Office of Inclusion and Diversity

2015-2016 Year in Review

Highlights of the Progress on the Perelman School of Medicine Five Year Diversity Plan

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Dear Faculty, Students and Staff:

I’m pleased to commend this report to each and every member of our academic community. It documents the significant strides we are making to increase diversity and foster a culture of inclusion within the Perelman School of Medicine (PSOM).

Inclusion and diversity are core values at Penn Medicine, crucial to stimulating innovation and creating impact, whether in research, training, or improving the lives of our patients. To support our efforts in this domain, we established the Office of Inclusion and Diversity (OID) in 2013. Led by Eve J. Higginbotham SM, MD, it works to strengthen all of our mission areas by fostering a vibrant inclusive environment that fully embraces diversity. Since its inception, the OID has worked jointly with academic offices, including the Office of Medical Education, Graduate Medical Education, and Faculty Affairs, as well as clinical departments, health system administrators, and others to accomplish this important goal.

As this report documents, we have made strides in increasing the diversity of our community. In FY 2012 women were 29% of the Standing Faculty; all minorities, 21.6%; and underrepresented minorities (URM), 5.2%. In FY 2016, all groups are better represented: women are 32% of Standing Faculty; minorities, 24.3%; and URM, 7.0%. Student representation within PSOM has improved correspondingly. Focused efforts enabled us to meet FY 2016 recruitment goals for undergraduate medical education, graduate medical education, and graduate studies. Moreover, the numerous programs and initiatives referenced in this report that are working to strengthen the culture of health equity and inclusion in our community are also evidence that we are moving in the right direction.

I am pleased with the progress documented in the pages that follow. The gains we are making should inspire us to further progress. Indeed, we will not stop until the values of inclusion and diversity are fully realized in our community, so that faculty, students, and staff of all backgrounds have total respect for one another’s differences and can achieve their highest potential.

With best regards,

J. Larry Jameson, MD, PhD
In this second annual report from the Perelman School of Medicine (PSOM), Office of Inclusion and Diversity (OID), we are pleased to recognize the fifth anniversary of the University of Pennsylvania Diversity Plan. Launched in 2011, this plan provided each of the 12 schools comprising the university community, the path forward to affirmatively respond to President Gutmann’s Call to Action. Thus, this report aims to summarize the progress over the last five years, in addition to providing an update since last year related to the work of the PSOM Community in its progress towards a more diverse and inclusive community. As a newcomer to the community in 2013, based on multiple conversations and review of data, I agree with Dean Jameson that there has been progress made since 2011. However, I agree with those who also state we have more work ahead of us. Ultimately, the reader of this report is the judge, and your voice is important to us as we begin to craft our path for the next two to five years. Many of you responded to our invitation to “Tell Us Your Story” in the Spring of 2016; your perspectives are currently shaping the next set of strategic priorities. We heard you and now the work begins again. Our collective experience neither ends in a moment nor begins in another, but is continuously molded by the symphonic concert of our many voices that shape our lives and our culture, blending into a harmonious tone punctuating many moments now and for generations to come.

This year we used a different approach to frame the report. After providing a brief historical overview about the University’s plan and the launch of the Office of Inclusion and Diversity, we have reported on selected activities around the goals of recruit, retain, and reaffirm, the primary goals of PSOM’s efforts to advance diversity. Take a look at the Table of Contents as your guide to those areas that most interest you. After reading this report, give us your feedback. Let us know what you are thinking as we collectively build a more inclusive community. You can contact OID by emailing us directly at oid@mail.med.upenn.edu.

Thanks to those of you for your words of encouragement, to those of you who provided your time and talent to the effort, and those who have extended your warm wishes and support over the last three years.

With warmest regards,
Eve J. Higginbotham SM, MD
In June of 2011, the University of Pennsylvania issued its Action Plan for Faculty Diversity and Excellence. The following is a summary of that initial statement:

In 1993, Penn appointed the first woman to lead the University (and the first woman to lead any Ivy League institution), approximately 21% of Penn’s standing faculty were female and 8.4% were ethnic minorities. Under the leadership of three successive women presidents, significant progress has been made in expanding the representation of women on Penn’s standing faculty, although challenges remain in raising the proportion of female faculty in science, technology, engineering, mathematics, and medicine.

Similarly, we have made strides in increasing the number of minorities on Penn's faculty. In the fall of 2010, 30% of Penn's standing faculty were female and 17% were ethnic minorities. Now, in 2016, 32% of the standing faculty are female and 24% are ethnic minorities. Dramatic advances have also been made in increasing the diversity and excellence of Penn's student body. Presently 53% of Penn undergraduates and 53% of graduate and professional students are female, and 32% of undergraduates and 20% of graduate and professional students are U.S. minorities.

While we have made progress, the results fall short of our aspirations. We are more determined than ever to recruit and retain faculty whose excellence and diversity allow us to prepare our students to become leaders in a global society. In partnership with the Deans and other senior university leaders, we will increase our efforts to foster a diverse, inclusive, and equitable campus, where scholars, students, and staff from all backgrounds can do their best work. Supporting a superb, inclusive faculty is among Penn's highest priorities, and only by doing so can we move from excellence to eminence in all of our core endeavors.

The pages that follow constitute the response to the University plan.

This plan assisted Penn to move more effectively toward the goals of:

- Building a more diverse faculty, whose composition reflects the pool of exceptional, qualified applicants nationally in all fields.
- Creating a more inclusive campus community, where all feel welcomed, supported, and have equal access to networks for mentoring and research.

Perelman School of Medicine Office of Inclusion and Diversity (OID)

Dean J. Larry Jameson established the Office of Inclusion and Diversity (OID) in the Perelman School of Medicine (PSOM) in 2013, based on faculty input during the strategic planning process. The mission of OID, led by Eve J. Higginbotham SM, MD, is to strengthen the quality of education, produce innovative research, and support the delivery of high-quality patient-centered care by fostering a vibrant inclusive environment that fully embraces diversity. Since its inception, the OID has worked jointly with academic offices, including but not limited to, the Office of Medical Education (Gail Morrison, MD), Graduate Medical Education (Jeffery Berns, MD), Faculty Affairs (Victoria Mulhern), clinical departments, the University of Pennsylvania Health System, and others to accomplish the mission. Dr. Higginbotham is joined by her current staff, Jaya Aysola, MD, Assistant Dean of Graduate Medical Education and Research Director, Inclusion and Diversity, Ms. Kya Hertz, Operations and Executive Assistant, Ms. Corrinne Fahl, Public Affairs and Program Coordinator and Karen Grasse, MS, MPhil, Associate Director, Faculty Affairs and Professional Development and Diversity Search Advisor Program. Together they work to keep the office aligned with its goals, which are to recruit the best talent, to retain ensuring the success of a diverse community of faculty, staff, and students, and to reaffirm the benefits of inclusion and diversity.
As with in any strategic initiative, there is a need to have a group of key stakeholders who will contribute to the framing of strategy and continuous review of the OID initiatives. Appointed by Dean Jameson, these faculty, staff, and students are committed to the goals of the Office. Meetings are convened quarterly during the calendar year.
Mission of the OID:
To strengthen the quality of education, and to produce innovative research and models of healthcare delivery by fostering a vibrant inclusive environment and fully embracing diversity

Updated OID Balanced Scorecard 2016-2018

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<thead>
<tr>
<th>STRATEGIC PRIORITIES</th>
<th>PERFORMANCE MEASURES</th>
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<tr>
<td><strong>Stakeholders</strong></td>
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<tr>
<td>1. Increase student and faculty satisfaction</td>
<td>1. Increased satisfaction as measured by MSGQ and faculty cultural audit</td>
</tr>
<tr>
<td>2. Increase in women and diverse faculty compared to 3-year rolling averages</td>
<td>2. Net Increase in number of women by 40, URM faculty by 10</td>
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<tr>
<td><strong>Financial Stewardship</strong></td>
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<tr>
<td>1. Enhance the infrastructure to support the acquisition of K and R awards among fellows and junior faculty</td>
<td>1. 10% increase in K and R awards submitted compared to FY13</td>
</tr>
<tr>
<td>2. Establish the benefit of investing in faculty who have protected time and whose development needs are actively supported</td>
<td>2. At least one new grant received by at least three actively mentored faculty members by the end of FY18</td>
</tr>
<tr>
<td>3. Develop the Special Interest Group for Health Disparities/Health Equity to build on an academic community of scholarship</td>
<td>3. At least one new grant received by at least three actively mentored faculty members by the end of FY18</td>
</tr>
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**Internal Process**
1. Broadcast the principles and training related to holistic admissions search processes
2. Enhance transparency while maintaining confidentiality with regards to key metrics such as space and rates of promotion
3. Establish practice of doing exit interviews
4. Redesign Diversity Search Advisor program to enhance impact

