

INTRODUCTION

- Surgery continues to be one of the least diverse specialties
- Many minoritized residents train in isolation
- Minoritized residents face higher burnout and attrition

METHODS

Recruitment

- Affinity-based societies
- National conferences
- Social media

Baseline Survey

- Demographics
- Validated belonging scale
- Maslach Burnout Inventory
- Thoughts of attrition
- Suicidality
- Career satisfaction

Identity-Concordant Matching

- Race/ethnicity
- Gender/sexual orientation
- Residents were grouped outside their home programs to support psychological safety

RESULTS

111 Residents Enrolled | March 2026
Nationwide Pilot

PGY	101	64% Female
PGY 1	24 (24%)	
PGY 2	14 (14%)	
PGY 3	14 (14%)	
PGY 4	10 (9.9%)	
PGY 5	10 (9.9%)	
Research	29 (29%)	20% LGBTQ+
Race/Ethnicity	111	19% Parent or guardian with HS diploma or less
Asian	35 (32%)	
Black	33 (30%)	
Latino	21 (19%)	
Other	18 (16%)	
White	4 (3.6%)	

Belonging & Outcomes

41 Median belonging score (range 15–55)

47 Median belonging score (national)

↓ Lower than previously established national norms for general surgery residents

31% reported sharing their racial/ethnic identity with one or less people in their program **N = 99**

PROGRAM DESIGN

18 Peer Groups

Group Structure

- 1 senior peer mentor + 1–5 junior
- WhatsApp group chats
- Quarterly all-program calls

Mentor Training

90-min virtual session on active listening & peer support and crisis management.

Monthly Discussion Prompts

- Topics informed by survey interest
- Prompts sequenced for increasing vulnerability
- Validated accelerated-intimacy paradigm questions

Professional development	Research
Fellowship	Identity
Burnout	Family planning

