Ensuring Excellence
Moving the Needle on Diversity & Inclusion in Academic Medicine

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What We Mean by Diversity

- The richness of human differences and similarities

- Socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, age, education, personality, thinking styles, fields of interest, life experiences and more
What We Mean by Inclusion

A climate where . . .

• All members of our faculty, learners and staff experience a true sense of belonging, feel that they matter, can thrive and contribute their best work

• Each person feels valued, heard and respected

• Each person is recognized and able to apply their unique talents

Evolution of Diversity & Inclusion in Academic Medicine

Diversity 1.0
• Righting past wrongs
• Removing barriers
• Diversity in addition to excellence
• Separate mission

Diversity 2.0
• Cultural competence
• Fostering success
• Diversity contributes to excellence
• Parallel mission

Diversity 3.0
• Inclusion
• Attaining quality healthcare for all
• Integral to excellence
• Integral to mission

United States 2017 Population Statistics

- White-Americans: ~197 million (60.7%)
- Hispanic/Latin-X Americans: ~58 million (18.1%)
- Black/African-Americans: ~44 million (13.4%)
- Asian-Americans: ~19 million (5.8%)
- Native-Americans: ~4 million (1.3%)
- Native Hawaiian or other Pacific Islander: ~646,000 (0.2%)

Race & Ethnicity: The Changing U.S. Landscape

Citation:
Table 6. Percent of the Projected Population by Race and Hispanic Origin for the United States: 2010 to 2050 (NP2008-T6)
Source: Population Division, U.S. Census Bureau
Release Date: August 14, 2008
May 17, 2012
The United States has reached a historic tipping point -- with Latino, Asian, mixed race and African American births constituting a majority of births for the first time, the U.S. Census Bureau reported Thursday.

Minorities made up about 2 million, or 50.4%, of the births in the 12-month period ending July 2011, enough to create the milestone; up from 49.5% in the 2010 census.

While economic and political elites remain essentially white and primarily male, the upcoming generations will be more diverse and could have an increasingly broader view of issues.

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**Medical School Demographics - Race/Ethnicity & Gender**

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<tr>
<td>U.S. Medical Schools</td>
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<tr>
<td>US Schools</td>
<td>67%</td>
<td>33%</td>
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Data are drawn from AAMC Faculty Roster, Dec. 31, 2017.

Note: Hispanic encompasses 5989 Hispanic and 6015 mixed race Hispanic faculty.
Faculty of unknown race (n=8866) or Other race (n=732) are excluded from these calculations.
URMs in Academic Medicine

- Low representation relative to demographics
- Longer at lower rank
- Few senior faculty and administrative leaders
- NIH funding at lower rate
  - Kington et al Science, 2011
- Lower career satisfaction
- Higher social isolation
- Higher attrition
- Expressed desire to work in underserved populations
- More likely to conduct disparities research
- Reflect diversity of patient population

AAMC (multiple sources); Nivet 2008; Science 19 Aug 2011: Vol. 333, Issue 6045, pp. 1015-1019
DOI: 10.1126/science.1196783 Race, Ethnicity, and NIH Research Awards; Cropsey 2008; Mahoney 2008; Peterson 2004.
Gender in Academic Medicine

- For over 25 years, women at least 40% of U.S. medical students.
- 2018 more women than men enrolled in U.S. medical schools.
- Women now comprise 20% of full-time faculty.
- Women not advancing at a similar rate to the highest levels.
- Women account for only 18% of hospital CEOs.
- 16% of all deans and 15% of department chairs are women.
- Women in the minority when it comes to senior authorship (10%) and Editors-In-Chief (7%) of prestigious medical journals.

Great Minds Think Differently!

- *The Diversity Bonus* by Scott Page explains that diverse groups find more innovative solutions to complex problems than do homogeneous groups.

- Diverse groups bring different voices and perspectives that can help solve many of the problems facing academic medicine.
National Tools: AAMC

• AAMC Diversity 3.0 Learning Series
  – Online video resources on a range of diversity and inclusion topics including guidance on institutional strategic planning and culture and climate assessment
  – https://www.aamc.org/initiatives/diversity/learningseries/

• AAMC Diversity Facts & Figures
  – AAMC provides online access to physician workforce data as well as online reports of detailed statistical information on race, ethnicity, and gender patterns in U.S. medical education.

