

# ASGE ANNUAL REPORT

## Advancing Diversity, Equity, and Inclusion in Gastroenterology

The American Society for Gastrointestinal Endoscopy (ASGE) recognizes and values the importance of embracing diversity, equity, and inclusion. In 2021, the ASGE Governing Board approved two plans to advance the Society's DEI efforts. Expanding health equity in access to gastroenterology (GI) care and cancer screening is an ASGE priority.

### What does DEI mean to ASGE?

- **Diversity:** Ensuring that ASGE capitalizes on the benefit differences in race, ethnicity, gender, sexual orientation, age, geography, and career stage bring to the advancement of the profession, society, and patient care.
- **Equity:** Ensuring that processes and programs are impartial, fair, and aim to provide equitable outcomes for all gastroenterologists and patients.
- **Inclusion:** Ensuring all members feel a sense of belonging and support from ASGE.

Through society-wide initiatives, the priorities outlined in both plans are to be achieved and analyzed annually with updates to the Governing Board.

## 2022 TOPLINE RESULTS

### INITIATIVES AND DEMOGRAPHICS



## Critical Shifts in 2022

A key priority of ASGE leadership is to increase gender, racial and ethnic diversity in ASGE's Membership, Leadership Awards and Nominations, and Educational Programming with a culture of inclusion. While we know a more enduring change will take time, there are indications of a shift taking place.

**Committee Service:** The number of members that applied for 2023 committee service increased significantly from 198 in 2021 to 330 in 2022. This represents a 66% increase in members interested in committee service. In 2022 the number of women who applied for committee service grew by 295% from 46 in 2021 to 182 applicants in 2022. Furthermore, the number of applicants considered Underrepresented in Medicine also increased. The number of African Americans that applied for committee service increased by 60% from 8 to 20 and Hispanics increased by 39% from 11 to 18. Additionally, over the last two years, we have seen more of a willingness for members to identify as LGBTQ+. This positive change will result in increased diversity in committee appointments in 2023. This year, the Women and Diversity and Inclusion Committees outreached to targeted groups to urge them to apply for committee service.

**Education:** ASGE continued to focus on adding educational opportunities around DEI topics. This year, ASGE held two webinars related to LGBTQ+ patients and providers, incorporated a presentation into GI Outlook on DEI and GI Practice, and a DEI talk into the Quality and Safety Course. Additionally, members of the Diversity and Inclusion Committee are providing perspectives in Healio on DEI.

**Inclusion:** ASGE's president formed a taskforce to review ASGE Bylaws to ensure they were reflective of the Society's priorities to advance DEI. In 2022, the Governing Board changed ASGE Bylaws to allow International members the right to vote during the annual ASGE Business Meeting.

**Funding for DEI Initiatives:** The Society made it a priority to seek funding to advance DEI initiatives for patients and providers. In 2022, ASGE secured \$600,000 to educate patients on appropriate screening tests, implement a CRC Screening Program, launch women's initiatives, and increase access to its leadership programs with an eye toward diversity and inclusion.


**Membership:** ASGE increased resources for the GI team from the APP to the Tech. Additionally, ASGE saw a 15% growth in Trainee members in 2022. This increase is primarily a result of Trainee members from India.



ASGE is committed to strengthening its efforts to enhance DEI throughout the Society, profession, and patient care. This summary highlights 2022 activities that helped advance ASGE's commitment. Results serve to measure the Society's efforts over time.

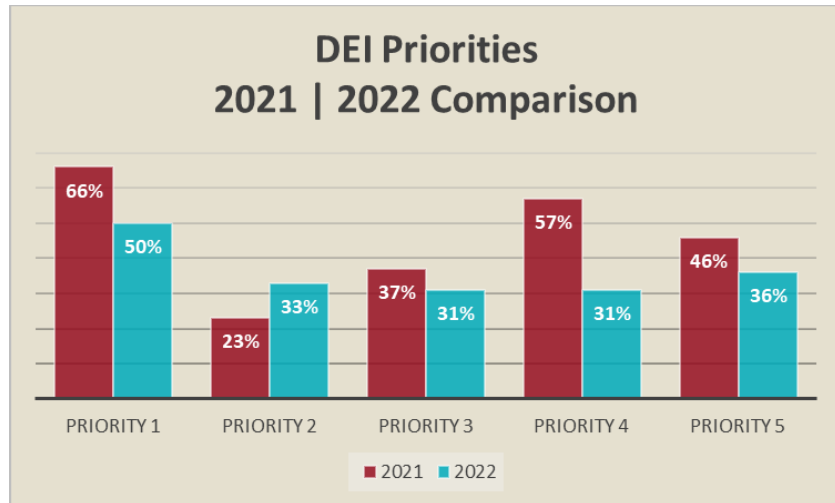
## WHAT'S ON THE HORIZON for 2023?

