DIVERSITY AND PROFESSIONAL ADVANCEMENT IN MEDICAL PHYSICS

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Introduction

Limited diversity in STEM and medicine is a long-standing issue [1, 2]. Despite improvements at the undergraduate level, disparities persist in higher educational attainment, amongst faculty, and in activities classically representative of professional advancement, including scientific authorship and amongst award and grant recipients [3-9].

While less work has focused on medical physics specifically, existing scholarship suggests similar issues within the field. Analysis of the American Association of Physicists in Medicine (AAPM) membership revealed significant, longterm underrepresentation of women as AAPM members and even more so within clinical and leadership positions [10]. Development and analysis of the AAPM-NIH Research Database also revealed disparities in the allocation of NIH grant funding by principal investigator (PI) gender [11].

Improvements in the representation and career advancement of women and minority medical physicists would benefit the entire medical physics workforce, as a diverse and inclusive climate begets enhancements in innovation, productivity, and morale [12, 13]. Increased workforce diversity may also yield improvement in public health and individual patient experiences [14-18]. Given that, in 2019, 78% of PhD, board-certified medical physicists reported their role to be "Primarily Clinical" [19], efforts to increase diversity in medical physics stand to produce meaningful improvements in patient care and outcomes.

Objectives

In this study, we seek to:

- Analyze diversity within the medical physics workforce and in cohorts representative of professional advancement.
- Examine trends in medical physics grant funding by principal investigator (PI) gender identity, race, and ethnicity.

This work will provide meaningful context to support the development of actionable policy that ensures diversity and equitable opportunity for professional advancement within medical physics.

Materials and Methods

The 2020 AAPM membership was queried as surrogate for the current medical physics workforce. Subsets of the AAPM membership were queried as surrogates for 'professional advancement' and 'early-career professional advancement' in medical physics. Inclusion criteria are summarized below.

Inclusion Criteria for Study Analysis Groups

2020 AAPM Membership

Active member of AAPM in 2020

'Professional Advancement' (PA) Cohort

- CAMPEP program directors
- NIH grant recipients
- AAPM committee members and chairs
- AAPM award recipients

'Early-Career Professional Advancement' (ECPA) Cohort

- recipient between 2016-2020

AAPM membership, committee, and awards records, the AAPM-NIH Research Database, the CAMPEP website, and AAPM Education and Research Fund Recipients data were used to identify study analysis group members [11, 20, 21].

Voluntary, self-reported AAPM-member demographics data were provided by AAPM. U.S. population demographics data were obtained from the 2020 U.S. Decennial Census and 2019 American Community Survey [22-24]. Demographic characteristics of the 2020 AAPM membership were compared to those of the PA cohort, ECPA cohort, and U.S. population using the one-sample test for proportions. Temporal trends in member demographics were evaluated using historical AAPM membership data.

The AAPM-NIH Research Database was appended with AAPM demographics data. Distribution of grants by PI demographics were analyzed. To investigate historical trends, grants were stratified by first year of funding.

• Member of PA cohort and age <40 as of 1/1/2020 or

NIH K- or F-grant recipient, AAPM early career or junior investigator award recipient, or AAPM Research Seed Grant

