## THE AWIMS ADVISOR

NEWS FROM THE ALLIANCE FOR WOMEN IN MEDICINE & SCIENCE

#### I AM THANKFUL

Dear Colleagues,

On March 13th, 2020, my children were all too gleeful about it being the last day of the schoolyear. Today, they are definitely missing recess and playdates with their friends. While I enjoy connecting with friends and colleagues via myriad virtual networks, I do yearn for the days when I could just walk into someone's office, vent/cry/giggle, and take comfort in their verbal and facial expressions of understanding and love. I miss my mom's homecooked meals. I long to hear the chirping of my children as they splash around with other children in the community pool.

I go back to all the things for which I am thankful. I am thankful for the health of my family, the compassion of my friends, the wisdom of my colleagues, and superb leadership at multiple levels from our school to our nation. My heartfelt gratitude to you for your vital role during this pandemic and to our AWIMS Executive Committee and Advisory Board, Ms. Lynn Weaver, Dr. Wendi El-Amin, and Dean Jerry Kruse for keeping AWIMS alive and for helping to keep us afloat. It's been a long year but I remain hopeful that we will persevere and prevail together. We are one.



Vidhya Prakash, MD, FACP, FIDSA, FAMWA

Director, SIU Medicine AWIMS

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# AWIMS Journal Club: Discussion on Effects of Foreign-born Status and Race/Ethnicity on Birthweight

Mr. Quadis Evans gives a very thoughtful review about an article he presented during an AWIMS Journal Club session.

#### By Mr. Quadis Evans

*Pray You catch Me*, the prepending track on the iconic visual album *Lemonade* by Beyoncé Knowles-Carter arrests the audience with juxtaposing audiovisual representations of America's past—an antebellum American South in the heyday of its original sin—and invoking America's consequential present as this albums centralizing theme. What Beyoncé did with this theme in application to interpersonal relationships artistically, researchers Andrasfay and Goldman at Princeton mirrored—in essence—for scientific exploration into generational nativity in American women and their offspring's' in terms of infant morbidity.

In brief, Andrasfay and Goldman used 1971–2015 Florida birth records of female infant singletons against intergenerational changes in birthweight and prevalence of low birthweight, and emergent educational gradients in low birthweight over two generations of offspring. Records were stratified according to grand assessed grandmother's race, ethnicity, and foreignborn status into native and Foreign-born American white, black, and Hispanic G1 mothers. The infant women of those parents comprised the 330,343 G2 American mothers of the 454,468 G3 infant singletons. Researchers were able to produce this subset of results:

- 1. As you progress into the newer generation an observable Foreign-born "benefit" in prevalence of low birth weight of infants is sustained in US-born Hispanic women in comparison to their foreign-born counterpart of the same generation;
- 2. As you progress into the newer generation a Foreign-born "benefit" in prevalence of low birth weight of infants is insignificant in US-born White women in comparison to their foreign-born counterpart of the same generation;
- 3. As you progress into the newer generation an observable Foreign-born "benefit" in prevalence of low birth weight of infants is lost in US-born black women in comparison to their foreign-born counterpart of the same generation;
- 4. Education does not relate significantly to prevalence of low birth weight in first-generation foreign-born black women;
- 5. Education does relate significantly to prevalence of low birth weight in second generation black mothers;
- 6. Infants of foreign-born mothers have lower-prevalence of low birthweight than US-born counterparts;
- 7. Low birth-weight is less prevalent in foreign-born whites than foreign-born Hispanics;

Per this article, "Our results confirm a foreign-born advantage in birthweight for foreign-born black and Hispanic women compared with US-born women of the same race/ethnicity; this foreign-born advantage among black women is not due to favorable birthweight outcomes compared with whites, but rather to adverse birthweight outcomes of US-Born black women." (Andrasfay and Goldman, 2020). Conclusions about the other groups are less stark and will not elicit a significant reaction in support or contrast to the inequities relative to their respective selves; it is such that this conclusion about US-born black women alone was the progenitor of an hour long journal club led by the Alliance of Women in Medicine and Science (AWIMS).

Those who participated in the discussion made reference to the SIU antibias curriculum committee and project based learning modules (PBLs), the community health worker program, as the manner by which SIU Medicine is addressing the inequitable downtrend in care for black mothers. It was important to acknowledge the practical significance of infant birthweight and health to the family in terms of the systemic factors, systematics failures and limitations—such as nutrition and prenatal care—which are known contributors to the morbidity of black infants and supported by racism and sexism.

A list of referenced materials were cultivated from the discussion, including opportunities to participate in related SIU Medicine sponsored activities such as the upcoming Dr. Alonzo Kenniebrew Lecture titled "A New Legacy" *trust, truth, and anti-racism in medicine* taking place this February 9-10.

This writer is sincerely thankful for the participation of Dr. Wendi El-Amin, Dr. Vidhya Prakash, Dr. Heeyoung Han, Dr. Stacy Grundy, and Dr. Josh Crist for their contributions and insights. Though this discussion was not transcribed, it is the goal of this summary to evidence the efforts of the AWIMS membership body and the Office of Equity, Diversity, and Inclusion to promote antiracism and gender equity through education and honest discussion.

