HARVARD
MEDICAL SCHOOL

Task Force on Diversity and Inclusion Report

June 4, 2020

BETTER TOGETHER

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ACKNOWLEDGEMENTS

I. EXECUTIVE OVERVIEW

For decades, Harvard Medical School (HMS) has worked to build a vibrant culture of diversity and inclusion. Advocacy efforts that began in the 1960s led to the 1995 establishment of the Office of Faculty Development and Diversity, which was renamed the Office for Diversity Inclusion and Community Partnership (DICP) in 2002. Over the years, HMS has collaborated with its affiliated institutions to shape a multitude of successes, as highlighted throughout this report.

Yet significant work lies ahead. Recognizing that HMS needed a robust community-wide effort to identify and reach even higher goals, in early 2017 newly appointed HMS Dean George Q. Daley, MD, PhD, convened the Harvard Medical School Task Force on Diversity and Inclusion (TFDI). HMS Dean for Diversity and Community Partnership Joan Y. Reede, MD, MPH, MS, MBA, was appointed chair of the 36-member TFDI, which was comprised of faculty, students, trainees, fellows, staff and administrators from across the HMS community.

Emerging from their efforts was a vision for success that includes increased representation of historically marginalized individuals—such as groups underrepresented in medicine (URM), women, those who identify as LGBTQ and individuals with disabilities—at all levels, particularly senior faculty and department administrator and leadership positions. They worked to envision and define an integrated ecosystem for HMS and its 15 affiliated hospitals and research institutions that attracts and retains top talent as a result of the School's reputation for excellence in medicine and its culture of valuing, developing and advancing diversity.

The TFDI met 15 times from February 2017 to May 2019, culminating in this comprehensive report, which serves as a roadmap for achieving greater diversity and inclusion in the near term. It also serves as a springboard for the HMS Better Together plan, which articulates the School's comprehensive, multi-year, coordinated efforts to be recognized as a leader in diversity and inclusion.

At outset, the TFDI was charged with the following goals:

1. Analyze the landscape of current diversity and inclusion resources and offerings at HMS, its affiliated hospitals and research institutions, and Harvard University;
2. Develop a diversity and inclusion vision and policy consistent with the School's mission and values; foster excellence in teaching, research and service; support the multiple dimensions of diversity reflected in the HMS community; and be responsive to regulatory requirements;
3. Identify measures of accountability to assess the achievement of diversity and inclusion goals and expectations, including mechanisms for promoting evidence-based decision making; and
4. Identify and prioritize needs for deeper investigation, goal-setting and recommendations for action toward advancing diversity and inclusion.

To gain an understanding of the HMS landscape around diversity, inclusion and belonging, the TFDI's first charge, the task force held meetings and invited testimony and presentations from representatives across faculty, students and administration. In addition, it reviewed HMS and national diversity and inclusion data, held several community-wide listening sessions, and established a website portal inviting input from students, faculty and staff. It distributed posters titled "What does diversity and inclusion at HMS mean to you?" throughout the HMS Quadrangle campus, located in the heart of the Longwood Medical Area in Boston.

During initial deliberations, the TFDI leveraged the expertise of its members together with the information gathered via presentations at committee meetings, community-wide listening sessions, surveys and literature review, to identify key areas that warranted a deeper dive. Stemming from that effort, the TFDI:
- Drafted a Diversity Statement;
- Identified target groups;
- Crafted a Diversity and Inclusion Policy; and
- Used the emerging framework as part of HMS's self-study for accreditation by the Liaison Committee for Medical Education (LCME), as well as the development of a new strategic plan, with diversity as a cross-cutting element.

Following an iterative process, the HMS Diversity Statement developed by the TFDI was later adopted by HMS, fulfilling the second charge of the task force. In October 2017, the Diversity Statement was presented by Dean Daley and members of the TFDI in a Town Hall meeting, which was livestreamed to the full community. Since its adoption, the HMS Diversity Statement has been widely shared throughout HMS and its affiliates to communicate our commitment to diversity. In 2018, the HMS Faculty Council approved the Diversity and Inclusion Policy developed by the TFDI and stipulated the creation of a Diversity and Inclusion Committee to continue the development of cross-institutional initiatives in diversity, inclusion and belonging.

To assess diversity, inclusion and belonging at HMS, the third charge of the TFDI, a metrics-focused TFDI subgroup met initially in spring 2017 to better understand data availability and identify measures of accountability. During that time, the subgroup identified a schema for data identification. It developed and honed the targeted groups and a list of metrics. It also made initial recommendations to the TFDI regarding targeted populations for the HMS Diversity and Inclusion Policy. Later, the subgroup was formalized to become the Metrics Subcommittee.

To satisfy its fourth and final charge, the TFDI selected six areas for deeper investigation:

- Career Development and Retention of Diverse Faculty
- Diversity Pipeline and Community Engagement
- Diversity in Residency Training
- Diversity in Scientific Pathways
- Culture, Climate and Communication
- Metrics

Additionally, medical student finances relating to diversity and inclusion were identified as an important area of focus. This review process was undertaken by the Program in Medical Education (PME) under the direction of Dean for Medical Education Edward M. Hundert, MD, who gave an update on these efforts at a TFDI meeting in December 2018.

The proceedings of the TFDI and its six deep-dive subcommittees are summarized in four cross-cutting themes:

1. Develop People and Infrastructure
2. Build Community and Belonging
3. Address Culture and Communication
4. Hold Accountable and Generate Knowledge

Within each theme, this report details:

1. What Is Currently Working
2. Areas for Improvement
3. Recommendations

The TFDI thoroughly assessed the HMS ecosystem while identifying opportunities for improvement. HMS includes many offices, programs, initiatives and individuals dedicated to the development and advancement of diversity and inclusion. This report highlights these strengths. For some initiatives, it recommends continued support; for others, scaled resources to broaden impact. The report also proposes new initiatives.

Recommendations for improvement include:

- Creating a stronger sense of belonging and connectedness among students, faculty and staff across the HMS community;
- Enhancing programmatic infrastructure to support retention and advancement of individuals from groups historically underrepresented in medicine (URM); and
- Strengthening the communication of resources, events and opportunities that advance a culture of diversity and inclusion at HMS.

In addition to recommending better support for existing programs and identifying our strengths, this report recommends the provision of new resources and infrastructure to facilitate the development and advancement of URM individuals and women. It proposes building robust collaboration across institutions to ensure a community-wide commitment to establishing HMS as a destination for diverse individuals. Implementation of recommendations should consider and plan for sustainability, measures of accountability through the development of specific, measurable, accurate, reliable and timely (SMART) metrics, and embracing practices of continuous quality improvement (CQI).

Complementing the task force at HMS, in fall 2016, then Harvard President Drew G. Faust, PhD, established the Harvard University Task Force on Inclusion and Belonging (TFIB). The TFIB included faculty, students and staff from across the university and was created to address an integrated set of questions considered salient to placing and advancing Harvard University on the path to achieving optimal diversity inclusion and belonging. Dean Reede was one of two HMS representatives on the university's task force. This role, combined with her role as chair of the TFDI at HMS, helped ensure that the deliberations and recommendations of the medical school and university task forces, the HMS strategic plan, and the HMS Diversity and Inclusion Policy were consistent.

The work of the TFDI was also integrated with the concurrent LCME self-study process, which concluded with the LCME site visit in March 2019. Representatives from the TFDI sat on each of the LCME self-study subcommittees. Preliminary recommendations from the TFDI were shared with the subcommittees and steering committee, and the self-study committees shared recommendations with the TFDI.

Across the findings of the TFDI's deliberations, four key themes emerged:

THEME 1: DEVELOP PEOPLE AND INFRASTRUCTURE

a. Recruit, develop, advance and retain diverse individuals across the full spectrum of faculty, trainees, students and staff
b. Recruit, identify, nurture and educate diverse leaders who champion HMS community values
c. Sponsor pipeline programming that addresses identified needs and clearly defines expectations
d. Support efforts that enable addressing health disparities and social justice
e. Provide resources for infrastructure that supports diversity and inclusion

The TFDI recommends providing mechanisms and concerted efforts to recruit, develop and retain individuals from groups identified in the Diversity and Inclusion Policy. HMS should foster existing programs that have demonstrated success while simultaneously exploring areas of strategic improvement such as increased collaboration across organizational units and institutions—both within

HMS and across HMS affiliated hospitals and research institutions—and creating more resources for professional development and career support.

Additionally, HMS should reinforce infrastructures within the institution that support diversity and inclusion efforts as a whole. This includes protected time for diversity-related work, financial support for programs that directly address diversity, inclusion and belonging strategic priorities, and official groups and committees focused on monitoring diversity efforts HMS-wide.

THEME 2: BUILD COMMUNITY AND BELONGING

     a. Improve well-being and decrease burnout of HMS faculty, trainees, students and staff
     b. Promote a climate of collaboration and cooperation
     c. Provide time, space and organization for building communities within community
     d. Enhance outreach and in-reach with our local, national and global communities
     e. Decrease access boundaries to HMS and HMS-affiliate programming

In addition to creating a culture of belonging and developing people within the HMS community, the TFDI, through community input and committee deliberations, identified the need for community-building efforts as a cornerstone of its recommendations. Community feedback reinforced the resounding importance of mentorship and space for networking to create a sense of belonging and enabling individuals to achieve success. These opportunities for building "community within community" can serve to decrease burnout, foster collaboration, enable HMS to serve the school and surrounding community, and address health disparities with vision and purpose.

