Bridging the Gap
How U.S. medical, dental, and veterinary schools are working to fill the pipeline with more underrepresented minority students

Also: Dedicated programs empower college students with autism spectrum disorder
As the conversations around student learning outcomes and the shifting higher education landscape continue, it is important to work with a market leader who can provide valid and reliable data for accreditation and other accountability initiatives. If your institution does not have an established, research-based assessment program, it’s time.

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Special Focus: Medical, Dental, and Veterinary Schools

The University of Vermont College of Medicine Connects with the Community
By Tannette Johnson-Elie and Rebecca Prinster

A National Imperative: How Higher Education Is Working to Improve Our Health
By Rebecca Prinster

“Lone Soldier” Recruits American Indian Dentists to Serve the Community
By Rebecca Prinster

Student Group Addresses Role of Spirituality in Medicine
By Tannette Johnson-Elie

UCSF Delivers on Its Commitment to Diversity
By Alexandra Vollman

Louisville School of Medicine Tackles LGBT Health Disparity with Competency Training
By Alexandra Vollman

Health Professions Schools: Bridging the Gap for Underrepresented Minorities
By Alexandra Vollman

Interprofessional Education and Holistic Admissions Are Key to the Future of Healthcare Providers
By Rebecca Prinster

First Impressions: Program Helps Prepare Undergrads for Dental School
By Michael Rene Zuzel

On the Cover: The University of Vermont Medical Center
Above: The Health Science Research Facility at the University of Vermont College of Medicine
Empowering Students with Autism Spectrum Disorder

As the number of students with autism entering postsecondary education increases, colleges and universities offer more programs and accommodations to help them manage the demands of college life.

By Nina Rao

Wealth Gap Must Be Factored into Education Attainment Debate

By Edna B. Chun, DM

If You Want Business Benefits from Diversity, Focus on Inclusion

By Joseph Santana

Collaborating Across Boundaries for the Benefit of All Students

A coalition of 11 universities shares innovative ideas for improving educational outcomes for students from all backgrounds.

By Rebecca Prinster
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The views expressed in the content of the articles and advertisements published in INSIGHT Into Diversity are those of the authors and are not to be considered the views expressed by Potomac Publishing, Inc.
First Indian American Surgeon General Focuses on Community Health

Since being confirmed as U.S. Surgeon General in December, Dr. Vivek Murthy has been busy making the rounds on his “House Call Listening Tour.” Topics of discussion have included public health issues such as obesity, tobacco use, the Ebola virus, vaccinations, mental illness, and health insurance enrollment.

An attending physician and instructor of medicine at Brigham and Women's Hospital (BWH) at Harvard Medical School, Murthy is the first Indian American surgeon general, and at age 37, he is also the youngest.

“I truly believe that we will be a stronger and healthier nation with Dr. Murthy's leadership,” said BWH President Betsy Nabel in a statement. “I can think of no one better suited for this important role. Dr. Murthy is driven in all of his endeavors by an innate desire to help people all over the world achieve and maintain good health.”

The son of Indian immigrants, Murthy began advocating for community health as a student through VISIONS Worldwide Inc., a nonprofit he co-founded to focus on HIV/AIDS education programs in India and the U.S. He also helped develop the Swasthya project to train women in rural India to be healthcare providers and educators — a program that grew out of a partnership between VISIONS and a hospital in southwestern India. Swasthya, a word derived from Sanskrit, means “health and well-being.”

Murthy’s interest in science and medicine began when he was a child growing up in Miami, spending time in the clinic where his father was a physician and where his mother also worked. Murthy graduated from Harvard in 1997 and went on to earn an MD and an MBA from Yale, where he did research on vaccine development and the participation of women and minorities in clinical trials.

His nomination by President Obama in November 2013 stalled in Congress for more than a year. Some conservatives and the National Rifle Association opposed Murthy’s nomination because of comments he made on social media calling gun violence a healthcare issue. They argued that Murthy would push for stricter gun control laws, but he has stated that would not be the case.

Instead, Murthy plans to focus on community-driven efforts to combat obesity and tobacco-related diseases, as well as on improving access to treatment for mental illness.

— Rebecca Prinster

Diversity Thought Leaders: One to Follow

Tanya Odom (@TMODOM) is the director of innovation and social media and an executive coach with The FutureWork Institute, a diversity and inclusion consulting firm. She is a highly regarded consultant, facilitator, trainer, and speaker who works with corporations in the U.S. and Europe to address diversity issues and create sustainable change within organizations.

Her areas of expertise include race and racism, gender dynamics, disabilities, recruitment and retention, work-life balance, mentoring, coaching, and global diversity. With nearly 5,000 followers and more than 52,000 tweets, Odom’s personal Twitter page is a valuable resource for diversity and inclusion news from a wide range of sources. You can find many of her tweets, and others like them, by searching #diversity.

Odom is also a member of the INSIGHT Into Diversity Editorial Board.

Dates to Remember

April
Celebrate Diversity Month

April 23
Yom Ha’Atzmaut
The day many Jewish Americans remember Israel's Independence Day

May
Asian American/Pacific Islander Heritage Month
Older Americans Month

May 21
World Day for Cultural Diversity for Dialogue and Development
A day set aside by The United Nations to deepen our understanding of the values of cultural diversity

May 22
Harvey Milk Day
A day observed in California to celebrate the achievements of gay rights activist Harvey Milk
Aspire.

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A highly recognized contributor.
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A better partner.
A legacy.

In Orlando, the University of Central Florida has evolved into the nation’s second-largest university by implementing innovative growth strategies.

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America’s VetDogs Partners with Western Kentucky University for PTSD Service Dog Pilot Program

America’s VetDogs is partnering with Western Kentucky University as part of a pilot program to study the effects service dogs can have on veterans with post-traumatic stress disorder (PTSD).

America’s VetDogs is a nonprofit organization that provides disabled U.S. veterans and first responders with guide or service dogs to help them lead more independent lives. Through this study, the organization hopes to collect evidence on the ability of service dogs to alleviate the symptoms of psychological disabilities such as PTSD.

Of the 20 veterans who applied to the program in September, about 13 of them were placed with their dogs in April to kick off the five-day, in-residence training program.

Prior to being placed with their veteran, the dogs went through advanced training tailored to their veteran’s specific disabilities. Some trained tasks include nightmare interruption, turning lights on and off, and retrieving medicine.

“One of the real trained tasks that we’re concentrating on is turning light switches on so [dogs] can go into a dark room,” says Sheila O’Brien, director of external affairs for America’s VetDogs. “Many veterans also have light sensitivity from their PTSD, so you do just the opposite — you can send the dog in to turn the lights off.”

Once training is completed, participants return home with their dog. An America’s VetDogs field representative then conducts several follow-up visits, and veterans fill out questionnaires throughout the yearlong study to assess the impact the dog is having on their daily life.

Based on the PCL-M, a PTSD checklist utilized by the U.S. military, this questionnaire gauges the ways in which PTSD affects each veteran. According to Gary English, department head for public health at Western Kentucky University — who designed

Veterans with disabilities work with service dogs trained by America’s VetDogs (photos by Rebecca Eden/America’s VetDogs)

That’s on a five-point scale. We’re looking for changes over time.”

In addition to providing concrete evidence, O’Brien says she hopes the program also fosters a better understanding of the issues faced by veterans with PTSD and creates a model for the rest of the country.

“I would love for people to understand that there are a lot of invisible wounds these veterans actually carry home with them,” she says. “We want to be able to present this to the assistance dog industry and say this is reality, this is what happens. [We] want it to be kind of a baseline for the whole industry.”

To find out more about America’s VetDogs, visit vetdogs.org.

— Alexandra Vollman

"It is time for parents to teach young people early on that in diversity there is beauty and there is strength."  
— Maya Angelou
Dr. Phillips has made seminal contributions to bringing healthcare disparities to the forefront of national policy setting. His sustained advocacy catalyzed ongoing efforts to promote fairness and diversity in medical education. Dr. Phillips is the founder and director of Baylor’s Saturday Morning Science Program, a community outreach program designed to excite interest in science and healthcare in 7th through 12th graders students. Dr. Phillips has received numerous honors over his career including, the James M. Whittico Jr. Health Advocate Award from the National Medical Association and an honorary doctorate from his alma mater, Washington and Jefferson College.

together with 10 select national and regional employers for this annual networking and education event. On November 6 and 7, COSD will host its 16th Annual National Conference in Chicago.

The power of partnering: In summer 2014, COSD partnered with global consulting and accounting firm EY, the National Association of Colleges and Employers, and the Association on Higher Education and Disability to produce a webcast series bringing higher education professionals up to speed on changes to Section 503 of the Rehabilitation Act of 1973, which includes new regulations to improve job opportunities for individuals with disabilities.

Find out more: Contact Alan Muir at (865) 974-7148 or amuir@cosdonline.org, or visit cosdonline.org.
INSIGHT Into Diversity honors individuals who have made significant past and present contributions to diversity in higher education with our Diversity Visionary Award. These honorees were nominated by colleagues and selected by INSIGHT staff. We profile award recipients in each issue of INSIGHT Into Diversity magazine.

Nominate a Visionary

If you would like to nominate someone for the INSIGHT Into Diversity Visionary Award, submit a nomination letter no more than two pages long detailing your visionary’s contributions.

Please include specifics on any accomplishments that went above and beyond the routine to make a real difference. Include your contact information, along with contact information and a mailing address for your nominee.

Email your letter of nomination to lpearlstein@insightintodiversity.com.
Erik Brodt, MD

Director of the Native American Center for Health Professions, Associate Director of the Collaborative Center for Health Equity, and Clinical Assistant Professor in the Department of Family Medicine at the University of Wisconsin-Madison School of Medicine and Public Health

In 2012, Dr. Erik Brodt conceptualized and created the Native American Center for Health Professions (NACHP) at the University of Wisconsin-Madison (UWM) School of Medicine and Public Health (SMPH). His visionary leadership for increasing outreach, recruitment, and educational programming and cultural immersion opportunities for Native American students and faculty at the SMPH is laudable.

Brodt’s ideas and energetic planning led to the development of the NACHP. Its mission is to improve the recruitment, support, retention, and graduation rates of Native American health professional students and promote research, health education, and community partnerships with Native American communities. NACHP is nationally recognized as an innovative center serving health professional students.

Since Brodt joined the UWM SMPH faculty, there has been an increase in the number of Native American students, residents, and faculty affiliated with the school. He has forged multiple partnerships across diverse departmental and programmatic boundaries to facilitate the recruitment of Native Americans to campus. He has worked closely with the SMPH Rural and Urban Scholars in Community Health Program and secured funding to allow for increased recruitment of Native American students to the program.

He has also helped develop nationally recognized programs like the Association of Native American Medical Students chapter at UWM, which hosts unique cultural immersion events, such as a traditional Native American foodways weekend. The event incorporates traditional Native American food and preventive health education into students’ learning experience. Although he’s still in the early stages of his career, Brodt’s programs have touched Native American students, healers, and citizens in Wisconsin and beyond.

