



FOCUS ISSUE – Celebrate Diversity with the AUA

AUA Announces Diversity and Inclusion Task Force



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“History and societies do not crawl. They make jumps. They go from fracture to fracture, with a few vibrations in between. Yet we (and historians) like to believe in the predictable, small incremental progression.”

Nassim Nicholas Taleb; The Black Swan: The Impact of the Highly Improbable

A lot has changed since the American Urological Association (AUA) was founded in 1902, and it has indeed advanced urology as a premier urological association, providing invaluable support to the urological community. The AUA’s mission is to promote the highest standards of urological clinical care through education, research and the formulation of health care policy.

This past December 2020, the AUA Board of Directors unanimously decided to create the AUA Diversity and Inclusion (D&I) Task Force, which aims to identify specific and actionable steps for how the AUA can advocate for, and foster, a diverse and inclusive environment within the association, as well as the global urology community.

With more than 24,000 members worldwide, the AUA remains committed to standing against all forms of hatred, violence and racial discrimination. This holds true in the actions we take and in the words we speak.

Acknowledging Our Present

In a recently published article entitled “Supporting Black Voices in Urology,” a faculty member and AUA member shared her experience as an Under-Represented in Medicine (URM) faculty member. “It has been a career of often being the only ‘Black one’—as a resident, as a fellow and as faculty. There is an unspoken pressure to be perfect, polished and unshakeable that comes with that position and an inherent loneliness. I am sure many women in urology who have experienced and still experience this can relate. However, with that said, I have always had amazing colleagues, co-residents, co-fellows, attendings and mentors, the vast majority of whom have gone the extra mile to make me feel included. However, I have lived and worked in every corner of the USA and despite my white coat, I am still often mistaken for the janitorial services, food and beverage services, the unit clerk and patient family in the hospital—everything but a doctor. Despite this, I have learned that I must present my authentic self every day to my patients, colleagues and residents. I want things to be different for future generations of women and URM in medicine. Improving diversity in medicine and normalizing the role of women and people of color as doctors and surgeons are the first steps.”¹

Making Human and Social Differences Our Source of Strength

To achieve our vision, we must make our human and social differences a source of strength. Social identities are the result of constructs shaped by social norms. There are many dimensions of difference, but diversity scholars suggest key dimensions of human and social difference, called the “Big 8,”

present persisting challenges and opportunities to organizations.¹ These dimensions include race/ethnicity, gender/gender identity, sexual orientation, geographic origin/nationality, mental/physical (dis)ability status, religion, age, and role and functional/military background. Finding strength from the interaction of these critical differences provides the best opportunities to build a high-performing organization and contribute to a thriving society.

“The AUA Board of Directors shares the concerns of our members and patients regarding the inequalities existing within our society,” said Scott K. Swanson, MD, AUA Board President. “Increasing our commitment to diversity and inclusion is key to ensuring future success for both the AUA and the specialty of urology.”

In alignment with the AUA’s mission of advancing urology through education, research and advocacy, the newly formed and appointed D&I Task Force brings together a collaborative group of urologists from different personal and professional backgrounds.

The AUA D&I Task Force is chaired by Tracy M. Downs, MD, Professor of Urology and Associate Dean for Diversity and Multicultural Affairs at the University of Wisconsin School of Medicine and Public Health, Madison, Wisconsin. The task force’s Vice-Chair is Simone Thavaseelan, MD, Associate Professor of Urology and Program Director at Brown University Division of Urology, Providence, Rhode Island.

In addition to Dr. Downs and Dr. Thavaseelan, the Task Force is composed of the following 11 members:

1. Arthur L. Burnett, II, MD, Johns Hopkins University School of Medicine, Baltimore, Maryland
2. Sam S. Chang, MD, Vanderbilt University, Nashville, Tennessee

3. Benjamin J. Davies, MD, University of Pittsburgh, Pittsburgh, Pennsylvania
4. Geolani W. Dy, MD, Oregon Health & Science University, Portland, Oregon
5. Kirsten Greene, MD, University of Virginia Health, Charlottesville, Virginia
6. Tomas L. Griebing, MD, MPH, FACS, University of Kansas Medical Center, Kansas City, Kansas
7. Linda L. McIntire, MD, Alexa Lutz Veterans Administration Medical Center, Saginaw, Michigan
8. Brian Keith McNeil, MD, MBA, FACS, SUNY Downstate Health Sciences University, Brooklyn, New York
9. Yahir Santiago-Lastra, MD, University of California San Diego Health, San Diego, California
10. Efe (Chantal) Ghanney Simons, MD, UCLA Health, Hollywood, California
11. Vijaya Vemulakonda, MD, JD, Children’s Hospital of Colorado, Aurora, Colorado
12. Hadley Wood, MD, Cleveland Clinic, Cleveland, Ohio

I am honored to lead this initiative on behalf of the AUA. I am encouraged by the steps the AUA is taking to address D&I challenges within urology while also advocating for real change and sustainable solutions to advance the specialty in a comprehensive way. Given the challenges we continue to face as a society, fostering a culture that is welcoming and inclusive to students, nurse practitioners, physician assistants, physicians and patients is of the utmost importance.

The D&I Task Force is positioned to promote synergy and alignment with the Urology Care Foundation’s developing diversity initiatives, which fall within the scope of its mission.

The D&I Task Force began its work this winter and will conclude

with a final report to the AUA Board in February 2022.

“Not everything that is faced can be changed; but nothing can be changed until it is faced.”

James Baldwin, 1962 essay for The New York Times. ♦

1. Downs TM, Enemchukwu E, Lee CT et al: Supporting Black voices in urology. Nat Rev Urol 2021; **18**: 7.