ANS strives for a diverse and inclusive culture to drive creativity, exploration and innovation and to better connect us to each other and to our patients

Spring 2022

### DI Committee Members

Stephanie Moody, MD, Chair Liz Toh, MD, MBA, Past-Chair

- Soha Ghossaini, MD
  - Michael Hoa, MD
- Bulent Mamikoglu, MD
  - Sarah Mowry, MD
- Kathryn Noonan, MD
  - Alan Micco, MD
- P. Ashley Wackym, MD
  - Mary Ying, MD



# American Neurotology Society Diversity and Inclusion Newsletter

In this issue: Member highlight: Miriam Redleaf Report from recipient of ANS DI Scholarship Call for Research

# A conversation with Miriam Redleaf, MD on DEI lessons learned through the foundation of Ethiopian Otology Fellowship

Dr. Redleaf, how did you get started working in Ethiopia and what did you learn from your initial experience?

My wife and I adopted a sibling group from Ethiopia in the 1990's. In 2012, through connections developed with the Ethiopian community in Chicago, I was invited to do a surgical camp with new ENT graduates in Ethiopia. I recognized how much they wanted to operate, so instead of operating myself, I watched and taught them instead, instantly becoming extremely popular. The DEI lesson? Nobody wants to watch someone else operate. When a foreigner like me goes to Ethiopia, that's exactly what they don't want to do more of. It's not fair to have them gather all the patients, get them into the clinic for surgery, help with the operations and not be able to operate themselves.

### How did your relationship with the Ethiopian ENT program evolve over time?

Initially, I supervised ENT residents. But I learned that teaching one resident for a day or two, then another for a day or two every 6 months didn't leave much footprint. So I changed the format to train the same 3 people every 2-3 months until they got it, supplemented by African and Indian training. Bringing surgical trainees to the US is not practical. Getting visas to visit in the US is very difficult, especially for unmarried females and of course they would not be able to operate here, even if they could visit. So I formed a charity called the Ethio-American Hearing Project, through which I have developed partnerships with universities and private hospitals to support surgical training. DEI lesson? You have to work with the resources available and develop collaborations with institutions to get the work done.

#### Has the training of ENT residents in Ethiopia been successful?

Personally, I have tried to teach dozens of ENT residents, but the teaching did not stick until Dr. Es-hak Bedri in Addis Ababa and I put together the Ethiopian Otology Fellowship in 2017. We have trained 5 otologists, 2 women and 3 men, each safe and competent in tympanoplasty, mastoidectomy, ossicular reconstruction and stapedectomy. We have two more currently in training (though training has been interrupted by COVID and war) and 2 more preparing to start training.

We have started training in cochlear implantation. I have gotten a LOT of grief for CI training from two directions. There are foreigners who go there and say that the people are so poor, most don't have cars or other resources and their cholesteatomas are so bad, why teach them how to do CIs? My response is, yes, most people don't have cars or never fly in an airplane there... does that mean NO ONE should have a car or be able to fly in an airplane?

The second criticism I received was from our CI industry partner who initially wanted to import foreign doctors to do the Cis. I insisted from the start that I would TRAIN the people there how to do them and supervise the operations, but they were not going to function as the gophers for me to have all the fun. This met with a tremendous amount of resistance. However, with time, the company became proud of their role in empowering local talent.

### Have you had any major obstacles to overcome in your work there?

The obstacles I have encountered are too numerous to mention. American trainees have a LOT of exposure and support which we take for granted. We are cared for, supervised and taught how to use instruments and equipment over 5 years. There are many stories of opening up a drawer or room in Ethiopia to find instruments still in the plastic or an operating microscope with towels hanging on it. That's because there is absolutely NO ONE to show them what do to and how to do it. So when there's any problem with the microscope, they don't know what to do to fix it - just like a resident in the US wouldn't know either. DEI lessons: To train surgeons in a foreign program, you have to go back repeatedly at short intervals. You would never plant a crop and then never go back to water it? You would never hand your 15 year old daughter the keys to her new car and never teach her how to drive it and supervise her for many hours before you let her go out alone? You have no idea how to take apart a Zeiss microscope and reconfigure the ocular to get it started working again do you? Well neither do they.

### Other thoughts?

This was a lot of work, extremely stressful, and extremely expensive. Do we have any idea how even the poorest of us is fantastically wealthy compared to them? We are phenomenally wealthy and we can easily spend the thousands of dollars it takes to provide support and I decided to sacrifice the time and money it requires to help in this way. We have to realize that people who are different from us are different and that's OK. And we have to realize that everybody wants the same thing: no one wants to fetch and carry while someone else has all the fun. EVERYBODY wants to operate. Nobody wants to use a piece of equipment that they don't know how to. Nobody wants to hurt a patient. And it's not fair to exclude people from opportunities just because they have been taught not to complain or that it's rude to demand attention and instruction.

