

RESEARCH ARTICLES

Bridging Horizons: Identifying Key Domains for Recruiting Latino and Hispanic Students to Medical Schools

Arelys N. Hernandez, B.S.¹✉[†], Minerva Ramirez, B.S.A¹✉[†], Alexandria N. Padro, B.S.¹✉[†], Diego F. Alvarez, MD, Ph.D.²✉

¹ College of Osteopathic Medicine, Sam Houston State University, ² Tillman J. Fertitta Family College of Medicine, University of Houston

Keywords: Latino/Hispanic, representation, medical students, mentorship, barriers, medical school matriculation, recruitment, medical education

<https://doi.org/10.59867/001c.146442>

Journal of the National Hispanic Medical Association

Vol. 3, Issue 2, 2025

ABSTRACT

The Latino/Hispanic population comprises about 19% of the total U.S. population, contributing cultural traits that are recognized as social determinants of health, with language disparities being one such factor that can significantly influence health outcomes. Expanding representation in medicine improves Latino/Hispanic outcomes within the health care system. However, only 5.8% of physicians in the United States identify as Latino/Hispanic, highlighting the importance of recruiting and retaining Latino/Hispanic medical students. This pilot study explores factors influencing Latino and Hispanic medical student recruitment. A comprehensive survey was conducted focusing on personal experiences and perceptions, including oral audio recordings to capture in-depth narratives. Twenty-two medical students from Sam Houston State University College of Osteopathic Medicine who identify as Latino/Hispanic participated in the study. The study covered four main themes: identity and community, pathways to medical school, key influences and barriers on the pathway to medicine, and advice for prospective students. The findings of this study identified six major themes that are critical for the recruitment of Latino/Hispanic medical students. These themes include family and community support, resilience and hard work, early interest in medicine, personal familial experiences with medicine, the importance of mentorship, hands-on health care experience, and self-confidence. Applying these themes will enhance the number of Latino/Hispanic students applying to positions in medicine.

INTRODUCTION

According to the U.S. Census, the Hispanic/Latino population is projected to comprise 27.5% of the total population by 2060, a 93.5% increase from 2016.¹ However, the representation of this group in higher-paying professions continues to lag behind. For example, in the medical field, only

† Joint first authors

a A special thanks to Jacob Rivas for contributing to transcribing the audio recordings. Additionally, a special thanks to Michael Bouchoukian who assisted with the recordings. To Dr. Patrick Davis for the support provided from the office of research at Sam Houston State University College of Osteopathic Medicine.

5.8% of working physicians identified as Hispanic or Latino in 2018.¹ Despite significant efforts to increase representation in health care, medical school matriculation statistics still show that only 6.2% of undergraduate applicants to medical school identified as Latino/Hispanic in 2018-2019, and only 5.3% of the graduating class of the same year identified as such.² The 16.98% attrition rate highlights the challenge of both recruiting and retaining Latino/Hispanic individuals interested in pursuing a career in medicine.

The lack of representation has significant economic and social consequences. Hispanic physicians are recognized assets to the community.³ They are more likely to work in underserved areas, increasing access to quality care for marginalized populations. Hispanics contribute significantly to the U.S. economy, providing nearly \$3.2 trillion of the U.S. gross domestic product in 2023 alone.⁴ Hispanic physicians are well-positioned to mitigate health inequalities among populations by extending culturally competent care and investing in the well-being of underserved communities.³

Cultural identity and awareness

Cultural awareness has become increasingly important as research highlights the benefits of an all-encompassing health care system. Patients who receive care from culturally informed physicians often experience improved satisfaction and well-being.⁵ Improved outcomes can be attributed to the physician's ability to understand how various aspects of a patient's life and perspective influence their health. For instance, Latino/Hispanic immigrant patients may face difficulties due to language barriers, community distrust, and the challenges of acculturating to American culture.⁶ Even U.S.-born Latino/Hispanic patients who grew up with their cultural heritage may struggle to find physicians who understand their unique perspective shaped by two distinct cultural value systems.⁷

Latino/Hispanic culture strongly emphasizes the importance of family, leading many individuals to develop a sense of distrust toward outsiders and a reluctance to disclose personal struggles to unfamiliar individuals.⁸ Patients hope to find a physician who will not only treat their ailments but also understand the complexities of being a Latino/Hispanic in the U.S., where values like family, social politeness, personalism, and respect hold significant importance.⁷⁻⁹ Additionally, Latino/Hispanic physicians can offer more realistic treatment options, as they possess intimate knowledge of patients' routines, including eating habits, social practices, gender roles, expectations, and religious beliefs.⁹

Barriers for Latino/Hispanic students

Pursuing a medical career is undeniably challenging, requiring rigorous academic coursework, extensive schooling, laborious standardized test preparation, and significant extracurricular involvement. These challenges can

be even more pronounced for Latino/Hispanic students. Beyond potential language barriers, many students lack the financial resources to attend a four-year university or purchase necessary study materials.^{10,11} Additionally, family expectations to contribute financially after high school can further complicate the pursuit of a medical career, as students may need to balance employment, academic responsibilities, and extracurricular activities.¹¹ Some students may have delayed their pursuit of higher education due to uncertainty about their career goals. Without guidance or mentorship, these individuals may struggle to navigate the transfer process or apply to a four-year university. Furthermore, self-doubt and feelings of inadequacy can hinder their progress, particularly if they have been out of school for an extended period.^{12,13}

Previous research on the challenges faced by Latino/Hispanic medical students has focused on identifying effective strategies to increase their representation in medical school. These strategies include efforts in revamping Latino Medical School Association chapters and increasing Latino/Hispanic representation on admissions committees.^{10,14} Moreover, increased Latino/Hispanic applications to medical school are linked to introducing the concept of medical careers early in students' education, improving access to institutional resources, fostering networking between physicians and prospective students, and providing financial support through paid research or internships.^{11,15,16} Some institutions have also implemented programs that offer Latino/Hispanic students firsthand experiences in providing health care to underserved communities.¹⁷ While these strategies have shown promise in raising interest in medical careers among Latino/Hispanic students, further research is necessary to fully understand the motivations and experiences of those who have successfully matriculated into medical school.

