

## A Quest for Social Justice in Science and Healthcare

An Interview with Lynne Holden, Senior Associate Dean for Diversity and Inclusion, Albert Einstein College of Medicine

**EDITORS' NOTE** Dr. Lynne Holden, who is professor of emergency medicine at Einstein and an attending physician at Montefiore Health System, has worked extensively with medical students, residents, and faculty at Albert Einstein College of Medicine. In recognition of her teaching excellence, she was elected to the Leo M. Davidoff Society, which honors teachers who have made significant contributions to the education of Einstein medical students. She has served as



Lynne Holden

a co-chair of the admissions committee, taught the Introduction to Clinical Medicine course for first-year medical students, and held the position of associate residency director/site director at Montefiore. She continues to serve on the EM residency admissions committee. As vice-chair for diversity, equity, and inclusion for the department of emergency medicine, Holden spearheaded the development of the Social EM Program, which fosters activities that expose residents to the social determinants of health in the Bronx and empowers them to create empathetic solutions through research and community service. Since 2006, she has directed the Emergency Department Clinical Exposure and Mentoring Program, which has provided educational and experiential learning through volunteering and shadowing for 1,800 New York City undergraduate and post-baccalaureate students. Holden is co-founder and president of Mentoring in Medicine, Inc., (MIM), a national nonprofit organization dedicated to inspiring and preparing students to become healthcare and science professionals in order to help eliminate health disparities. Since its establishment, MIM has reached more than 58,000 students from elementary age through medical school, along with parents and educators. MIM alumni include 478 physicians from diverse backgrounds. The organization has also introduced 8,000 students, kindergarten through 12th grade, to biomedical and healthcare careers through class presentations, stage plays, and workshops. Holden's numerous honors include a 2007 Maybelline NY-Essence Empowerment through Education Award, a 2009 Robert Wood Johnson Foundation Community Health Leader award, and the 2019 Distinguished Community Service Award from the United Hospital Fund. She has published the results of her work extensively and has appeared

widely in the media as an expert in mentoring and diversity in medicine. Also on the national level, Holden is active with the American Board of Emergency Medicine as a senior national oral board examiner and as the National Medical Association's (NMA) immediate past section chair for EM. She serves on several national committees that address workforce diversity in medicine, including the American Association of Medical Colleges' Action Collaborative for Black Men in Medicine (in partnership with

the NMA) and the American Association of Medical Colleges Pathways Program Advisory Group. She is chair of the K-Grad Working Group within the Roundtable on Black Men and Women in Science, Engineering, and Medicine at the National Academies of Sciences, Engineering and Medicine. She is also a board member and on the education committee of the Friends of the National Library of Medicine. Holden is a graduate of Howard University and of Temple University School of Medicine. Following an internship at Albert Einstein Medical Center in Philadelphia, she began her residency in emergency medicine at Jacobi Medical Center, and later served as chief resident. After a brief stint as an attending physician at Kings County Hospital, and as assistant clinical professor at SUNY Downstate Health Sciences University, both located in Brooklyn, Holden returned to the Bronx to join Einstein and serve as an attending physician at Jacobi and Montefiore. She rose through the academic ranks at Einstein to become a full professor in EM, the fifth African American female in the United States to achieve this distinction at an academic medical center.

**INSTITUTION BRIEF** Albert Einstein College of Medicine ([einsteinmed.edu](http://einsteinmed.edu)) is a research-intensive medical school. For nearly 70 years, its diverse faculty and staff has set a standard of excellence in medical and graduate education and patient-centered clinical care, and has made major contributions to scientific research enhancing human health in its communities and beyond. The College of Medicine's mission is to prepare a diverse body of students to become knowledgeable, compassionate physicians and innovative scientific investigators, and to create new knowledge. Einstein is affiliated with both Montefiore Health System and Yeshiva University.

**Will you provide an overview of Albert Einstein's College of Medicine's diversity and inclusion strategy?**

You can trace our diversity and inclusion strategy to the College of Medicine's initial founding in the early 1950s, when women, people of color, and many other groups were largely excluded from careers in medicine and science. In this context, Einstein was established with the stated principle of accepting students of "all creeds and races." The College of Medicine's commitment to social justice was present at its founding and has continued ever since.

Our current, formal strategy traces back to 2017, when 60 members of the Einstein community – including faculty, students, and staff – formed the Diversity and Inclusion Council. The council created the Diversity and Inclusion Strategic Plan for Excellence, which guides the activities of the diversity office. The plan outlines our mission and goals but was designed to be fluid, so it continuously evolves. For example, we've made adjustments to reflect the changes in societal perspectives and expectations that took place during the COVID pandemic. Our overall strategy is to ensure that diversity, equity, and inclusion are interwoven through the fabric of Einstein, creating an environment where all faculty, students, and staff belong and understand that their contributions are valued.