Sandy Cayo, DNP, FNP-BC

Clinical Faculty Member at Fairfield University School of Nursing

The origin of Fairfield University School of Nursing’s diversity initiative, Zero Attrition Mission (ZAM), can be traced back to Dr. Sandy Cayo. As a doctoral student, Cayo took on the topic of increasing the diversity of the nursing student population, faculty, and resulting workforce through an article published in the Journal of the National Black Nurses Association. An African American nurse herself, Cayo joined the school after graduation as a clinical adjunct faculty member.

ZAM is an initiative that aims to develop a culture of inclusivity in a traditionally homogenous environment and improve attrition rates of underrepresented nursing student populations. The vision and purpose of ZAM is to promote the needs of underrepresented nursing students at Fairfield University School of Nursing and to serve as an additional resource to these students through professional nursing mentorship, the improvement of academic supports, and the exploration of environmental factors contributing to success.

With her passion and ambition, Cayo was brought on board as the perfect leader, and ZAM was born. The initial interest meeting for ZAM was attended by eight students from five underrepresented backgrounds. Students were offered the opportunity for discussion and were also issued a questionnaire. The results from the first meeting revealed that students from low-income or urban schools believed they would benefit from assistance with study techniques.

ZAM was truly a grassroots effort that began, in part, as a result of Cayo’s passion and scholarly efforts. It not only launched a statewide dialogue in Connecticut about improving diversity, but has also become a statewide model for implementation at other nursing schools.
Wanda Heading-Grant, EdD
Vice President for Human Resources, Diversity, and Multicultural Affairs at the University of Vermont

During her more than 20-year tenure at the University of Vermont (UVM), Dr. Wanda Heading-Grant has provided vision, leadership, and coordination for major programs and institutional efforts that have changed the culture and climate at UVM. The programs she has created and the initiatives she has led have brought together members from all areas of the university to build and sustain a more diverse, inclusive, and academically and socially dynamic institution.

Heading-Grant has served as a trusted adviser to two UVM presidents and is an advocate for individuals from all backgrounds. She was the first person to serve as chief diversity officer and special assistant to the president for multicultural affairs at UVM. She is viewed as a strong, passionate, ethical, and effective leader.

Despite the lack of diversity during her early years as a student at UVM, Heading-Grant has devoted her life and career to creating a more inclusive climate at the university. Her gift of being able to bring people together from all areas of the institution and her political acumen have enabled her to create powerful and sustained change. She is a visionary who has helped transform the institutional culture at the university.

Among her accomplishments, Heading-Grant led the implementation of a diversity course requirement for all undergraduate students at UVM; provided the vision, coordination, and leadership for Blackboard Jungle, an annual diversity professional development symposium for faculty, staff, administrators, and people beyond the university community; designed and coordinated the annual week-long Martin Luther King Jr. celebration and learning program for the campus and surrounding community; and formed a partnership with the major performing arts institution in Burlington to use the arts to teach social justice.

James Phillips, MD
Senior Associate Dean for Diversity and Community Outreach and Professor of Pediatrics at Baylor College of Medicine

Since the 1950s, Dr. James Phillips has been a pioneer for increasing healthcare diversity. He matriculated prior to the former U.S. Surgeon General David Satcher and served as a trailblazer at his alma mater, Case Western Reserve University. Phillips was also the first African American pediatric resident at Rainbow Babies and Children’s Hospital in Cleveland, Ohio.

Over the last 20-plus years, Phillips has been a change agent at Baylor College of Medicine (BCM) and has helped many others achieve their diversity goals. He has developed and implemented pipeline programs to increase the academic preparedness of middle school, high school, and undergraduate students who are underrepresented in medicine. He also established an educational elective at BCM that strives to foster cultural sensitivity for future physicians. His programs have been funded by the National Institutes of Health (NIH); the Howard Hughes Medical Institute; the Robert Wood Johnson Foundation; and the National Heart, Lung, and Blood Institute of the NIH. He has inspired and mentored junior and mid-career faculty members across the nation.

Because of his outstanding contributions to medical education and diversity, Phillips has held numerous leadership positions and been recognized by several organizations, including the Association of American Medical Colleges, the National Association of Medical Minority Educators, the National Medical Association, the Houston Medical Forum, and the Hispanic American Medical Association, as well as by the mayor of Houston.
In 2014, 83 colleges and universities throughout the U.S. received the INSIGHT Into Diversity HEED Award, which annually recognizes outstanding commitments to creating a more diverse and inclusive campus. What does it take to achieve this measure of success, and what can other institutions of higher education learn from recipients' experiences?

The 2014 INSIGHT Into Diversity Benchmarking Report is the first and only national report on leadership and performance in working toward a goal of a truly diverse and inclusive learning environment. Based on results submitted by HEED Award recipients, this report will provide colleges and universities with the means to more clearly understand what the diversity landscape requires.

What you’ll gain:
- The opportunity to study and evaluate the success in diversity and inclusion efforts at leading institutions throughout the United States
- Practical, sustainable, and cost-effective ways to help your campus become more inclusive across all areas of underserved student, faculty, and staff populations
- Read profiles of successful programs your school can choose to model
- Measures to help assess the progress of your school's diversity and inclusion programs

Expert Authorship
A respected leader on diversity and inclusion in higher education, Damon A. Williams, PhD, prepared the 2014 INSIGHT Into Diversity Benchmarking Report. He is the author of several groundbreaking books on the subject, including Chief Diversity Officer and Strategic Diversity Leadership.

With much of his work focused in higher education, Williams is a lecturer, scholar, researcher, and former vice provost and chief diversity officer at the University of Wisconsin-Madison. He is considered one of the world’s foremost authorities in the areas of diversity and inclusion management, educational achievement, youth development, corporate citizenship, educational achievement, and change management. Williams currently works to expand the pipeline into higher education as the senior vice president for programs, training, and youth development for Boys and Girls Clubs of America (BGCA). In this capacity, he serves as chief education and youth development officer for more than 4,000 BGCA clubs around the world.

Find out what your college or university can do today to make your campus more diverse and inclusive for current and future generations of students.

The INSIGHT Into Diversity HEED Award Benchmarking Report is available for the price of only $495!

For more info: lpearlstein@insightintodiversity.com; 301-219-6464
April/May 2015

ARIZONA

Maurice Gipson, JD, has been named assistant vice chancellor for diversity at Arizona State University in Tempe. He previously was special assistant to the vice president for diversity and community engagement at the University of Texas at Austin.

CALIFORNIA

MarTeze Hammonds, EdD, has been appointed associate dean for diversity and inclusion at California State University in Fresno. In his previous position, he served as assistant dean of students for retention and academic engagement at the College of Wooster in Ohio.

Yvette Gullatt, PhD, has been named the first vice provost for diversity and engagement for the Office of the President of the University of California system, where she had been vice provost for educational partnerships.

Becky Petitt, EdD, is now vice chancellor for equity, diversity, and inclusion at San Francisco State University. She was associate vice president for diversity and chief of staff to the office of the vice president and associate provost for diversity at Texas A&M University in College Station.

ILLINOIS

Michael Amiridis, PhD, has been appointed chancellor of the University of Illinois at Chicago. He had been executive vice president for academic affairs and provost at the University of South Carolina in Columbia.

MICHIGAN

Jesse Bernal, EdD, has been appointed vice president of inclusion and diversity at Glen Oaks Community College in Battle Creek. He was formerly director of the Office of Diversity and Inclusion at Santa Clara University in California.

Trenda Boyum-Breen, PhD, has been named president of Rasmussen College in Minneapolis. She previously served as chief academic officer at the University.

MINNESOTA

Mark Brimhall-Vargas, PhD, has been appointed chief diversity officer at The College of St. Scholastica in Duluth. He was formerly deputy chief diversity officer at Tufts University near Boston. In his last position, he was deputy chief diversity officer at the University of Maryland, College Park.

Dwight Hamilton, JD, is now chief diversity officer at Smith College in Northampton. He was formerly associate vice president for affirmative action and Title IX officer at Grand Valley State University in Allendale, Mich.

Sean Huddleston has been named chief diversity and inclusion officer at Framingham State University. He was assistant vice president for the strategic implementation, inclusion, and equity division at Grand Valley State University in Allendale, Mich.

Sundar Kumarasamy is now vice president for enrollment management at Northeastern University in Boston. He previously served as vice president for enrollment management and marketing at the University of Dayton in Ohio.

MISOURI

Jameelah Jones is serving as the first director of diversity and inclusion for the Student Senate at the University of Kansas in Lawrence, where she is a graduate student in African and African American studies.

Adrian Clark is now associate provost for the Office of Institutional Effectiveness, Accreditation, and Inclusion at Kansas State University in Manhattan.

LOUISIANA

Lorrie Gaschen, PhD, DVM, has been named associate dean for diversity and faculty affairs at Louisiana State University School of Veterinary Medicine in Baton Rouge. She retains her position as professor of diagnostic imaging at the university.

Taniecea Arceneaux Mallery, PhD, is now director of equity, diversity, and community engagement in the Office for Campus Diversity at the University of Louisiana at Lafayette. She was previously senior diversity research specialist for the Association of American Medical Colleges in Washington, D.C.

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TRENDS

Arkansas

Maurice Gipson, JD, has been named assistant vice chancellor for diversity at Arkansas State University in Jonesboro. He previously was special assistant to the vice president for diversity and community engagement at the University of Texas at Austin.

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Arkansas

Maurice Gipson, JD, has been named assistant vice chancellor for diversity at Arkansas State University in Jonesboro. He previously was special assistant to the vice president for diversity and community engagement at the University of Texas at Austin.
City University of Medicine and Biosciences. He retains his position as executive director of the Office of Institutional Assessment and Accreditation at the university.

James Paine, PhD, has been appointed the first assistant vice president for student affairs and dean of students at Logan University in Chesterfield, where he was formerly dean of student services.

MONTANA
Beth Weatherby, PhD, has been named chancellor of the University of Montana Western in Dillon. She was formerly provost and vice president of academic and student affairs at Southwest Minnesota State University in Marshall.

NEBRASKA
Susan Foster, JD, has been appointed director for institutional equity and compliance at the University of Nebraska-Lincoln. She was a senior associate attorney at the Jackson Lewis PC law firm in Omaha.

NEW YORK
José Aviles, PhD, is now associate vice provost and director of admissions at the University at Buffalo. He was director of admissions at the University of Delaware in Newark.

Tiffani Blake has been appointed dean of students at the College of New Rochelle, where she had been special assistant to the president for mission and board relations.

Suzanne Goldberg, JD, has been named the first executive vice president for university life at Columbia University. She retains her roles as special adviser to the president on sexual assault prevention and response at the university and as a professor at Columbia Law School.

Bea González has been appointed special assistant to the chancellor at Syracuse University. She retains her role as dean of University College at the university.