The Current Study

The pressing need for increased Hispanic/Latino representation in the physician workforce necessitates an exploration into the motivations and major deterrents for students who have already matriculated into medical school. By recognizing the rich tapestry of geographic and cultural experiences within the Latino/Hispanic community, this pilot study explores the development of strategies to mitigate health inequities. These strategies, extracted directly from the firsthand experiences of current medical students through open-question interviews, are essential for fostering equitable access to medical education and promoting health equity. Furthermore, the use of AI for thematic analysis provides a comprehensive and unbiased look at the results by removing the possibility of author positionality.

METHODS

Study Design

The pressing need for increased Latino/Hispanic representation in the physician workforce prompted this study. This comprehensive survey was approved by the institutional review board at Sam Houston State University College of Osteopathic Medicine (SHSU-COM). A qualitative survey approach using thematic analysis was conducted to explore the personal experiences and perceptions of Latino/Hispanic medical students. The survey posed to each student entailed these four questions:

1. What does being Latino/Hispanic mean to you?
2. When did you first envision yourself becoming a medical student?
3. What experiences guided you in this direction?
4. What advice would you give to undergraduate students considering a career in medicine?

The goal of this exploratory study was to gain insights into the major factors that motivated their commitment to this demanding career, how their identity and experiences have shaped their medical journey, and potential barriers faced by other Latino/Hispanic students aspiring to become physicians.

Participants

The study included 22 first- through fourth-year students at SHSU-COM, whose backgrounds ranged from native to second-generation Latino/Hispanic. Participation was voluntary and recruitment was done via advertisement from Latino/Hispanic organizations at SHSU-COM. Anyone who was an enrolled student, identified as Latino/Hispanic and had the time available to record their response was welcome to join the study.

SHSU-COM has approximately 480 attendants, of which 129 identify as Latino/Hispanic. The 22 respondents make up 1/6th of the total population of Latino/Hispanic students enrolled at SHSU-COM. Of the 22 participants who completed the survey none were excluded and each participant answered all four questions. From the included participants, 11 (50%) were female and 11 (50%) were male.

Data Analysis

All 22 responses were transcribed and subsequently reviewed using ChatGPT 3.0. Using artificial intelligence for thematic analysis allowed for theme identification. By applying advanced natural language processing, AI can

detect subtle semantic patterns and similarities in meaning. For multilingual or culturally diverse datasets, AI is capable of capturing nuances across different expressions of similar ideas. Other advantages of using AI included increased efficiency during the initial coding phase, allowing researchers to develop meaningful themes, and improving the overall efficacy of the thematic analysis process. It is important to note that AI was not used to replace researchers but rather to enhance the thematic analysis process.

To apply this in practice, the AI model powering ChatGPT was used to analyze 22 responses. The processing of each response went through these steps:

1. **Text Pre-processing** – Removal of stopwords (e.g., “and,” “the,” “is”) while preserving meaningful phrases such as “family support” or “cultural pride.”
2. **Text Representation** – Counting word occurrences and weighting words by their uniqueness across responses.
3. **Similarity Measurement** – Calculating the degree of similarity between responses.
4. **Clustering** – Applying hierarchical clustering to identify natural groupings without predefining the number of clusters, along with topic modeling to detect recurring themes.
5. **Theme Extraction and Labeling** – Identifying the most prominent words and representative responses within each cluster and assigning descriptive theme labels.

The AI then generated percentage distributions for each theme, along with representative keywords and sample quotes that informed the thematic labeling. These results were then displayed in horizontal bar charts, with each bar representing a theme and showing the proportion of participants whose responses aligned with that theme.

