

# Diversity and Inclusion

## Preliminary Report

One of the AASM Diversity and Inclusion Committee’s goals is to assess the current AASM membership and leadership to identify underrepresented groups and detect any barriers to diversity and inclusion. As part of this effort, the committee added demographic questions on gender, race, practice type, and special accommodations to the AASM member profile. Data collection is ongoing, and all members are encouraged to update their profile by answering these questions in their online account on the AASM website.

This preliminary analysis was presented to the AASM Board of Directors in July 2019.

### I. Membership Category

Although the Sleep Team category is a rapidly growing membership type, physicians comprise the majority of AASM membership (~83%). This distribution is an important reference point when considering the overall demographic data.

Membership Category	All			
	Members	Member	Volunteers	Leaders
Affiliate	2.04%	2.07%	0.91%	0.00%
Corresponding A	1.38%	1.39%	0.91%	0.00%
Corresponding B	0.04%	0.04%	0.00%	0.00%
Emeritus	1.98%	2.00%	0.91%	0.00%
Fellow	24.16%	23.75%	38.18%	85.71%
In-Training	1.93%	1.96%	0.00%	0.00%
Regular	52.80%	52.91%	54.55%	14.29%
Retired	0.50%	0.51%	0.00%	0.00%
Sleep Medicine Trainee	2.18%	2.21%	0.91%	0.00%
Sleep Team	12.99%	13.17%	3.64%	0.00%

*Member* = general AASM members

*Volunteer* = serve on AASM committee or taskforce

*Leader* = AASM board members, chairs & vice-chairs

## II. Age

### Physician Members

AASM’s mean physician member age is 52.9 years compared to 51.6 years in the AMA Physician Masterfile; however, AASM leaders are slightly younger, and AASM Volunteers are on average ~5 years younger compared to AASM leadership. This may be due to efforts to identify new talent for the AASM’s leadership pipeline. There is also an opportunity to include more “older” members for volunteer opportunities to take advantage of their knowledge and connections within the field of sleep medicine.

Age	All Members	Member	Volunteers	Leaders	Physicians*	Non-Physicians	All Physicians (AMA data)	Variance (Physicians only)	Variance (ALL Members)
Average Age (Mean)	51.6	51.7	45.5	50.6	52.9	46.1	51.6	1.3	0
Under 40	14.62%	14.57%	20.91%	3.57%	11.39%	28.97%	29.62%	-18.23%	-15.00%
40-49	24.63%	24.22%	48.18%	46.43%	24.16%	26.72%	19.03%	5.12%	5.60%
50-59	25.64%	25.77%	16.36%	25.00%	26.35%	22.49%	18.24%	8.11%	7.40%
60-69	18.79%	19.01%	6.36%	7.14%	20.46%	11.38%	16.90%	3.56%	1.89%
70 or more	5.32%	5.39%	0.91%	3.57%	6.26%	1.16%	16.21%	-9.95%	-10.88%
Blank	11.00%	11.04%	7.27%	14.29%	11.39%	9.27%	0.00%	11.39%	11.00%

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**\*Physicians definition** = Regular, Fellow, Emeritus, Retired, Sleep Medicine Trainees, Corresponding A/B (some are nonphysicians)

**Non-Physicians** = Affiliate, In-Training, and Sleep Team (some In-Training may be physicians)

**All Physicians (AMA data)** is from the Report of the Council on Long Range Planning and Development (CLRPD) Report 2-A-17

### Non-Physician Members

Members in the non-physician categories have an average age of 46.1 years, but they only represent ~15% of total AASM members, and of those, ~39% are 49 or younger.