**How valuable has it been to have the commitment and engagement of Einstein's leadership team in its diversity and inclusion efforts?**

We are fortunate to have a leadership team whose words and actions reflect the quest for social justice in science and healthcare. There is a difference between discussing diversity, equity, and inclusion efforts and implementing and maintaining them. By prioritizing the recruitment, retention and development of diverse students, faculty and staff, Einstein leadership can learn from a variety of experiences and perspectives in order to foster creative solutions. Various mechanisms have been created to listen to the voices of the people we serve in order to enhance our decision-making and implement new ideas.

For example, the 2018 Einstein diversity and inclusion strategic plan provided guidelines for the creation of a Senior Associate Dean for Diversity and Inclusion. To fill this role is an honor and privilege. My job is to serve as the liaison between the leadership and our faculty,

students, and staff. There are opportunities for these constituents to interact directly with the leadership through regularly scheduled meetings.

There is also a vibrant effort to engage the Bronx community, which is 56 percent Hispanic, 35 percent Black, and is challenged economically. For example, we sponsor several pathway programs, some beginning as early as middle school, that are designed to cultivate the local health and science biomedical workforce. Also, our medical students must now complete required service-based coursework, often with local community organizations. We also have a number of community advisory boards and outreach programs that inform our scientific, medical, and outreach efforts.

#### **How engrained is diversity and inclusion in Einstein's culture and values?**

As I mentioned earlier, Einstein's commitment to diversity and inclusion has been present since its founding. Albert Einstein agreed to have his name attached to the proposed medical school on his 74th birthday, March 13, 1953, under the condition that students of "all creeds and races" were able to attend. Two years later, Albert Einstein College of Medicine opened its doors with the mission of social justice. While it wasn't called that at the time, diversity and inclusion is a part of the College of Medicine's DNA.

I was introduced to the Einstein community in 1990 while entering my fourth year of medical school at Temple University School of Medicine. I knew that I wanted to pursue emergency medicine. I heard about one of the top training programs in the country – the oldest on the Northeast coast – located in the Bronx. The U.S. was in the middle of the HIV/AIDS epidemic that was raging in New York City. I wanted to leave Philly to go to the Bronx to gain more experience. Then I discovered that a four-week Emergency Medicine rotation was being offered for diverse students at the Bronx Municipal Hospital Center, now Jacobi Medical Center, on the campus across the street from Einstein. I applied and, fortunately, was accepted.

During those four weeks, I was immersed in the Einstein culture and saw its values in action. I was embraced by colleagues and staff



*Albert Einstein College of Medicine*

at the hospital and medical school. I knew this was where I belonged. Thirty years later, I am still a member of the Einstein community, upholding these same values.

#### **You were the fifth African American female to achieve the rank of full professor in Emergency Medicine at a U.S. academic medical center (Montefiore Einstein). Will you discuss this distinction and what you think can be done to make emergency medicine more diverse and inclusive?**

Einstein, and its University Hospital and academic medical center, Montefiore Health System, have been at the forefront of grooming physician leaders in their respective fields with a world-class education and unmatched patient care experiences. I am fortunate to have been embraced in such a nurturing environment with core values such as social justice in healthcare. This experience has groomed me to become a national thought-leader in building workforce diversity, which became my path to professorship.

In general, African Americans make up 5 percent of the nearly 950,000 physician workforce with 2 percent being African American females, according to the American Medical Association. Furthermore, the number of African Americans in academic medicine reaching the rank of professor in any specialty is small. Of all U.S. medical school faculty in 2022, according to the AAMC, 2.2 percent were ranked as Professor and 4.6 percent were Assistant Professors.

Nationally, Montefiore Einstein has been foundational in the cultivation of emergency medicine leaders. The distinction of being the fifth African American full professor of Emergency Medicine is an honor that I could not have accomplished alone. I received immense support and resources provided by Montefiore Einstein. I was mentored and sponsored by three diverse, trailblazing physicians who are now EM full professors. Two were trained at Montefiore Einstein: the second African American professor, Dr. Lynne Richardson, and the first Latina professor, Dr. Yvette Calderon. The third African American female professor, Sheryl Heron, MD, MPH from Emory, was instrumental in providing national resources for improving diversity in medicine. Mentorship and providing opportunities for others to advance are critical in the development of a more diverse and inclusive specialty.

#### **What can be done to attract more diverse candidates to pursue a career in medicine?**

We must take a holistic approach to inspire more diverse candidates to pursue careers in medicine. We can accomplish this with early and continuous exposure to the field and providing intense encouragement and support along the career path. One of

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my mentors, Dr. Jo Ivey Boufford, stated that to have a successful pathway program, you must remember the mantra “not me, without me,” meaning programs need to be designed with the input of the people you’re serving.

When I wanted to hear from the population we were trying to engage, I was curious about the factors that hindered students from pursuing a health career, so I hosted focus groups with high school and college students, parents, and educators from Harlem. In 2013, I published a landmark paper outlining the perceived obstacles to pursuing a health career with opinions from students, parents, and educators, titled *Promoting careers in healthcare for urban youth: What students, parents and educators can teach us* (Holden, L., Rumala, B., Carson, P., & Siegel, E. (2014). I learned invaluable lessons and creative ways to reach out to our target population. Since then, every outreach program has input from the population being served, which gets incorporated into the curriculum. The program organizers encourage and guide the participants in an engaging manner, infusing their intended goals, but the constituents become active participants in their educational experience.

