

# Diversity, Equity and Inclusion- Role of Early Career Cardiologists, Part 1: Vision and Scope



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Moderators

**Nadia Fida, MD, FACC**

Methodist Hospital, Houston, TX

**Newton Wiggins, MD, FACC**

Chattanooga Heart Institute, Chattanooga, TN



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Objectives

- To understand the barriers to improving DEI within the cardiology work force
- To identify actionable steps toward improved DEI in the cardiology work force
- Role and involvement of ECC in creating DEI



# Speakers

**Pamela S. Douglas, MD, MACC**

Duke University Medical Center, Durham, NC

**Julie M. Clary, MD, MBA, FACC**

Indiana University School of Medicine, Indianapolis, IN

**Tamara M. Atkinson, MD**

Portland VA Medical Center, Portland, OR



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Diversity, Equity, Inclusion and Belonging

## *....Creating a Movement*

Pamela S. Douglas, MD, MACC, FASE, FAHA

Ursula Geller Professor of Research in Cardiovascular Diseases  
Duke University

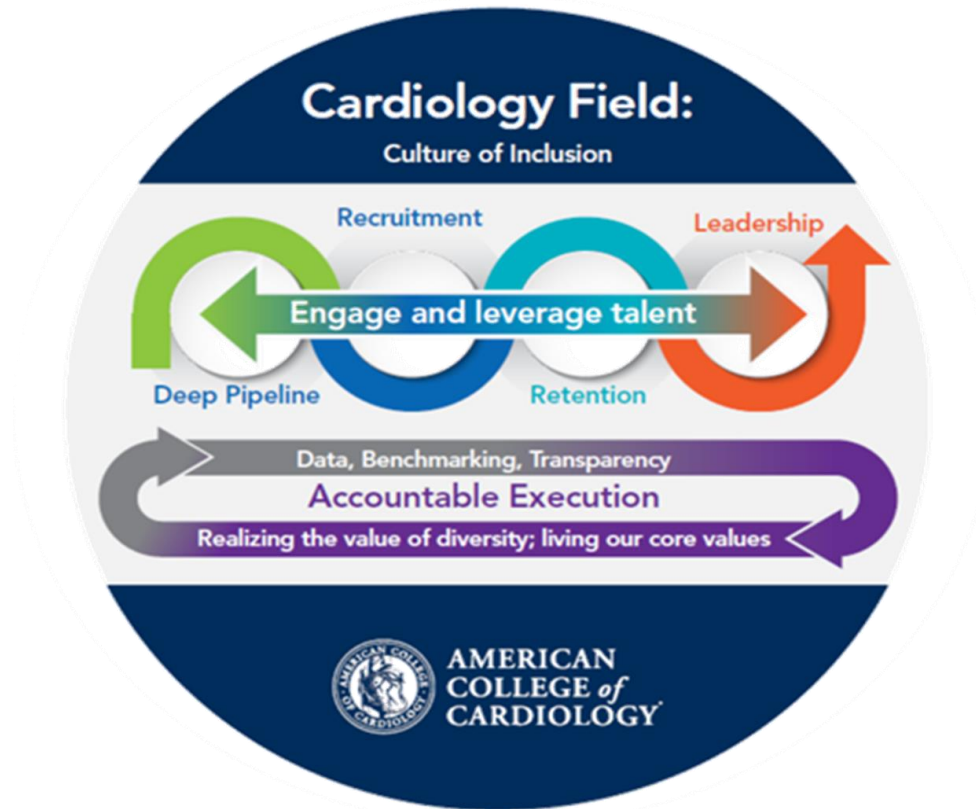
Past President, American College of Cardiology  
Past President, American Society of Echocardiography

