



## **Diversity, Equity, and Inclusion** 2024 Annual Report

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The demographic diversity of the  
AASM's leadership and members



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## LETTER FROM THE AASM PRESIDENT

On behalf of the AASM board of directors, I am proud to introduce the 2024 Diversity, Equity, and Inclusion (DEI) report. This report, developed by the DEI Committee, plays an essential role in identifying underrepresented groups within our membership, recognizing barriers to participation, and tracking trends to ensure we cultivate a diverse and inclusive community. By addressing these challenges, we continue to move closer to our goal of building a vibrant and equitable organization for all members.

In the past year, the DEI Committee engaged in meaningful conversations with underrepresented member groups, including caregivers, students and residents, LGBTQ+ members and members with disabilities. These discussions have provided valuable insights into the challenges these groups face professionally.

The committee also continues to develop educational resources that raise awareness about disparities in sleep health and promote culturally competent care. Through webinars, publications and other initiatives, the committee aims to equip members with the tools they need to foster equity in their practices and communities. More resources are being planned to support ongoing education and engagement in these critical areas.

To further advance our efforts, I encourage all members to review and update their demographic information in their member profile. Accurate member data allows us to understand the composition of our organization and tailor initiatives that promote greater inclusion.

Finally, I want to express my gratitude to the DEI Committee members for their dedication to this important work. Their efforts ensure that AASM remains a welcoming and inclusive organization where every member can thrive.

Sincerely,



A handwritten signature in black ink, appearing to read "Eric Olson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Eric J. Olson, MD  
AASM President

## EXECUTIVE SUMMARY

The American Academy of Sleep Medicine (AASM) is committed to fostering a welcoming environment for its members. To achieve this, the Diversity, Equity, and Inclusion Committee presents an annual report that evaluates the current AASM membership, identifies underrepresented groups, recognizes barriers, monitors trends, and proposes strategies for improvement. The 2024 AASM Diversity Membership Data Report analyzes AASM's member, volunteer, and leader demographic data using self-reported information provided by its members.

We identified the following key findings from the data for the 2023/24 membership year:

- The percentage of AASM members providing demographic information continues to improve yearly.
  - Race
    - 2022 – 30.7% of members
    - 2023 – 49.7% of members
    - 2024 – 63.2% of members
  - Practice Setting
    - 2022 – 35.1% of members
    - 2023 – 49.3% of members
    - 2024 – 63.1% of member
- The number of opportunities for leaders and volunteers remains positive.
  - 2022 – 341 Leaders and Volunteers
  - 2023 – 370 Leaders and Volunteers
  - 2024 – 360 Leaders and Volunteers
- AASM membership consists of 57.0% male, 41.4% female. For the past three years, there has been a steady decline in male members. This year, male members decreased by 0.7%, and female members increased by 0.9%. 1.6% of members left this field blank or were not disclosed.
  - There was a 2.6% decrease in male volunteer members this year, while female volunteers increased by 2.6%. In leadership roles, there were minimal changes in the gender percentages.
- 63.2% of AASM members have reported their race, an increase of 13.4% compared to the previous year. Of those who provided this data, the majority (54.4%) identified as White/Caucasian, and the remaining (45.6%) identified in one or more race categories. This year, race makeup in volunteer roles increased for White, Asian, and Hispanic members. For leadership roles, the differences year over year are minimal.
- Looking at member geographic locations, there were minimal changes except for international members, which grew by 1.2% this year. Most members reside in Southern states, but volunteers are primarily from Southern and Midwestern states. There was also a 2.2% increase in volunteer members who reside internationally. In leadership, members in the Midwest are the majority at 37.1%.
- The majority of AASM members who are board-certified are based in Internal Medicine (43.1%), followed by Psychiatry and Neurology (22.8%). Pediatrics continues to have higher representation among volunteer members (11.4%) and leadership roles (12.5%) compared to 5.8% of total members.

The following pages outline the detailed analysis of 8,459 AASM members as of April 24, 2024.

# 2024 Demographic Report

## MEMBER CATEGORY

Full members are still the predominant member group at 69.5%. Team members represent the next largest segment at 16%, marking a 1.2% increase compared to the previous year and returning to rates similar to 2021 before the membership dues increase. International membership has also increased slightly by 0.7% to 3.9%.

	2020	2021	2022	2023	2024
Affiliate Membership	1.9%	1.9%	1.9%	1.8%	1.6%
Circumstance Membership	0.0%	0.0%	0.0%	0.0%	0.0%
Full Membership*	80.2%	77.7%	74.4%	69.5%	69.5%
International Membership	1.6%	1.5%	1.9%	3.2%	3.9%
Student and Resident Membership	2.0%	2.6%	5.5%	10.7%	9.0%
Team Membership	14.3%	16.1%	16.3%	14.8%	16.0%

\*Full member category includes former Fellow, Retired, and Emeritus categories as standings (changed in 2021). Dues increase took effect in October 2023.

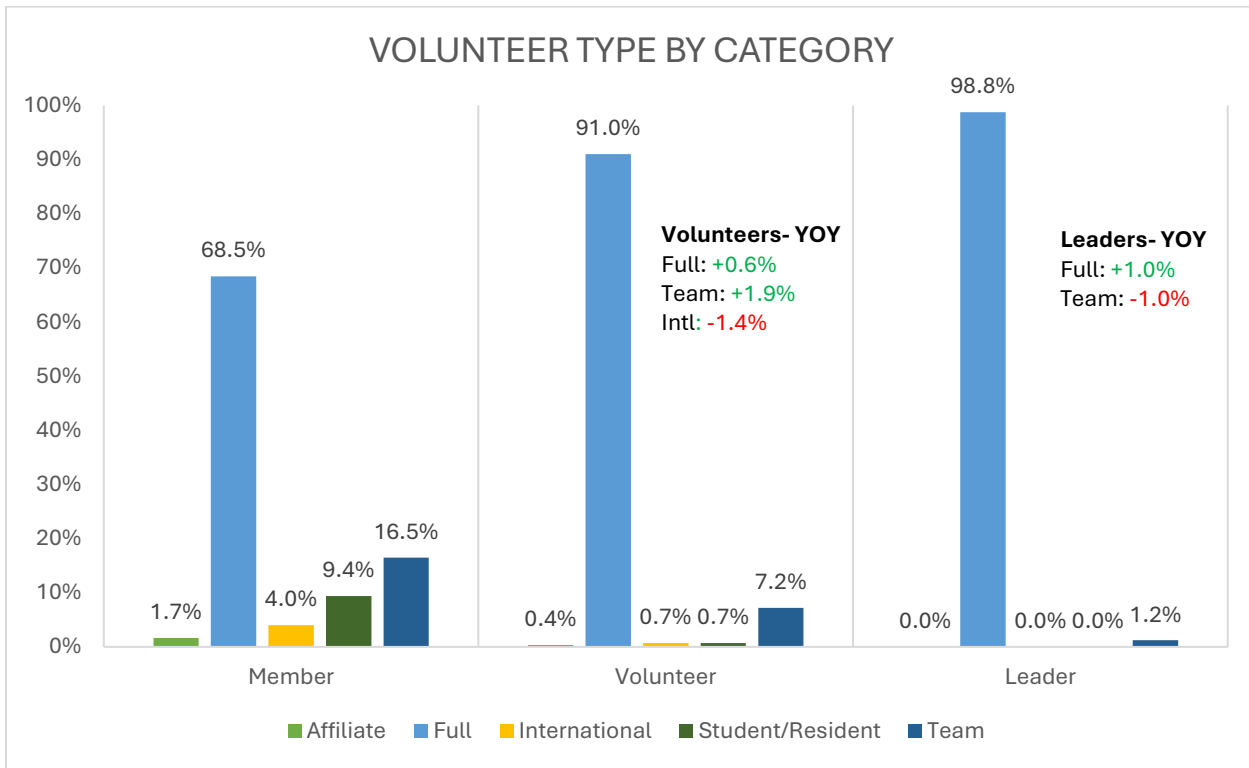
## Volunteer Type

### Volunteer Types – 3 Year Trend

This year, the number of volunteers totaled 360 (278 volunteers and 82 leaders), comparable to 2023 volunteers. The chart below shows the breakdown of membership by volunteer type for the past three years.

	2022		2023		2024	
	Count	%	Count	%	Count	%
Member	8,267	96.0%	8,127	95.6%	8,099	95.7%
Volunteer	253	3.0%	281	3.3%	278	3.3%
Leader	88	1.0%	89	1.0%	82	1.0%
<b>TOTAL</b>	<b>8,608</b>		<b>8,497</b>		<b>8,459</b>	

**Member** = general AASM members | **Volunteer** = serves on AASM committee, taskforce, panel | **Leader** = AASM board member, chairs & vice-chairs

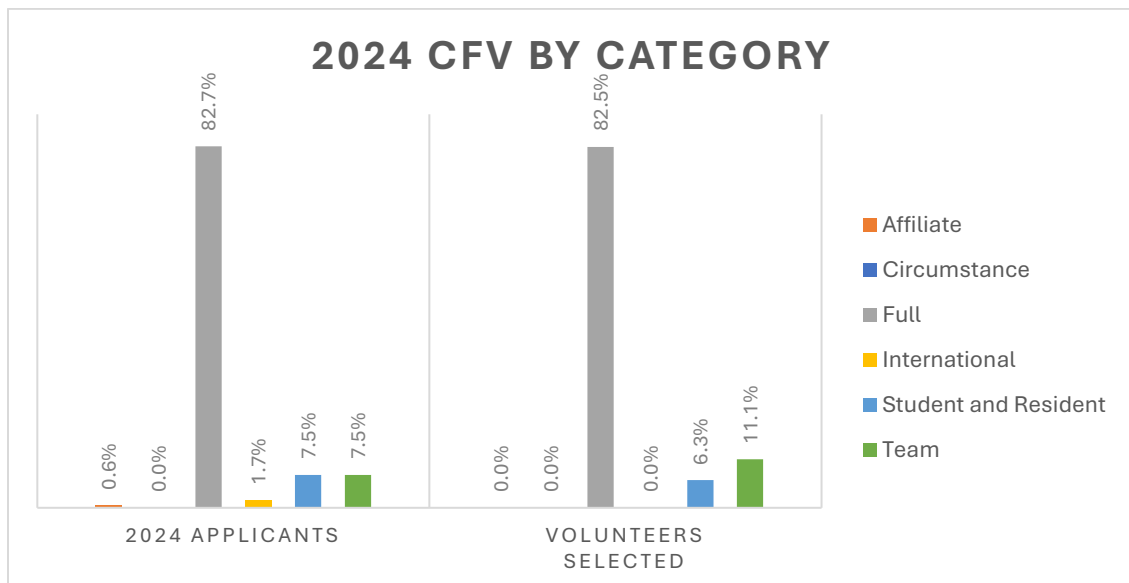


The chart above shows a breakdown by volunteer type, excluding those in the Circumstance category. Team members represent 7.2% of the volunteer roles and 1.2% of leader roles (a decrease of 1% YOY). Full members are the largest groups in both volunteer and leadership roles at 91% and 98.8%, respectively.

