didactic.

The letter authors raise an important concern about the possible increase in the minority tax for students without diversity, equity, and inclusion (DEI) teams and offices. Without DEI offices, student affairs administrators within medical schools remain accountable to the entire student body and to the patients that will receive care from the students. One of the joys of collaborating to write the original manuscript was the development of a list of strategies that medical school faculty and administrators—especially those in student affairs—can engage to recognize the valuable contributions URiM students make and to mitigate the minority tax. We hope that all within the academic medicine community can use this manuscript within their own institutions to validate students’ experiences, call attention to the minority tax at play, and use the recommendations to advance positive change.

Recently Sánchez et al³ developed a workshop that teaches individuals in

the academic medicine community who may be experiencing the minority tax to build diversity capital, strategically advancing career goals through diversity activities. And medical students applying into residency can highlight such diversity efforts using a strengths-based approach in their personal statement and experiences because such activities and characteristics are highly valued by family medicine residency programs during recruitment.⁴ We are thrilled to see other teams build on these efforts to study the minority tax and recommend strategies for students, faculty, and medical school leaders.^{5,6} To this end, we applaud the letter authors’ scholarly work that continues to explore the experiences of URiM graduates for the purposes of developing strategies to improve experiences for medical students with respect to the minority tax.

We thank the authors for their letter, and we continue to be inspired by the work on the minority tax among medical students that has been published since our paper. We believe that these efforts—including those of the letter authors—in critically engaging this manuscript through academic dialogue will continue to advance the cause of equity in medical education.

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