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Spark Podcast

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Featured Guest: Dr. Sonia Anand
Interviewer: Dr. Teresa Chan
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Ruth Chen (00:02):

Welcome to the MacPFD Sparkle podcast. This is Ruth Chen and in the Sparkle sub series, we'll bring you shorter segments released in between our longer Spark episodes. We'll have new and exciting interviews with professionals from across the world, helping you to achieve your personal and professional goals as a healthcare educator, researcher, leader, or practitioner at any stage of your career. So sit back, listen, and enjoy this episode of the MacPFD Sparkle podcast. In this segment, Sonia Anand talks about equity, why equity is important and why we need to shift our thinking in action to create a more diverse, equitable, and inclusive work environment and society.

Dr. Teresa Chan (00:55):

Hello everyone. I am here today with really a bit of a rockstar. Dr. Sonia Anand is someone that a lot of people might know from her scientific writing or being a lecture circuit or award winner, but really at the end of the day, she's just an all-round amazing person that's been changing the way that we do business in healthcare for quite a while now. Dr. Anand is the Associate Chair of Equity Diversity and Inclusion right now within the Department of Medicine as well. And I thought I'd actually bring her in to have a chat with me about why equity is important and why it is that we should be more diverse in our thinking around the work that we do scientifically, educationally, and within our systems. So Sonia, welcome to the podcast. Can you say hi to everyone?

Dr. Sonia Anand (01:41):

Thank you very much, Teresa, and you're too generous with your compliments, but a real pleasure of mine to be here with you and have this conversation.

Dr. Teresa Chan (01:50):

Oh, don't worry. I give compliments to everyone that comes on the podcast. I think that's how we get them to go back. Anyway. But yeah, so welcome to the podcast. I mean, you have been doing research for a while and I think that one of the things I've noted when I look at some of the work that you've done is that you have really focused on bringing an equity lens and focusing on special populations that you have felt important to examine within science and bring that kind of lens to the work that you do as a researcher. Can you tell me about the origin story of that? Every super hero

has the origin story, right. And there's always the backstory of every rock star. So tell me a little bit about the backstory of how you arrived at that being kind of one of your niches, one of your areas of interest.

Dr. Sonia Anand (02:35):

It's a kind of confluence of factors. And now as I'm getting older, I reflect on why it is I do what I do today. And I would say that I grew up in rural Nova Scotia, my two older sisters, so I was the youngest, they both chose careers in law and a typical south Asian family, my parents who were both physicians said, "Well, now you must be the family doctor." So I like science. So I went for it and I got into medical school and I would say in parallel with that, the way we were raised and conversations around the dinner table often were around social justice. And my grandfather in India was part of the Gandhian movement. And so we always heard about these types of stories. And I think within all three daughters in our family, we have this element to our career around social justice, fairness, and equity essentially means fairness.

In my research I was interested in different ethnic groups and I've done a lot of work in terms of different ethnic population, ancestral origin, differences in risk factors. And along with that, inevitably comes the questions around health equity of some of these populations. So I just gravitate to those types of issues. And then within academic medicine, I've been here at McMaster for too long, probably, but over 20 years. And I was very focused on research that had this equity component for probably the first 20 years. And then within my department looking at who was being promoted, who were the leaders, who were always listed on the sunshine list? I thought I started to see a pattern that there were some great people obviously, but there were some missing people from those lists and those were the kind of very prolific and successful women within our department.

So I think that tweaked my interest that what's happening here, why aren't those fabulous women the leads of programs or not only bringing higher salaries, et cetera? But I started to think about those issues as I'd been in the department for a long time. And I decided there were two paths I could take. One, I could just keep doing my own thing and maybe become a bit cynical about, well, this is just the way of the world, women aren't getting these positions. Or I could try and be the change I wanted to see. So I chose the latter path. It's not always the easiest path, but that kind of set me down the road of equity within our academic department.