Founding Chair, ACC Diversity and Inclusion Initiative



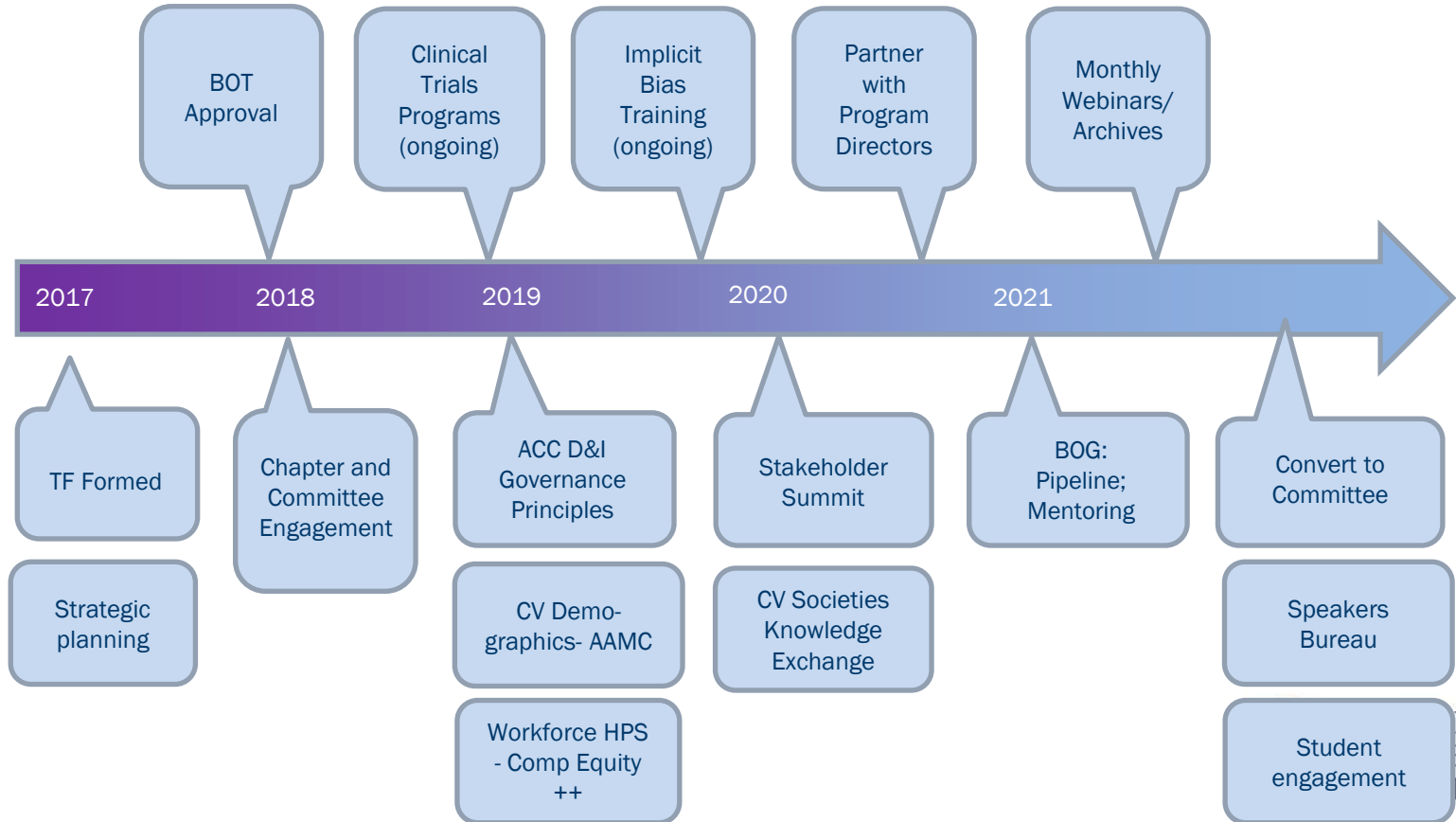
AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# ACC Diversity and Inclusion Initiative: Strategic Goals



AMERICAN  
COLLEGE of  
CARDIOLOGY

# ACC D&I Timeline (Snapshot)



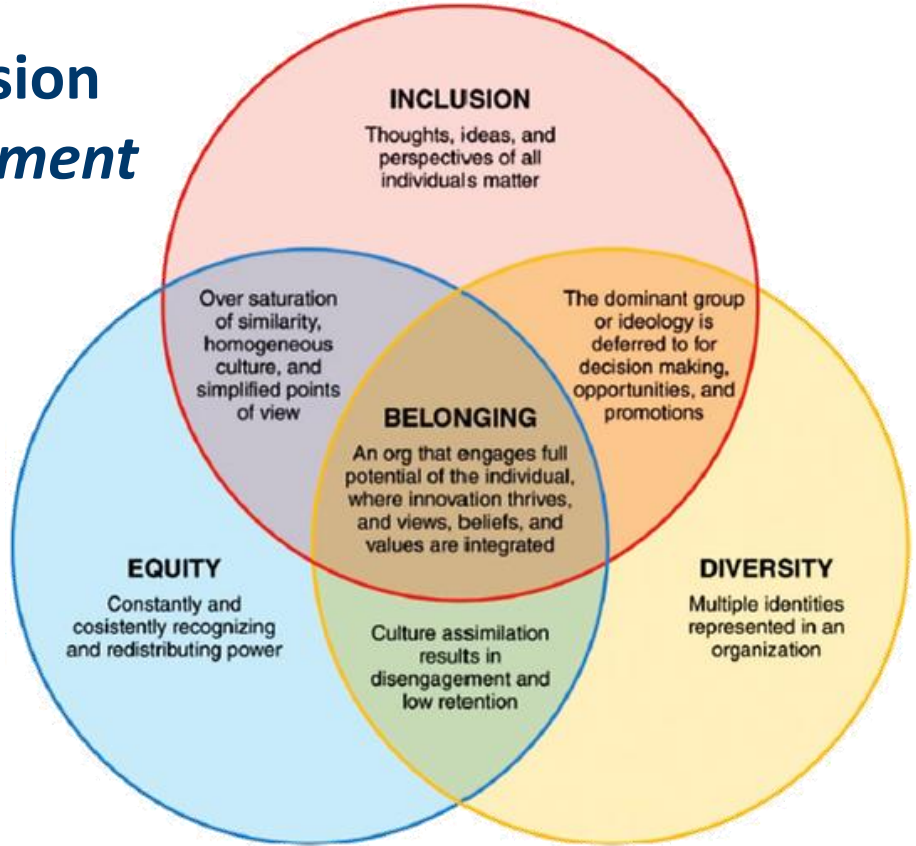
# Achieving Diversity, Equity, Inclusion and Belonging...*Creating a Movement*

## Definitions (DEIB): *Every Component is Essential*

### AHA/ACC CONSENSUS CONFERENCE REPORT

#### 2020 American Heart Association and American College of Cardiology Consensus Conference on Professionalism and Ethics

A Consensus Conference Report



After Burnette K. <https://medium.com/@krysburnette/its-2019-andweare-still-talking-about-equity-diversity-and-inclusion-dd00c9a66113>.



