

DOCTORS

back to school



AMERICAN ACADEMY OF
FAMILY PHYSICIANS

*In cooperation with the
American Medical Association.*

**American Academy of Family Physicians
Doctors Back to School**
In cooperation with the American Medical Association

Introduction

Go “back to school” and shape a life

Like many family physicians, you may be practicing medicine today because you knew someone who inspired you to follow that path. Now the American Academy of Family Physicians (AAFP), in cooperation with the American Medical Association (AMA), is calling on you to fill a similar role for underrepresented minority children in your community by taking part in their Doctors Back to School (DBTS) program.

DBTS sends physicians into their communities to accomplish two primary goals: to pique young minority students’ interest in medicine, especially a primary care-providing specialty like family medicine, by introducing them to “real-life” role models, and to raise awareness of the need for more minority physicians. Taking part in this project, which requires only a small amount of your time, could have lasting benefits for the life of a young person, our medical community, and the health of many future patients. This tool kit provides all of the essentials you will need to participate in this program.

African Americans, Hispanic Americans, and Native Americans make up nearly a quarter of the U.S. population today and are expected to make up a third of the population within 30 years—but only 7 percent of physicians and 6 percent of medical school faculty members are from one of these underrepresented groups.

Increasing the number of minority physicians is critical to improving health care delivery throughout the system, and to addressing persistent racial and ethnic disparities in health care. Despite overall improvements in Americans’ health, minority Americans lag behind on nearly every health indicator, including health care coverage, life expectancy, and disease rates.

To help raise awareness of the need for more minority physicians, and to sow the seeds of interest for the next generation, we are asking you to set up and conduct a short visit to the school or community organization of your choice. By joining other minority doctors in this program, we can bring a national spotlight to our goal of increasing the number and the influence of minority physicians.

First, choose a place and audience that will work best for you, as the DBTS program is as much for you as it is for the children. The more comfortable you are, the better the experience will be for everyone.

Your goal is to give children from underrepresented minority groups a better idea of what family doctors, and other physicians, do and to help them recognize that they, too, can become successful members of our profession. Many schools and organizations that serve large numbers of minority children will be very receptive to this goal and will work with you to provide a forum that works for you and the children.

Things to consider:

- Would you prefer a classroom or assembly format?
- Would you like to speak to children in an after-school program or Sunday school class?
- This program targets children who are in middle school and high school. Does your presentation speak to this age group?

You can begin your search for a DBTS host by talking with people at community organizations to which you belong. If the organizations themselves do not work with minority children, perhaps other members will know of schools or organizations that would benefit from this event. You also can find community schools through the Internet or your local Yellow Pages.

Once you have chosen an organization, call to introduce yourself to its principal or director. Tell her or him about DBTS and schedule a time for a visit. For your convenience, this kit includes a script to help guide you through this initial conversation. The principal or director at your host organization should be able to shepherd the project through any administrative channels on her or his end or at least direct you to the proper people.

While many schools and community organizations will welcome your visit, they may have their own administrative procedures to follow. We encourage you to contact your chosen school or community organization to set up a date and time as soon as you can.

Introductory talking points:

- Hello, my name is _____. I am a family physician who lives/works near your school/organization.
- We, at the American Academy of Family Physicians (AAFP), in cooperation with the American Medical Association (AMA), are holding a program called Doctors Back to School where doctors, such as myself, go into community schools to encourage minority children to look at family medicine as a career.
- I'd like to talk to someone about setting up a time for me to visit some of the children at your school/organization. Is anyone available at this time?

Questions and answers:

What is Doctors Back to School?

AAFP Doctors Back to School is a program that aims to encourage children from underrepresented minority groups to look at family medicine as a career option. The original program was created by the AMA's Minority Affairs Section, whose main goal is to increase the number of minority physicians and eliminate minority health disparities. Since the program sends minority physicians into the community, it's also a great way to introduce kids to professional role models.

When do you want to visit my school/organization?

I would like to visit during the month of _____. Which date and time works best for you? I will send you a follow-up letter than contains background on the Doctors Back to School program. (See sample letter at www.aafp.org/dbts)

What are underrepresented minorities?

By underrepresented minority groups, we mean those people who are underrepresented in medicine compared to their population in the United States—African Americans, Hispanic Americans, and Native Americans, most specifically. Together these groups make up nearly a quarter of the U.S. population today and are expected to make up a third of the population within 30 years—but only 7 percent of physicians and 6 percent of medical school faculty members are from one of these groups.