Membership Type	All Members	Under 40	40-49	50-59	60-69	70 or more	Blank
Affiliate	2.04%	15.34%	23.93%	21.47%	16.56%	2.45%	20.25%
Corresponding A	1.38%	20.91%	50.91%	20.00%	4.55%	1.82%	1.82%
Corresponding B	0.04%	0.00%	0.00%	33.33%	0.00%	0.00%	66.67%
Emeritus	1.98%	0.00%	0.00%	0.00%	12.03%	78.48%	9.49%
Fellow	24.16%	0.57%	15.45%	34.32%	25.04%	4.35%	20.27%
In-Training	1.93%	75.32%	14.29%	6.49%	1.95%	0.00%	1.95%
Regular	52.80%	13.76%	29.89%	24.96%	19.19%	4.32%	7.88%
Retired	0.50%	0.00%	0.00%	0.00%	55.00%	45.00%	0.00%
Sleep Medicine Trainee	2.18%	86.78%	9.20%	1.72%	0.00%	0.00%	2.30%
Sleep Team	12.99%	25.17%	26.52%	25.27%	12.73%	1.06%	9.26%

### III. Gender

#### Physician Members

Compared to the total U.S. physician population (66% male; 33.9% female), AASM’s physician member gender split (~72% male; 26.27% female) does not have parity; however, when looking at the volunteer members (64.6% male; 33% female) we see closer parity, and leaders (54.5% male; 44.5% female) are approaching a more even split.

Gender Identity	All				Non-		All	Variance	Variance
	Members	Member	Volunteers	Leaders	Physicians	Physicians	Physicians (AMA data)	(Physicians only)	(ALL Members)
Male	64.46%	64.60%	64.29%	54.55%	71.98%	31.08%	66.00%	5.98%	-1.54%
Female	33.26%	33.09%	35.71%	44.55%	26.27%	64.28%	33.90%	-7.63%	-0.64%
Blank/Not Disclosed	2.28%	2.31%	0.00%	0.91%	1.75%	4.64%	0.10%	1.65%	2.18%
Non-Binary	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

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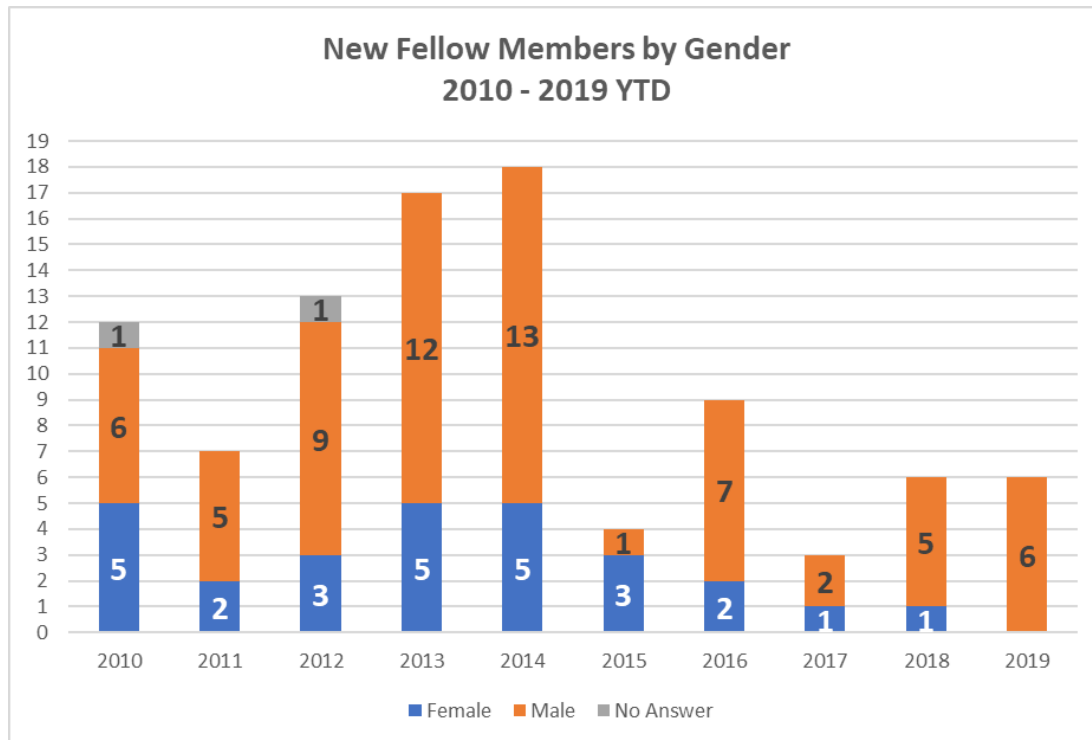
#### Non-Physician Members

It is important to note that we do not have an external gender data set to easily compare against our non-physician members, who represent ~15% of AASM’s total members. There are substantially more females in the Sleep Team membership category.

