

Chris Tucker:

Welcome to the Arthroscopy Journal podcast. I'm Dr. Chris Tucker from the Walter Reed National Military Medical Center and founding editor of the podcast. Today, we are celebrating a notable milestone as this is our 150th episode. We started this project in 2018 and released our first weekly episode in January 2019. I'm proud of our progress and I hope you've enjoyed joining us for our show as much as we've enjoyed bringing the best of orthopedic sports medicine and arthroscopic surgery to you each week.

In honor of this milestone, I wanted to use our platform to highlight an extremely important and contemporary issue in sport medicine and society, and in particular, our specialty of orthopedic surgery. Today, we'll be discussing diversity, equity, and inclusion. I'm honored and excited to be joined for this by Dr. Rick [Ryu 00:00:54]. I can't think of anyone better suited to share his thoughts and commentary as Dr. Ryu is not only a well-respected clinician, educator, mentor and leader, but also as a past president of AANA has the perspective and experience of leading this field from the most strategic of levels, and as a first generation Korean American brings his own personal experience to the table.

As those of us who are fortunate enough to know Dr. Ryu personally can attest, he carries himself with such humility and respect for others that he inspires confidence and commands the respect of everybody in our community. Dr. Ryu recently delivered the inaugural diversity and inclusion lecture at the 2021 combined AOSSM-AANA annual meeting entitled The Handshake or the Fist. The transcript of this lecture was published in the October 2021 issue of the Arthroscopy Journal. Dr. Ryu, as always, it's a pleasure to speak with you. Welcome to the podcast.

Rick Ryu:

Chris, thank you so much for inviting me and I wanted to congratulate you on number 150. The hard work and the quality and support of the organization is really special. And so thank you for having me and thank you for all of your hard work.

Chris Tucker:

Well, thanks, Rick. I'd like to open our discussion first with a bit of a disclaimer on my part. As you said in your lecture, this topic is potentially incendiary and can be challenging to discuss. I have put some considerable thought and time in preparing for our interview. But that being said, I do not claim to be an expert on this topic nor as a middle-aged white male do I represent perhaps the best candidate to lead this discussion. But I do wholeheartedly agree with you that we all have our part to play, and I humbly hope to simply use the resource I have at my disposal, this podcast, to call attention, serve as an ally, and continue the conversation, as imperfectly as I may do so over the course of the next 30 minutes or so.

That being said, let's dive right in. In your opening remarks. You referred to the fact that while you're a veteran on the podium at international conferences, there was a unique challenge of preparing a lecture such as this as opposed to a scientific talk. When you were first approached and asked to give this inaugural

lecture on diversity and inclusion, can you just share with us what your thoughts were, what went through your head, and how you went about preparing for this responsibility?

Rick Ryu:

Well, Chris, to be honest with you, I was simultaneously honored, and I think I also wet my pants because I understood really the enormity of the topic and also my utter lack of expertise other than maybe my own narrative. And so I think for that reason, I chose to use my narrative as the vehicle to explore some of the different topics, especially the difficult ones. I'll be honest with you. I've edited textbooks and written papers and chapters and given talks. And that I'll confess to you that this was really the most challenging. I think I rewrote the text at least 10 or 15 times, and I really tried to find a voice, I think, that would maybe resonate with all of the parties involved. I think it's safe to say we're all in this together and anyone who thinks they're absolved or above the fray is really grossly under-informed.

As far as content goes, I approached this much like I would a new concept or a surgical technique just like we would do with any scientific endeavor. And so this involved education in the form of editorials. I went through some education modules and I read papers and books and lectures. And I tried to find things I could actually read and understand. And there were some that were out there. Some were beyond me and I'm not sure I fully understood, but I at least gained some insight. And I think my mantra from life has always been the value of education. And I think it's really the cure for almost every ailment, whether it's societal or scientific. And I think you just have to want to seek it out. And so from that standpoint, I'm very grateful that I think I became a little more educated on this topic.

Chris Tucker:

I have to say that certainly came through in your remarks. I enjoyed listening to them and then rereading them. And also, I have to say you definitely rose to the occasion, and I think delivered what was needed when they approached you and asked you to deliver the address. So I think we can all certainly say it was well done.

