

ethnicities underrepresented in medicine, women, and rural leaders the opportunity to develop specific skills in community leadership, education, and practice transformation. These individuals will help lead change on the ground.

There is much to do! All organizations have important contributions to make, but coordinating our activities, tracking individuals and curricula, and continuously improving the outcomes are also important. As family physicians work with their patients and communities, family physician leaders will play a major role in the healing of the health system. It should be our goal to support them. We look forward to your ideas about how we go forward together.

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STFM WRAPS UP UNDERREPRESENTED IN MEDICINE (URM) INITIATIVE

The Underrepresented in Medicine (URM) Initiative, launched in 2019 with funding by the STFM Foundation, is concluding 3 years of work focused on building evergreen resources and sustainable infrastructure to provide tools to help dismantle structural barriers for URM faculty in academic medicine.

The responsibility for oversight of ongoing programs of the URM Initiative will transition to the newly forming STFM Committee on Diversity, Equity, Inclusivity, and Accessibility (DEIA). Evergreen resources created by the URM Initiative will also be regularly reviewed by the DEIA Committee for sustainability and any needed updates or revisions. The evaluation of the entire URM Initiative is already underway and will conclude in 2023.

Background & Aims

An interprofessional Oversight Committee, chaired by Edgar Figueroa, MD, MPH, focused on the following 4 areas to develop, disseminate, and execute strategies to increase the diversity of family medicine educators and promote health equity:

Mentorship

- Create opportunities for developing meaningful relationships that lead to career advancement and leadership within STFM and academic medicine
- Develop mentors who have the skills to help URM students, residents, and faculty improve resiliency, satisfaction, and retention in academic family medicine

Leadership

- Increase the percentage of URM family medicine faculty in leadership positions in academic medicine
- Raise awareness of the structural barriers to URM achievement

URM Faculty Pipeline

- Increase the percentage of URM students and URM family medicine residents with an interest in teaching
- Increase the percentage of URM family medicine faculty
- Increase the percentage of URM community preceptors in family medicine teaching sites who receive resources to improve their teaching skills

Scholarship

- Increase the percentage of URM students, residents, and faculty who have the skills to produce scholarly research

A small 5- to 6-person work group targeted each of the 4 focus areas, with the Work Group Leader also serving as one of the members of the Oversight Committee. STFM provides significant staff support for the Oversight Committee and work groups.

In October 2020, the ABFM Foundation approved grant funding to be used to support focused components of the broader STFM initiative. The funds are being used to:

- Increase the number of and the skills of URM family medicine leaders through leadership training and mentorship
- Advance the scholarly writing skills of URM faculty as a pathway to promotion

URM Initiative Outcomes

The URM Initiative work groups focused on a diverse portfolio of resources, projects, and programs.

Evergreen Resources

In this context, "evergreen resources" can be defined as high quality content resources that are easily accessed by a wide audience and can be widely distributed to our membership and beyond. Evergreen resources are typically highly sustainable and require only periodic review to update for relevance.

Some of these are listed below:

- In April 2022, the free URM Leadership Pathways in Academic Medicine online course was launched. It features interactive content with video recordings from experienced faculty and assignments to build leadership skills and help identify opportunities for career advancement.
- The URM Journey to Academic Medicine (URM JAM) podcast has now released 24 episodes on topics relevant to URM students and residents considering a career in academic medicine. The podcast has been downloaded more than 2,000 times.
- The Mentoring Underrepresented Faculty to Academic Excellence toolkit for creating a mentorship program at your institution. A facilitator's guide & 4 recorded webinars train mentors to understand and appropriately address the unique needs of URM/BIPOC faculty in academic settings.
- The URM Scholarship webinar series, designed to provide accessible training for early career learners and faculty to find research mentors and produce scholarly research.

Ongoing Programing

Some of the outcomes of the URM Initiative include career development and mentorship programs that are more time- and resource-intensive, while still being extremely high yield. We reach a smaller, more targeted audience with mentorship dyads, fellowship programs, coaching, and conference workshops, but recognize that these personal connections are powerful. These include:

- The STFM URiM Mentorship program, which provides early-career faculty with longitudinal mentorship with mentor-mentee dyads. The focus is on addressing barriers unique to URM faculty, giving tips on overcoming those barriers, and helping guide faculty toward careers that are rewarding and fulfilling. More than 60 mentees have been matched over 3 years of the program.
- The Leadership through Scholarship Fellowship, which focuses on developing scholarly writing skills for URM faculty, is now on its 3rd fellowship cohort. A prolific number of papers have been published as an outcome of this fellowship.
- The URiFM scholarship workgroup is presenting workshops and sessions at the Conference on Medical Student Education and the Annual Spring Conference in collaboration with the editors of PRiMER.
- Members of the URM Initiative have submitted multiple presentations for 2023 on URM leadership and barriers to academic careers for STFM Annual, AAFP National Conference for Residents and Students, and more.

Dissemination and Next Steps

The entire URM Initiative will be evaluated in 2023 based on progress in achieving the following 2 aims:

1. Increase the percentage of URM family medicine faculty
2. Increase the number of solutions-focused, adaptable family-medicine URM leaders within and across our health care system

Throughout the 3 years of the Initiative, each of the 4 work groups have worked to measure the success of individual components/resources within the broader goals for each focus area. The work groups have used pre- and post-measurement tools where possible, monitored usage of resources and attendance of workshops, and surveyed learners and faculty to identify successful interventions. Additional evaluation will be conducted on overall metrics of success for the aims of the initiative.

As the 3 years of the URM Initiative draws to a close, the members of the 4 work groups and the URM Oversight Committee have much to celebrate. Significant accomplishments have been achieved in building lasting resources and innovative ongoing programming. The work will continue, yet we are grateful to pause and recognize what has been achieved.

Emily Walters



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A CALL TO LEADERSHIP

Academic family medicine faces an impending leadership crisis,¹⁻⁴ embodied by a deficit of available applicants for vacant chair positions nationwide. The most recent data from the Association of Departments of Family Medicine (ADFM) that includes most allopathic departments of family medicine in the United States, and a number of osteopathic departments, large academic medical center departments, and some Canadian departments of family medicine, suggests that about 25% of family medicine chair positions (42 of 158 member departments) remained unfilled as of summer 2022.⁵ Compounding this, a 2021 Association of American Medical Colleges (AAMC) survey documented that department chairs are 10 years older compared with 1977,⁶ and with the average age of clinical department chairs being 59.4 years, potential retirements of an aging workforce may further exacerbate this shortage.⁷ In a 2021 ADFM survey of the family medicine chairs, the majority (85%, 56/66 respondents) reported that they did not seek the chair role in their career before they became the chair.⁸ This prompted the ADFM's Leadership Development Committee to study and address this leadership vacuum in family medicine.

Leadership and the Role of the Chair

The chair role defines strategy, shapes the culture, develops people, and promotes a shared vision that is greater than the sum of its parts.⁹ As full-time leaders, chairs must leverage their strengths, while employing faculty with complementary