Cristen Kromm is now dean of undergraduate student life for Columbia College and the Fu Foundation School of Engineering and Applied Science. She was previously associate dean of residential life for the college.

Barry Wells has been appointed special assistant to the chancellor at Syracuse University, where he was formerly senior vice president and dean of student affairs.

Chris Woods has been named assistant director of multicultural affairs and LGBTQ outreach at Columbia University. In his last position, he was program administrator for the LGBTQ Student Center at New York University.

NORTH CAROLINA
W. Kent Guion, MD, is now chief diversity officer at the University of North Carolina Wilmington. He previously served as vice president for diversity and inclusion at Georgia Regents University in Augusta.

PENNSYLVANIA
Cecil Howard, JD, has been named executive director of the Office of Social Equity at Shippensburg University. He was formerly equal opportunity director and chief diversity officer for the Office of Equal Opportunity in Gainesville, Fla.

Benjamin Hughes has been appointed program coordinator for the Office of Multicultural Affairs at Haverford College. Prior to this appointment, he was on the staff of the Office of Intercultural Education at Bates College in Lewiston, Maine.

TENNESSEE
Moses Goldmon, EdD, is now executive vice president at Lane College in Jackson. He was previously assistant professor of religious education at the Shaw University Divinity School in Raleigh, N.C.

Karen Weddle-West, PhD, has been named provost at the University of Memphis, where she previously served as interim provost and the former director of diversity initiatives.

TEXAS
Jimmy Case, PhD, is now executive vice president and provost of Sul Ross State University in Alpine, where he was formerly dean of the College of Arts and Sciences.

WASHINGTON
Mark Pagano, PhD, has been appointed chancellor of the University of Washington Tacoma. In his former position, he was provost and vice chancellor for academic affairs at Montana State University Billings.

WISCONSIN
Ameerah McBride, JD, has been named director of equity and affirmative action at the University of Wisconsin Oshkosh. She was previously deputy Title IX coordinator in the Office of Institutional Equity at Kansas State University in Manhattan.

Has your campus recently hired a new diversity administrator? INSIGHT Into Diversity would like to publish your news. Please email: editor@insightintodiversity.com.
A report recently issued by the Pew Research Center reveals that the median wealth of black households dropped 34 percent between 2010 and 2013, while that of white households grew by 2.4 percent during the same period.

The contrast is stark. The median white household is now worth $141,900, and the median black household is now worth only $11,000. In fact, the median wealth of white households in 2013 was 13 times the median wealth of black households and 10 times that of Hispanic households. The recent recession resulted in a decrease in asset ownership that was more pronounced among minorities, with home ownership slipping by 6.5 percent.

As sociologist Dalton Conley points out in *The Black-White Wealth Gap*, equity-inequity, more than any other statistic, captures the depth of racial inequality. A high degree of wealth inequality exceeds the level of income inequality in America. Conley notes research indicating that up to 80 percent of lifetime assets are a result of gifts bequeathed from preceding generations of relatives.

And in *Wealth Mobility and Volatility in Black and White*, Conley and co-author Rebecca Glauber find that individuals are more likely to maintain wealth than attain it. Low-wealth children are unlikely to become high-wealth adults, and high-wealth children are more than six times more likely to remain high-wealth adults. Furthermore, the authors note that African Americans have more difficulty sustaining relative wealth status.

The authors conclude, “One cannot discuss issues of race and opportunity in the United States without taking these issues on.”

The black-white wealth gap is an incontrovertible example of how inequality is socially reproduced and passed between generations. This gap cannot be rectified easily as it is deeply embedded in the structure of American society, its institutions, and its historical legacy.

Social theorist Joe Feagin identifies mechanisms of unjust enrichment transferred across generations as the key to continuing racial hierarchy and systemic racism that have fostered and extended the impoverishment of large groups of people, such as African Americans. Feagin also accents the systemic and structural nature of racism in terms of an organized societal whole composed of interconnected elements that undergirds networks, institutions, organizations, and the interactions of major social groups.

From a historical perspective, such structural wealth inequality has been created and legitimized through federal and state government programs such as the Federal Homestead Act, which,
from its enactment in 1863 until 1935, provided approximately 246 million acres of land at low or no cost to predominantly white beneficiaries. Research findings by Jennifer Mueller demonstrate the significant scale of generational acquisition of economic assets, with white families in a southwestern state averaging more than six times the transfer of monetary assets than that of minority families. These transfers included land, property, and businesses, with five times as many instances of such assets deriving from the federal and state governments.

During the time of the New Deal and Fair Deal, the creation of many great programs helped further racial inequality. The Social Security Act of 1935 left 65 percent of African Americans out of the program. Federal Emergency Relief Administration grants managed by local administration offered unequal grants to minority families. And the Fair Labor Standards Act of 1938 provided an extensive exemption for agricultural workers from minimum wage and overtime requirements, which affected many African American laborers.

Systemic and interlocking factors of social and wealth inequality need to be taken into account when addressing unequal educational outcomes. Consider the findings of a report from the American Council on Education, titled “With College Degree in Hand,” which conclude that individuals earning baccalaureate degrees in 2007-2008 were not as racially diverse as the overall undergraduate student body. Most accounts for 80 percent of the average U.S. household wealth and that blacks have lost more wealth due to the real estate and foreclosure crisis than from any other single event in recent history.

A one-standard deviation decrease in the MSA housing price index during the time when a teenager is between ages 13 and 17 is associated with a substantially greater likelihood of that teen attending a community college. A 2013 analysis by Thomas Shapiro, Tatjana Meschle, and Sam Osoro pinpoints the main drivers of the growing racial wealth gap: years of home ownership, household income, college education, inheritance and family wealth, and unemployment. Furthermore, in terms of home ownership, residential segregation affects demand for housing and places a ceiling on home equity for African Americans who own properties in non-white neighborhoods. Foreclosures have resulted in serious collateral damage to neighboring areas in the form of lost property wealth.

A study of 31 highly selective private colleges and universities found that 10 percent of graduates from these institutions go on to earn a doctorate as compared to 3 percent nationwide. As a result, researchers Jeffrey Green, Matthew Nagowski, and Ronald Ehrenberg suggest that increasing the numbers of talented black and Hispanic students who attend these institutions will likely increase the number of those pursuing doctoral degrees nationwide. Yet economics play a pivotal factor in the pursuit of degrees that take a number of years to complete and require extensive, ongoing funding.

A deepened understanding of how privilege and wealth have been transmitted inequitably across generations will assist policymakers, scholars, and practitioners in developing programs that enhance educational attainment for America’s diverse citizenry.

Edna B. Chun, DM, is an educational leader and award-winning author with more than two decades of human resource and diversity leadership experience in public higher education in the California, Florida, and Ohio state systems. She currently serves as associate vice chancellor for human resource services at the University of North Carolina at Greensboro and is a member of the INSIGHT Into Diversity Editorial Board.
The Art of the Interview: The Candidate Perspective

By Vicky Ayers

A fter submitting your credentials, responding to requests for additional information, engaging in various levels of preliminary interviews, and generally being kept on tenterhooks for three months, you have been invited to meet with a representative of the organization you hope to make your next career home. Until this point, your credentials and experience have been the objects of assessment. Now it’s just you being weighed and measured — your personality; your ability to converse; your appearance, whether you want to admit it or not; and the intangible “chemistry” that contributes to the impressions we all make on one another.

In today’s employment climate — where there are often multiple viable candidates for most positions — the interview process has moved toward an increased emphasis on who is the best fit and who, out of six or seven viable candidates, would be most likely to quickly and effectively engage with the organizational culture. The kinds of questions you will be asked are going to focus on whether your professional persona — let’s call it your “style” — is going to work best to the employer’s advantage.

By the time you interview, the search committee or employer knows a lot about you. The questions they are likely to ask aren’t going to be about information they already have, but about you as an individual — how you communicate, how you think, and what you value. They are likely to ask you how you function rather than what you have done. For example, an employer may ask if you have ever had to fire someone, and will likely follow that up with “how” questions: How did you manage the situation? How did you deal with the colleagues of the individual you fired? If issues arose from the firing, how did you handle them?

These are known in the parlance of recruiting as “behavioral questions,” and the Internet is full of examples. Take a look at them. They are all intended to give you an opportunity to express your individuality and set yourself apart. So, how do you prepare for such an interview?

First, learn all you can about the employer. This research can give you insight into the kinds of questions they might ask you. For example, if the institution has been cited in the media as having had a budget shortfall, you might anticipate a question on the order of: “How would you handle telling team members that requests for expenditures have been denied?” Consider the job responsibilities and activities you would likely be involved in. Many questions will address those areas. Similarly, understanding the philosophy, mission, and history of the organization can clue you in on what is important to them. If, for instance, an institution prides itself on the diversity of its workforce, anticipate questions focusing on your own attitudes toward diversity.

Second, spend time thinking about yourself. It may sound odd, but often we don’t know what we think is valuable or effective about the way in which we function until we deliberately consider those factors. So do it. Outline for yourself what you think are the most important traits you bring to the employer’s company or organization and how you use them in performing your job. Are
Congratulations to Dr. Wanda Heading-Grant, Vice President for Human Resources, Diversity and Multicultural Affairs at the University of Vermont, for receiving the Diversity Visionary Award from INSIGHT Into Diversity magazine. With Dr. Heading-Grant’s vision, leadership, commitment, and strategic partnerships, the University of Vermont has become a more diverse, inclusive and dynamic institution.

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If You Want Business Benefits from Diversity, Focus on Inclusion

By Joseph Santana

Books, articles, and research studies about the competitive advantages of leveraged diversity have been steadily increasing in number over the past several decades. As this body of empirical evidence continues to grow, along with rapidly exploding local and global demographic diversity, even the most lagging organizations have begun to recognize the need to take action. Often, this action consists only of outreach efforts designed to bring greater diversity to the company. However, a solid body of research and experience now tells us that diversity achieved through outreach efforts without organizational inclusion efforts will never produce the sought-after business benefits, nor will it be sustainable.

Imagine a group of five relatively homogeneous senior managers who seek to benefit from the variety of new perspectives and ideas offered by diversity. Driven by this goal, they recruit two new members to their ranks who are completely different from their legacy members. However, influenced by the invisible but powerful forces of their subconscious biases and the application of dated policies, the original five marginalize these new managers. The new members sit on the sidelines while the original five managers make all the big decisions as usual. Thus, the company remains unchanged.

Instead of benefiting the team with new ideas and strategies, the two recent additions have become “chair-warmers.” The outcome — assuming nothing changes in the organizational culture and policy, or in the behaviors of the other five managers — will not be a competitive advantage. More likely, these two new managers will either continue to collect a salary while remaining disengaged, leave for greener pastures, or conform and become like the other five. None of these alternatives leads to superior performance or improved market share resulting from diversity.