I appreciate that you openly acknowledged our specialty is made up of imperfect people, you and me included. We do have implicit biases. We do fail to be inclusive. We've historically failed to capitalize on the power of diversity, as you stated. Yet, you brought up the interesting concept of professional success contributing to your own color and gender insensitivity. You actually stated, "Success can erode one's humanity." Can you just expand on that concept for us and explain what you meant by that?

Rick Ryu:

Well, what I think is that all of us in orthopedic surgery are industrious. We're goal-oriented, we're stubborn and determined, and we really want to do the right thing and do it well. And so when we work hard and it pays off... no pun intended... I think we start to believe that these sorts of efforts are well worth it, and they're gratifying and ego satisfying. And we begin to essentially

anticipate that as long as you work hard and you put in the time and effort that good things follow.

Well, conversely, I think from the same mindset, if you see someone who's struggling professionally, either maybe in the clinic or the operating room, it becomes easy to assume that there may be, let's say, a lack of talent or grit, or maybe, what, determination, and they in capital letters just need to work harder and good things would happen as well, just like they happened for me. And so I'm spoiled by some success. And I start to think that everybody, if they work hard, should enjoy the same. And if not, it's their fault.

Well, I think what I've come to understand is that many, certainly female surgeons and surgeons of color or different orientation, may have worked as hard or more likely harder than me, and they may have very little to show for it. And I think it's because we realized with the implicit bias and we consider it what we call the playing field, was probably never really level for them, and they may have missed a lot of opportunities because of it.

If you think of academic appointments or joining, let's say, a leading clinic or even industry choosing a product champion, I think everybody is complicit in these biases that we will talk about, and they infiltrate our unconsciousness, and this is the implicit bias that we are going to discuss. And I think only by being, in a sense, hyperaware and we make it an equal experience for everybody. And I will tell you this, and Chris, I'm sure you're aware of this, being hyperaware is very tiresome. It's fatiguing, and you're hedging on words and comments and what you say and who you say it to. But I think it's the necessary process that we all have to go through, as tiresome as it may be.

Chris Tucker:

I think that segues nicely into my next question. You commented that what can ultimately doom us is an unwillingness to open our hearts to a different narrative. And I think that we can all agree with the principle of empathy and in trying to walk in somebody else's shoes. But I mean, I have to say that's much more challenging in practice than it is in principle. I was hoping that you, as a leader and educator, could share with us maybe how you've accomplished that when you've been faced with a mentee or a colleague with whom you have a drastically different background, or if you have any tips for those of us who are still trying to learn that skill.

Rick Ryu:

Well, of course, I've certainly seen you in action. And I know that you are really, I think, outstanding with your empathy and trying to understand someone else's point of view or life experience. I think that... And I'm going to refer to my experience, let's say, at the learning center or teaching courses, and both domestically as well, so even internationally. The example I'll give, an orthopedic learning center course, let's say, that AANA would put on. And I think that what you have to do is you would... Let's say your student is at the station. It might be someone early in their career, or maybe someone who's been around for a while. I think what you have to do is put yourself in their

shoes and understand what do they want out of this course? What do they want from this experience?

And I think if you can, brick by brick, build a shared experience, it becomes very meaningful and powerful certainly for me and certainly, I hope, for the student. And the real basis for that working is that you have to erase the power differential. You cannot come at that as the teacher and they're the student. It has to be that you're coming at it as a team, that is, a team approach, and that you both want the same thing. And I think that that's really a challenge because we're not used to that. And the power differential in our lives, whether it's with the OR staff, with the people in your office, or you're in the military, and so it's even more pronounced, the ability to strip away the power differential, get side by side, become a team member, is I think a critical skill that all of us need to learn. And I'm certainly still learning that one.

The other that I find that I'm not very good at, but I think I'm getting a little better at, that has been eyeopening for me, is being an active listener. So that for the longest time, I think that when people were speaking and it was my turn and I spoke and they were going to speak again, I found myself spending time preparing for what I was going to say next as opposed to listening what they were trying to tell me. And being an active listener is a big deal. And you certainly not only learn a lot, but it's really a sign of respect to the person who you're with when you are trying to put everything else aside and focus on them.