National Initiatives:
AAMC Career Development Programs

• Minority Faculty Leadership Development Program
  – For junior faculty (senior clinical and research fellows, instructors, and assistant professors) and post docs (MD, DO/PhD and PhD) who aspire to leadership

• Mid-Career Minority Faculty Leadership Development Program
  – For mid-career faculty aspiring to leadership positions in academic medicine. Uses a culturally responsive approach to offer skill building and strategies

• Early Career Women Faculty Leadership Development Seminar
  – For women physicians and scientists holding medical school faculty appointments and considering leadership positions

• Mid-Career Women Faculty Leadership Development Seminar
  – For women physicians and scientists holding medical school appointments at the associate professor level, and holding leadership positions within their discipline, department or institution.
NIH: Evidence-based Strategy for Diversity

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"recruiting and retaining a diverse set of minds .... vital to harnessing the complete intellectual capital"

- Challenge 1: Among Scientists, What Is the Impact of Diversity on the Quality and Outputs of Research?
  - Companies in the top quartile for racial and ethnic diversity are 30% more likely to have financial returns above industry medians
  - Social science: cognitively diverse groups are more effective at solving complex problems and innovating
  - Physician diversity improves access to care for underserved groups
  - Papers coauthored by ethnically diverse contributors lead to greater contributions to science as measured by impact factor

- Challenge 2: Which Evidence-Based Approaches to Training and Persistence in Biomedical Research Work? And in Which Contexts?
  - Intense research experiences coupled with self-reported “effective mentoring” are essential for persistence in biomedical research careers.
  - October 2014, the NIH announced the first awardees of a 5-y, $31 million Enhancing Diversity in the NIH-Funded Workforce

- Challenge 3: Identifying Psychological and Social Factors That Mitigate Individual and Institutional Barriers to Workforce Diversity
  - Impact of cultural, social, and psychological factors in the pursuit of science careers
  - Scientifically sound data support the efficacy of interventions to mitigate bias and enhance sense of belonging

- Challenge 4: Develop a Scalable Strategy to Effectively Disseminate and Sustain Diversity Within the Nationwide Scientific Workforce
  - Diversity hubs of innovation,” situated regionally across the nation.

Hannah A. Valantine and Francis S. Collins, Proceedings of the National Academy of Science NAS PNAS October 6, 2015 112 (40) 12240-12242

NIH Diversity Supplements

- New investigators are the innovators of the future.
- NIMHD views the supplement program as an opportunity to contribute to the new investigator cohort.
- A mentored research experience for early investigators provides a foundation for the development of a well-trained and diverse research.
- Research Supplements to Promote Diversity in Health-Related Research (PA-12-149)
  - NIH Diversity Supplements are an important approach to supporting underrepresented minority, disabled trainees and young faculty who are interested in research.
  - High school through faculty
  - Benefits for candidate and benefits for PI
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Duke University School of Medicine

Duke: Multipronged/layered D and I Strategy

- **Leading from the top**
  - The School’s first Chief Diversity Officer (CDO) is a member of Dean’s Leadership Team to guide the school’s strategy
  - Leadership engagement and commitment
    - Speakers program and workshops
  - Chairs required to develop and implement diversity strategic
    - Held accountable in annual metrics

- **Enhancing/improving our search efforts**
  - Diverse representation on all major leadership search committees
  - Implicit bias education early in the search committee process

- **Developing Champions**
  - Inclusion Council
  - Formalized D&I leaders in each department/center/institute with defined role, structure, protected time/compensation
• Enhance faculty success
  – Faculty development programs: Women & URM
• Data driven
  – AAMC Diversity Engagement Survey
    • measure perceptions of inclusion
    • deliberate focus on culture/climate
    • Transparency and demographic data analysis tool
• Enhancing the pipeline
  – Focused admissions strategy: Brenda Armstrong MD, Dean of Admissions 21 years
  – Sponsor pipeline programs to enrich and grow talent
• Workshops and educational opportunities
• Value statements
  – Reward & recognition for diversity and inclusion work