Aligned with recommendations of the Harvard TFIB for pursuing excellence on a foundation of inclusion, HMS should strive to prioritize diversity and inclusion through continuously creating space, holding conversations and elevating voices to perpetuate a community that is connected, collaborative and inclusive.

THEME 3: ADDRESS CULTURE AND COMMUNICATION

     a. Counter bias and microaggressions
     b. Create space for safe, respectful dialogue

c. Ensure images are reflective of the community
d. Develop searchable shared resources that build and reinforce connections
e. Provide accessible, inclusive, useful websites
f. Embed diversity, inclusion and belonging messaging in all communications

The TFDI recommends that HMS prioritize efforts to build inclusive communities, counter biases and create a sense of belonging across the complex and diverse HMS ecosystem. HMS can advance its mission to nurture a diverse inclusive community by addressing bias and microaggressions, providing bystander training, creating safe space for dialogue, establishing an inclusive physical environment through images and accessibility, and developing resources to build and reinforce connections. To achieve these goals and create a culture of belonging, the TFDI recommends formal concerted efforts to address bias and microaggressions through policy, trainings and programming, while also embedding the Harvard-wide framework for diversity and inclusive excellence within communications across all platforms.

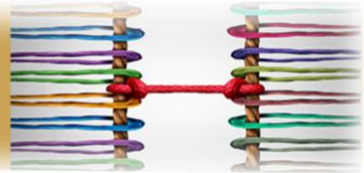**THEME 4: HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE**

a. Monitor and track outcomes
b. Endorse continuous quality improvement principles for diversity and inclusion programming
c. Incorporate evidence-based decision making that leads to tangible change
d. Promote transparency
e. Generate new knowledge that informs workforce and leadership efforts and has local and national impact

To create a model of sustainable, continuously improving diversity, inclusion and belonging initiatives, the TFDI recommends HMS-wide accountability through leveraging existing data and gathering new information. Through monitoring and tracking outcomes of programs and efforts aimed at increasing and supporting diversity, leadership is better able to know what is effective and should be further supported, areas that require additional development and those that should be phased out. Departments should be held accountable for incorporating principles

of inclusive excellence throughout their functions, from recruitment to retention. The TFDI recommends mechanisms for the regular reporting and measuring of diversity-related metrics across departments. HMS should prioritize the generation of internal data and knowledge that will serve as key resources for leadership to inform strategic planning, new programming and decision making. To promote transparency and enable internal benchmarking, the TFDI recommends the development of a data dashboard that depicts HMS initiatives in diversity, inclusion and belonging.

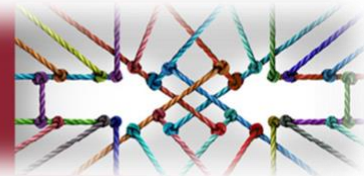# II. TASK FORCE FINDINGS BY THEME

DEVELOP PEOPLE AND INFRASTRUCTURE

BUILD COMMUNITY AND BELONGING

ADDRESS CULTURE AND COMMUNICATION

HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE

THEME 1

DEVELOP PEOPLE AND INFRASTRUCTURE

1a. DEVELOP PEOPLE: Recruit, Develop, Advance and Retain Diverse Individuals across the Full Spectrum of Faculty, Trainees, Students and Staff

What Is Working:
Recruit, Develop, Advance and Retain Diverse Individuals across the Full Spectrum of Faculty, Trainees, Students and Staff

I. **Faculty**
- o Development Offerings
  - The HMS Office for Faculty Affairs (OFA) offers several resources for disseminating information, facilitating advancement and recognizing promotion. For example, OFA offers presentations on the promotion process, orientation for new faculty, curriculum vitae (CV) review and career planning discussions. It also hosts an annual breakfast for newly promoted faculty and an annual leadership development conference.
  - The HMS Office for Diversity Inclusion and Community Partnership (DICP) maintains a nationwide database of more than 4,500 minority faculty. This tool can be utilized for faculty searches and visiting speakers. Additionally, the DICP office hosts several faculty fellowships and the Minority Faculty Development Program with an annual leadership conference.
- o Faculty Fellowship Programs
  - HMS faculty fellowships such as the Harvard Catalyst Program for Faculty Development and Diversity Inclusion Faculty Fellowship, and the DICP Faculty Fellowship, both offered in collaboration with hospital affiliates, have an overall retention rate of 79%, with 90% of participants promoted within the Harvard system.

- There are several other effective fellowship programs at HMS and HMS affiliates (e.g., the Eleanor and Miles Shore Faculty Development Award).
  - o Retention
    - Mentorship and regular career review are viewed by faculty as effective and positive factors for retention, however, they are not universally or consistently practiced. On the HMS Quad, junior faculty are assigned a senior faculty mentor.
    - Approximately 65% to 70% of HMS clinical faculty have a previous HMS affiliation (i.e., medical/graduate school, training programs).
    - The tenure rate on the Quad is also very high. However, externally it is believed to be 0%. We do not know if the individuals with this mistaken perception differ by gender or race/ethnicity; it presents an opportunity for further study. The impact of this misperception on recruitment is also not known.
  - o Awards and Recognitions
    - HMS DICP organizes awards and recognitions for excellence in mentoring, including the Program Award for a Culture of Excellence in Mentoring, and oversees the HMS Council of Mentors, consisting of distinguished faculty noted for their accomplishments and excellence in mentoring at HMS. The Council of Mentors is charged with identifying key areas of importance, programmatic interventions and resources that support mentoring. DICP also provides awards to faculty and staff for advancing diversity.

II. **Medical Students and Clinical Trainees**
  - o Recruitment
    - Joint recruitment efforts involving HMS and HMS affiliates have been successful in attracting diverse students and trainees to the Harvard system. Examples of these efforts and programs include the Visiting Clerkship Program, the Residency Showcase, and exhibit booths and receptions at meetings such as the Student National Medical Association (SNMA), the

Annual Biomedical Research Conference for Medical Students (ABRCMS), the Society for Advancing Chicanos/Hispanics and Native Americans in Science (SACNAS). Other opportunities include graduate fairs, and resident and faculty visits to medical schools and minority-serving institutions to recruit diverse candidates. In addition, the HMS Office of Recruitment and Multicultural Affairs hosts a Pre-Matriculation Summer Program and collaborates with hospitals for mentoring of entering medical students.

- o Student-based Groups and Professional Organizations
  - Identity groups (e.g., race/ethnicity, gender, sexuality or religion-based groups) such as SNMA, Latino Medical Student Association (LMSA), Asian Pacific American Medical Student Association (APAMSA), Harvard Longwood Muslims, and LGBTQ and Allies at Harvard Medical School (LAHMS).
  - Advocacy groups that focus on issues of health disparities and biases.
  - Clinical-specialty interest groups.

III. **Postdoctoral Fellows and Graduate Students**
- o Fellowships
  - Dean's Postdoctoral Fellowship: designed to supplement the beginning (i.e., first two to three years) and/or the end (i.e., fourth year) of a postdoctoral program.
  - Dean's Postdoctoral Supplemental Funding: new in the 2018–-2019 academic year.
- o Development Offerings
  - HMS Scholars in Translational and Academic Research (HMS STARs) was established by the DICP office to support career advancement of postdoctoral fellows from underrepresented minority and disadvantaged backgrounds while building a community of diverse scientists at HMS, both on the Quad campus and at hospital affiliates.
- o Recruitment

- The Biomedical Science Careers Program (BSCP), founded at HMS in 1991 to increase the representation of URMs in all aspects of science and medicine, has launched in collaboration with DICP several events to engage URMs, such as the New England Science Symposium (NESS), established in 2002 as an annual forum for college students through postdoctoral fellows to present their research endeavors.
- Faculty serve as advisors, judges and recruiters, and Quad URM postdoctoral students also recruit URM postdocs to Harvard.
- The HMS Postdoctoral Recruitment Program (PRP), launched 2018 by the HMS Office for Postdoctoral Affairs, aims to recruit senior grad students attending BSCP and NESS who are interested in doing their postdoctoral studies at HMS; it is designed to match students and faculty with similar research interests.
- Systems Biology runs a program for college students in conjunction with timing of NESS/BSCP and in collaboration with DICP to increase recruitment efforts for graduate students and expands HMS offerings for NESS/BSCP attendees.
- Mechanisms for recruitment are available at multiple levels, for example, continuing to build out the Postdoctoral Recruitment Program.
- A Postdoctoral Career Development session is held as part of NESS in collaboration with industry and co-directed by the DICP office.

