



DEI efforts in anesthesia: applying what we know to achieve the change we seek

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Grounding assumptions

- ▶ Diversity, equity, and inclusion are desirable in academic medicine



social justice



excellence

Grounding assumptions

- ▶ Diversity, equity, and inclusion are desirable in academic medicine
- ▶ We are not yet where we want to be with DEI



DE&I efforts are fundamentally about behavior change



*We know how
to change behavior
in health & healthcare*



*quality
improvement*

A tried-and-true quality improvement approach:
The Model for Improvement

Model for Improvement

What are we trying to accomplish? *Aim*

How will we know that a change is an improvement? *Measure*

What change can we make that will result in improvement? *Change*

PDSA

Act Plan
Study Do

Langley, Nolan, Nolan, Norman, Provost; The Improvement Guide, 1996

Organizational change in DE&I requires:

DE&I is very ordinary in some ways

will to change

"The starting point is really to acknowledge that there is an issue, and [the need to] just have a dialogue about race."

Rohini Anand, Leading Diversity at Work podcast

Organizational change in DE&I requires:

DE&I is very ordinary in some ways

resources

"I think sometimes we don't treat the diversity office like a business unit, and business units need budgets to function."

Stephanie Creary, Leading Diversity at Work podcast

Organizational change in DE&I requires:

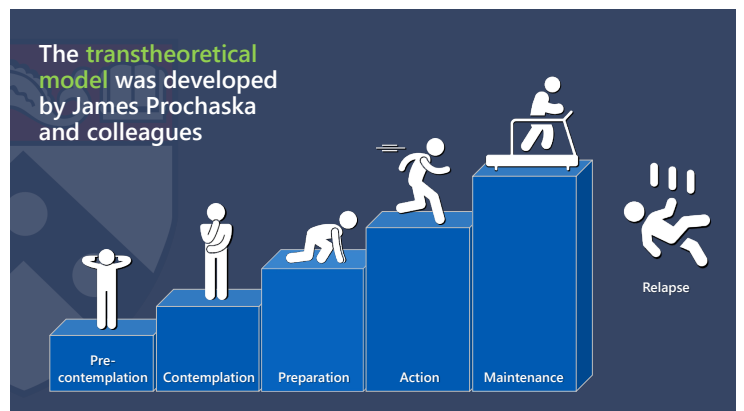
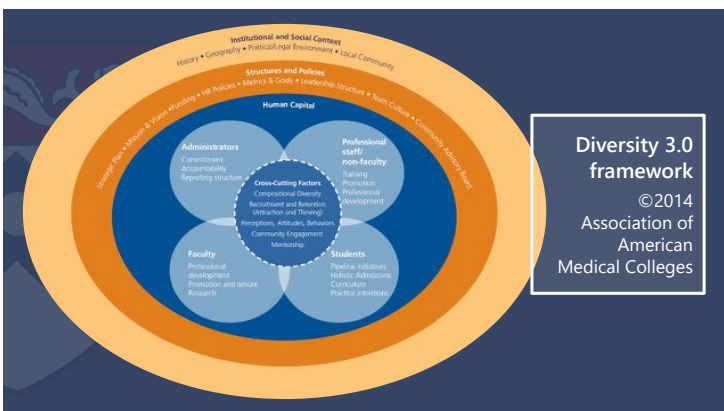
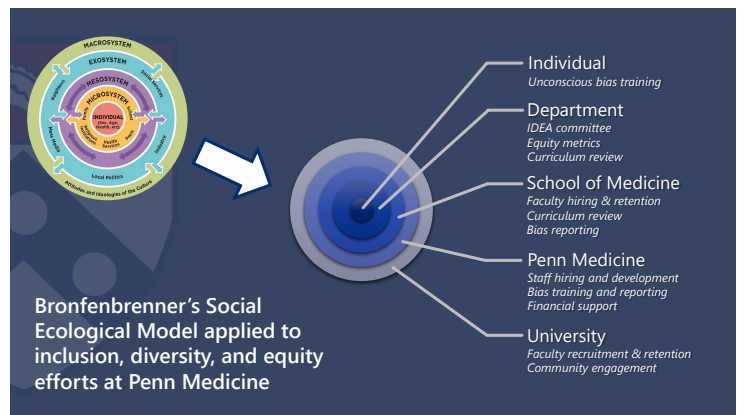
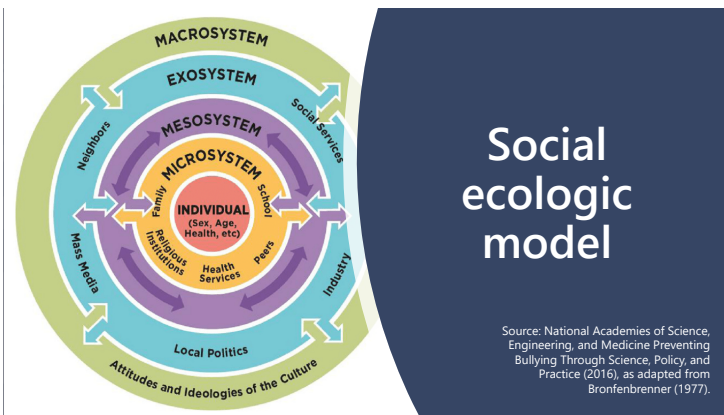
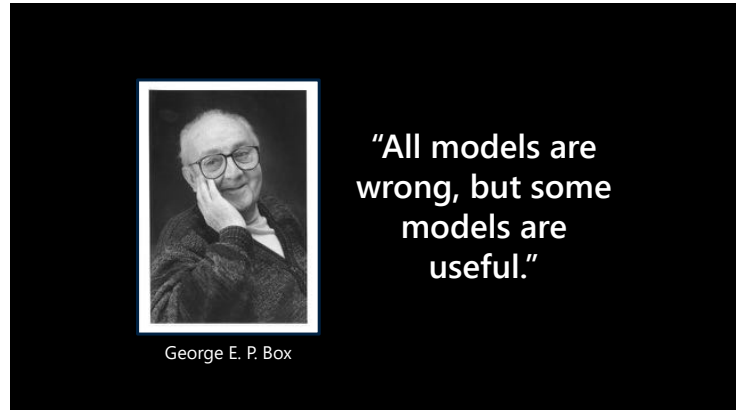
DE&I is very ordinary in some ways