And I think you and I know that some of the most profound experiences for me have been with the servant leader orthopedic surgeons, who when you, after the podium, you go up and you say, "Hey, listen, can you share this with me?" And they listen. I think of Jeff Abrams, I think of John [Tokish 00:12:16], these people who are legendary for their ability to connect with people. And it's because they're active listeners. They actually listen to what you're saying as opposed to formulating what they're going to say next while you're talking. And I think those are two things that I think have helped me. And I'm not as good as I need to be, and I'm learning, but they have really been, I think, positive experiences for me.

Chris Tucker:

I think those are invaluable tips. I think a sign of a master educator, and as you said, a servant leader, is mastering those concepts, which I agree I am far from being at that level. But like you said, at having mentors like the Abrams and the Tokish and yourself, and so many others on the podium who are part of AANA, work at the learning center. If you say people's names like John Kelly, it elicits a visceral emotional response that you just know that your walking side by side with somebody who's got your best interest at heart. So certainly being an active listener is invaluable.

Rick Ryu:

I couldn't agree with you more. Our association has so many talented and generous people and almost too numerous to count. And I'm just proud to be part of the organization, but the people you've mentioned are just outstanding and their contributions and ability to, I think, help others is just so special. And

again, we're just so lucky to have so many people in our organization able to do that.

Chris Tucker:

Yeah. I couldn't agree more. As we move towards a more inclusive and diverse community, you highlighted the fact that it's simply not enough for each of us to just not oppose that progress or to tolerate it, but rather, we need to embrace it. Basically, benign neglect isn't really being an ally. We need to show a collective effort to support progress. Do you have any specific anecdotes or experiences that could perhaps illustrate this for us a little more concretely, maybe a situation you either personally encountered or something you heard about that could serve as a learning opportunity for maybe how something was handled and how it may have been handled a little bit differently or better?

Rick Ryu:

Well, Chris, what I would tell you is that I'm going to go to the 30,000-foot view and I'm going to talk about AANA because I think it's pertinent to the organization and to where we are. And I believe in my heart of hearts that AANA and the other forward-thinking organizations have been a little late in recognizing the virtues and even the power of the DEI concept.

AANA's leadership... and we've had some upstanding leadership... has been actively seeking better representation. But I have to tell you, we've not been very successful compared to where I think we need to be. And what I would tell you is there are no excuses. And I think for us to move forward, we have to prioritize and we have to make it an essential task, a critical first step, and we haven't done that yet. So it's like losing the roof on your building or your CFO retires suddenly. These are things that need to be solved right away. And I think the DEI concept needs to be treated a little more urgently by AANA. And I think we have good first steps. We have great intentions, but I think we need to be a little more urgent.

And then if we prioritize it, then we have to build around it, best practices, help and resources. If you want more women or underrepresented minorities or those of a different orientation in leadership positions, you can't just pluck somebody out and say, "Oh, we've chosen you to be that token person." It just doesn't work that way. We have to develop infrastructure. We need mentoring. We need all those things in place for that individual or those individuals to succeed.

The Academy's been very aggressive in this regard. I have to tell you, I applaud them because they've been very, I think, meticulous and thoughtful in their efforts. And I think we need to fast track the goal of diversifying our membership and our leadership, and it has to be structured. I think it has to be formalized and has to be transparent, which I think is critical in this particular situation, and has to be measurable. And whether that's percentages in terms of know how many women were in [inaudible 00:16:54] five years ago compared to now, or African American or Latino surgeons, it is measurable. And you hate to turn to percentages, but it is a way to measure. And I think we should start with something basic like that to know that we're moving in the right direction.

And then if we create the environment for people to succeed, I think it's inevitable that they end up in the leadership. And I think it's an area that we've fallen down a little bit, and I think an area that I know that we can remedy, and I know that we're working on.