IV. **General Harvard Community**
- HMS-based Affinity Groups and Committees
  - LGBTQ Advisory Committee
  - Joint Committee on the Status of Women
  - HMS Accessibility Committee
- Harvard University-wide Affinity Groups
  - Employee Resource Groups (formerly Affinity Groups)
    - Association of Black Faculty, Administrators and Fellows

- o Association of Harvard Asian and Asian American Faculty and Staff
- o Association of Harvard Latinx Faculty and Staff
- o LGBTQ Staff and Faculty Employee Resource Group
- o Committee on Concerns of Women
- o Harvard University Program and Offices
  - Chief Diversity and Inclusion Office (CDIO)
  - Diversity Inclusion and Belonging Council (DIB Council)
  - Disability Resources
  - Administrative Fellows Program

Areas for Improvement:
Recruit, Develop, Advance and Retain Diverse Individuals across the Full Spectrum of Faculty, Trainees, Students and Staff

I. **Recruitment**
- o Talented, diverse trainees who want to come to HMS may not identify existing opportunities and may go elsewhere. At the same time, departments may be unaware of available resources for attracting and retaining diverse candidates.
- o There is a need for better communications around agreed-upon processes related to the recruitment and hiring of postdoctoral fellows. Once at HMS, there is a sense that better pathways are needed for URMs and women to attain Harvard Quad or hospital-based faculty positions. Moreover, senior (7+ year) postdocs would benefit from more opportunities for flexible funding and innovative research opportunities to strengthen their advancement.
- o There is underutilization of existing HMS programs for URM recruitment that support individuals at different levels of their education and career. There also is a need for greater awareness among principal investigators (PIs) and faculty regarding the high caliber of students who participate in these programs and to more actively engage in these opportunities for student and fellow advancement.

- o Low representation can lead to a perceived lack of URM presence or visibility among current faculty, postdocs, trainees and graduate students. This is may be considered by potential applicants as an absence of role models, community and overall support for underrepresented individuals. There is a need to better promote existing programs and to create new opportunities for prospective diverse students/fellows to interact with current diverse students, postdocs and faculty.
- o There is a need for more visible and widespread understanding and commitment from institutions (HMS and affiliates) to the concept of inclusive excellence and recruiting and retaining diverse individuals.
- o Boston is often perceived as a deterrent for diverse candidates. The cost of living is high, with few resources/subsidies available, and the city has had a history of being viewed as racist and non-inclusive.

II. **Retention and Development**
- o The faculty report a need for more consistent career review or mentorship structures across departments/disciplines, including the need for more information on offer letters, career meetings and measures of accountability for career development. There is a need for greater infrastructure to support consistent mentoring, as the burden currently is often placed on mentees to pursue mentoring relationships.
- o Some URM faculty expressed they would benefit from programs that better position them for adequate support, long-term success and upward mobility once they arrive at HMS or HMS affiliates. There is a need for more widespread awareness of existing central resources that address this need, i.e., HMS-sponsored workshops and initiatives focused on leadership training and career development for minority and women faculty.
- o Contributions to diversity and inclusion work may go unrecognized and thus difficult to count toward promotion.
- o There are drop-offs at advancement transition points for URM and female faculty from assistant to associate professor and from

associate to full professor. There is a need for more sufficient and consistent work-life resources to promote equal support during transition periods and key career milestones. Examples include supports for women during/after pregnancy, elder care, family relocation and child care.

o   There is a perception that attrition rates for URMs and women are higher than others, demonstrating an overall need for more long-term success across levels (medical/graduate students, trainees, postdocs, faculty). This includes a need to better identify gaps and obstacles and to implement effective services that decrease differences.

Recommendations:
Recruit, Develop, Advance and Retain Diverse Individuals across the Full Spectrum of Faculty, Trainees, Students and Staff

I.   **Faculty**

o   Expand awareness and variety of offerings such as leadership and other training, orientations (particularly focused toward URM individuals), and opportunities for recognition and pathways to advancement, particularly for junior faculty. Work to develop internal (institution-level) milestones for recognizing individual contributions to diversity work and expand applicability to promotion criteria.

o   Address current perception of upward mobility of URM and women by facilitating faculty success through more clearly navigable advancement procedures. Identify barriers within institutional resources that may serve to exclude diverse individuals or those with less typical backgrounds. Highlight success stories of URM, women and other individuals on the margins (LGBTQ, disabled).

o   Expand existing and create new funding opportunities to retain underrepresented individuals as they transition from trainee to junior faculty to senior faculty.

- Conduct exit surveys of URM faculty who leave HMS to better understand faculty experiences, well-being, perceptions of climate and areas for improvement.
- Identify URM and female candidates for leadership positions and provide sponsorship and leadership training.
- Provide opportunities for URM trainee retention and transition to junior faculty through existing and new fellowship and career development opportunities.

II. **Clinical Trainees**
- Increase programs and supports to build diversity recruitment and retention among HMS-affiliate trainees.
- Provide a central social and informational orientation to serve as an opportunity to network and learn more about HMS and its resources. Develop materials for use beyond orientation that would also be helpful as individuals navigate HMS and Boston.
- Better utilize national meetings for recruitment by organizing Harvard/HMS program receptions and networking events. Work to decrease negative competition across programs. Obtain funding for paid "second looks." Develop more opportunities for prospective students/fellows to interact with current students, postdocs and faculty. If a potential URM trainee is lost for participating residency at an HMS affiliate, work to recruit them back for a fellowship or faculty position.

III. **Medical Students**
- Increase programs to attract applications from groups that represent the School's diversity and inclusion goals.
- Develop vehicles within the Program in Medical Education that address and relieve financial burdens of medical students from disadvantaged backgrounds.

IV. **Graduate Students**
- Create a space for graduate students to meet, learn more about the full gamut of labs at HMS via a Match Fair or similar event. Create built-in opportunities for smaller labs to recruit and for networking opportunities.

- o Recognizing that many college students take a gap year, develop a "bridge" program that would allow students to come to HMS through a one- or two-year research training work experience.
- o Better utilize recruitment opportunities such as NESS and BSCP.

V. Postdoctoral Fellows

- o Increase opportunities for funding diverse candidates via the Dean's Diversity Supplements, and the Dean's Postdoctoral Fellowships. HMS also should create a Society of Fellows, increase the number of fellowships and expand mentoring components of existing fellowships.
- o Create a Senior Postdoctoral Fellowship aimed at senior fellows to pursue innovative, challenging research. This could function as a "career transition award" and pre-faculty fellowship.
- o Develop programming and fellowship opportunities in collaboration with industry.
- o Devise and implement a transparent process for postdoc recruitment and hiring. Increase accountability for diversity among the candidate pool and hiring process.

VI. Staff

- o Develop HMS-specific resources and opportunities to facilitate the diversity among managers and administrative leadership.
- o Provide leadership training and opportunities for sponsorship particularly for minorities and women staff.

VII. General Recommendations

Recruit, Develop, Advance and Retain Diverse Individuals

- o Further support successful practices, i.e., "What is working."
- o Mentoring
  - Identify faculty/PIs who are strong mentors; partner with them for recruitment and hiring efforts. To reduce burden/burnout, consider developing "mentoring teams" as a model for more effective mentorship.
  - Develop infrastructure for better connecting mentors with mentees.

- Identify ways to better acknowledge mentoring beyond existing mentoring awards.
- Develop and widely offer mentor training and resources on best practices.

o Develop resources for thriving in Boston such as housing support, identifying resources within the Boston community *(see DICP-produced HMS Orientation and Resource Guide, published in spring 2019)*; create opportunities for building community *(see Theme 2: Build Community and Belonging)*.

o Work to develop better family and child care benefits across the HMS and affiliate community; better disseminate details.

o Establish mechanisms for departmental accountability for diversity in recruitment and development, both at the HMS Quad and affiliate level. Utilize new infrastructure groups such as the Diversity Council and reconfigure the Quad Diversity Committee to facilitate accountability.

1b. DEVELOP PEOPLE: Recruit, Identify, Nurture and Educate Diverse Leaders Who Champion HMS Community Values

What Is Working:
Recruit, Identify, Nurture and Educate Diverse Leaders Who Champion
HMS Community Values

- The DICP office houses a number of resources, fellowships, and awards that recruit and develop individuals from diverse backgrounds and those who champion principles articulated in the HMS Community Values Statement. For example, the DICP Faculty Fellowship, the Harvard Catalyst/DICP Program for Faculty Development and Diversity Inclusion, and the Annual Leadership and Faculty Development Conference are all focused on highlighting and supporting work that focuses on addressing health disparities, underrepresented populations and other related topics. DICP's Diversity Awards, Community Service Awards, and Program Award for Culture of Excellence in Mentoring all serve to reinforce and recognize individuals for their work in support of diversity, inclusion and belonging.
- Several HMS affiliates have specific offices for diversity that address issues and support efforts that target URM and women at various stages: pipeline, student, resident and faculty. Several programs have also developed supports for resident scholarly endeavors. In addition, there are several affinity and support groups.

Areas for Improvement:
Recruit, Identify, Nurture and Educate Diverse Leaders Who Champion
HMS Community Values

- There is a need for greater visibility of the success of minority, women and LGBTQ faculty and those with disabilities. Low visibility contributes to a lack of awareness of advancement or promotion of diverse individuals into leadership positions. The HMS system is often perceived as needing to be easier to navigate. There is sense that many successful URM faculty are at a high level externally (nationally) but are not recognized or advanced internally in the same way.