- Faculty Database
- Pipeline Projects for High School and Medical Students
- Newsletter for International Members
- Colorectal Cancer Screening Program
- Position Statements on Pay Equity and Parental Leave
- Elevate Retreat: Positioning URM in GI for Success
- GenderSpeak Workshop
- Women Training Women Hands-On Course

### Advancing ASGE DEI Priorities

	DEI Priority	Percentage of Initiatives Addressing Priority	Strategies Employed
 <p><b>DIVERSITY</b></p>	<p><b>Priority 1</b></p> <p>Increase gender, racial and ethnic diversity in ASGE's Membership, Leadership Awards and Nominations, or Educational Programming with a culture of inclusion.</p>	50%	<ul style="list-style-type: none"> <li>• Increase diversity in awards and award nominations.</li> <li>• Enhance coaching mentorship and sponsorship of members that are underrepresented in medicine.</li> <li>• Increase number of volunteer appointments for URM, women and LGBTQ+ members.</li> <li>• Create opportunities for networking, leadership in medicine including women and LGBTQ+ members.</li> <li>• Increase diversity in educational programming and faculty.</li> </ul>
	<p><b>Priority 2</b></p> <p>Promote diversity in the health care workforce pipeline.</p>	33%	<ul style="list-style-type: none"> <li>• Collaborate with other professional societies to enhance the recruitment of diverse physicians.</li> <li>• Collaborate with other professional societies and industry to enhance recruitment of diverse individuals to medical school.</li> <li>• Develop a workforce pipeline program geared towards recruiting URM and women in GI.</li> <li>• Develop resources that promote the value of a career in GI to medical students and internal medicine residents.</li> </ul>

<p><b>EQUITY</b></p> 	<p><b>Priority 3</b></p> <p>Promote equity and protection in the workplace regardless of gender, race and ethnicity, sexual orientation, religion, or disability.</p>	<p>31%</p>	<ul style="list-style-type: none"> <li>• Support initiatives at the society level and in the practice setting to address sexual harassment in the workplace as well as promote transparency and accountability.</li> <li>• Support policies that ensure physician compensation is equitable; based on comparable work at each stage of a physicians' professional career; not based on characteristics of personal identity, including gender.</li> <li>• Family and medical leave policies as well as paid leave policies should be a standard part of physicians' benefit packages, regardless of gender.</li> <li>• Advocate for research and research funding to assess the cause and effect of gender pay inequity and barriers to career advancement in gastroenterology.</li> </ul>
	<p><b>Priority 5</b></p> <p>Expand healthcare equity and access to GI care.</p>	<p>31%</p>	<ul style="list-style-type: none"> <li>• Support research and career development of GI researchers in health disparities.</li> <li>• Advocate for public policy that ensures access to quality GI care for underserved populations, groups with low socioeconomic status, URM and LGBTQ+.</li> <li>• Support programs and initiatives that help eliminate healthcare disparities in risk assessment and early detection of GI diseases, such as colorectal cancer.</li> <li>• Develop and implement programs to promote awareness of LGBTQ+ - related issues for both LGBTQ+ gastroenterology providers and patients.</li> </ul>
<p><b>INCLUSION</b></p> 	<p><b>Priority 5</b></p> <p>Expand a culturally sensitive and diverse healthcare workforce well trained to deliver quality healthcare that improves the health of all patient populations.</p>	<p>36%</p>	<ul style="list-style-type: none"> <li>• Integrate educational programming on diversity, inclusion, and equity in ASGE educational activities.</li> <li>• Support the provision of regular and recurring implicit bias training by all organizations that employ physicians. Organizational policies and procedures should be implemented that address implicit bias.</li> <li>• Develop and support initiatives to facilitate anti-bias training in additional topics such as Bystander, Upstander and Inclusive leadership training.</li> </ul>



### Opportunities for Improvement

**Data:** ASGE must continue to be intentional about capturing data on its initiatives that can be benchmarked and will allow the Society to measure its success in advancing the priorities of the DEI Action Plan and Strategic Plan. Goals should be established across ASGE groups to evolve DEI where possible. It is critical that ASGE collects demographic information on its members, as the Society continues to have large gaps in member demographic data associated with race and ethnicity, sexual orientation, and practice setting. Matters such as practice setting, age, gender, ethnicity and race, sexual orientation, socio-economic issues, and global geography are essential data to help ASGE understand and better serve its members.

Protocols must be established to track, trend, and analyze initiatives to assess their outcomes annually.