Here's a list of reference material discussed during the Journal Club discussion:

Collins, J. W., Jr, David, R. J., Mendivil, N. A., & Wu, S. Y. (2006). Intergenerational birth weights among the direct female descendants of US-born and Mexican-born Mexican-American women in Illinois: an exploratory study. *Ethnicity & disease*, 16(1), 166–171.

<u>Caste</u>, by Isabel Wilkerson reviewed by NYT: https://www.nytimes.com/2020/07/31/books/review-caste-isabel-wilkerson-origins-of-our-discontents.html

<u>Pathologies of Power</u>, by Paul Farmer *reviewed by Project Muse:* https://muse.jhu.edu/article/177281/summary

Unnatural Causes https://www.youtube.com/watch?v=TJK9cL0BE4Q

<u>Medical Apartheid</u>: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present: (reviewed by NYT:

https://www.nytimes.com/2007/02/18/books/review/Emanuel.t.html)

Levels of Racism: A Theoretic Frameworkand a Gardener's Tale (3-5 min readhttps://www.health.state.mn.us/communities/practice/resources/equitylibrary/docs/jonesallegories.pdf)

Historical context: Samuel Cartwright- Spirometers and race-correction in medicine: https://journals.physiology.org/doi/full/10.1152/advan.00196.2017

Current Events: Susan Moore-The Death of a Black Female Doctor https://www.nytimes.com/2020/12/23/us/susan-moore-black-doctor-indiana.html

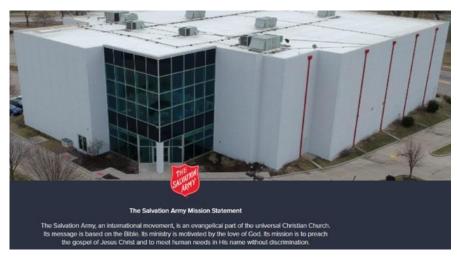
Andrasfay, T., & Goldman, N. (2020). Intergenerational Change in Birthweight: Effects of Foreign-born Status and Race/Ethnicity. *Epidemiology (Cambridge, Mass.)*, 31(5), 649–658. https://doi.org/10.1097/EDE.0000000000001217

## **AWIMS Item Drive for the Salvation Army**

Dr. Anne Scheer, who led a special AWIMS item drive for the Salvation Army, discusses the effects of the COVID-19 pandemic on our homeless community and shares details about the drive.

#### By Dr. Anne Scheer

People experiencing homelessness or housing instability face a variety of challenges. The COVID-19 pandemic has further exacerbated these challenges, and more people face housing instability or homelessness as a result of the pandemic's economic fallout. Similarly, the pandemic has brought unprecedented challenges to organizations seeking to help those in need. Hoping to support those organizations and the individuals they serve, AWIMS organized an item drive for the homeless that ran from January 4<sup>th</sup> – 29<sup>th</sup> 2021. Across various locations, members of the SIU SOM family donated a variety of items including socks, towels, sleeping bags, mattress protectors, feminine hygiene products, and grocery store or food outlet gift cards. We would like to thank all of those who generously donated items, as well as the many volunteers who helped pick up and drop off donations to the Salvation Army: Dr. Sacharitha Bowers, Dr. Anna Cianciolo, Ms. Kate Cohen, Dr. Nana Cudjoe, Dr. Haneme Idrizi, Dr. Vidhya Prakash, Ms. Jo Turley, and Ms. Laura Worrall.



## **AWIMS Mentorship Panel Discussion**

Dr. Krati Chauhan and Mr. Quadis Evans lead a phenomenal session on mentorship with exceptional panelists, Dr. Janet Albers, Dr. John Flack, Ms. Rukmini Roy, and Mr. Alexander Worix.

#### By Dr. Vidhya Prakash

AWIMS hosted a panel discussion on mentorship on January 19<sup>th.</sup> Dr. Vidhya Prakash started the session with a brief introduction on the benefits of mentorship (increased research productivity, improvement in self-confidence, and professional development) and components of an ideal mentor-mentee relationship (collaborative, reciprocal, dynamic). She reviewed the nuts and bolts of a "Manage Up" strategy, where the mentee drives the mentorship relationship.

Dr. Krati Chauhan led a fascinating panel discussion with mentors, Dr. Janet Albers and Dr. John Flack and mentees, Ms. Rukmini Roy and Mr. Alexander Worix. Dr. Albers and Dr. Flack discussed their reasons for serving as mentors, including mentors who inspired them and their sincere commitment to helping others achieve their dreams. Ms. Roy and Mr. Worix talked about how as medical students, their preference was to be matched with a mentor rather than finding a mentor on their own as the process can be daunting. Panelists also reflected on how mentorship relationships may end due to the mentee's changing needs, or evolve to peermentorship. The panel discussion ended with mini-mentorship sessions between Dr. Albers and Mr. Worix on the topic of application for residency programs, and Dr. Flack and Ms. Roy on the topic of ranking programs for residency. Mr. Quadis Evans led an enlightening Q&A session between panelists and participants.