- There is a need for more recognition and systemic support for work related to diversity, inclusion and belonging. Progress on this front would lead to greater connection to career advancement.
- There is variation among departments/institutions about the focus of social justice topics as being critical areas for scholarship.

Recommendations:
Recruit, Identify, Nurture and Educate Diverse Leaders Who Champion HMS Community Values

1. Further support successful practices, i.e., "What is working."
2. Create a database and/or tool to facilitate mentorship matches with a particular focus on race/ethnicity, intersecting identities, background, and/or career and research interests.
3. Develop mechanisms/opportunities for identifying, training and supporting new faculty mentors within the HMS community.
4. Create opportunities for networking with mentorship as a focus.
5. Design a program for sponsorship of talented diverse individuals at faculty, staff and administrative leadership levels.
6. Develop industry interactions and partnerships that expand mentoring, access to role models and networking opportunities. Companies often want to increase their diversity, and our students would like exposure to industry.
7. Monitor diversity along pathways to leadership such as division chiefs and department chairs.

1c. DEVELOP PEOPLE: Sponsor Pipeline Programming that Addresses Identified Needs and Clearly Defines Expectations

What Is Working:
Sponsor Pipeline Programming that Addresses Identified Needs and
Clearly Defines Expectations

- Many existing HMS pipeline programs have long-established reputations and successful outcomes, e.g., the Visiting Research Internship Program (VRIP) for medical students, and programs for high-school students such as the Health Professions Recruitment and Exposure Program (HPREP), the Hinton Scholars AP Biology Program, HMS MEDscience and more. These long-standing pipeline programs with documented outcomes provide examples of program administration best practices.
- Pre-faculty pipeline programming such as the New England Science Symposium, Visiting Clerkship Program and the Quad Postdoctoral Fellowship Program also have proven success in developing and recruiting diverse individuals into the HMS system.
- There is an entrepreneurial spirit at HMS, with many individuals interested in developing new programs or initiatives.

Areas for Improvement:
Sponsor Pipeline Programming that Addresses Identified Needs and Clearly Defines Expectations

- There is a need for greater consistency and continuity among pipeline programs. This, at times, is due to the need for greater resources such as funding or staffing. There are not enough "universal" resources/trainings available to educate program staff on best practices and outcome assessment. Across programs there are varying standards for collection of data.
- More consistent cross-program communication is needed; also more designated funding for start-up opportunities or supplemental funding such as mini-grants, innovation awards and more.
- There is a need for more consistent evaluation and assessment of pipeline program outcomes and availability of program data.

- Criteria need to be established to specify whether a program should be considered an HMS pipeline program beyond those specified for use of the HMS name.

Recommendations:
Sponsor Pipeline Programming that Addresses Identified Needs and Clearly Defines Expectations

1. Further support successful practices, i.e., "What is working."
2. Create opportunities for pipeline program leader interaction, enabling leaders to share best practices and identify synergies between programs. Develop an online and face-to-face community and forum for leader interaction.
3. Empower the development of new HMS programs through developing startup funding opportunities and a "starter kit" identifying best practices, HMS resources, definition of pipeline programs, mentor training opportunities, etc.
4. Develop criteria for programs to be considered an HMS pipeline program.
5. Establish sustainable funding to maintain primary and successful pipeline programs.
6. Utilize existing programs as a resource for recruitment as student transition to the next level.
7. Ensure programs re-engage with best practices by offering regular workshops on topics helpful for program development such as program evaluation, marketing, family engagement, unconscious bias and more.

1d. DEVELOP PEOPLE: Support Efforts that Enable Addressing Health Disparities and Social Justice

What Is Working:
Support Efforts that Enable Addressing Health Disparities and Social Justice

- Programming organized by the HMS DICP office, such as the Equity and Social Justice Committee, specifically covers topics of health disparities and social justice (*see Theme 3: Address Culture and Communication).*
- There are multiple HMS, HMS affiliate and departmental offices focusing on issues of health disparities, for example, the Massachusetts General Hospital (MGH) Disparities Solution Center, the Brigham and Women's Hospital (BWH) Center for Surgery and Public Health, and the Boston Children's Hospital (BCH) Office for Health Equity and Inclusion. In addition, the Harvard Catalyst Program for Faculty Development and Diversity Inclusion, and the Harvard Catalyst Health Disparities Research Program provides additional focused support. Some HMS affiliates also seek out partnerships to offer programming related to disparities and cultural competence, for example the Cambridge Health Alliance partnership with Boston Medical Center.
- Health disparities and social justice are special focus areas of the Program in Medical Education.

Areas for Improvement:
Support Efforts that Enable Addressing Health Disparities and Social Justice

- There is a perceived need for more exposure and curriculum content for clinical trainees related to diverse communities, including LGBTQ and disabled individuals.
- There is perceived need for greater support for diversity, inclusion, belonging and equity from leadership, particularly hospital leadership. Some have expressed that historically the institutional response to, or support for, social justice and health disparities interests are not openly discussed nor recognized regularly, nor are efforts sufficient. Regarding social justice and health disparities in the hospitals, there is a sense that more opportunities for inclusion are necessary in programming such as

grand rounds, and diverse speakers often are only brought in to discuss diversity-specific topics.

Recommendations:
Support Efforts that Enable Addressing Health Disparities and Social Justice

1. Further support successful practices, i.e., "What is working."
2. *Work to develop an HMS-wide (including HMS affiliates) commitment to* addressing, discussing and recognizing work related to health disparities, social justice equity and belonging. This includes not only advancing diversity within our community, but also within our programming and resources *(for more details, see the Better Together Plan: Harvard Medical School as a Destination for Diverse Individuals).*
3. Create opportunities for residents and fellows to pursue training regarding health disparities.

1e. DEVELOP INFRASTRUCTURE: Provide Resources for Infrastructure that Supports Diversity and Inclusion

What Is Working:
Provide Resources for Infrastructure that Supports Diversity and Inclusion

- The Quad Diversity Committee was established, convened and staffed through the Office for Diversity Inclusion and Community Partnership and advised leadership on diversity, inclusion and belonging policy and practice, including identifying diversity groups for recruitment and retention. It recommended initiatives that facilitated an environment conducive to diversity, inclusion and belonging. It also reviewed diversity and inclusion metrics of accountability and identified quality improvement outcomes. The process, however, did not include chair-appointed members or mechanisms for annual reporting.
- Diversity/career development offices at HMS affiliates serve as a resource or sponsor for diversity-related programs within HMS-affiliated institutions. Examples include the MGH Center for Diversity and Inclusion, the BCH Office of Health Equity and Inclusion, and the BWH Center for Diversity and Inclusion.

Areas for Improvement:
Provide Resources for Infrastructure that Supports Diversity and Inclusion

- There should be more consistency in financial support of staff dedicated to diversity and inclusion. This staff is necessary to support URM recruiting and programming. Many current resources should be better funded.
- There is a sense that because of the need for greater dedicated funding and time allocated for diversity work, there is insufficient long-term continuity of diversity, inclusion and belonging initiatives, with diversity champions eventually moving on, such as medical students, or having competing responsibilities, priorities or funding in other areas.
- Students and trainees report a sense that the burden of running efforts in diversity and social justice often falls on them (lectures, seminars, workshops, committees, etc.), particularly URM individuals and those with

an interest in health disparities and social justice. This may contribute to burnout.

- Diversity councils and committees at HMS affiliates are often small, not well-known and may meet inconsistently. There is a need for greater institutionalization of programs/infrastructure that supports diversity, inclusion and belonging efforts.
- Within HMS affiliates, there is perceived disparate funding opportunities for services that are related to issues of diversity, diverse populations and health disparities.
- Many departments and programs have goals to increase diversity but would benefit from greater clarity about how to achieve those goals, which efforts to undertake and what resources may exist. There needs to be greater effective dissemination of and access to information. There also is a need for more opportunities for program leadership to learn about diversity offices and resources at their institutions, available funding and grants, and overall best practices.

Recommendations:
Provide Resources for Infrastructure that Supports Diversity and Inclusion

1. Further support successful practices, i.e., "What is working."
2. Provide support for diversity, inclusion and belonging efforts via dedicated staff members and protected time for trainees and faculty to engage in this work.
3. Provide venues for regular and ongoing diversity discussions among institutional and program leaders, creating longitudinal, sustainable groups and institutional memory.
4. Ensure opportunities for collaboration to develop cross-institutional messaging and programming and to identify efficiencies.
5. Continue to support and advocate for specialized URM recruitment and retention efforts and consider establishing new pilots.
6. Reconfigure the Quad Diversity Committee to include representatives nominated by department chairs. This committee should review annual department reports, track outcomes of TFDI and HMS Strategic Plan expectations, and present annually to the Diversity and Inclusion

Committee. Representatives should be responsible for disseminating information to their departments regarding opportunities, policies, practices and programs applicable to advancing diversity, inclusion and belonging at the department level, particularly opportunities for collaborative efforts.

7. Establish a Diversity Council, consisting of members who will serve as liaisons between HMS-affiliate departments, the HMS Diversity and Inclusion Committee, and the HMS Office for Diversity Inclusion and Community Partnership. Members will provide input into processes related to diversity in affiliated hospital departmental searches, advice regarding gaps in diversity programming efforts, particularly those related to leadership recruitment and development, and identify best practices and ways to disseminate information about those practices across institutions and departments. The Diversity Council will also review metrics of accountability and quality improvement outcomes, and provide recommendations for collaborative programming across departments and institutions.