**Organizational Capacity**
1. Develop a searchable database of potential faculty candidates
2. Increase formal unconscious bias training within the Penn Community

1. Database established and used in at least 5% searches by FY18
2. Double the number of workshops and increase number of attendees to at least 100.
Recruit

“Recruit the best talent” is the first goal of the OID. The approach to recruitment recognizes the circuitous path to faculty status, which differs from other pipelines leading to the faculty rank across academia. Figure 1 provides a graphic outline of these paths. The sections that follow highlight the work of many individuals and groups focused on specific milestones related to these paths. Two OID-supported programs are also included: SUPERS@PENN and SUMR Scholars. Contributions from the Provost Office are important to this effort, as evidenced in the sections entitled Faculty Opportunity Fund and Presidential Professorships (See pages 11-12). Finally, connecting with key national organizations such as the National Hispanic Medical Association and the National Medical Association provides the OID the opportunity to expand its applicant pool. These represent a small portion of the efforts underway at the Perelman School of Medicine.

Faculty Pipeline Pathway

The diagram below (Figure 1) illustrates the pathway to developing diverse faculty in the Perelman School of Medicine, along with the supportive programs and infrastructure that are essential to ensure academic success. These supportive programs known as “anchor programs” are included here for their collaborative efforts to enhance diversity and inclusion at the University of Pennsylvania. These programs are considered anchor programs because of their faculty leadership, their impact on at least two touch points in the pipeline, and their acquisition of external funding to meet their goals. Also included in Figure 1 are specific programs focused on a development milestone point in the pipeline, such as the Program for Diversity and Inclusion, which has a primary focus on undergraduate medical education.

FIGURE 1. THE PIPELINE TO DEVELOPING DIVERSE FACULTY

UME: Undergraduate Medical Education
BGS: Biomedical Graduate Studies
AWSM: Association of Women Student MDs-PhDs
BPP: Biomedical Postdoctoral Programs
GME: Graduate Medical Education
SUPERS@PENN

SUPERS@PENN is a ten week summer research program hosted by the Department of Radiation Oncology at the Perelman School of Medicine (PSOM). The program has been funded by the NCI since 2010 and the PSOM has provided additional support since 2015.

The primary goal of the program is to provide talented and motivated undergraduates with an individualized science-based learning curriculum. The core component of the program is the hypothesis-driven laboratory research experience. Students are paired with faculty mentors from the Departments of Radiation Oncology (Biology and Physics), Radiology (Imaging) or who are members of the Radiobiology and Imaging Core of the Abramson Cancer Center (Engineering, Chemistry, Pharmacology, etc.). This large pool of mentors allows them to place each student into a research laboratory based on their academic major and general research interests. In addition to their research project, students participate in didactic course that provides them with a foundation in cancer biology, radiation biology, radiation physics and math, and cancer imaging. Figure 2 illustrates the outcomes of every student who has participated in SUPERS@PENN since the first class in 2010.

SUMR Scholars

Penn’s Summer Undergraduate Minority Research (SUMR) program is an endeavor by the Leonard Davis Institute of Health Economics (LDI) and the Health Care Management Department of the Wharton School to provide underrepresented minority undergraduate students, or anyone who is interested in an opportunity to explore the exciting field of health services research. SUMR began in 2000 with 3 participants as a way to address the current under representation of minorities in fields that inform health care practice and policy through a 12-week summer research internship. SUMR scholars are selected annually from the highly competitive national applicant pool by Penn faculty committee. Each year, PSOM faculty sponsor and mentor SUMR Scholars. A research symposium features the scholars research projects at the end their internship. SUMR 2016 is the 17th Cohort with 19 participants. Joanne Levy, Deputy Director of LDI coordinates the SUMR program.

The Office of Inclusion and Diversity supported three SUMR Scholar Students in summer 2016; Kareha Agesa of Denison University, Ana Bonilla Martinez of Rutgers University, and Carlos Carmona of the University of Pennsylvania (pictured at right).

Biomedical Graduate Studies

Biomedical Graduate Studies (BGS) was established in 1985 and serves as the academic home within the University of Pennsylvania for ~750 students pursuing a PhD in the basic biomedical sciences. Although BGS is housed within the Perelman School of Medicine, it is composed of more than 650 faculty members across seven Penn Schools and several associated Institutes. A major BGS objective is to provide research training opportunities to students from populations that have traditionally been underrepresented in science, including those who are from underrepresented minority groups or are disadvantaged or disabled (Figures 3 and 4).

Arnaldo Diaz, PhD, Adjunct Assistant Professor of Pharmacology and Assistant Dean for Research Training Programs leads BGS minority development efforts in research training. The PSOM committed funds so that he can spend at least 75% of his effort on underrepresented affairs and recruiting. BGS maintains a variety of outreach programs to recruit underrepresented students into the doctoral and non-doctoral programs. In addition to attending national meetings such as the Annual Biomedical Research Conference for Minority Students (ABRCMS), Society for Advancement of Chicanos/Hispanics and Native Americans in Science (SACNAS), and Historical Black Colleges and Universities – Undergraduate Programs (HBCU-UP), Dr. Diaz attends graduate school fairs and visits regional colleges and universities.
Over the past 5 years, an average of 21 URM students per year enrolled in the PhD programs (not including the MD/PhD program), representing around 24% of the incoming class of training-grant eligible (TGE) students. The yield on offers to URM graduate students (45%) is comparable to the yield on offers for the remaining TGE student population (37%). The credentials of URM students are excellent: for students enrolling in fall 2016, the averages are GPA (undergraduate) 3.69, GRE Verbal 67%, GRE Quantitative 57%, and GRE Writing 4.15; these are comparable to the credentials of non-URM TGE students. URM students’ time-to-degree rates, retention rates, and postgraduate appointments are also indistinguishable from those of non-URM students. In 2015 and 2016, disability information was removed from the graduate application, so unlike previous years, the total number of Diversity Trainees consists only of URMs, and does not include applicants who reported a disability.

The 2015 Medical School Graduation Questionnaire (MSGQ) for the PSOM

The results of the 2015 survey show several improvements when compared to 2013 (Figures 5–7). Based on a 5-point Likert scale (1 = least satisfied to 5 = very satisfied), respondents noted their overall satisfaction with the following aspects:

To the item, “Overall, I am satisfied with the quality of my medical education,” the MSGQ results showed a 0.1% increase from 2013 to 2014 (4.5 to 4.6, respectively), and held steady in 2015. Moreover, when compared to national averages for all schools, PSOM satisfaction scores were 0.3 percentage points higher, thus indicating that PSOM is progressing well.

To the item, “My knowledge or opinion was influenced or changed by becoming more aware of the perspectives of individuals from different backgrounds,” the MSGQ results showed PSOM increased 0.2 % from 2013 to 2014, and remained constant in 2015.

To the item, “The diversity within my medical school class enhanced my training and skills to work with individuals from different backgrounds,” the MSGQ results indicate that PSOM increased 0.2% from 2013 to 2014, and remained constant in 2015. Additionally, when compared to the national average of U.S. academic medical schools, PSOM was 0.3% higher, clearly indicating that we are tracking in the right direction.
Undergraduate Medical Education (UME)

In an effort to increase diversity and inclusion efforts in the school, and to further formalize faculty’s role in the development of diversity and inclusion, the Office of Diversity and Community Outreach in Undergraduate Medical Education underwent a major reorganization in the summer of 2012 with the establishment of the Program for Diversity and Inclusion (PDI). Concurrent with the organization of the PDI, Horace DeLisser, MD, was named the Associate Dean for Diversity and Inclusion for medical students.

Housed within the Academic Programs Office of PSOM, the PDI continues to enhance and strengthen existing efforts, and develop new programs and services for all medical students, thereby making our community more united and programs more available across the student body.

The goals of the program are to: (i) promote and support a diverse medical student body; (ii) support student-led cultural affinity groups; (iii) foster the emotional wellness of students; and (iv) facilitate the participation of students in community health and engagement. The results of these efforts can be seen in Figures 8 and 9.

