



University
of Glasgow

Chew, C., Albazaz, R., Taylor, S.A., Tolan, D. and BSGAR Committee, (2023) Diversity and equity: a radiology society's update. *Clinical Radiology*, 78(3), pp. 166-167. (doi: [10.1016/j.crad.2022.10.015](https://doi.org/10.1016/j.crad.2022.10.015))

Copyright © 2022 The Royal College of Radiologists. This is the author version of the work available under a Creative Commons licence: <https://creativecommons.org/licenses/by-nc-nd/4.0/>

There may be differences between this version and the published version. You are advised to consult the publisher's version if you wish to cite from it: <https://doi.org/10.1016/j.crad.2022.10.015>

<https://eprints.gla.ac.uk/284964/>

Deposited on: 8 November 2022

Enlighten – Research publications by members of the University of Glasgow
<http://eprints.gla.ac.uk>

Diversity and Equity: A Radiology Society's Update

The benefits of diversity are numerous and well discussed, with the GMC acknowledging its vital role to doctors' wellbeing and safe patient care; laying out guidance on embedding this at the core of medical education[1-3]. A wakeup call then when the "...significant difference in pass rates between White and BME U.K. Graduates" was highlighted by the Royal College of Radiologists in its Equality, Diversity and Inclusion report [4].

It has been almost 2 years since the British Society of Gastrointestinal and Abdominal Society (BSGAR) pledged its intention and commitment to champion equity and diversity within our field [5]. It is usually at this juncture that efforts falter as people tire and morale falls – even without the seemingly relentless pressures we are currently working under [6-8]. To mitigate against this, we thought it timely to share an update of our work in active allyship, to encourage colleagues to join us on this important journey and continue their own equity efforts.

Standards set, met and exceeded

Visible leadership diversity and role modelling are important. Colleagues from under16 represented groups (URG, including Black, Asian, and minority ethnic backgrounds) contribute half of the current BSGAR Executive Committee (N=10). Four (40%) are women, with 1 holding the key Committee position of Honorary Secretary. We exceeded the standard of 33% set for gender and ethnicity of both session chairs (56%) and presenters (37%) at BSGAR Annual Conference 2022, with the trend continuing into the 2023 program.

Active Allyship in action: Mentoring Programme

With the help of the Academy of Medical Sciences' Mentor Catalyst program, BSGAR successfully launched our pilot Mentoring Program. All members who applied were accepted and matched to their first-choice mentors. Mentees were either women and/or from an URG. BSGAR is proud of our diverse pool of mentors (N=23; 16 women, 6 URG members) and grateful for the generous contribution of their time to this endeavour. Mentors and mentees all attended the non-compulsory training event – a strong indication of their willingness and investment towards the success of this experience.

Diversity and Equity in action

Education is core BSGAR business. An Education subcommittee (N=11; 6 women; 9 White) was formed in 2021 to lead on developing high quality teaching material, mapped to meet the new FRCR Gastro-Intestinal curriculum requirements. With inclusion and widening access in mind, the committee has delivered 39 free, hour-long case-based interactive webinars covering the breadth of the FRCR GI syllabus. A Membership subcommittee (N=11; 9 women; 7 URG 37 members) was created this year to improve the membership experience. Their goals, among others, are to strategise recruitment of new members (particularly from geographic areas where BSGAR representation is low); strengthen communication streams and create an active junior member network; to enhance the feeling of welcome and belonging at face-to-face Conferences (especially for new attendees). Our Junior Representatives have done tremendous work designing fliers, setting up a Junior BSGAR social media presence, reaching out to registrars in training programs across the United Kingdom (and within BSGAR) to identify their needs, highlighting BSGAR's work and benefits of membership. Further, the Executive Committee

have worked with the new RCR-BSGAR Travelling Professor to ensure geographic inclusion is prioritised when planning training visits over their 2-year tenure.

Impact

Junior membership has increased 2.5 fold (50 to 125) since the start of our equity journey. Undoubtedly, the outstanding webinars run by dedicated and enthusiastic GI Radiologist-Educators played a huge contributory role. Collectively, they reached almost 2000 learners “live”, with over 1000 others accessing the resource from BSGAR website archives. The second round of our mentor program attracted 30% more applicants, with 17% increase in mentor volunteers and 95% mentor retention.

