



# Diversity and Equity Inclusion Committee

## *Area of Concentration Survey Results*

*Andrés Pumariega, MD, DEI Chair*

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Below are the results of the membership survey conducted on behalf of the AADCAP Diversity & Equity Inclusion Committee to identify the area of concentration the committee should focus on in its work. The Committee consensed on various possible areas of concentration and products but felt it needed to focus to make our work both feasible and meaningful. At the same time, we strongly believed that AADCAP membership should prioritize our work.

In the survey, we asked members to select one area of concentration, keeping in mind what areas AADCAP can uniquely contribute in the area of diversity and keeping in mind what other organizations are already doing.

**Our total response tally included 34 members. The response selections are as follows:**

- 0 *Embedding advocacy on behalf of underrepresented and minoritized populations within each of our missions*
- 7 *Education on racism and racial disparities in academic and educational programs, and promoting professional development activities for all faculty members regarding racial disparities, racism and ally-ship*
- 6 *Promoting research on disparities and relevant to the mental health of underserved minoritized populations of children and youth, as well as promoting the development of diverse research scholars who can increase knowledge on the impact of racial disparities as well as evidence for treatments with diverse populations*
- 12 *Promoting service models to improve access and effectiveness of services for diverse populations (including financial, logistic, and admin challenges)*
- 9 *Recruiting, retaining, and developing diverse faculty who understand race and culture and its impact on society and the children we treat.*

Some members selected more than one choice but did prioritize them, so we only counted the top one.

The survey falls short of a 50 % response, so it would be nice to obtain further input. We can certainly open up another round of surveying. However, this does give our Committee guidance as to priorities of the membership and for divisions of child and adolescent psychiatry.

We will be scheduling a meeting of the committee soon to discuss whether we proceed with the top choice, “Promoting service models to improve access and effectiveness of services for diverse populations,” perhaps whether we also pursue the second choice, “Recruiting, retaining, and developing diverse faculty,” or we ask for more membership input. We had already embarked a bit on the services focus in one of our recent Fall meetings, though a more systematic review of the literature, further educational presentations, and perhaps even a white paper on this issue might be of help for child divisions. I am copying our committee members to apprise them of these results.

While Dr. Pumariega is unable to attend the Spring meeting, the discussions can be facilitated during the meeting. The committee can benefit from further feedback.