...continued

Chief Diversity Officer (CDO) & Other Strategic Appointments

• Judy Seidenstein named inaugural CDO in 2011, leading the School’s Office of Diversity and Inclusion
  – 20+ years of experience leading D&I strategies in corporate, government, academia, healthcare, non-profit settings
• Kenny Railey, MD appointed Assistant Diversity Officer in 2016
• Kevin Thomas, MD appointed Assistant Dean of URM Faculty Development in 2017
Beyond the CDO…A Question of Leadership

• All leaders must be engaged as the “architects” of an inclusive culture

• We chart the course
Leadership Accountability Genesis and Evolution of the Diversity Accountability Metric

- 2013: Develop A Diversity Strategic Plan (DSP) for your Department Center/Institute
- 2014: Implement Your Diversity Strategic Plan (DSP)
- 2015: Demonstrate Progress on Your Diversity Strategic Plan (DSP)
- 2016: Review (and renew) the goals identified in unit Diversity Strategic Plan (DSP)
  - Define a clear set of metrics
  - Use at least one of available data sources to inform the ongoing enrichment of your diversity strategic plan:
    - 2016 AAMC Diversity Engagement Survey
    - Academic Council's Institutional Diversity Task Force Report
    - 2015 Faculty Survey
    - Focus Groups
  - Communicate your DSP and seek feedback/input both from within your department and from strategic advisory committees
Do you ever wonder why this happens?

Search Committee Development

- Deliberate and intentional investment in educating search committees
  - Charge and training in implicit bias
- Introduce tools to prompt self-examination (Harvard’s Implicit Association Test)
- Review, anticipate and discuss critical steps in search process that provide fertile ground for bias; engage in discussions of “FIT”; share pertinent research
- Incorporate structure, process and consistency (e.g. same interview questions to each candidate) to help mitigate bias
Inclusion Council

Advisory “think tank” for ODI and senior leadership – faculty, staff and student representatives from units and educational programs

Liaisons and consultants for implementing Diversity Strategic Plans

Share best and promising practices and opportunities

Work as change agents, ambassadors, and champions of diversity and inclusion
Other strategies at Duke SOM. . .

Data Informs Strategy

- Explore key qualitative and quantitative data sources (Gather & Define)
- Compare and review for trends, gaps and best practices (Analyze)
- Inform, support and influence diversity climate change efforts (Influence)
Inclusion Survey

- Conducted AAMC Diversity Engagement Survey (DES) in 2013 and again in 2018 to assess culture and climate in the SOM
- Data used to inform unit-level strategic planning

Dean of Admissions

1996 (8%)-2017

“to find those students who were capable of brilliance and those students who were capable of enormous humanism.”

Brenda Armstrong, MD

2018 entering MD and MD/PhD Class

- 28% under represented minority students (36)
- 54 Men
- 75 Women
- Representing 35 states & 70 schools
Pipeline and Engagement Programs: K-Graduate

- Building Opportunities & Overtures in Science and Technology (BOOST)
- Biosciences Collaborative for Research Engagement (BioCORE)
- Summer Medical and Dental Education Program (SMDEP)
- Summer Research Opportunities Program (SROP)

Pipeline and Engagement Programs: Office of Biomedical Graduate Diversity

- Recruitment, professional development and support of underrepresented PhD students
- Five years of success in increasing applicant and matriculant numbers
Pipeline and Engagement Programs: Visiting Clinical Scholars Program

In partnership with our clinical departments, the Office of Diversity & Inclusion awards scholarships to 4th year URM medical students to support their participation in a clinical elective

- Scholars participate in a 4-week clinical elective and engage with members of the Duke and Durham communities coordinated
- Have hosted 18 Visiting Clinical Scholars with clerkships in 13 specialties
- Scholars have matched here at Duke in Medicine, Orthopedic Surgery, and Psychiatry

