

APA Official Actions

Position Statement on Diversity and Inclusion in the Physician Workforce

Approved by the Board of Trustees, December 2019

Approved by the Assembly, November 2019

“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects. . .” – *APA Operations Manual*

Issue:

Diversity in our workforce is essential to the health of the profession, our patients, our communities, and our nation. Our profession will better reflect the sociodemographics of our nation by increasing the number of psychiatrists who self-identify as being from groups that are underrepresented in medicine and medical leadership (URM). The ultimate goal would be that our workforce would proportionately reflect our diverse US population, which could enhance medical education and healthcare services and improve our ability to serve diverse populations.

This position statement will supersede the July 2017 American Psychiatric Association (APA) position statement on Diversity and aligns with other existing statements on physician workforce diversity and inclusion by the American Medical Association (AMA), Association of American Medical Colleges (AAMC), and Accreditation Council for Graduate Medical Education (ACGME). This position statement is prompted by the ACGME Common Program Requirement accreditation standard on diversity and inclusion effective July, 1, 2019, which was supported by the APA.

Efforts to recruit, retain, and support URM in our psychiatric workforce is consistent with APA’s mission to “advance and represent the profession of psychiatry.” Also, it aligns with the 2015 APA strategic plan: “Supporting and increasing diversity within APA; serving the needs of evolving, diverse, underrepresented, and underserved patient populations; and working to end disparities in mental health care.” This position statement is consistent with two existing APA position statements on Affirmative Action and Psychiatrists from Underrepresented Groups in Leadership Roles. Psychiatrists have a key role in promoting diversity and inclusion in all parts of our medical profession.

APA Position:

- 1. APA supports efforts to increase diversity and inclusion in the physician workforce.**
- 2. APA supports legislation and policies that increase the proportion in psychiatry and other healthcare professions of people who self-identify as being from groups that are underrepresented in medicine and medical leadership (URM).**
- 3. APA urges the identification and dissemination of national best practices for recruitment, retention, and career development supports for individuals from groups that are URM.**
- 4. APA supports efforts by medical schools, psychiatry residency and fellowship programs, academic departments of psychiatry, and clinical programs and systems to recruit and retain a**

diverse and inclusive workforce, particularly individuals from groups that are URM. The APA urges these institutions to:

- a. Systematically assess their diversity and inclusion climate/culture using validated instruments (e.g., Diversity Engagement Survey) (1).**
 - b. Express their mission and aims related to the recruitment, retention, and career development of individuals from groups that are URM.**
 - c. Adopt best practices for recruitment that limit implicit and explicit bias, particularly bias that disadvantages applicants from groups that are URM.**
 - d. Adopt best practices to retain psychiatrists who self-identify as being from groups that are URM.**
 - e. Adopt best practices to support the leadership and career development of psychiatrists from groups that are URM.**
- 5. APA advocates for research to improve recruitment, retention, and career development efforts for a diverse and inclusive physician workforce, particularly individuals from groups that are URM.**

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References:

1. Person, S. D., Jordan, C. G., Allison, J. J., Fink Ogawa, L. M., Castillo-Page, L., Conrad, S., . . . Plummer, D. L. (2015). Measuring Diversity and Inclusion in Academic Medicine: The Diversity Engagement Survey. *Acad Med*, 90(12), 1675-1683. doi:10.1097/ACM.0000000000000921

Background

The background information is a separate document. If approved, the background information will not be published along with the position statement on the APA website.

For this position statement, we use the AAMC's definition of diversity and inclusion (2).

Diversity as a core value embodies inclusiveness, mutual respect, and multiple perspectives and serves as a catalyst for change resulting in health equity. In this context, we are mindful of all aspects of human differences such as socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability and age.

Inclusion is a core element for successfully achieving diversity. Inclusion is achieved by nurturing the climate and culture of the institution through professional development, education, policy, and practice. The objective is creating a climate that fosters belonging, respect, and value for all and encourages engagement and connection throughout the institution and community.