How about other student groups? Shouldn't they be encouraged to become physicians as well?

We want children of all backgrounds to realize medicine is an option for them, and the more children we encourage to pursue medicine, the better. The reason we are focusing on African American, Hispanic American and Native American children is because these minority groups are still underrepresented in medicine.

Why do we need more minority physicians?

Our country is growing more diverse every day, so it's becoming especially important for physicians to provide culturally responsive health care. Although all physicians aim for "cultural proficiency," minority physicians are more likely to provide that care. Minority Americans lag behind white Americans on nearly every health indicator, including health care coverage, life expectancy, and disease rates. Studies show minority physicians are more likely than white physicians to practice in underserved areas, and they are more likely to care for minority, poor, underinsured, and uninsured people

What will you talk about?

My main goal is to help students understand that people of color can and do succeed in medicine. I will bring in a few medical props from my practice and try to share my experiences about getting into and practicing family medicine.

How long will you need?

I'd like at least 20 minutes, and I will not take more than an hour. Ideally we can work together to find a time frame that works best for you and your students.

A pre-visit checklist:

The following is a suggested checklist to help you plan your DBTS visit. Doing as much as possible ahead of time helps ensure that you will be able to focus your full attention on the children during your visit.

At least three to four weeks before your visit:

- Identify a school or community organization that serves children in an underrepresented minority group.
- Consider involving medical students and/or family medicine residents in your presentation. If you precept students or residents, invite them along. Contact a local medical school or family medicine residency program to invite FMIG students or residents to participate. This team effort can benefit you, the medical students and residents, and the students you're presenting to. For help contacting local medical school or residency faculty, contact Ashley Bentley at abentley@aafp.org.
- Arrange a date and time with the principal or director to visit a specific class or group of students. If you will be visiting with multiple groups of students, make sure you are given specific times and room numbers for each group.
- Fill out the participation form at www.aafp.org/dbts. This will allow the AAFP to track activities, evaluate the program, and make improvements over time.

Two weeks before your visit:

- Start thinking about your presentation to students. This action kit includes suggested presentation outlines for age groups: grades 7–9; and 10–12.
- Decide what, if any, props you will bring. Suggestions include stethoscopes, X-ray films, surgical masks and doctor's coats—items that will promote interest with the students.
- Tell the principal or director whether you will need any special items such as audiovisual equipment.
- Draw the principal or director's attention to the news release template included in the presentation toolkit (www.aafp.org/dbts) from the AAFP. If you want to try to draw members of the media to your event, now is the time to send that release.

One week before your visit:

- Confirm the date and time of your visit with the school office and/or the teacher.
- If collaborating with an FMIG, medical students, or residents, confirm arrangements.
- Find out where to park, whom to meet, and where to go.
- Find out about any special school security issues. Will you need to be escorted while you are on school grounds? Will you need to wear any special identification?
- Make sure any special items needed are ready and your schedule is clear for the necessary time frame.
- Finalize and begin rehearsing your presentation.

The day before your visit:

- Mentally review your presentation.
- Place any needed materials in your car or bag. If you can, pack a camera to have someone take photos of your visit.

The day of your visit:

- Arrive early.

- Be prepared for questions by any media personnel covering your visit.
- Relax and have fun!
- Have someone, such as the teacher, introduce you to the students, to help establish a connection.
- Involve your audience by asking and encouraging questions.
- If possible, have someone take photographs of you interacting with the group of children.
- Remember to ask the school about its procedures for parental photo release forms for any photos of children on the DBTS Web site.

Within one week after your presentation:

- Send the teacher and principal a thank you note. A sample is enclosed for your convenience.
- The AAFP and AMA-MAS offices would greatly appreciate any photos you could share for use in future DBTS stories or materials. Please send photos to Ashley Bentley at abentley@aafp.org. These photos will also be shared with AMA DBTS staff.
- Please provide your comments and feedback about the DBTS program by filling out and returning the evaluation form provided at www.aafp.org/dbts.
- Share your experience with a colleague and ask them to participate in the DBTS program.

Most frequently asked questions by kids during a DBTS visit:

- How long does a doctor have to go to school?
- How much money do you make?
- Did you ever goof off in school or get bad grades?
- Did you always want to be a doctor?
- What do doctors really do?
- To become a doctor, what classes should we concentrate on?
- What do you do when people can't pay you?
- What's your normal workday like?
- How do people get _____? (cancer, diabetes, etc.)
- Do you watch (name of popular TV show featuring physicians)?
- What happens when a patient dies?