**Accountability:** It is important that ASGE volunteer group leaders and staff liaisons consider DEI in their initiatives. The effort and result will look different for every group. While some efforts may reveal immediate success, other efforts may take more time to advance. The key is to just get started.

### Acknowledgements

Special recognition to ASGE volunteer groups and staff that made diversity, equity, and inclusion a priority in the planning and implementation of their activities in 2022.

APP (Advanced Practice Providers) Task Force  
ASGE Staff  
AWE (ASGE Women in Endoscopy) SIG  
DDW Annual Scientific Program  
Diversity And Inclusion Committee  
GIE Editorial Board/Publications Committee  
GOLD (GI Organizational Leadership Development) Directors  
LEAD (Leadership Education and Development) Program  
Governing Board

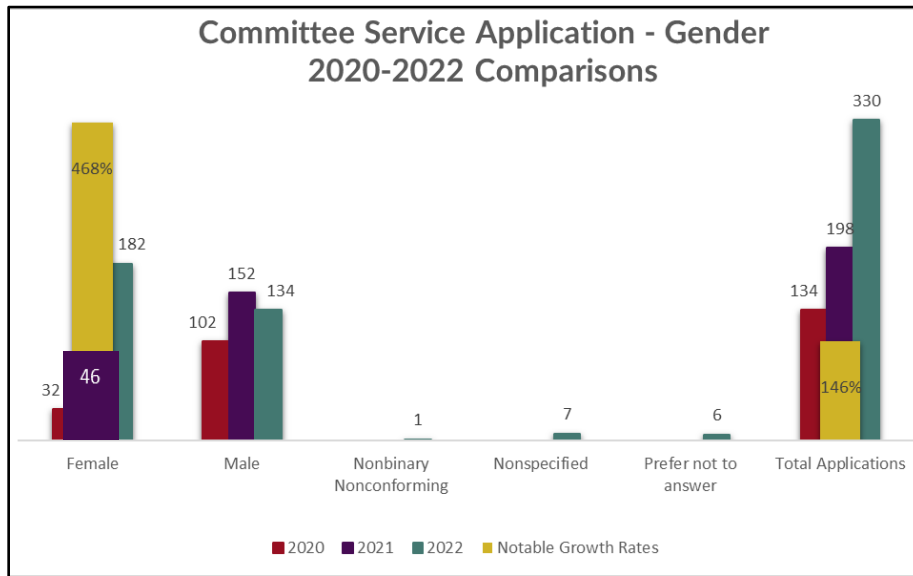
Health And Public Policy Committee  
Intersociety Group on Diversity  
Member Engagement Committee  
Practice Operations Committee  
Quality Assurance in Endoscopy Committee  
Research Committee  
Training Committee  
Value of Colonoscopy Task Force  
Women's Committee

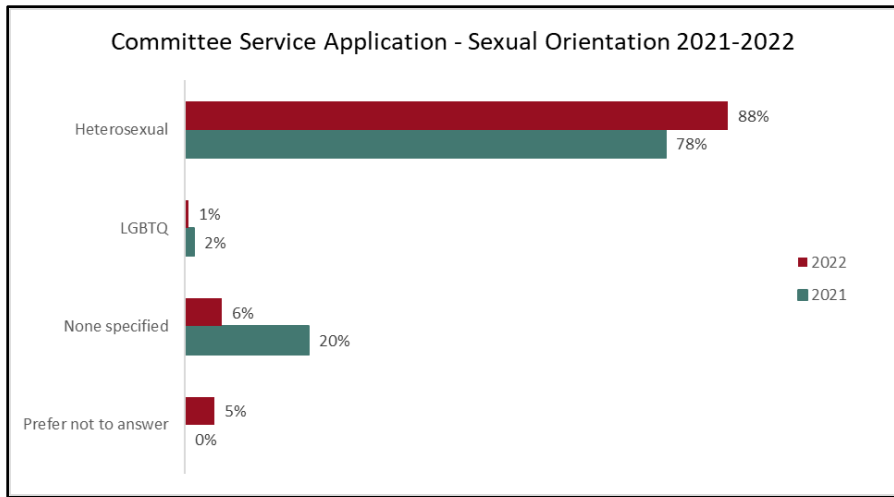
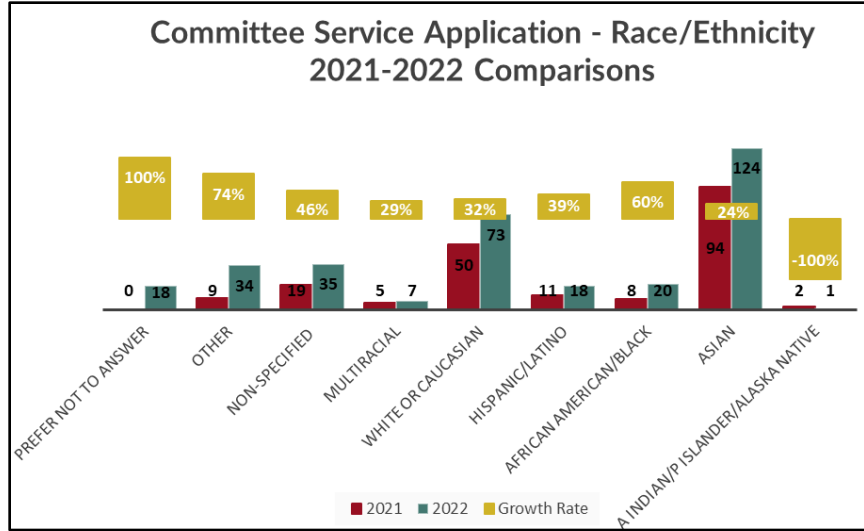
## Committee Service Application Demographics