Membership Type	All			Blank/Not
	Members	Female	Male	Disclosed
Affiliate	2.04%	39.9%	50.3%	9.8%
Corresponding A	1.38%	36.4%	63.6%	0.0%
Corresponding B	0.04%	33.3%	33.3%	33.3%
Emeritus	1.98%	10.1%	88.0%	1.9%
Fellow	24.16%	18.5%	81.1%	0.4%
In-Training	1.93%	57.1%	39.6%	3.2%
Regular	52.80%	29.7%	68.0%	2.3%
Retired	0.50%	25.0%	75.0%	0.0%
Sleep Medicine Trainee	2.18%	44.8%	52.3%	2.9%
Sleep Team	12.99%	72.2%	23.3%	4.4%

## Fellow Members

Of the 95 Fellow members approved from 2010 to 2019, 28% were female, and 69% were male, which is 1) very different from the total Fellow member population of 18.5% female to 81.1% male ratio and 2) much closer to the overall 33% female to 64% male AASM member ratio. There is an opportunity to encourage female AASM members to achieve Fellow status.



## Emeritus and Retired Members

There are substantially more males in the Retired (75%) and Emeritus (88%) member categories. Individual members who meet the requirements may request either of these membership statuses. The Emeritus category represents less than 2% of AASM members, and the Retired category less than 1%.

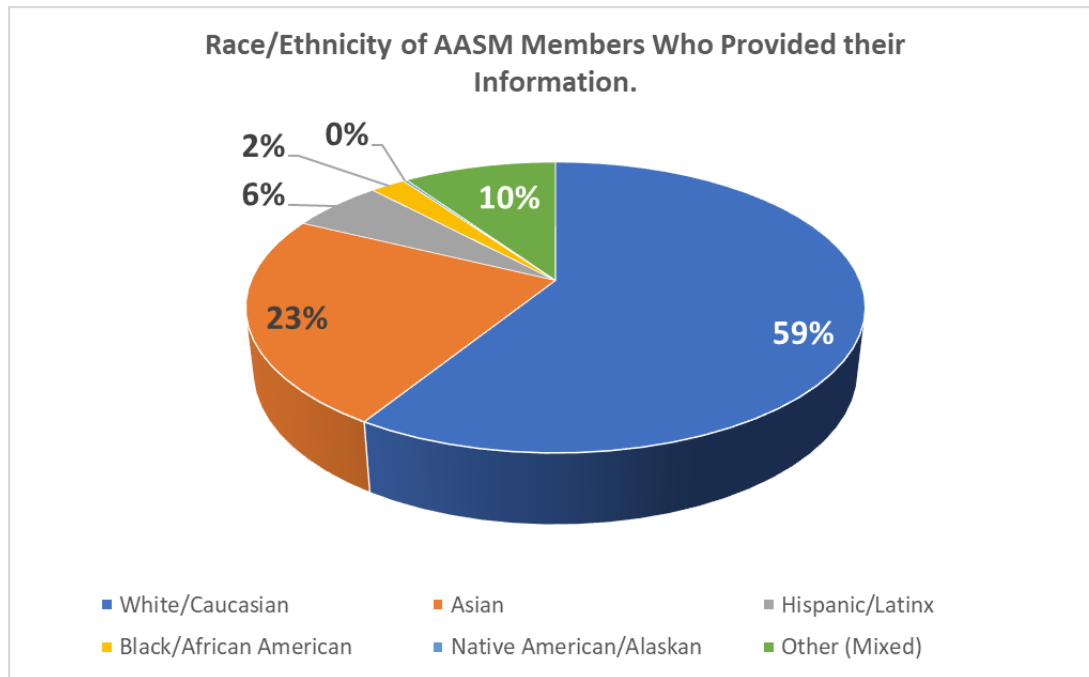
## SLEEP Medicine Trainees

The male (52.3%) to female (44.8%) ratio in the Sleep Medicine Trainee membership category is much closer to an even split, reflecting the trend that males and females are attending medical school in more equal numbers.