Recently, the Institute for Corporate Productivity (i4cp) completed a first-of-its-kind study titled “Diversity and Inclusion Practices That Promote Market Performance.” Guided by a board of leading chief diversity officers, this research project went beyond other studies in the field of diversity and inclusion by examining and comparing the practices of high-performing organizations with those of poorer performers; high-performing organizations are defined as companies that enjoy increases in revenue growth, market share, profitability, and customer satisfaction over a five-year period. To no one’s surprise, the study found that high-performing companies “realize that true business advantage can only be realized once diverse skills, talents, and backgrounds are fully engaged and aligned to the organization’s success.”
In other words, business benefits only accrue when diversity is brought into an environment of inclusion.

So what can leaders in organizations that want more than just compliance, PR, and vanity awards for diversity do to get on the road to realizing true business benefits? Here are three ideas to get started:

1. First, begin by raising your managers’ and executives’ awareness of their unconscious biases. Specifically, provide learning programs that help executives and managers of people recognize and manage their own bias filters. Eric Davis, author of the aforementioned study and i4cp’s creative director and senior editor, has much to say about the research findings. “It’s amazing how quickly the micro-inequities stemming from unconscious biases can pile up and become a poison within the culture,” Davis says. “While no amount of training can eliminate biases, awareness of them and willingness to confront the behaviors go a long way toward re-establishing the equity needed for an inclusive culture to flourish.”

2. While raising awareness is a good start, it will not — as Davis noted — eliminate biases that create obstacles to inclusion. It simply gives us a higher probability of recognizing them. Therefore, the next step is to develop specific techniques and tools that managers and executives can use to manage biases in their day-to-day activities.

Techniques for managing bias in an organization can be simple. For example, one of my clients provided a select group of executives, who had gone through unconscious bias training, with effective peer-coaching skill training. These “trained” executives were then invited to attend meetings chaired by other executives to act as meeting monitors and coaches to ensure that the people immersed in the process of making assessments about people and projects were not overly influenced by bias. When an executive attended a peers meeting to play this role, he or she was referred to as the meeting’s “inclusion champion.” The result was a dramatic increase in inclusivity and the leveraging of diverse resources and ideas.

3. Finally, examine your institutional policies with a critical eye and seek to make them more inclusive of today’s workforce. Jacqueline Robertson, the senior director of inclusion and diversity at W.W. Grainger — a Fortune 500 industrial supply company — and a member of i4cp’s Chief Diversity Officer Board, offers a good example of refining fairness via a bit of policy updating.

According to Robertson, Grainger formally offered a short-term disability policy governing maternity benefits that, upon further inspection — and external benchmarking by its Women’s Business Resource Group — was found not to be completely inclusive of adoptive, surrogate, and foster parents. The name alone — short-term disability — did not seem inclusive of all that the policy could potentially offer team members. After careful research and consideration, the company is now considering a newly branded “Parental Policy.”

A careful review of people policies — especially those that have long been in place and perhaps have not been critically examined for some time — will offer opportunities for refining existing practices and increasing the opportunity for greater inclusion in an authentic manner. It is paramount to an organization’s inclusion efforts to ensure that all team members view processes as clear and transparent while also providing a good team experience.

In a recent TED Talk, Rainer Stack of the Boston Consulting Group noted that in the near, more global and diverse future, creating and maintaining an inclusive culture will become as vital to an organization’s success as financial management. The bottom line is that the time to start paying more attention to inclusion, and not just outreach, is right now.

I invite you to take these first three steps to embark on your journey toward turning your local and global diversity into a powerful business asset.

Joseph Santana is chairman of the Institute for Corporate Productivity (i4cp) Chief Diversity Officer Board, president of Joseph Santana, LLC, and a member of the INSIGHT Into Diversity Editorial Board. For more about Joe, visit joesantana.com.
Empowering Students with Autism Spectrum Disorder

As the number of students with autism entering postsecondary education increases, colleges and universities offer more programs and accommodations to help them manage the demands of college life

By Nina Rao

Three years ago, Aleza Greene started the Autism Support Program at the University of Arkansas. Greene, a clinical assistant professor in the College of Education and Health Professions at the university, previously worked for a private company that supported students with disabilities in postsecondary settings, so she had experience with this type of work.

More important, perhaps, she has an autistic son.

“He was getting older and I wanted there to be something available for him,” Greene says. “And I assumed that if he needed [help], there were other kids who needed it, too.”

What Greene saw was a need for a program that would help students with autism who were intellectually capable of postsecondary work handle the logistical parts of college life, such as timeliness and prioritization of tasks, that these students frequently struggle with.

The need for a program such as this proved even greater than Greene expected.

In its first year, her program enrolled five students. By the 2015-2016 academic year — the program’s fourth year — Greene believes the number will increase to about 15, closer to its maximum of 20. Now she finds herself fielding inquiries from students and families interested in the University of Arkansas mainly because of this program.

Trends toward programs like this are likely to continue as autism, and awareness of it, grow more prevalent nationwide. At this point, the numbers represent only students who ask for help. The real number of college students with autism is assumed to be much higher.

As autism awareness increases, the number of students with autism who ask for help is expected to grow. This means that colleges and universities are being forced to learn how to accommodate them, either by expanding programs already in place or by creating new ones.

“[Dedicated programs] are still rare, but more are popping up every year,” says David Kearon, assistant director of adult services at Autism Speaks, a nonprofit autism advocacy group.

Aleza Greene, founder of the Autism Support Program at the University of Arkansas

David Kearon, assistant director of adult services at Autism Speaks
organization. “It makes a lot of sense for [colleges and universities] to be prepared to accommodate more and more students with autism.”

In the coming decade, 50,000 young adults with autism will graduate from high school every year — a half million students over 10 years. Some will move on to life skills programs or into vocational or technical schools, Kearon says, but an increasing number will likely apply to and enter colleges and universities. This is due, in part, to the jump in the sheer number of autism diagnoses.

In 2000, the Centers for Disease Control and Prevention (CDC) reported that one out of every 150 children was diagnosed as having autism. In 2010, the most recent year for which the CDC has data, that number increased to one in 68.

Not only is the base number increasing, the number of students with autism succeeding in secondary school is also rising — thanks to the success of inclusion programs and to greater parent advocacy, says Joy de Leon, dean of students and director of learning enrichment and disability services at Beloit College, a private liberal arts college in Beloit, Wis. “We’re doing a lot better at getting these students through K-12 to get to college,” she says.

For de Leon, who runs the college’s disability services program, this has meant that the number of students with autism spectrum disorder (ASD) asking her office for accommodations has increased from about three in 2001 to about 10 (out of 1,250 students) in recent years. These accommodations might include low-distraction areas for test taking or more time for taking tests; some parents even hire private coaches for their child. However, the accommodations each person needs vary greatly as the autism spectrum is wide, and autism is often accompanied by other diagnoses such as attention-deficit/hyperactivity disorder (ADHD) or anxiety disorder. As de Leon says, “If you’ve seen one student with ASD, you’ve [only] seen one student with ASD.”
To manage the increased number of students asking for help, de Leon hired several students to serve as organizational tutors. These tutors provide guidance with time management and prioritization, not with actual schoolwork.

Offered through Beloit's disability services office, this service is currently provided at no cost because de Leon does not consider the college large enough to justify a dedicated program at this time.

Unlike Beloit, where the program is still relatively new, Marshall University in West Virginia has had a dedicated program for more than a decade. This public university is home to the Autism Training Center, created by the West Virginia legislature in 1984 as a resource center for families and teachers. When a parent asked the training center about postsecondary options, the staff organized a pilot program called the College Program for Students with Autism Spectrum Disorder, which launched with only one student in 2002.

That program has grown over the years to include more than 50 participants, all of whom take regular classes at the university, augmented with coaching to help them manage independent living, study skills, and other logistics of university life. For the past 10 years, more than 50 students have applied for admission each year, of whom the university is only able to accept 10, says Program Coordinator Rebecca Hansen.

“The need is very great,” Hansen says, adding that of the 54 students currently enrolled, 47 are from out of state.

In fact, the need is far greater than the numbers suggest.

Unlike in primary and secondary school, students at the postsecondary level can choose whether to register with the school's disability services office or whether to participate in a dedicated program.

“College students may not want to disclose that they have ASD,” Hansen says. “The under-the-radar folks are really the challenge.”

This is where organizations like the Autistic Self Advocacy Network (ASAN) come in. ASAN’s goal is to empower and organize people with autism. Among other efforts, the organization has produced a handbook called Navigating College, which has been downloaded more than 27,000 times. Also, for the past three years, ASAN has been holding a week-long workshop called the Autism Campus Inclusion Summer Leadership Academy, during which participants learn to advocate for changes — such as increased funding for student disability services — on their home campuses.

“I think we’ve definitely seen an increase in students who are willing to proudly identify as autistic as of late,” says Julia Bascom, director of programs for ASAN. “As the autistic community has gained in size and visibility, more people feel safe being open about who they are. It’s been really encouraging to witness.”

ASAN does not necessarily advocate for autism-specific programs. Instead, ASAN advocates for choice, individualization, universal design, and eliminating barriers to obtaining accommodations.

“We’ve found that many autistic students are perfectly happy being served through the standard disability services office at their university,” Bascom says.

For others, however, a specific support program can be helpful. People with autism typically struggle with executive functioning skills, such as organization and timeliness, in addition to social skills. Support programs help close that gap. Greene’s Autism Support Program at the University of Arkansas, for
example, provides academic coaches who help students organize their time, prioritize tasks, and sometimes help decipher a professor’s instructions. The program also provides peer mentors to help students navigate the social side of university life — by taking them to football games, for example.

The program was a deciding factor in Nathaniel Trowbridge’s decision to attend the university. Trowbridge had struggled with ASD first in middle school and then in high school, as well as during his two years of community college. Although he understood the subject matter, he had trouble completing his homework.

Nonetheless, Trowbridge wanted to attend college, in part because he wanted a chance at better jobs than the one he had at that time — at Wal-Mart — but also because he felt he had more to offer.

“Even though I have a hard time doing my schoolwork, I still love to learn,” he says.

So when his mother heard about the University of Arkansas’ program three years ago, Trowbridge jumped at the opportunity.

“It was the reason I came, and I’m sure I’m not alone in that,” he says. “I can’t imagine some of [the other students in the program] going to college at all without the kind of help they have in the program.”

Like Trowbridge, other students with autism are seeking out colleges and universities that offer programs and services like the one at the University of Arkansas, Kearon says.

“[Colleges and universities] are recognizing that a larger number of students are looking for these services — so a cynical [way to] look at it is as a business decision,” he says. “A less cynical view is that they’re recognizing a growing need among incoming students.”

But programs like these do not come cheap. “The bottom line is it’s expensive,” Kearon says.

Luckily, there are ways to help families offset these costs. Since 2012, institutions of higher education have been able to apply for status as a comprehensive postsecondary and transition program through the U.S. Department of Education. This status allows students at these colleges and universities with documented intellectual disabilities — who are unable to carry a full course load — to receive federal grants and work-study positions. Previously, only students carrying a full course load were eligible, but a 2008 congressional amendment changed this restriction.