RESULTS

Cultural Identity

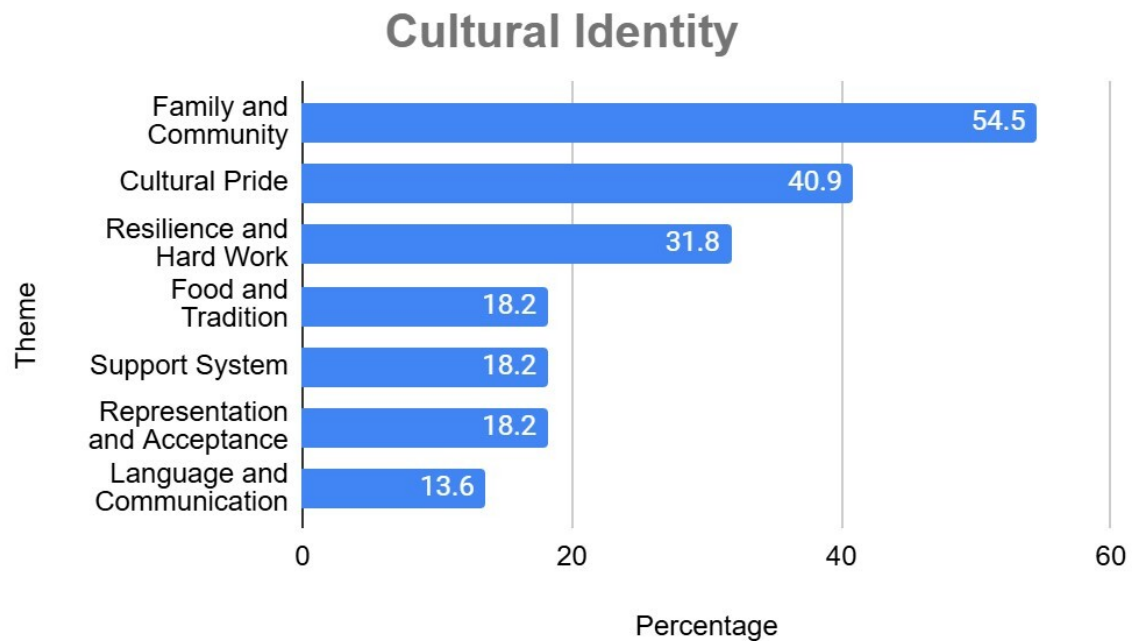


Figure 1. Major traits that Latino/Hispanics use for self-identification

The histogram depicts the major attributes that Latinos/Hispanics use to self-identify in the study. Data are being presented in a descending order. The seven categories were generated, with the most prevalent being “Family and Community” and the least prevalent being “Language and Communication.” Scant attributes were not categorized by AI and, therefore, are not included in the figure. The data represent clusters from 22 participants.

Using AI-generated cluster analysis, as described in our “METHODS” section, we identified the major themes that characterize how Latinos/Hispanics define their identity (See [Figure 1](#)). The most common theme was “**Family and Community**,” which accounted for 54.5% ($n = 12$) of responses and centered on the significance of close family ties and the local community. Following this theme was “**Cultural Pride**,” which emerged in 40.9% ($n = 9$) of responses, reflecting a strong sense of cultural identity. This was best illustrated by one participant who shared, “*Our culture is so deeply rooted in our community.*” The theme of “**Resilience and Hard Work**” was also prominent, appearing in 31.8% ($n = 7$) of responses, as reflected in comments such as, “*We are some of the most strong-willed and determined people.*”

In addition to these dominant themes, participants also described other meaningful aspects of identity that, while less common, provide important context. Three themes were equally present in 18.2% ($n = 4$) of responses:

“Food and Tradition,” highlighting the importance of culinary practices and customs; **“Support System,”** emphasizing the value of having people to depend on; and **“Representation and Acceptance,”** which focused on the feeling of cultural belonging. The theme of **“Language and Communication”** appeared in 13.6% ($n = 3$) of responses. Responses with fewer than two mentions were excluded to maintain thematic consistency.

Envisioning Medicine

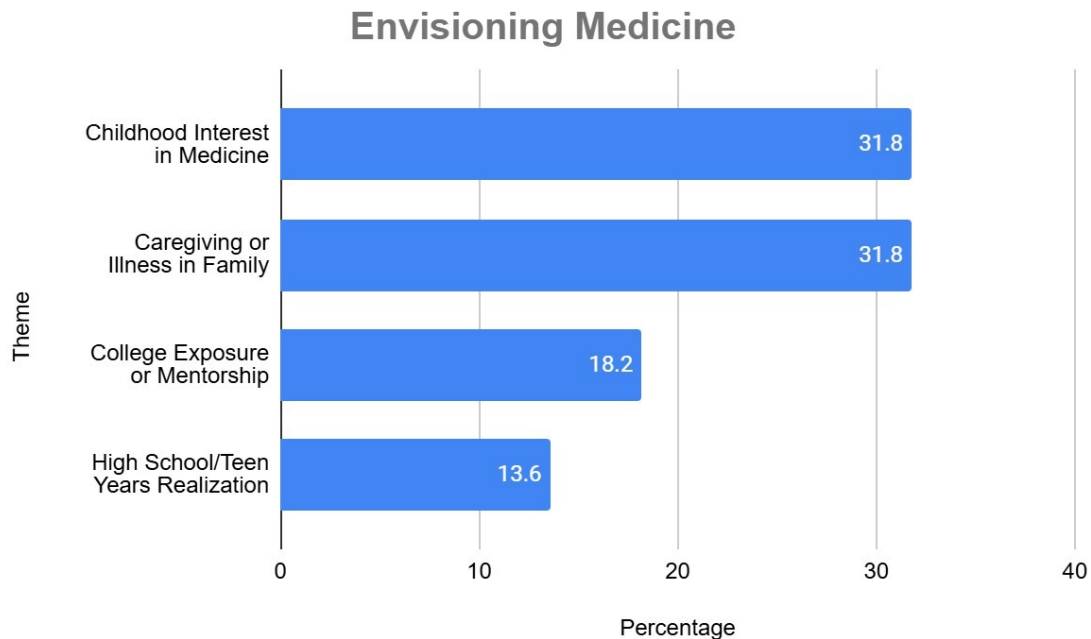


Figure 2. Initial vision of a medical career

The histogram depicts the major attributes that Latinos/Hispanics use to identify the period that was influential in pursuing a medical career. Data are being presented in a descending order. The four categories were generated, with the most prevalent being “Childhood Interest in Medicine” and the least prevalent being “High School/Teen Years Realization.” Scant attributes were not categorized by AI and, therefore, are not included in the figure. The data represent clusters from 22 participants.