What physicians had to say about their DBTS events and experiences:

- "I wasn't prepared for the level of enthusiasm from the students at the school I visited," said William McDade, MD, PhD. As a graduate of that school, Dr. McDade said he was a particularly welcome "success story" in the eyes of the students.
- Deborah Killingsworth, MD, treasures her "Very Important Person" certificate given to her by the children at Ryer Elementary School in Chicago.
- During a South Carolina grade school visit, Shelia Roundtree, MD, handed out surgical masks to fourth graders. "The goal is to plant a seed in their heads ... motivate them to realize they can do anything they want."
- In Alabama, Todd Coulter, MD, told students that high grades were "only the beginning.
- It's your attitude too that determines how far you go."
- Lonnie Bristow, MD, the first African American AMA president, told his group of

elementary students in California, “The reason I came here today is to tell you, if I can do it, you can do it. You just have to make up your mind that you can.”

- In Chicago, Frank Bearden, MD, reassured students that he had wanted to be a baseball player when growing up and didn’t become interested in medicine until he was a high school sophomore. “But now,” he said, “I get the same satisfaction from helping a patient that a baseball player gets with that big home run.”

Just remember—you are taking part in Doctors Back to School to expand children’s horizons, not impress them. That said, here are some presentation tips to help you communicate with your group most effectively.

- Familiarize yourself with the room beforehand.
- Know your audience, including age, demographics, and experience with physicians.
- Know your material.
- Bring some “show and tell” items to engage the children.
- Have someone introduce you, which will help establish a connection with the students.
- Relax and be yourself.
- Concentrate on the message, which is to spark interest in family medicine and help students.
- Let them see they are capable of becoming physicians themselves, and of practicing important primary care that is needed in their communities.
- Involve your audience.
- Expect the unexpected.
- Enjoy your presentation!

What else you can do to inspire children to think about careers in medicine:

- Set up visits at other schools or grade levels.
- Set up a time when interested students could visit your hospital, office, or clinic.
- Ask your colleagues to schedule DBTS visits.
- Establish a special fund at your alma mater for “future physicians.”
- Be a mentor, wherever you are.
- Involve medical students and residents in your presentation. FMIGs that find value in the program will look at continuing their participation year-after-year, and it is a great way to engage current medical students with family medicine.

Forms

- Pre-visit student evaluation form
- Post-visit student evaluation form
- Post-visit teacher/administrator evaluation form
- Post-visit physician evaluation form

Props/activities

- Stethoscope
- Scrubs
- X-ray film
- Lab coat
- Surgical masks

Seventh through ninth grade:

In some ways, kids in this age group are an ideal target for DBTS presentations because they have entered the stage where they get a voice in the classes they take, and they still have the ability to shape their high school career.

Young people this age have begun forming ideas about who they are and what they want, and they can process more sophisticated ideas. While they do not necessarily need visual aids to help them understand, props will help them visualize medicine and keep them engaged in the presentation. Suggested items to bring include: stethoscope, otoscope, ophthalmoscope, reflex hammer, and X-ray films. As with any age group, it is still best to frame your presentation in the context of their lives and experiences. You also can give them simple medical problems that require logical, analytical thinking to solve.

Emphasis with these young people should be on taking challenging courses in high school and going to college. Prior to your presentation, ask the teacher to provide a seating chart so you can call on kids by name when asking or answering questions.

Introduce yourself. “I’m a doctor at [name of institution].”

Ask the class some opening questions. “When you think of doctors, what do you imagine they do?” (Kids likely will reference pop culture depictions of physicians.) “What do you think family physicians do?”

Acknowledge which of their perceptions are correct and dispel the most outrageous myths.

- Explain that doctors specialize in many different areas, but all are focused on helping people.
- Ask the kids if they can name any different kinds of specialties.
- Have kids name any area of the body, inside or out, and tell them what specialties address that area.
- Describe the activities of your day and about family medicine. If you are a medical student, tell the kids why you want to pursue family medicine.
- Explain how family physicians practice primary care and treat patients of all ages, genders, every illness, and all systems and parts. Explain why the preventative medicine is important in helping people avoid illness.

If you brought any medical instruments to share, use them to engage the kids. Let them touch the instruments or speculate why they’re important to maintaining health. For example, one physician found kids this age to be interested in X-ray films. You can bring films of both patients and inanimate objects: chest scans, broken bones, purses with contents. Let the kids guess what the films show, and explain how X-rays work and why it’s important for doctors to use them.

