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Leveraging Diversity in American Academic Medicine
The Harold Amos Medical Faculty Development Program

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The mission of the Robert Wood Johnson Foundation is to improve the health and health care of all Americans. Since its inception, the Foundation has supported efforts to improve the number and quality of minority health care professionals. Recognizing that there was an existing pool of talented minority medical residents who had the potential to become medical school faculty members, and that a critical requirement for success was for those potential academicians to forge links with appropriate mentors who have exemplary track records in producing outstanding medical faculty, the Foundation developed the Minority Medical Faculty Development Program in 1983 (renamed the Harold Amos Medical Faculty Development Program, or AMFDP, in 2004 in honor of its first director). The focus of the program on identifying and nurturing the careers of physician-scientists from disadvantaged backgrounds was based on a few key assumptions:

- They will encourage more minority premedical and college students to apply and be admitted to medical school.
- Exposure to more minority faculty will increase the efforts of medical schools, professional associations, specialty societies, and major hospitals to seek additional minority candidates as students, residents, and attending physicians.
- They will increase the number of distinguished academic medical school minority faculty who serve as models for minority students.

- They will help white faculty and students better understand minority problems and potential and increase the capability of medical schools to provide minority students with counsel and guidance relevant to their particular circumstances.
- They will increase the awareness of the importance of providing health care that addresses the particular needs of minority patients in teaching hospitals.
- They will strengthen the scientific study of health problems particularly important to minorities.

In the Beginning

When the program began, it accepted applications from African American, Mexican American, Mainland Puerto Rican, and Native American physicians who were engaged in basic research and committed to an academic career. These groups were considered to be underrepresented on medical faculties in relation to the general population. Over the years, the applicant pool has expanded to encompass other historically disadvantaged groups; researchers in health services, epidemiology, and translational medicine; and those in dental medicine. Initially, funding was approved for four awards, and some expressed doubts that enough qualified candidates could be found to fill out the applicant pool. The program was overwhelmed with 120 applications. The committee charged with identifying the four finalists submitted an unranked list of eight to the Foundation’s Board of Trustees and insisted that the size of the program be immediately doubled. Thirty years later, a change in the demographics of the United States has ensured that the issue of underrepresentation is still with us, but the alumni and Scholars of the AMFDP have made a tremendous impact on academic medicine.

Of that first cohort of eight, two are currently Directors of institutes at the National Institutes of Health (NIH), one is a Dean of Health Professions at a medical campus, two are professors (one also an assistant dean), one is an associate professor, one is a senior researcher at a pharmaceutical company, and one is deceased.

Under the AMFDP, now administered by the Indiana University School of Medicine, four-year grants of up to $420,000 are made to academic institutions on behalf of individual Scholars, who are expected to spend at least 70% of their time in research activities. Awardees are required to attend at least three scientific meetings per year, to report regularly on research progress, to identify any challenges that they face in completing their proposed projects, and to maintain a commitment to a career in academic medicine. The awards are portable, with some limitations, if the Scholar moves to a different institution during the course of the award.

More Than 250 Alumni

One measure of success in this program must necessarily include a long-term view...
and is defined by the impact of the AMFDP and its alumni on academic medicine and the research environment in the United States. Of the 256 living alumni as of December 2013, more than 80% remain in academic medicine, and 18 (including the current Director of the program) are in pulmonary medicine. The program counts 63 assistant professors, 72 associate professors, and 65 professors among its alumni ranks. Many of them hold other academic titles as well—associate dean, chair, division chief. Four are deans or presidents of medical schools; three are Directors at the NIH. Ten have been elected members of the Institute of Medicine. Six now serve on the advisory committee of the AMFDP. Most willingly stay in touch with the program even after their obligations have ended.

**Driving the Success of the Program**

There are three key factors that have driven the success of the program: an engaged, committed group of advisors; three levels of mentorship; and attention to the development of an academic career.

The AMFDP’s National Advisory Committee (NAC) is composed of distinguished scientists who have a track record of excellence in research, a commitment to fostering diversity in medicine and dentistry, and a passion for mentoring. The NAC itself is a diverse group, with backgrounds in clinical research, basic science, epidemiology, health economics, administration, industry, and philanthropy, among other areas. They are responsible for reviewing applications, selecting candidates for interview, and monitoring successful applicants.