Using AI-generated cluster analysis, as described in our “METHODS” section, we identified the major themes that characterize how Latinos/Hispanics first envisioned themselves pursuing a medical career (see [Figure 2](#)). The most common themes were **“Childhood Interest in Medicine”** and **“Caregiving or Illness in Family,”** each appearing in 31.8% ($n = 7$) of responses. One participant noted, *“From as far back as I can remember, I’ve always wanted to be a physician,”* illustrating the early inclination toward the field. Personal experiences, such as observing a grandparent manage diabetes, cancer, or dementia, also served as catalysts for pursuing medicine.

In addition to these early influences, participants described experiences during their academic journeys that further shaped their interest in medicine. The theme of **“College Exposure or Mentorship”** emerged in 18.2% (n = 4) of responses, as guidance from mentors and higher education experiences helped clarify career aspirations. One participant shared,

“The idea that this was a possibility really came from the mentors I had in my life.” Finally, **“High School/Teen Years Realization”** appeared in 13.6% (n = 3) of responses. Responses with fewer than two mentions were excluded to maintain thematic consistency.

Guiding Experiences

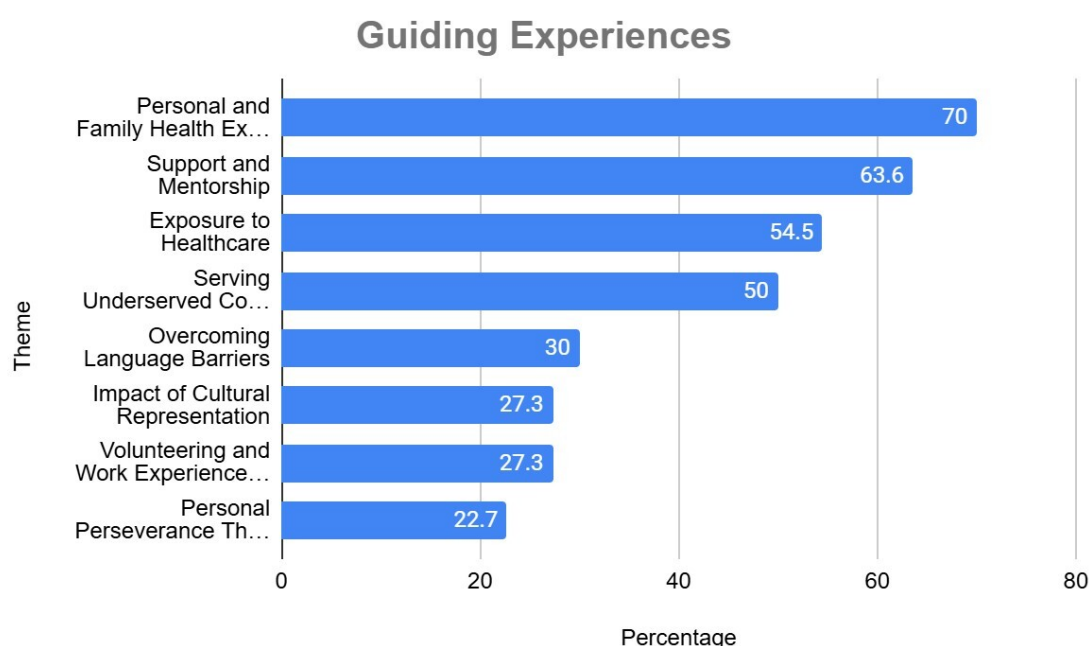


Figure 3. Major Guiding Experiences for Latinos/Hispanics Pursuing Medicine

The histogram depicts the major attributes that Latino/Hispanic use to identify guiding experiences that further impacted their decision to pursue medicine. Data are being presented in a descending order. The eight categories were generated, with the most prevalent being “Personal and family health experiences” and the least prevalent being “Personal perseverance through challenges.” Scant attributes were not categorized by AI and, therefore, are not included in the figure. The data represent clusters from 22 participants.

Using AI-generated cluster analysis, as described in our “METHODS” section, we identified the major guiding experiences that influenced Latino/Hispanic students to pursue medicine (see [Figure 3](#)). The 22 responses to the third survey question were analyzed for common themes. The most frequently cited motivator was **“Personal and Family Health and**

Experiences,” reported by 70% (n = 15) of respondents. This was closely followed by **“Support and Mentorship”** at 63.6% (n = 14), and **“Exposure to Health Care,”** which appeared in 54.5% (n = 12) of responses. Many participants were also driven by a desire for **“Serving Underserved Communities,”** mentioned in 50% (n = 11) of responses.

In addition to these primary influences, other factors played a meaningful role in shaping participants’ paths. **“Overcoming Language Barriers”** motivated 30% (n = 7) of respondents, while the **“Impact of Cultural Representation”** highlighted the importance of seeing providers who reflected their own communities. **“Volunteering and Work Experience in Health Care”** was noted by 27.3% (n = 6), and **“Personal Perseverance Through Challenges,”** such as overcoming financial barriers and self-doubt, appeared in 22.7% (n = 5) of responses.

Together, these themes underscore the combined influence of personal experiences, community exposure, and mentorship in guiding career aspirations. Participants shared accounts of growing up in underserved areas and witnessing the need for health care, serving as translators for Spanish-speaking patients, and volunteering in research labs or mentoring local youth, which illustrated how these experiences inspired a commitment to medicine.

