

Association of University Cardiologists

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Belmond Charleston Place

Charleston, SC

Practical Strategies to Enhance Diversity in Cardiology

Racial diversity in medicine and cardiology will result in the following: enhanced patient satisfaction and communication with an increasingly diverse patient population; enhanced cultural competence of all physicians and providers; expanded access to and utilization of health services for minority and disadvantaged patients; and enhanced breadth, scope, and impact of biomedical research with a broader range of racial/ethnic perspectives. This will clearly result in lives saved and enhanced quality of life for many. Yet, despite decades of major healthcare organizations calling for an increase in the diversity of the healthcare workforce, individuals from Black, Hispanic, Native American, and other Indigenous groups remain severely underrepresented in cardiology. Ultimately, inequities in the social determinants of health and academic success will need to be eliminated before all demographic groups have an equal opportunity to become physicians. In the meantime, several strategies have proven to have limited success in diversifying medicine and cardiology.

When discussing practical strategies to enhance diversity it is useful to consider the following framework to focus efforts:

1. The Deep Pipeline: Reaching out to children in the early grades to inspire them to pursue careers in medicine and keep them motivated through the early years when many obstacles discourage them from envisioning themselves as physicians.
2. The Intermediate Pipeline: Reaching out to college, medical students, and internal medicine residents to demystify the processes for successfully preparing for and applying to medical school, residency, and cardiology training.
3. The “End-Game” Processes: Dismantling racism, bias, and other forms of injustice in the selection processes from medical school to cardiology subspecialty fellowships and faculty.

In this presentation the speaker will review strategies that academic medical centers and individuals can develop and actualize to accelerate attempts to enhance diversity in medicine and cardiology. Emphasis will be on practical strategies that have proven successful and can be deployed immediately.

- 1) Please identify members by underlining their name.
- 2) Please use box above, Abstract (with spaces) = 500 Word limit
- 3) Talk duration 15 min, questions 10 min (total time 25 min)

Quinn Capers, IV, MD

Member's Signature

NOTE: This form is also available on the AUC website at <https://www.aucard.org/scientific-abstract-form>