### 2024 Call for Volunteers by Member Category

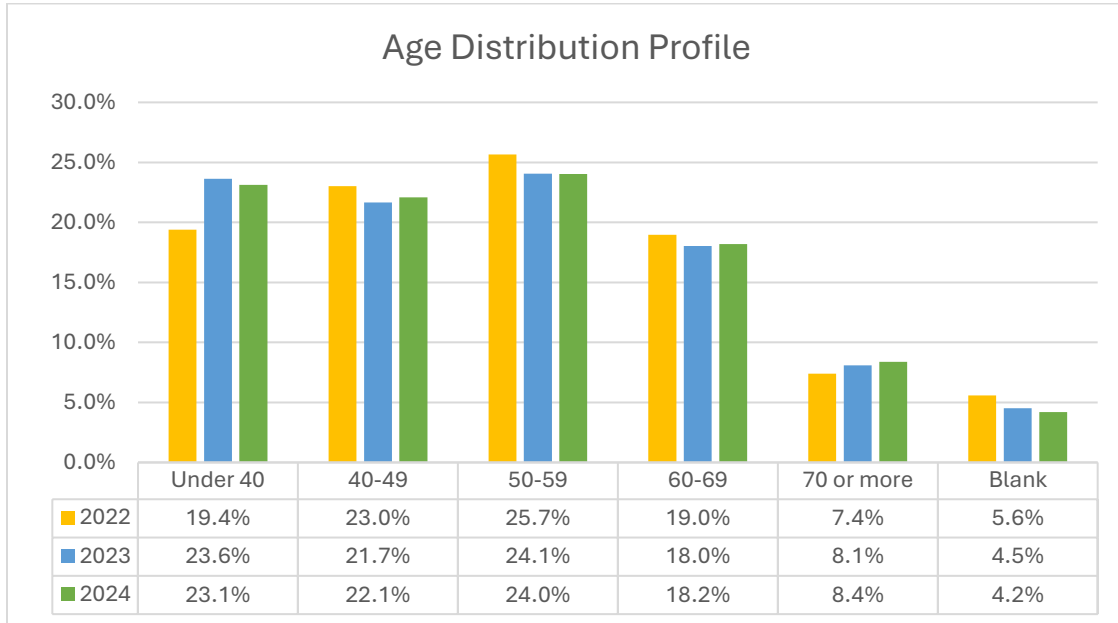
AASM received 173 volunteer applications in 2023. Most applicants came from the Full member category (82.7%), followed by Team members (7.5%) and Student/Resident members (7.5%).

Full members accounted for 82.7% of those selected for volunteer roles proportionate to the applicant pool. Team members accounted for 11.1%, and Students/Residents accounted for 6.3%.



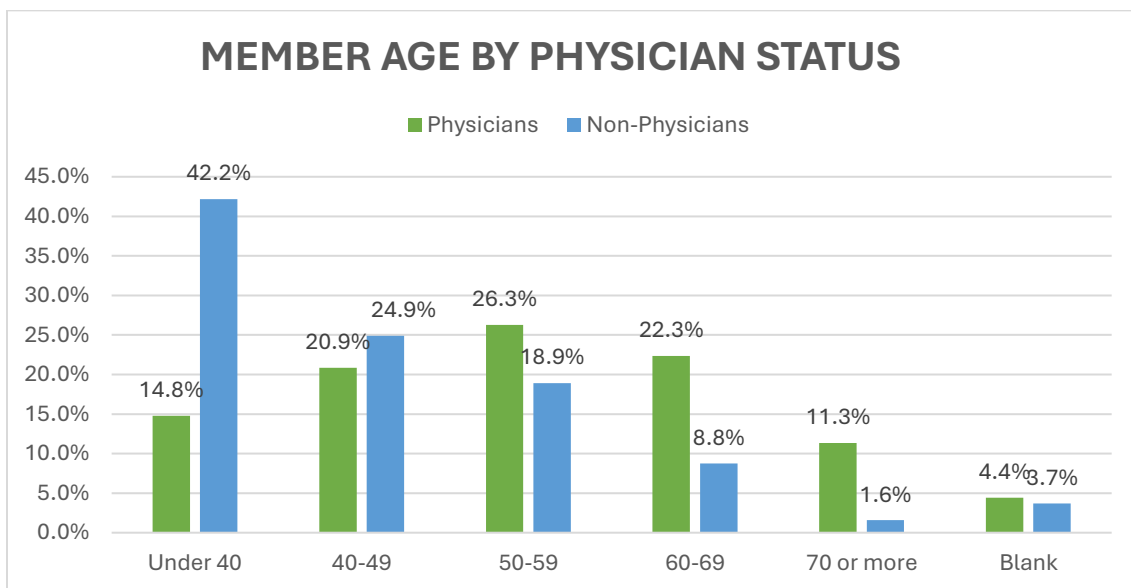
## AGE

Approximately 95.8% of members have provided their age in their membership profile. The average age for all AASM members is 50.7 years old, compared to 50.3 years last year. (U.S. physician population is 52.9 years). The average age of members with a doctoral degree is 54.1 years, the same as last year. The average age of Team members is 47.4 years, and 32.4 for students/resident members.



## Practitioner Type Profile

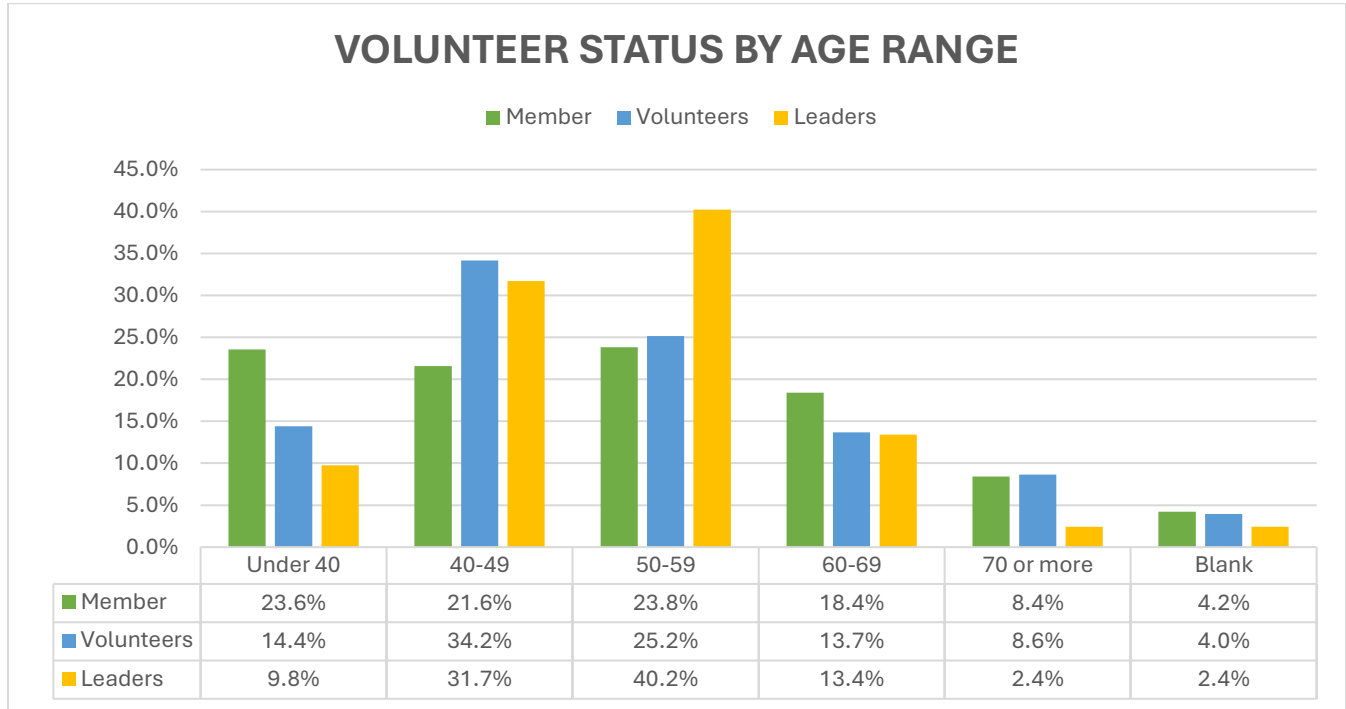
The majority of AASM members with a doctoral degree (*Physicians*) are between 40-69 years (70.2%), with the majority falling in the 50-59 range (26.8%). For members without doctoral degrees, the majority are under 40 to 59 years (87.0%), with the most being under 40 years (46.3%). The Student/Resident and Team categories contribute to the high percentage of non-physicians under 40.



**\*Physicians** = Full members with doctoral degrees, includes Regular, Fellow, Emeritus, Retired, Sleep Medicine Trainees  
**Non-Physicians** = Affiliate, Team, Student/Residents, International and Circumstance

## Volunteer Type Profile for Age

AASM members between the ages of 40 and 59 represent 45.4% of membership, 59.4% of volunteers, and 72.0% of leaders. Members under 40 represent 23.6% of membership, 14.4% of volunteers, and 9.8% of leaders. AASM members 60 or older represent 26.8% of general members, 22.3% of volunteers, and 15.9% of leaders.