Dr. Teresa Chan (05:11):

That's really interesting. And so it was with a scientist's side that maybe you saw that there was a gap. Because I think as researchers, that's what we always do. Right? We look through the literature and when we see a gap we seek to fill it because that's kind of how we think about where's the problem. And then within this problem, is there gap in the literature and can I carve up my niche? And I think that maybe your spy senses were tingling and when you looked at all those lists that you're like, huh, there's a pattern here that I'm seeing. I think that's a key skill of observation.

Dr. Sonia Anand (05:38):

Yeah. And I would just say that one of my sisters at the time was a prof at the U of T law school and every year when the sunshine list came out, we'd just on the weekends be chatting and be like, "Yeah, I mean, so and so in my department, I didn't think, he'd be way up there on the list." And she's like same with her department. So we saw the same patterns in our own different academic,

publicly funded institutions. And so like you said, as a scientist, we said, "Well, let's analyze it. Maybe we're just seeing one angle of things." But we did then have a great bachelor of health science student and group working on the data. We downloaded the CSV files for the past five years of the sunshine list. And we analyzed the gender gap in terms of payment and we standardized for inflation and all those types of things.

And we did hone in on universities and we honed in on the big five institutions that have medical schools and law schools. And we ended up seeing that indeed a gender gap in pay did exist. And after that analysis I sent the results to the president, the Dean of Health Sciences and the chair of medicine and said like, "Can we discuss this?" And that kind of led to some more in depth analyses of our own department. So yes, having that science analytical mind, we went from our perception to analyzing the data. And I would say that's always so important in discussions around equity, to have the data. And if you don't have the data, get the data because it's hard to move past personal experience or anecdote without having that information.

Dr. Teresa Chan (07:16):

That's a very interesting kind of point of view about how you can leverage the skills that you have from one domain and port it over. So definitely something that I think all of our listen can associate with. Now tell me a little bit more about what you're thinking around it is now that everyone is kind of thinking about this in a more analytical way. The OMA has recently done a big audit of all of the billings for physicians in Ontario and shown that there's an atrocious gap there. There is the U 15 kind of like analysis. So that's 15 universities in Canada, the bigger ones that they're looking and there's a persistent pay gap. And they actually put people in the ranked file of the difference in the amount of pay gap, because there's a pay gap at all the universities. It's just the order of magnitude difference. And there is still that gap.

And I'd love to hear your thinking now that we have the data, because I think the data, I don't think we need more data. I think I've heard that from a lot of our equity experts around race and gender as well. And I think that the data's there, I think the data is speaking for itself and now we need to take that and turn observation into action. What are your thoughts on how we close that gap? The knowing and the doing gap.

Dr. Sonia Anand (08:23):

So it's great that we have all of these recent analyses and you mentioned that focuses mostly on the gender pay gap in medicine, but also there have been the 15 universities in Canada looking at the positions of Deans and Presidents by gender and by people of color. And unfortunately McMaster in 2017 was at the bottom of that list where we had mostly white male leaders in leadership. So McMaster itself has a lot of work to do. And everyone's well aware of that, which is good. Now with respect to how do we close the gap, that's the bigger challenge, right? And we in academic medicine and universities, I would say, are public sector institutions. And we can look to the business world who I think are probably 10 to 15 years ahead of us in addressing this question to see what works, what doesn't work and try and adapt some of those solutions to closing our own gaps.

Why the business world is ahead of us is what is their bottom line? The bottom line in business is return on investment and profits, right? So they are going to say, "We need to do whatever we need to do with our leaders and our workforce to continue to make profits." And they realize that diversifying leadership actually improves their bottom line. It's harder for us to do that in academia. That's not what drives us as our profit and we have other outputs. So in spite of that, we can learn from what worked there and what didn't work. And one thing that has come out that

didn't work is to ask individuals in an organization to change themselves and then everything will get better. So women start acting more like men or different ethnic groups, just conform to this way of working in the academy and you'll be successful.

That's putting everything on the individual and it's saying the structures and processes we have in place right now are just fine. But in fact, asking people to change, doesn't lead to much change. It's really the structural changes that are put in place by the leaders, with the goal of diversifying that will lead to the greatest amount of change. And probably you need a bit of both. You need the bottom up, will of the people saying like "This should change and I should have an opportunity to lead." And you need the top down from the leadership saying "It's important for us to be diverse and reflect who our constituents are." And when you have both working together, that's usually where we see the most change. And by the top down, I would say the leaders of departments, of faculties, of programs, having that equity and diversity lens in mind.