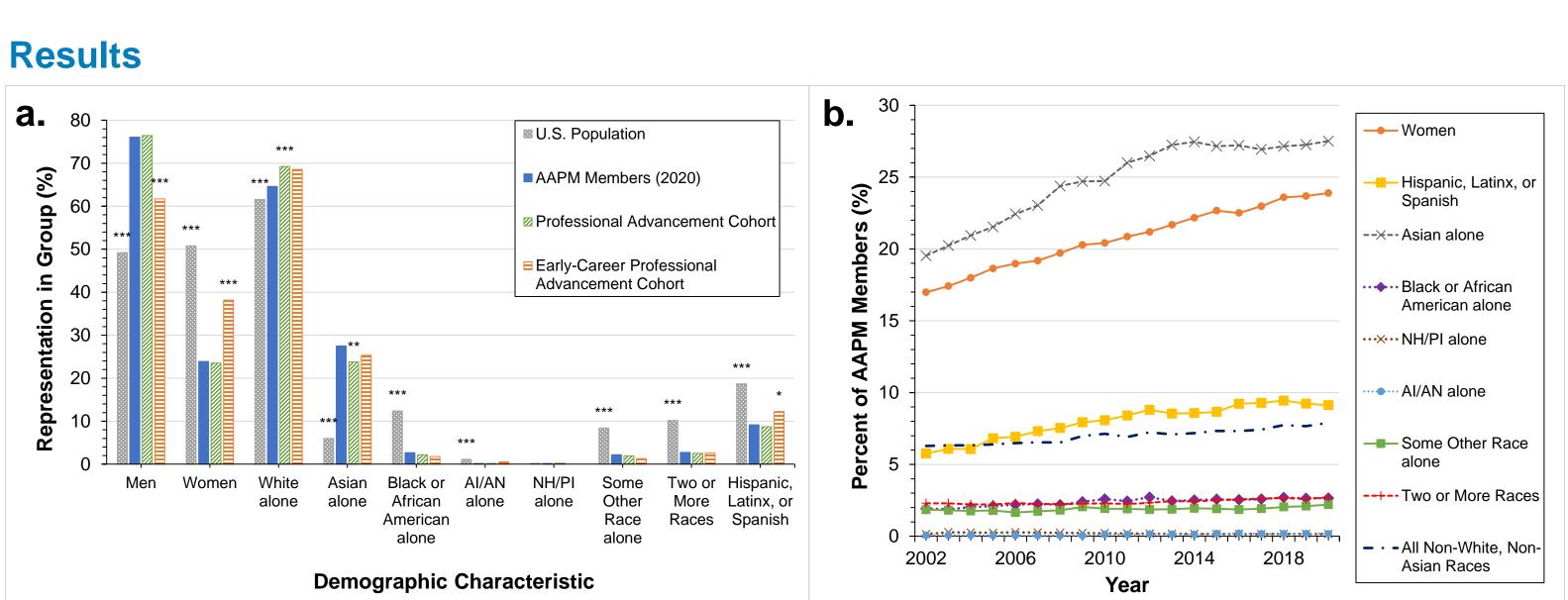


Figure 1. Diversity in the current and historical medical physics workforce. (a) Representation of various demographic groups in the 2020 AAPM membership were calculated and compared to those in the U.S. population, 'professional advancement' cohort, and 'early-career professional advancement' cohort. Stars denote a statistically significant difference between the percentage of the 2020 AAPM membership reporting a given demographic characteristic and the percentage of individuals in the respective comparison group reporting the same characteristic. * = p<0.05, ** = p<0.001, 'AI/AN' = 'American Indian or Alaska Native 'NH/PI' = 'Native Hawaiian or Pacific Islander'. (b) Historical trends in AAPM membership demographics.