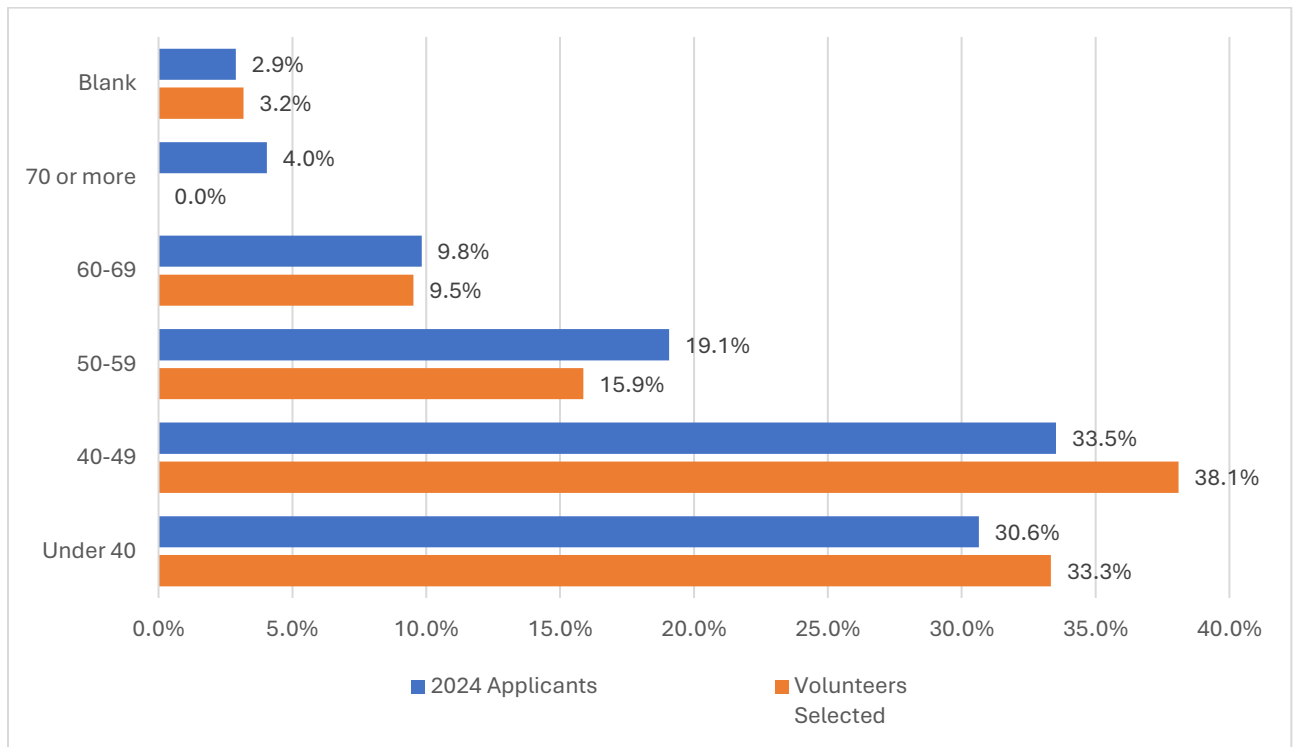
DEFINITIONS: **Member** = general AASM member | **Volunteer** = serves on AASM committee, taskforce, panel | **Leader** = AASM board member, chair/vic-chair

## 3 Year Age Trend by Volunteer Type

	Member			Volunteers			Leaders		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
	8267	8127	8099	253	281	278	88	89	82
Average Age (Mean)	51.2	50.3	50.7	49.4	49.8	51	51.8	52.0	50.7
Under 40	19.5%	24.0%	23.6%	18.6%	18.5%	14.4%	8.0%	7.9%	9.8%
40-49	22.5%	21.1%	21.6%	34.0%	34.5%	34.2%	38.6%	32.6%	31.7%
50-59	25.6%	24.0%	23.8%	24.9%	21.4%	25.2%	29.5%	37.1%	40.2%
60-69	19.2%	18.3%	18.4%	13.4%	13.2%	13.7%	8.0%	10.1%	13.4%
70 or more	7.5%	8.1%	8.4%	5.1%	8.5%	8.6%	9.1%	6.7%	2.4%
Blank	5.6%	4.5%	4.2%	4.0%	3.9%	4.0%	6.8%	5.6%	2.4%



## 2024 Call for Volunteers Profile by Age



The majority of 2024 volunteer applicants were in the 40-49 age group (33.5%), followed by Under 40(30.6%), and then 50-59 (19.1%)

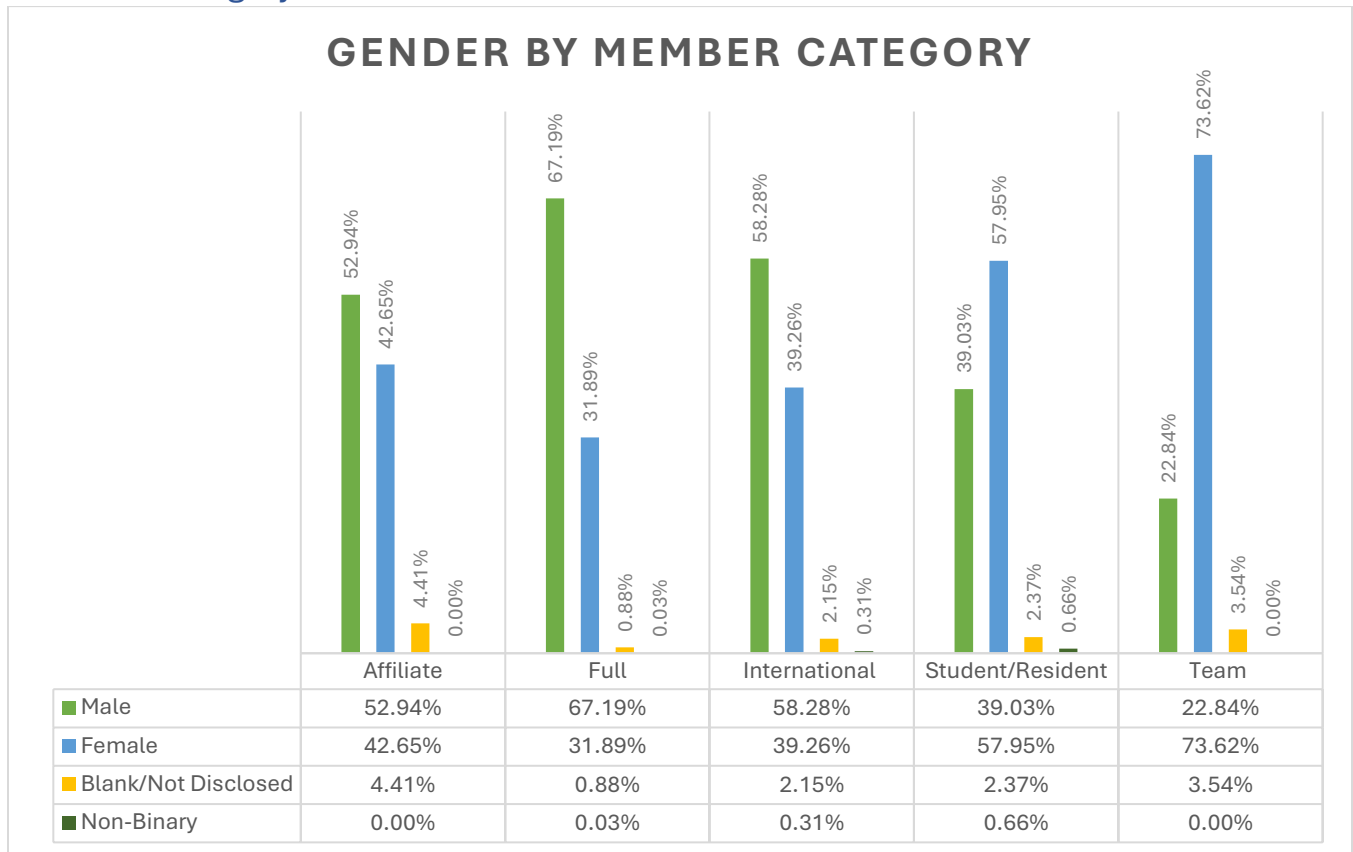
Of those selected for volunteer roles in 2024, the majority were also in the 40-49 age group (38.1%), followed by those under 40 (33.3%) and then the 50-59 age group (15.9%). The AASM is committed to ensuring a fair distribution of volunteers across all age groups.

## GENDER

The gender breakdown of AASM members is 57.0% male and 41.2% female; 1.6% are blank/not disclosed. 0.1% identified themselves as non-binary. While most members are male, there has been a steady increase in female membership over the years, which can be attributed to the growth of our Team and Student/Resident member categories.