And sometimes I give the example, because it's easy to give the of Donald Trump in the white house. Let's just say you had a group of women saying like "We need to become leaders and deputies within the white house." And policies were created if you don't have the leader in this case, Donald Trump endorsing and fully embracing those policies, nothing will change. So you really need an invested leader who creates equity and diversity task force, for example. Who sits him or herself on the task force and attends every meeting and really legitimizes and places an importance behind it because equity and diversity initiatives run the risk of becoming a tick box if you create one position for one person in an office to deal with equity and diversity, but really they don't have a say at decision making tables and it's lip service. Same thing for or checklists, they can become lip service. So you need that combination of the leadership being invested in change and having structural ways to change them.

Dr. Teresa Chan (12:23):

I would argue though, and this is a gauntlet that I'm going to throw down for our listeners is that even though just changing the individual is not sufficient, if you have system full of individuals who don't want to question their own bias, address their own perceptions, change the way that they do business themselves or do academics, I guess, themselves, that's also insufficient. So just asking individuals to change is insufficient, but that doesn't mean that we absolve ourselves in just thrust this upon our leaders to that's what the literature shows is that it's really more about just asking individuals to step up or lean in or try harder or fit in our cultural paradigm is not sufficient. We need to have meet it with systems change and investment, but it really, what means is every level we need to all decide that we're going to change together.

Dr. Sonia Anand (13:11):

Yeah. And the timing of that change is where you get some groups and institutions changing faster and others not changing because things are out of sync. You raise the important issue for individuals to understand our own biases. And I think that's crucial. We all have various biases based on how we were raised or our life experiences that we should try and understand, as opposed to saying like you hear it most blatantly around questions of race where people say "I'm not a racist." An individual and they really can believe it yet there may be certain biases that they hold based on their upbringing, et cetera. So unconscious biases important for us to understand the challenge is changing mindsets is really difficult. So understanding our biases are important, actually trying to change people's mindset is less successful. But again, the combination of at least recognizing we

have biases, having an end goal of where we agree we want to get to, and then having leaders kind of build in structures and processes that will help us get there is probably the ideal

Dr. Teresa Chan (14:21):

It's similar. I think about making any kind change in our lives, whether it's quitting smoking or change our diet. It's one thing to have the willpower to not eat the Oreos, but you should probably just not keep them right in front of your face, on the kitchen table every day, so that you have to walk by temptation, right? So there has to be systems change in that you don't buy Oreos this round, or I just love Oreos too much, that's why they came to mind, but not to brand endorse any specific brand of cookie. But the idea would be like, if you need to make the cookies desirable difficult to get to, you need to change the system that you do. If you want to make sure you go to the gym every day, well then putting in your schedule for instance, would be an important change in the habits that you have around all the things that you do.

So just because you set a goal, just because you know that you don't like going to the gym, doesn't make you suddenly like the gym, you need to have all the other things that help you get there. And then a habit might form. And then after a time, maybe you, won't not like the gym anymore and you'll actually tolerate it. And maybe somebody you'll like it. But again, these are the things that happen is that I have an inherent bias against working out. I just don't like it. And so in order to work against them, I have to set up the rest of the system in my life to facilitate that and make it easier for me to go and be adherent to going to right now curing the pandemic, not so much, but doing physical activity and making that a goal.

Dr. Sonia Anand (15:42):

Great analogy with the Oreos. The other point I wanted to bring up, Teresa, is I often hear when I maybe speaking about equity and diversity initiatives that any type of initiatives around equity and diversity changes, contravene merit based advancement in a system. So they feel that these are two opposing forces, really. I always like to reassure that I'm not talking at any point about changing the merit based advancement of individuals in an institution. It's just that to date, we have actually often chose leaders based on who they know in certain networks and not really focused on the merit. And if we all agree that merit is what we value the most, then when we have a position of leadership, we will post it. We'll make people aware that there's a new leadership position. We'll tap people on the shoulder that we think have the skillset.