AMERICAN  
COLLEGE of  
CARDIOLOGY



# Achieving Diversity, Equity, Inclusion and Belonging...*Creating a Movement*

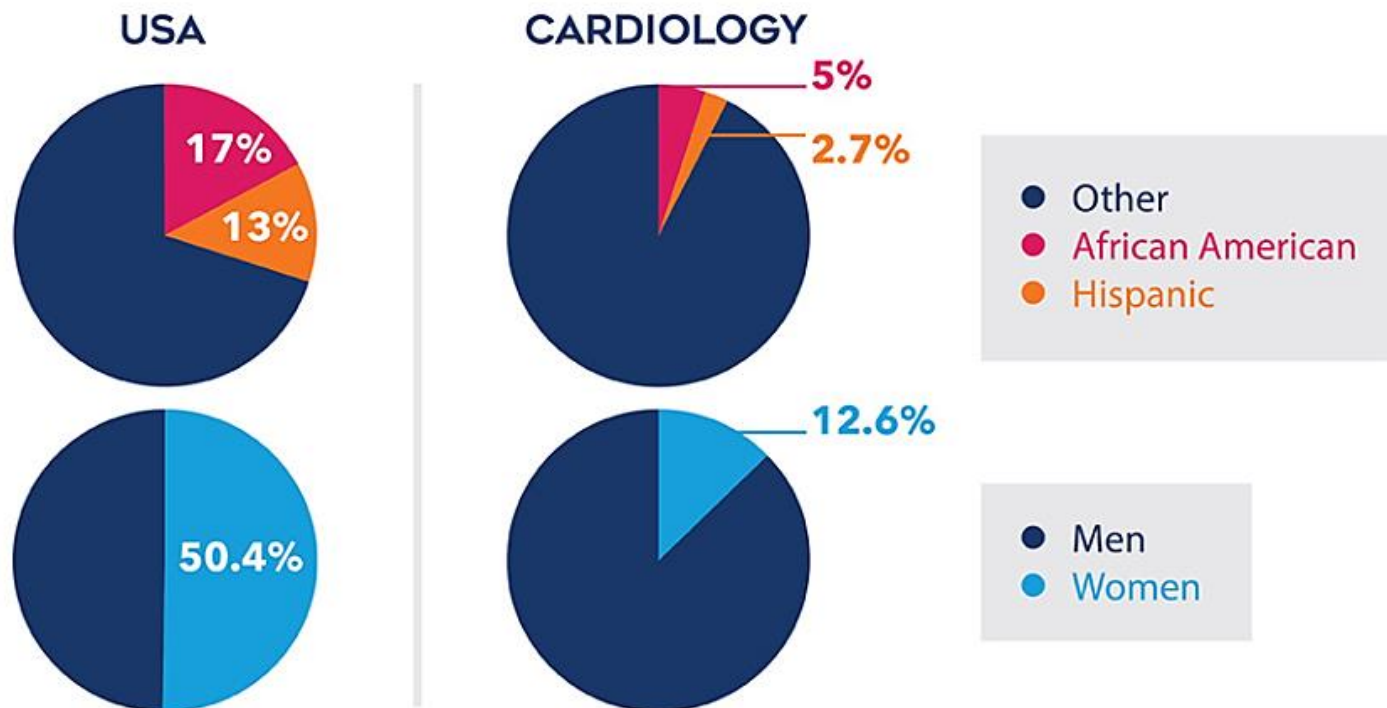
- Diversity
- Equity
- Inclusion
- Belonging

***Without Diversity.....*** We limit access to talent, narrow our perspectives, reduce agility, skimp on innovation and impact, impair strategic decision making, miss opportunities for growth, and hurt the bottom line.