Nationwide, fewer than 40 schools have received this designation.

“The problem is no one knows about this,” says Ernst VanBergeijk, associate dean and executive director of New York Institute of Technology’s Vocational Independence Program, one of the first schools to receive the designation. “It’s like the best kept secret in federal aid.”

It’s so little known that when VanBergeijk called federal student aid help lines posing as a parent, the people advising him didn’t even know about it.

A second option is to apply for vocational rehabilitation money, federal dollars earmarked to help individuals with disabilities gain employment. Some students with ASD have successfully applied for and received this money for degree-seeking studies, using the argument that a degree would make them more employable.

However, the way individual states distribute the money and interpret vocational rehabilitation varies greatly. For example, VanBergeijk says, New York will not disburse funds to students in degree-seeking programs, but New Jersey will. At Marshall University, Hansen estimates that 13 of 54 students enrolled in the College Program for Students with Autism cover the entire cost of the program with vocational rehabilitation funds.

Some private scholarships are also available, including the Brian and Patricia Kelly Postsecondary Scholarship Fund. Since 2013, this fund has granted money to postsecondary programs for students with ASD. The University of Arkansas’ Autism Support Program has received this grant money, allowing the program to provide funding to students.

But these options usually only defray costs, not cover them, and VanBergeijk wishes more help was available.

“You know what doesn’t come cheap is ignoring the problem,” he says. “We know intervention works because we now have this group of kids ready for college. A generation ago they would have been in an institution; now they’re dreaming about college.”

Nina Rao is a contributing writer for INSIGHT Into Diversity.
Creating a Culture of Inclusiveness

Columbia College of Dental Medicine is on a mission to increase minority presence in the dental profession

By Tannette Johnson-Elie

At Columbia University, Dennis Mitchell is helping fill the pipeline for minorities in the dental profession, a field where they are woefully underrepresented.

Mitchell is an associate professor of clinical dental medicine and senior associate dean for student development for Columbia’s College of Dental Medicine (CDM). He also is senior associate provost for faculty diversity and inclusion at Columbia University.

“Ten to 12 years ago, it was just me and my staff. Now I have a hundred graduates, so when a student of color comes in for an interview, I can send that student to lunch with someone who looks like them,” Mitchell says. “That’s critically important.”

Mitchell came to Columbia 23 years ago under a unique partnership with Harlem Hospital to hire minority residents among its faculty. He credits the CDM’s progress in increasing minority student enrollment to commitment from the top.

“The decision of the dean to highlight and target diversity was a huge step toward progress,” says Mitchell, who accepted his first diversity role at Columbia in 2003.

Since joining Columbia’s staff in 1991, Mitchell has made it his mission to increase the number of minorities represented in the dental profession. This is a job for which he has his work cut out for him.

The most current census data show that minorities make up just 6 percent of the U.S. dental workforce. One reason for this deficit might be the educational barriers faced by some minorities. One of the biggest obstacles is inadequate early education, Mitchell says.

“If the core fundamental education isn’t there, it’s harder for them to compete at the highest level,” he says.

Thanks to Columbia’s Summer Medical and Dental Education Program (SMDEP), its dental school is experiencing significant gains in minority enrollment.

When Mitchell was appointed senior associate dean for student development for the College of Dental Medicine in 2003, minority enrollment was at a dismal 3 percent. Today, minorities make up 20 percent of the college’s enrolled students.

“SMDEP was a big game changer for us,” Mitchell says.

This free six-week residential program prepares college students from underrepresented populations to pursue careers in medicine or dentistry. Established in 2005, it is funded by the Robert Wood Johnson Foundation, the largest foundation in the U.S. devoted
solely to public health.

Students may apply for SMDEP through their respective colleges and universities, working with their pre-health advisers. Additionally, the Association of American Medical Colleges (AAMC) and the American Dental Education Association (ADEA) participate in recruitment fairs across the country to find potential applicants.

To be selected for the program, a student must be enrolled as a freshman or sophomore in college; have a minimum GPA of 2.5; be a U.S. citizen or hold a permanent resident visa; come from a racially or ethnically underrepresented group; have demonstrated interest in issues affecting underserved populations; and submit a compelling personal statement and strong letters of recommendation.

“What we have is 80 underrepresented young men and women who come to our campus every summer,” Mitchell says. “Well over 70 percent of graduates from our summer program have been accepted into the dental program.”

Of 12 SMDEP university sites nationwide, Columbia is considered a model because of its longtime commitment to addressing access to care issues in the community, says Mark A. López, senior director for access, diversity, and inclusion with the ADEA and co-deputy director of SMDEP.

“Being in the heart of Washington Heights [N.Y.], Columbia has been doing great work providing care in the community, as well as helping underrepresented, disadvantaged young people gain entry into our profession,” López says. “Columbia really has been a trailblazer in the community in this line of work.”

The summer program, combined with an array of other minority programs at Columbia, has created a culture of inclusiveness — which helps attract minority candidates to the dental school, Mitchell says.

“We have over 200 students of color on our campus each summer who are

― Mark A. López, senior director for access, diversity, and inclusion with the ADEA and co-deputy director of SMDEP

in a variety of programs. That all feeds into the environment of inclusiveness,” he says. “When it comes to dental schools, students of color are going to select us. We get outstanding students. They will help our profession evolve.”

Among those students is Dominick Ambroise, 25, an African American in his senior year at the dental school. Currently a resident of New York, he is the son of Haitian immigrants and a married father of one.

“I applied to five dental schools in metro New York,” Ambroise says. “When I visited Columbia, I saw that the university was making an effort to bring along minorities. It’s an over-the-top effort to help you feel that people care about you.”

Tannette Johnson-Elie is a contributing writer for INSIGHT Into Diversity.
According to the University Innovation Alliance (UIA), if college completion rates continue at their current pace, by 2025 the U.S. will be short 16 million college graduates, limiting our country’s ability to compete with better-educated global workforces. Additionally, students from high-income families are seven times more likely to earn a degree than their peers from lower-income families, perpetuating the staggering income gap.

The UIA is a consortium of 11 U.S. research colleges and universities that have banded together to address these issues in an effort to graduate 68,000 students over the next decade by using proven strategies — at scale — across the country.

One of the alliance’s goals is to experiment and find ways to adapt innovations so that, for example, what works at Michigan State University can translate into a functioning solution for a community college in Colorado. However, this doesn’t mean that the methods will be identical.

“The goal is not to cut and paste innovations, but to borrow what works for the culture of your campus,” says Bridget Burns, executive director of the UIA. “The problem is not that we don’t have enough solutions. The problem is diffusing these solutions.”

The idea to form the consortium was the result of a fateful meeting at the 2013 Aspen Ideas Festival. The 11 presidents and chancellors of the institutions that make up the UIA realized that improving college completion rates would require collaboration, not competition. Spread across the country, their universities had been making great strides toward closing the gap on degree attainment for low-income and minority college students, but they had each been operating in their own bubbles.

Burns says the geographic dispersion of the universities in the “innovation cluster” eliminates competition for funding and resources, which is an advantage of their distance from each other. However, the geography also presents a challenge with dissemination. To overcome that challenge, representatives from each university will meet throughout the year at one of the mentor schools to brainstorm ways to tailor innovations to their home campuses.

The first year of innovations involves using predictive analytics software, with Georgia State University (GSU), Arizona State University (ASU), and the University of Texas at Austin (UTA) acting as mentor institutions. In February, UIA members met at GSU to discuss and strategize ways to scale predictive analytics.

“The goal is not to cut and paste innovations, but to borrow what works for the culture of your campus.”

- Bridget Burns, executive director of the University Innovation Alliance
about what did work,” she says. “Other schools want to know the first three steps to take, not the outcome.”

Or as Edward Ray, president of UIA-member institution Oregon State University, says, “We are very honest about what we haven’t accomplished because that’s the only way we’re going to get to a better place.”

At GSU, ASU, and UTA, predictive analytics have succeeded in streamlining students’ paths to graduation. GSU and ASU have saved millions of dollars and had remarkable results graduating low-income and minority students. And at UTA, low-income students are performing better than their peers.

“I will say, upfront, you do need to make an investment,” says Mark Becker, president of GSU. “Other presidents might say, ‘Well, we can’t afford that.’ And yes, it may cost $1 million or $2 million, but if you do it right, you can afford it — because with more students staying in school, you generate more tuition, so the investment pays for itself.”

**Georgia State University**

About nine years ago, GSU leadership decided the university’s 30 to 40 percent graduation rate was unacceptable. In looking at the issue, they discovered that many students were taking anywhere from 10 to 20 extra credit hours unrelated to their major. The extra workload was slowing down students’ progress to graduation and costing students and the university thousands of extra dollars.

Burns says GSU hired 42 more student advisers and selected a centralized location for advising, rather than housing it across academic departments. With the help of analytic software from the Education Advisory Board, every Monday advisers receive a list of students who appear to need help in their classes. Those students then meet with an adviser to discuss strategies for improving.

“In the past year, we had 40,000 advising visits for 25,000 students,” Becker says.

GSU’s investment has certainly paid off. According to Timothy Renick, vice provost and vice president for enrollment and student success at the university, the number of annually conferred bachelor’s degrees at GSU has increased by 30 percent, and the results for minority and low-income students are even better.

The number of bachelor’s degrees granted to African American students increased 59 percent, 171 percent for Hispanic students, and 93 percent for Pell Grant-eligible students. GSU successfully eliminated racial achievement gaps and now awards more bachelor’s degrees to African American students than any other nonprofit college or university in the nation.

The UIA estimates that GSU’s innovation scaled across all U.S. public universities would retain 335,000 students and save $2.2 billion in tuition and fees per year, with an additional savings of $1.5 billion to students and taxpayers.

“It seems simple, but it’s a huge culture change, especially for universities that maybe haven’t changed much in the last two decades,” Becker says. “You have to make the organizational and cultural changes and have leadership to carry it out. It’s not about buying the software; it’s about how you then use that tool.”

**Arizona State University**

Under the leadership of ASU President Michael Crow and UTA President William Powers Jr., predictive analytics tools have improved the rates of low-income students earning bachelor’s degrees. UIA members will next meet at ASU to learn how the university’s use of advising software has advanced student progress.

ASU’s software program, called eAdvisor, has reduced the number of exploratory majors from one-third to only 8 percent of the freshmen class. The software not only helps students choose a major, but also helps them track their progress to graduation. ASU estimates eAdvisor has saved the university an average of $31,000 per student per year.

However, the most compelling evidence of eAdvisor’s success is the improved graduation rates of low-income students. For those from families making less than $50,000 per year, four-year graduation rates jumped from 26 percent in 2006 — before the launch of eAdvisor — to 41 percent in 2009, which is nearly
the same rate as students from higher-income families.

**University of Texas at Austin**

Unlike the way GSU and ASU are using predictive analytics, UTA uses predictive software to pinpoint and support underprepared students before they have a chance to start slipping.