8. Convene the reconfigured Diversity and Inclusion Committee to serve as the primary HMS body responsible for monitoring diversity- and inclusion-related activities within the HMS community. It will advise leadership on diversity, inclusion and belonging policy, practice and programming, including identifying and revising diversity groups for focused recruitment and retention strategies. The committee is charged with recommending initiatives that facilitate an environment conducive to diversity, inclusion and belonging; reviewing metrics of accountability and quality improvement outcomes; and recommending mechanisms for sharing best practices across HMS.

THEME 2

BUILD COMMUNITY AND BELONGING

2a. BUILD COMMUNITY AND BELONGING: Improve Well-being and Decrease Burnout

What Is Working:
Improve Well-being and Decrease Burnout

- Affinity groups at HMS and related programming have been successful in improving community well-being by providing opportunity for diverse individuals and from diverse identities across HMS. Examples of affinity efforts include those for LatinX, Muslim, LGBTQ/allies and women.
- Some HMS affiliates offer resources and information regarding belonging and promoting well-being.
- A recent Harvard University survey sought to capture data regarding burnout and other culture- and climate-related data.

Areas for Improvement:
Improve Well-being and Decrease Burnout

- Word spreads quickly about those who are effective mentors, many of whom thus become over-taxed. Mentors should be well recognized and acknowledged. There also should be clarity on how to become a mentor/mentee for those who are interested.
- There should be a cross-institutional survey/mechanism for collecting data to better assess burnout, well-being, inclusion and belonging across the full HMS community.
- There is a need for data collection specific to experiences within the HMS community of URM, women, those who identify as LGBTQ and individuals with disabilities.
- *See Theme 1: Develop People and Infrastructure.*

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Recommendations:
Improve Well-being and Decrease Burnout

1. Further support successful practices, i.e., "What is working."
2. Create regularly administered cross-institutional surveys to gain more information on specific subtopics and subgroups of individuals. Inclusive measures should be utilized.
3. Develop a second wave of Harvard University's pilot Pulse Survey to capture data from across HMS-affiliate faculty and trainees to allow for cross-institutional benchmarking.

2b. BUILD COMMUNITY AND BELONGING: Promote a Climate of Collaboration and Cooperation

What Is Working:
Promote a Climate of Collaboration and Cooperation

- HMS pipeline programs offer models that could be followed by other programs/organizations, such as engaging a community advisory board (e.g., Hinton Scholars), convening multiple programs for networking and learning (e.g., Summer Programs Dinner) and a culture of collaboration between programs (e.g., HPREP and DICP collaboration).
- The Diversity and Inclusion Fellowship at Harvard University's Graduate School of Arts and Sciences (GSAS) is a positive example of collaboration across students and administrators to advance diversity, inclusion and belonging *(for information on other programs that promote collaboration, see Theme 1: Develop People and Infrastructure).*

Areas for Improvement:
Promote a Climate of Collaboration and Cooperation

- Disparagement among HMS-affiliated programs perpetuates misinformation, reinforces perceptions of a competitive culture and generates myths that may prevent URM individuals from joining HMS or its affiliates.
- There is a need for more systematic opportunities for program leaders to interact and learn about programs (pipeline, diversity, etc.), learn from one another, collaborate on best practices and further develop existing programs.

Recommendations:
Promote a Climate of Collaboration and Cooperation

1. Further support successful practices, i.e., "What is working."
2. Prioritize collaboration on diversity, inclusion and belonging across functions by striving for more diversity in leadership; support existing recognitions and develop new recognitions that reinforce institutional

commitment to building community (diversity, mentoring, community service awards or other non-award means of recognition).

3. Create space and opportunity for open conversations and transparency surrounding diversity and inclusion and its importance in leadership.
4. Explore mechanisms that would better facilitate cross-institutional partnership and collaboration such as the Diversity Council, networking events, retreats, working groups, etc.
5. Explore collaborations between HMS and HMS affiliates, historically black colleges and universities, and Hispanic-serving institutions to generate strategies for attracting more diversity to the HMS system *(see Better Together Plan: Harvard Medical School as a Destination for Diverse Individuals).*
6. Identify ways to partner with the City of Boston and local organizations to improve recruitment and retention by addressing the perceived racial inequity climate of the city.

2c. BUILD COMMUNITY AND BELONGING: Provide Time, Space and Organization for Building Communities within Community

What Is Working:
Provide Time, Space and Organization for Building Communities within Community

- There are several existing programs for affinity group networking and community-building that have been successful. The HMS DICP office organizes annual events such as a Muslim Dinner, the Minority Faculty Promotion Dinner, an LGBTQ Reception, a dinner for Black Men in Medicine, orientations for URM trainees and faculty (new 2019), and a URM Trainee and Family Barbeque (new 2019). The Joint Committee on the Status of Women is also a prominent group that invites members from across HMS and HMS affiliates.
- HMS holds several events that serve to build community and encourage social interaction. Regular social events such as the Green Dragon Pub and holiday gatherings provide informal venues, while the DICP Equity and Social Justice program sponsors a series of leadership forums and special sessions that provide more formal peer engagement on specific topics related to diversity, inclusion and belonging. Additionally, select labs and departments host events and community-building activities.

Areas for Improvement:
Provide Time, Space and Organization for Building Communities within Community

- Due to the sheer size of HMS and its affiliates, there is a need for greater community and a yearning for a sense of belonging. As a result, there can be duplicative efforts across institutions which result in creating silos that do not enable HMS community-building. For individuals at HMS affiliates, there must be a greater sense of their relationship with HMS as a core unifier of all.
- There is a need for more space for intersectionality in infrastructure, programming and conversations. Identities are often siloed into categories (e.g., URM, women, LGBTQ), which does not allow space for acknowledging the multiple aspects of an individual's identity.

- Change of institutional culture is perceived as being slow due to perceived historic biases and that may result over time in disenfranchisement.
- Buy-in on diversity, inclusion and belonging programming and efforts can be sporadic and vary as a priority within departments. There is a need for more clarity and consistency of departmental messaging and action regarding support for URM and women. Infrastructure exists to facilitate cross-Quad collaboration (e.g., Quad Diversity Committee), but involvement is often limited to a small, repeating group of individuals.

Recommendations:
Provide Time, Space and Organization for Building Communities within Community

1. Further support successful practices, i.e., "What is working."
2. Create more cross-institutional spaces and opportunities such as affinity groups and programming for URM individuals and other community-building. Spaces and programming should be cognizant of intersectional identities.
3. Offices and committees at HMS and HMS affiliates should have a well-supported, visible, easy-to-access "home base" for URM, LGBTQ, disabled and marginalized individuals and interests at each institution.
4. Build on and create new events and retreats for Muslim, disabled, LGBTQ and first-generation members of the HMS community.

2d. BUILD COMMUNITY AND BELONGING: Enhance Outreach and In-reach with Our Local, National and Global Communities

What Is Working:
Enhance Outreach and In-reach with Our Local, National and Global Communities

- The HMS Office for Diversity Inclusion and Community Partnership, in collaboration with the Office of Recruitment and Multicultural Affairs (ORMA) and other offices, host self-selecting listservs, such as the HMS LGBTQ OUTlist, that allow for focused communications and building of a cross-institutional network.
- HMS programs such as the Summer Programs Dinner and Hinton Scholars Community Advisory Board offer effective models for participant, community and stakeholder engagement and collaboration.
- HMS programs such as the Hinton Scholars, Reflection in Action, MEDscience and HPREP bring local K-12 students to HMS for enrichment and development activities. Some of these DICP programs organize site visits to HMS labs and affiliates.
- The New England Science Symposium (NESS) gives opportunity to students from across the nation to present their research. NESS is an excellent opportunity for diversity recruitment across multiple levels.
- Programs such as the Visiting Research Internship Program and the Visiting Clerkship Program offer exposure to the internal HMS community.

Areas for Improvement:
Enhance Outreach and In-reach with Our Local, National and Global Communities

- It can be challenging for internal (HMS) and external (general public) constituents to learn about and utilize the full gamut of HMS offerings such as pipeline programs and NESS.
- There is a need for greater awareness of diversity within patient populations.

Recommendations:
Enhance Outreach and In-reach with Our Local, National and Global Communities

1. Further support successful practices, i.e., "What is working."
2. Better utilize NESS and existing programming as a recruitment mechanism and opportunity for national exposure.
3. Develop resources for better disseminating and highlighting — to both internal and external individuals — the HMS programs and resources related to diversity, inclusion and belonging efforts *(see Theme 1: Develop People and Infrastructure).*

2e. BUILD COMMUNITY AND BELONGING: Decrease Access Boundaries to HMS and HMS-Affiliate Programming

What Is Working:
Decrease Access Boundaries to HMS and HMS-Affiliate Programming

- There is select live-streaming available for many HMS events including town halls, which enables non-Quad/non-Longwood individuals to better participate or view content later.
- Some meetings and programs such as Diversity Affiliates, the Consortium of Harvard Affiliated Offices for Faculty Development and Diversity (CHADD), and listening sessions are organized and held at HMS affiliates, which facilitates the success of cross-institutional planning.
- Some programs are offered at times of the day that allow for travel from other locations (i.e., first thing in the morning or at the end of the day), making it easier for non-Quad/non-Longwood-based individuals to attend.
- HMS has recently taken measures to make some facilities more accessible by installing ramps and upgrading restroom facilities.
- All Harvard websites have been changed to be more accessible to all.