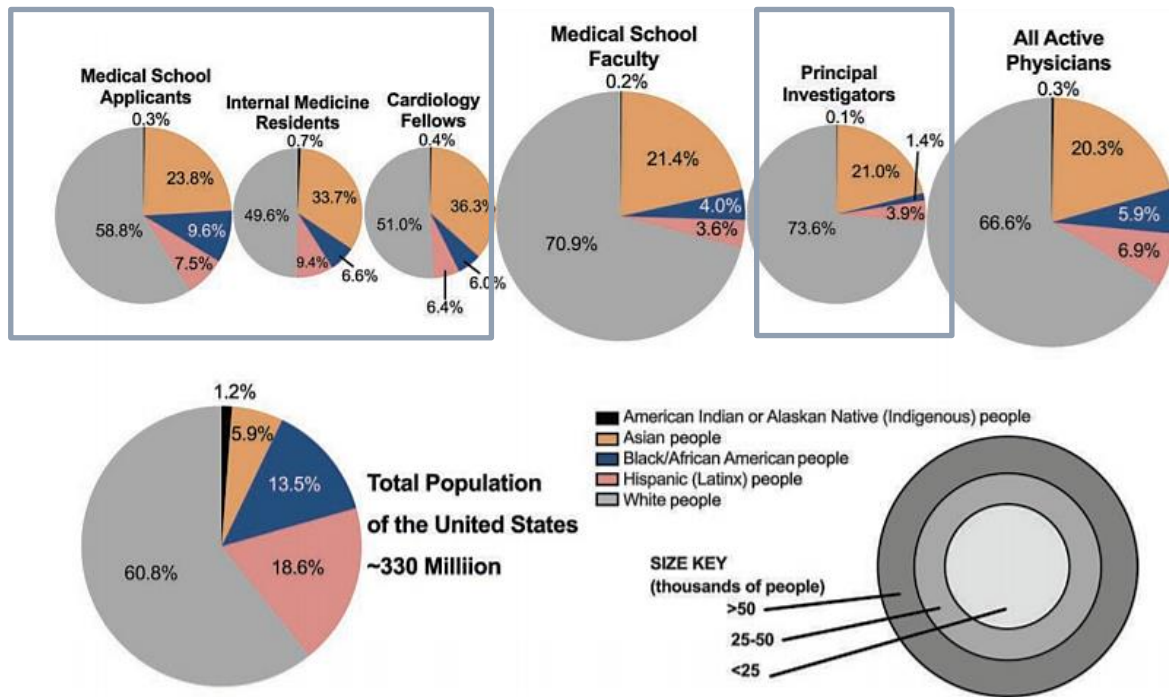
AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Current Demographic Status of Cardiologists in the United States