	All Members (%)				
	2020	2021	2022	2023	2024
Male	63.4%	60.7%	59.4%	57.8%	57.0%
Female	34.4%	37.4%	39.0%	40.3%	41.4%
Blank/Not Disclosed	2.1%	1.9%	1.6%	1.8%	1.5%
Non-Binary	0.0%	0.0%	0.0%	0.0%	0.1%

### Member Category Profile

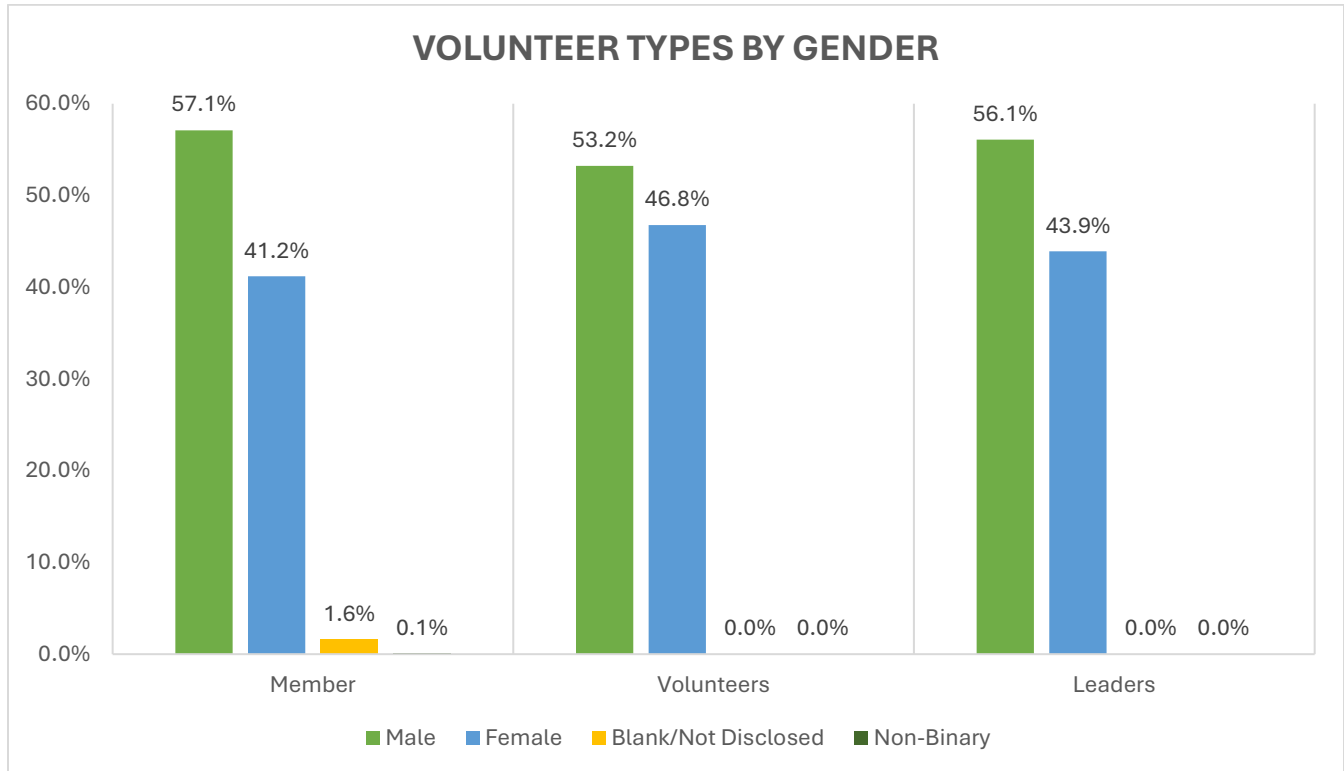


The gender breakdown for Full members is 67.2% male and 31.9% female. While most of our member categories are predominantly male, the reverse is true for Team & Student/Resident members, where females are the majority with 73.6% and 57.9%, respectively.

## Volunteer Type Profile by Gender

The number of volunteers in 2023/24 totaled 360 (278 volunteers and 82 leaders), slightly lower than 2023 volunteers at 370 (281 volunteers and 89 leaders).

AASM volunteers consist of 53.2% male and 46.8% female. There was a 2.6% increase in female volunteers, while male volunteers decreased by 2.6%. There were no significant changes in the leadership category compared to last year, which is currently 56.1% male and 43.9% female.

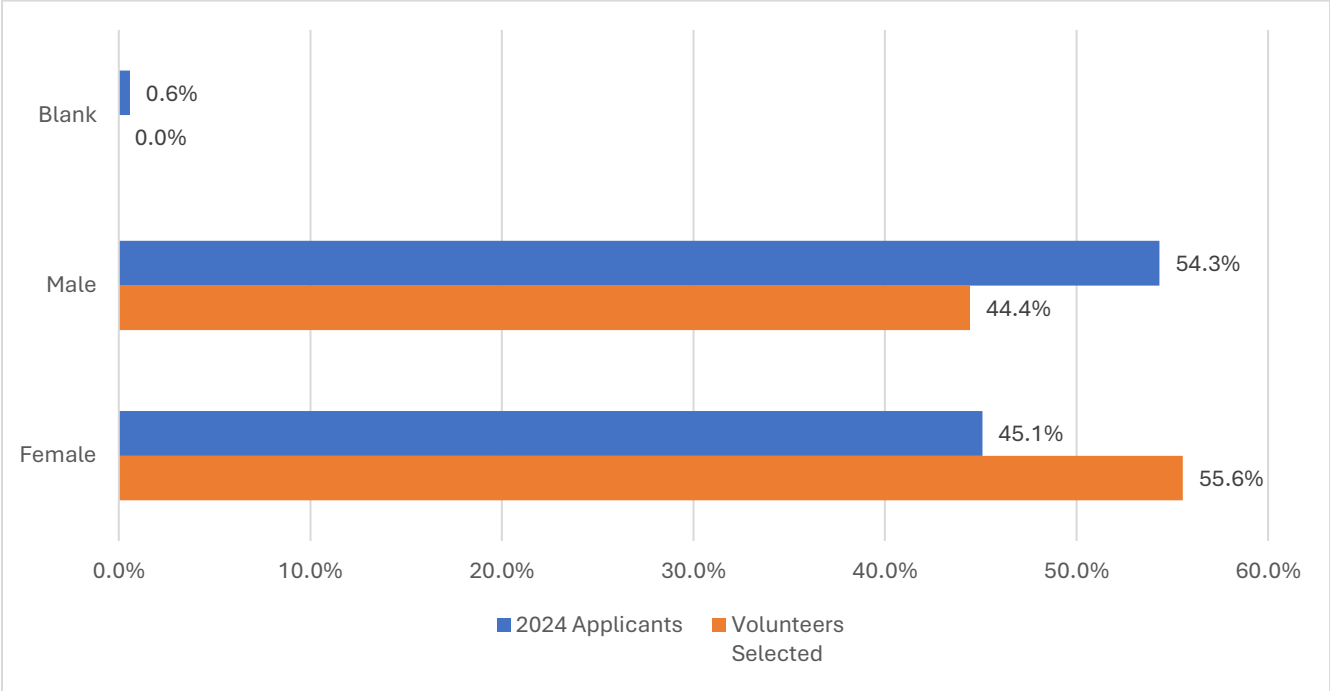


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## Gender by Volunteer Type – 3-Year Trend

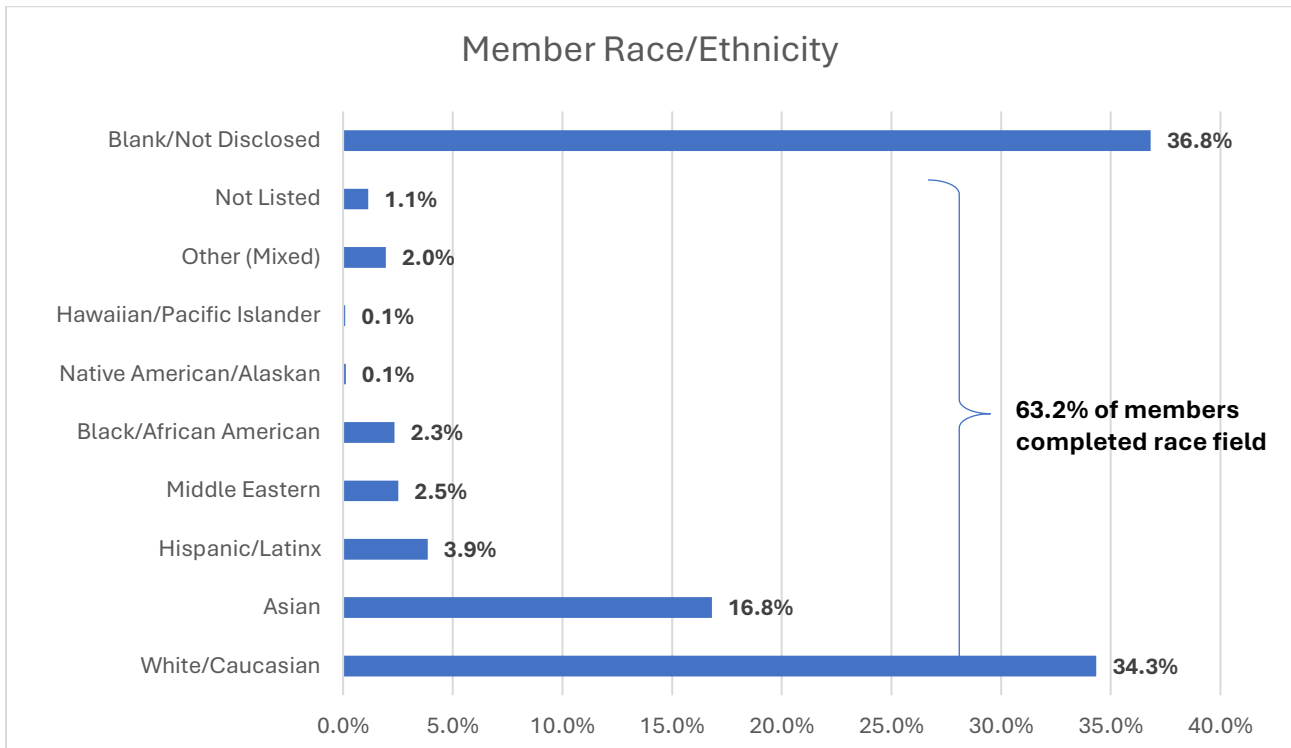
	Member			Volunteers			Leaders		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
Male	59.4%	57.9%	57.1%	58.6%	55.9%	53.2%	55.7%	55.1%	56.1%
Female	38.9%	40.1%	41.2%	41.4%	44.1%	46.8%	44.3%	44.9%	43.9%
Blank/Not Disclosed	1.7%	1.9%	1.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Non-Binary	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