Council for Diversity and Inclusion (CDI)

To provide faculty leadership and responsibility for accomplishing these goals the Council for Diversity and Inclusion (CDI) was established. They are:

- **Horace DeLisser, MD**, Associate Dean for Diversity and Inclusion, and Associate Professor of Medicine
  Dr. DeLisser is involved in overall aspects of the PDI and works closely with the Associate Dean for Admissions to support diversity recruitment.

- **Cindy Christian, MD**, Assistant Dean for Diversity and Inclusion, and Professor of Pediatrics CE
  Dr. Christian works to expand community-based training sites for students as well as develop additional opportunities for student outreach to underserved populations.

- **Benoit Dubé, MD**, Assistant Dean for Diversity and Inclusion, Associate Professor of Clinical Psychiatry and Clerkship Director
  Dr. Dubé works closely with the Office of Student Affairs to oversee current wellness initiatives and develop new projects. He also brings to the CDI his special expertise in supporting LGBT students.

- **Roy Hamilton, MD, MS**, Assistant Dean for Diversity and Inclusion and Assistant Professor of Neurology
  Dr. Hamilton focuses on facilitating the capacity of cultural affinity groups in PSOM. In addition, he serves as faculty advisor to the Pipeline Initiatives for underrepresented high school students and works closely with Admissions to support diversity recruitment.
Anchor Program: Alliance of Minority Physicians (AMP)
Iris Reyes, MD; Paris Butler, MD, MPH

AMP’s mission, as developed by founding Director Dr. Iris Reyes, is to develop leaders in medicine through active recruitment, career development, mentorship, networking, and community outreach towards faculty, house staff, and medical students underrepresented in medicine (URM) at the University of Pennsylvania Health System, Children’s Hospital of Philadelphia, and PSOM.

Under the leadership of Paris Butler, MD, Assistant Professor CE of Surgery, AMP has developed a robust recruitment program. He has partnered with Jeffrey Berns, MD, Associate Dean of Education and Jaya Aysola, MD, MPH, Assistant Dean of Graduate Medical Education (GME) to implement a process specifically targeting competitive prospective URM applicants to UPHS residency programs. In addition to working closely with the GME leadership, Dr. Butler has presented AMP’s recruitment plan and available resources to the program directors and coordinators during their meetings. Additionally, AMP hosted four dinners for URM residency applicants during the interview season. These dinners aim to provide applicants the opportunity to engage with the URM community at UPHS and CHOP in an informal setting.

AMP holds an annual gala in the spring to celebrate their members, as well as a welcome reception for all new URM faculty, housestaff, residents, and medical students in the fall.

Graduate Medical Education (GME)
Graduate Medical Education at the University of Pennsylvania and affiliated hospitals provides training in over 70 Accreditation Council for Graduate Medical Education (ACGME)-accredited specialties and subspecialties. We offer a full range of graduate medical training in a region that leads the nation in providing quality health care. We hereby commit ourselves to offering high quality graduate medical education training programs that will provide our house staff the opportunity to become fully proficient in their chosen specialties, with emphasis on the intellectual, professional, scholarly, and personal growth of our trainees. Our education programs develop the next generations of leaders in medicine and biomedical research. (Figure 10)

FIGURE 10. DIVERSITY OF GRADUATE MEDICAL EDUCATION FY 2016
Projected target or high performance: Increase in percent of URM in GME trainees

<table>
<thead>
<tr>
<th>GME Diversification Goals</th>
<th>Performance YTD</th>
<th>Goal Narrative</th>
</tr>
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<tbody>
<tr>
<td>Meet in FY16 and the FY13-15 rolling average (Threshold)</td>
<td>Goal met</td>
<td>The FY13-15 rolling average is 50</td>
</tr>
<tr>
<td>Increase URM matches by 15% of the FY13-14 rolling average (Target)</td>
<td>Goal met (34)</td>
<td>46 URM matches across all programs</td>
</tr>
<tr>
<td>Increase URM matches by 25% of the FY13-15 rolling average (High Performance)</td>
<td>Goal met (37)</td>
<td>46 URM matches across all programs</td>
</tr>
</tbody>
</table>

URM = African American and Hispanic only
Numbers have been rounded down to closest whole number, e.g. 30 + 15% = 34.5% → 34 for Performance measures

Efforts to increase interviewing and ranking may improve diversity in GME programs. An updated URM questionnaire was distributed to all residency and fellowship programs. The residency training information for 2015-2016:
- Total number of URM interviews in 2016: **262**
- Total number of Penn students matched to residency programs, **31**
- Total number of Penn URM students matched to programs, **3**
- Total number of URM residents and fellows, **127**

To provide faculty leadership and responsibility for accomplishing these goals the following faculty have been invited to assist the GME:
- Jeffrey Berns, MD, Associate Dean of Education and Designated Institutional Official (DIO)
- Jaya Aysola, MD, MPH, Assistant Dean, Graduate Medical Education, and Associate Designated Institutional Officer (DIO) for Inclusion & Health Equity
- Ilene Rosen, MD, Assistant Dean, Graduate Medical Education

GME focused on the recruitment efforts for 2015-2016 Goals and the number for URM recruitment for 2015-2016 met the Penn Medicine and GME team goal.
Biomedical Postdoctoral Diversity Committee (BPDC)

Since 2008, this subcommittee of the Biomedical Postdoc Council (BPC), supported by Biomedical Postdoctoral Programs (BPP) has cultivated a dynamic leadership team which relies heavily on active member support and allows for varying degrees of leadership experience. The committee’s members have successfully facilitated a number of programs and seminars that have benefited the overall campus community.

The BPDC has also established successful partnerships with graduate student groups such as the Ernest E. Just Biomedical Society, and also has taken part in major campus-wide events such as the Martin Luther King (MLK) Day of Service and program series. Some of the current Diversity Committee endeavors include: (i) an online newsletter to bring awareness to diversity topics and highlight under-represented postdocs, students, and faculty from biomedical research programs; (ii) a bi-monthly seminar series, “Science Now”, including research highlights of a selected under-represented postdoc or graduate student speaker and (iii) a newly established two-tiered mentoring program, “Scientific Mentoring Program” (SMI), which provides underrepresented postdocs an opportunity to gain vital experience as mentors under the “Graduate Mentoring Program” (GMP), or as mentees with participating Perelman School of Medicine faculty under the “Diverse Scientists Development Program” (DSDP).

In efforts to further “diversify” the committee, the BPDC has also started an initiative which will develop more programs geared towards the needs of Native Americans, women, and the lesbian, gay, bisexual, transgendered, and questioning (LGBTQ) community. Initial efforts have thus far resulted in greater female postdoc participation in the BPDC.

Dr. Susan Weiss, Associate Dean for Postdoctoral Research Training and Director of BPP, represents the interests of the BPP community by serving as a member of the Advisory Council of the Office for Inclusion and Diversity. Mary Anne Timmins, MEd, serves as the Administrative Director for BPP.

Faculty Opportunity Fund

The Faculty Opportunity Fund (FOF) was communicated broadly throughout the PSOM and has been received by department chairs as positive encouragement that the University is truly invested in the Diversity initiative for faculty recruitment, development, and retention. In fiscal year 2016, twelve requests were received and eleven were approved. (Figure 11)

In the past academic year, we have made progress with regard to the recruitment of women and minorities (Figure 12). As of the July 28, 2016 PSCS meeting, 131 Standing Faculty appointments have been approved by the Provost with an
appointment date 7/1/2015 and after; 53 are women, 47 are minorities and 16 are URM; as a percentage of the total recruitment they are 40%, 36%, and 12% respectively.

Over the past 5 years, PSOM has moved forward in improving faculty diversity. In FY2012, women were 29% of the standing faculty, minorities were 21.6% and URM were 5.2%. In FY2016, all groups have increased in the standing faculty, women are 32%, minorities are 24.3%, and URM are 7.0%.

**Presidential Professorships**

Supported in part by a $2 million grant from the Pew Charitable Trusts, the Presidential Professorships at Penn were established in 2011 as a key feature of the University’s Action Plan for Faculty Diversity and Excellence, an initiative that will help the University recruit, retain, and mentor distinguished and diverse faculty. Presidential Professors are recommended by the deans of Penn’s 12 schools, who can submit a nomination to the Office of the Provost.

