Moving in the Right Direction: Why Diversity Matters to the ABNM
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Over the past 3 years, the American Board of Nuclear Medicine (ABNM) has embraced change, much of it designed to improve diplomates’ experience and strengthen the board’s value. ABNM strives to have the examinations, longitudinal assessment programs, and evaluation of testing processes meet the highest standards. Diversity in board members assists in achieving these goals. The ABNM recognizes that diversity extends beyond issues of age, gender, language, and race. The board realizes that members should reflect the demographics of diplomates who make up the nuclear medicine workforce. The ABNM appreciates that these demographics can change over time and is familiar with compelling evidence that diversity yields immense benefit for the professional boards and their diplomates. The American Medical Association reported that, over the past 10 years, the number of women physicians (including residents) has grown more than 43%, and radiology is among the top 10 specialties for women. A study of women in radiology presented at the American College of Radiology 2015 annual meeting showed that women in leadership positions rose slightly from 2004 to 2014, with the percentage of women in the chair role at 9.6% in 2014, barely over the 8% figure from 2004. It is difficult to separate out accurate data for women physicians in nuclear medicine, but we remain underrepresented in the United States and Canada—specifically in academic and leadership positions, according to a recent study published in the American Journal of Roentgenology (1). Among nuclear medicine specialists, women were underrepresented in leadership roles, with 7.8% being identified as leaders. The ABNM regards membership on our 12-member board as a leadership position.

The ABNM believes that broader representation on the board would lead to overall improvement in board activities, examinations, and assessments. The board believes that diversity has value for diplomates in supporting learning, identifying with board members, and overall improvement of patient care. The ABNM recently analyzed the characteristics of board-certified physicians (diplomates) and wanted to make sure that those characteristics thought to be valuable and important for board operations were reflected in the board membership. The characteristics examined were gender, age, practice settings, dual certification, and geography. Nineteen percent of ABNM diplomates are women, and 42% of board members are women. The Accreditation Council for Graduate Medical Education’s Data Resource (2016–2017) reports that 38% of residents in nuclear medicine are women; this is reflected in the ABNM board composition. The associate executive director of the ABNM is a woman. When age was analyzed, ABNM diplomates were divided into 2 groups: young professionals who were initially certified less than 10 years ago and senior professionals who were initially certified more than 10 years ago. Fifteen percent of ABNM diplomates are young professionals, and 17% of board members are young professionals. Fifty percent of ABNM diplomates are also certified by the American Board of Radiology (ABR), with the same percentage of board members being dual certified. Eighteen percent of diplomates are certified by another American Board of Medical Specialties board other than the ABR, and 8% of board members are also certified by another non-ABR board. Minority representation (African Americans, American Indians and Alaska Natives, Asians and Pacific Islanders, and Hispanics) on the ABNM board was not addressed, because those data are not readily available. This is, however, recognized as an important part of diversity.

Clear evidence indicates that women are underrepresented in academic and leadership positions and that this underrepresentation is not attributable to academic performance or level of interest (1). For the first time this year, the ABNM had an open call for nominations for new board members that was sent to all actively practicing diplomates. The board received 7 applications for each available position, with 5 male applications for every female application. Although the number of women nominees may not be as high as the board would have liked, ABNM hopes to inspire more diplomates to volunteer their time and serve on the board once they realize that the board values gender diversity. In the past 6 years, 4 board chairs (66%) were women. It is hoped that women who have been ABNM chairs and board members will serve as mentors and role models to encourage more women diplomates to become involved in ABNM activities.

The ABNM recognizes that the demographics of ABNM-certified physicians are changing and continues to strive to reflect this diversity in board composition. It is an exciting time for the practice of nuclear medicine, with the evolution of theranostics and new PET tracers. The ABNM believes that diversity on the board will ensure that the ABNM sets the highest professional practice standards that are relevant and valuable for all diplomates.

REFERENCE