Areas for Improvement:
Decrease Access Boundaries to HMS and HMS-Affiliate Programming

- Many individuals report feeling disconnected from HMS when their home institution is not located in the Longwood area (e.g., Cambridge Health Alliance, McLean Hospital, Mount Auburn Hospital), resulting in feelings of isolation and not feeling welcome within the community. Individuals from these HMS affiliates often have difficulty gaining access to the full gamut of HMS events and offerings, either due to time/distance restraints or not receiving notifications. There also an issue of shuttle service between HMS and non-Longwood hospitals *(for more information, see Theme 3: Address Culture and Communication).*
- While Harvard and HMS strive to provide close-captioning of events posted on the website, some event organizers may perceive or encounter difficulty in securing translators or paying for real-time

closed-captioning within event budgets. It is important to communicate to event organizers that the University provides funds to help those who need close-captioning, sign-language translation or other resources for hearing impairment.

- Per mobility and accessibility of the HMS Quad, although there have been major improvements, some areas are in need of additional improvement.
- Non-exempt staff may feel unable to attend programming during the workday because it can interfere with staffing schedules.

Recommendations:
Decrease Access Boundaries to HMS and HMS-Affiliate Programming

1. Further support successful practices, i.e., "What is working."
2. Enable widespread, closed-captioned live-streaming of HMS-sponsored events with availability to view after the fact.
3. Develop systematic means for easily requesting and providing accommodations for individuals with disabilities.
4. Establish regular communication and dissemination of information on available diversity, inclusion and belonging events and resources.

THEME 3

ADDRESS CULTURE AND COMMUNICATION
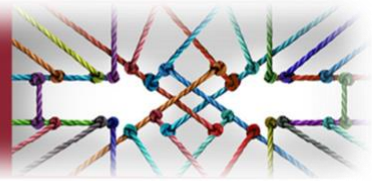
3a. ADDRESS CULTURE AND COMMUNICATION: Counter Bias and Microaggressions

What Is Working:
Counter Bias and Microaggressions

- Approximately 20 HMS faculty and staff have completed train-the-trainer unconscious bias training and are now conducting unconscious bias trainings within HMS institutions for various constituencies.
- An HMS-based working group of unconscious bias trainers has been formed, and members have been surveyed to learn more about institutional nuances, resources, activities and gaps in programming.

Areas for Improvement:
Counter Bias and Microaggressions

- There is a need for greater space and opportunity for safe conversations to work through concepts pertaining to bias, microaggressions, discrimination and racism.
- There is a need for greater clarity pertaining to where and how to report incidents of bias, discrimination and microaggression — as a recipient or as a bystander — across the HMS system.
- There is a need to strengthen the frequency, quality, impact and reach of current unconscious bias training:
  - There are inconsistencies in availability of trainings that reach various constituencies such as faculty, students, trainees and leadership.
  - There is a question of who is performing and taking the training. This varies by institution and can be confusing for individuals to know where to go for bias-related training or materials.

- There is a need for more certified trainers across HMS and HMS affiliates.
- There is a need for more opportunities for shared learning across peer groups or institutions.
- There is inconsistent measurement of learning outcomes and impact.
- There is a need for greater and regular re-engagement following trainings or other continued opportunities to discuss and learn about unconscious bias and microaggressions.
- Mandatory trainings may generate lack of enthusiasm and resentment, resulting in lesser impact.

Recommendations:
Counter Bias and Microaggressions

1. Further support successful practices, i.e., "What is working."
2. Develop a searchable, central electronic resource for information pertaining to bias training including availability and supplemental content.
3. Develop a separate, central electronic resource for trainers to share material, resources and best practices.
4. Develop, and in time require, unconscious bias training for individuals in leadership/management and hiring positions.
5. Establish and better communicate ways to report incidents of bias, ensuring that the mechanisms are clear and minimize opportunity for retaliation. This should be introduced by and supported by HMS and hospital leadership.
6. Expand the pool of certified trainers across HMS and HMS affiliates.
7. Expand and ensure HMS community-wide availability of bystander training.
8. Develop opportunities for engagement with topics of bias via means other than trainings (e.g., discussion groups, videos, online resources).

3b. ADDRESS CULTURE AND COMMUNICATION: Create Space for Safe, Respectful Dialogue

What Is Working:
Create Space for Safe, Respectful Dialogue

- HMS Community-wide Events
    - o The Equity and Social Justice Committee provides programming open to the entire community with a focus on four areas: History and Context, Health Disparities, Leadership Skills and Development (e.g. advocacy), and Culture and Environment.
    - o The HMS Dialogue Series organizes informal gatherings open to the HMS community. It was developed by DICP in response to the findings of the TFDI and community feedback regarding lack of safe spaces. Examples of topics include Images at HMS, Microaggressions, Being 'Other' and 1st Generation.
    - o The HMS Diversity in Leadership Series features case-study sessions targeting management and senior leadership; however, attendance is open to the entire HMS community. It was developed by DICP in response to the findings of the TFDI and as a result of community feedback regarding a need for HMS leaders to better engage with topics related to advancing diversity and inclusive excellence. Examples of topics include Psychological Safety, Unconscious Bias and Dissent in Organizations.
    - o HMS has established a designated prayer/quiet space in Gordon Hall.
    - o Town halls and State of the School events provide opportunities to discuss diversity and inclusion publicly.

Areas for Improvement:
Expand Space and Opportunities for Safe, Respectful Dialogue

- There is a need for intersectionality within our community and recognition of intersecting identities (e.g., LGBTQ, disability, immigrant, first generation) within new or existing programming, discussions and policies at HMS and its affiliates.

Recommendations:
Expand Space for Safe, Respectful Dialogue

1. Further support successful practices, i.e., "What is working."
2. Embed recognition of intersecting identities throughout HMS policy, communications and programming.

3c. ADDRESS CULTURE AND COMMUNICATION: *Ensure Images are Reflective of Community*

What Is Working:
Showcase Inclusive Images

- Several exhibits and productions at HMS in the recent past have been received exceptionally well by the community. Examples include the Dimensions Exhibit, On My Own Time, inclusive rotating content in the Transit Gallery on the lower level of Gordon Hall, rotating exhibits in the Countway Library, the 1st Generation video interview project, and new additions to the Tosteson Medical Education Center such as the Alice Hamilton bust, a portrait of Alvin Poussaint and pride flags.
- The establishment of the Dean's Arts and Cultural Representation Committee provides a structured look at analyzing and updating imagery within the School's buildings.

Areas for Improvement:
Ensure Images are Reflective of Community

- There is a need for greater widespread, consistent diversity representation in programming such as grand rounds, Talks@12, guest speakers, visiting lecturers, etc.
- There is a need for greater representation of diverse individuals, images and themes in HMS physical spaces.

Recommendations:
Ensure Images are Reflective of Community

1. Further support successful practices, i.e., "What is working."
2. Achieve more diverse representation in programming
   a. Invite more URM and women speakers for seminars and other featured events. Ensure community input with regard to topic and speaker suggestions.

b. Build upon and utilize the DICP speaker database, which currently contains more than 4,500 names.

c. Increase diversity representation in the physical HMS environment.

d. Tell the "whole story" of the School's past, using it to contextualize goals for the future.

e. Utilize technology and new tools for supplementing and enhancing existing content and spaces.

3d. ADDRESS CULTURE AND COMMUNICATION: Develop Searchable Shared Resources that Build and Reinforce Connections

What Is Working:
Develop Searchable Shared Resources that Build and Reinforce Connections

- The DICP speaker database serves as a resource for speaker searches, faculty recruitment, committee membership and visiting faculty opportunities.
- The DICP hosted diversity, inclusion and equity related events from across HMS, its affiliates and the Harvard University community.

Areas for Improvement:
Develop Searchable Shared Resources that Build and Reinforce Connections

- There is a need for more searchable, shared resources across HMS and its affiliates, addressing the current disconnect of information surrounding pipeline programs. A significant improvement would be a singular database or resource that provides a listing and relevant details of all HMS-affiliated pipeline programs, which could prove useful for both internal users (program leaders, HMS community members) and external users (students, parents, teachers).

Recommendations:
Develop Searchable Shared Resources that Build and Reinforce Connections

1. Further support successful practices, i.e., "What is working."
2. Develop a "pipeline portal" and explore similar opportunities for shared resources across HMS functions.
3. Where possible, explore the creation of regularly updated databases for utilization internally and for sharing information externally.
4. To disseminate HMS-wide events, news and other communications, utilize the platform MyHMS and the calendar maintained by the HMS Office for Communications and External Relations (OCER).