Engaging our Community: Conversations about Race

Ongoing series providing a forum to engage in crucial conversations, discuss the “undiscussables” and deepen understanding about race through exchange of student, faculty and staff perspectives
Reward and Recognition

- Annual award in honor of Dr. Michelle P Winn MD
- Recognize individuals who have made significant contributions to diversity and inclusion.
- Award eligible to faculty, residents, staff, and students

Mentors and Sponsors

- Both are important
- Sponsorship should not be confused with mentorship
- Sponsorship is the public support for the advancement of someone who has untapped leadership potential
Duke University School of Medicine Leadership Development

Academic Development, Advocacy, Networking, Coaching & Education for Underrepresented Populations (ADVANCE UP)

An innovative Faculty Development Program that aims to provide unique enrichment activities designed to focus on challenges underrepresented faculty in medicine (URiM) encounter in academic medical centers.

ADVANCE UP create a network of scholars that will enhance the sense of community among underrepresented faculty, foster timely promotion, and increase representation in leadership positions.

ADVANCE UP Cohort Testimonials

“The most important part of the program for me was the peer support…..”

“I have achieved clarity on the steps I need to take to advance my career.....developed a network of interesting and exceptional peers ...who I can call on to help me navigate my career.”

“ADVANCE-UP has certainly met my expectation of engaging with others at a similar career level and learning together how to navigate”
Academic Leadership, Innovation, and Collaborative Engagement (ALICE)

Year-long program for mid-career women faculty at Duke University School of Medicine. Focuses on personal leadership skills designed to help individuals gain greater management and communication skills needed to navigate leadership in academic medicine.

Duke Center for Research to Advance Health Equity

REACH Equity

- Established in September 2017
- Funded by NIMHD (U54)
- One of 12 Centers of Excellence on Minority Health and Health Disparities
- Multidisciplinary
- Duke Institutional Support
  - Chancellor
  - School of Medicine
  - School of Nursing

Kimberly Sherrell Johnson MD
**REACH Equity: Promoting Workforce Diversity & Addressing Disparities**

**Theme:**
Develop and test interventions that reduce racial and ethnic disparities in health by improving the quality of patient-centered care in the clinical encounter.

**Pipeline Programs to Promote Diversity in the Research Workforce**
- Students, trainees, and faculty
- Career Development Awards
- Research Scholars (trainees)
- Research Vouchers
- Transdisciplinary Think Tanks
- 3rd Year Medical Student Research
- Summer Undergraduate Program

**Clinical Research**
3 research projects testing interventions to reduce disparities in the clinical encounter:
- Implicit bias training
- Provider communication coaching
- App-based needs assessment of patients/caregivers with feedback to team

**Health Disparities Research and Education Programs**
- Research Works in Progress: Bi-monthly health disparities seminars
- Health Disparities Research Curriculum: Program teaching health disparities research principles and skills to junior investigators

**Leadership Tool**
Co-created an innovative Faculty Diversity Demographics Tool for Department Chairs to better inform diversity strategic plans through the use of robust data and metrics.
Opportunities

• “Stay The Course” in striving to diversify our faculty and leadership – it’s a marathon, not a sprint
• Develop creative strategies for measurement that expand beyond numbers/representation
• Maximize opportunities to engage with, mentor/coach and sponsor people who are unlike you (not the “usual suspects”)
• Equip people to engage in uncomfortable but important conversations
• Cultivate a culture of “Upstanders” versus Bystanders
• Reframe the false but pervasive narrative that focusing on diversity means lowering standards
• Engage white men and other majority group members as full partners and stakeholders in Diversity & Inclusion
• Attend to multiple dimensions of diversity - intersectionality (gender, sexual orientation, ethnicity, nationality, class etc.)
• Hold leaders (and everyone) accountable for bias/discrimination/exclusion
• Keep moving the needle – standing still is not an option

Thank you
Judy Seidenstein, DO
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Jill Boy, Director of Communications
Kevin Thomas MD, Assistant Dean
URM Faculty Development
Laura Svetkey MD, Vice Chair DOM
Kim Johnson MD, PI of REACH
Ann Browns MD, Vice Dean for Faculty