

DISMANTLING RACISM
AND ADVANCING EQUITY,
DIVERSITY AND INCLUSION
IN THE SCHOOL OF MEDICINE



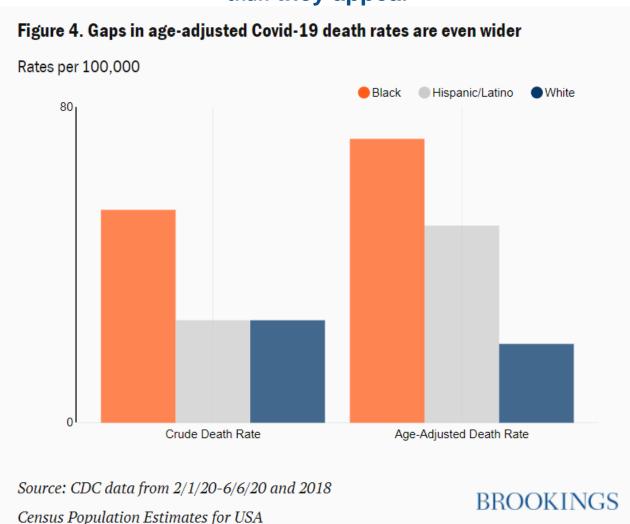
- Background and Context
- Strategic Planning Process
 - Duke Health Anti-racism Pledge
 - Constituent Engagement
- Strategic Plan Framework: Goals and Priorities
- Implementation Accountability
- Example: APT Process
- Modelling the Way

Background and Context—Environmental Forces





Race gaps in COVID-19 deaths are even bigger than they appear



Brookings: Race Gaps in COVID-19 Deaths are Even Bigger Than They Appear.

Background and Context—Duke Voices

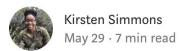
My White Coat Feels Heavy











The Experience of a Black Medical Student in an Era of Police Brutality and Injustice



woke up this morning ready to start the day. There's a 74 degree sunny forecast for



A Letter on the COST for Black Faculty

Letter from Black Faculty

Dear Duke School of Medicine, Health System, and PDC Faculty,

We, Black Faculty across Duke Health, greet you as fellow co-investigators, colleagues, clinicians, and companions with a simple statement: We can't breathe.

The challenges of 2020 and now 2021 have been inexplicable. Like many of you, we are stretched thin by intermittent quarantine and isolation, virtual meeting participation, electronic message intensification, and home school administration. As we navigate a pandemic that has disproportionately impacted people of color, we are also coping with an unrelenting haze of police brutality and hateful rhetoric that openly devalues our existence. Over the last several months, we, and other Black people, have not only seen family, friends, and community members die at higher rates from COVID-19, we have watched people who look like us gunned down while going for a jog, murdered in their own homes, threatened while bird watching in Central Park, and mercilessly choked on camera. Moreover, we recognize that these are the tragedies that have come to national attention. As recent directives from the White House surreptitiously support supremacist notions and actively dismantle diversity trainings, the burden on people of color is unequal and unsustainable. As put so well in the title of an op-ed by Danielle Cadet, "Your Black Colleagues May Look Like They're Okay — Chances Are They're Not." Yet, we come to work every day to serve this institution and community even as we face marginalization, racism, and other institutional impediments to our professional success and personal well-being. Because of the weight of these injustices, we can't breathe, or as similarly expressed over half a century ago by civil rights leader, Fannie Lou Hammer, "We are sick and tired of being sick and tired."



Duke University School of Medicine Moments to Movement: Dismantling Racism

On June 16, 2020, the School of Medicine launched a strategic planning process during the *Turning a Moment into a Movement: Dismantling Racism in the Duke University School of Medicine and Beyond* virtual event.

Duke Health Anti-racism Pledge

- We stand against racism, bias, and hate.
- We treat all people with respect.
- We recognize our own implicit biases and actively seek, listen, and respond to feedback.
- We advocate for high quality, equitable health care as a human right.
- We are guided by science and know that excellent research and health care cannot happen without equity.
- We commit to educating ourselves and the next generations to eliminate racism and racial inequities.
- We use our expertise to study the impact of racial injustice on health outcomes.
- We are committed to living our values and standing for values and actions that promote health and healthy communities for all.

Duke Health Stands Against Racism

Our pledge to our patients, our people, and the communities we serve

Good institutionary larger in the frequential or the other. In starture our communities, our frames, our stateds, and our employees it immediate mind, leady and upon. Coming for all three to the record Cube freath or this notice. In the Color Health Senda, we believe that solves in a public health with a will be our communities have an place for hadred. We delive that shelvening conspitional case, groundlessting records, and log-motion education requires or to identify forms of records and hadron to just information of the color and the product of the color of the color

Healthcare is more than a join-off is a saliting, in answering that out, we're distincted our love to advancing, the health of neuropine and premoting healthy assessmenties, faith of us has a more impreciability to dand against realism and halo is all the terms, to be self-assess, and to make equilative chains a faily

That is how we create a community that is stronger, healthler, and more just —and that is why we make this pledge.