3e. ADDRESS CULTURE AND COMMUNICATION: Provide Accessible, Inclusive, Useful Websites

What Is Working:
Provide Accessible, Inclusive, Useful Websites

- The Diversity and Inclusion calendar hosted by DICP includes programming sponsored by Harvard University, Harvard faculties, HMS, HMS-affiliated institutions and their offices.
- The DICP website links to HMS and its affiliates and to Harvard University's diversity offices, affinity groups and programs.

Areas for Improvement:
Provide Accessible, Inclusive, Useful Websites

- There is a need for centralized resources and widespread knowledge about the availability of advancement and career development resources. Some faculty expressed they are unaware, disconnected and unempowered regarding promotion and career development opportunities. Some trainees report difficulty locating HMS-related information on benefits, events, diversity groups, policies and resources.
- Websites (both HMS and affiliates) can be difficult to navigate to locate diversity information, resulting in inadequate awareness of available resources, events and opportunities.

Recommendations:
Provide Accessible, Inclusive, Useful Websites and Linkages Across System

1. Further support successful practices, i.e., "What is working."
2. Develop centralized, easy-to-navigate resource(s) for disseminating information regarding diversity-related resources, policies, programming, etc.
3. Develop inclusive e-communication and marketing tools to better communicate policies, resources and programming while also reinforcing an institutional culture of inclusion. A previously successful model was the DICP newsletter.

4. Specify diversity and inclusion content recommended to be featured across all HMS and affiliate websites. Content should be consistent with institutional and departmental goals and represent clear ties to HMS and its mission.

3f. ADDRESS CULTURE AND COMMUNICATION: Embed Diversity, Inclusion and Belonging Messaging as a Standard Practice

What Is Working:
Embed Diversity, Inclusion and Belonging Messaging as a Standard Practice

- Existing groups/programs/mechanisms such as Diversity Affiliates and the Consortium of Harvard Affiliated Offices for Faculty Development and Diversity (CHADD) that straddle institutions.
- Centralized HMS policies, communications and events that emphasize the importance of diversity, i.e., the HMS Diversity Statement, Diversity and Inclusion Policy, and Community Values Statement.
- The Harvard University Inclusion and Belonging Initiative, the establishment of the Harvard University Diversity, Inclusion and Belonging Council, and the carrying-out of the University's Task Force on Inclusion and Belonging's Tools and Goals for cross-institutional implementation.
- Dedicated offices at HMS such as the Office for Diversity Inclusion and Community Partnership, the Office of Recruitment and Multicultural Affairs, the Division of Medical Sciences (DMS) Office of Diversity and Minority Affairs, the Harvard Graduate School of Arts and Sciences and other, more general offices with a track record of supporting diversity initiatives such as Harvard's Faculty of Arts and Sciences (FAS) Office for Postdoctoral Affairs.

Areas for Improvement:
Embed Diversity, Inclusion and Belonging Messaging as a Standard Practice

- There is perceived need for greater consistency among leadership related to policymaking, promoting and prioritizing inclusion and equity. This may be related to being unaware of available programs and access to information about programs and policies.
  - Perceived need for greater gender pay equity and salary transparency.
  - Perceived need for greater policy/infrastructure for clinical and Quad department-level reporting regarding diversity activity.

- Perceived need for greater top-down support for diversity and inclusion from some hospital leadership. This perception varies across HMS affiliates.
- There is perceived need for more "proactive" communication from leadership that reinforces institutional priorities regarding diversity and equity. The perception is that communications are often "reactive," i.e., addressing something that has already occurred.
- There is an external perception that HMS should be more supportive and welcoming.

Recommendations:
Embed Diversity, Inclusion and Belonging Messaging as a Standard Practice

1. Successful practices, i.e., "What is working," should be continued and further supported.
2. Leadership at both HMS and HMS affiliates should strive toward presenting an alignment on the topics of diversity, inclusion and belonging via shared messaging through communications that stress respect and highlight success stories within the community. Leadership should also continue shared support and increase institutional participation in existing programs such as the Visiting Clerkship Program and faculty fellowships, which, via cross-institutional collaboration, have historically supported the collective goals of HMS and its affiliates for diversity and inclusion.
3. Diversity, inclusion and belonging should be priorities across-the-board, and have clearly stated, ambitious, measurable goals for each institution with clear ties as to how they relate to advancing diversity within faculty and leadership.
4. HMS and its affiliates should embrace the Better Together "Big Bang Goal" — an aspirational, HMS-wide, cross-institutional diversity and inclusion goal of being the institution of preference and destination for diverse candidates and individuals committed to addressing equity, social justice and health disparities. Over time, HMS should track, monitor and publish on progress and outcomes.

5. Per communications, HMS and its affiliates should utilize different means of communicating information and resources to ensure content reaches audiences broadly, working with respective information technology (IT) offices to ensure messaging reaches the full HMS community.

THEME 4

4a. HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE: Monitor and Track Outcomes

What Is Working:
Monitor and Track Outcomes

- The LCME self-study accreditation process, completed in March 2019, required gathering and reviewing data on many areas relative to diversity including, but not limited to, faculty appointments, scholarship activity, medical student demographics and pipeline programs. Pipeline program data included a program listing with summaries, participation data and survey responses where available.
- There are several examples throughout the HMS community of ongoing longitudinal tracking models including the work of DICP Converge, the research and evaluation arm of DICP, regarding trainee-to-faculty transitions, climate surveys administered at individual affiliated institutions, and the MGH/McLean Psychiatry Program Annual Survey of current and past trainees.
- Harvard University administered a pilot Pulse Survey across Harvard faculties in 2019.
- Harvard Medical School is developing a 2nd Wave Pulse Survey to capture data from faculty at HMS affiliates. This survey will launch in the 2019–2020 academic year.

Areas for Improvement:
Monitor and Track Outcomes

- There is a need for more consistent, HMS-wide collection, tracking and reporting of data across institutions. General data is available but is not

consistently tracked across HMS and lacks disaggregation by discipline, demographics, retention and advancement within Harvard/HMS.

- There is a need for greater departmental accountability for diversity efforts and activity including recruitment, hiring, development and community-building.
- There is a need for robust qualitative data regarding culture and experience at HMS.
- There is a need for more consistent outcomes assessment and data collection within HMS programs (broadly defined: pipeline programs, events, academic programs). There is a need for consistent definition, common methods for collection, and agreed-upon metrics and outcomes across all programs.
- There is a need to better track an individual's progress throughout the continuum of the Harvard/HMS system (i.e., pipeline to student, student to trainee, trainee to faculty, faculty to leadership).

Recommendations:
Monitor and Track Outcomes

1. Further support successful practices, i.e., "What is working."
2. Establish common metrics for all HMS-affiliated programs to collect and track.
3. Create infrastructure and mechanisms to enable consistent, HMS-wide collection, tracking and availability of disaggregated data for demographics, retention/advancement, mentorship, diversity work, publication/first authorship.
4. Utilize the Diversity Council, the Quad Diversity Committee, and the Diversity and Inclusion Committee to ensure tracking and accountability for diversity activity across the HMS community.
5. Examples of suggested metrics:
   a. URM recruitment, applications, interviews, hires
      i. Recruitment activity
      ii. Diversity of applicant pool
      iii. Diversity of hiring/admissions committees

      iv. Implicit/unconscious bias training for all hiring/admissions committee members

      v. Tracking recruitment and hiring outcomes

      vi. Tracking of different career trajectories

b. Existing HMS diversity

      i. Diversity categories

      ii. Representation in leadership at multiple levels (chair, division chief, course director, etc.).

c. Department diversity initiatives

      i. Designated diversity faculty representative from each department/discipline on the Diversity Council

      ii. Annual diversity reporting

         1. Summary of departmental activities relating to diversity (i.e., hiring, programming, trainings, etc.)

      iii. Diversity within events/programming/awards/trainings held

d. Disaggregated career-related metrics

      i. Transitions

         1. Student to trainee/postdoc

         2. Trainee/postdoc to faculty

         3. Faculty to administration

      ii. Pipeline students

         1. Track students from pipeline programs who become members of the HMS community as students, staff, trainees or faculty

      iii. Medical and graduate students

         1. Time to degree completion

      iv. Faculty

         1. Time to promotion

         2. URM and women publications by department/discipline

         3. Nominations and receipt of HMS awards

         4. Exit surveys of URM individuals upon HMS departure

4b. HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE: Endorse Continuous Quality Improvement Principles for Diversity and Inclusion Programming

What Is Working:
Endorse Continuous Quality Improvement Principles for Diversity and Inclusion Programming

- Program Evaluation Workshops held by DICP Converge (the office's research and evaluation arm) are organized to connect program leaders with strategies for demonstrating program effectiveness, approaches to evaluation and available tools.
- Grant and accreditation requirements necessitating assessment and outcomes data help build buy-in for tracking and measuring diversity.

Areas for Improvement:
Endorse Continuous Quality Improvement Principles for Diversity and Inclusion Programming

- There is a need for greater cross-institutional benchmarking and tracking.
- Data is inconsistently gathered across programs and institutions (e.g., post-Match Day residency placements, surveying, climate surveys, etc.) and a need for greater agreement on data definitions.
- There is a need for enhanced mechanisms for regular training in program assessment/evaluation and a lack of supplemental materials detailing principles of continuous quality Improvement (CQI).

