Project Title: Inclusive Mentorship: Training Mentors to Enhance Research Diversity in Clinical

Cardiovascular Research

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Topic Category: Research Development

Background: Mentorship is essential for the successful development of clinician investigators. Effective mentors can enhance a mentee's research, assist in developing a mentee's network of collaborators and sponsor the mentee for key leadership roles. Yet, finding mentors is particularly challenging for cardiovascular investigators from underrepresented groups. First, the rates of investigators of similar gender, race/ethnicity, or sexual orientation are scarce. An estimated 20% of cardiologists are female, $\leq 15\%$ are LGBTQ⁺, $\leq 10\%$ are Hispanic/Latino, and $\leq 5\%$ are African American. Within cardiovascular specialties, rates of diversity in clinical research are even lower. Second, many investigators from these underrepresented groups have research focused on health service research, population health, or clinical trials, which traditionally has not been valued to the same degree as other areas considered T0 or T1 research.

Purpose/Objective: Effective mentorship is foundational to improving diversity in cardiovascular research. Therefore, it is essential to train mentors to be effective mentors for a diverse group of mentees. An important component of mentorship training includes addressing challenges that mentors from these underrepresented groups often face. The primary goal of this program is to provide mentorship training for clinical cardiovascular investigators with additional support for mentors from underrepresented groups.

Methods: A multipronged approach was used. This includes a literature review of mentorship training, interviews of cardiovascular investigators in health service research, population health, or clinical trials, and interviews with stakeholders within UAB and national medical societies (the American Heart Association and the American College of Cardiology. The initial product will be the publication of our scoping review on mentorship training programs. A mixed methods study will include semi-structured interviews with mentees and mentors. The sampling framework will intentionally sample from underrepresented groups for the mentee and mentorship samples. A survey on mentorship will be sent to clinical cardiovascular investigators nationally. The mentorship training workshop will be finalized based on the review and mixed-methods study.

Results: A literature review identified no specific studies on mentorship in cardiovascular clinical research (i.e., T2-T4). The majority of cardiovascular references focus on mentoring related to clinical activities. Interviews with stakeholders suggest a need for mentorship training. Over the next year, we expect our review to be completed and published and our mixed-method study to be completed. The mentorship training workshop will be finalized based on these two products (the thinking and mixed-methods analysis). Evaluation metrics for the seminar will include participant satisfaction and perceived self-efficacy for mentoring. Finally, a *Mentor-2-Mentor* program will be developed to support mentors from underrepresented groups within clinical

cardiovascular research. Long-term outcomes will include increasing mentors from underrepresented groups, mentors' satisfaction with mentoring, mentee satisfaction with mentoring, academic metrics of success (e.g., publications, funding), and program sustainability.

Conclusions: To increase diversity among T2-T4 investigators within cardiovascular specialties developing a diverse and effective cohort of mentors is warranted. We expect the products from this IAP will allow for enhanced, effective mentoring in HSR, population health, and clinical trials. Lastly, we hypothesize that these programs can be adapted to other specialties and additional academic mentors such as clinician educators.