- efficiency and region with a big and but
- We treat at people with respect. We value each other's difference. We care for each other through hindress and an understanding that life is precious.
- We encaption our term implicit because and actively seek, follow, and empored to feedback from others as part of our personal growth and development. When confronted with raction, we always take action for create and personal it.
- We advante for high quality equilative health new as a horsen right, and we deducte considers to exercise the painful expandions that districts.
- "Bit are guided by colonous and immer that excellent research and health-core serred happen without opply. To deliver the most effective one, we must ensure equitable access to tradments and care, as that care individual can actions optimal health.
- We control to educating surraives and the root generations of healthcare, science, and technology professionals to economicipal, country, and attimately eliminate social and tacket inequalities.
- We can our experiments study the impact of nature patter on health automate. We reduce health dispersion by activity engaging members of diverse populations to guide and field our research.
 We commit to translating that research into practice, sharing what we learn as we encourage other installations to do the same.
- We use committed to fixing our velocis and standing for values and actions that promite health and healthy communities for all Velocities with our community for the public good, including education out foreign a Mindeber result, fixed equation and occers to health one.

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Strategic Planning Process

Preplanning/ Framing

Current Assessment

Future Direction

Implementation Planning

SCOPE THE PROJECT

- Defined scope and project participation
- Developed and refined the process
- Identified key strategic questions

DEVELOP FACT BASE

- Analyzed data—and identified gaps
- Conducted surveys, focus groups, and interviews
- Incorporated findings from recent culture surveys and letters from our community

STRATEGY DECISIONS

- Developed vision and goals
- Collaborated with Health System and University partners to align overarching objectives
- Identified critical priorities and initiatives

MOVING IT FORWARD

- Developed communication plan
- Defined organizational and resource requirements
- Transitioned early phase implementation to accountable parties

Project Structure and Constituent Engagement

Facilitate stakeholder engagement and buy in

The work was led by committees organized largely based on constituency—students, faculty, staff—to facilitate focused efforts and engagement. Committee co-chairs represented constituents at the Oversight Committee.



Strategic Plan Framework

Dismantling Racism and Advancing Equity, Diversity and Inclusion STRATEGIC PLAN FRAMEWORK

Our Goals

- 1. Enhance racial diversity and equity, inclusion and respect for all of our constituents
- Advance careers among underrepresented racial and ethnic (URE) groups in medicine, biomedical science and technology
- 3. Catalyze anti-racist practice through education of our current and future workforce
- Stimulate and promote evidence-based discoveries and their translation to reduce racial health disparities, promote equity, and improve health
- 5. Establish our School as a transformative leader in anti-racism and social justice education and research

Strategic Plan Framework

Our Priorities

Cultivate
an Inclusive,
Equitable and
Anti-Racist
Environment

Nurture, Reward and Attract Outstanding Talent Advance
Education and
Training to Support
an Anti-Racist
Workforce

Develop
Anti-Racist,
Equity-Centered
and Community
Engaged Research
Practices

Ensure
Sustainability
by Strengthening
Leadership Capacity
and Organizational
Accountability

Critical Enablers

Organizational Structure

Data and Transparency

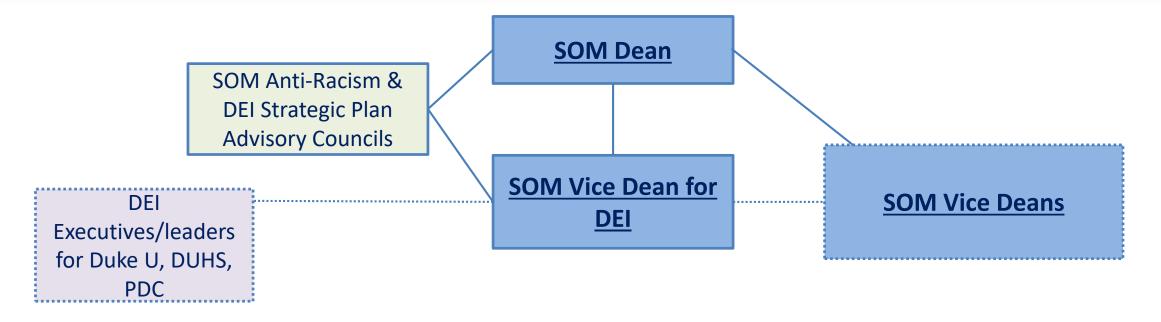
Partnerships

Communications

Resource Allocations

Development and Alumni Relations

Implementation Accountability



IMPLEMENTATION TEAMS & OFFICES

- Office of Equity, Diversity & Inclusion (EDI); Multicultural Resource Center (MRC); IDEALS Office
- Entity level Vice Chairs/Leaders of EDI
- Future structural needs determined by VDDEI (e.g., recommendations for Staff DEI Dean, Dean of DEI/AR Education)
- Department Chairs & Center/Institute Directors
- Office for Institutional Equity
- University Office for Faculty Advancement

