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## Dismantling Racism: Association of Pediatric Program Directors' Commitment to Action

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Received for publication August 15, 2020; accepted August 26, 2020.

**KEYWORDS:** anti-racism; diversity equity inclusion; graduate medical education

**ACADEMIC PEDIATRICS** 2020;20:1051–1053

THE TRAGIC DEATHS due to racial injustice and the disproportionate impact coronavirus (COVID-19) has had on communities of color have been a wake-up call that despite our efforts we have still failed to address centuries of racism in our country. Racism has led to health care inequities, poor health outcomes, and increased morbidity and mortality for racial and ethnic minorities.<sup>1–3</sup> Racism has led to underrepresentation of learners and faculty who are racial and ethnic minorities,<sup>4–6</sup> unsafe learning environments for our underrepresented in medicine (UIM) learners (those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population),<sup>7</sup> and has contributed to the leakiness of the academic pipeline for UIM individuals at all levels.<sup>8–10</sup>

As an organization of leaders of pediatric education, the Association of Pediatric Program Directors (APPD) upholds diversity, equity, and inclusion (DEI) as core values. We have worked hard to incorporate these values in all that we do. Still we recognize that we have fallen short and there is far more that we can do as an organization to fight structural racism. We have failed to address the lack of UIM individuals in our APPD leadership quickly enough. Only recently did we realize that we do not have certain necessary demographic information about our members, recognizing we cannot aggressively seek out diverse representation if we do not know our current demographics.

As *Academic Pediatrics* is the official journal of the APPD, and in recognition of the journal's internal commitment to address racism in the field of pediatrics,<sup>11</sup> we are using this platform to share the APPD's commitment

moving forward to confront racism in 6 areas. For each of these areas, we have developed tangible goals, timelines, and accountability, and we are committed to sharing our progress with our APPD membership quarterly.

### COMMITMENT AS APPD AND INDIVIDUAL PROGRAMS TO BECOMING ANTIRACIST

We are making a strong commitment as APPD and urging our individual residency and fellowship programs to join us in becoming antiracist. Antiracism is not merely the absence of being racist, but rather actively working to dismantle racism in all that we do. We are re-examining all of our activities as an organization to ensure that we are breaking down structural racism in every facet, every project, and every action team. We have re-written our mission statement to more strongly state our commitment to DEI. In addition, we are supporting our students, residents, fellows, and program leadership who advocate against racism.

### BUILDING A ROADMAP FOR BEING AN ANTIRACIST ORGANIZATION

We are dedicated to defining what it means to be antiracist as an organization and as individual member programs, and then holding ourselves accountable to these metrics. In this process, we will outline steps to becoming antiracist. We will also compile and create job descriptions for a number of positions of leadership in DEI (Vice Chair of Diversity, Chief Diversity Officer, Associate Program Director dedicated to DEI, Assistant Dean for DEI) to support the hiring practices of institutions and programs.

## CREATING EDUCATIONAL MATERIALS FOR TEACHING OURSELVES, OUR FACULTY, STAFF, RESIDENTS, AND FELLOWS TO BE ANTIRACIST

We are committed to creating educational materials to teach ourselves, our faculty, staff, residents, and fellows to be antiracist. We had already built implicit bias, microaggression, and antiracism training into our leadership programs (Leadership in Educational Academic Development and Leadership Empowerment for Advancing Pediatric Education Specialists), and have highlighted this in annual APPD conferences for the past 4 years. In addition to building curricula, we have started a monthly Confronting Racism session for our members. We are dedicated to training faculty, staff, residents, and fellows in the history of racism and structural racism and its impacts on children's health, the communities in which children live, and our learning environments.

We will work with the Accreditation Council for Graduate Medical Education to include antiracism training in their core requirements for residents, fellows, and faculty development for all specialties and to require that all institutions have policies on antidiscrimination. We will also work with the American Board of Pediatrics to include antiracism content as core content for pediatrics certification and to develop Maintenance of Certification Part 4 credit for faculty working on antiracism actions in their home institutions.

## MENTORING AND SPONSORING OUR UIM MEMBERS

In order to improve the disproportionate attrition in academic medicine for UIM individuals, we will develop specific mentorship and sponsorship programs for UIM residency and fellowship program leaders. In addition, we will continue our Advancing Inclusiveness in Medical Education Scholars (AIMS) Program for UIM residents, to help them develop skills and further interest in medical education and academic medicine.

## RESEARCH CONFRONTING RACISM

We recognize the importance of researching the impact of structural racism on our clinical learning environments and on the retention of UIM individuals. We also recognize that interventions intended to stop the impact of racism in medical education must be studied and properly researched to ensure realization of an intended effect. APPD is committed to supporting these studies through our Longitudinal Educational Assessment Research Network and Special Projects Grants.

## WORKING WITH OTHER ORGANIZATIONS TO CONFRONT RACISM TO IMPROVE CHILDREN'S HEALTH, COMMUNITY HEALTH, AND SOCIAL JUSTICE

We will work with our Pediatric Educational Excellence Across the Continuum partners (Association of

Medical School Pediatric Department Chairs, Academic Pediatric Association, APPD, Council on Medical Student Education in Pediatrics, and Council of Pediatric Subspecialties) and Federation of Pediatric Organizations (American Academy of Pediatrics, American Board of Pediatrics, Association of Medical School Pediatric Department Chairs, Academic Pediatric Association, APPD, American Pediatric Society, and Society of Pediatric Research) to support the development of UIM individuals. Recognizing that doing impactful work in DEI takes time and resources, we will work with these organizations to advocate for financial investment in DEI work, including pipeline programs, recruitment efforts, mentoring programs, and educational efforts. We will also encourage economic incentives for individuals doing DEI work to address the minority tax, which is the extra unpaid, uncompensated responsibility placed on faculty and mentors who are racial and ethnic minorities in the name of efforts to achieve diversity.<sup>12</sup>

In addition, we are working with the Children's Hospital Association to explore looking at quality metrics through a racial and ethnic equity lens. We are committed to ensuring race and ethnicity information is collected in as accurate a manner as possible—through specifically asking patients and parents directly. We are looking at potential inequities in care, including disproportionate involvement of security and Child Protective Service with families of color and inadequate use of interpreters. In addition, we are working with Children's Hospital Association to ensure hospital faculty and staff are trained in racism, implicit bias, and addressing microaggressions.

## STEPS MOVING FORWARD

We are committed to continuing to listen, learn, and add additional priority actions to dismantle racism. Sadly, the acts of violence against African Americans and the disproportionate impact of COVID-19 on people of color underscore how much progress remains to be made. We must continue to fight for a just and equitable environment for all and speak out against racism and against structures that create health disparities and inequities for people of color and other marginalized individuals. As pediatricians and as educators, we are acutely aware of how our patients and our trainees struggle with these issues. As we prepare the next generation of pediatricians to provide care for our most vulnerable citizens, we must empower them to be aware, to empathize, and especially to act.

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