## 2024 Call for Volunteers Profile by Gender

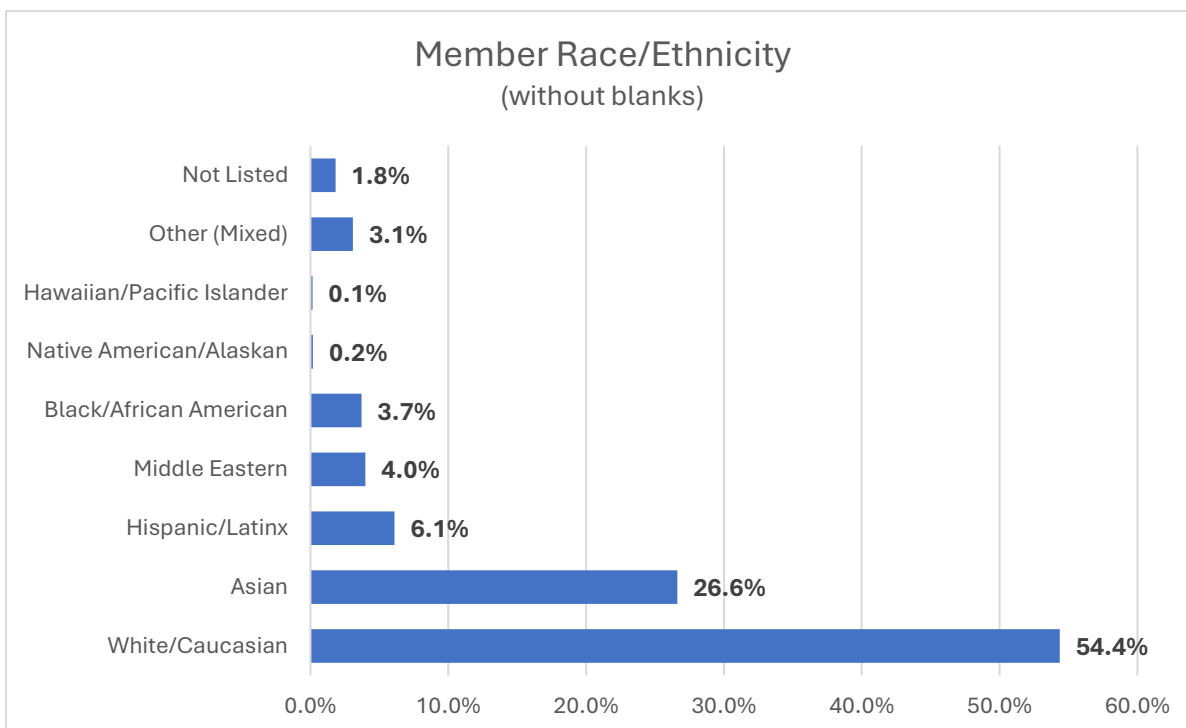


- The majority of the applicants were male (54.3%) and female (45.1%).
- The selected volunteer ratio for male and female applicants is 44.4% to 55.6%, respectively.

## RACE/ETHNICITY

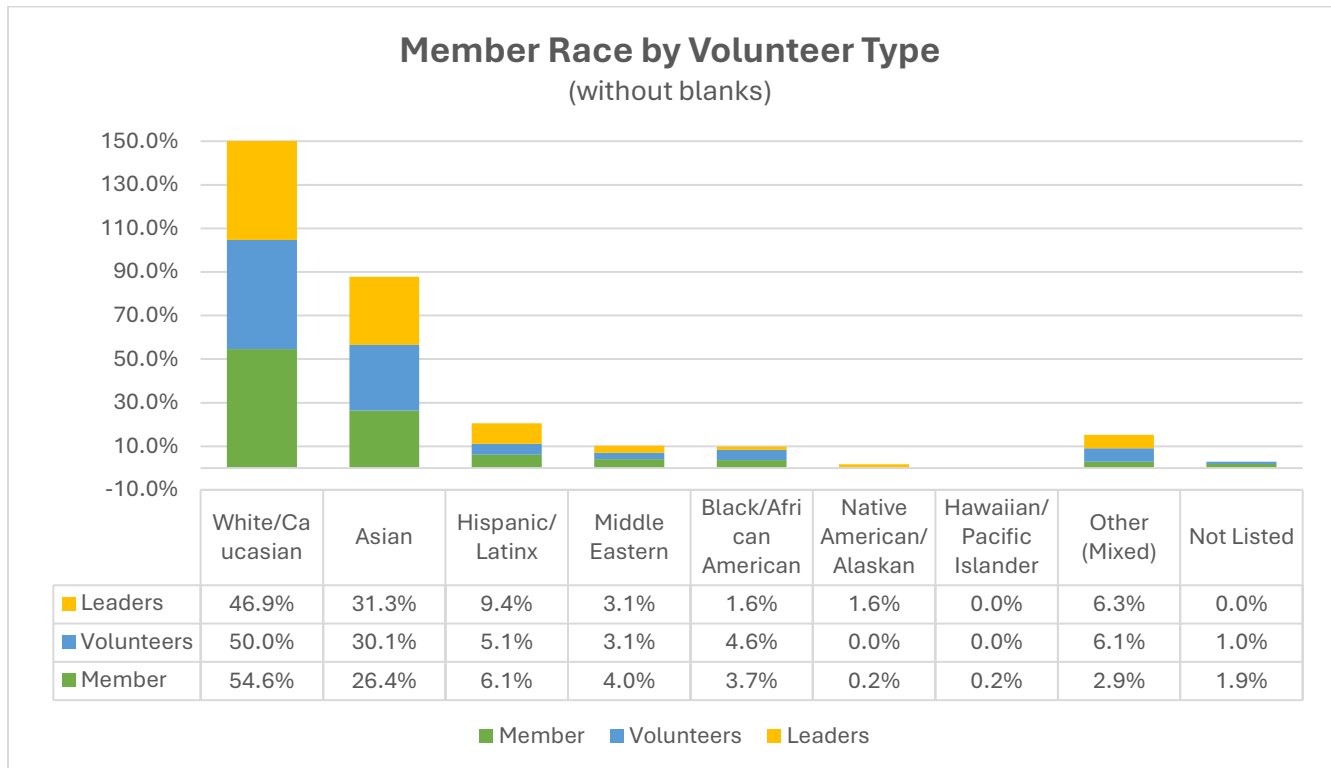


Approximately 63% of AASM have reported their race/ethnicity, an increase of 13.4% compared to 2023. Of those who did provide their race/ethnicity, 54.4% are White/Caucasian, 26.6% are Asian, followed by 6.1% Hispanic/Latinx, 4.0% Middle Eastern, 3.7% Black/African American, 3.1% Other (mixed), ~2% Not Listed, and less than 1% for Hawaiian/Pacific Islander and Native American/Alaskan.



## Volunteer Type Profile by Race

Looking at the volunteer type by race, most volunteers are White/Caucasian (48.6%), followed by Asian (30.9%). For leaders, the majority is White/Caucasian (50.0%) and Asian (31.8%).

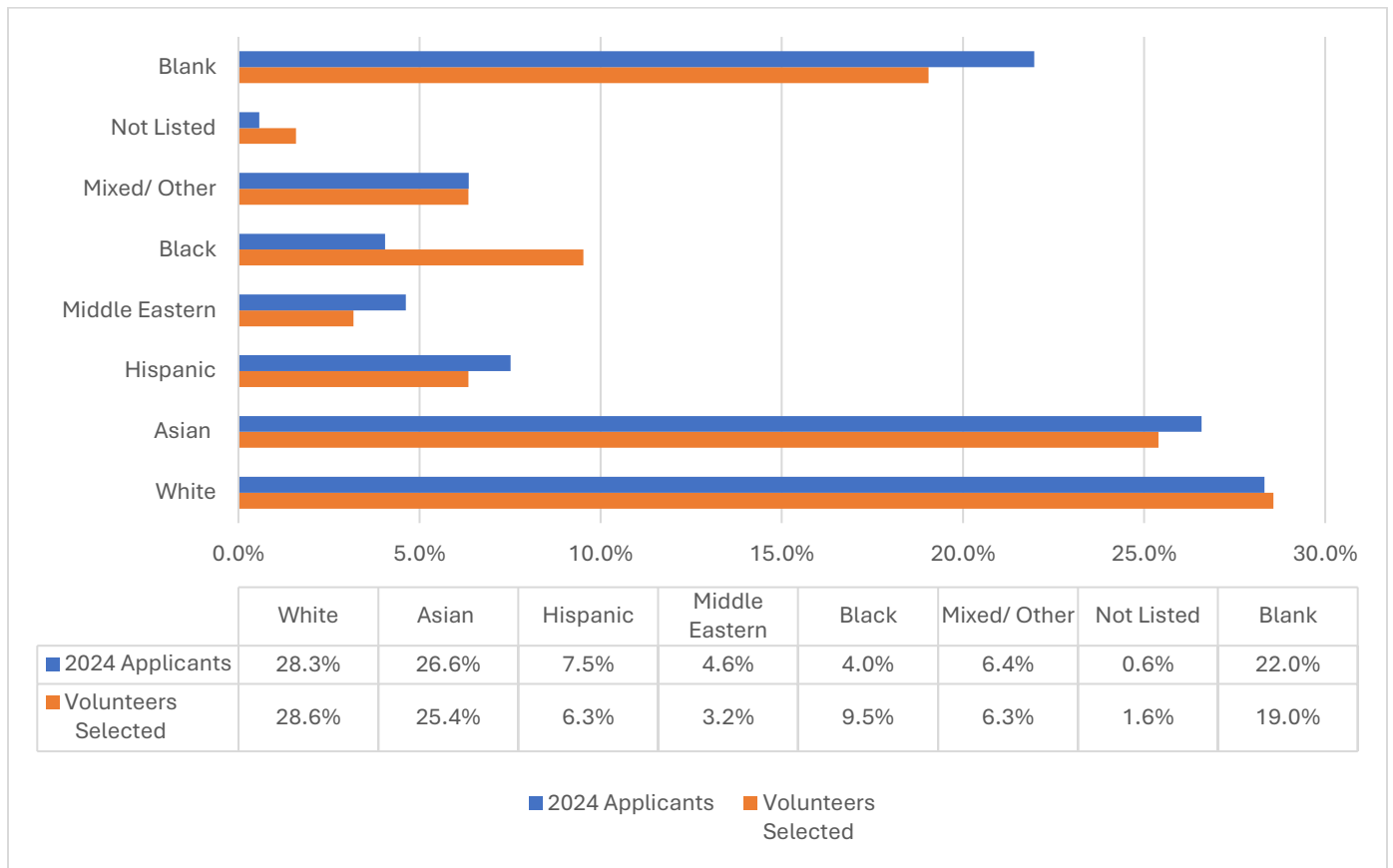


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Compared to the previous year (for members who completed this field), there is an increase in White/Caucasian (1.4%) and Hispanic volunteers (1.1%). There was a significant decrease in White/Caucasian (3.2%), while there were increases for Hispanic (1.8%) and Other/Mixed (1.7%) members in leadership.