There are currently four Presidential Professorships within the Perelman School of Medicine:

- **Benjamin Garcia, PhD**, Presidential Associate Professor of Biochemistry and Biophysics, Perelman School of Medicine, June 1, 2012

- **Chyke Doubeni, MD, MPH**, Presidential Associate Professor-Clinician Educator of Family Medicine and Community Health, Perelman School of Medicine, July 1, 2012

- **Donita Brady, PhD**, Presidential Assistant Professor of Cancer Biology, Perelman School of Medicine, July 1, 2015

- **Ramon Diaz-Arrastia, MD**, Presidential Professor of Neurology, Perelman School of Medicine, July 1, 2016

**Diversity Search Advisors**

The Diversity Search Advisor Program was initiated in July 2012 and has been an integral part of recruitment for the Perelman School of Medicine. There are currently 46 diversity search advisors and 4 lead diversity search advisors supporting 28 departments who review over 200 recruitments annually.

**Diversity Search Advisor Survey**

While the Diversity Search Advisor (DSA)’s specific charge to broaden the pool of diverse candidates for faculty positions and ensure equitable consideration of all faculty candidates through early engagement provides a unique opportunity to diversify the faculty applicant pool at several phases, absent a baseline assessment of the understanding and experience of the DSA’s participating in these searches, our understanding about the DSA program’s effectiveness is insufficient. The Office of Inclusion and Diversity launched a baseline survey to characterize the DSA program. Some of the key results are below (Figures 13-16). The survey also helped to create the Lead Diversity Search Advisor role.

Components of the DSA program evaluation indicate opportunities to enhance the relationship between DSAs and department chairs, and the creation of an ongoing learning community. It was noted that basic science and clinical departments have different recruitment strategies. For example, basic science faculty searches recruit primarily from outside Penn engaging as many as 300 applicants. Both basic science and clinical departments conduct significant outreach and networking at national meetings to women and minority candidates. Based on the evaluation results, the DSA Program is being restructured to increase DSA engagement in the search process, enhance interaction between DSAs and provide greater opportunities for mentoring between seasoned DSAs and less experienced DSAs.
National Hispanic Medical Association (NHMA)

National Hispanic Medical Association provides policymakers, health care providers, and our partners with expert information and support in strengthening health service delivery to Hispanic communities across the nation. The NHMA works closely with the White House, Federal agencies and Congress, the private sector, foundations as well as national Hispanic organizations. As a member of the National Hispanic Leadership Agenda, they meet regularly with Federal officials to hold them accountable on Hispanic issues. NHMA also works closely with the Congressional Hispanic Caucus (CHC) and the Congressional Hispanic Conference Institute (CHLI) on health care policy development. In addition, NHMA partners with corporations, academia, foundations, and coalitions who also advocate on health care delivery, medical education and health workforce leadership and diversity, prevention and public health, and health policy and community-based research for our communities. OID exhibited at the NHMA conference in Spring of 2015.

The National Medical Association (NMA)

The National Medical Association is the largest and oldest national organization representing African American physicians and their patients in the United States. The NMA is a 501(c) (3) national professional and scientific organization representing the interests of more than 50,000 African American physicians and the patients they serve. NMA is committed to improving the quality of health among minorities and disadvantaged people through its membership, professional development, community health education, advocacy, research and partnerships with federal and private agencies. Throughout its history the National Medical Association has focused primarily on health issues related to African Americans and medically underserved populations; however, its principles, goals, initiatives and philosophy encompass all ethnic groups. The Office of Inclusion and Diversity exhibited at NMA for the first time in 2016. This was an opportunity to reconnect with alumni and introduce OID to a larger audience.

DSA Evaluation Summary

Although the response rate was only 50%, there were key takeaways that contributed to the redesign of the program:

1. Although many DSAs reviewed job descriptions, not all were engaged in reviewing the applicant pool.
2. Most DSAs are comfortable in teaching unconscious bias.
3. Most DSAs feel they have had a positive impact on recruiting minority and women candidates.
“Retain a diverse community of faculty, staff, and students” is the second goal of the OID. A supportive climate or institutional culture is an important component to any successful strategy to retain talent. When considering gender and ethnicity, there have been net increases as noted in Figure 17 in the last five years. Faculty development, utilizing both internal and external resources, such as the AAMC is key to these efforts, as well as the work of OID anchor programs. This section highlights several key initiatives.

**Retain**

**FIGURE 17. NET CHANGE OF FULL TIME FACULTY**

**BY GENDER**

- Male
- Female

**BY ETHNICITY**

- Asian
- URM
- White

Association of American Medical Colleges (AAMC)

- **AAMC Minority Faculty Career Development Seminar**: (MinFac) OID co-sponsors two to three junior faculty, with departments, to attend annually. The MinFac Seminar provides participants with real-world guidance and tools for pursuing career advancement in academic medicine, developing key professional competencies, building skills in grant writing and communications, while expanding their network of colleagues and role models. Zelma Chiesa Fuxench, MD MSCE FAAD, Assistant Professor of Dermatology and Christina Twyman-Saint Victor, MD Assistant Professor of Medicine both attended this seminar in 2016.

- **AAMC Early Career Women Faculty Professional Development Seminar**: This popular and highly interactive seminar provides women at the assistant professor or instructor level with the knowledge and skills required to navigate the academic medicine enterprise as well as continue on the path to leadership. This three and a half-day seminar is designed for women physicians and scientists holding medical school appointments at the instructor or assistant professor level, and in the early stages of leadership positions within their discipline, department or institution. Seminar attendees develop academic medicine career building skills such as communication, conflict management, and financial acumen, and employ strategic thinking about their career and leadership development. Sharon A. Lewis MD, Assistant Professor of Clinical Neurology, attended July 2015 AAMC Early-Career Women Faculty Professional Development Seminar.

- **AAMC Mid-Career Women Faculty Professional Development Seminar**: OID offers financial support for several women faculty members to attend annually. This professional development seminar focuses on women physicians and scientists holding medical school appointments at the associate professor level, and holding leadership positions within their discipline, department or institution. The seminar’s three-and-a-half day curriculum is designed to provide mid-career faculty with the knowledge and skills required to continue advancing to leadership roles in academic medicine. Diva D. De León-Crutchlow MD, MSCE, Associate Professor of Pediatrics in Division of Pediatric Endocrinology and Diabetes, and Director of the Congenital Hyperinsulinism Center, attended December 2015 AAMC Mid-Career Women Faculty Professional Development Seminar.

- **AAMC Conference Spring 2015**: The Office of Inclusion and Diversity supported two students, Atu Agawu and Tomas Diaz, who presented “The Influence of URM and Gender Status on Residency Program Choice”.

- **AAMC Conference Summer 2015**: The Group on Diversity and Inclusion (GDI), Group on Faculty Affairs (GFA), and Organization of Resident Representatives (ORR) met at a joint AAMC Conference. The Perelman School of Medicine was represented by OID and FAPD staff; Karen Grasse presented “Close Collaboration between Faculty Affairs and Inclusion and Diversity Offices: A Formula for Success”.

- **AAMC Conference Spring 2016**: The Group on Diversity and Inclusion (GDI), Council of Faculty and Academic Societies (CFAS), and Organization of Resident Repre-
sentatives (ORR) met at a joint AAMC Conference. The Perelman School of Medicine was represented by OID and FAPD staff, Dr. Lee Fleisher, CFAS Member, and Dr. Ashlee Jaffee, ORR Chair. They presented a table topic discussion on the ‘Penn Diversity Search Advisor Program: Engaging Faculty as Diversity Advocates’.

Dr. Martin Luther King, Jr. Symposium
A sponsored event featured Dr. Richard Carmona, who gave the keynote address at the 2016 Martin Luther King, Jr. Symposium at the University of Pennsylvania. Dr. Carmona is a Distinguished Professor at the University of Arizona and previously served at the 17th Surgeon General of the United States (2002-2006).

Dr. David Satcher, the 16th Surgeon General, Former Assistant Secretary of Health and Human Services and Former Director of the CDC gave the keynote address in 2015.

We are pleased to announce that Dr. Antonia Novella, first Latina surgeon general and among the first women hired in the position will be our keynote speaker for the MLK Symposium being held on January 25, 2017.

Health Equity Week
Penn Medicine’s Graduate Medical Education (GME) Office, in conjunction with the Hospital of the University of Pennsylvania Offices of the Chief Medical Officer and Chief Nursing Officer, the Perelman School of Medicine, and the Office of the Vice Dean for Inclusion and Diversity sponsored an institution-wide Health Equity Week in April 2016 with events across the Penn Medicine campus.