#### Mentorship Resources:

AAMC's Mentoring in Academic Medicine: The Current State of Practice and Evidence-Based Alternatives

Emory University School of Medicine Mentorship Resources

**Emory University School of Medicine Mentoring Toolkit** 

Making the Most of Mentors: A Guide for Mentees

## **Honoring Those That Came Before**

AWIMS and SNMA celebrated Elizabeth Blackwell's 200th birthday and Black History Month on March 3rd. Hosted by Dr. Christine Todd, Dr. Betsy Hopkins, and Kamaria Coleman, the event honored two strong SIU faculty, Dr. Susan Hingle and Dr. Victoria Nichols-Johnson. Kamaria Coleman shares her powerful reflection on the session.

#### By Ms. Kamaria Coleman

This week I had the pleasure of attending a celebration of Dr. Elizabeth Blackwell's 200th birthday. Dr. Elizabeth Blackwell was the first woman who earned a medical degree in the United States. Her accomplishment in 1849 has inspired countless women that they too can become medical doctors. At this event we heard speeches from Dr. Susan Hingle and Dr. Victoria Nichols-Johnson.

To say it was an honor to hear these women share their experiences is an understatement. They freely shared their experiences of triumph. Sharing stories of how they used challenges to motivate them to keep persisting, how they found their voices to stand up for what they believe in-even when it is not easy or comfortable. As the challenges of the global pandemic continue and its effect on marginalized groups magnifies, I was reminded today that the work that has to be done will not be easy. However, these unthinkable tasks and challenges can be overcome- if we persist.

So, what do these two women have in common with Dr. Elizabeth Blackwell? Despite the many challenges that come with being a woman physician, they never gave up. They used their experiences to inspire a generation coming after them. Their persistence, grit, and determination are lessons that we all can learn from. In closing, I wrote a short poem titled "She Persisted" dedicated to Dr. Elizabeth Blackwell and the women physicians who have come after her.

#### **She Persisted**

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#### We Rise

Dr. Christine Todd discusses a powerful virtual session, "We Rise," celebrating the diversity and talent of SIU SOM members as they reflect on their experiences with race in America.

#### By Dr. Christine Todd

On Friday, February 19th, the Department of Medical Humanities, the Alliance for Women in Medicine and Science, the Office of Equity, Diversity, and Inclusion, and the Center for Human and Organizational Potential co-hosted an evening of performances on race and its intersections in the SIUSOM community. The performers, who responded to an all-SIUSOM call, truly represented the depth of diversity in our community – the performers ranged from students to faculty, from kids to retired professors, and from poets to dancers. In a lot of ways, this event was a follow up to 2019's performance of the Vagina Monologues – an intentional holding of space for the expression of the range of lived experiences in our community.

Sitting with each other and hearing one another's stories in the way they wish to tell them is the way a community bonds, strengthens, and heals. It's the way we challenge each other and change our culture for the better. Though the event was held over zoom, it still very much felt like we were together, and the effect was profound for everyone. There were tears, laughter, pride and understanding. I hope this event is the first of many We Rise gatherings, as we continue to strive for community and excellence at SIUSOM.

## Misrepresenting Race: The Role of Medical Schools in Propagating Physician Bias

Dr. Stacy Grundy discusses this eye-opening article on race in medical education.

#### By: Dr. Stacy Grundy

During the March AWIMS Journal Club, we discussed the article, "Misrepresenting Race-The Role of Medical Schools in Propagating Physician Bias" which was published in The New England Journal of Medicine. Racial and ethnic health inequities have long been documented in this country, but in recent years have researchers have started attributing their cause to racism, specifically structural racism. As conceptions of race have evolved, scholars now say that race can no longer be considered a biological category that is based on inherent differences that produce unequal health outcomes. Rather, it is a social construct that reflects the unequal consequences and effects on health. Medical education and practice has not evolved to reflect this new understanding of race, racism, and health. In this work, the authors examined more than 880 lectures from 21 courses in a preclinical medical curriculum and found many instances of how race is misrepresented. These instances were categorized into five domains: semantics, prevalence without context, race-based diagnostic bias, pathologizing race, and race-based clinical guidelines (Table 1.). Our discussion acknowledged that this information is not shocking, and there is much work to be done in regard to the use of race in medical education.

Domain	Description	Representative Examples
Semantics	Using imprecise and nonbiologic labels that inaccurately conflate race and ancestry	Widespread use of "Caucasian," "Black," "African American," and "Asian" as labels to denote biologic differences between patients  Describing a Nigerian patient as "African American" in a clinical vignette
Prevalence without context	Presenting racial/ethnic differences in disease burden without contextualization	Teaching students that "Black" patients have higher rates of asthma than "White" patients, without reference to the effects on asthma prevalence of residential segregation and unequal access to high-quality housing and health care <sup>16</sup> Teaching students that "Black" patients have higher rates of hospital readmission, without any discussion of the underlying causes of these disparities
Race-based diagnostic bias	Presentation of links between racial groups and particular diseases	Priming students to view sickle cell disease as affecting only Black people, rather than as common in populations at risk for malaria <sup>17,18</sup>
Pathologizing race	The tendency to link minorities with increased disease burden	In a slide showing the incidence of 13 types of brain tumors in Black patients and White patients, using the title "Incidence rates are higher among Blacks than among Whites," even though 10 of the tumors occurred more frequently in White patients
Race-based clinical guidelines	Teaching of guidelines that endorse the use of racial categories in the diagnosis and treatment of diseases	Teaching students to use different first-line antihypertensive drugs in Black patients than in White patients, without any exposure to literature that questions these practices and misleading interpretations of information <sup>19-21</sup>