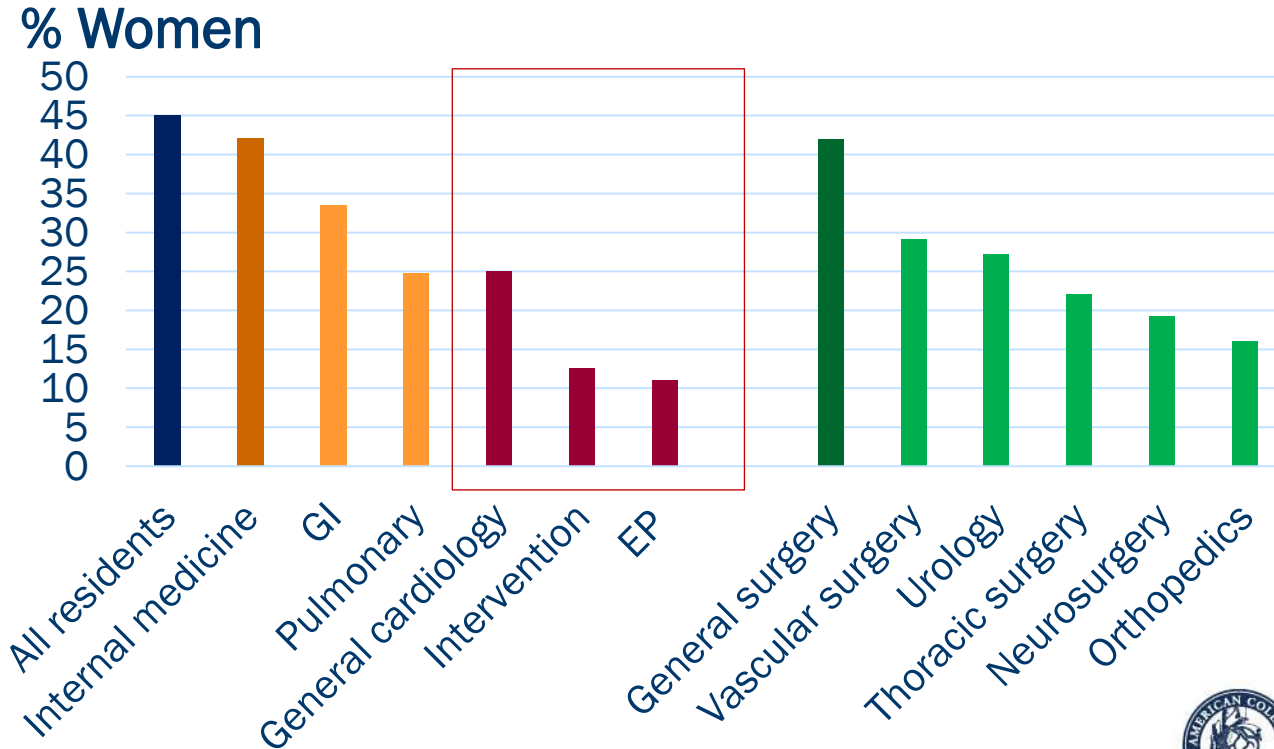


# Racial Diversity Among American Cardiologists

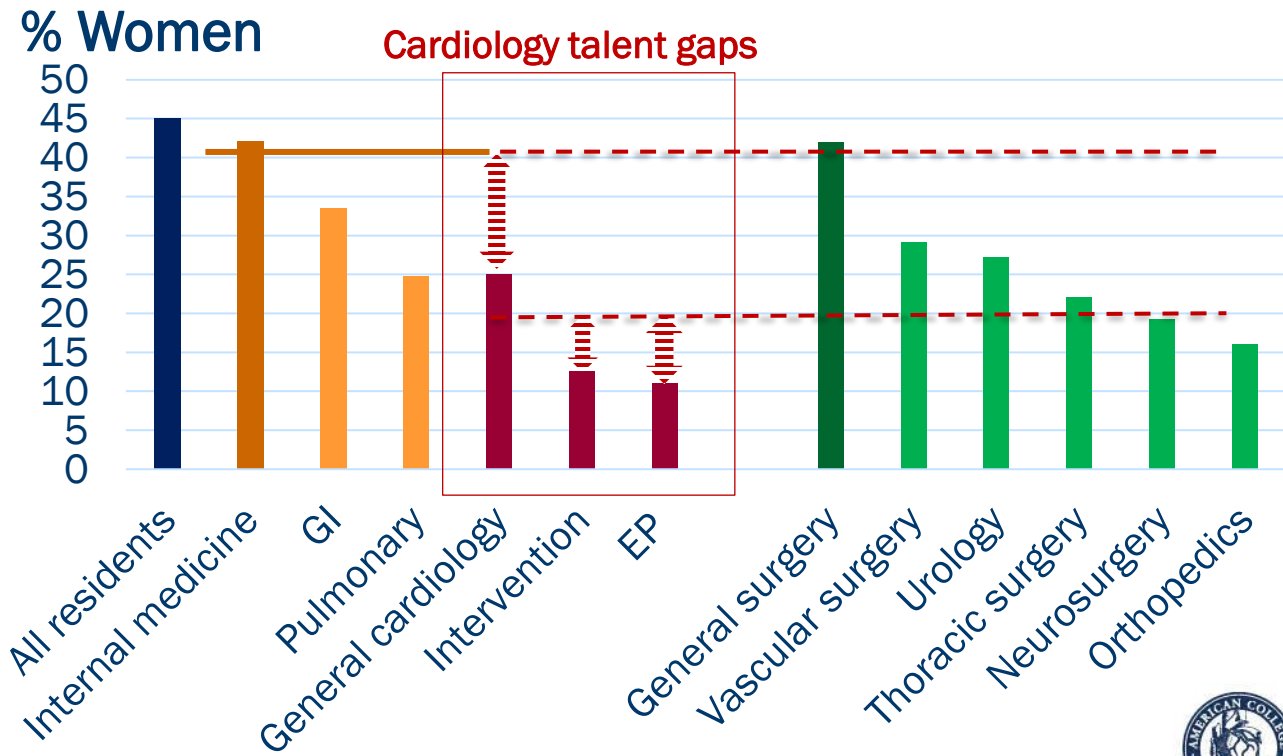
## Implications for the Past, Present, and Future



# Medical Trainees By Sex 2019-2020



# Medical Trainees By Sex 2019-2020



# Achieving Diversity, Equity, Inclusion and Belonging...*Creating a Movement*

- Diversity
- Equity
- Inclusion
- Belonging

***Without Equity...*** We discourage achievement and ambition, sow discord and disrespect, increase burnout, risk tokenism, and limit our ability to achieve excellence.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Achieving Diversity, Equity, Inclusion and Belonging...*Creating a Movement*

- Diversity
- Equity
- Inclusion
- Belonging

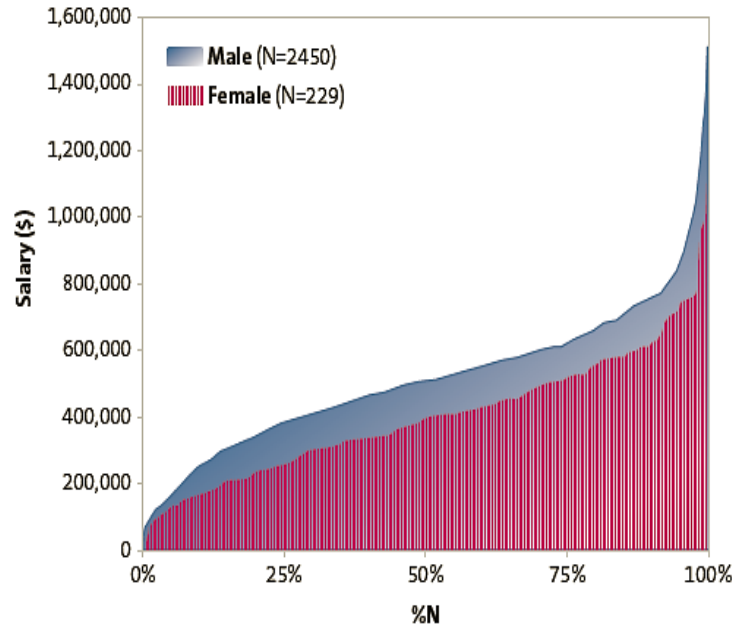
***Without Inclusion...*** We fail to create psychological safety, encourage uncivil behavior and disrespect, discourage participation and engagement, and support continuation of structural sexism and structural racism.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Work Activities and Compensation of Male and Female Cardiologists

## Unadjusted Comparisons



## Adjusted comparisons

After adjustment for >150 personal, job, practice, and productivity characteristics incl on-call, gender was independently associated with salary ( $p=0.001$ )

Effect size was **\$37,717** (95%CI; \$15,056 - \$60,378) for men versus women physicians ( $R^2=0.59$ )

Using a standard employment equity model, Peters-Behlsen, yielded a **\$31,749** gender difference ( $R^2=0.56$ )

A third, parsimonious model with only six variables yielded a **\$38,485** difference ( $R^2=0.55$ ) including: subspecialty, full-time status, wRVUs, hospital observation care, hospital initial care, and stress echocardiograms