A simple medical scenario that involves the students and allows them to use their problem-solving skills can be a good substitute for or complement to props.

Reward correct answers to your questions by allowing that student to try on your white coat.

Toward the last third of your presentation, ask the class what they think sounds most interesting about being a doctor.

Explain that being a family doctor makes you feel good because you can help people, but it takes a lot of work. Explain why all the hard work is worth it.

Emphasize that every single person in the class has the capacity to become a professional if he or she is willing to work hard enough. A doctor is one type of professional, and being a family doctor, in particular, is pretty special.

- “Right now, you all should start thinking seriously about going to college, which you absolutely must do if you want to become a doctor. And even if you have no interest in being a doctor, college will still help you get jobs you would never be able to get without a degree.”
- Ask kids to share what their least favorite school subjects are. (Usually it will be subjects they are struggling with.) Share which subject brought you the most grief when you were their age, or some other story about an academic difficulty you overcame.
- Emphasize the importance of building a strong foundation in math, science, and English.
- Acknowledge that the math and science they are taking now may not seem to have anything to do with medicine, but these subjects are critical to building the knowledge you need to become a doctor.
- “Keep going, push yourself, believe in yourself. Look at me. I did it. You can too.”

Encourage kids to talk to teachers and counselors about their college and career goals. If they are truly interested in medicine, encourage them to look for volunteer programs at the local hospital or health care center. Put the following websites on the chalkboard:

- Association of American Medical Colleges’ (AAMC) resources for pre-med students: <https://www.aamc.org/students/>
- Minority Association of Pre-medical Students (MAPS), for minority undergraduate and post-baccalaureate students: www.snma.org/premedical.php.
- Getting Into Medical School: aafp.org/med-ed

Thank the kids and the teacher for letting you visit. Distribute handouts and materials provided at www.aafp.org/dbts.

Tenth through twelfth grade:

When talking to young people in this age group, perhaps the most important thing to focus on is encouraging them to prepare for college. Those in their early high school years should be reminded that they need to take challenging course work as soon and often as possible, while those almost through must know they still have many options, even if they did not perform well

academically during high school.

Young people this age may have very strong ideas about who they are and what they want, or they may be feeling confused because they don't. You can help by not only showing them medicine as a route to take but also providing a voice from the professional world and acting as a sounding board for them to share their ideas about college and its relevance.

As with any age group, it is still best to frame your presentation in the context of their lives and experiences. You also can give them simple medical problems that require logical, analytical thinking to solve. A seating chart provided by the teacher will help you call on students by name when asking or answering questions.

Introduce yourself. "I'm a doctor at (name of institution)."

Ask the class some opening questions. "When was the last time you saw a doctor on TV or in the movies? What was he or she doing? How does that image fit with what you think doctors do in real life? Does this describe a family doctor (often the students will describe a family doctor without realizing it)?"

Acknowledge which of their perceptions are correct and dispel the most outrageous myths. Explain there are many avenues to pursue in medicine. In patient care alone, doctors can focus on age groups, certain areas of the body, or certain diseases. Explain how family physicians practice primary care and treat patients of all ages, genders, every illness, and all systems and parts. Explain why the preventative medicine is important in helping people avoid illness. Explain that there also are opportunities in research and academics.

If you brought any medical instruments to share, use them to engage the students.

Let them touch the instruments or speculate why they're important to maintaining health. If you can, think of a hypothetical medical scenario involving the prop and encourage class members to use their problem-solving skills.

As kids are looking at the prop, or after they are through solving the case study, describe the activities of your day as a family physician. If you are a medical student, tell the kids about why you want to pursue family medicine.

Emphasize that every single person in the class has the capacity to become a professional if he or she is willing to work hard enough. A doctor is one type of professional, and being a family doctor, in particular, is pretty special. Tell them it's never too late—and advise them on how to fill any academic gaps.

Ask the students how many plan to go on to college. Ask one person who plans to go why he or she plans to go, and what he or she plans to do.

Explain that you could not have been a physician without going to college. Give a brief educational history—make sure to cite the hard classes or periods and how you overcame or endured them.

It takes both planning and hard work to become a doctor. Encourage them to talk to their teachers or counselors about going to college.

Tell students even if they have not done very well, even if they are seniors, that they still can become doctors or at least go on to college if they are willing to take classes over or go on to community college. Cite examples of physicians you know who came into medicine late or who did not initially do well in school.

Ask the students what they think sounds most interesting about being a doctor. Tell them what you think is the most interesting.