Chris Tucker:

You referred to the handshake portion of your lecture and introduced a potentially controversial idea of victimization and for those oppressed by the unfair system to not let this define them, nor use it as a way forward. You called for underrepresented minorities and those to whom discrimination's been directed for so long to use a dispassionate assessment of their own situation before responding. What did you mean by that and how do you balance that idea with the call for action against inherent bias?

Rick Ryu:

Well, first of all, I say that they're not mutually exclusive, that inherent bias needs to be called out, but at the same time, I think that you can't identify inherent bias simply because someone calls you out. It's not always inherent bias. Sometimes you get called out because you need to be called out. So I called it The Handshake or the Fist because when the hand is coming at you, you can interpret it as a beginning of a handshake, or you can see it as the threat of a fist. And I think I'm asking those who've been aggrieved not to forget, or even necessarily to forgive the microaggressions or the barriers, but I want them to avoid using race, homophobia, or sexism as a convenient excuse when they may be culpable. So individual accountability to me is just as important as institutional accountability or those who are in power.

Not everyone is your nemesis. And again, not everyone is trying to subvert your career. If you're part of the group that has been ignored or discriminated against, it's important that you learn to distinguish those who want the help even if they're clumsy in their approach from those that really don't care. And I think most people are in the former group.

Let me give you an example, Chris. I have a colleague, a good friend who's a professor and is at an institution. And there happens to be a resident of color who has reported several faculty members for what he believes to be racist behavior, for being criticized in the operating room. And it's led to work ports being filed and meetings and what have you, and this [inaudible 00:19:56] faculty member has decided to pull back a little bit when he's working with this particular resident.

And you can understand why that criticism or something can be misinterpreted, and the next thing you know, more paperwork files and complaints. And I think to myself, this is an excruciating example of a losing proposition for everybody, that that young resident isn't going to get the information or the training or the teaching that he or she deserves and needs. And the professor pulling back is the worst thing you can do as an educator.

So I think we just can't allow this to take place. And much of this is going to be on, at least at this time, for those who feel they're being discriminated against,

if it's real, as I said, you have to call it out. But if it's not, and you're using it as an excuse because you weren't prepared, or you made a mistake or you don't want to be accountable for your actions, that is the most self-defeating philosophy, and you certainly aren't going to be the surgeon that you need to be if you're going to lead and if we're going to follow you and use you as a role model for future generations. And so this is what worries me the most that we're seeing it now. And we just can't leave anybody behind.

Chris Tucker:

You brought up the concept of the value of diversity as it relates to the value of merit. As you say, in a perfect world where the playing field's level and diversity is widely expansive, those two would be synonymous. However, you stated that as we work to get to that point as a society and as an organization, there may be some truth to the idea that in the short term, there might be a collision between the two, implying that efforts to promote diversity may not always perfectly align with promotion by merit alone. Can you just expand on that? Give us your thoughts on how to resolve that for us.

Rick Ryu:

Chris, this is one of the tougher issues that I certainly struggle with and others as well because when we think about the value of diversity and merit, the first thing that comes to mind is that someone who's undeserving is on the podium giving me a lecture and they've been selected because of their gender, the color of skin, or maybe say their orientation. That's the most primitive way to look at merit and diversity and how they might collide. But I think that that's the most rudimentary level. I think the value of diversity and merit are oftentimes interrelated, but sometimes independent.

So in a scientific field like orthopedic surgery, you could have an h-index for the faculty and it's a metric for advancements and scholarly efforts. It's a way to measure that. And then the value of merit in that situation takes on really an independent role. However, when you add diversity in the equation and you also have these metrics for merit and they don't change, you have to ask yourself, "Should the metrics for merit change as well?"

Let me give you an example. So let's say you're a female faculty member and you'd like to advance and maybe even advance to, let's say a chair position. But you know there are historic barriers to that advancement. Let's say your competition within the department, which would be primarily male-dominated faculty, may have had more preferentially... I'd say preferential opportunities to give more talks, write more papers, perhaps combine with others in multi-center studies, et cetera, because it's been a good old boys group. And that makes a side-by-side comparison with this female faculty member maybe a little more challenging in terms of advancing.