Advice for Undergraduates

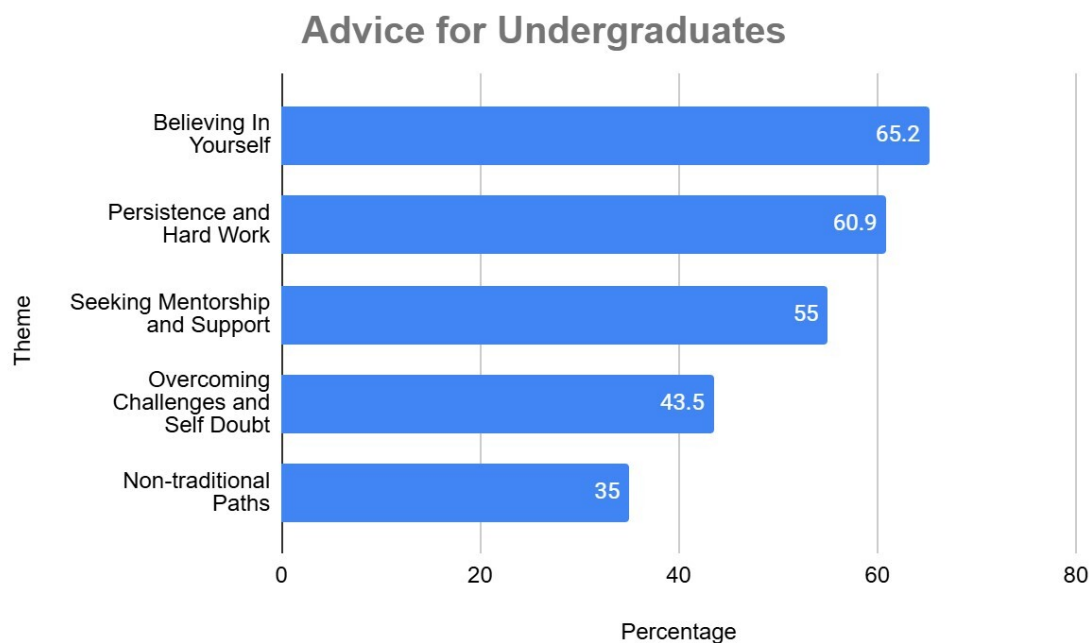


Figure 4. Recommendations for Future Medical Professionals from Latino/Hispanic Participants

The histogram depicts the responses of Latinos/Hispanics to advise undergraduate students who are interested in pursuing a career in medicine. Data are being presented in a descending order. The five categories were

generated, with the most prevalent being “Believing in Yourself,” and the least prevalent being “Non-traditional Paths.” Scant attributes were not categorized by AI and, therefore, are not included in the figure. The data represent clusters from 22 participants.

Using AI-generated cluster analysis, as described in our “METHODS” section, we identified the recommendations that Latino/Hispanic students would offer to undergraduate students interested in pursuing medicine (see [Figure 4](#)). The 22 responses to the fourth survey question were analyzed for common themes. The most frequently cited recommendation was “**Believing in Yourself**,” appearing in 65.2% (n = 14) of responses. One participant emphasized, “*Positive affirmations are crucial because self-doubt and impostor syndrome are common hurdles to overcome in this field,*” highlighting the importance of maintaining confidence throughout the journey. Following closely, “**Persistence and Hard Work**” was noted by 60.9% (n = 13) of respondents, reflecting the need to overcome setbacks and remain committed to long-term goals.

“**Seeking Mentorship and Support**” was reported in 55% (n = 12) of responses, underscoring the value of guidance from experienced individuals. One participant shared, “*Find someone who can mentor you, someone who believes in you,*” illustrating the critical role of mentorship in navigating challenges and opportunities. “**Overcoming Challenges**” appeared in 43.5% (n = 10) of responses, with participants describing obstacles such as financial limitations, self-doubt, and academic pressures. Finally, “**Non-traditional Paths**” emerged in 35% (n = 8) of responses, encouraging students to recognize that multiple routes can lead to success in medicine.

DISCUSSION

The purpose of this study was to identify themes among Latino/Hispanic students pursuing a career in medicine that were critical in shaping their academic and professional trajectories. Additionally, the study aimed to utilize these insights to enhance strategies for recruiting and retaining more Latino/Hispanic students in medicine.

Theme 1: Cultural Identity and Sense of Belonging

Cultural identity emerged as the most prominent theme among participants, frequently described through cultural pride, strong family ties, and a sense of community. Although other aspects, such as food and tradition, support systems, representation and acceptance, and language and communication were mentioned less frequently, they remain significant components of identity. These results suggest that for many students, being Latino/Hispanic is primarily rooted in cultural pride, familial relationships, and communal bonds.

While participants in this study did not explicitly report experiences of discrimination, existing literature highlights that many minority students pursuing higher education encounter such challenges. These experiences have been linked to lower rates of academic persistence and success.¹⁸⁻²⁰ Therefore, adapting the aforementioned attributes to create representative environments through student organizations, culturally affirming events, and supportive faculty can foster a stronger sense of belonging and promote the success of Latino/Hispanic students in the medical field.

Theme 2: Early Inspiration and Pathways to Medicine

The second most common theme involved the participants' initial vision of a medical career. For many, this interest originated in childhood and was inspired by caregiving roles or family illness. Less frequently mentioned, though still significant, were motivations that arose during adolescence, through college exposure or mentorship, or as part of a non-traditional or later career change.