The week’s events included the Health Equity Grand Rounds and LGBT Session, GME Faculty Symposium, Health Equity Symposium and Poster Session and keynote presentations from Georges C. Benjamin, MD, Executive Director of the American Public Health Association and Joseph R. Betancourt, MD, MPH, Associate Professor of Medicine at Harvard Medical School.

The OID also cosponsored a day long symposium regarding gender bias in publishing: led by Sarah Millar, PhD, Professor of Dermatology and Anh Le, PhD, Professor of Oral Surgery and Pharmacology.

Unconscious Bias Workshops
- **Everyday Bias Workshop April 2016:**
  OID and FAPD partnered with Cook Ross Inc., a leading consulting group that uses a strategic framework for developing an organization-wide unconscious bias strategy, to present two workshops on unconscious bias for health professionals. Over 45 faculty and staff attended, including six DSAs. Each attendee was given a copy of *Everyday Bias: Identifying and Navigating Unconscious Judgments in Our Daily Lives*, by Howard J. Ross (2014). Evaluations of the sessions were very positive, with emphasis on engagement and group interaction in learning about bias.

- **Everyday Bias Workshops FY 2017:**
  OID, FAPD, and the Provost’s Office will partner with Cook Ross Inc., to offer two-day unconscious bias workshops in October 2016 and April 2017. A total of eight sessions will be offered for faculty.

**Advance Faculty Development Program**
*Advance* is an institutional, competency-based professional development and mentorship program for fostering the essential skills needed to advance at the Perelman School of Medicine (PSOM). *Advance* offers programs in the domains of i) Attaining Teaching Excellence, ii) Career Development & Achievement, iii) Leadership & Management, iv) Research & Scholarly Writing, and v) Technology.

In PSOM, full-time faculty have increased 19% from July 2012 to July 2016, and are geographically dispersed to serve five hospitals, two specialty centers, nine foundational community practices, (more than fifty Penn locations throughout the region). *Advance* has been expanding the portfolio of faculty development programs and developing more efficient and appropriate ways to deliver content to address the professional development needs of a growing faculty population. Over 60 PSOM faculty members create content, facilitate sessions, and present talks for colleagues. Partnerships with FOCUS, Penn Medicine Academy (PMA), and Office of Organization Effectiveness provide additional opportunities for faculty to develop communication, coaching, and leadership skills for academic success.
Anchor Program: Center of Excellence for Diversity in Health Education and Research (COE)

Led by Jerry C. Johnson, MD, Professor of Medicine and Chief, Division of Geriatric Medicine, the Penn Center of Excellence (COE) for Diversity in Health Education and Research provides a comprehensive array of faculty development-related activities. This Center, funded by the Health Resources and Services Administration (HRSA), provides a comprehensive array of programs related to the training of health professionals: recruitment and training of health professions students (from the secondary school through health professions school), recruitment and training of minority faculty, modifications of health professions curricula to improve clinical education and cultural competence, and research on health issues particularly affecting minorities. Initiated in September 1993, the Penn Center aims to establish, facilitate, and conduct programs that will enhance the health of under-represented minorities by training minority medical students and medical faculty for leadership positions in the health professions workforce, by facilitating research on minority health issues, and by encouraging modifications in curricula to respond to the needs for cross cultural education. The Center’s models of faculty development, cross-cultural medical education, and involvement of minorities in research, focusing on minority health, have been disseminated regionally and nationally.

Anchor Program: FOCUS on Health and Leadership for Women

Stephanie Abbuhl, MD, Executive Director

1. Annual Fall Conference: (planning underway for 19th annual conference October 28, 2016)

   For the 18th annual conference on October 23, 2015:
   • 239 pre-registered, one of our higher draws; 179 actual attendance captured onsite, Attendees represented 17 of the 28 combined clinical and basic science departments

   Guest Speakers:
   • Hannah Valantine MD, Chief Officer for Scientific Diversity, National Institutes of Health
   • Katrina Armstrong, MD MSCE, Physician-in-Chief, Department of Medicine, Massachusetts General Hospital and Jackson Professor of Clinical Medicine, Harvard Medical School
   • Nancy P. Rothbard, PhD, David Potttruck Professor of Management at The Wharton School, University of Pennsylvania

2. FOCUS Lunchtime Seminar Series: Open to all faculty; highlights topics in faculty development, women’s health, and current controversies in medicine; women and men presenters from PSOM, across the University and occasionally outside guest speakers. Have held the following sessions in FY 2016:
   • Adding a Sense of Touch to Robotics in Medicine - Nov 16, 2015, Katherine J. Kuchenbecker, PhD-SEAS
   • Friendship and Your Brain, Jan 8, 2016, Michael L. Platt, PhD, PIK Prof- PSOM, SAS, Wharton
   • The Biology of Beauty - Feb 24, 2016, Anjan Chatterjee, MD, FAAN
   • Faculty Challenges and Opportunities in a Modern Academic Medical Center - April 28, 2016, Jonathan A. Epstein, MD
   • Preimplantation Genetic Screening: The Future is Here - May 6, 2016, Anuja Dokras, MD, PhD
   • Affirming Personal Priorities in the Midst of a Professional Career - May 9, 2016, Dennis Durbin, MD and Lucy W. Tuton, PhD
   • Wired to Create: Unravelling the Mysteries of the Creative Mind - May 18, 2016, Scott Barry Kaufman, PhD, Scientific Director, Imagination Institute, Positive Psychology Center
   • Making Every Penny Count in the BRAF Mutation-Positive Melanoma – Targeting MEK1/2 Kinases - June 2, 2016, Donita C. Brady, PhD

3. The FOCUS WIM (Women In Medicine) Series: Portion of the FOCUS Lunchtime Seminar Series reserved for women in academic medicine, to address personal and professional challenges and opportunities in a community of colleagues.

4. FOCUS Award for the Advancement of Women in Medicine: Now in its 12th year

5. Benchmarks Initiative for 2015: A biennial process, in the current year
   • Analyzed data and completed 13th comprehensive report on gender statistics for PSOM Faculty, Benchmark Data: Gender Statistics of Faculty, Perelman School of Medicine, for 2014-15
   • Full report can be viewed on FOCUS website: http://www.med.upenn.edu/focus/user_documents/FINAL2014-15Benchmarks.pdf (Most recent data available)
   • NOTE: PENN has a higher proportion of women faculty at the Full and Associate Professor ranks when compared to mean AAMC national data – FOCUS may be part of the reason for this finding.

6. FOCUS Junior Faculty Investigator (JFI) Award: Externally funded; offers men and women junior faculty year-long seed grants for research in women’s health
   • Funded by Edna G. Kynett Foundation – award amount increased to $15,000
   • New Recipient of $15,000 Award announced in October 2015 – funded thru October 2016
   Lisa D. Levine MD MSCE, Assistant Professor, OB/GYN/Maternal Fetal Medicine
   PROJECT: Angiogenic Factors to Predict Cardiac Dysfunction During and After Preeclampsia
   • To date have awarded 45 junior investigators (34 women, 11 men)
7. FOCUS Medical Student Fellowship (MSF) in Women's Health: Extramurally funded; provides men and women Penn medical students $7500 stipends each for 6 months of dedicated intensive faculty-mentored research in diverse areas of women's health
   • To date have awarded 77 medical students (64 women, 13 men)

8. NIH-RO1 Funding- NIH-TAC (Transforming Academic Culture) Trial – Funded RO1 September 1, 2009 – December 2015. It has been the work and foundation of the FOCUS Program that enabled us to receive this RO1 to support “research on causal factors and interventions that promote and support the careers of women in Biomedical and Behavioral Science and Engineering”
   • Joint Principal Investigators: Stephanie Abbuhi MD & Jeane Ann Grisso MD MSc; Other FOCUS leadership, including Lucy Wolf Tuton and Patricia Scott are key co-investigators. Patricia Scott has additionally served as Project Manager
   • Multi-disciplinary research team: Mary Sammel ScD, Co-investigator, biostatistician; Alyssa Westring PhD, Co-investigator, organizational psychologist and psychometrician, DePaul University; Rebecca Speck, MPH, Co-investigator, data manager; Patricia Scott, Co-investigator, project manager; Lucy Wolf Tuton PhD, Co-investigator; Emily Conant MD, Co-investigator, leader of the implementation phase of the Task Force Initiative; Susan Primavera, Administrative Coordinator; Stewart Friedman PhD, Co-Investigator, Leader of Total Leadership intervention program, Wharton School - Total Leadership
   • Grant officially closed end of December 2015.
   • Presentation and panel for NIH Conference on Women in Biomedical Careers, "Evidence-Based Innovations to Advance Women in Biomedical Careers," (June 2016 at NIH in Bethesda)

9. FOCUS Section for Women Residents & Fellows: Sixth selection process for current Section Co-Chairs: Jessica Palakshappa, MD (Fellow in Pulmonary/Critical Care) and Louisa Pyle MD, PhD (Fellow, Clinical Genetics and Metabolism at the Children's Hospital of Philadelphia).
   Creation of active Section Planning Committee of 9 additional trainees to help develop programs tailored for Penn Medicine women trainees and further develop a sense of community for HUP/CHOP trainees

10. Women's Health Scholar (WHS) Certificate Program: Collaborative effort of FOCUS and the Department of Obstetrics and Gynecology established in 2006; to provide concentrated experiences in women's health spanning research, clinical training and community outreach. Four components to complete.