Recommendations:
Endorse Continuous Quality Improvement Principles for Diversity and Inclusion Programming

1. Further support successful practices, i.e., "What is working."
2. Build opportunities for programs to benchmark against one another and share best practices.
3. Establish a culture of assessment and continuous evaluation by developing tools and mechanisms for training in program evaluation and assessment.
4. Establish a data dictionary with agreed-upon metric definitions, methods of analysis and ways of reporting.

4c. HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE: Incorporate Evidence-based Decision Making that Leads to Tangible Change

What Is Working:
Incorporate Evidence-based Decision Making that Leads to Tangible Change

- DICP Converge conducts research studies that provide data as evidence from which knowledge-based interventions can be developed. Some areas of research include faculty networks, medical student and resident career paths, and burnout among diverse populations.
- Through data from HMS CRICO, in conjunction with the Office for Academic and Clinical Affairs, the Office for Faculty Affairs, DICP and Converge provide evaluation and monitoring support on a pilot project designed to transform the search process for senior administrators.
- The Office of Educational Quality Improvement (OEQI) was established to improve CQI practices in the Program in Medical Education (PME). OEQI created a PME data warehouse, administers and analyzes post-course evaluations, and gathers data on the learning environment and student grievances.

Areas for Improvement:
Incorporate Evidence-based Decision Making that Leads to Tangible Change

- There must be deeper understanding of the reasons behind attrition, transitions and productivity leading to advancement for faculty, students and trainees, therefore requiring minimal implementation of efforts involving data, theory, tracking of outcomes or use of comparison groups.
- There is a need for disaggregated data to inform unique interventions and resources.
- There is a need for information pertaining to the HMS community as a whole, including cross-institutional metrics.

Recommendations:
Incorporate Evidence-based Decision Making that Leads to Tangible Change

1. Further support successful practices, i.e., "What is working."

2. Upon departure, conduct exit surveys of faculty, students and trainees to better understand experience and perceptions of the HMS climate in order to leverage information for future planning and decision making.
3. Conduct qualitative and quantitative research on retention, transitions and productivity of faculty.

4d. HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE: Promote Transparency

What Is Working:
Promote Transparency

- Centralized HMS policies, communications and events that emphasize the importance of diversity are effective means of establishing institutional priorities and reinforcing ideals of transparency. Examples include the HMS Diversity Statement, Diversity and Inclusion Policy, and Community Values Statement. HMS town halls, State of the School addresses, and other gatherings such as retreats also promote community accountability and transparency.
- HMS Facts and Figures published on the HMS website provide general information on the HMS community.
- The HMS Office for Faculty Affairs (OFA) annually publishes general faculty demographics on the HMS website.

Areas for Improvement:
Promote Transparency

- There must be more widespread awareness regarding availability of information on promotion criteria and processes. This is despite multiple presentations by OFA, the availability of one-on-one meetings and the placement of promotion criteria in the *HMS Faculty of Medicine Governance, Appointment and Promotion Handbook.*
- There is need for greater information-sharing among HMS and HMS affiliates. The workforce and diversity-related data of HMS affiliates are siloed and generally unavailable to HMS, rendering HMS limited in its capacity to adequately monitor outcomes or progress toward community goals. Additional barriers exist due to employer confidentiality standards.
- Due to differing human resources (HR) policies and compensation structures across HMS and its affiliates, there is a presumed lack of consistency as well as lack of transparency regarding compensation equity.

Recommendations:
Promote Transparency

1. Further support successful practices, i.e., "What is working."

2. Increase departmental accountability for diversity activity by establishing designated diversity representatives in each department, tasked to report annually on designated diversity metrics, planning activity and diversity-related programming.

4e. HOLD ACCOUNTABLE AND GENERATE KNOWLEDGE: Generate New Knowledge that Informs Workforce and Leadership Efforts and Has Local and National Impact

What Is Working:
Generate New Knowledge that Informs Workforce and Leadership Efforts and Has Local and National Impact

- Overseen by DICP Converge, the Pathways Data Repository — a multi-institution, multi-use, multi-source, annually updated database — supports institutional quality improvement and performance management related faculty workforce development and provides a resource to address research questions about factors that hinder or support the career development of diverse faculty.
- Also stemming from DICP Converge research, the Advancing Diversity and Embracing Inclusion research program is an examination of faculty and trainee connections, productivity and retention with attention to mentorship will generate empirical evidence that informs the design of interventions to better support the minority biomedical careers pipeline.
- Harvard Catalyst and DICP Converge work in collaboration on a mixed method, exploratory sequential study that addresses the influence of medical school teaching and learning environment on the training choices and outcomes of medical students and residents. This is important, as these decisions can influence career intentions regarding an academic research track.

Areas for Improvement:
Generate New Knowledge that Informs Workforce and Leadership Efforts and Has Local and National Impact

- There is a need for program leaders to learn about the status of diversity, inclusion and belonging in our community; gain information on best practices, available funding, resources and offices at their own institutions; and opportunities for collaboration, sharing of resources and program partnerships.

Recommendations:
Generate New Knowledge that Informs Workforce and Leadership Efforts and Has Local and National Impact

1. Further support successful practices, i.e., "What is working."
2. Create a regularly updated, searchable resource that can be used to identify best practices and benchmarking across HMS programs
3. Conduct an HMS-Affiliate Pulse Survey to measure culture and climate, and create opportunity for cross-institutional benchmarking and inform collaboration on diversity, inclusion and belonging efforts.
4. Conduct qualitative and quantitative research to better understand current culture, climate and programming, and inform future diversity, inclusion and belonging initiatives.

III. BETTER TOGETHER PLAN
Harvard Medical School as a Destination for Diverse Individuals

As the Task Force on Diversity and Inclusion (TFDI) and its subcommittees deliberated, the need emerged for a long-term, ambitious plan to establish HMS as a destination for diverse individuals. Based on community stakeholder feedback, the TFDI envisioned a Better Together plan that articulates HMS's "Big Bang Goal" to be the institution of preference for diverse candidates.

The plan's overall vision for success includes across-the-board increased representation of underrepresented, historically marginalized individuals such as URM, women, those who identify as LGBTQ, and individuals with disabilities — at all levels, particularly senior faculty and department administrators and leaders. The HMS ecosystem should be one that attracts and retains top talent, not only because of its reputation for excellence in medicine, but for its environment valuing, developing and advancing diversity. Better Together also acknowledges a shared responsibility and potential to address issues of health disparities, equity

and social justice. There should be distinct "Better Together" branding and a unified front among leadership to connect these efforts across HMS and its affiliates. The plan is based on the same four themes driving the short-term recommendations outlined earlier in this report.

- **Theme 1: Develop People and Infrastructure**
    - *Better Together Goal: Become a leader in diversity and inclusion, particularly at levels of leadership, both nationally and among Harvard faculties.*
    - *Vision:* Harvard Medical School aims to develop and advance individuals within its community, paying special attention to ensuring development of and access to resources that will empower individuals to succeed. Developing HMS infrastructure includes crafting and regularly reviewing policies to advance diversity, reinforce institutional vision, and enable further progress toward diversity, inclusion and belonging as a collective HMS community. Resources should be developed that support individuals and families and allow them to thrive as members of the HMS and Boston community. Infrastructure should also be developed that readily enables cross-institutional collaboration and communication. Special focus should be placed on faculty and leadership.

- **Theme 2: Build Community and Belonging**
    - *Better Together Goal: Create inclusive community via physical environment (accessibility and images) and programming; engage the Boston community to improve climate/reputation.*
    - *Vision:* The HMS community should be one with shared vision and goals for creating an inclusive HMS system, a thriving Boston community, and an innovative, collaborative, inclusive national landscape in medicine and biomedical sciences. By operating within this shared vision, HMS will continuously pursue efforts to create time, space and organization for building community, and to ensure diversity representation in leadership and programming. The physical environment of HMS will be reflective and inclusive of the diversity located within its community. HMS and its affiliates will collaborate

to address health disparities and related biases across Boston, while engaging with the Boston community to improve reputation and overall climate.

- **Theme 3: Address Culture and Communication**
    - *Better Together Goal: Establish HMS as a hub for diversity.*
    - *Vision:* The vision for addressing culture and communication on a large-scale level includes goals to transform Harvard Medical School's reputation into one of inclusion, innovation and community. HMS aspires to foster an inclusive culture through programming that recognizes its community's intersecting identities, through continuously re-engaging with and addressing biases, and through effectively communicating and ensuring access to HMS-wide resources, events and information for the entire HMS ecosystem.

- **Theme 4: Hold Accountable and Generate Knowledge**
    - *Better Together Goal: Consistent HMS-wide collection, tracking and availability of disaggregated data that is utilized for continuous quality improvement and establishes a culture of transparency and evidence-based decision making.*
    - *Vision:* HMS will consistently track, monitor and publish on outcomes for its diversity, inclusion and belonging efforts. This will both promote a culture of transparency and hold HMS accountable to its goals for improving representation and climate. HMS will identify minimal expectations and best practices across its system at varying levels including institutional, department and program. HMS will establish a culture of continuous improvement and data-driven decision making.