Beyond merely serving as a selection committee, the NAC also functions as a cadre of mentors. Each Scholar in the program is assigned a mentor from the NAC, based on an alignment of scientific interests and the judgment of NAC members of which Scholars they feel they can most benefit; however, Scholars are free to seek counsel from any members of the board. NAC mentors are not from the Scholar’s institution and can often provide an outsider’s perspective and valuable insight into departmental and institutional politics. NAC members, with the weight of the AMFDP and the Robert Wood Johnson Foundation behind them, have been called on to intervene in situations where an institution was not fulfilling its obligations to protect the time and resources of the Scholar; such intervention might be politically difficult for a local mentor. The relationship between the NAC member and the Scholar does not end when the 4 years are finished. Many alumni, if not most, have continuing contact with their NAC mentors, even decades later. Having such a relationship with someone outside the institution can be valuable when an outside evaluation is required, for example for tenure and promotion.

Each Scholar applies to the program in conjunction with a local mentor (generally) or mentors (the exception), who are evaluated along with the applicants. Mentors should be at the same institution as the Scholar and have research interests that are similar enough to the Scholar’s such that he or she can provide guidance on matters relating to study design, publishing, and career development. When the work is of an interdisciplinary nature, or when there is no one at the institution with scientific interests close to that of the Scholar, the Scholar should have two local mentors. It is critical that at least one Mentor be at the Scholar’s institution to help to ensure that the Scholar’s time is protected, to help the Scholar navigate the political situation in the institution, to help choose which service and teaching opportunities would best serve the Scholar’s long-term career interests, and to limit the encroachment of nonessential obligations. Local mentors are required to attend the annual meeting of Scholars for the first two years of their involvement with the program; they gain an understanding of the expectations and high standards of the AMFDP.

The third level of mentorship is among the Scholars and alumni themselves. When a Scholar encounters a career problem, there is almost always an alumnus who has had to deal with a similar situation and can give advice. When a Scholar moves to a new city or a new institution, it is likely that there is a group of AMFDP-connected people who are ready to weigh in on everything from daycare options to how to negotiate for parking spots to where to find the best pizza. At annual meetings, Scholars learn about each other’s work, although it might be vastly different from their own, and can synthesize approaches from different disciplines to use in their own work. Scholars report that the meeting is the highlight of their scientific year, that they draw rejuvenating energy from the wide range of science that is discussed during the meeting. AMFDP alumni are also invited to interact with alumni of other Foundation-supported programs through targeted events and social media.

The third important element in the success of the AMFDP is the degree to which the expectation of excellence in science is coupled with attention to the nuts and bolts of building an academic career. An annual meeting of Scholars features research progress reports by second-year participants, valedictory remarks from exiting fourth-year Scholars, plenty of time to network, and a rotating series of career development seminars. Topics for the last focus on navigating an academic career and the etiquette of academic medicine, featuring such areas as interviewing, negotiation, tenure, writing NIH grants, media training, and mentoring. The Robert Wood Johnson Foundation also provides support to any Scholar whose work garners media attention.

**Minority Issues**

All of these career development strategies would serve well for any group that was trying to make a career in academic medicine. However, there is one area where minority faculty have a particular challenge. One of the recurrent themes in group discussions at the annual gathering of Scholars is the need to ensure that most of a Scholar’s activities are furthering the goal of attaining a senior position. That means that Scholars must learn what and to whom they should best say “no” when asked to serve on administrative committees or take on additional responsibilities, often because minority participation in such groups is mandated or desirable, and often because there aren’t sufficient numbers of minority faculty to staff such groups without undue burden. This is another area in which
having the counsel of an outside advisor with many years of experience is valuable.

**Partnership**

In 2005, the AMFDP was approached by a medical society that sought to increase minority participation in its ranks but lacked the scale to duplicate the AMFDP. The two groups formed a partnership in which the AMFDP would identify an appropriate candidate for financial support by the society and extend all other nonmonetary benefits, in effect extending the reach of the AMFDP by offering an additional award each year. The partnership and the society’s companion pipeline program have served to increase interest in research careers among its minority members.

**Lessons Learned**

The Foundation has learned much over the 30 years of investment in this important program. Just a few of these lessons include:

- Alumni of the program are often the best recruiters for the program.
- Even applicants not selected to participate in the program benefit from the rigorous application process and commitment of the NAC to encourage the research careers of talented applicants.
- The community of scholars and network of alumni has been a critical factor in scholars’ individual career progress and the overall impact of the program.
- As mentioned above, committed, effective institutional and NAC mentors are key predictors to a scholar’s success.

**The Future**

Although 30 years is still not long enough to gauge the full impact of the Harold Amos Medical Faculty Development Program, the first cohorts have made their mark on medical schools around the country, and we can look forward to outstanding contributions by succeeding cohorts of physician-scientists devoted to academic medicine. As the program matures and Foundation investment continues, opportunities exist to expand the leadership development component of the program and increase opportunities for other health professionals from historically disadvantaged backgrounds to benefit from such an exceptional program.

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