Future efforts

The wealth of sponsorship, scholarship and leadership development opportunities BSGAR offers is being assessed to understand how we can further elevate our members – particularly those from historically under-represented groups – as future leaders. BSGAR’s Annual Conference will alternate between the virtual and physical. While we await the results from the UK Registrars’ survey, the experience of our first mentoring cohort is being evaluated to learn if further support to the program is required. Initiatives to promote sentiments of collegiality and belonging are planned to better meet our members’ diverse educational, physical and social needs.

Patients’ care is dependent on the health, well-being, and effectiveness of the NHS workforce [9]. That, in turn, is determined by the extent to which leaders are supportive in ensuring that professional environments are managed in a way which protects and promotes the well-being of staff. Diversity and equity are pivotal to that end.

As Michael West said: “If it’s about culture, it’s about leadership”

BSGAR has shown that the life cycle of a Presidency can deliver equality through equity and diversity through inclusion with deliberate intention and leadership and that this is deliverable and sustainable, notwithstanding turnover in Committee membership. We hope this re-energises and challenges readers to be Diversity and Equity Champions in every professional environment – for the betterment of radiologists and patients alike.

Reference

84 1. Diversity in Medical Workforce: Are we making progress? The King’s Fund.

85 <https://www.kingsfund.org.uk/blog/2020/02/diversity-medical-workforce-progress>.

86 Accessed 25 August 2022.

87 2. Equality, diversity and inclusion. GMC 2022. [https://www.gmc-uk.org/about/how88 we-work/equality-diversity-and-inclusion](https://www.gmc-uk.org/about/how88-we-work/equality-diversity-and-inclusion). Accessed 25 August 2022.

89 3. Promoting excellence: equality and diversity considerations. GMC 2017.

90 [https://www.gmc-uk.org/-/media/documents/promoting-excellence-equality-and91 diversity-considerations_pdf-72709944.pdf](https://www.gmc-uk.org/-/media/documents/promoting-excellence-equality-and91-diversity-considerations_pdf-72709944.pdf). Accessed 25 August 2022.

92 4. Royal College of Radiologists. Equality, Diversity and Inclusion in the RCR. RCR
93 2022.

94 http://www.rcr.ac.uk/sites/default/files/2022_equality_diversity_and_inclusion_in_the
95 [_rcr_paper.pdf](#). Accessed 25 August 2022.

96 5. Chew C, Albazaz R, Taylor SA et al. Diversity and equity: a radiology society's -
97 effort. *Clin Rad* 2021; v76(7): 475-6.

98 6. Willingham S. The Root Cause Of Diversity, Equity And Inclusion Burnout, And
99 How To Fight It. 2022, Aug.

100 <https://www.forbes.com/sites/forbescoachescouncil/2022/08/16/the-root-cause-of101>
101 [diversity-equity-and-inclusion-burnout-and-how-to-fight-it/](#). Accessed 25 August
102 2022.

103 7. Delivery plan for tackling the COVID-19 backlog of elective care. NHSE and NHS
104 Improvement, Feb 2022. <https://www.england.nhs.uk/coronavirus/wp105>
105 [content/uploads/sites/52/2022/02/C1466-delivery-plan-for-tackling-the-covid-19-](#)
106 [backlog-of-elective-care.pdf](#). Accessed 25 August 2022.

107 8. Clinical Radiology census report 2021. Launched June 2022. RCR.
108 <https://www.rcr.ac.uk/clinical-radiology/rcr-clinical-radiology-census-report-2021>.
109 Accessed 25 August 2022.

110 9. West THR, Daher P, Dawson JF, et al. The relationship between leader support, staff
111 influence over decision making, work pressure and patient satisfaction: a cross112 sectional
112 analysis of NHS datasets in England. *BMJ Open* 2022;12:e052778. doi:
113 10.1136/bmjopen-2021-052778.

114 10. West, M. King's Fund (2016): If it's about culture, it's about leadership.
115 <https://www.kingsfund.org.uk/blog/2016/01/if-it%E2%80%99s-about-cultur>