UTA’s Four-Year Graduation Rate model is an algorithm that compiles student performance and demographic data from 14 areas — such as parent income, first-generation student status, and high school credits — to predict the likelihood of a student graduating in four years. All entering freshmen receive a predicted graduation rate that helps the university identify students who need extra help, financially and academically.

Students who are identified as underprepared and in need of financial aid receive extra support through the University Leadership Network (ULN), a scholarship and experiential learning program started in the 2013-2014 academic year.

Students in UTA’s ULN program receive $5,000 per year for four years and participate in academic and professional development seminars, community service, and an on-campus internship in their second year.

The 2013-2014 cohort of ULN students — 502 students, all of whom are eligible for financial aid — has excelled in persistence rates and completed credit hours. Of all ULN students, 54 percent completed 30 or more semester credit hours that academic year, as opposed to only 13 percent of the comparison group.

At mentor schools such as UTA, predictive analytics have sped up students’ progress to graduation by helping them stay on track. For low-income students, cutting down on excessive credits and remedial courses can mean the difference between graduating and dropping out.

Twenty-seven colleges and universities have recently asked to be observers of the UIA, including some historically black colleges and universities and community colleges. For now, the alliance will remain exclusive.

“We don’t want to bite off too much,” Burns says. “We have to own the part we can own and do better with the students we have, and that will impact future students.”

To launch the collaborative, the UIA raised $5.7 million from six major charitable organizations, including the Ford and Lumina foundations, and the 11 member institutions have committed to matching that amount.

For more information on the UIA, visit theuiia.org.

Rebecca Prinster is a senior staff writer for INSIGHT Into Diversity.
A Need for Diversity in the Oral Health Workforce

By Dennis A. Mitchell, DDS

The racial and ethnic composition of the health professions workforce, including the dental workforce, fails miserably to reflect the increasing diversity of the U.S. population. Census data from 2010 indicate that African Americans, Hispanics, and American Indians respectively constitute 12.6, 16.3, and 0.9 percent of the U.S. population, totaling approximately 30 percent of the overall population. However, they represent only 5 percent of dentists and 9 percent of dental school faculty members. A look at the racial and ethnic composition of the nation’s dental schools indicates that this disparity will continue to persist in the near future.

In fall 2013, African American, Hispanic, and American Indian dental students constituted 4.6, 8.1, and 0.2 percent of all students, respectively. Together, they made up 13.3 percent of all first-year pre-doctoral dental school classes nationally.

The discrepancy between racial and ethnic minorities’ representation in the general population and their representation in the oral health workforce is a challenging issue in its own right. In addition, it contributes to the documented substandard healthcare received by impoverished populations and racial and ethnic minorities.

Conservative estimates indicate that more than 25 million individuals reside in areas with a shortage of health professionals and have limited access to quality healthcare. Members of racial and ethnic minority groups represent a disproportionate number of these 25 million individuals and therefore are unduly affected by the emotional, financial, and physical consequences of poor oral health.

A report published by the Institute of Medicine titled “Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care” illustrates that patients of color — who bear the brunt of poor oral health — receive a lower quality of care and are less likely to receive routine care than their white counterparts. One factor contributing to the quality of care received by these patients is the patient-provider relationship.

Because of fewer underrepresented minorities in the workforce and inadequate training of health professionals on cross-cultural issues, patients who receive the poorest care are the least likely to find a provider who is willing and able to effectively address their needs.

Although research shows that health professionals who identify as a racial or ethnic minority are more likely to serve in areas of need, diversification is not solely a minority concern or responsibility. Increasing diversity in the classroom and the workforce will have a positive impact on the nation’s health as a whole and is thus a national imperative. While underrepresented minority faculty members and healthcare providers are obvious candidates to spearhead this mission, current disparities will not be properly addressed without the commitment of all professionals.

Over the past 40 years, steps have been made toward addressing diversity in health professions.

Recommendations for further action at the policy, institutional, and provider levels include financial restructuring of healthcare systems, changes to admissions procedures for medical and dental schools, and continuing education on cross-cultural issues for current healthcare providers. With these recommendations in hand, we as oral health professionals need to work in concert with policymakers and other health professionals to increase minority representation in the healthcare workforce and reduce disparities in the quality of oral healthcare received by patients from racial and ethnic minorities, as well as economically disadvantaged patients.

As we look to the future — which will likely be marked by the lack of a distinct racial and ethnic minority group — we must all commit, individually and collectively, to diversifying the health professions in general and the oral healthcare workforce in particular.

Dennis A. Mitchell, DDS, MPH, is senior associate provost for faculty diversity and inclusion at Columbia University and senior associate dean for student development at the university’s College of Dental Medicine (CDM). He also chairs the Provost’s Advisory Council for the Enhancement of Faculty Diversity. He leads the university’s efforts in attracting and retaining diverse faculty and is in charge of diversity programs targeted at underrepresented minority student enrollment and development. Read more about Columbia’s CDM in our HEED Award Spotlight on page 26.
Graduate Medical Education: The Gateway to Diversity in the Physician Workforce

By Mekbib Gemeda

Landmark reports, including the Sullivan Commission’s “Missing Persons: Minorities in the Health Professions” and the Institute of Medicine’s “Unequal Treatment” and “GME That Meets the Nation’s Health Needs,” have highlighted the need for diversity in the physician workforce in order to address persistent health disparities in the United States. Data from the Association of American Medical Colleges (AAMC) show overwhelming interest by underrepresented minority students as compared with non-minority medical students to practice in underserved communities. Studies on the eventual practice location of underrepresented minority physicians have also demonstrated the link between physician diversity and the care given to underserved patients.

The educational advantage that a diverse group of medical students brings to the training environment has been shown in numerous studies and reports to advance culturally competent medical education.

The Liaison Committee on Medical Education (LCME) issues and mandates the accreditation standards required of all allopathic medical (MD) schools in the U.S. and Canada. The LCME reviews medical schools for accreditation at least once every eight years to evaluate whether appropriate sustained effort and resources are employed toward meeting these standards.

Standards IS-16 and Element 3.3 of the LCME focus on appropriate engagement of medical schools in developing a diverse pool of trainees for healthcare professions in order to meet the needs of a diverse population. The standards read as follows:

**IS-16** — An institution that offers a medical education program must have policies and practices to achieve appropriate diversity among its students, faculty, staff, and other members of its academic community, and must engage in ongoing, systematic, and focused efforts to attract and retain students, faculty, staff, and others from demographically diverse backgrounds.

**Element 3.3** — A medical school has effective policies and practices in place and engages in ongoing, systematic, and focused recruitment and retention activities to achieve mission-appropriate diversity outcomes among its students, faculty, senior administrative staff, and other relevant members of its academic community. These activities include the use of programs and/or partnerships aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes.

The LCME has also issued standards ED-21 and elements 7.5 and 7.6 to ensure that the medical curriculum prepares students to care for patients of diverse cultural backgrounds, socioeconomic statuses, gender identities, and sexual orientations. The standards read as follows:

**ED-21** — The faculty and medical students of a medical education program must demonstrate an understanding of the manner in which people of diverse cultures and belief systems perceive health and illness and respond to various symptoms, diseases, and treatments.

**7.5 Societal Problems** — The faculty of a medical school ensures that the medical curriculum includes instruction in the diagnosis, prevention, appropriate reporting, and treatment of the medical consequences of common societal problems.

**7.6 Cultural Competence/Healthcare Disparities/Personal Bias** — The faculty of a medical school ensures that the medical curriculum provides opportunities for medical students to learn to recognize and appropriately address gender and cultural biases in themselves, in others, and in the healthcare delivery process.

The best practice and accountability model prescribed by the LCME in undergraduate medical education provides a comprehensive standard for cultivating a diverse and well-trained pool of medical students for entry into
graduate medical education. Ironically, a parallel standard of practice and accountability has been absent in the accreditation of graduate medical education to ensure a gateway to a diverse physician workforce.

The Accreditation Council for Graduate Medical Education (ACGME) has issued important educational standards that focus on the graduate medical education curriculum to ensure that residents are prepared to communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds and to demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation. However, the accreditation requirements do not provide standards for graduate medical programs — like those developed by the LCME for undergraduate medical education — for engaging in efforts to expand the diversity of residents and fellows. The responsibility of addressing diversity is left to the discretion of individual residency and fellowship programs.

As a school of medicine and health professions established by southeastern Virginia to serve the needs of the community, Eastern Virginia Medical School (EVMS) strives to be the most community-oriented school of medicine and health professions in the nation. To that end, it has established robust pipeline and pathway programs, with local colleges serving large underrepresented minority student populations, including Hampton University and Norfolk State University. The school also integrated service learning and community outreach into its curriculum to ensure training that meets the needs of the community.

EVMS retains a significant number of its medical students and attracts a diverse pool of trainees into its residency programs, particularly in its primary care programs in family medicine and pediatrics. Of the residents, 19.7 percent of those in pediatrics, 6.4 percent of those in internal medicine, and 31 percent of those in family medicine come from underrepresented minority backgrounds (African American or black, Hispanic or Latino, Native American or Alaska Native, Hawaiian Native or Pacific Islander). EVMS leadership is committed to improving the diversity of the graduate medical education complement and continuing to advance this issue at the national level.

While many institutions and programs such as the ones at EVMS embrace diversity and inclusion as an essential pathway to excellence in medicine, the experience of undergraduate medical education informs us that best practices are best achieved through common guidelines and standards.

The AAMC recently introduced a comprehensive initiative to optimize graduate medical education across three broad areas: investing in future physicians; optimizing the environment for learning, care, and discovery; and preparing the physician and physician scientist for the 21st century. There is growing momentum to adapt best practices from undergraduate medical education to develop standards of practice to advance diversity in graduate medical education. The hope is that the AAMC initiative will accelerate adoption of common standards of practice and accountability on diversity in graduate medical education.

Mekbib Gemeda is the vice president of diversity and inclusion at Eastern Virginia Medical School, where he leads efforts to address health equity and enhance diversity in the health workforce. He is the founding director of the Center for the Health of the African Diaspora at New York University School of Medicine and has more than a decade of experience working to reduce health disparities and increase diversity in the biomedical workforce in the U.S.
In 2013, The Atlantic named the veterinary profession the “whitest profession” in the United States. While a shocking characterization to some, it echoed an article published a decade earlier in the Journal of Blacks in Higher Education, which declared it the “most segregated of all the health professions.”

These very public assessments sound harshly negative, yet in reality, they have served to energize diversity initiatives at our nation’s schools of veterinary medicine.

In 2005, the Association of American Veterinary Medical Colleges (AAVMC) began actively nurturing institutional change through the launch of its DiVersity Matters (DVM) initiative. The program encourages veterinary schools and colleges to devote the effort and resources necessary to increase the number of historically underrepresented students who are admitted into professional DVM degree programs; to graduate veterinary professionals who possess cultural competency; and to create inclusive learning environments where all students can thrive.