But what if we looked at other metrics in terms of measuring what someone brings to the table? And let's say... And again, these are generalizations, but I think we can agree that there are some female characteristics such as collegiality, sense of collaboration, maybe kindness and consensus-building that are really, I think, desirable. And if we said with that, did this female faculty

member perhaps bring on more satisfaction within the faculty because they feel like they're listened to and they may stay longer versus jumping around, there's not faculty turnover and they're more productive? Maybe the resident teaching is better. And for that reason, patient satisfaction goes up. And for that reason, hospital income goes up because more patients like the hospital because of the environment.

So if you start looking at other ways to measure someone's value or someone's merit, I think that you start to realize that when you talk about diversity and merit, they can intersect if you, and in a way collide, but in other ways, if you want to measure differently, they really go side by side and there is no collision. And so I think we need to be a little more sophisticated. I think we need to define merit in maybe a broader way so that we're looking at not just how many papers, how many presentations that have occurred and have occurred in an asymmetrical fashion, and maybe consider other factors that when we consider, make that whole question of diversity and merit and the collision much less of an issue. But I think it's important to know that some of these things are contrived and we have to be careful.

Chris Tucker:

Yeah. I think that answer is exactly why I enjoy these kinds of interviews because that's the insight that I didn't get from reading or listening to your lecture. Just the idea of actually investigating the quantifiable metrics themselves and how we measure merit, not just saying, "Okay, let's try and rectify our existing system with new concept of diversity." So I appreciate that insight. I think that adds a lot to this discussion.

I think it's also a nice unplanned segue into my next question for you, which relates to how we measure progress and improvement in this field, specifically in orthopedics. I think we can all agree there's work to be done. I think we've all seen some positive energy and some small victories in this area over the course of the last year or two as well. However, I think success is really only fully attainable when we have a clear and well-defined goal. So to that end, referring back to our previous commentary about AANA as an organization as a vehicle to discuss this, what do you think are maybe some reasonable, intangible goals for the field of orthopedics with respect to DEI over the course of say the next five years?

Rick Ryu:

Well Chris, I got to tell you, I got some of the talking points last night and was reading through this. And this is one that I think I have the hardest time coming up with a cogent answer for, because this is a real challenge. And I would just tell you that from my standpoint, every organization, including AANA, needs to perform a top to bottom analysis of why women and underrepresented minorities feel unwelcome or disregarded. And that group that delves into this needs to be an inclusive group. I think that's critical. You have to clearly delineate the weaknesses and the structural issues that prevent us from having people want to be part of our organization. And that's not easy. And stripping away the varnish is sometimes painful, but I think that has to be done first. And

once you do some, I think, real soul-searching, I think action items then come up to help us solve these problems.

And it may turn out that that's either committee structure, its leadership style, its leadership in general. It could be any number of things that are identified as real weak links that prevent us from being a better or diversified organization. Then I would say that once those are identified and then you say, "Okay, we're building from the ground up," I would collaborate.

I think it's problematic when different organizations have different definitions of what they think DEI means to them. And I think it's disheartening, I believe, for people of color or women or whatever orientation if it changes from group to group, organization, society to society. It ought to be really pretty universal. And I think the academy has a good head start in this. And so I would say AANA or any other group that's deciding they want to have real, I think, measurable and tangible progress, I think we all need to be on the exact same page. We need to be speaking the exact same language. And I think that's where our results will, I think, show up.

And so again, pretty basic stuff, but I think percentages become very important. And no one likes to talk about quotas, but I think in this situation, it's a way to know that we're making a step forward. So I know AANA now is trying to determine surveys, et cetera, whether it's nationality, race, gender, what have you, orientation, ways to measure now so we can measure against it down the road. And again, it sounds pretty superficial when it comes to quotas, but you got to get started somewhere. So I think in the next four or five years, this has to be a target and we need to see improvement year over year. I think that's absolutely critical.

And then the other is I think leadership. We need to have essentially a very close look at our leadership and why it's not as diverse as it needs to be. And the same thing, we need to look at percentages, quotas, to get an idea of where we need to be and how do we get there.