# ACC Professional Life Survey

## Changes in the Professional Lives of Cardiologists Over 2 Decades

### Prevalence of Experiencing Uncivil Behavior by Women

	1996			2006			2015		
	Women (n = 518)	Men (n = 546)	Women vs. Men p Value	Women (n = 667)	Men (n = 442)	Women vs. Men p Value	Women (n = 964)	Men (n = 1,349)	Women vs. Men p Value
Experienced discrimination	<u>71 (368)</u>	21 (115)	≤0.001	<u>69 (458)</u>	22 (96)	≤0.001	<u>65* (624)</u>	23 (309)	≤0.001
Affected activities with colleagues	61	16	≤0.001	45*	39*	NS	58†	45*	≤0.001
Affected activities with patients	30	11	≤0.001	14*	17	NS	21*†	22*	NS
Affected activities within ACC	18	4	≤0.001	9*	9	NS	13	14*	NS
<b>Types of Discrimination Experienced</b>									
Sex	81	4	≤0.001	95*	5	≤0.001	96*	8*	≤0.001
Race	5	31	≤0.001	12*	46	≤0.001	18*	59*	≤0.001
Parenting responsibilities	8	1	≤0.01	39*	4	≤0.001	37*	8	≤0.001
Religion	<1	18	≤0.001	6*	25	≤0.001	5*	22	≤0.001
Sexual orientation	—	—		2	0	NS	1	2	NS
Values are % (n) or %, unless otherwise indicated. *p ≤ 0.05 compared with same sex in 1996. †p ≤ 0.05 compared with same sex in 2006. ACC = American College of Cardiology.									

# ACC Professional Life Survey

## Changes in the Professional Lives of Cardiologists Over 2 Decades

### Prevalence of Experiencing Uncivil Behavior by Men

	1996			2006			2015		
	Women (n = 518)	Men (n = 546)	Women vs. Men p Value	Women (n = 667)	Men (n = 442)	Women vs. Men p Value	Women (n = 964)	Men (n = 1,349)	Women vs. Men p Value
Experienced discrimination	71 (368)	21 (115)	≤0.001	69 (458)	22 (96)	≤0.001	65* (624)	23 (309)	≤0.001
Affected activities with colleagues	61	16	≤0.001	45*	39*	NS	58†	45*	≤0.001
Affected activities with patients	30	11	≤0.001	14*	17	NS	21*†	22*	NS
Affected activities within ACC	18	4	≤0.001	9*	9	NS	13	14*	NS
<b>Types of Discrimination Experienced</b>									
Sex	81	4	≤0.001	95*	5	≤0.001	96*	8*	≤0.001
Race	5	31	≤0.001	12*	46	≤0.001	18*	59*	≤0.001
Parenting responsibilities	8	1	≤0.01	39*	4	≤0.001	37*	8	≤0.001
Religion	<1	18	≤0.001	6*	25	≤0.001	5*	22	≤0.001
Sexual orientation	—	—		2	0	NS	1	2	NS
Values are % (n) or %, unless otherwise indicated. *p ≤ 0.05 compared with same sex in 1996. †p ≤ 0.05 compared with same sex in 2006. ACC = American College of Cardiology.									

# Achieving Diversity, Equity, Inclusion and Belonging...*Creating a Movement*

- Diversity
- Equity
- Inclusion
- Belonging

***Without Belonging...*** Diversity, Equity and Inclusion risks being approached by implementing a series of 'easy' fixes rather than long term changes, will not address critical and difficult issues of culture and climate, and ultimately, will fail to achieve social justice or unlock the value inherent in our people and institutions.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Belonging: *How to Create a Movement* - 1

- Chair/Dean/Chancellor must be highly visible champions and inspire trust
- Informed, inclusive leaders at every level
- Establish all domains of DEIB as essential to Mission and Excellence.
- Embed in enterprise-wide strategy decisions, not just activities.  
View everything through a DEIB lens
- Accountability and transparency about current state, efforts and progress (or not)



# Who is an Inclusive Leader?

- Visible commitment to DEIB
- Humility
- Awareness of bias
- Curiosity about others
- Cultural intelligence
- Effective collaboration



# Belonging: *How to Create a Movement* - 2

- Allocate dedicated resources –human, financial, political
- Create interlocking DEIB entities that include Faculty affairs, Data analytics, Education, Communications, etc
- Embed DEIB in all personnel activities at all levels including recruitment (holistic review), retention, evaluations, compensation, resources/support, opportunities, etc.
- Address multiple domains:
  - Focus on the culture. Microaggressions are as damaging as overt racism and sexism.
  - Focus on systems and structures. Easier, cheaper, and more reliable than individual change
  - Focus on individuals. Implicit bias mitigation, ally-ship, bystander, sponsorship, etc
  - Focus on positives. DEIB is an essential skill and should be explicitly rewarded



We shall not convince them by our words, we shall  
convince them by our presence.

~ Walt Whitman



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# *DISCUSSION*



AMERICAN  
COLLEGE *of*  
CARDIOLOGY



# **Cultivating the Next Generation of Advocates: Increasing Awareness & Engagement of Early Career Cardiologists in Healthcare Policy**

Julie M. Clary, MD, MBA, FACC

Associate Service Line Leader, Assistant Professor of Medicine  
Indiana University



AMERICAN  
COLLEGE *of*  
CARDIOLOGY



We owe it to our patients and our profession to be active in politics; because at the end of the day, political and regulatory decisions impact how we can take care of our patients. This is patient care at the highest level.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# How Did I Get Here?