Since 2005, the number of racially and ethnically underrepresented students in veterinary medicine has nearly doubled, from 951 to 1,810. Although this still only represents 14.6 percent of total veterinary student enrollment, the change is significant in light of the impact these students will have on the future of the profession. Additionally, textbooks devoted to the study of diversity and inclusion in veterinary medicine have been created and are now being used in colleges around the country.

Through the AAVMC, veterinary medical schools also have access to survey tools focusing on various aspects of institutional climate. Furthermore, regionally organized collaborative symposia hosted by veterinary medical colleges explore a range of diversity issues, including gender, sexuality, disability, and diversity within the context of the DVM curriculum.

The Purdue University College of Veterinary Medicine (PVM) provides an example of some of the progressive diversity work occurring at the nation’s veterinary schools. PVM strives to continually sustain an institutional climate that is welcoming.
to and supportive of all students, faculty, and staff, recognizing that specific minority populations may have unique needs.

Since his arrival in 2007, PVM Dean Willie Reed has demonstrated a broad commitment to increasing diversity and inclusiveness within the veterinary profession by launching several initiatives designed to enhance the intercultural competence of those who study and work at PVM. These initiatives include establishing an office of diversity initiatives, as well as a diversity action committee that is composed of representatives from across the college, including students.

PVM also led the publication of *Navigating Diversity and Inclusion in Veterinary Medicine*, the first book of its kind for the profession. Recently, in partnership with the AAVMC and the American Veterinary Medical Association (AVMA), PVM launched the Center of Excellence for Diversity and Inclusion in Veterinary Medicine, which offers online certificate programs for faculty, staff, students, interns, and residents at any veterinary school, as well as practicing veterinarians and veterinary technicians.

These initiatives have had a measurable impact. Between fall 2006 and fall 2013, the presence of racially and ethnically underrepresented minority DVM students at Purdue increased by 12.2 percent, placing PVM in the lead of universities in the Big Ten Conference with colleges of veterinary medicine.

In these ways, Purdue University serves as a great example of what is being done at many veterinary schools nationwide. In the coming years, we anticipate the launch of more diversity-related centers of excellence, more research on the impact of institutional diversity climates on student performance and well-being, and targeted recruiting efforts that enhance the appeal of a veterinary medical degree across a broader and more diverse audience.

The diversity efforts of veterinary medical schools are not without their challenges. Disparate political climates, lack of legal protections for veterinary students, and a shortage of minority faculty members — in terms of sexual orientation and other dimensions of diversity — as well as dwindling public support for higher education, affect these schools’ ability to attract the talent required to prepare future professionals. The constant need to recruit new students into the admissions pipeline also brings with it the need to educate the families of underrepresented students on the unique value of a veterinary degree. More scholarship and grant money will be required to ensure broad access by a diverse population of prospective students.

Despite these challenges, the future looks bright for veterinary medicine. The efforts to date have precipitated meaningful change within veterinary schools, which will ripple through the entire profession. With these forces of change at work, there is every reason to hope that, a decade from now, veterinary medicine will not show up on any list of “least diverse” professions, but rather will be viewed as a model of the transformative power associated with truly valuing diversity.

Kauline Cipriani Davis, PhD, is the director of diversity initiatives for Purdue University College of Veterinary Medicine. Lisa Greenhill, EdD, is the associate executive director for institutional research and diversity for the Association of American Veterinary Medical Colleges.
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A National Imperative: How Higher Education Is Working to Improve Our Health

In the United States, minorities currently represent 30 percent of the total population, but their numbers remain staggeringly low in some healthcare professions.

U.S. Population

- 70.5% Other (White, Asian, Some Other Race, Multiple Races)
- 16.3% Hispanic or Latino
- 12.2% African American/Black
- 0.7% American Indian or Alaska Native
- 0.15% Hawaiian or Pacific Islander

Source: U.S. Census Bureau (http://www.infoplease.com/ipa/A0762156.html)

For medical, dental, and veterinary schools, these statistics have indicated a need for increasing diversity among students, faculty, and staff. Through innovative programs and initiatives, early outreach, and new admissions practices, these schools are increasingly providing underrepresented minority students with access and opportunity — filling the pipeline with future healthcare professionals who are prepared to care for patients from all backgrounds.

U.S. Physicians

- 87% Other (White, Asian, Other Race/Unknown)
- 5% Hispanic or Latino
- 5% African American/Black
- <0.5% American Indian or Alaska Native
- <0.5% Hawaiian or Pacific Islander

Source: Association of American Medical Colleges (AAMC). Based on a sample of 507,622 direct patient care physicians in the U.S. as of 2015

U.S. Dental School Students

- 87% Other (White, Asian, Multiple Races, Not Reported, Unknown, Nonresident Alien)
- 8.1% Hispanic or Latino
- 4.6% African American/Black
- 0.2% American Indian or Alaska Native
- 0.1% Hawaiian or Pacific Islander

Source: American Dental Education Association (ADEA) as of 2013

U.S. Veterinary School Applicants

- 89.2% Other (White, Asian, Multiple Races, Not Reported)
- 8.3% Hispanic or Latino
- 2.2% African American/Black
- 0.4% American Indian or Alaska Native
- 0.04% Hawaiian or Pacific Islander

Source: Association of American Veterinary Medical Colleges (AAVMC), Applicants for the Class of 2019
The University of Vermont College of Medicine Connects with the Community

By Tannette Johnson-Elie and Rebecca Prinster

The Census Bureau lists Vermont among the 10 whitest states in the nation, yet in this small, picturesque New England state, the University of Vermont College of Medicine is intentionally helping diversify the region’s physician workforce.
“It seems there is always work to do when addressing diversity and inclusive excellence, especially in a very homogeneous state such as Vermont,” says Margaret Tandoh, a trauma surgeon at the University of Vermont (UVM) Medical Center and associate dean of diversity and inclusion for the College of Medicine. “We have made tremendous progress as an institution over the past decade, with [student] recruitment, professional development, and more visible support of diversity and inclusion efforts.”

There is good reason behind UVM’s efforts to get more minority medical students in the pipeline. The university is located in the city of Burlington, which is statistically different from much of the rest of the state. In recent decades, many ethnic groups — from such countries as Bosnia, Somalia, Nigeria, Ethiopia, and Vietnam — have settled in the city, creating a growing demand for a diverse physician workforce.

Thanks to an uptrend in minority enrollment over the past decade, UVM College of Medicine is well-positioned to prepare future physicians to care for patients from these ethnic populations. Of the current 408 students enrolled in the college, minorities make up 34 percent, up nearly 40 percent from a decade ago and nearly double the national average.

Tandoh attributes such positive results to a “robust, five-year diversity strategic action plan” that touches every aspect of the college — from recruitment and hiring to professional development. For its diversity efforts, INSIGHT Into Diversity magazine awarded UVM its Higher Education Excellence in Diversity (HEED) Award in 2014.

“I’m proud of the fact that we’ve created and implemented a five-year diversity and inclusion plan that is mission-driven and has the full support of the College of Medicine administration,” Tandoh says.

UVM College of Medicine also boasts a mission focused on ensuring that its students gain hands-on experience working with diverse populations in Vermont.

Through public health projects — completed as part of a required course — UVM medical students are not only engaging with diverse populations, but are also tackling health disparities in the surrounding communities of Chittenden County. For example, they have established a program to work with the state’s migrant farm workers, a largely hidden population. The required course, titled Public Health Projects, was implemented in 2004 under a partnership between UVM and United Way.

“Students get to see people in the context of their daily lives. They see the many things that influence people’s health, including their education, income, what their neighborhood is like, and if they have nutritious food in their family,” says Jan Carney, associate dean for public health for the College of Medicine. “It gives them a sense of the real world and the problems people face around health.”

Alejandro Velez, a second-year medical student at UVM, along with fellow student Jessica Huang, helped establish a public health project — supported by the Albert Schweitzer Fellowship — to distribute bilingual healthcare information to migrant, Latino dairy-farm workers.

“The Office of Diversity and Inclusion has been instrumental in the success of this project, and they have supported us mostly in identifying interested volunteers and raising awareness about the demographics and the struggles of these farm workers,” says Velez, 24, who identifies as white and Hispanic/Latino.

The payoff is twofold. UVM medical students gain valuable real-world experience in public health, and nonprofit agencies get much needed research that they otherwise may not be able to afford.

“The projects are things the community wants to know about, but many agencies don’t have money to do the research,” says Laurie Dana, coordinator of volunteer mobilization for United Way of Chittenden County.
Student-Led Study Examines LGBTQ Medical Needs
Like Velez and Huang, Alison Alpert, a graduate of UVM College of Medicine, made good use of the opportunities available to her while enrolled there.

By the time Alpert came to UVM as a medical student, she had been working with the LGBTQ community for more than 10 years to reduce health disparities, particularly with LGBTQ people of color. Around the same time, there were a number of suicides involving people in the LGBTQ community, including someone she had known in New York.

“I talked to my mentor about how we could do something to reduce harm to the LGBTQ community within the context of the medical school,” she says. “We realized it all comes down to competency. If you don’t know what people don’t know, you can’t find the gaps in knowledge.”

This led to a study in 2013 and 2014 of the negative and positive experiences of people in the LGBTQ community, as well as the development of a list of competencies for healthcare providers. According to Alpert’s study, previous competency guidelines had been made without formal surveys of members of the LGBTQ community.

The study consisted of six focus groups, with 47 lesbian, gay, bisexual, transgender, queer, and intersex people over the age of 16 from Burlington, Washington, D.C., New York City, and Oakland, Calif. When asked to give feedback on other competency guidelines, those surveyed still found gaps, Alpert says.

Because the results of Alpert’s study and list of competencies for physicians are not yet published, she is reticent to talk about the findings, but she hopes to see medical schools training physicians to be more patient-centered when treating people in the LGBTQ community.

“It’s really important [for professors] to think about the examples they use in class,” Alpert says, when referring to clinical vignettes. “Patients in the vignettes are assumed to be white and straight. LGBTQ people are only mentioned when you talk about HIV, and black people are mentioned when you talk about sickle cell anemia. This does a lot to reinforce the idea that LGBTQ people are ‘other.’”

Alpert is now a first-year resident at Cambridge Health Alliance in Massachusetts. In her own work, Alpert says she asks open-ended questions to give patients the opportunity to “say what they need to say,” rather than making assumptions about their medical background.

“I will say that at UVM, I was just really impressed and moved by...
the authentic collaborations among marginalized groups on campus,” Alpert says. “I felt like a lot of professors who are not in the LGBTQ community had my back around LGBTQ issues, and a lot of my peers in the LGBTQ community had the backs of people of color.”

Casting the Widest Net to Find the Best
Charles Irvin, associate dean of faculty affairs, professor of medicine, and director of the Vermont Lung Center at UVM’s College of Medicine, says that increasing faculty diversity at the school has been “slow but sure.”

“We’re doing really well with diversity at the leadership level,” he says. “The dean [Frederick Morin] is a first-generation student, and he is visibly behind our diversity and inclusion efforts.”

