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The Nomen in AMIA UPDATE

Monthly E-Newsletter



GENDER REPRESENTATION IN INFORMATICS LEADERSHIP & AWARD RECOGNITION

In this issue:

- We spotlight Dr. Deepti Pandita, the first woman to direct a US Clinical Informatics Fellowship Program, at Hennepin Health (p. 2).
 - This is part of an ongoing series that will feature clinical informatics fellowship directors.
- Findings from a JAMIA article on gender representation in biomedical informatics leadership and award recognition are summarized (p. 4)

Previous issues of the WIA newsletter can be found on the Women in AMIA webpage <u>here</u>. Steering Committee Members:

Tiffani Bright, Wendy Chapman, Prerna Dua, Tiffany Leung, Allison McCoy, Omolola Ogunyemi, Margarita Sordo, Donghua Tao, Kelly Taylor (AMIA Staff), Rebecca Wilgus, Karmen Williams

Spotlight on Clinical Informatics Fellowship Directors



Deepti Pandita MD, FAMIA

WIA: What is your current position and title?

Deepti: I'm the Chief Health Information Officer of Hennepin Healthcare and Assistant Professor at the University of Minnesota in Minneapolis. I'm also Program Director of the Clinical Informatics Fellowship at Hennepin Healthcare.

WIA: How did you first find out about clinical informatics?

Deepti: My foray into informatics was very organic - when I started medical school, computers were just used for literature searches and research. When I started residency, EMRs were just being launched and while everyone was a "skeptic" and "scared," I embraced the technology and became an "EMR Champion." As EMRs matured, so did my role and then my curiosity grew to learn about Clinical Informatics as a discipline and I took the OHSU 10x10 course and I was hooked!

WIA: What made you decide on a career path that includes clinical informatics?

Deepti: I saw my colleagues struggle daily with juggling their clinical medicine responsibilities and feeling like they were working for the EMR rather than the EMR working for them. This is when I decided that I need to work on creating better workflows, improving usability and using informatics principles to improve care delivery - not only for my colleagues delivering healthcare but also for our patients receiving the care.

WIA: Were there any unique challenges you faced as the first woman to direct a clinical informatics fellowship program in the US?

Deepti: I was fortunate to have great mentors guiding me – ironically, they are all men so I will say emphatically [that] men can be great mentors for women if the job you are seeking to do is agnostic to your sex. I think the biggest barrier came from me internally...

Spotlight on Clinical Informatics Fellowship Directors, cont'd.

Deepti (cont'd.): as I suffered from a huge "imposter syndrome" complex of not measuring up to my peers - not only being a female in a male-dominated field but also being a woman of color. I had to coach myself out of this and this is where a lot of my female colleagues in academia helped me find resources to overcome this.

WIA: What do you find most exciting about your work as a Clinical Informatics Fellowship Director?

Deepti: I love teaching and love molding young minds and showing them what is possible. I see the growth a fellow has from when they start their fellowship to when they end and it is not only heartwarming but also brings immense gratitude and satisfaction that I could play a part in the process.

WIA: Do you have any words of advice for medical students or residents who may want to consider a career path that includes clinical informatics?

Deepti: First and foremost, medical students and residents need to understand that clinical informatics is not synonymous with the EMR and it is definitely not synonymous with information technology. I encourage learners from all walks of life to look at informatics as a problem-solving tool - they could approach any aspect of medicine and apply a clinical informatics-based solution to some or many aspects of that problem-solving process. I would suggest that they seek out mentors and explore opportunities within their learning environments to learn more or simply look at professional society websites like AMIA to seek out more information

WIA: There may be medical students and residents out there who would be interested in a clinical informatics fellowship but aren't fully aware of this option. Do you have any ideas on how to reach out to this group?

Deepti: A lot of medical schools have been successful in creating informatics electives in their curricula. This would be a great option for any student to learn more. Most residencies require a quality improvement or process improvement rotation or project and again, [it would help] if the residents could be guided to their informatics departments. AMIA should have members sit on ACGME and AAMC for creating this visibility.

WIA: What is something about you that you'd like to share that most people don't know about?

Deepti: Two things, one work-related, the other not. My passion lies in solving for health equity. The notion that technology creates a digital divide and favors the enabled is not [necessarily] true. I work at a Safety Net system and we constantly strive to develop technology solutions that can bridge the Equity gap. I am also a Board member for a grassroots organization in our State called MDHEQ (MN Doctors for Health Equity) through which I do a lot of advocacy and policy work. Outside of work, my favorite hobby, which is also my salvation from stress and burnout, is gardening. I grow vegetables every year and my produce has won awards at our State Fair.



Gender representation in U.S. biomedical informatics leadership and recognition

A recent paper, "<u>Gender Representation in U.S. Biomedical Informatics Leadership and Recognition</u>," was published in JAMIA by members of the Women in AMIA Awards and Leadership Subcommittee: Ashley Griffin, MSPH, Tiffany Leung, MD, MPH, FACP, FAMIA, Jessica Tenenbaum, PhD, FACMI, and Arlene Chung, MD, MHA, MMCi, FAMIA.

The study describes gender representation in leadership and award recognition in the U.S. biomedical informatics community. Data were collected from publicly available websites and provided by AMIA, which included academic informatics training programs (2017-2019), clinical informatics subspecialty fellowship programs (2018-2019), AMIA leadership (2014-2019) and AMIA signature awards (1993-2019).

Overall, leadership and recognition in biomedical informatics was significantly lower for women than men. The recent increase in women represented across all categories of leadership and award recognition from 2018 to 2019 is promising. Lower proportions of women have also been reported within academic medicine and STEM fields.

The ongoing efforts to address gender inequities in academia and informatics are also encouraging. There are a number of ongoing diversity, equity, and inclusion (DEI) initiatives from the <u>AMIA DEI Task Force</u>, <u>Women in AMIA Initiative</u>, <u>National Academies of Sciences, Engineering, & Medicine</u>, and the <u>NIH Gender Equality Task Force</u>.

The COVID-19 pandemic has also raised concerns about acutely exacerbating gender inequities, which may have unknown longer-term consequences for the career advancement of women. Standardizing the collection, surveillance, and dissemination of demographic data about the biomedical informatics workforce are needed to promote DEI efforts.

To learn more or get involved in the Women in AMIA Awards and Leadership Subcommittee, please join the <u>Women in AMIA Discussion Forum!</u>



Women in AMIA would love to hear from you about what's working, what's not, and what to feature in future editions of the newsletter. Also, how are you dealing with COVID-19? Did you receive the vaccination? In these trying times, how are you focusing on the positive?

Please email us at:

AMIA-2020womeninamiasteeringcommittee@ConnectedCommunity.org

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