**Leadership at the crossroads of race and gender: The instrumental role of U.S. medical and dental education associations to advance racial and ethnic minority women faculty in leadership**

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Introduction

Eliminating health disparities in the U.S. requires a multifaceted approach including increasing the diversity of the health care workforce (Butler, 2008). Training a diverse workforce will likely lead to investigative studies highlighting minority-specific health care needs, establishing trust and credibility with racial/ethnic minority communities and enriching the pool of educators, managers and policymakers in the U.S. and globally. Academic associations can play a key role in developing strategies to ensure the advancement of women and racial/ethnic minority faculty into leadership positions. For more than 30 years, the Association of American Medical Colleges (AAMC) and American Dental Education Association (ADEA) have developed programs to optimize the advancement of women and racial/ethnic minorities, but these programs have developed separately for group by gender (women) and underrepresented racial/ethnic minority groups (e.g., Black and Latino). Examining intersections of race/ethnicity and gender are crucial to: better understand the needs of these groups, design more effective association leadership programs, and influence policy at the institutional level.

Purpose

Despite that women are 46% and 47% of first-time enrolled dental and medical students, respectively, women represent a persistently low proportion of faculty in senior and leadership roles in medical and dental schools. Similarly, underrepresented minorities are 13% of dental students and 15% of medical students, and also represent a low proportion of faculty in leadership roles. The purpose of this paper is to examine how associations can play an instrumental role in increasing women of color in leadership positions. We examine race/ethnicity, gender, and their intersections. We focus on Black women and Latinas in leadership, a group that lacks attention to their unique experiences. This paper also examines associations’ efforts to address leadership gaps for racial/ethnic minorities and women through policies and programs.

Design/Methodology

We conduct a systematic review of institutional efforts to promote leadership and advancement of women and minorities. We identify all relevant evidence, select studies or reports for inclusion, assess the quality of each study, and synthesize the findings. In the results and discussion section, we provide 1) a narrative synthesis of findings from an evidence-based perspective and 1) an Evidence Table of the studies we critically reviewed and analyzed. We also analyze existing data on the status of women of color in academic medicine and dentistry.

Research limitations

The present study searches only English language studies and is not using primary data. The systematic review does not overcome the inherent design and execution of primary studies we review.

Originality

This paper begins to fill the gap for medical and dental schools about the experiences of women of color pertinent to their professional advancement in order to better address their needs in professional development programs. It makes contributions to institutional leaders, education associations and policy makers. It also addresses complexities and unique experiences of the intersections of race/ethnicity and gender, addresses the importance of the cultural and climate of the environment, framing identity, and potential barriers to successful leadership development. The authors provide implications and suggestions for practice, education, and future research.

Key words: racial/ethnicity, women, medical, dental, health, education

**Author Biosketches**

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**Laura Castillo-Page, Ph.D.,** is senior director of Diversity Policy and Programs and Organizational Capacity Building at the Association of American Medical Colleges (AAMC). Dr. Castillo-Page is responsible for strategic planning, setting priorities, staff professional development, and for managing the day-to-day operations of the Diversity Policy and Programs unit. Dr. Castillo-Page also leads the organizational capacity building portfolio of work to promote the infusion of diversity and inclusion throughout academic medicine to support member institutions through services, tools, and resources that strengthen their policies and processes and address diversity issues at the institutional level.

**Marc A. Nivet, Ed.D.,** is the Chief Diversity Officer for the Association of American Medical Colleges. Dr. Nivet is known for seeking out and connecting people and ideas, creating innovative collaborations that have been recognized nationally as models of success. Through his writing and lectures, he has worked to reframe the conversation around diversity, elevating diversity out of its silo and into the company of talent management and strategic planning as drivers of organizational transformation and performance improvement. In the context of academic medicine, this means linking diversity to the overall mission of better health outcomes for all.

**Eugene L. Anderson, Ph.D**., is the Managing Vice President/Chief Policy Officer for the American Dental Education Association. Dr. Andersonintegrates the association’s educational research, access and diversity programming and public policy advocacy activities to better address contemporary issues facing dental education and the oral health needs of the public. Dr. Anderson holds a doctorate in education policy from the University of Virginia and a baccalaureate degree from the University of Pennsylvania.