	Volunteers			Leaders		
	2022	2023	2024	2022	2023	2024
White/Caucasian	47.5%	48.6%	50.0%	58.5%	50.0%	46.9%
Asian	32.4%	30.9%	30.1%	24.5%	31.8%	31.3%
Hispanic/Latinx	5.8%	4.0%	5.1%	7.5%	7.6%	9.4%
Middle Eastern	1.4%	2.9%	3.1%	1.9%	3.0%	3.1%
Black/African American	4.3%	4.0%	4.6%	1.9%	1.5%	1.6%
Native American/Alaskan	0.0%	0.0%	0.0%	1.9%	1.5%	1.6%
Hawaiian/Pacific Islander	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Mixed)	4.3%	8.0%	6.1%	3.8%	4.5%	6.3%
Not Listed	4.3%	1.7%	1.0%	0.0%	0.0%	0.0%

## 2024 Call for Volunteers Profile by Race



22% of applicants did not list their race; however, this is a 9.3% decrease in non-responses over last year. Of those that listed race data, the largest group was White (28.3%), followed by Asian (26.6%).

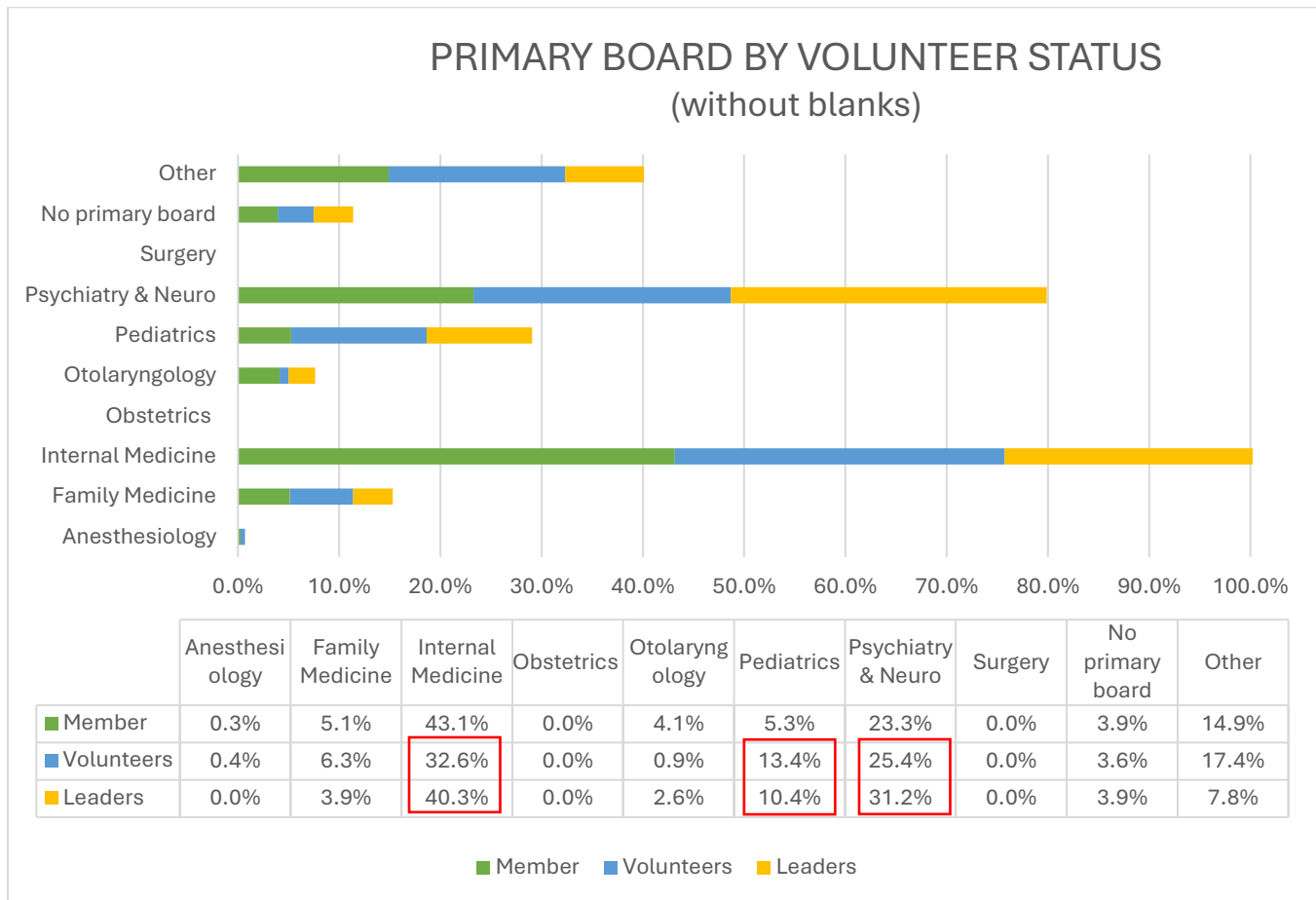
The volunteers selected match proportionately with the number of applicants for each group, with the majority White (28.6%) and Asian (25.4%). Overall, the number of members chosen shows no disparities in the proportion selected from each racial group.

## PRIMARY BOARD

The AASM has collected 54.6% of the primary board data from our members. The two top boards are Internal Medicine (42.6%) and Psychiatry and Neurology (23.5%). Members with no board certification are 3.9%, and those with other certification types are 14.9%.

### Primary Board by Volunteer Roles

Looking closer into volunteer and leader roles, the breakdown is comparative to the total percentage of members in Internal Medicine and Psychiatry/Neurology. As in previous years, although the rate of members in Pediatrics is lower (5.3%), they occupy 13.4% of volunteer and 10.4% of leader positions.



DEFINITIONS: Member = general AASM member | Volunteer = serves on AASM committee, taskforce, panel | Leader = AASM board member, chair/vice-chair



## GEOGRAPHY

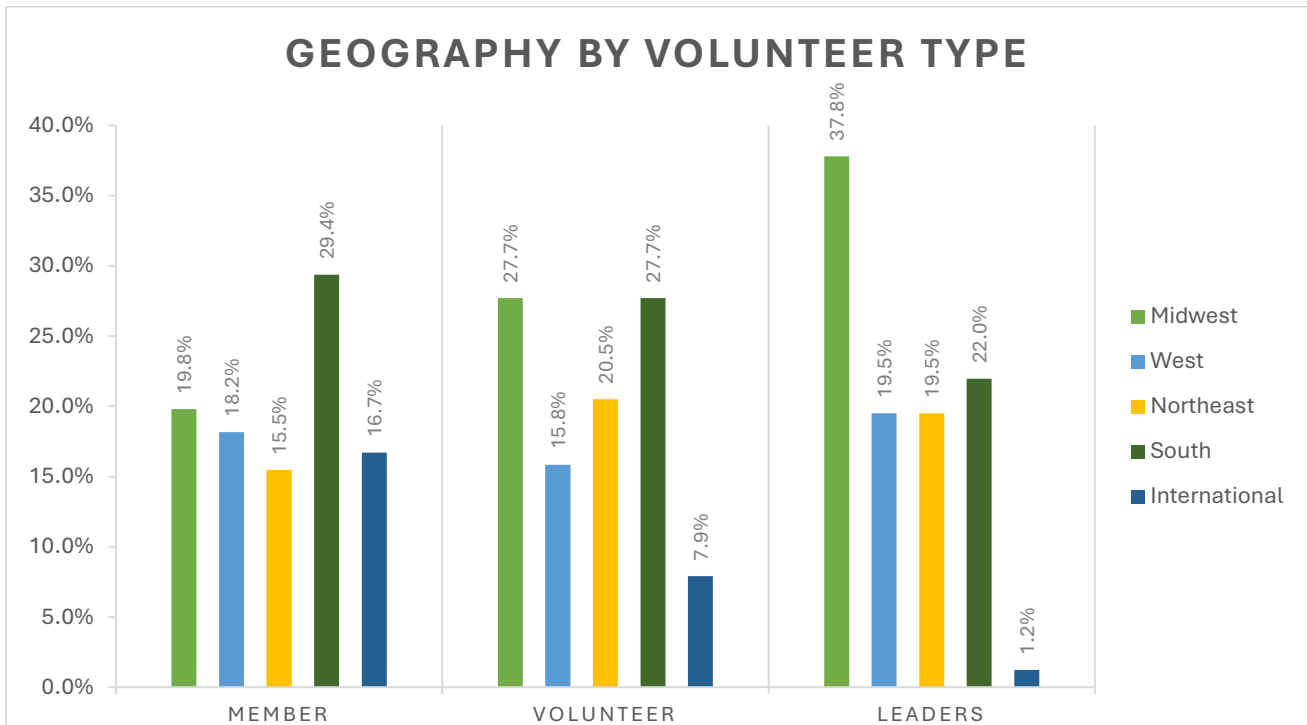
AASM has nearly 100% of members' geographic data because an address is required for the membership application. Most members reside in the Southern states (29.2%), followed by the Midwest states (20.2%).