## IV. Race/Ethnicity

Unlike the previous demographic categories, the AASM has only recently begun collecting data on Race/Ethnicity. We are missing this information on 83.34% of our members. In comparison, the AMA Physician Master File has this data on ~80% of U.S. physicians.

Of those who did provide their race/ethnicity, 59% selected White/Caucasian and 41% were in another category.



The percentages in the volunteer and leader categories shift slightly.

Race/Ethnicity	All Members	Member	Volunteers	AASM Leaders	Physicians*	Non-Physicians
White/Caucasian	59%	59%	46%	47%	56.40%	69.44%
Asian	23%	23%	29%	47%	25.79%	13.10%
Hispanic/Latinx	6%	6%	7%	5%	6.12%	4.37%
Black/African American	2%	2%	5%	0%	1.95%	3.17%
Native American/Alaskan	0%	0%	0%	0%	0.19%	0.40%
Other (Mixed)	10%	10%	12%	0%	9.55%	9.52%

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The Association of Medical Colleges (AAMC) report<sup>1</sup> on physician workforce diversity as of 2013 reports that Blacks/African Americans represent 4% of the physician workforce, and Hispanics/Latinos are about 5% of the physician workforce. With a combined 8% Black/African American and Hispanic/Latino, with additional members reporting as mixed race (some of whom are likely to be Black/African American and Hispanic/Latino), the AASM is on par with physicians at large, though Black/African American numbers are particularly low.

No data on Sleep Medicine diversity are available. However, data exist for Internal Medicine, Neurology, and Psychiatry, our largest constituencies. Internal Medicine is 4.6% Black physicians, Neurology is 2.2% Black physicians, and Psychiatry is 4.2% Black physicians. For Hispanics, Internal Medicine is 4.6%, Neurology is 4.1%, and Psychiatry is 4.3%.

We do not know if the low number of Black members identified in the survey is related to the diversity within Sleep Medicine, the AASM not being representative of that diversity, or a differential response rate to the survey.

Below are links to the AAMC’s report:

- [U.S. Physicians by Race, Ethnicity, and Sex, 2013](#)
- [Practice Specialty by Race and Ethnicity, 2013](#)

## V. Primary Board and Specialty

Currently, the AASM has the primary board for ~57.6% of its members and the primary specialty data for about 19% of its members (many of whom list more than one).

Primary Board Certification	All					All Physicians (AMA data)	Variance (Physicians only)	Variance (ALL Members)
	Members	Member	Volunteer	Leaders	Physician			
American Board of Anesthesiology	0.18%	0.2%	0.0%	0.0%	0.2%	4.7%	-4.49%	-4.52%
American Board of Family Medicine	2.39%	2.3%	6.4%	0.0%	2.9%	11.8%	-8.93%	-9.41%
American Board of Internal Medicine	27.86%	27.6%	34.5%	71.4%	33.7%	23.0%	10.72%	4.86%
American Board of Obstetrics and Gynecology	0.04%	0.0%	0.0%	0.0%	0.0%	4.7%	-4.67%	-4.66%
American Board of Otolaryngology	3.04%	3.1%	1.8%	0.0%	3.7%			
American Board of Pediatrics	3.43%	3.3%	11.8%	3.6%	4.1%	8.7%	-4.59%	-5.27%
American Board of Psychiatry and Neurology	16.61%	16.4%	32.7%	21.4%	19.9%	5.3%	14.64%	11.31%
American Board of Surgery	0.01%	0.0%	0.0%	0.0%	0.0%	13.5%	-13.48%	-13.49%
Other	4.01%	4.1%	0.0%	0.0%	4.4%	13.6%	-9.16%	-9.59%
(blank)	42.43%	43.0%	12.7%	3.6%	31.0%			

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<sup>1</sup> Association of Medical Colleges, Diversity in the Physician Workforce: Facts & Figures 2014.