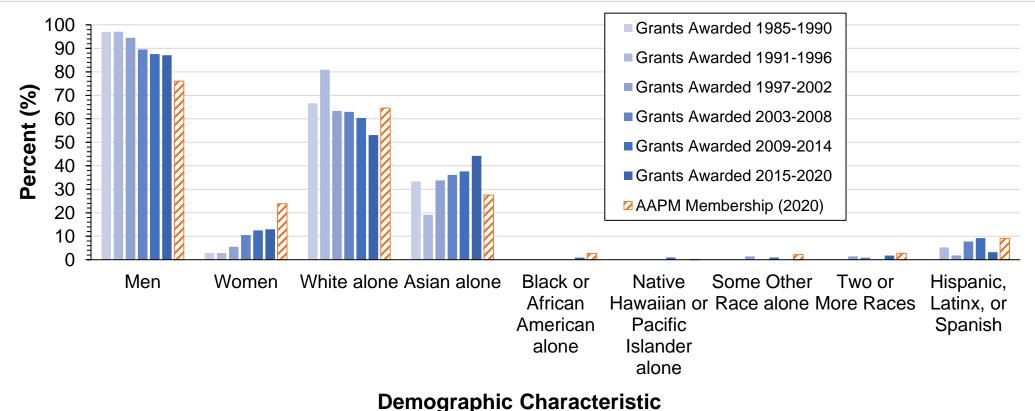


Figure 2. Trends in the Allocation of NIH Grants to AAPM Members by Principal Investigator Demographic Characteristics. Grants listed in the AAPM-NIH Research Database were stratified by first year of funding. Percentages of grants awarded by principal investigator demographic characteristic were calculated for each time period (blue bars). Percentages of the 2020 AAPM membership by demographic group are provided for context (striped, orange bars).

Discussion

Although our findings suggest increasing diversity in medical physics, it remains limited relative to the overall U.S. population. Efforts to recruit, retain, and support a diverse workforce should address the unique professional challenges faced by women and minority medical physicists. Future work may pursue a qualitative understanding of these challenges, which will support successful application of our findings to the development of policy and protocol that ensures diversity, equity, and inclusivity in medical physics.



EMORY WINSHIP CANCER INSTITUTE National Cancer Institute-Designated Comprehensive Cancer Center



Women and most minority groups remain underrepresented in medical physics, and, in many cases, are even further underrepresented in groups representative of professional advancement field. the in Additionally, very few NIH grants have been awarded to women or minority Pls. However, there have been modest increases in workforce diversity observed over the past several decades, and relatively increased diversity within the ECPA cohort may be indicative of an increasingly inclusive field.

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References

1. Matthews CM. Underrepresented minorities and women in science, mathematics, and engineering: Problems and issues for the 1990s. CRS Report for Congress, Washington, D.C. Congressional Research Service. September 5, 1990. Accessed February 8, 2022. https://files.eric.ed.gov/fulltext/ED337525.pdf