Previous research has indicated that students from underrepresented backgrounds often lack early access to academic preparation, career guidance, and community support, making medical school appear inaccessible.²¹ Although nonprofit organizations such as the Latino Medical Student Association (LMSA) and the National Hispanic Medical Association offer mentorship programs, they are student and physician-run structures that face financial and time constraints.²² A potential solution to this issue involves schools providing both financial and advisory support to organizations such as local LMSA chapters or other Latino/Hispanic student organizations. By increasing this support, these local chapters gain the means to educate other medical students about Latino/Hispanic cultures. Additional solutions involve medical schools partnering with local high schools to provide early exposure to the medical field and raise awareness of existing support systems. Programs such as the Joint Admission Medical Program in Texas exemplify this approach by targeting economically disadvantaged students, defined as those eligible for a Pell Grant or with an Estimated Family Contribution under \$8,000.²³ Increasing awareness and accessibility of such programs may enhance the pipeline of Latino/Hispanic students pursuing medicine.^{10,22}

Theme 3: Guiding Influences and the Call to Serve

The third identifiable theme that emerged as a major guiding influence for Latino/Hispanic individuals pursuing a career in medicine included personal and family health experiences, strong support and mentorship, early exposure to health care, and a deep desire to serve underserved communities. These influences were often rooted in lived experiences within their families and communities, which helped cultivate both a personal and professional mission toward health equity.

Less frequently mentioned, though still significant, were factors such as overcoming language barriers, the impact of cultural representation in health care, volunteering or working in medical settings, and personal perseverance in the face of systemic and individual challenges. A common thread across these narratives was a deep commitment to giving back to their communities, often stemming from firsthand exposure to the disparities faced by Latino/Hispanic populations. Respondents frequently described observing inadequate or culturally insensitive medical care, especially due to language barriers and miscommunication.

Thus, for many Latino/Hispanic students, the pursuit of medicine represents both a professional ambition and a powerful act of advocacy. Increasing the representation of culturally and linguistically competent Latino/Hispanic physicians is one pathway to closing persistent gaps in care, particularly those driven by language discordance. Linguistic barriers between patients and providers often result in poor communication, misunderstanding of important health information, and even a reluctance to seek care altogether.²⁴ These factors contribute to disparities in the quality and accessibility of health care and may directly reflect the social determinants of health.²⁵

While cultural competency is often promoted as a tool for mitigating health disparities, a growing body of literature suggests that training alone is not enough. Cultural competency programs frequently reinforce stereotypes, reduce cultural identities to simplistic traits, or overlook the heterogeneity within Latino/Hispanic populations altogether.^{26,27} Such approaches risk doing more harm than good, especially when they fail to consider the complex lived experiences and diverse backgrounds within ethnic communities. A more effective solution involves actively recruiting and supporting Latino/Hispanic medical students, who inherently bring cultural insight, language skills, and shared lived experiences to their future patient care. Additionally, incorporating cultural competency into the medical school curriculum, designed in collaboration with Latino/Hispanic students and faculty, can help mitigate these stereotypes.

Creating outreach programs that introduce medicine at a young age can further strengthen this pathway. These programs should target middle and high schools with large populations of students historically underrepresented in medicine, as early exposure has been shown to play a vital role in pursuing medical careers. Previous studies have examined and implemented such outreach efforts, which include (but are not limited to) health career explorations such as hospital tours, career panels, and clinical rotations; science enrichment activities such as classes on human body systems and case study roundtables; and academic support such as college application assistance and SAT tutoring.

The study found that, of 27 participants, 11 decided to pursue a career in STEM. In addition, many participants demonstrated growth in interpersonal and professional skills, developed clearer goals, experienced positive attitude changes, and fostered a stronger sense of self.²⁸

By investing in these future physicians, the medical community takes an important step toward addressing health disparities from within. Moreover, organizations like the American Medical Association have acknowledged this shift, emphasizing “precision education” that centers cultural identity as an asset in medical education. These models advocate for meeting learners where they are and leveraging their unique backgrounds to enhance both their training and the care they will provide.²⁹

Experiences and motivations of Latino/Hispanic medical students are deeply intertwined with the communities they serve. Supporting their pathway into medicine is not only about representation; it is a strategic and necessary step toward equitable health care delivery in the United States.

Theme 4: Recommendations for Aspiring Latino/Hispanic Medical Professionals

The theme focused on advice from current Latino/Hispanic medical students for future applicants. Key recommendations included seeking mentorship, believing in oneself, demonstrating persistence, and embracing non-traditional paths. Students emphasized the importance of resilience in overcoming obstacles and the value of non-traditional routes to medical school. Many shared that their paths were not linear and encouraged future applicants to remain open to diverse educational experiences. This guidance underscores a commitment to perseverance and a desire to empower others to pursue careers in medicine despite challenges.

Mentorship, especially for first-generation students, was emphasized as vital for navigating the complexities of the medical school application process, with research supporting that strong mentorship increases confidence and preparedness.^{30,31} Mentorship initiatives should include programs that pair medical students with underrepresented-in-medicine college students who are interested in pursuing a career in medicine. Mentorship should involve but not be limited to mock interviews, personal statement reviews, and application reviews. Mentors often provide encouragement and guidance to their mentees, and building these personal relationships can facilitate the application process while also providing mentees with a sense of belonging.

Limitations and Future Directions

The sample was small and drawn from a single osteopathic medical school, which may limit the generalizability of the findings to broader Latino/Hispanic medical student populations. Additionally, participation was voluntary, introducing potential self-selection bias, as individuals with strong

or positive experiences may have been more inclined to respond. AI tools such as ChatGPT were employed to support grammar correction and thematic organization; however, limitations have been documented with its use. In the context of thematic analysis, ChatGPT has been shown to produce varied outputs, which raises concerns regarding reproducibility.³³⁻³⁴ It is important to note that human-led thematic analysis can also result in variability.^{32,33} Additional limitations of ChatGPT include the fabrication of quotes or misattributions and the tendency to generate surface-level coding, in which deeper interpretive insights are often overlooked.^{32,33} Additionally, the quality decreases with longer documents or large datasets.^{32,33} With these limitations in mind, ChatGPT was used as an adjunct tool rather than being solely relied upon for thematic analysis. Care was taken to preserve the authenticity of participants' responses and themes.