Included in the data:

- American Board of Internal Medicine
  - 33.7% of all physician members
  - 34.5% of volunteers\*
  - 71.4% of leaders\*
- American Board of Psychiatry and Neurology
  - 19.9% of all physician members
  - 32.7 % of volunteers\*
  - 21.4% of leaders\*
- American Board of Pediatrics
  - 4.1% of all physician members
  - 11.8% of volunteers\*
  - 3.6% of leaders\*
- American Board of Family Medicine
  - 2.9% of all physician members
  - 4.6% of volunteers\*
  - 0% of leaders\*
- American Board of Otolaryngology
  - 3.7% of all physician members
  - 1.8% of volunteers\*
  - 0% of leaders\*
- 4.4% of AASM physician members list “other” as their primary board
- 31% of physician members did not list a primary board

*\*Totals include physician and nonphysicians; 6.9% of non-physician members list a board/certifying body.*

## VI. Practice Setting

Practice setting is one of the new demographic data points being collected. Like the other new items, there is a large gap between what we do (18.43%) and do not know (81.57%) about AASM members’ practice settings.

Practice Setting	All Members	AASM			Physicians	
		Member	Volunteers	Leaders	Physicians	Non-Physicians
Academic	24.41%	23%	63%	53%	26%	16%
Employed Physician Practice	26.10%	26%	16%	26%	26%	24%
Military	1.56%	1%	2%	5%	2%	2%
Mixed Practice	6.73%	7%	5%	5%	5%	8%
Not Listed	11.42%	12%	7%	0%	7%	30%
<b>Employed Physicians Total</b>	<b>70.22%</b>	<b>69.27%</b>	<b>93.00%</b>	<b>89.47%</b>	<b>66.17%</b>	<b>78.95%</b>
Group practice (Equity Owner)	13.53%	14%	2%	5%	14%	11%
Solo practice (Owner)	16.25%	17%	5%	5%	18%	10%
<b>Private Practice Total</b>	<b>29.78%</b>	<b>30.73%</b>	<b>7.00%</b>	<b>10.53%</b>	<b>31.54%</b>	<b>21.05%</b>

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## VII. Geography

Currently the Midwest and Northeast have substantially more representation in the AASM Leader category, while the West and South have lower representation. International members are under-represented in both the volunteer and leadership categories. Further analysis is needed.

Geographic Location	All				Non-	
	Members	Member	Volunteers	Leaders	Physicians*	Physicians
Midwest	21.13%	20.99%	25.45%	42.86%	21.13%	21.13%
West	17.50%	17.53%	19.09%	3.57%	16.94%	19.97%
Northeast	15.68%	15.56%	20.00%	32.14%	15.90%	14.72%
South	30.62%	30.61%	33.64%	21.43%	32.29%	23.18%
International	14.53%	14.77%	0.91%	0.00%	13.24%	20.25%
US Territory	0.33%	0.33%	0.00%	0.00%	0.37%	0.14%
United States Minor Outlyi	0.01%	0.01%	0.00%	0.00%	0.00%	0.07%
Armed Forces Europe	0.03%	0.03%	0.00%	0.00%	0.02%	0.07%
Blank	0.18%	0.17%	0.91%	0.00%	0.11%	0.48%

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## VIII. Special Accommodation

At the time of the data pull, only 23 people indicated a need for special accommodation. At this time there is limited need, which can be addressed upon request by course attendees, etc., and through questions embedded in the registration process. In addition, AASM staff is currently looking at improving the AASM website's ADA compliance.



## AASM Diversity and Inclusion Committee Members:

- Andrew Spector, MD, *Chair*
- Kyra Clark, MD, *Vice Chair*
- Olufunke Afolabi-Brown, MBBS
- Cathy Alessi, MD
- Loretta Colvin, APRN, RN
- Jose Contreras, MD
- Patricio Escalante, MD
- Fauziya Hassan, MD
- Venugopal Komakula, MD, MPH
- Derek Lam, MD
- Edith Mensah-Osman, MD, PhD
- Valerie Stone, PhD, RCP
- Matthew Tucker, PhD, RPSGT
- Adrian Velasquez, MD, MPH

## Board Liaison:

- Carol Rosen, MD