

FROM THE PRESIDENT'S DESK



Diversity, Equity and Inclusion

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When I was elected to the ACOFP Board of Governors in 2013, I “diversified” our Board by being a 39-year-old white female. At that time and until now, there have only been five women elected as Governor to the ACOFP Board in its 70-year history. Similarly, there has only been a handful under the age of 40, much less anyone with three children under 10.

At the time, my addition to the Board was significant for what it represented as a change in our specialty college's future leadership. I realize now that it was just one minor step in the direction that was needed—not only for ACOFP but also for our profession, the patients we care for and our collective communities.

In my tenure on the ACOFP Board, the faces of representation for our organization have changed more in the past eight years than it did in the previous sixty. There has been the first openly gay president, the first Asian American, the first and second Indian Americans, the first African American and the third and fourth female presidents. The Board currently spans five generations; lives in Florida, California and everywhere in between; and practices in rural and urban settings, as well as the Cherokee Nation. Our collective knowledge as family physicians has been augmented by our personal experiences as members of the communities who we identify with and serve.

In response to the events that have taken place in our country over the past year, I am proud to lead this Board in the continuation and expansion of our efforts in the realm of diversity, equity and inclusion. Our newly formed Task Force on Racism and Health has convened in three separate sub-committees, exploring the topics of governance, education and community outreach. Their collective efforts will guide our advocacy priorities to help address health disparities in vulnerable populations, align our educational offerings to reflect the need to teach core cultural competency and work with other stakeholders to expand the presence of a diverse family physician population to represent our communities. These are not new venues for the ACOFP.

Over the past several years, ACOFP has increasingly focused on this essential topic. ACOFP has passed policy through our Congress of Delegates that encourages the development of core curriculum guidelines in cultural diversity throughout the lifelong continuum of osteopathic medical education. Additionally, it has been supported to educate the public that all osteopathic family physicians should be evaluated by their skill and knowledge—not by their race, color, religion, gender, sexual orientation, gender identity or national origin. Our educational efforts from 2018–2020 included lectures on implicit bias, structural racism in medicine, strategies to enhance cultural competency and ethical dilemmas physicians face in everyday practice.

On a federal level, we have advocated for the recognition and inclusion of social determinants of health and their overarching impact on health care in policy making and the expansion of physician knowledge in population health. We have written letters to Congress to support legislation that protects the LGBTQI community from discrimination by insurance companies and health care workers. In November, the ACOFP Diversity, Equity and Inclusion Award was announced to recognize an osteopathic family physician who has made a significant contribution in these areas either in medical education or in clinical practice.

We see these efforts as the foundation for our future initiatives, and with any good foundation, there needs to be a mutual and respected understanding of the pillars that support that foundation. As I was preparing for this article, I consulted a wise colleague of mine. He alerted me to the concept of the “Platinum Rule,” replacing the tried and true “Golden Rule” that we all learned in kindergarten.

The Platinum Rule, as coined by author Dave Kerpen, states: “Do unto others as they would want done to them.” Since all people and situations are different, the Platinum Rule assures that you are doing what the other person wants done and afford a better outcome. In other words, when both sides are respectful and approach crucial conversations and interactions with understanding, it is much easier to come to a place of mutual respect.

When I reflect on where ACOFP is today, I believe we are embracing the definition of diversity, equity and inclusion. We have diversified our Board to include representation from various backgrounds, perspectives and experiences. We have been inclusive by amplifying the voices of the members and patients we represent while placing value on the human experience. We are striving to improve equity by addressing the barriers that exist for our patients to access needed resources.

These are not words that have a singular definition, as they are equally not achieved by a singular act. Hopefully, our work as an organization and your daily contributions as frontline physicians will continue to move our country to a place of healing, understanding, forgiveness and wellness.

Osteopathically yours,

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