And then lastly, I would ask the academy or AANA or anybody to have somebody develop metrics that measure the benefits of an inclusive and diverse community. You look at the business world and there are a number of studies out there showing that in the boardroom and the C-suite, when it is diversified and inclusive, the productivity and the bottom line shoot sky high. And I think the exact same thing happens for something like a group like AANA or sports or the academy. And if we can measure this and show this, whether that's people more satisfied, maybe burn out less often, maybe people want to come to face-to-face annual meetings, I don't know how you measure that, but I think it can be measured. And I think at the end of the day, what you see is that diversity really has some tremendous benefits for all of us.

Chris Tucker:

I think that's a fantastic call to action. I think you highlighted some excellent targets for us to focus on as a society as a whole. I hope that wasn't a somewhat

of a setup with respect to the question. I know I asked you about a short-term five-year benchmark, but our leadership, including Dr. Jim Lu, who is the editor-in-chief of the Arthroscopy Journal, I think does a fantastic job of outlining in one of his editorials from 2020 on this topic of diversity, equity, and inclusion, where this is really a generational challenge, not a year-by-year challenge.

If you just think back on the length of the pipeline for education to get folks interested in medicine, whether it be orthopedic surgery or any other specialty, that selection process starts so early in education, even in the middle school level, to get folks set up for success in high school to get into the college that gets them on a springboard to med school and so forth. I think that pipeline and reaching down to the grassroots level of the earliest, youngest minds and just inspiring folks by showing them what's possible with these outreach programs, I think this is going to be a generational problem that will take a while to solve, but like you outlined so eloquently, we need to make changes now to get that ball rolling.

Rick Ryu: Well, Chris, you're absolutely right. And I think you're certainly stating it maybe better than I did, that there's no short-term solution that's going to fix this. Like you say, Jim Lu is such a talented and thoughtful guy. And like you say, this is a long-term project. And I think we all have to, I think, be prepared for that, but we have to get started. And then we have to be willing to grind it out and make sure we're measuring it, make sure we're making progress. But maybe 10 or 15 or 20 years from now before we're really satisfied that we've come to a point where people feel comfortable and included. And I think that'll be a monumental moment for us all, but it's hard work. It's a long timeline. Let's get started, but I'm optimistic.

Chris Tucker: Absolutely. I share that with you. They say the longest journey starts with the first step. We certainly don't achieve anything with procrastination. So like you said, we've got to get started now. It's not time for tolerance. It's time for action. To that end, before we wrap this up, I wanted to ask you one additional question. What's your most important lesson you'd like listeners to take away from your inaugural diversity and inclusion lecture?

Rick Ryu: Chris, great question. What I would tell you is that we all make mistakes, all of us, whether that's the wrong pronoun or whether it has to do with someone's race or orientation. I got to tell you, it happens, and it can be embarrassing on occasion. But I will tell you, in my experience, those people who've been discriminated against who want change are really the most forgiving. And they see the most clearly. If they see that you really want to learn, they're willing to teach and they're willing to forgive. And I would tell you, please don't hold back for fear of making a mistake because the people that make decisions, they're going to make us move forward, are more than willing to accept your mistakes, correct you, teach you, forgive you, and we all move on.

Chris Tucker: Fantastic. Dr. Ryu, this is really been an incredibly insightful discussion. I really do appreciate your thoughts and efforts. I wanted to congratulate you formally

on your delivery of the inaugural diversity and inclusion lecture at the 2021 combined AOSSM AANA annual meeting. And I wanted to personally thank you for sharing your time and your thoughts with us today.

Rick Ryu: Chris, can't think of a better moderator, a more honorable and thoughtful guy than you. And I can't tell you how much I appreciate the opportunity to spend a little time with you. And again, to thank you for all of your hard work on the Journal podcast.

Chris Tucker: Dr. Ryu's address, titled The Handshake or the Fist, can be found in the October 2021 issue of the Arthroscopy Journal, which is available online at www.arthroscopyjournal.org. This concludes this edition of the Arthroscopy Journal podcast. The views expressed in this podcast do not necessarily represent the views of the Arthroscopy Association or the Arthroscopy Journal. Thank you for listening. Please join us again next time.

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