Source: Amutah et al., 2021

The authors did give recommendations for improving the use of race in medicine:

- 1. Standardize the language that is used to describe race and ethnicity in medical education. Ancestry is a poor proxy for understanding genetic difference and it usually lumps together individuals with immediate or distant ancestors.
- 2. Appropriately contextualize racial/ethnic differences in disease burden. Always consider structural and social determinants of disease when discussing unequal disease burden.
- 3. Generate and impart evidence-based medical knowledge when it comes to race. Reform board examinations that reinforce race-based clinical guidelines and racial practices.

## **NEA Big Read: Sangamon County**

AWIMS, the Office of Equity, Diversity, and Inclusion, the Center for Human and Organizational Potential, SNMA, and AMWA join forces to instill their love of reading, the arts, and STEM in children.

#### By Dr. Vidhya Prakash

AWIMS joined forces with the Office of Equity, Diversity, and Inclusion, the Center for Human and Organizational Potential, SNMA, and AMWA to host a fantastic series of events during the **NEA Big Read: Sangamon County**. Sponsored by the Academy of Lifelong Learning at Lincoln Land Community college, the Big Read was designed to promote interest in reading in school-age children. Featuring Hope Jahren's memoir, "Lab Girl," the SIU School of Medicine team created multiple interactive sessions celebrating the arts and STEM.

Dr. Stacy Sattovia and Dr. Leslie Smith, along with their special assistant Ms. Vivian Sattovia, hosted "The Kitchen as a Lab." The team took participants on a fascinating journey through the science behind food. Baking demonstrations that illustrated the power of yeast in health and the production of carbon dioxide, tied to gas in our bodies, made for an exhilarating hour.



Ms. Megan Miner and Ms. Barra Madden hosted a virtual scavenger hunt, featuring prominent women in history. Participants were delighted to learn about the woman who found the first complete plesiosaurus skeleton, Mary Anning, and the first Black woman to travel into space, Mae Jemison.



Ms. Katherine Lincoln led a thought-provoking book club on Hope Jahren's "Lab Girl." Participants talked about gender equity, mental health, and Hope's complex and intriguing relationships with her biological and work families.



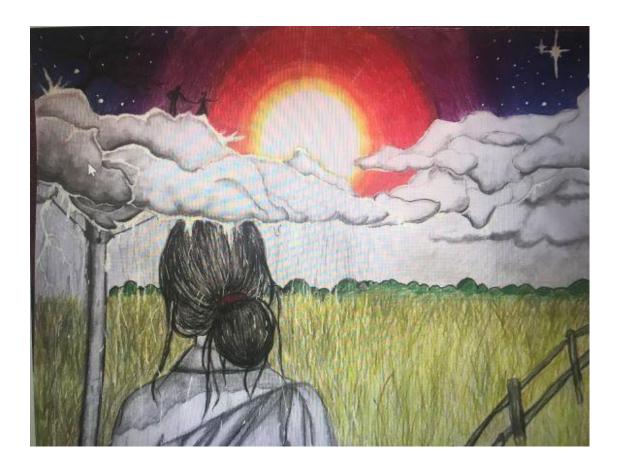
Ms. Morgan Watts led a thorough and highly educational session on community gardens. Did you know there are over 20 community gardens in Springfield? Common shrubs in the area include the viburnum and spirea. And, the Illinois state tree is the white oak.



Dr. Andrea Braundmeier-Fleming and Ms. Rukmini Roy hosted a fantastic virtual laboratory tour. The team led participants through Dr. Braundmeier-Fleming's laboratory and performed experiments using baking soda, vinegar, and dish soap. It was refreshing to know that more women are joining STEM fields.



Dr. Nana Cudjoe and Dr. Vidhya Prakash hosted a virtual art show. Featuring some very talented students from around Sangamon County, participants were able to reflect on pieces ranging from colorful dragons and vibrant chameleons, to a t-shirt designed to improve COVID-19 vaccination rates and end hunger, and a special recitation of a creative writing piece. Piece below by Ciaran Wall.



A story slam entitled "This is Our Lane!" was a perfect way to end such a wonderful week. Hosted by Dr. Susan Hingle and Dr. Christine Todd, the hour was filled with entertaining stories from women in STEM talking about why they chose their fields. Special thanks to Dr. Andrea Braundmeier-Fleming, Ms. Erica Austin, Dr. Sacharitha Bowers, Dr. Brandon Cox, Dr. Khandase Tate-Nero, Dr. Ayame Takahashi, Dr. Diana Sarko, Ms. Taran Ley, Dr. Vidhya Prakash, and Dr. Shelley Tischkau for participating. Also, a very special thanks to Ms. Lynn Weaver for her invaluable assistance in coordinating all the events.



