ADDRESSING OUR BLIND SPOTS

In August, I attended the 2019 Women in Ophthalmology (WIO) meeting in Coeur d'Alene, Idaho. Designed to represent and empower the field's female members, this event, above all, issued a strong call for increased diversity in ophthalmology and medicine in general. From the WIO podium, speaker Patrice Harris, MD, the 174th President of the American Medical Association, noted that she is the first black woman to hold the office. Despite the advances that have been made, there is undoubtedly still room to grow until such a placement is not notable but normal.

The need for increased diversity applies not only to practitioners and physician leaders but also to clinical trials, peer-reviewed literature, training programs, practice institutions, advisory boards, and beyond. Individuals differ, experiences differ, and perspectives differ. A lack of diverse representation creates blind spots in our circles and in our society at large. Inclusivity enables diversity, which, in turn, enables a breadth of information and insights. Citing a recent diversity pledge from *The Lancet*, WIO speaker Lynn Gordon, MD, noted, "Diversity is crucial to producing the best research and providing the best care to patients."[1] In short, diversity helps us all see a fuller picture.

For this issue of *Glaucoma Today*, a panel of women leaders in ophthalmology participated in a virtual roundtable to discuss some of the advances and challenges in building a diverse field. I hope you enjoy reading the variety of insights and experiences shared, and I welcome our readers to share their own perspectives with us. A space in which all feel equally represented may seem distant, but it is certainly worth striving to cultivate. ■

1. Gordon L. Building diversity in medicine and ophthalmology. Presented at: the 2019 Women in Ophthalmology annual meeting. August 23, 2019; Coeur d'Alene, Idaho.

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