

Correspondence

Re: Diversity of Department Chairs in Family Medicine at US Medical Schools

In response to Xierali et al: Family Medicine department chair diversity

To the Editor: We applaud the work of Xierali et al in the recent article demonstrating Family Medicine department chairs were more diverse than any other clinical specialty and not only that, were comparable with the United States population.¹ These findings are quite encouraging particularly for Family Medicine leadership. We should be encouraged, but we also need to acknowledge other confirmations that come from this important work.

As we continue to promote equity for faculty who are underrepresented in medicine, addressing historic injustice and systemic racism have defined themselves as part of our work.² Bias and racism are what led to the thinking that underrepresented minority physicians, particular Black physicians, should be sanitation doctors to keep diseases or conditions from crossing racial lines and impacting White people.^{3,4} Not only did this bias promote the closing of several historically Black medical schools, but it also promoted underrepresented minority physicians as clinicians who only provide patient care. That is 1 reason underrepresented minority physicians are in lower ranks in academic medicine than our White counterparts.⁵ Historically, the institution of medicine never intended for underrepresented minority physicians to be physician scientists or scholars. Even though we are excited to say we've changed that narrative, there is still much work to be done. Given the historic design of the system, it is no surprise that there is more diversity in Family Medicine department chairs than other specialties. Let us not let Family Medicine be a clinician only profession for any faculty, especially underrepresented minority faculty for the benefit of our communities. Let us promote scholarship, leadership and research in our departments of Family Medicine.⁶

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References

1. Xierali IM, Nivet MA, Rayburn WF. Diversity of department chairs in family medicine at US medical schools. *J Am Board Fam Med* 2022;35:152–7.
2. Acosta DA, Skorton DJ. Making “good trouble”: time for organized medicine to call for racial justice in medical education and health care. *Am J Med* 2021; 134:1203–9.
3. Sullivan LW, Suez Mittman I. The state of diversity in the health professions a century after Flexner. *Acad Med* 2010;85:246–53.
4. Campbell KM, Corral I, Infante Linares JL, Tumin D. Projected Estimates of African American medical graduates of closed historically black medical schools. *JAMA Netw Open* 2020;3:e2015220.
5. Fassiotto M, Flores B, Victor R, et al. Rank Equity Index: Measuring Parity in the Advancement of Underrepresented Populations in Academic Medicine. *Acad Med* 2020; 95:1844–52.
6. Coe C, Piggott C, Davis A, et al. Leadership pathways in academic family medicine: focus on underrepresented minorities and women. *Fam Med* 2020;52:104–11.

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