These numbers include all committees, ABE, GIE Editorial Board total 31. There were 515 appointments to committees, ABE, GIE Editorial Board during the 2022-2023 committee year. Committee representation by race and ethnicity and gender is comparable to the general membership of ASGE. Committees included in this data include:

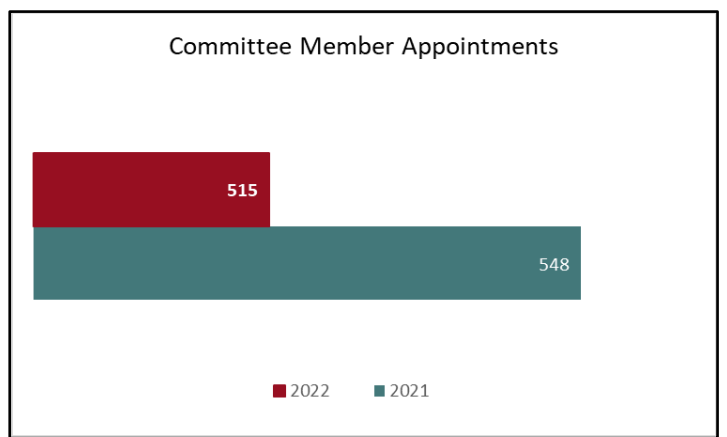
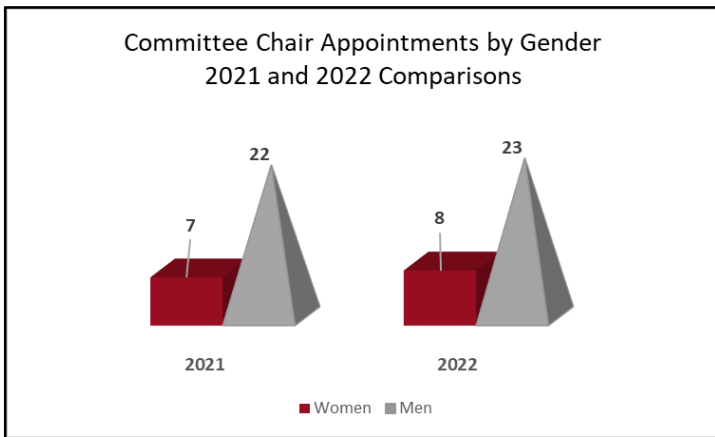
- ABE Advisory Board
- Advanced Endoscopy Committee
- ARIA (ASGE Recognized Industry Associate) Committee
- Audit Committee
- Awards Committee
- Budget and Finance Committee
- DDW Annual Scientific Program Committee
- DDW Clinical Symposia Committee
- DDW Hands-on/Simulation-Based Education Committee
- DDW International Clinical Symposia Committee
- DDW Video Plenary and World Cup Committee
- Diversity and Inclusion Committee
- Education Council
- eLearning Committee
- Fellows Caucus

- GIE Editorial Board
- Health and Public Policy Committee
- History and Archives Committee
- International Committee
- Medical Simulation and Education Technology Committee
- Member Engagement Committee
- Nominations Committee
- Practice Operations Committee
- Publications Committee
- Quality Assurance in Endoscopy Committee
- Reimbursement Committee
- Research Committee
- Standards of Practice Committee
- Technology Committee
- Training Committee
- Women's Committee





## Committee Appointment Demographics



The committee member appointment data does not reflect the Governing Board or Task Force members. In 2021 the Value of Colonoscopy and Women’s Task Forces were included. ASGE’s current Task Forces include APP, AI, Innovation and Sustainability.