Implementation: Rewiring APT, Mentorship, Sponsorship & Coaching

Challenges

- Too few URiM's in Leadership and Full Professor level
 - 28% of SOM Class of 2024
 - 14% GME Entering 2021
 - 10.2% of Assistant Professors
 - 7.2% of Associate Professors
 - 4.4% Professor (20 Hispanic and 9 Black) of 663 Full Professors
- APT process and criteria are opaque, confusing and inconsistently applied
- Wide variations in mentorship, sponsorship and coaching practices
- APT as "quality assurance" but no "quality improvement"

APT, Mentorship, Sponsorship & Coaching

Recommendations

- Require anti-bias and anti-racism training for all School of Medicine leadership
- Increase BIPOC representation in leadership by 100% in five years
- Increase Black faculty at full professor level by 100% in five years
- Build IT infrastructure to support APT process
- Acknowledge full breadth of scholarship Duke values including advocacy and DEI work
- Revise Departmental APT committees to represent breadth of department
 - Add Quality Improvement mission to APT Committees
 - DAPT Committees must have BIPOC membership
- Transformation of Annual Review Process to focus on growth

18-Month Priority Initiatives (relevant to APT)

- Revise <u>annual review process</u>
 - DEI lead engaged in reviews for all BIPOC faculty
 - Revising template to recognize DEI activities
- Create **standard guidelines** for Departmental APT committee composition/responsibilities
 - Committee diversity, experience in DEI, implicit bias and anti-racism education, annual review of faculty progression data for race/ethnicity, gender trends
- Systematize APT expectations and enhance <u>communications</u> around process
- Broaden definition of scholarship used in APT to <u>include advocacy and DEI work</u> with clear evaluative criteria
- Develop <u>information systems</u> to inform APT
- Recognizing DEI Scholarship: Framework for Scholarship in Justice, Equity, Diversity, Antiracism and Inclusion (JEDAI)
 - JEDAI scholarship: research, service, education, clinical domains (both tracks)
 - JEDAI scholarship impact assessment

APT Framework for JEDAI Scholarship

Duke University School of Medicine Appointment, Promotion and Tenure (APT) Framework for Scholarship in Justice, Equity, Diversity, <u>Antiracism</u> and Inclusion (JEDAI)

The Duke University School of Medicine (SOM) embraces scholarship in the domains of Justice, Equity, Diversity, Antiracism, and Inclusion (JEDAI)* as promotable activities. This document describes the types of JEDAI activities we wish to recognize through the promotion process. The intent of this guidance is to emphasize the value of work in the JEDAI sphere across the broad context of diversity, inclusive of all individuals and groups marginalized by race, ethnicity, country of origin, sex, gender, gender identity, sexual orientation, body characteristics, (dis)/ability, alt abilities (e.g., neurodiversity), age, social class, education, vocation, and any other quality or characteristic. This guidance is applicable to both the Career Track and the Tenure Track promotion pathways. The APT Faculty Career Track and Faculty Tenure Track guidelines describe the specifics regarding the quality and impact required for scholarship to support a promotion in rank or a tenure decision. Scholarship in the JEDAI sphere can be demonstrated via traditional academic output (e.g., peer reviewed journal articles, conference presentations, grants, durable educational materials, etc.) as well as non-traditional productivity (e.g., advocacy work, team science, digital scholarship, etc.).

The SOM acknowledges that traditional modalities do not encapsulate the depth and breadth of JEDAI activities needed to shift our culture to being authentically welcoming, inclusive, and equitable, hallmarks of a **Just Culture** that we wish to see in our schools, workplaces, and communities. Also specifically acknowledged is that Black, Indigenous, and People of Color (BIPOC) individuals are frequently and disproportionately burdened by institutions and communities to represent the marginalized in committees, projects, tasks, and initiatives (aka the "black tax" or "minority tax"). These efforts have rarely "counted" as promotable work.

Modelling The Way...Practice, Practice, Practice

- Expand how we think about and define excellence
- Cultivate opportunities to engage with, mentor/coach, and sponsor our people
- "Stay The Course" in striving to diversify our faculty and leadership, staff and students
- Think creatively about strategies for measurement that expand beyond numbers and representation
- Equip people to engage in uncomfortable yet important conversations
- Cultivate a culture of "upstanders" versus bystanders
- Engage majority group members as full partners and stakeholders in advancing DEI
- Attend to multiple dimensions of diversity intersectionality (gender identity, sexual orientation, ethnicity, nationality, class etc.)
- Hold everyone accountable for bias/discrimination/exclusion
- Keep moving the needle standing still is not an option

Questions