What a privilege to have been a part of such a deeply meaningful initiative! The SIU School of Medicine team was especially excited to instill the love of reading, the arts, and STEM in kids.

#### **HeforShe Panel Discussion**

Dr. Najwa Pervin, Dr. Amal Asiri, and Mr. Alexander Worix lead a panel discussion with SIU SOM HeforShe allies.

#### By Dr. Vidhya Prakash

Dr. Najwa Pervin, Dr. Amal Asiri and Mr. Alexander Worix organized and led a thought-provoking HeforShe panel discussion. Panelists included Dr. Jerry Kruse, Dr. John Flack, Dr. Norman Otsuka, Dr. Robert Robinson, Dr. Michal Dynda, Dr. Keivan Shalileh, and Dr. Kari Wolf.

In addition to highly insightful comments from the panelists, participants in the audience were actively engaged and shared their personal anecdotes and comments. Below are a list of these very comments to ponder. We look forward to many more effective discussions like this one!

- Gender equity is a critical issue for the present and future of SIU and medicine in general. Without addressing these inequities, our profession is not likely to meet the needs of our faculty, patients, and society.
- Intentionality is another big thing that has been mentioned for culture change. We need to be vigilant to look at areas to remove obstacles to the path of equity whether that's expected clinical schedules, existing criteria for P&T, committee make up, etc.
- Structure + Process = Outcomes (like culture change).
- As long as there is lack of support within organizations, lack of active mentoring, it is difficult to assume leadership roles. Eg. My husband taking a day off to take care of sick kids is "awesome" whereas for me it would be "unprofessional".
- I'd suggest we should even stop associating certain characteristics and images with any gender. If you associate a certain characteristic with men, then people would assume that the opposite should apply to women.
- I wonder if we should reflect on leadership images that are often gendered and racially biased in the first place.
- We can probably start creating leadership images that we all believe in, rather than blindly following the gendered leader images and perpetuating.
- It's also very important we role model how we speak about ourselves and our colleagues to our trainees who are internalizing these messages.
- Now we even have evidence that there perhaps better outcomes with women physicians.
- Double edged sword. We are held to a higher standard.
- Women always get more "soft skills" jobs.
- I would argue that "soft skills" are not "soft" at all, they are essential to the healthy functioning of organizations.
- The burden of equity work consistently falls on women, and often is not valued the same as other work.

- Just as women do the lion's share (lioness' share?) of the emotional work at home, we also do it at work.
- Initiative in Critical Care https://www.thoracic.org/members/assemblies/interest-groups/wicc.php
- Working to change the language and criteria for evaluations might be the type of change that would lead to equitable valuation of work and performance.
- We need to change how we frame these skills.
- I spoke of surgical mentors, in Orthopaedics, we have Drs. Mayfield, Hillard-Semble, and McHale. We are fortunate. They are champions!
- Yes we need to make equity discussions routine and out of our equity echo chambers.
- A culture of transparency also plays a critical role in the success of women.
- And when we listen, believe who we are listening to.
- Transparency really lets everyone know where they stand, and makes it easy to identify and fix obvious problems. Secrecy enables inequities.
- The Marginalized Student Network has been transformational for our school.
- Part of the process has to be sharing narratives storytelling is at the heart of culture change.
- Imposter syndrome is so much driven by experiences of bias and inequity.
- A simple thanks or recognition of someone's work can go a long way in helping a person continue the good work they are doing and want to do better.

#### **AMWA Leads 2021**

SIU AWIMS members make substantial contributions to the American Medical Women's Association's annual meeting, AMWA Leads 2021.

#### By Dr. Vidhya Prakash

Several AWIMS members made their mark during the annual Medical Women's Association's (AMWA) annual meeting, AMWA Leads 2021. The virtual meeting was conducted over four days and packed with thought-provoking and informative sessions on topics ranging from infertility to physician mental health to sex differences in COVID-19.

Dr. Christine Todd led a groundbreaking workshop entitled "Using Your Voice." After an enlightening discussion on the history of women as patients and practitioners, Dr. Todd took participants through case exercises to help them practice using their voices, particularly in scenarios involving bias and microaggressions.

Dr. Vidhya Prakash led a powerful panel discussion on oppression, equity, and allyship, featuring Chief Health Equity Officer of the American Medical Association, Dr. Aletha Maybank, author of the memoir "The Beauty in Breaking," Dr. Michele Harper, and renowned leaders Dr. Reshma Jagsi, Dr. Charlene Dewey, Dr. Linda Chaudron, and our own Dr. Wendi El-Amin. Panelists discussed their personal experiences with microaggressions, the negative impact of retaliation against women in medicine for speaking out against oppression, and suggestions for effecting lasting and impactful change in the realm of equity and justice.