- I had good mentors  
Drs. Richard Kovacs, Ed Fry, and Minnow Walsh
- Network  
I keep a list of ACC contacts and why each was notable
- Seek out opportunities  
ACC Emerging Advocate's Program
- *And I persist!*



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# ECC Advocacy Work Group Efforts

- “Driven to engage members with a new and/or blossoming interest in advocacy”
- Pre-Legislative Conference Sessions
- Virtual Advocacy Fireside Chat Series
- Live in-person “chat” during breakout sessions



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# How Do You Get Engaged?



# How to Get Engaged

- Write a letter/email a legislator
- Call a legislator
- Read ACC Advocacy Newsletters
- Host a practice visit
- Host a fundraiser
- Visit a legislator in their district



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# How to Get Engaged

- Attend Legislative Conference
- Attend a State Lobby Day



AMERICAN  
COLLEGE *of*  
CARDIOLOGY



# How to Engage

- Talk about Advocacy and how it affects the patients for which we care
- Talk about ACC - Be an Advocacy Advocate!
- Invite a friend/colleague to tag along

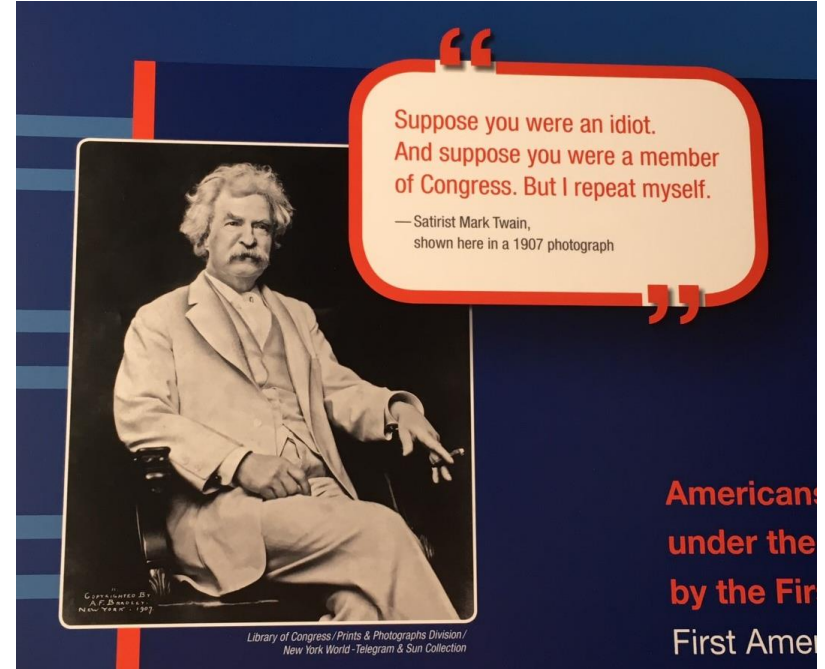


AMERICAN  
COLLEGE *of*  
CARDIOLOGY



# How to Engage

- Ask Questions
- Answer Questions
- Share Your Unique:
  - ~Perspective/Experience
  - ~Patient Stories



AMERICAN  
COLLEGE of  
CARDIOLOGY



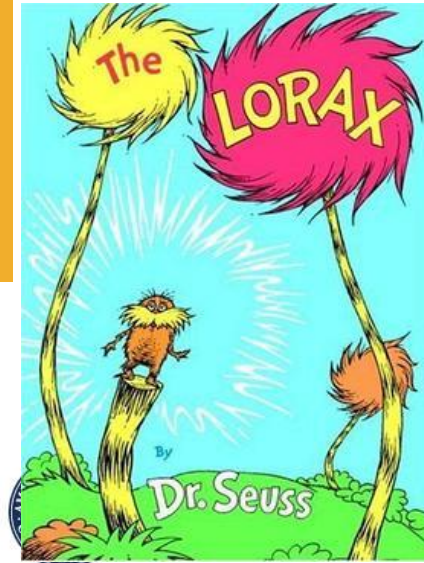
# Why Advocate?

"Unless someone like you cares  
a whole awful lot,  
Nothing is going to get better.  
It's not."



Dr. Seuss,

The Lorax



# Crossing Borders for Local Change - Efforts from Our International Work Group

Tamara Atkinson, MD

Director Interventional Cardiology and Structural Heart  
Portland VA Medical Center  
ACC Early Career Council Member  
Acc Early Career International Work Group Chair



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# ACC International Engagement

- International Associate Membership established in 2002
  - ~To enhance cardiovascular health through sustained collaboration and the exchange of knowledge and resources for cardiovascular care worldwide

**TABLE 2 ACC International Membership**

Member Type	2012	2013	2014	2015	2016
Fellows (2,925 in 2008)	3,526	3,662	3,860	4,062	4,116
Fellows-in-Training	1,030	1,372	1,945	1,628	1,764
International Associates	1,329	4,248	6,882	8,965	9,718
Cardiac Care Associates	56	51	144	200	178
Total	6,425	9,838	13,291	15,378	16,404

ACC = American College of Cardiology.