11. Other Collaborations:
   Office of Inclusion & Diversity (OID): FOCUS, in conjunction with OID, solicited applications and offered scholarships to fully support the attendance of a fulltime faculty member at each of the AAMC Early- and Mid-Career Women Faculty Professional Development Seminars.

FOCUS/ OID Scholarships awarded:
Sharon A. Lewis MD, Assistant Professor of Clinical Neurology, attended July 2015 AAMC Early-Career Women Faculty Professional Development Seminar in Englewood, CO
Diva D. De León-Crutchlow MD, MSCE, Associate Professor of Pediatrics in Division of Pediatric Endocrinology and Diabetes, and Director of the Congenital Hyperinsulinism Center, attended December 2015 AAMC Mid-Career Women Faculty Professional Development Seminar in Austin, TX.

Anchor Program: Penn Medicine Program for LGBT Health
Judd Flesch, MD; Rebecca Hirsh, MD, Associate Directors
The Penn Medicine Program for Lesbian, Gay, Bisexual, and Transgender (LGBT) Health was initiated in July 2013 as a unique interdisciplinary program, involving the Perelman School of Medicine, School of Nursing, School of Dental Medicine, Center for Public Health Initiatives, and affiliated health systems (The Children’s Hospital of Philadelphia, University of Pennsylvania Health System, and Philadelphia Veterans Affairs Medical Center). This program received funding from the Penn Excellence Through Diversity Fund.
Dr. Baligh R. Yehia, Assistant Professor in the Division of Infectious Diseases, Department of Medicine, was Director of the Penn Medicine Program for LGBT Health and stepped down from his role in February 2016. Drs. Judd D. Flesch and Rebecca Hirsh, the Associate Directors of the Penn Medicine Program for LGBT Health, assumed the responsibilities of Director.

The vision of the Penn Medicine Program for LGBT Health is to improve the care of LGBT populations by becoming a local and national leader in LGBT patient care, education, research, and advocacy. To accomplish this vision, the program will focus on five areas:

- **Institutional climate and visibility** – Nurture and support diversity in the workplace, classroom, and healthcare settings.
- **Community Outreach** - Increase Penn Medicine’s community involvement and partner with community organizations to address LGBT health disparities and improve access to high quality care.
- **Health Education** – Enhance education of students, residents, and faculty in relation to LGBT health issues and health disparities.
- **Research** – Foster research on the optimal ways to improve care for LGBT patients and families.
- **Patient Care** – Provide patient and family-centered care for LGBT patients and families.
Anchor Program: Penn PROMOTES Research on Sex and Gender in Health
C. Neill Epperson, MD, Co-Director

Penn PROMOTES serves as a virtual center, housing the Penn Center for Women’s Behavioral Wellness in the Perelman School of Medicine, the Bale Lab at the School of Veterinary Medicine, and Building Interdisciplinary Research in Women’s Health. Penn PROMOTES is the fifth anchor program for the Office of Inclusion and Diversity at the Perelman School of Medicine. The new Penn Center for Research on Sex and Gender in Health will encourage and support the consideration of sex or gender as a critical factor in all facets of research, health care delivery, economics, social policy, political discourse, and communications in order to improve health outcomes for all.

Penn has an outstanding Gender, Sexuality and Women’s Studies (GSWS) department within the School of Arts and Sciences. Dr. Epperson serves as the School of Medicine representative on their Advisory Board. Likewise, the GSWS Chair, Nancy Hirschman, Ph.D. is a member of the Penn Building Interdisciplinary Research Careers in Women’s Health (BIRCWH) advisors. While sexual health is important in its own right, the focus on sex for the Penn Center for Research on Sex and Gender in Health would be primarily as a biological construct that impacts the pathophysiology, phenomenology and treatment of disease states. Penn is already viewed as a leader nationwide in the area of lesbian, gay, bisexual, and transgender issues, and this new Institute would partner with faculty and trainees interested in developing research studies related to health and healthcare for this population. The Alice Paul Center for Research on Women, Gender and Sexuality in the School of Arts and Sciences most certainly cuts across disciplines, but its mission is not specifically to promote human health. Finally, the Center for Global Women’s Health at the Penn School of Nursing would be a natural partner for this new Anchor Program in the capacity that its endeavors would address issues of sex or gender and how they impact global women’s health. These are simply a few of the obvious stakeholders already at Penn who would make natural allies for the Penn Center for Research on Sex and Gender in Health.

Center activities have and will focus primarily on four domains: i) Education/Mentorship, ii) Building an infrastructure that supports collaboration, iii) Enhancing research focusing on sex and gender, and iv) Outreach to the media, community and potential donors, emphasizing the importance of sex as a biological variable with respect to human health.

Diversity Engagement Survey
In FY2015, the OID launched the Diversity Engagement Survey (DES) to measure institutional climate and culture through the lens of diversity and inclusion within the University of Pennsylvania. This validated survey, developed by the Association of American Medical Colleges in conjunction with the University of Massachusetts Medical School and DataStar, characterizes the inclusiveness of the academic learning environment, and assesses baseline strengths and areas for improvement related to inclusion and diversity efforts. The Office of Inclusion and Diversity (OID) developed the proposal, “Diversity Engagement in the Health Sciences,” and secured monies from the Office of the Provost’s Diversity Through Excellence Fund to launch the DES across the UPENN community, including the Perelman School of Medicine, the School of Nursing, Penn Dental Medicine, Penn Social Policy & Practice, Penn School of Veterinary Medicine, and select units within Penn Medicine and CHOP. The University of Pennsylvania has joined 14
other AAMC member institutions that have also piloted the DES to students, faculty and staff.

The core components of the survey, which measured inclusive environment, consisted of 22 questions which can be grouped into three categories: Vision and Purpose, Camaraderie, and Appreciation (Figure 18).

Based on more than 3000 respondents, it is apparent that the University of Pennsylvania measures favorably in most categories (Figure 19). Cultural competency emerged as an opportunity for targeted intervention.

It is apparent based on sub analyses of the responses regarding cultural competence that certain groups responded more positively compared to others. The mean (SD) of the CCF score was 15.4 (3.0), with 52.4% of the respondents scored above the mean. Significant predictors of CCF (n=3500) characterizing cultural competence of their institution above the mean. Respondents(self-identifying as non-Hispanic black as compared to non-Hispanic whites were over 60% less likely to rate CCF score above the mean as compared to heterosexuals) (AOR: 0.59; 95% CI: 0.46, 0.76). Employees of the Children's Hospital of Philadelphia were almost twice as likely to score CCF above the mean as compared to employees from the School of Medicine (AOR: 1.92; 95% CI: 1.50, 2.47) whereas employees from the Veterinary School were less likely to score CCF above the mean as compared to School of Medicine (AOR: 0.51; 95% CI: 0.37, 0.69) (Figures 20-21).

The study highlights the importance of ongoing measurement to improve inclusion within health care organizations. Ongoing measurement provides opportunity to evaluate what organizational characteristics distinguish high performing sites in order to inform efforts to improve inclusion and thereby promote recruitment and retention of a diverse health workforce.

Qualitative Analysis was performed in the summer of 2016 to better understand why faculty, staff, and students feel valued or devalued at University of Pennsylvania health sciences affiliated schools and hospitals and define areas for improvements to inform efforts to create an environment of inclusivity.