And we'll understand that in my circle, I may be missing out on people who are not in my circle. So I need to call up other people to ensure that we're getting a diverse it cool. Then we can promise with various strategies an unbiased selection process, and then may the best person win. Meaning may the person with the best skillset for the position, get the position. But I think often people get their backs up when we talk about equity and diversity, because they immediately think of something like affirmative action. Like you're just going to move in women to this position, or you're going to move in non-whites and you're going to get rid of merit.

And studies from Sweden have shown actually, when you get rid of the, let's say network is a selection of leaders, the bar in terms of productivity goes up because you've removed those individuals who just got positions based on who they knew. So I think it's a really important point to make that we're trying to get the best talent in order to diversify and that it's not contravening merit based appointments. We really promote that and you can consider merit and equity and diversity as two sides of the same coin in a sense rather than two opposing forces.

Dr. Teresa Chan (18:05):

So it sounds like you've addressed that issue around merit and how it can be folded into equity. And I think that the way I'm seeing it is that you're saying, "Look, it's not so much that under qualified people will somehow be put into the cadre of great candidates that we have." What you're saying is that "Let's make sure that we're giving access to the application system for everyone, so we can actually get the best candidates." Is that kind of what you're getting at?

Dr. Sonia Anand (18:32):

That's one part of the equation. And then the other is let's be clear what our kind of assessment criteria are to choose the leader we need. And in creating those metrics, do we have around the table, a diverse group of individuals? Because if you didn't diversify who's around the table, meaning the selection committee, then you may end up having what we call institutional reproduction. Like that group of not diverse individuals would say, "We want the same old, we want someone with agentic personality traits." And you're going to end up choosing the same and people over and over again.

But if you diversify who's around the table, then you'll have a proportion of women, maybe people of color, people from in our academic system, different disciplines, that type of thing. Then if that group of people sit around the table, say these are the characteristics of the next leader we desire, you structure your questions to probe those areas. And then you choose the person who has the highest score essentially. So there's a number of ways in which we can change our current processes that will lead over time to a more diverse leadership group.

Dr. Teresa Chan (19:47):

And I think we've talked a little bit about it already, but even depending on your background and your upbringing, just because you and I are women doesn't mean that we might not be biased against women, right? So I think it's important for us to think about, just truly think about how our biases and our preferences come to bear. And that's not to say that you can't have your preferences. Everybody's allowed to have and a voice around what they like and what looking for. But I think that what it is, is that when you have a diverse group, then you can steer yourselves through that and neutralize a lot of those biases I guess if you're thinking for a positive point of view or you can construct really a better vision of what it is and who it is that you want to populate a specific position. So I do think that that's really important as well.

Now I'm going to pivot over to a different part. And we've talked to other leaders, women leaders like Susan Reed, who is the chair of surgery. And she talked a little bit in her podcast around the needing for people to nudge her several times before she stepped up into a leadership role. And we talked to other folks like Dr. Deda Brooks from the school of rehab sciences by scene. And she's lovely and wonderful, and really kind of highlighted how we as mentors and sponsors of others might need to kind of really put opportunities right in front of others in order to get them to consider them. Can you speak to me a little bit about how we can get more people to even apply? You can have all the application systems in the world and a selection or a committee that's diverse and equitable. And then in the end, it's still the same to people applying. How do we get more people into the zone where they feel like they belong enough to be able to take a step forward? How do we encourage people to see it that way?

Dr. Sonia Anand (21:30):

Those are really great points and you just highlighted it, that we could create the perfect process. And then we put our call out for applications and we get the same two people applying and not very many and not very diverse. And in particular, I would say women, people of color, or any other group who hasn't really felt like they were included in decision making or fully included in conversations. They may feel like this isn't for me. I don't fit in. Or in particular, in the case of women, I don't have the skillset. When in fact they probably do. And there have been some great psychology studies that show if they're 10 criteria, job criteria, women would look at the list. And if they only have seven out of 10 women will say, I'm not qualified to apply. Whereas men who look at the same list will say, Hey, I've got seven.