2. Landivar LC. Disparities in STEM employment by sex, race, and Hispanic origin. American Community Survey Reports. United States Census Bureau. September 2013. Accessed February 8, 2022. https://www2.census.gov/library/publications/2013/acs/acs-24.pdf 3. National Science Foundation, National Center for Science and Engineering Statistics. Women, minorities, and persons with disabilities in science and engineering. April 29, 2021. Special Report NSF 21-321. Accessed February 8, 2022. https://ncses.nsf.gov/pubs/nsf21321/ 4. Association of American Medical Colleges. Diversity in medicine: Facts and figures 2019. 2019. Accessed February 8, 2022. https://www.aamc.org/data-reports/workforce/report/diversity-medicine-facts-and-figures-2019. 5. Marschke G, Nunez A, Weinberg BA, Yu H. Last place? The intersection of ethnicity, gender, and race in biomedical authorship. AEA Pap Proc. 2018;108(5):222-227. doi:10.1257/pandp.20181111 6. Ma Y, Oliveira DFM, Woodruff TK, Uzzi B. Women who win prizes get less money and prestige. Nature. 2019;565(7739):287-288. doi:10.1038/d41586-019-00091-3 7. Chaudhary AMD, Naveed S, Safdar B, et al. Gender differences in Research Project Grants and R01 grants at the National Institutes of Health. Cureus. 2021;13(5):e14930. doi:10.7759/cureus.14930 8. National Institutes of Health. Racial disparities in NIH funding. National Institutes of Health, Office of the Director, Scientific Workforce Diversity. Updated May 25, 2021. Accessed February 8, 2022. https://diversity.nih.gov/building-evidence/racial-disparities-nih-funding 9. Rissler LJ, Hale KL, Joffe NR, Caruso NM. Gender differences in grant submissions across science and engineering fields at the NSF. Bioscience. 2020;70(9):814-820. doi:10.1093/biosci/biaa072 10. Covington EL, Moran JM, Paradis KC. The state of gender diversity in medical physics. Med Phys. 2020;47(4):2038-2043. doi:10.1002/mp.14035 11. Whelan B, Moros EG, Fahrig R, et al. Development and testing of a database of NIH research funding of AAPM working Group for the Development of a Research Database (WGDRD). Med Phys. 2017;44(4):1590-1601. doi:10.1002/mp.12098 12. Rohwerder B. Impact of diversity and inclusion within organizations. Institute of Development Studies, Brighton, UK. May 17, 2017. Accessed February 10, 2022. https://www.academia.edu/35132220/Impact_of_diversity_and_inclusion_within_organisations 13. Hunt V, Layton D, Prince S. Diversity matters. McKinsey & Company. February 2, 2015. Accessed February 10, 2022. https://www.mckinsey/business%20functions/organization/our%20insights/why%20diversity%20matters/diversity%20matters.ashx 14. Marrast LM, Zallman L, Woolhandler S, Bor DH, McCormick D. Minority physicians' role in the care of underserved patients: Diversifying the physicians' role in the care of underserved patients: Diversifying the physicians' role in the care of underserved patients. JAMA Intern Med. 2014;174(2):289-291. doi:10.1001/jamainternmed.2013.12756 15. Takeshita J, Wang S, Loren AW, et al. Association of racial/ethnic and gender concordance between patients and physicians with patient experience ratings. JAMA Netw Open. 2020;3(11):e2024583. doi:10.1001/jamanetworkopen.2020.24583 16. Cooper LA, Roter DL, Johnson RL, Ford DE, Steinwachs DM, Powe NR. Patient-centered communication, ratings of care, and concordance of patient and physician race. Ann Intern Med. 2003;139(11):907-915. doi:10.7326/0003-4819-139-11-200312020-00009 17. Schoenthaler A, Montague E, Manwell LB, Brown R, Schwartz MD, Linzer M. Patient-physician racial/ethnic concordance and blood pressure control: The role of trust and medication adherence. Ethn Health. 2014;19(5):565-578. doi:10.1080/13557858.2013.857764 18. Winkfield KM, Flowers CR, Mitchell EP. Making the case for improving oncology workforce diversity. Am Soc Clin Oncol Educ Book. 2017;37:18-22. 19. American Association of Physicists in Medicine. Professional Survey Report: Calendar Year 2019. AAPM.org. Accessed May 2021. https://www.aapm.org/pubs/surveys.asp 20. Commission on Accreditation of Medical Physics Education Programs, Inc. CAMPEP.org. Accessed April 10, 2021. https://www.campep.org/ 21. American Association of Physicists in Medicine. Grants and Fellowships: AAPM Education and Research Fund Recipients. AAPM.org. Updated 2022. Accessed March 14, 2022. https://gaf.aapm.org/education/edfund.php 22. United States Census Bureau. Decennial Census. P1 | RACE. 2020: DEC Redistricting Data (PL 94-171). Data.census.gov. 2020. Accessed March 14, 2022. https://data.census.gov/cedsci/table?q=United%20States&g=0100000US&tid=DECENNIALPL2020.P1 23. United States Census Bureau. Decennial Census. P2 | HISPANIC OR LATINO, AND NOT HISPANIC OR LATINO BY RACE. 2020: DEC Redistricting Data (PL 94-171). Data.census.gov. 2020. Accessed March 14, 2022. https://data.census.gov/cedsci/table?q=United%20States&g=0100000US&tid=DECENNIALPL2020.P2 24. United States Census Bureau. American Community Survey. DP05 | ACS DEMOGRAPHIC AND HOUSING ESTIMATES. 2019: ACS 1-Year Estimates Data Profiles. Data.census.gov. 2019. Accessed March 14, 2022. https://data.census.gov/cedsci/table?tid=ACSDP1Y2019.DP05&hidePreview=true&tp=false&moe=false

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