The AAMC defines underrepresented in medicine as those populations that are "underrepresented in the medical profession relative to their numbers in the general population" (3). The 2018 APA Operations Manual characterizes Minority/Underrepresented Groups with respect to the APA and APA Assembly (page 114) (4):

The category of "underrepresented" or "minority" necessitates certain elements; a previously and autonomously formed organization of such APA members, with recognizable common individual characteristics, must demonstrate that:

- 1) Underrepresentation of such members exists within APA's governing bodies and committee structures, with such underrepresentation related to their characteristics as a minority;
- 2) Potential patients and other citizens with similar minority characteristics who have had interests, rights, and needs repeatedly neglected, ignored, or violated within the society, such that their mental health has been adversely affected in a significant way; and
- 3) The number of APA psychiatrists with a potential to belong to such a designated group must be of significant size.

The APA includes American Indian, Alaska Native, and Native Hawaiian; Asian-American; Black; Hispanic; Lesbian, Gay and Bisexual; and Women; and International Medical Graduate psychiatrists as Minority/Underrepresented Groups (page 113) (4). Other definitions of underrepresented in medicine additionally specify Filipino, Hmong, and Vietnamese populations (5).

Despite representing over half of medical school graduates, women continue to be underrepresented in medical leadership (7, 8). The numbers of medical school graduates from racial and ethnic minority groups that are underrepresented in medicine and medical leadership (URM) has remained essentially unchanged since the 1970s (6). The sociodemographics of medical school graduates is not fully representative of the general US population, and this unrepresentativeness persists in residency programs, academic departments, medical leadership, and our psychiatric workforce.

Increasing the diversity and inclusion in our profession is socially just, as the psychiatric workforce should resemble the sociodemographics of the US population which we serve (9). Further, diversity and inclusion increases the representativeness of our institutions and psychiatric workforce. Research has

shown that a racially and ethnically diverse body of trainees enhances medical and graduate medical educational experiences (10-12).

Those who are URM experience professional barriers at all educational and career levels (13, 14). Best practices exist to promote recruitment, retention, and professional development for URM physicians and psychiatrists (15–17). Such best practices include social support and mentorship programs, early science and medicine pipeline programs, trainings to reduce bias in admissions and recruitment processes, holistic and other specialized application review processes, diversity-focused recruitment activities, career/leadership development and retention programs, assessments of institutional culture and climate, dedicated diversity and inclusion leadership positions, and others (1, 18–30).

This position statement is prompted and informed by the ACGME’s Common Program Requirement accreditation standards effective July, 1, 2019, for all graduate medical education residencies and fellowships of all specialties, which for the first time included a diversity and inclusion accreditation standard:

The program, in partnership with its Sponsoring Institution, must engage in practices that focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce of residents, fellows (if present), faculty members, senior administrative staff members, and other relevant members of its academic community.

Background and Intent: It is expected that the Sponsoring Institution has, and programs implement, policies and procedures related to recruitment and retention of minorities underrepresented in medicine and medical leadership in accordance with the Sponsoring Institution’s mission and aims. The program’s annual evaluation must include an assessment of the program’s efforts to recruit and retain a diverse workforce... (page 5) (31)

This ACGME diversity and inclusion accreditation standard was sponsored by both the APA and AADPRT (32).

Efforts to promote a psychiatric workforce that is reflective of the racial and ethnic demographics of the US populations we serve are consistent with the APA’s mission to “advance and represent the profession of psychiatry,” the 2015 APA strategic plan, the goals of the APA’s Division of Diversity and Health Equity, and two existing APA position statements on Affirmative Action, and Psychiatrists from Underrepresented Groups in Leadership Roles. This position statement will supersede the APA position statement on Diversity and will align with similar physician workforce diversity and inclusion statements by AAMC and AMA (33, 34).

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3. Association of American Medical Colleges. (2004). Underrepresented in Medicine Definition. Retrieved December 28, 2018 from <https://www.aamc.org/initiatives/urm/>
4. American Psychiatric Association. (2018). Operations Manual of the Board of Trustees and Assembly of the American Psychiatric Association. Retrieved December 28, 2018 from <https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/operations-manual.pdf>
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