I'm going to put my hat in the ring. So there's a real gender difference. And gender I'll say is not ne necessarily equivalent to sex. You can have a man who's gendered towards that thinking as much as women, maybe, and women who are gendered towards, I've got seven out of 10, I'm going to go for it. So I think that we have to, as your other guests have suggested tap people on the shoulder and within our own department, our chair, Mark Crowther's really good at that. And he will say like, we have a position coming up, I'm going to call up so, and so, typically women, but sometimes people of color and say, put your hat in the ring. And what he's found is that he has to start planning a couple years in advance for that. Because as Susan Reed mentioned, it takes one or two or three taps on the shoulder sometime to almost bring people through.

If you're familiar with Prochaska's stages of change, from that early part of the spectrum, precontemplation to action, you've got to plant the seed with the first step, get them thinking about it with the second kind of tap or step. And then they'll eventually put their hat into the ring. So I think that we need to do that. And that's also a feature that people's unwillingness to come forward of the culture of an institution. The same person in a different organization or institution might feel comfortable enough and valued enough to throw their hat in the ring without even needing a tap on the shoulder. But in our particular departments and institutions where people have not had a voice, and they've seen the leadership being a particular demographic, you become disenfranchised in terms of, my voice doesn't matter anymore, or I'm not valued. So that's where you have to do a lot more work to convince those people they are valued.

Dr. Teresa Chan (24:13):

Yeah. And I think that it takes a whole community around an individual to make them feel valued. It can't just be one person. It can't just be your chair that keeps nudging you. It has to be a bunch of others. I like to think about it like a qualitative research paradigm, a triangulation, an individual who might be amazing. Sometimes I will conspire, and I'm just giving you my playbook now. But, and so some of you who have been tapped multiple times, you might know it's from me, but the idea would be that I have sometimes triangulated several people to space it out just enough so it doesn't seem like it's a confluence of events, but over the next six months, let's encourage this person a lot more because I think there is something that's coming up. And so I think it's worthwhile to understand that that is a paradigm of a different kind of doing that might be required to encourage certain folks to step up.

Dr. Sonia Anand (25:06):

You're highlighting that it takes thinking and it's more work, right? So I guess we're all busy. We're all running in different directions. It's more work to try and diversify your candidate pool because it takes your time too, your time to conspire and triangulate and get three or four different people to

nudge the same a person. You could just kind of say, I'm busy with my other work. Then we would default to the status quo. So this speaks to the, if we really think equity and diversity initiatives are important, and we really think that diversifying our leadership is important, then we have to be prepared to do the additional work. And that means stepping up to serve on selection committees, challenging the status quo, and finding those diverse candidates.

Dr. Teresa Chan (25:55):

That's a really inspirational set of goals and objectives. So I think that what we're going to do is we're going to end our episode here and stay tuned for some other content that's related. We do have other segments that are going to be speaking as some of the talking points that Sonia has brought up today, especially around that idea of imposter syndrome and how it might come from some of the other structures that we have. So definitely take a look at some of the other offerings we've had. We actually have another kinder research chair who's talked with me about selection that will be around the same time as this episode, and really excited to kind of see how we can take some of the evidence out there, existing in the literature already and apply it to our best practices locally. So thank you so much for your time, Sonia.

Dr. Sonia Anand (26:36):

My pleasure, Teresa, and great to see you again and chat with you and look forward to future times.

Dr. Teresa Chan (26:43):

Thank you so much for tuning in to the MacPFD Spark Podcast. Just so you know, this podcast has been brought to you by the McMaster Faculty of Health Sciences and specifically the Office of Continuing Professional Development and the Program for Faculty Development. If you're interested in finding out more about what we can offer for faculty development check out our website at www.macpfd.ca that's www.M-A-C-P-F-D.ca. Many of our events are actually web events that are free. Finally, I'd like to thank our sound engineer Mr. Nick Hoskin who has been an amazing asset to our team, thanks so much Nick for all that you do. And also thank you to Scott Holmes for supplying us the music that you've been listening to. All right. So until next time this is MacPFD Spark signing off.