Explain that being a family doctor makes you feel good because you can help people, but it takes a lot of work. Explain why all the hard work is worth it. Acknowledge that the math and science they are taking now may not seem to have anything to do with medicine, but these subjects are critical to building the knowledge you need to become a doctor.

Explain that there are a number of social and financial resources available for becoming a doctor and going to college. If they are truly interested in medicine, encourage them to look for volunteer programs at the local hospital or health care center. Encourage them to talk to teachers and counselors about their goals. The following sites also have good information—write them on the chalkboard for the students to take down:

- Association of American Medical Colleges' (AAMC) resources for pre-med students: <https://www.aamc.org/students/>
- Minority Association of Pre-medical Students (MAPS), for minority undergraduate and post-baccalaureate students: www.snma.org/premedical.php.
- Getting Into Medical School: aafp.org/med-ed

Distribute handouts provided by the AAFP at www.aafp.org/dbts. Thank the kids and the teacher for letting you visit.

Financial resources list:

Few students can afford to pay for college without some form of education financing. Listed below is information that may be useful as you plan for paying for your child's education.

Scholarships

Scholarships (undergraduate) and fellowships (graduate) help students pay for their education. Scholarships and fellowships do not have to be paid back. Many are given out each year.

Generally, scholarships and fellowships are given to students with special qualifications. These include:

- Financial need
- Academic, athletic, or artistic talent
- Students interested in certain fields of study
- Students who are members of underrepresented groups
- Students who live in certain areas of the country

Student loans

An education loan must be repaid, with interest. Education loans include:

- Student loans (e.g., Stafford and Perkins loans)
- Parent loans (e.g., PLUS loans)
- Private student loans (also called alternative student loans)
- Consolidation loan (allows the borrower to lump all loans into one for simplified payment)

More information is available through the AMA Web site and the U.S. Department of Education Web site (ed.gov).

Saving for college

Parents should expect to pay at least one-half to two-thirds of their children's college costs through a combination of savings, current income, and loans. Gift aid from the government, the college, or university and private scholarships accounts for only about one-third of total college costs.

It is very important that parents start saving for their children's education as soon as possible. The sooner you start saving for college, the more time your money will have to grow. Remember, it is less expensive to save for college than to borrow.

Even if college is just a year or two away, it is never too late to start saving. There are tax benefits to saving in a section 529 college savings plan or a prepaid tuition plan, and every dollar you save is a dollar less you'll need to borrow.

Section 529 college savings plans are one of the best college savings vehicles, in large part because control over the account remains with the parent. Other advantages include:

- Tax advantages
- Low impact on need-based financial aid
- Flexibility
- High contribution limits
- Lack of income phase-outs

Listed below are just some of the ways you can save for college:

- Section 529 plans: finaid.org/savings/529plans.phtml
- Credit card rebate and loyalty programs: finaid.org/savings/loyalty.phtml
- Savings social networking programs: finaid.org/savings/socialnetworking.phtml
- CollegeSure CD from College Savings Bank: finaid.org/savings/collegesavingsbank.phtml
- U.S. Treasury Savings Bonds: finaid.org/savings/bonds.phtml
- Coverdell Education Savings Accounts (formerly known as Education IRAs): finaid.org/savings/coverdell.phtml
- Saving in the parents' names: finaid.org/savings/parentname.phtml
- Section 2503(c) Minor's Trust: finaid.org/savings/2503ctrust.phtml
- Crummey Trust: finaid.org/savings/crummey.phtml
- Variable life insurance policies (using the cash value of your variable life insurance policy): finaid.org/savings/variablelife.phtml
- Home equity line of credit: finaid.org/savings/homeequity.phtml

For students who become physicians and practice primary care, there are loan repayment and scholarship options for many practice paths, including practicing in a medically underserved area. In addition, family physicians are the most recruited doctors, so there are many job opportunities with many benefits. For more information on debt avoidance and management for family physicians, visit www.aafp.org/debtmanagement.

Disclaimer: The American Academy of Family Physicians (AAFP) nor the American Medical Association (AMA) offer financial guidance and counseling, and the information included in this document is provided for informational purposes only. Individuals should consult with a professional financial adviser. Please note that a listing here does not indicate endorsement by the AAFP or AMA. The AAFP and the AMA are not responsible for content on non-AAFP and AMA websites.

For other materials related to the AAFP's Doctors Back to School, visit www.aafp.org/dbts. Thank you for your efforts to help minority students see a future in family medicine!