	Member				Volunteers				Leaders			
	2022	2023	2024	Change Δ	2022	2023	2024	Change Δ	2022	2023	2024	Change Δ
Midwest	20.4%	19.7%	19.8%	0.1%	29.6%	27.0%	27.7%	0.7%	36.4%	37.1%	37.8%	0.7%
West	17.6%	17.7%	18.2%	0.5%	17.8%	14.9%	15.8%	0.9%	21.6%	20.2%	19.5%	-0.7%
Northeast	14.9%	15.3%	15.5%	0.1%	17.4%	19.9%	20.5%	0.6%	21.6%	22.5%	19.5%	-3.0%
South	30.6%	29.4%	29.4%	-0.1%	28.1%	28.8%	27.7%	-1.1%	19.3%	20.2%	22.0%	1.7%
International	15.8%	17.0%	16.7%	-0.3%	6.3%	8.5%	7.9%	-0.6%	1.1%	0.0%	1.2%	0.2%
US Territory	0.4%	0.4%	0.4%	0.0%	0.4%	0.4%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%
United States Minor Outlying Island	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Armed Forces Europe	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Blank	0.3%	0.4%	0.2%	-0.3%	0.4%	0.4%	0.0%	-0.4%	0.0%	0.0%	0.0%	0.0%

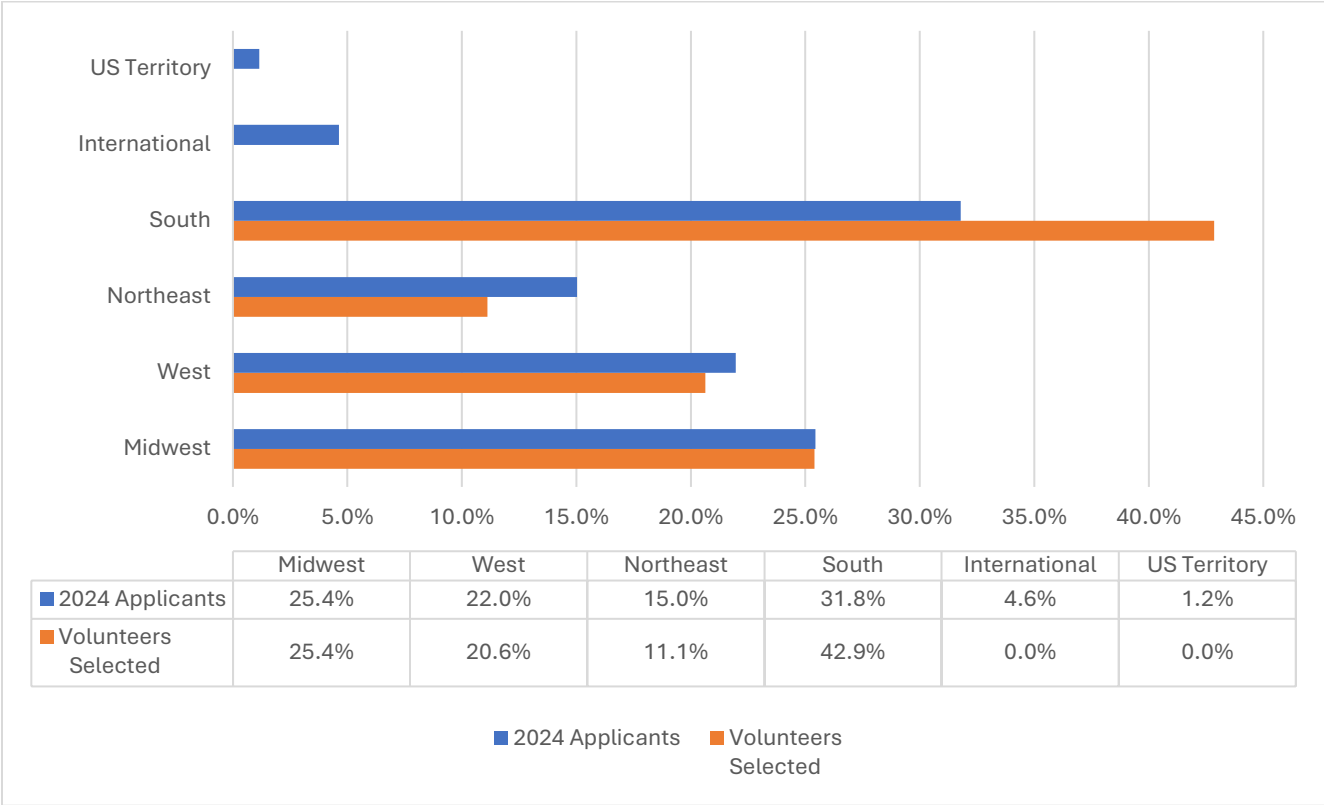
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### Volunteer Type by Geography Profile

Similar to previous years, AASM volunteers typically reside in Midwest and Southern states. A majority of AASM leaders reside in Midwestern states.



# 2024 Call for Volunteers Geographic Profile



In 2024, most applicants reside in Southern states (31.8%), followed by the Midwest (25.4%) and then the West (22%). Of those volunteers selected in 2024, the majority also reside in Southern states (42.9%), followed by Midwest (25.4%) and Western states (20.6%).

## PRACTICE SETTING

Approximately 63.1% of AASM members have reported their practice setting information, a 14% increase over last year. Of the members who reported their setting, 78.3% report being employed physicians, and 21.7% report being in private practice.

Looking into the practice setting by volunteer type, Academics continue to have high representation in the volunteer (65.7%) and leadership (72.7%) roles compared to those in other practice settings.

	Member	Volunteer	Leaders
Academic	31.7%	65.7%	72.7%
Employed Physician Practice	44.9%	13.4%	9.1%
Military	1.0%	1.0%	1.5%
Mixed Practice	11.5%	12.9%	12.1%
Not Listed	10.9%	7.0%	4.5%
<b>Employed Physicians Total</b>	<b>77.5%</b>	<b>90.5%</b>	<b>95.7%</b>
Group practice (Equity Owner)	43.0%	23.8%	33.3%
Solo practice (Owner)	57.0%	76.2%	66.7%
<b>Private Practice Total</b>	<b>22.5%</b>	<b>9.5%</b>	<b>4.3%</b>

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## 2024 Call for Volunteers by Practice Setting

Among applicants for 2024, those with missing practice setting information was 17.3%, a decrease of 7.4% in non-responses over last year. Of those who completed this field, most applications came from Academic members (45.1%), followed by Employed Physicians (13.9%), and Mixed practice (11.6%). Of the volunteers selected, Academic members are still the majority at 42.9%, followed by Employed Physicians at 14.3% and Solo practice at 14.3%.

## SPECIAL ACCOMMODATIONS

At the time of this report, 35 members indicated having a disability. Most responses said their specific disability was not listed, including conditions such as Narcolepsy, Cancer, and Migraines. Of those who did select the need for special accommodation, it was related to hearing, mobility, and visual impairments. Regarding AASM courses, these accommodations can be disclosed and addressed upon request by the attendee through questions embedded in the course registration process.

## APPENDIX

### 2023/24 Diversity, Equity, and Inclusion Committee Goals

1. Assess AASM's membership and leadership to identify underrepresented groups and recommend strategies to improve diversity, equity, and inclusion within the AASM.
2. Make recommendations to improve engagement with underrepresented groups based on the DEI annual report.
3. Develop resources that will educate AASM members and leaders on issues related to diversity, equity, and inclusion.
4. Assist in the administration of diversity, equity & inclusion awards and scholarships.
5. Review AASM's Diversity, Equity, and Inclusion statement on an annual basis and recommend updates to the AASM Board of Directors, if needed.
6. Identify practices within sleep medicine that contribute to health care disparities and provide strategies for members to reduce inequities.

### 2023/24 AASM DEI Committee Members:

- Fauziya Hassan, MD, Chair
- Anna Wani, MD, Vice Chair
- William Martin, PsyD
- Stephen Glazer, MD
- Lissette Jimenez Davila, MD, FAASM
- Pamela Hamilton Stubbs, MD
- Marietta Bibbs, RPSGT
- Luis D Quintero DO, MPH
- Spencer Dawson, PhD
- Sullafa Kadura, MD, MBA
- Christopher Pham, DO
- Alicia Chung, Ed.D.

#### **Board Liaison:**

Jennifer L Martin, PhD, FAASM

Committee contact: [deicommittee@aasm.org](mailto:deicommittee@aasm.org)