Dr. Susan Hingle led a fantastic panel discussion with physician leaders, Dr. Heather Gantzer, Dr. Nancy Klimas, Dr. Jessica Mega, and Dr. Susan Love. The session was filled with interesting stories and powerful lessons from these trailblazing women in medicine and science. Words of wisdom from Dr. Heather Gantzer were "Acquiring knowledge is a tremendous antidote to fear."





Dr. Vidhya Prakash was inducted as a Fellow of the American Medical Women's Association and Dr. Susan Hingle was awarded the prestigious Elizabeth Blackwell award.

Please consider joining AMWA if you are not already a member. Check out the links below for details on member benefits.

Membership Registration - American Medical Women's Association (amwa-doc.org)

Physician Member Benefits - American Medical Women's Association (amwa-doc.org)

## HeforShe Allies Pay Tribute to Women of Impact at SIU School of Medicine

Dr. Wesley McNeeses honors Ms. Nancy Travis and Dr. Donald Torry extolls Dr. Victoria Nichols-Johnson in celebration of Women's History Month.

In celebration of <u>Women's History Month</u>, two key HeforShe allies take a moment to honor highly impactful women at SIU School of Medicine.

"When entering the 801 building on a business day, I invariably think of Nancy Travis sitting in some seat of service as an invaluable, professional, well-informed member of our work community. If she is a part of any work project you have in mind, the odds of it being successful skyrocket. The epitome of competence and commitment in job performance for the SOM for more than 40 years, Nancy, you inspire me! I am proud to be one of your colleagues, but mostly to be one of your friends." Dr. Wesley McNeese

"I am fortunate to have had several inspirational female mentors during my formative years as a budding scientist. One of the first was Dr. Victoria Nichols-Johnson, a faculty member in the Department of OB/GYN at the SOM. I first met Dr. Nichols-Johnson as a young PhD graduate student researching the immunology behind certain obstetrical complications. Although not officially on my dissertation committee, Dr. Nichols-Johnson invested countless hours in me. We routinely discussed clinical aspects of obstetrics; she always wanted updates about my research projects, and she habitually paged me to confirm that I had received precious clinical samples. Her willingness to make time and her display of genuine interest in my academic growth were truly impactful: to this day, I try to emulate those traits with trainees. Little did I know at that time that Dr. Nichols-Johnson was the first black female physician in Springfield! Wow!" Dr. Donald Torry



## **Academic Integrity in Honoring Women's History**

Dr. Heeyoung Han provides a powerful commentary on a controversial article about Comfort Women.

#### By Dr. Heeyoung Han

A recently published peer-reviewed article, "Contracting for Sex in the Pacific War" by J. Mark Ramseyer, a professor at Harvard Law School, has sparked significant discomfort, concerns, and frustration globally and across the fields of History, Economics, Law, among others. The paper attempted to use economic game theory to describe Comfort Women, mostly minors forced into sex slavery by the Japanese Army during World War II, as contracted prostitutes. The article was faulty. It is historically incorrect, poorly supported by historical evidence, yet strangely passed an academic peer review process to become published in one of the well-regarded economic journals. Despite the numerous petitions to the journal to request retraction of the article signed by thousands of scholars, historians, economists, and others, the journal did not decide on retraction at the time of this review.

We reviewed one of the reaction news articles, <u>Seeking the True Story of the Comfort Women</u> by Jeannie Suk Gersen, a professor at Harvard Law School that highlighted this problematic situation and why this article needs to be retracted. Starting our discussion, we realized that most of us have not heard of 'Comfort Women'. We were surprised at how this significant historical event against women and humanity was rarely taught. Through my reflections and discussion with colleagues regarding this incident, I identify several critical points for the academy.

- Scholarship against fundamental human rights is dangerous. A science paper that misleads human health would be quickly corrected and retracted. However, this social science paper did not receive the same weight as science papers regarding harms to society. The article's view that game theory can explain a 10 year-old girl as a contracted prostitute is inhumane and dangerous as it could provide an insensible rationale for child human trafficking and sex slavery. We have a shared responsibility to monitor, speak up, and act against any social science or theories facilitating or justifying the destruction of humanity.
- Academic freedom is important. However, it does not mean irresponsible indulgence of any idea. Academic freedom entails a significant responsibility to use rigid evidence.
   Our integrity requires that we do our best to rigorously identify evidence and counterevidence, cite references as they were originally written, and ensure we do not misuse our academic freedom.

• An apparent system failure at the journal regarding the peer-review process is alarming. Peer-review journals have great respect due to their rigorous regulation system for quality knowledge. If it fails, it needs to be investigated. When the review system fails to detect the distorted idea, inaccurate citations and the wrong knowledge will be perpetuated to produce more problematic knowledge. As a reviewer and editorial member, I found myself to be more attentive to my conflict of interests and responsible for what I do for the community of scholarship.

## SIU physicians join USVP for vaccine awareness effort

Vice President Kamala Harris hosted a webinar to boost community participation in COVID vaccine

#### By Mr. Steven Sandstrom

The Office of the U.S. Vice President invited the American Medical Women's Association (AMWA) leadership to a special webinar on building confidence in the COVID-19 vaccines within communities. Vidhya Prakash, MD, Internal Medicine, and Susan Hingle, MD, Internal Medicine and cHOP, received the invitation from AMWA's executive director inviting board members and leaders to join. They participated in the virtual meeting on April 1.