A campaign was launched in June 2016 with a broad call for personal narratives about inclusion across Penn health care affiliated schools and hospitals. Email requests for anonymous stories were sent out weekly for three weeks with a link to a survey administered through RedCap. The survey consisted of two open-ended questions about experiences with inclusion or lack there-of, followed by a series of demographic questions. All fully completed responses (n=315) were analyzed using NVIVO 11. A randomly se-

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**FIGURE 19. UNIVERSITY OF PENNSYLVANIA DIVERSITY ENGAGEMENT SURVEY RESULTS**

- **Top Third**
  - Vision / Purpose Cluster: Access to Opportunity Factor
  - Vision / Purpose Cluster: Equitable Reward and Recognition Factor and Common Purpose

- **Middle Third**
  - Camaraderie Cluster: Trust Factor, Sense of Belonging
  - Appreciation Cluster: Appreciation of Individual Attributes Factor, Respect Factor

- **Bottom Third**
  - Vision / Purpose Cluster: Cultural Competence Factor

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**FIGURE 20. HEALTH SERVICE SITES**

<table>
<thead>
<tr>
<th>Function</th>
<th>Odds Ratio with 95% Wald Confidence Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHOP vs Hospital</td>
<td>1.5671 (1.2084, 2.0324)</td>
</tr>
<tr>
<td>VA vs Hospital</td>
<td>0.8985 (0.3721, 2.1692)</td>
</tr>
<tr>
<td>Age: 1945-1964 vs 1922-1944</td>
<td>0.6974 (0.2834, 1.7162)</td>
</tr>
<tr>
<td>Age: 1965-1980 vs 1922-1944</td>
<td>0.6125 (0.2457, 1.527)</td>
</tr>
<tr>
<td>Age: 1981-2000 vs 1922-1944</td>
<td>0.8052 (0.3097, 2.0939)</td>
</tr>
<tr>
<td>Gender: Female vs Male</td>
<td>0.6319 (0.4849, 0.8236)</td>
</tr>
<tr>
<td>Sex Orientation: LGBTQ vs Heterosexual</td>
<td>0.6249 (0.404, 0.9666)</td>
</tr>
<tr>
<td>Race: Hispanic vs NH White</td>
<td>0.9968 (0.5781, 1.7188)</td>
</tr>
<tr>
<td>Race: NH Asian vs NH White</td>
<td>0.9149 (0.6094, 1.3737)</td>
</tr>
<tr>
<td>Race: NH Black vs NH White</td>
<td>0.2491 (0.1625, 0.3818)</td>
</tr>
<tr>
<td>Race: NH Multi vs NH White</td>
<td>0.3328 (0.1504, 0.7363)</td>
</tr>
<tr>
<td>Race: NH Other vs NH White</td>
<td>0.8375 (0.4241, 1.6542)</td>
</tr>
<tr>
<td>Length employment: 1-5 yrs vs &lt; 1yr</td>
<td>0.7425 (0.5077, 1.0859)</td>
</tr>
<tr>
<td>Length employment: 5-10 yrs vs &lt; 1yr</td>
<td>0.5255 (0.3346, 0.8253)</td>
</tr>
<tr>
<td>Length employment: ≥ 10 yrs vs &lt; 1yr</td>
<td>0.6652 (0.4217, 1.0493)</td>
</tr>
</tbody>
</table>
lected subset (n=33) of narratives were jointly analyzed to identify emerging themes in an iterative process and 20% of the sample was randomly selected and triple coded for interrater reliability (mean Kappa score is .93). Any discrepancies in coding were resolved with consensus.

Consistent themes of recognition and value or lack thereof emerged from the narratives. Discrimination in its many forms were reported, from gender and race to physical appearance and disabilities. Regardless of the type of discrimination reported, an overarching theme was the degree of impotence conveyed by individuals in their ability to address these acts. While stories reflected a general culture that needed improvements the challenges highlighted reflected a need for targeted solutions at the local or departmental level. Across all narratives, attempts to solve the issue through formal channels, such as going to human resources, leadership, or an ombudsman, failed to work. In many narratives, this lack of formal/external ways to address issues, resulted in self-accommodating/sacrificing actions taken by the individual as the ultimate solution. Responses offered solutions or strategies to improve many of the challenges emphasized on the narratives. The predominant suggestions centered on increasing education/awareness, providing implicit bias training, increasing diversity in leadership positions, and increasing advocacy.

Salary and Space Gender Analysis

Equitable reward and recognition is essential to our mission. In May 2016, Dr. Eve Higginbotham in collaboration with Ms. Lynn Meaney conducted an analysis on the space and salary of basic scientist only in PSOM basic science departments. Figure 22 is the salary differential by gender and experience using FY13 Salary including stipends, more than 8 years since promotion. Figure 23 is the analysis outcome of research space for associate professors by gender.
Reaffirm

The third and last goal of the OID is to reaffirm the value of inclusion and diversity. For many, the value of inclusion/diversity may be taken for granted and for others, not well understood or appreciated. The OID affirms the value of inclusion/diversity as a contributor to innovation, enriched educational experiences, and highest quality patient care. The Blueprint for Health Equity and Inclusion crafted under the leadership of Dr. Jaya Aysola, OID Research Director provides an initial way forward for reducing variation in care. Also presented in this Section are examples of presentations related to inclusion/diversity initiatives presented at national meetings and awards and honors presented to faculty, demonstrating diversity among the awardees.

Blueprint:
Jaya Aysola, MD, DTMH, MPH

The Blueprint for Health Equity and Inclusion was created in 2015 by Dr. Jaya Aysola in her role as Assistant Dean of Graduate Medical Education and Research Director of the Office of Inclusion and Diversity to create a culture of health equity mindfulness in the clinical learning environment at the University of Pennsylvania, Perelman School of Medicine. The Blueprint was created with key stakeholder input and designed to align with the hospital’s existing Blueprint for Quality and Safety. The Blueprint for Health Equity and Inclusion aims to provide high quality and family-centered care to all patients regardless of their culture and background with a focus on achieving the following three components: 1) Value, by reducing unnecessary variations in care by personal characteristics; 2) Engagement, by ensuring provision of patient-centered, cultural effective care and Inclusion; 3) Inclusion, by promoting diversity and inclusiveness in the clinical learning environment.

(Figure 24)

During FY2016, Dr. Aysola and her team:
- Generated examples of institutional variations in care and outcomes from existing data
- Distributed a memo to residency program directors describing new GME focus area
- Added educational content to med hub and GME websites
- Introduced lectures in health equity related areas for faculty development and house staff training
- Gave a Fall 2015 presentation to executive leadership on the Blueprint for Equity
- Generated the Health Equity Blueprint summary card for distribution
- Created a list of key personnel, house staff, and faculty with expertise and/or a strong interest in health equity as a resource for multi-stakeholder taskforce to inform institutional health equity priorities and strategies as well as for development or administration of education health equity content (lectures, online) for faculty development and house staff training

Going forward, the program will work with existing care quality data to determine variations by personal characteristics such as race/ethnicity, language preference, place of residence, gender identity, payor and sexual orientation. This will include an analysis of the current processes and practice for data collection. Dr. Aysola also plans to administer a baseline survey to all program directors, conduct follow up key informant interviews regarding further assessment of existing initiatives and alignment with said initiatives where feasible, and meet with key groups focused on diversity and inclusion (including the anchor programs for the Office of Inclusion and Diversity).
**FIGURE 24. BLUEPRINT FOR HEALTH EQUITY AND INCLUSION**

Penn Medicine will provide high quality patient and family-centered care to ALL patients.