# Full 2024 Report Tables

		2024 DEI Membership Report									
		All Members (#)	All Members (%)	Member	Volunteers	Leaders	Physicians*	Non-Physicians	All US Physicians (2023 AMA data)	Variance (Physicians only)	Variance (ALL Members)
<b>2024 Member Counts</b>		8,459		8,099	278	82	5,879	2,580	1,455,177		
<b>Age Distribution</b>	Average Age	50.7		50.7	51.0	50.7	54.1	43.0	52.9	1.20	-2.2
	Under 40	1956	23.1%	23.6%	14.4%	9.8%	14.8%	42.2%	29.4%	-1.7%	-6.3%
	40-49	1868	22.1%	21.6%	34.2%	31.7%	20.9%	24.9%	17.6%	3.3%	4.5%
	50-59	2032	24.0%	23.8%	25.2%	40.2%	26.3%	18.9%	16.4%	9.9%	7.7%
	60-69	1539	18.2%	18.4%	13.7%	13.4%	22.3%	8.8%	16.2%	6.1%	2.0%
	70 or more	708	8.4%	8.4%	8.6%	2.4%	11.3%	1.6%	20.4%	-9.0%	-12.0%
	Blank	356	4.2%	4.2%	4.0%	2.4%	4.4%	3.7%	0.0%	4.4%	4.2%
<b>Gender</b>	Male	4819	57.0%	57.1%	53.2%	56.1%	67.2%	33.7%		67.2%	57.0%
	Female	3501	41.4%	41.2%	46.8%	43.9%	31.9%	63.0%		31.9%	41.4%
	Blank/Not Disclosed	131	1.5%	1.6%	0.0%	0.0%	0.9%	3.1%		0.9%	1.5%
	Non-Binary	8	0.1%	0.1%	0.0%	0.0%	0.0%	0.2%		0.0%	0.1%
<b>Race</b>	White/Caucasian	2905	34.3%	34.3%	35.3%	36.6%	29.1%	46.3%	49.7%	-20.6%	-5.4%
	Asian	1422	16.8%	16.6%	21.2%	24.4%	17.4%	15.5%	15.8%	1.6%	1.0%
	Hispanic/Latinx	326	3.9%	3.8%	3.6%	7.3%	3.3%	5.1%	4.6%	-1.3%	-0.8%
	Middle Eastern	213	2.5%	2.5%	2.2%	2.4%	2.5%	2.6%	0.0%	2.5%	2.5%
	Black/African American	198	2.3%	2.3%	3.2%	1.2%	1.7%	3.9%	4.3%	-2.7%	-2.0%
	Native American/Alaskan	10	0.1%	0.1%	0.0%	1.2%	0.1%	0.1%	0.2%	-0.1%	-0.1%
	Hawaiian/Pacific Islander	8	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%
	Other (Mixed)	165	2.0%	1.8%	4.3%	4.9%	1.7%	2.5%	5.0%	-3.3%	-3.1%
	Not Listed	97	1.1%	1.2%	0.7%	0.0%	1.1%	1.2%	0.0%	1.1%	1.1%
		Blank/Not Disclosed	3115	36.8%	37.2%	29.5%	22.0%	43.0%	22.8%	20.4%	22.6%
<b>Primary Board</b>	American Board of Anesthesiology	12	0.1%	0.1%	0.4%	0.0%	0.2%	0.0%	5.8%	-5.6%	-5.6%
	American Board of Family Medicine	239	2.8%	2.7%	5.0%	3.7%	4.0%	0.2%	13.2%	-9.3%	-10.5%
	American Board of Internal Medicine	1966	23.2%	23.0%	26.3%	37.8%	32.9%	1.2%	26.6%	6.3%	-1.4%
	American Board of Obstetrics and Gynecology	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.3%	-5.3%	-5.4%
	American Board of Otolaryngology	182	2.2%	2.2%	0.7%	2.4%	3.1%	0.1%	0.0%	3.1%	2.4%
	American Board of Pediatrics	265	3.1%	2.8%	10.8%	9.8%	4.5%	0.1%	10.2%	-5.8%	-6.7%
	American Board of Psychiatry and Neurology	1085	12.8%	12.4%	20.5%	29.3%	18.1%	0.7%	6.1%	-12.1%	7.7%
	American Board of Surgery	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	15.6%	-15.6%	-15.7%
	I do not have a primary board	180	2.1%	2.1%	2.9%	3.7%	1.8%	2.9%	0.0%	1.8%	
	Other	688	8.1%	7.9%	14.0%	7.3%	8.4%	7.6%	17.2%	-8.9%	-8.1%
	Blank	3842	45.4%	46.7%	19.4%	6.1%	27.1%	87.1%	0.0%	27.1%	40.9%
<b>Practice Setting †</b>	Academic	1419	16.8%	31.7%	65.7%	72.7%	40.4%	19.5%			
	Employed Physician Practice	1790	21.2%	44.9%	13.4%	9.1%	38.0%	53.6%			
	Military	43	0.5%	1.0%	1.0%	1.5%	1.1%	0.8%			
	Mixed Practice	485	5.7%	11.5%	12.9%	12.1%	11.9%	11.0%			
	Not Listed	444	5.2%	10.9%	7.0%	4.5%	8.6%	15.1%			
	<b>Employed Physicians Total</b>	<b>4181</b>	<b>49.4%</b>	<b>48.3%</b>	<b>72.3%</b>	<b>80.5%</b>	<b>49.1%</b>	<b>50.2%</b>			
	Group practice (Equity Owner)	494	5.8%	43.0%	23.8%	33.3%	43.3%	37.8%			
	Solo practice (Owner)	665	7.9%	57.0%	76.2%	66.7%	56.7%	62.2%			
<b>Private Practice Total</b>	<b>1159</b>	<b>13.7%</b>	<b>14.0%</b>	<b>7.6%</b>	<b>3.7%</b>	<b>17.3%</b>	<b>5.5%</b>				
	<b>Blank Total</b>	<b>3119</b>	<b>36.9%</b>	<b>37.7%</b>	<b>20.1%</b>	<b>15.9%</b>	<b>33.6%</b>	<b>44.3%</b>			
<b>Region/Location</b>	Midwest	1711	20.2%	19.8%	27.7%	37.8%	21.3%	17.7%			
	West	1530	18.1%	18.2%	15.8%	19.5%	18.6%	16.9%			
	Northeast	1325	15.7%	15.5%	20.5%	19.5%	16.6%	13.6%			
	South	2474	29.2%	29.4%	27.7%	22.0%	32.0%	22.9%			
	International	1375	16.3%	16.7%	7.9%	1.2%	11.0%	28.3%			
	US Territory	31	0.4%	0.4%	0.4%	0.0%	0.4%	0.3%			
	United States Minor Outlying Islands	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
	Armed Forces Europe	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Blank	13	0.2%	0.2%	0.0%	0.0%	0.1%	0.4%		
<b>Member Category</b>	Affiliate Membership	136	1.6%	1.7%	0.4%	0.0%	0.0%	5.3%			
	Circumstance Membership	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
	Full Membership	5879	69.5%	68.5%	91.0%	98.8%	100.0%	0.0%			
	International Membership	326	3.9%	4.0%	0.7%	0.0%	0.0%	12.6%			
	Student and Resident Membership	761	9.0%	9.4%	0.7%	0.0%	0.0%	29.5%			
	Team Membership	1357	16.0%	16.5%	7.2%	1.2%	0.0%	52.6%			

## Glossary and Definitions

**Member** - General Membership

**Volunteer** - Serves on committee, task force, panel, or assembly

**Leaders** - Board members, Chairs & Vice-chairs

\***Physician member** categories - Full Members (Regular, Fellow, Emeritus, Retired, and Trainees)

**Non-Physician member** categories - Team, Affiliate, Students, international, and Circumstance

### † Practice Setting - AMA style definition:

Private practice: Member is in a Self or Group practice

Employed Physician: Academic, Employed, Military, or a mix of practice settings

**US Physicians & Students (AMA)** - Numbers from the 2023 AMA HOD report

The numbers for the 2023 AMA Demographics report.

### Region Breakdowns

Midwest -	Ohio, Indiana, Michigan, Illinois, Missouri, Wisconsin, Minnesota, Iowa, Kansas, Nebraska, South Dakota, North Dakota
West -	Colorado, Wyoming, Montana, Idaho, Washington, Oregon, Utah, Nevada, California, Alaska, Hawaii, Arizona, New Mexico
Northeast -	Maine, Massachusetts, Rhode Island, Connecticut, New Hampshire, Vermont, New York, Pennsylvania, New Jersey
South -	West Virginia, Virginia, Kentucky, Tennessee, Texas, North Carolina, South Carolina, Georgia, Alabama, Mississippi, Oklahoma, Washington, Arkansas, Maryland, Louisiana, Florida, Delaware,
International -	Any country outside of the U.S or its territories
US Territory -	American Samoa, Guam, Northern Mariana Islands, Puerto Rico, U.S. Virgin Islands

### Member Categories

- Full - MD, DO, PhD, DDS, or other healthcare doctoral degree/In- fellowship training, Retired, Emeritus
- Team - Nurse Practitioners, Physician Assistants, Nurses, Sleep Technologists, Respiratory Therapists, Office/Center Managers, Medical Assistants, or other professionals
- Student/Resident- In formal training, such as medical school, residency, a Master's Degree program, a non-sleep medicine fellowship program, a Ph.D. program, or similar program
- Affiliate - those not eligible for other membership categories
- International - Individuals who reside outside of the United States.
- Circumstance - For individuals who have requested and been approved for dues assistance due to special circumstances.

> If field is blank, AMA data is not available for comparison

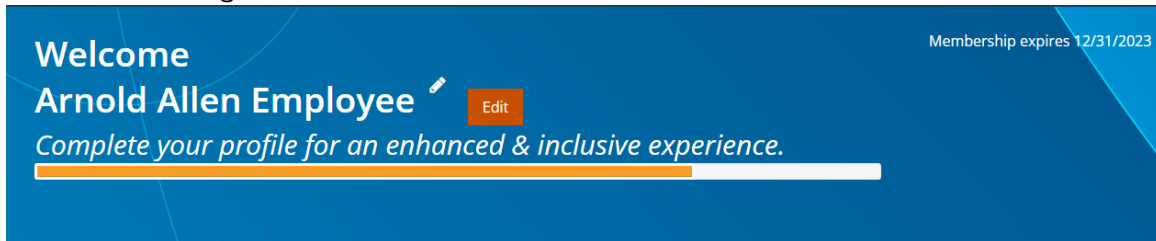
> All column totals for each data category equals 100%

**Cell shading** - shows the highest percentages for each column per main category, e.g., gender.


## How To Complete Your AASM Profile

The AASM seeks demographic information from our members to track our progress and implement measures to strengthen diversity and inclusion within the Association. Understanding the rich diversity of our membership also allows us to better serve our members and the profession. To update/change your demographic information, you will need to access your AASM member profile, here's how”

1. Log in to [members.aasm.org](https://members.aasm.org) at the top left corner
2. Click on the orange “Edit” button



3. Once in your account, click on the pencil icon to edit or complete any missing demographic fields in your profile

My Account		Profile 	
Purchase History	<b>Full Name</b> Arnold Allen Employee	<b>Company</b> American Academy of Sleep Medicine	
Subscriptions		<b>Member Standing</b> Regular	
My Organizations	<b>Title</b> Clinical Director, Darien Sleep Center	<b>Professions</b> Dentist, Physician	
Preferences	<b>Primary Email</b> employee@aasm.org	<b>Alternate Email</b> employee@aasm.org	
Payment Methods	<b>Work Phone</b> (630) 737-9700	<b>Preferred Phone Type</b> Professional	
Giving	<b>Home Phone</b> (630) 554-0000		
	<b>Mobile Phone</b>		
	<b>Date of Birth</b> 6/1/1955		
	<b>Gender</b> Male		
	<b>Race</b> Asian (South/East/Southeast Asian),		

## DEI Committee Contact

For further questions about this report or other diversity, equity, and inclusion efforts, please reach out to the Committee at [deicommittee@aasm.org](mailto:deicommittee@aasm.org)



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[aasm.org/diversity-and-inclusion](https://aasm.org/diversity-and-inclusion)