The study did not capture the full range of diversity within Latino/Hispanic identities, such as national origin, generational status, or immigration experiences, which may have influenced responses. The retrospective approach, broad question prompts, and time constraint may have also introduced recall bias, which limited the ability to probe deeper into emerging themes. Additionally, no control group was included because our study did not aim to compare different ethnic groups; rather, it focused solely on the journey of Latino/Hispanic medical students.

Future research should involve a larger, multi-institutional, and diverse sample. Using mixed methods that combine qualitative interviews with quantitative data would deepen interpretation. Longitudinal studies tracking students over time would also be valuable in assessing how motivations, barriers, and support systems evolve throughout their educational journey. To build on these findings, interventions should prioritize early career exploration, guidance on the medical school application process, and mentorship from current medical students and physicians. Moreover, to enhance retention, efforts should focus on providing ongoing support and guidance in these areas as students progress toward graduation. By addressing these critical aspects, we expect to inspire and empower a new generation of Hispanic/Latino physicians and help reduce gaps in the health care workforce.

Published: November 03, 2025 EDT.



This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CCBY-NC-ND-4.0). View this license's legal deed at <https://creativecommons.org/licenses/by-nc-nd/4.0> and legal code at <https://creativecommons.org/licenses/by-nc-nd/4.0/legalcode> for more information.

REFERENCES

1. Vespa J, Medina L, Armstrong D. *Demographic Turning Points for the United States: Population Projections for 2020 to 2060*. U.S. Census Bureau; 2020. Accessed May 15, 2025. <https://www.census.gov/content/dam/Census/library/publications/2020/demo/p25-1144.pdf>
2. Association of American Medical Colleges. *Diversity in Medicine: Facts and Figures 2019*. AAMC; 2019. Accessed May 15, 2025. <https://www.aamc.org/data-reports/workforce/report/diversity-medicine-facts-and-figures2019>
3. Poll-Hunter N. 6% is not enough. AAMC. November 15, 2023. Accessed May 15, 2025. <https://www.aamc.org/news/6-not-enough>
4. Terrill M. 2023 LDC US Latino GDP report shows tremendous impact of Hispanics to US economy. ASU News. October 3, 2023. Accessed May 15, 2025. <https://news.asu.edu/20231003-discoveries-ldc-us-latino-gdp-report-impact-economy-asu-authors>
5. Gomez LE, Bernet P. Diversity improves performance and outcomes. *J Natl Med Assoc*. 2019;111(4):383-392. doi:[10.1016/j.jnma.2019.01.006](https://doi.org/10.1016/j.jnma.2019.01.006)
6. Ransford HE, Carrillo FR, Rivera Y. Health care-seeking among Latino immigrants: blocked access, use of traditional medicine, and the role of religion. *Journal of Health Care for the Poor and Underserved*. 2010;21(3):862-878. doi:[10.1353/hpu.0.0348](https://doi.org/10.1353/hpu.0.0348)
7. Ruiz E. Hispanic culture and relational cultural theory. *J Creativity Ment Health*. 2005;1(1):33-55. doi:[10.1300/j456v01n01_05](https://doi.org/10.1300/j456v01n01_05)
8. Marin BV. Hispanic culture: effects on prevention and care. *FOCUS*. 1991;6(4). Accessed May 15, 2025. <https://ahppublications.wordpress.com/wp-content/uploads/2011/06/focusv6n4-91.pdf>
9. Clutter A, Nieto R. *Understanding the Hispanic Culture*. USDA Natural Resources Conservation Service; 2023. Accessed May 15, 2025. <https://www.nrcs.usda.gov/sites/default/files/2023-04/Understanding%20the%20Hispanic%20Culture.pdf>
10. Alonso JS. Undue burden the medical school application process places on low-income Latinos. *Voices in Bioethics*. 2023;9. doi:[10.52214/vib.v9i.10166](https://doi.org/10.52214/vib.v9i.10166)
11. Talamantes E, Gonzalez K, Mangione CM, et al. Strengthening the Community College Pathway to Medical School: A Study of Latino Students in California. *Fam Med*. 2016;48(9):703-710.
12. Ball R, Alexander K, Cleland J. “The biggest barrier was my own self”: the role of social comparison in non-traditional students’ journey to medicine. *Perspect Med Educ*. 2020;9(3):147-156. doi:[10.1007/S40037-020-00580-6](https://doi.org/10.1007/S40037-020-00580-6)
13. Sims LR, Piercey RD, Elam CL, Clark CD. Finding their Way: How socially disconnected undergraduates approach pathways into the medical profession. *SSM - Qual Res Health*. 2023;4:100305. doi:[10.1016/j.ssmqr.2023.100305](https://doi.org/10.1016/j.ssmqr.2023.100305)
14. Corsino L, China FM, Yee L, Fuller AT. Increasing Latinx representation in the US medical schools: a top-ranked medical school’s experience. *Front Public Health*. 2022;10. doi:[10.3389/fpubh.2022.907573](https://doi.org/10.3389/fpubh.2022.907573)
15. Ajayi AA, Rodriguez F, de Jesus Perez V. Prioritizing equity and diversity in academic medicine faculty recruitment and retention. *JAMA Health Forum*. 2021;2(9):e212426. doi:[10.1001/jamahealthforum.2021.2426](https://doi.org/10.1001/jamahealthforum.2021.2426)
16. Chang KJ, Panchal D, Bowman J, Postma MJ, Mohsin H. Evaluating the impact of early career academic medicine workshops on medical students’ interest. *Cureus*. Published online 2023. doi:[10.7759/cureus.41710](https://doi.org/10.7759/cureus.41710)