**You are involved in curriculum development for the new Bard Bronx. Will you highlight Bard Bronx and what this new partnership between Bard and Montefiore Einstein means for students in New York?**

It is too early to discuss details about the curriculum. What I can say is that the newly developed Montefiore Einstein partnership with Bard is an exciting step in which two major institutions are cultivating local talent to pursue research and medical careers. On the Einstein campus, there is a unique opportunity to pair leading researchers and physicians with motivated high school students from the community, allowing intellectual exchange that is built into the school day. This experiential learning model will accelerate the knowledge and creativity of the students and help the biomedical professionals gain insight into the community in which they work. We hope this opportunity accelerates learning and creates more roads to economic prosperity and better health.

**You are also co-founder and president of Mentoring in Medicine, Inc. (MIM). What was your vision for creating MIM and how is it working to inspire and prepare students to become healthcare and science professionals to help eliminate health disparities?**

Mentoring in Medicine, Inc. (MIM) is a nonprofit organization founded to inspire, equip and empower students who are underrepresented in medicine to pursue their dream. The vision for MIM is to broaden the field of competitive applicants to health professional schools. I was stunned by an article I read in 2008 by Paul Jolly, PhD that was published by the American Association of Medical Colleges. It noted that 75 percent of students who matriculated in United States medical schools came from households with family incomes in the top two quintiles. The study was replicated in 2017 with similar sobering results, with 73 percent-79 percent of medical school matriculants coming from household incomes greater than \$121,019.

Mentoring in Medicine targets students from family households in the lowest quintiles – those with few resources but great potential. Our job is to cultivate these students by providing academic enrichment, leadership development, civic engagement, and mentoring. Foundational science and math topics are introduced, reinforced and then built upon. Key qualities necessary for success, such as intellectual curiosity, critical thinking skills and grit, are cultivated over time. Students must develop their professional identities and find mentors. Therefore, MIM engages students as early as elementary school and continues through the start of their professional careers. While students can enter at any point along their educational journey, the goal is to provide them with tools to achieve their dream of becoming a biomedical professional.

Since its establishment, MIM has reached more than 62,000 students from elementary school age through medical school, along with parents and educators. MIM alumni include 517 physicians – including residents and medical students – from diverse backgrounds. The organization has also introduced 8,000 students, kindergarten through 12th grade, to biomedical and healthcare careers year-round through school-based programs, summer camps, Saturday workshops, stage plays, and fairs. But it’s not just the numbers. The impact

of our work is also made clear to me when adults who attend our programs tell us, “I wish you were around when I was younger, my life may have been very different” and children say “we don’t get this in regular school.”

**Do you feel that there are strong opportunities for women to grow and lead in the industry?**

There are strong opportunities for women to advance in the biomedical industry. Emergency Medicine, for example, has not achieved gender parity – women represent 35.9 percent doctors-in-training, 28.3 percent faculty and 11 percent department chairs in 2019, according to the American Association of Medical Colleges. To advance gender parity, especially in leadership roles, we need mentorship and sponsorship.

My mentor, Dr. E. John Gallagher, was the founding Chair of the Department of Medicine at Einstein and a pioneer in the field. He embodied the Einstein values of social justice and provided opportunities for all. As the leader of the oldest Emergency Medicine residency program on the Northeast coast, he was an advocate for the promotion of a more diverse and inclusive workforce and used his influence to open doors for so many. It was his suggestion that I apply to become a national oral board examiner in 2003. At the time, out of a pool of approximately 200 examiners, there were very few women and an even smaller number of diverse examiners.

Fast forward to 2022, I am the first African American female in 43 years to sit on the Board of Directors of the American Board of Emergency Medicine. This would not have been possible if Dr. Gallagher and others after him did not advocate for me. We need more sponsors of all backgrounds who have a seat at the table to call for qualified women and diverse people to join them at the table, and to spend time grooming them for that opportunity.

**What attracted you to pursue a career in medicine and what has made the work so special for you?**

My desire to pursue a career as a physician began at the age of six after seeing my grandfather suffering with shingles. The strongest man I knew was reduced to tears and moaning from the intense pain. My role model at the time was Marcus Welby, MD. My favorite television shows were Marcus Welby, MD, Quincy, ME and Rescue 911. I grew up in a two-family household with resourceful and supportive parents. At a young age, it was my personal desire to help alleviate pain so I would not have to see another person suffer like my grandfather.

I met my “future professional self” in 6th grade during a spring break shadowing experience. The well-known and beloved Dr. Muriel Petioni, known as the Mother of Medicine in Harlem, became my role model, mentor and, eventually, sponsor. I was her companion at local school speeches and high-powered events with elite power brokers. For nearly 40 years, I was immersed in the world of being a physician advocate dedicated to building a healthier community. It naturally follows that I would also aim to cultivate future physicians who can also build healthier communities. ●