**VALUE**

- Reduce Unnecessary Variations in Care by Personal Characteristics

**ENGAGEMENT**

- Provide Patient and Family Centered, Culturally Effective Care

**INCLUSION**

- Ensure a Diverse and Inclusive Clinical Learning Environment

**IMPERATIVE**

**REDUCE UNNECESSARY VARIATIONS IN CARE BY PERSONAL CHARACTERISTICS**

1. Stratify institutional quality metrics by personal characteristics
2. Establish a customizable dashboard for ongoing reporting of equity metrics by department
3. Enhance systems to ensure accuracy and consistency of data collection of race/ethnicity, gender, and sexual orientation
4. Integrate equity into existing quality improvement efforts
5. Establish a multidisciplinary health equity taskforce of key stakeholders to guide strategic solutions

**PROVIDE PATIENT AND FAMILY CENTERED, CULTURALLY EFFECTIVE CARE**

1. Establish educational curricula for house staff and faculty on cultural humility and implicit bias
2. Require online training for employees that interface with patients on cultural humility and implicit bias
3. Include patient stakeholders on health equity taskforce

**ENSURE A DIVERSE AND INCLUSIVE CLINICAL LEARNING ENVIRONMENT**

1. Establish training methods designed to improve recruitment, selection, evaluation, and promotions of a diverse body of house staff and faculty
2. Institute leadership training in holistic review and implicit bias for organizational change
3. Integrate inclusion and diversity efforts into wellness initiatives and professionalism standards
4. Collaborate with staff training initiatives that promote culturally effective and equitable care
5. Coordinate with and highlight efforts of the Office of Inclusion and Diversity (OID) and its graduate and undergraduate medical education anchor programs
Figure 25. "Predictors of Organizational Cultural Competence Experience Among Health Care Employees"
Presented by Jaya Aysola, MD, MPH, at the Academy Health Annual Research Meeting, Summer, 2015

Figure 26. "Close Collaboration between Faculty Affairs and Inclusion and Diversity Offices: A Formula for Success"
Presented by Karen Grasse at the AAMC/GDI Conference, Summer, 2015

Figure 27. "Seeding the Healthcare Workforce Through the Educational Pipeline: The Summer Undergraduate Minority Research Experience"
Presented by Joanne Levy at the AAMC/GDI Conference, Summer, 2015
FIGURE 28. “PUTTING THE SEXXY IN RESEARCH: A NEW INSTITUTE STUDY OF SEX AND GENDER IN HEALTH AT THE PERELMAN SCHOOL OF MEDICINE”
Presented by C. Neill Epperson, MD at the ELAM Leaders Forum, Spring 2015

FIGURE 29. “THE INFLUENCE OF URM AND GENDER STATUS ON RESIDENCY PROGRAM CHOICE”
Presented by Tomas Diaz and Atu Agawu at the AAMC Conference, Spring 2015

FIGURE 30. “INCREASING DIVERSITY IN FACULTY SEARCHES AT THE PERELMAN SCHOOL OF MEDICINE”
Presented by James Guevara, MD, MPH at the AAMC Annual Meeting, October 2014
The Perelman School of Medicine “Committee on Prestigious Awards and Honors (Awards Committee)” is comprised of distinguished faculty selected to represent basic and clinical sciences, as well as learned societies. The mission of the Committee is to identify the School’s most outstanding faculty and ensure that they are nominated for the prestigious awards and honors they deserve.

Women and minorities who received awards in FY 2016:

American Academy of Arts and Sciences (AAA&S)
- Beatrice Hahn, MD, Medicine

American Society for Clinical Investigation (ASCI)
- Andy J. Minn, MD, PhD, Radiation Oncology
- Aimee Payne, MD, Dermatology
- Sunil Singhal, MD, Surgery

National Academy of Medicine (NAM; formerly Institute of Medicine)
- Frances Jensen, MD, Neurology

National Academy of Sciences (NAS)
- Amita Sehgal, PhD, Neuroscience

The “Penn Medicine Awards of Excellence” are awarded to faculty who exemplify our profession’s highest values of scholarship and teaching, innovation, commitment to service, leadership, and dedication to patient care. They epitomize the preeminence and impact we all strive to achieve. The awardees range from those at the beginning of their highly promising careers to those whose distinguished work has spanned decades.

Women and minorities who received awards in 2015:

- Stanley N. Cohen Biomedical Research Award to Erika L.F. Holzbaur, PhD, Physiology
- William Osler Patient Oriented Research Award to Susan M. Domchek, MD, Medicine
- Samuel Martin Health Evaluation Sciences Research Award to Andrea B. Troxel, ScD, Biostatistics and Epidemiology
- Michael S. Brown New Investigator Research Award to Andy J. Minn, MD, PhD, Radiation Oncology
- Arthur Asbury Outstanding Faculty Mentor Award to Stephanie B. Abbuhl, MD, FACEP, Emergency Medicine
- Leonard Berwick Memorial Teaching Award to Roy H. Hamilton, MD, MS, Neurology

The “Academy of Master Clinicians,” launched in 2013, is the highest clinical honor for a Penn Medicine physician today, and is a commitment to leadership in exceptional patient care at present and in the future. The work of the Academy is to recognize and promote clinical excellence in all entities of Penn Medicine by fostering the highest standards of patient care, with a dedication to the art of medicine, education, professionalism, humanism, collegiality, and citizenship. A new cohort of Master Clinicians is selected annually (for five year terms). The invitation for 2016 Master Clinicians is currently open and winners will be named in January 2017.
Women and minorities in all cohorts of Master Clinicians are:

- Emily A. Blumberg, MD, Medicine
- Susan Brozena, MD, Medicine
- E. Cabrina Campbell, MD, Psychiatry
- Emily Conant, MD, Radiology
- Jody Foster, MD, MBA, Psychiatry
- Marie Gleason, MD, Pediatrics
- Janice Hillman, MD, Clinical Care Associates, Penn Medicine
- Mariell Jessup, MD, Medicine
- Ellen Kim, MD, Dermatology
- Eydie Miller-Ellis, MD, Ophthalmology
- Najjia Mahmoud, MD, Surgery
- Natasha Mirza, MD, Otorhinolaryngology
- Kathleen T. Montone, MD, Pathology and Laboratory Medicine
- Jeanmarie Perrone, MD, Emergency Medicine
- Amy Pruitt, MD, Neurology
- Parvati Ramchandani, MD, Radiology
- Wanda Ronner, MD, Obstetrics and Gynecology
- Dahlia M. Sataloff, MD, Surgery
- Kim Smith-Whitley, MD, Pediatrics
- Ursina Teitelbaum, MD, Medicine

The Hedwig van Ameringen Executive Leadership in Academic Medicine® (ELAM®) Program for Women is the nation’s only in-depth program focused on preparing senior women faculty at schools of medicine, dentistry and public health for institutional leadership positions where they can effect positive change. ELAM’s year-long program develops the professional and personal skills required to lead and manage in today’s complex healthcare environment, with special attention to the unique challenges facing women in leadership positions. The Dean sponsors two (2) PSOM faculty attendees each year. Graduates from the ELAM Program in 2016:

- Kathleen Theresa Montone, MD, Professor of Pathology and Laboratory Medicine
- Susan Lynn Furth, MD, PhD, Professor of Pediatrics

PSOM is also evaluating recommendations for awards for faculty and staff for outstanding contributions to diversity and inclusion.

Institutional Awards

Pennsylvania Diversity Council 2016 Excellence Award
for Healthcare Diversity honors an organization affiliated with the healthcare industry for their extraordinary and unfailing commitment to diversity and inclusion in the workplace and surrounding communities. The University of Pennsylvania Healthcare system received this award for 2016.

Minority Access Incorporated awarded University of Pennsylvania Perelman School of Medicine the 2015 Commitment to Diversity Award. This is given to universities that have a commitment to diversity and stress that diversity is essential to providing a good education to anyone who expects to serve, live and work with a diverse population.
Since the creation of the Diversity Plan in 2011, substantive progress has been made at PSOM in the areas of inclusion and diversity. Chief among the accomplishments have been the sustained 7% URM proportion of the standing faculty for the last three years, the creation of an Office of Inclusion and Diversity (OID) that focuses on the goals of recruitment and retention of diverse faculty, and reaffirmation of the benefits of an inclusive culture. Moreover, there has been the creation of an effective collaboration between OID and the Office of Faculty Affairs and Professional Development (FAPD) and the creation of a model that leverages the work of key faculty-led interest groups, interfacing with research resources to better align with the institutional tripartite mission of research, education, and patient care. The work to date establishes an evidence-based platform for making progress in building an inclusive culture, creating greater synergy across anchor programs and affinity groups, and ultimately impacting the culture and health care delivery across Penn Medicine. These efforts are intended to achieve sustainable growth in diversity across the enterprise for years to come and health equity in the communities we serve.

Eve J. Higginbotham SM, MD

Conclusion
The Office of Inclusion and Diversity would like to thank the following for their contributions to this report:

Jaya Aysola, MD, DTMH, MPH
Stephen Frank, PhD
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Mary Leonard, BA