Joan Y. Reede, MD
Nothing to Disclose
Diversity Inclusion and Leadership: Creating the Space for Productivity, Advancement and Retention

Joan Y. Reede, MD, MPH, MS, MBA
Harvard Medical School
Office for Diversity Inclusion and Community Partnership
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Why is diversity important?

• Realize Values
• Address Complex Problems
• Enhance Viability

Diversity Inclusion
Realize Values
Harvard Medical School
Mission Statement

“To create and nurture a diverse community of the best people committed to leadership in alleviating human suffering caused by disease.”

• Diversity:
  – A Cornerstone of Excellence
  – A Prerequisite for World Leadership
  – An Imperative to Transform Culture

Dean Jeffrey S. Flier

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Diversity Toolbox Unpacked

• **Diverse Perspectives**: ways of representing situations and problems
• **Diverse Interpretations**: ways of categorizing or partitioning perspectives
• **Diverse Heuristics**: ways of generating solutions to problems
• **Diverse Predictive Models**: ways of inferring cause and effect

2012

- US – 37% Minority
  - >40% Minority population
    - 25 States plus DC
  - Majority Minority <5 years old
    - 13 States plus DC

- In 5 years, among children <18 years of age, >50% minority

- 2060, US population projected 57% minority

- Immigrant Children - fastest growing segment of population

- 25% children in US (18.4 million) live in an immigrant family

- 89% of immigrant children born in US
  - US citizens

Source: Pediatrics 2013; 131:e2028-e2034

http://www.census.gov/newsroom/releases/img/racehispanic_graph.jpg
Distribution of US Medical School Faculty by Race/Hispanic Origin, 2011

- White, 84,222, 61.1%
- Asian, 17,195, 12.5%
- Black, 3,954, 2.9%
- Hispanic, 5,491, 4.0%
- AI/AN/NH, 366, 0.2%
- Other/Unknown, 24,077, 17.5%
- Multiple, 2,620, 1.9%

URM = 7%

Source: AAMC
Diversity in Medical Education: Facts & Figures, 2012

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A Five-year Comparison of Women’s Representation in Permanent Leadership Positions, AAMC, 2012

HMS Office for Diversity Inclusion and Community Partnership

ROADS TO A CAREER IN ACADEMIC MEDICINE

- Continuity
- Consistency
- Collaboration
- Creativity
- Communication
- Consideration
- Commitment

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Visiting Clerkship Program 1990-2013

- 1,083 Students
- 60% Women
- >135 Medical Schools
- 169 Matches to HMS Internship, Residency or Fellowship
- >350 HMS Faculty Advisors

49 HMS Faculty Appointments

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Mongan Commonwealth Fund Fellowship in Minority Health Policy

• To prepare physicians for leadership roles in transforming health care delivery systems and promoting health policies and practices that improve access to high quality care for minority, disadvantaged and the most vulnerable populations

• To support the development of a network of minority physician leaders capable of creating high-performance health systems for vulnerable populations, well-trained academically and professionally in health policy, health management, public health, and clinical medicine, as well as committed to pursuing careers in public service

Women = 58%
Alumni Fellow/Scholars Outcomes

April 2013 (N=104)

- **89.4%** serve on national/federal committees or advisory boards or state/local committees
- **69.2%** have been invited for interviews on TV, radio and newsprint to discuss public health and minority health issues
- **68.2%** have published
- **100%** engaged in policy, research and/or service delivery related to minority health
- **78%** have held academic appointments at schools of public health and medicine
Lessons Learned - Programs

- Build talent pipeline through seamless articulation of programs — both internally and externally.
- Create opportunities for multiple points of entry and exit.
- Have flexibility in programming that is responsive to emergent environmental and policy changes and to local needs.
- Engage community (internal and external) as vehicle for affecting student outcomes.
- Be willing to cross disciplinary boundaries.
- Recognize the importance of systems.
- Attend to career development that is coupled with mentoring and skill attainment at all levels across the academic continuum.
- Build in tracking, monitoring and evaluation.
Converge: Together Building Change
Research and Evaluation
New Opportunities for Knowledge

• ARRA Pathfinder
  – Data Repository
  – Analytical Tools
  – Evidence-based Interventions

• Women and Inclusion in Academic Medicine
  – Mixed Methods
  – 13 partner, 2 collaborating US Medical Schools
  – Inform policy, practice and programs

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Reede-Hill Diversity Inclusion “Capacity Paradigm”

- Mentors
- Connections
- Networks
- Productivity
- Entry
- Retention
- Advancement
- Research
- Teaching
- Service

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Intra-organizational coauthorship reach is the sum of coauthors and the coauthors of coauthors (second degree connections).

Gender and Race/Ethnicity Differences in Intra-Organizational Co-authorship Reach by Age Groups

Data date: January, 2012
Lessons Learned - Research

Values
• Move toward evidence-based
• Novel ideas & innovative approaches
• SMART metrics
  – Specific, measurable, actionable, relevant, timely

Complexity
• Context is important
• Interdisciplinary teams
• Multiple stakeholders

Viability
• Leadership buy in
• Willingness to change

Diversity Inclusion

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