17. Burgos JL, Yee D, Csordas T, et al. Supporting the minority physician pipeline: providing global health experiences to undergraduate students in the United States–Mexico border region. *Med Educ Online*. 2015;20(1):27260. doi:[10.3402/mco.v20.27260](https://doi.org/10.3402/mco.v20.27260)
18. Nora A, Cabrera AF. The role of perceptions of prejudice and discrimination on the adjustment of minority students to college. *J High Educ*. 1996;67(2):119-148. doi:[10.1080/00221546.1996.11780253](https://doi.org/10.1080/00221546.1996.11780253)
19. Fagun O. The future of diversity, equity and inclusion in higher education in United States. *Int J Res Innov Soc Sci*. 2025;9(Spec Issue III):1164-1175. doi:[10.47772/IJRISS.2025.903SEDU0088](https://doi.org/10.47772/IJRISS.2025.903SEDU0088)
20. Hussain M, Jones JM. Discrimination, diversity, and sense of belonging: experiences of students of color. *J Divers High Educ*. 2021;14(1):63-71. doi:[10.1037/dhe0000117](https://doi.org/10.1037/dhe0000117)
21. Association of American Medical Colleges. Priming the medical school pipeline: schools reach out to teens in minority and underserved communities. AAMC. September 29, 2016. Accessed May 9, 2025. <https://www.aamc.org/news/priming-medical-school-pipeline-schools-reach-out-teens-minority-and-underserved-communities>
22. Nakae S, Martinez S, Juarez JJ, Beltran Sanchez C. The impacts of engagement in the Latino Medical Student Association. *Health Equity*. 2023;7(1):109-115. doi:[10.1089/heq.2022.0099](https://doi.org/10.1089/heq.2022.0099)
23. Peck EK, Warne RT, Blum A, Hermesmyer P, Lopez E, Thomson W. Promoting access to medical education for low-income students. *The Advisor*. 2015;March:31-36. Accessed May 15, 2025. https://www.texasjamp.org/_resources/docs/The%20Advisor%20-%20Promoting%20Access%20to%20Medical%20Education%20for%20Low-Income%20Students.pdf
24. Escobedo LE, Cervantes L, Havranek E. Barriers in healthcare for Latinx patients with limited English proficiency-a narrative review. *J Gen Intern Med*. 2023;38(5):1264-1271. doi:[10.1007/s11606-022-07995-3](https://doi.org/10.1007/s11606-022-07995-3)
25. Chelak K, Chakole S. The role of social determinants of health in promoting health equality: a narrative review. *Cureus*. 2023;15(1):e33425. doi:[10.7759/cureus.33425](https://doi.org/10.7759/cureus.33425)
26. Hudelson P, Dogra N, Hendrickx K, et al. The challenges of integrating cultural competence into undergraduate medical curricula across Europe: experience from the C2ME “Culturally competent in medical education” project. *MedEdPublish*. 2016;5:10. doi:[10.15694/mep.2016.000010](https://doi.org/10.15694/mep.2016.000010)
27. MacKenzie L, Hatala A. Addressing culture within healthcare settings: the limits of cultural competence and the power of humility. *Can Med Educ J*. 2019;10(1):e124-e127. doi:[10.36834/cmej.52966](https://doi.org/10.36834/cmej.52966)
28. Kohut OB, Wang Z, Sanchez RR, Rausch JC, Nieto A, Minguez MM. Assessing the impact of a 6-year health sciences enrichment program for underrepresented minority youth on healthcare workforce diversity, career path, and public health. *Front Public Health*. 2023;11:1244593. doi:[10.3389/fpubh.2023.1244593](https://doi.org/10.3389/fpubh.2023.1244593)
29. American Medical Association. AMA grant program extends reach of precision medical education. *ama-assn.org*. March 31, 2025. Accessed May 9, 2025. <https://www.ama-assn.org/about/leadership/ama-grant-program-extends-reach-precision-medical-education>
30. Myers HE, Muhanna M, Maloney ME, et al. Medical Student Mentorship for Undergraduate Students Underrepresented in Medicine Improves Confidence and Knowledge About Medical School Application. *Cureus*. 2024;16(6):e63366. doi:[10.7759/cureus.63366](https://doi.org/10.7759/cureus.63366)
31. Hernandez A, Ramirez M, Padro A. The next generation of healers: Inspiring Latino and Hispanic students toward medicine. Poster presented at: Escalando Nuevas Alturas: Elevating Latine Health and Leadership; February 2025; Aurora, CO.

32. Lee VV, van der Lubbe SCC, Goh LH, Valderas JM. Harnessing ChatGPT for Thematic Analysis: Are We Ready? *J Med Internet Res*. 2024;26:e54974. doi:[10.2196/54974](https://doi.org/10.2196/54974)
33. Turobov A, Coyle D, Harding V. Using ChatGPT for Thematic Analysis. *arXiv Preprint*. Published online May 13, 2024. doi:[10.48550/arXiv.2405.08828](https://doi.org/10.48550/arXiv.2405.08828)