expertise

Requisite diversity leadership skills:

- Interpersonal skills
- Technical knowledge
- Strategic vision
- Change management expertise

Diversity and Inclusion in Academic Medicine: a Strategic Planning Guide. AAMC, 2014.

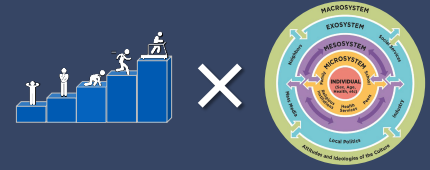


TTM stage-matched interventions are more effective

- ▶ Precontemplation
 - Consciousness raising
 - Environmental re-evaluation
- ▶ Contemplation
 - Self re-evaluation
- ▶ Preparation
 - Self liberation
- ▶ Action & Maintenance
 - Helping relationship
 - Stimulus control

Prochaska JM, Prochaska JO, Levesque DA. A transtheoretical approach to changing organizations. *Adm Pol Ment Hlth* 2001; 28(4).

The transtheoretical model can be applied to organizations



		Transtheoretical model stages of change				
		Pre-contemplation	Contemplation	Preparation	Action	Maintenance
Individual	<ul style="list-style-type: none"> • Consciousness raising • Dramatic relief • Environmental re-evaluation 	<ul style="list-style-type: none"> • Self re-evaluation 	<ul style="list-style-type: none"> • Self liberation 	<ul style="list-style-type: none"> • Contingency management • Helping relationship • Counter conditioning • Stimulus control 		
Organization	<ul style="list-style-type: none"> • Dramatic relief • Self re-evaluation • Thinking about commitment 	<ul style="list-style-type: none"> • Teams 	<ul style="list-style-type: none"> • Consciousness raising • Commitment • Counter conditioning 	<ul style="list-style-type: none"> • Stimulus control • Helping relationship • Reinforcement management 		

Adapted from: Prochaska JM, Prochaska JO, Levesque DA. A transtheoretical approach to changing organizations. *Adm Pol Ment Hlth* 2001; 28(4).

Faculty member responsibilities		Leadership responsibilities
<ul style="list-style-type: none"> • Determine career goals, objectives • Articulate career goals, objectives to mentors, sponsors • Advocate for oneself (e.g., self-nominate, apply for leadership positions) 	<p>Self-actualization HIGHER-ORDER UPWARD AND DEVELOPING TALENTS</p> <p>Esteem SELF-ESTEEM ESTEEM FROM OTHERS</p> <p>Love & belonging SOCIAL BELONGING PSYCHOLOGICAL SAFETY¹</p> <p>Safety needs PHYSICAL SECURITY FINANCIAL SECURITY</p> <p>Physiological needs</p>	<ul style="list-style-type: none"> • Promote culture accepting of women in leadership • Offer opportunities for leadership skill development (e.g., executive coaching, leadership courses) • De-mythify promotion, advancement procedures • Provide sponsorship for promotion & other reputation-building activities (e.g., professional society committees) • Foster & support groups that build community & allyship • Assess, address faculty and staff implicit bias • Promote psychological safety • Ensure pay equity • Create reporting structures for toxicity, organizational behavior, harassment • Foster a "zero tolerance" policy for harassment • Ensure adequate restrooms, locker room space • Ensure lactative and nursing space • Develop transparent scheduling procedures • Ensure adequate work breaks

Lane-Fall MB, Gordon EKB, Valentine EA, Black SA, Kapur PA, Fleisher LA. Fostering belonging in academic anaesthesiology. *Br J Anaesthesia* 2020; 124(3):E155-E159.

Pitfalls to avoid



- ▶ Unproductive behaviors
 - Performative allyship
 - "Oppression Olympics"
- ▶ Overreliance on marginalized groups
 - Tokenism and ghettoization
 - Minority tax
 - Lived experience ≠ expertise
- ▶ Minimizing the work
 - Gaslighting
 - Normalcy bias
 - System justification¹

1. Jost JT and Banaji MR. The role of stereotyping in system-justification and the production of false consciousness. *British Journal of Social Psychology* 1994;33(1):1-27.

Takeaway points




- ▶ We know how to change behavior in health and healthcare
 - Quality improvement approaches
 - Social science-informed approaches
- ▶ Strategic planning (or another deliberate process) is needed to articulate goals and objectives in DE&I
- ▶ History, language, social weight **increase the complexity** of DE&I efforts



Thank you!

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