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## Editorial

## Diversity and equity: a radiology society's effort

The Equality Act came into force in the UK in 2010 to consolidate and strengthen anti-discrimination law relating to areas such as ethnicity, gender, disability, religious belief, sexual orientation, and equal pay. The aims were to advance equality of opportunity for all and promote a fair and more equal society. Ten years on, inequalities remain. This was highlighted by the resurgence of the Black Lives Matter movement with UK and worldwide mass protests, which along with the COVID-19 pandemic, marked 2020. The gender gap also persists with The World Economic Forum's Global Gender Gap Report 2020 projecting that, on current trends, the gap will take 99.5 years to close.<sup>1</sup>

Healthcare professionals can help reduce inequalities through positive action. The NHS has Councils and Taskforces to address the strategic and operational barriers to delivering greater diversity.<sup>2,3</sup> The Lancet, amongst other medical/scientific organisations, has pledged its support and is a strong advocate for equity, passionately campaigning for change in institutions and society for equity, diversity, and inclusion.<sup>4–6</sup> Greater awareness of implicit or unconscious bias, which occurs automatically and unintentionally, but nevertheless affects judgments, decisions, and behaviours is also key to a fairer society.<sup>7</sup>

The British Society of Gastrointestinal and Abdominal Radiology (BSGAR) is a special interest group of the Royal College of Radiologists. Since its formation in 1998, the Society has believed and welcomed the inclusion of people across gender, ethnicity, abilities, geography and other social categories. So, what positive action can BSGAR and other specialist radiology societies take to address diversity, equity and inclusion?

### Diversity in the UK

Women comprise 51% of the UK population, 37% of senior and 53% of junior NHS doctors as well as 38% of Royal College of Radiologists' membership. People from under-represented groups (URG, including from black, Asian, and minority ethnic backgrounds) contribute 13%, 46% and 33% respectively. People from URG make up 10% of university professors and 7% of university senior academics.<sup>8–12</sup>

The BSGAR executive committee has drawn up a manifesto on diversity, equity and inclusion. This is prominently visible on BSGAR's website, stating our ethos and action plan to deliver on this pledge.

### Know your people

Between November 2020 and January 2021, BSGAR carried out an anonymous online survey to better understand the composition of its membership. Eighty-seven members (31% of total) participated in the survey. Women contributed 46% and people from URG 34.5% of the respondents. Respondents' age range was evenly spread between 30–60 years, with 12.7% of respondents aged >60 years. A free-text section allowed members to feedback comments on their perception of diversity and equality within BSGAR.

### Know your history (1999–2020)

Executive committee posts are filled following a competitive, open voting process. An audit was conducted into the historic composition of BSGAR's executive committee, as well as the characteristics of speakers and chairs invited to annual education conferences. Overall, 20% of executive committee roles were held by women. People from URG held 16% of these posts. Women chaired 20% of the sessions and gave 17% of talks. People from URG contributed 11% to both at the annual conferences.

### BSGAR today

Women comprise 40% of the current executive committee while people from URG contribute 30%. Fifty percent of chairs and 24% of speakers at the Virtual BSGAR Conference 2021 were women, whilst URG contributed 24% and 18% to these roles.

### Set your standards

Regarding the executive committee, BSGAR will work to ensure at least one of its three key executive roles of president, secretary and treasurer is a woman. Women and people from URG should contribute one third of the

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remainder of the committee roles. Women and people from URG will be strongly encouraged to apply to these roles. The role of president, selected from ex-officio, is another mechanism to meet this aim. BSGAR will continue to ensure gender parity and work towards inviting people from URG to chair at least one third of sessions at its annual conference. We will aim to achieve one third of speakers to be women or people from URG. Decisions on location and format of our annual conference will be on the planning agenda to ensure maximum accessibility for people with disabilities.

## Diversity champion

As the officer responsible for development and promotion of the standards of the Society, the Standards Officer was charged in 2020 to be BSGAR's Diversity Champion. Their responsibility, with support from the other committee members, is to promote, ensure, and report on BSGAR's diversity performance annually at the Annual General Meeting. They will also be responsible for running and reporting on regular membership diversity surveys (every 4 years), while working towards routine collection of membership characteristics data in compliance with GDPR.

## Promote, sponsor and mentor

BSGAR aims to stimulate engagement and increase contact among different groups. Since February 2021 and working with the Academy of Medical Sciences' Mentor Catalyst Programme, BSGAR has been in the process of setting up a mentoring scheme for its junior members to help promote, guide, sponsor, and help with career progression. Although this programme is open to all young BSGAR members, women and people from URG will be strongly encouraged to apply and given preference. BSGAR will also actively seek diversity in its mentors.

As Mary Beard wrote in *Women & Power: A Manifesto*, "You cannot easily fit women into a structure that is already coded male; you have to change the structure." The same could be said for people from URG. By adopting this structural approach, BSGAR seeks to create meaningful and permanent change to how the society is run to improve diversity and equity for all our members.<sup>13,14</sup> We commend other radiological societies to join us, as we strive to effect true diversity, equity and inclusion in our society, in our mission to improve the health and wellbeing of our members, the public and our patients.

## Conflict of interest

The authors declare no conflict of interest.

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BSGAR Committee Members (alphabetical): R. Albazaz, R. Balasubramaniam, C. Chew, C. Clarke, K. Devlin, K. Foley, J. Franklin, E. Helbren, S. A. Taylor, D. Tolan.

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