U.S. Surgeon General Dr. Vivek Murthy welcomed the guests and introduced Vice President Kamala Harris, who led the meeting. The group heard from Dr. Reed Tuckson, co-founder of the Black Coalition Against COVID-19, Ms. Mary Kay Henry, international president of the Service Employees International Union, Mr. Zippy Duvall, president of the American Farm Bureau Federation, and Ms. Haypin Im, president and CEO of Faith and Community Empowerment (FACE).

"It was inspiring to hear these passionate, driven leaders discuss their commitment to disseminating vaccination in an equitable manner," said Dr. Prakash. "I remain hopeful for our future."

## **Meal Train for Winter Warming Center**

Dr. Anna Cianciolo, Dr. Myto Dong, and Dr. Vidhya Prakash deliver a healthy meal to our homeless community members at the Winter Warming Center in Springfield, Illinois.

#### By Dr. Vidhya Prakash

Operated by The Salvation Army, the Winter Warming Center provides our homeless community members shelter services. With limited access to other shelters due to COVID-19 policies, this essential resource has been a gift to those who need a place to stay and hot meals. Dr. Anna Cianciolo, Dr. Myto Duong, and Dr. Vidhya Prakash contributed to this very meaningful effort by providing a meal as a team. AWIMS prides itself on helping the community, particularly during such a difficult time. If you are interested in providing a meal, please check the website for <u>available dates</u>.



## AAPI Town Hall by the Office of Equity, Diversity, and Inclusion

Dr. Christine Todd moderates a much-needed discussion about increasing incidents of hate and violence against Asian Americans and Pacific Islanders.

#### By Dr. Vidhya Prakash

"8 Dead in Atlanta Spa Shootings, With Fears of Anti-Asian Bias"

"Attack on Asian Woman in Midtown Prompts Another Hate Crime Investigation"

"Calling COVID-19 the 'Wuhan Virus' or 'China Virus' is inaccurate and xenophobic"

Above are just three of the numerous headlines highlighting anti-Asian crimes and sentiments over the past year. The Office of Equity, Diversity, and Inclusion hosted a town hall dedicated to discussing this important issue affecting the Asian American and Pacific Islander (AAPI) community. Moderated by Dr. Christine Todd, the discussion was powerful and poignant. Several members of our SIU community shared their personal experiences with racism and hate. Highlights from the chat are below.

"Do I tell someone, and would they even care?' is something I've wondered several times as a medical student."

"I just think, as medical students, we're constantly balancing self-preservation with advocacy. We don't want to be passively punished for speaking up. I think having the reporting avenues is amazing and necessary and helpful, but there's still a certain level of fear and discomfort with speaking up. I really appreciate the advice and encouragement from everyone though!"

"That balance of self-preservation/advocacy is a huge challenge. It is about doing the right thing and having faith that your institution(s) share the same values as you hold."

"You can, as an ally, always 'talk up' the person or issue that was the subject - like 'You know, we have so many great Asian colleagues so we don't call it that, we say 'COVID."

"Sensor is a great place to let someone know if you do not think your direct supervisor will care. Also add that to your Sensor report."

"Sensor is a great avenue to report these transgressions and also the Equity Response team."

"It is important to remember that in addition to being uncomfortable, these incidents are also safety issues, learning environment issues, and workplace satisfaction issues."

"Yes, and the response of GA law enforcement that the shooter 'had a bad day' showed just how little Asian lives are valued. Infuriating."

"Hate takes a toll on the carrier of it. Hate never eradicates Hate. We won't get a satisfactory resolution to every slight and transgression aimed at us. I try and strike a balance between not going down the rabbit hole every time unjust things happen but picking and choosing my battles in a way that pushes the 'system' to acknowledge and do something about it."

## Dr. Shruti Hegde Launches Cardiac Amyloid Center

#### Dr. Shruti Hegde is a visionary leader who created SIU's first ever Cardiac Amyloid Center

#### By Dr. Vidhya Prakash

Once thought to be a benign and rare condition, transthyretin cardiac amyloidosis (ATTR) is now increasingly recognized as one of the causes of heart failure in older adults. Amyloidosis is a condition where abnormal proteins deposit in various organs resulting in organ dysfunction. The condition can be diagnosed non-invasively and with high accuracy through a 99m technetium (99mTc) scan. There is now an FDA-approved oral therapy that not only slows or halts the disease progression, but also improves quality of life and reduces mortality. Early recognition remains essential for optimal treatment efficacy. The American College of Cardiology stresses strong consideration of ATTR as a diagnosis in men over the age of 65 and women over the age of 70 who have heart failure and a thickened ventricle on imaging.