## ANS DI Committeee URiM Travel Scholarship

**By Patricia Timothee, MSIV** Student at Eastern Virginia Medical School and Recipient of the 2022 ANS Travel Scholarship Mentored by ANS Fellow, Michael Hoa at Georgetown University. Ms. Timothee plans a research year with the Department of Otolaryngology at Mayo Clinic.

My interest in Otolaryngology grew out my 3rd-year rotations. I fell in love with the diversity of the field and the balance of surgical and clinical care. With several great mentors and with support from residents in the SNMA, Black OTO network, and Harry Barnes Society, I began extending my network and getting more exposure to the field. I'm so grateful for all of the relationships and connections I've made along the way. Having mentorship in a field as nuanced as Otolaryngology and to be a minority student approaching it can be a daunting process. Mentorship has been such an instrumental part of my journey and I hope to pay it forward by supporting the next wave of future Otolaryngologists.

My experience rotating at Georgetown University was phenomenal. The residents, attendings, and staff took care of me and made me feel welcome. During my 4 weeks with the department, I rotated at 3 different hospitals which gave me the opportunity to work with many attendings across various subspecialties and with diverse patient populations. Overall, I spent 75% of my time in the OR and 25% in clinic. I often saw patients independently, wrote notes, and presented the patient to the attending. The clinic afforded many opportunities to improve my skills in performing and reporting on head and neck exams as well as performing nasal endoscopy. Our clinics were often busy which helped me develop better efficiency with clinical interactions.

I loved the teaching that I received in the OR. The residents were always checking in with me to be sure I understood the goal and approach to our surgery while the attendings took care to teach me various techniques to gain optimal exposure during cases as well as techniques to optimal tissue closure. This kind of teaching and environment showed me how much they valued my presence there and, their own desire to see me succeed as an otolaryngologist.

#### ANNOUNCING

# 2022/23 ANS Diversity and Inclusion Committee Underrepresented in Medicine Otology/Neurotology Travel Scholarship

The Diversity & Inclusion Committee is taking applications for two scholarships for the 2022/23 academic year to assist medical students with travel expenses for external rotations. Through this scholarship, we seek to engage URiM students in research and clinical activities related to the ear, hearing and balance so that they can learn about our field and gain the experience needed to promote a career in otology/neurotology. The successful applicant will receive a \$2000 scholarship to support travel and housing expenses for a chosen clinical rotation that requires significant travel from their home institution. A member of the ANS will be identified to provide mentorship to the recipient. Requirements and details are provided on our website or can be obtained by emailing Dr. Moody at moodysa@evms.edu. Members are encouraged to promote the scholarship to eligible students. Applications are requested by June 1, 2022. More information is available at https://www.americanneurotologysociety.com.

## Announcing the ANS Advancing Diversity, Equity, Inclusion, and Accessibility (DEIA) in Otology and Neurotology Research Grant

### \$25,000 award available July 1, 2023 Application due March 1, 2023

In this funding opportunity announcement (FOA), in an effort to foster scientific discovery in the area of diversity, equity, inclusion, and accessibility within Otology and Neurotology, the ANS seeks to fund research that address these concepts in *patient care, education, research, and membership*. As it relates to the mission of the ANS, these endeavors will contribute to a better understanding of our increasingly intersectional organization and patient populations and allow for initial steps towards addressing the needs of our increasingly diverse clinical populations. This is particularly important to translate knowledge to quality care for our patients.

More details at: <u>https://www.americanneurotologysociety.com/ans-research-grant-award</u>

# Your DI Committee at work

- I. Implemented a Pledge for Diversity for ANS leaders
- 2. Developed a mission statement for the DI Committee
- 3. Updated ANS Profile page to collect demographic information to help steer a data-driven diversity plan. (Don't forget to update yours!)
- 4. Added line item on ANS Profile page to allow members to indicate areas of expertise and interest in speaking opportunities
- 5. Established a diversity and inclusion education page on the ANS website
- 6. Established a travel scholarship for students of under-represented minority groups interested in otolaryngology
- 7. Promoting ease of access to meetings for people with hearing impairment
- 8. Summer 2021 DEI Webinar "Achieving Equity in Hearing Healthcare"
- 9. Administered a membership engagement survey 2018 and 2021
- 10. Developed and secured funding for DEIA research grant
- II. Established new process for applying to committees

# News and Resources

Seeking new members for the ANS DI Committee. Apply online at <u>https://www.americanneurotologysociety.com/ans-committees</u>

We hope that our committee will be as diverse in makeup and opinion as is our society, so all members with an interest in contributing to this working committee are encouraged to apply.