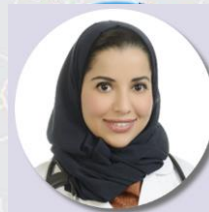
# ACC Global Hub



AMERICAN  
COLLEGE of  
CARDIOLOGY



## Early Career International Work Group



### Membership and Chapters

-  Countries with ACC Chapters
-  Countries with ACC Members

# Early Career International Work Group

- Bringing together ACC Early Career representatives from around the globe
  - ~ Better understand the needs of international Early Career members
  - ~ Promote global involvement of Early Career members with the ACC beyond its current reach
  - ~ Engage in sharing international clinical best practices
  - ~ Promote international research collaboration through networking
  - ~ Foster International academic and clinical collaborations amongst early career and more senior cardiovascular professionals through mentorship



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Early Career Global Needs Assessment

- 2019 Global Needs Assessment Survey
  - ~ ECP - 320 (27%), members and non-members (250)
  - ~ Re-analyzed with ECP data
  - ~ Representation - North America (excluding US), South America, Western Europe, Asia (middle), Far East Asia, Middle East/North Africa
- Findings:
  1. Online learning more than in-person
    - ACC/AHA guidelines, JACC, webinars
  2. Best practices and advances in cardiology
  3. Social Media Platforms - Facebook, YouTube, Twitter



AMERICAN  
COLLEGE *of*  
CARDIOLOGY



# Early Career Global Needs Assessment

- Majority of Early Career International physicians are
  - ~ familiar with and satisfied with ACC
  - ~ have received clinical education from the College
  - ~ would recommend ACC membership
  - ~ believe in the value of FACC.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Goals to Reach our Early Career Colleagues

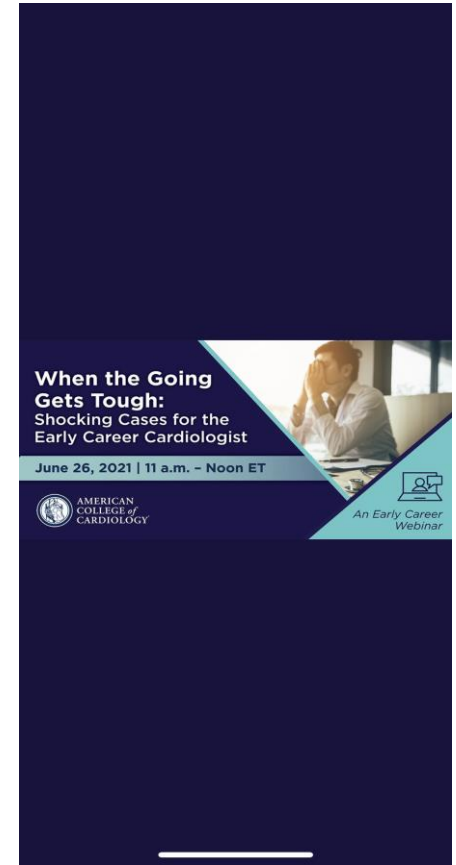
- Webinar Series
- Connect International Work Group Members with local chapters – promote early career events within their local chapters



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Webinar Series

- Goal – promote leadership and development amongst international early career physicians
- Topics – Case based presentations with international faculty to bring global perspectives to challenges faced by early career cardiologists
- Quarterly presentations – next date 10/23/21



AMERICAN  
COLLEGE of  
CARDIOLOGY

# Crossing Borders for Local Change

- Foster and promote relationships between early career international physicians
- Learn from each other and support each other as we navigate these transitions in our career
- Bridge the gap between our international borders to ultimately provide outstanding cardiovascular care to our patients.



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Acknowledgements

- Tamara Atkinson, Chair
- Sena Kilic
- Poonam Velagapudi
- Rasha Al-Bawardy
- Auras R. Atreya
- F. Aaysha Cader
- Katarzyna (Kasia) Czerwińska-Jelonkiewicz
- Sheila Klassen
- Sara Moscatelli
- Sotirios Nedios
- Monica Verdoia

<https://www.acc.org/Membership/Sections-and-Councils/Early-Career-Section/Get-Involved/International-Work-Group>



AMERICAN  
COLLEGE *of*  
CARDIOLOGY



AMERICAN  
COLLEGE *of*  
CARDIOLOGY®

WEBINAR SERIES

**DIVERSITY, EQUITY & INCLUSION:**  
*THE ROLE OF EARLY  
CAREER CARDIOLOGISTS*  
**NURTURING CULTURE**

SEPT. 29, 2021 | 7 - 8 P.M. ET

REGISTER



AMERICAN  
COLLEGE *of*  
CARDIOLOGY

# Today's Faculty Contacts

- Pamela Douglas, MD- Duke University, Durham, NC  
[pamela.douglas@duke.edu](mailto:pamela.douglas@duke.edu)
- Julie M. Clary, MD- Indiana University School of Medicine- Indianapolis, IN, [jmclary@iu.edu](mailto:jmclary@iu.edu)
- Tami Atkinson, MD- VA Portland Health Care System, Portland, OR  
[tamaraatkinson@hotmail.com](mailto:tamaraatkinson@hotmail.com)



AMERICAN  
COLLEGE *of*  
CARDIOLOGY