



Success Abounds for Native Americans at Harvard

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How to define one's success is an age-old question that every individual encounters. Out of all the answers to this question, this definition from motivational speaker Brian Tracy is specific but generalizable: "Success is the ability to live your life, the way you want to live it, doing what you enjoy most, surrounded by people you admire and respect." To be successful, we must overcome obstacles that prevent us from achieving our full potential, including societal, economic, political, personal, emotional, and historical challenges. Native Americans experience these challenges continuously, although we are not indelibly bound to them. We, as three Brigham and Women's Hospital residents, are testaments to this statement's veracity.

The 2018 American Association of Medical Colleges report "Reshaping the Journey: American Indians and Alaska Natives in Medicine" showed that 19% of American Indian-Alaskan Natives (AI/ANs) were uninsured compared to 9% of the U.S. population. It also showed that 25% of AI/ANs die before the age of 45 compared to 15% of African Americans and 7% of White Americans ([asamonitor.pub/3RsF0D5](#)). It is widely accepted that health outcomes for medically underrepresented minorities improve as their representation increases in allied health professions. Given the current health status of the AI/AN population, greater representation in the medical profession is crucial. A recent article in *The Lancet Regional Health – Americas* showed a stark analysis indicating that at current medical school matriculation rates, it will take 102 years for AI/AN representation in medicine to reach parity with the broader American population demography (*Lancet Reg Health Am* 2023;26:100588). In the 2022-2023 academic year, out of 5,564 U.S. anesthesiology residents, only 44 (0.8%) were AI/AN ([asamonitor.pub/4a1NE2J](#)). National and regional initiatives to address the lack of equitable representation of AI/AN among practicing physicians have been a subject of study in recent years, focusing on the recruitment and retention of AI/AN students to medical schools. However, in the context of the recent Supreme Court ruling against affirmative action via *Students for Fair Admissions v. Harvard College*, the continued path forward for an equitable



Left to right: Drs. Thaius Boyd, Cameron Bosinski, and Bradley Due. Photo courtesy of James Rathmell, MD, MBA.

AI/AN physician workforce will not be without challenges.

Despite these obstacles, our positive impact is clear on the success of future generations of Native Americans. Our coauthor Bradley Due, MD (Cherokee Nation) was fortunate to grow up being affiliated with a tribe sufficiently resourced to provide free health services to its members. Given his early exposure to tribal health services, he gained firsthand experience with the health disparities between Native Americans and the broader U.S. population. Dr. Due was inspired to pursue medicine by his older brother, an Oklahoma-based physician who provides services to tribal hospitals. As first-generation physicians, the path to medicine was more complex for Dr. Due and his brother. However, Dr. Due received financial support from the Cherokee Nation throughout his academic career, which helped him achieve his dream of becoming a physician. As a new anesthesiology resident at Brigham and Women's Hospital, Dr. Due looks forward to giving back to the Native American community and mentoring aspiring native physicians.

Our coauthor Thaius Boyd, MD, MS (Ohkay Owingeh) graduated from Haskell Indian Nations University. There, he found his interest in medicine and his passion for providing needed care for his tribe and native communities. Early into his studies, Dr. Boyd also took part in the Four Directions Summer Research Program, an eight-week program that brings native students to Boston, specifically Brigham and Women's Hospital, to further explore their interest in medicine and science ([asamonitor.pub/3t2I5jS](#)). Participating in

the Four Directions program further confirmed Dr. Boyd's medical pursuits, and he has since made it a priority to further immerse native people in medicine, as seen by creating and assuming the role of Tribal College and Tribal University Mentorship Director for the Association of Native American Medical Students while attending the University of Minnesota Medical School.

Dr. Boyd played an active role in tribal outreach programs and mentorship opportunities during his anesthesiology residency at Brigham and Women's Hospital.

Finally, coauthor Cameron Bosinski, MD, MS (Mohawks of the Bay of Quinte) established an annual preadmission workshop for native students applying to medical school ([asamonitor.pub/41aPCTw](#)). In addition, he held a two-day workshop called Health Equity in Native America that highlighted pathway programs specifically for AI/AN students interested in health care ([asamonitor.pub/3NcZHjZ](#)). He serves as a mentor for the Four Directions Summer Research Program and as cochair of the Native American Affinity Group in the Diversity, Equity, Inclusion & Belonging House Staff Council at Brigham and Women's Hospital ([asamonitor.pub/3t2I5jS](#); [asamonitor.pub/3R7gia4](#)).

When applying to residency, all three of us sought an institution that would foster the personal and professional growth required for each of us to succeed. Brigham and Women's Hospital is a leader in health equity for Native Americans. The Four Directions Summer Research Program and the Mass General Brigham Outreach Program with Native American Communities are led by Thomas Sequist, MD, MPH (Taos Pueblo), and The Front Line Indigenous Partnership by Valerie Dobiesz, MD, MPH. In addition, the Harvard University Native American Program is led by Joseph Gone, PhD (*Aaniiih-Gros Ventre*) ([asamonitor.pub/3t2I5jS](#); [asamonitor.pub/3Gwn83W](#); [asamonitor.pub/3uMKaRp](#); [asamonitor.pub/4a7LeiX](#)).



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Specifically, in the Department of Anesthesiology, Vice Chair of DEIB and Associate Program Director Morana Lasic, MD, also serves as an Associate Chief Diversity & Inclusion Officer for Brigham and Women's Hospital and was critical for recruiting native representation to leadership positions in the Center for Diversity and Inclusion ([asamonitor.pub/3uUtBTx](#)).

Despite the challenging landscape for AI/AN representation in medicine, we do not feel despair for the future of native health care. On the contrary, we feel inspired to train among such brilliant and accomplished native physicians. Despite the distinct challenges and obstacles we faced along our journey to medicine, we share a common ancestry that played pivotal roles in leading us to one of the premier residency programs in our specialty. We share a mutual goal to foster a growing community of AI/AN physicians. The path to health equity will have challenges, but the triumphs and hard work of my fellow native physicians give me hope that with perseverance and determination, our shared success is inevitable. ■

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