On March 4th, 2021, SIU cardiologists performed the first 99m technetium (99mTc) scan at Memorial Medical Center. This scan is now widely available at Baylis and Memorial nuclear laboratories. Furthermore, SIU Cardiology is excited to announce the opening of a Cardiac Amyloid Center which will include genetic testing, scanning, and optimal treatment with a focus on educating health care professional and patients. A dedicated clinic will run the second Thursday of each month on the 4th floor of the Baylis building in the division of Cardiology. As a cardiologist with SIU Cardiology, Dr. Shruti Hegde will serve as director of the Cardiac Amyloid Center which will serve as a referral center for all of central and southern Illinois. If you would like to refer a patient to the Cardiac Amyloid Center, please call 217-545-8000, ask for the Cardiology clinic, and state that you would like to specifically schedule with the Cardiac Amyloid clinic.



## **AWIMS Spotlight: Morgan Watts**



Role at SIU Medicine: Fourth year medical student!

Born and Raised: Alexandria, VA and grew up in Southern MD

Birthday: November 9th

Family: Parents, older brother (31) and younger brother (27), nephew (8) and niece (5)

**Favorite Books:** *Their Eyes Were Watching God* by Zora Neale Hurston

Hobbies: Binge-watching movies, long drives, finding the best ice cream spots!

Personal Hero: My parents! Worked so hard for my brothers and me to give us what they

didn't have.

Most Embarrassing Moment: During 3rd year, we go sit in on an Alcoholics Anonymous meeting. Someone mentioned their "birthday" and I said "Oh great, my birthday is next week too!" and then someone leaned over and let me know that it was their sobriety birthday and I was mortified! Thankfully, everyone got a good laugh out of it and was nice but I felt so bad! What is your advice for achieving work-life balance? I am still working on this but I would say have a mentor or someone you admire and ask them! One of my go-to's is Dr. Prakash! What is the best piece of advice a mentor gave you? "It will all work out Morgan" - Dr.

Prakash...and she is right! It always does work out, one way or another.

What is your unique contribution to Women in Medicine and Science? I am a first-generation college graduate and currently a 2nd Lieutenant in the United States Air Force!

## **AWIMS Spotlight: Patricia Klos**



**Role at SIU Medicine:** Nurse Practitioner - work with both Neurosurgery and Neurology - movement disorder.

**Born and Raised:** Quincy, IL **Birthday:** May 16, 1963

**Family:** I have 9 brothers and sisters - 6 still live in Quincy. I have 19 nieces and nephews and many, many great nieces and nephews. I myself had 2 children - a boy and a girl. I am now a grandma - with 3 grandchildren and another one on the way in June. Needless to say, the holidays are always fun and filled with joy. COVID has put a temporary damper on celebrations but I have hope this will change soon.

**Favorite Books:** My all-time favorite book is still one from my childhood - *All creatures Great and Small*. It is such an uplifting book and I will still occasionally read parts of it when I need a "pick- me-up." **Hobbies:** I love gardening. I find planting and working the soil helps me to decompress. It is also very soothing for my soul.

**Personal Hero:** I have a couple:

- for work: Madeleine Albright She earned her PhD when she was close to 40 and became the first female Secretary of State when she was 60. She inspired me to go back to college for my masters when I was in my 40's.
- personal life my mom. She is one of the kindest people I know. I try to be as kind as she is but often fall short but I still try.

**Most Embarrassing Moment:** This is an ongoing problem - I have a TERRIBLE time remembering names. This has led to some interesting exchanges.

What is your advice for achieving work-life balance? Spend a few moments before you start your day on you. For me it is saying my prayers or a poem and I spent a few moments doing yoga. It helps to center me. This way I start my day with "Good morning God" instead of "Oh my God it's morning". What is the best piece of advice a mentor gave you? Make sure you take care of you. You come first. What is your unique contribution to Women in Medicine and Science? One way is by example: the care I give my patients; coming up with unique, evidence based and patient-centered solutions to patient's problems. The other way: being a good and supportive mentor to the next generation of providers.

## **Articles and Quotes**

One Doctor Shares Her Story of Racism in Medicine

Hate Crimes Against Asian American Are on the Rise

Women Scientists Were Written Out of History

Addressing Microaggressions in Academic Health

The Blackwell Sisters and the Harrowing History of Modern Medicine

## The US Economy Lost 140,000 Jobs in December. All of Them Were Held by Women

Physician Mental Health

"We have to build things that we want to see accomplished, in life and in our country, based on our own personal experiences ... to make sure that others ... do not have to suffer the same discrimination."

Patsy Mink



"Every great dream begins with a dreamer. Always remember, you have within you the strength, the patience, and the passion to reach for the stars to change the world."

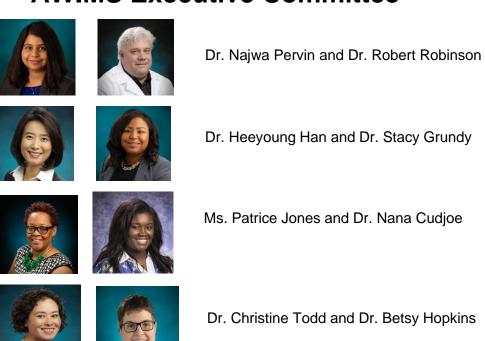
**Harriet Tubman** 



### **AWIMS Advisory Board**



### **AWIMS Executive Committee**





Dr. Andrew Wilber and Dr. Krati Chauhan