Since 2012 — when the College of Medicine’s Dean’s Advisory Committee on Diversity and Inclusion was established — Irvin says there has been a significant increase in the number of diverse faculty members, including three minority faculty members he recently helped hire.

“We begin the process with carefully worded advertisements and communications,” he says. “I review the makeup of the search committee to ensure its members represent the diverse academic community we seek to establish and retain. About 25 percent of my time with each of these search committees is focused on discussing diversity and inclusion objectives, and I review each interview request to ensure the candidate meets our mission criteria.”

Seven percent of the college’s full-time faculty meet its broad definition of diversity, which is a higher percentage than the overall diversity of Vermont.

“We’d like to be 15 percent minority in the next five to 10 years, and I think we can do it because we’re committed to [increasing diversity] for the right reasons,” Irvin says. “We’re not interested in tokenism. We cast the widest net so we can find the best people, and I think we do really well with that.”

Irvin says the most effective method he has found for recruiting a diverse mix of faculty members is a simple telephone call to a friend or colleague.

“If they aren’t interested in the position, they probably know someone who is,” he says. “And once you get them into Burlington, the town sells itself.”

Tannette Johnson-Elie is a contributing writer for **INSIGHT Into Diversity**. Rebecca Prinster is a senior staff writer for **INSIGHT Into Diversity**.
**“Lone Soldier” Recruits American Indian Dentists to Serve the Community**

By Rebecca Prinster

Conveniently nestled between 22 federally recognized American Indian tribes, A.T. Still University’s (ATSU) Arizona School of Dentistry and Oral Health (ASDOH), in Mesa, has graduated 22 American Indians, and all but one have returned to work on reservations.

Nine American Indian students are currently enrolled in ASDOH’s dentistry program, more than at any other dental school in the country.

Perhaps more critical than ASDOH’s geographic location is the man behind American Indian recruiting efforts at the school: Dr. George Blue Spruce, DDS, assistant dean for American Indian affairs at ASDOH — better known as the first recognized American Indian dentist in the U.S. As a member of the Laguna/Ohkay-Owingeh Pueblo tribes of New Mexico, he is a tireless advocate for recruiting American Indians to dentistry, a group vastly underrepresented in the profession.

The American Dental Education Association’s 2010 “Survey of U.S. Dental School Applicants and Enrollees” found that out of 12,001 applicants to dental schools that year, only 38 were American Indian or Alaska Native. The number of first-year American Indian enrollees in 2010 was 12 out of 4,947 students.

“Right now, we have about 250 American Indian dentists who come from federally recognized tribes, but we need more than 3,000 before we can reach parity with the non-Indian dentist-to-patient ratio,” Dr. Blue Spruce says. “We still have a long way to go.”

More American Indian dentists could mean better oral health outcomes for those living on reservations. A 2014 study by the Colorado School of Public Health found that American Indians have oral diseases at a rate three times higher than that of the rest of the population.

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The Commonwealth Medical College (TCMC) is one of the nation’s newest fully-accredited medical colleges, offering a Doctor of Medicine (MD) degree, Master of Biomedical Sciences (MBS) degree, and MD/Master of Public Health (MPH) dual degree. Students train in 17 counties in northeastern and north central Pennsylvania.

TCMC is currently recruiting diverse qualified faculty and staff aligned with our mission and commitment to diversity, patient-centered health care, and community service. For job postings, please visit [www.tcmc.edu/jobs](http://www.tcmc.edu/jobs)
of the population. The study’s authors cite access to care as the biggest factor contributing to this health disparity.

Dr. Blue Spruce graduated from Creighton University School of Dentistry in 1956 at a time when few American Indians attended college and has spent most of his career single-handedly working to increase the number of American Indian dentists in the U.S. He credits his parents and a non-Indian dentist who served as his role model for encouraging him to continue his education and become a dentist.

“In the arena of recruiting vigorously, I was the ‘lone soldier,’” he says.

For 59 years, Dr. Blue Spruce has been visiting American Indian reservations to stress the need for “homegrown” dentists — those who return to the reservation to serve their own communities. Often, he was the only American Indian dentist anyone had encountered. Then in 1990, he helped found the Society of American Indian Dentists (SAID), and its members joined him in his recruiting efforts.

“A lot of American Indian people tell me that a non-Indian dentist doesn’t have the same impact as an American Indian dentist,” he says. “For kids to see a live, real American Indian dentist, [it] breaks the barrier of mistrust and fear.”

Fear is one of the main reasons American Indians avoid oral checkups, Dr. Blue Spruce says. A traumatic history of “hired-consultant” traveling dentists, whose main job was to pull teeth, helped instill this fear.

Along with his work to improve the dentist’s image for those on reservations, Dr. Blue Spruce is an active role model and mentor for American Indian students at ASDOH. He says these students are more likely to succeed if they have a family unit away from the reservation, and ATSU has been instrumental in giving its students a home away from home.

ATSU established a National Center for American Indian Health Professions to bring together American Indian students from all the health professions administered by the university, and ASDOH established the only student chapter of SAID in the country.

Members of the chapter sponsor and attend fundraising activities to help defray the costs of their continued leadership development of Native students. Some of these activities include auctions of American Indian memorabilia, such as pottery, clothing, jewelry, and rugs. Often, student chapter members set up a booth at American Indian powwows to provide outreach and education.

On campus, the student chapter meets monthly, and Dr. Blue Spruce and other American Indian role models give guest lectures.

Dr. Blue Spruce has had a long and varied career. He spent 21 years in the Indian Health Service; worked with the World Health Organization in South America; wrote the original draft of legislation for Title I (on American Indian student scholarships) of the Indian Health Care Improvement Act of 1976; served as assistant surgeon general and director of Indian Health Service for the Phoenix area; and is the first and only male tennis player inducted into the American Indian Athletic Hall of Fame.

And at age 84, Dr. Blue Spruce shows no signs of slowing down.

“I’ll keep going as long as I’m able to get around,” he says. “And I’ll stay [at ASDOH] as long as I can reap the rewarding feelings from being around American Indian youth and the community.”

Rebecca Prinster is a senior staff writer for INSIGHT Into Diversity.
Student Group Addresses Role of Spirituality in Medicine

By Tannette Johnson-Elie

In dealing with a health crisis, patients will often turn to their religious beliefs and practices to help them cope. Yet many physicians and medical students are unsure how to address the spiritual needs of their patients. At the University of Chicago Pritzker School of Medicine, Aamir Hussain is working to close that gap.

Hussain, a first-year medical student at Pritzker, has started a student organization called The Spirituality and Medicine Interest Group. Launched last fall, the group aims to create a safe space for medical students to have meaningful discussions about the relationship between spirituality, religion, and healthcare.

“The goal is to have an ongoing dialogue on this topic,” Hussain says. “When we think about intersectionality — which means people have many different identities — we need to be mindful that religion is an important part of that unique identity. Religion is viewed as a social outcome to health.”

The group is open to all medical students regardless of their faith background, but Hussain — who is Muslim — felt it was important to also include students who are “religiously unaffiliated” to bring a diversity of perspectives to the conversation.

“It’s important to include religiously unaffiliated perspectives in any conversation around religion and spirituality,” says Hussain. “It’s helpful for all medical students to have some familiarity with conversations related to spirituality in order to better connect with patients.”

There is a growing nationwide trend among medical schools to help students relate to their patients’ spiritual side as the medical profession begins to recognize the important role that religion and spirituality play in the lives of many Americans.

Research shows that religious beliefs and practices are widespread in the U.S. A 2014 Gallup poll found that 57 percent of Americans believe that religion “can answer all or most of today’s problems.”

Religion and spirituality are particularly important in urban communities. These areas are largely populated by racial and ethnic minorities who are likely to base their healthcare decisions on their religious beliefs and culture.

“The University of Chicago can get people of diverse backgrounds — Muslims, Jehovah’s Witnesses, Hindus, and the non-religious,” Hussain says. “Jehovah’s Witnesses do not accept blood transfusions for religious reasons. Muslims don’t eat pork products. So we need to be able to tailor our treatment to accommodate those needs.”

Meeting the needs of racial and ethnic minorities can be critical to alleviating health disparities within these populations. Physicians and medical students must provide care that’s sensitive to the cultural and religious values of such patients, Hussain says.

“When talking to a patient, if that patient mentions that their religion is important, it helps create a better doctor-patient bond if a doctor is sensitive to that,” he says.

Aasim Padela, director of the Initiative on Islam and Medicine and an emergency medicine physician at
the University of Chicago Medical Center, believes The Spirituality and Medicine Interest Group at Pritzker can serve as a model for how students can elevate the conversation about spirituality and medicine.

“Aamir [Hussain] has tapped into the idea of how we think about religion in healthcare. To be a better healthcare provider, one thing to understand is the ways in which religion influences patients’ behavior,” Padela says. “There is still a long way to go nationally. The community of physicians who have a spiritual lens have a longer way to go. We’re still trying to figure out how to have these conversations.”

Hussain believes his interest group is helping to increase cultural competence among medical students and physicians, which is keeping in line with Pritzker School of Medicine’s commitment to diversity.

And his efforts have not gone unnoticed. Interfaith Youth Core has awarded The Spirituality and Medicine Interest Group a Germanacos Fellowship, a $5,000 grant to develop a medical discussion series focused on the intersections between spirituality, religion, and medicine. Interfaith Youth Core is a Chicago-based nonprofit that aims to make interfaith cooperation a social norm in the U.S. by promoting inter-religious dialogue and community service.

Hussain worked with the Interfaith Youth Core as an undergraduate pre-med student at Georgetown University, where he was also a theology minor. “I was interested in continuing that work in medical school,” he says.

Despite his ambitions, Hussain found that religion can be a delicate topic in medical school. During his first few months at Pritzker, religion was rarely discussed, and when the topic came up, he found that his medical school colleagues were uncomfortable sharing their personal views in an academic setting.

Now, as the group has progressed, Hussain is grateful to be providing a platform through which medical students can reflect on their religious and spiritual values.

“The goal is to bring professors, researchers, and students together to discuss how religion and spirituality influence the practice of medicine,” he says.

Tannette Johnson-Elie is a contributing writer for INSIGHT Into Diversity.
UCSF Delivers on Its Commitment to Diversity

By Alexandra Vollman

Students at the University of California, San Francisco (UCSF) School of Medicine have made it their mission to connect underrepresented and disadvantaged youth to opportunities in healthcare professions.

Through the School of Medicine’s MedLink mentorship program, current medical students introduce high school students to the world of health sciences through a series of Saturday workshops. “They are really targeting first-generation [to attend college], low-income, and educationally disadvantaged individuals,” says Latasha Mitchell, MedLink program coordinator. In 2002, disappointed by the lack of diversity in health professions, several UCSF medical students developed the program with the goal of meaningfully engaging with high school students from diverse backgrounds.

MedLink accepts high school sophomores from populations underrepresented in the medical field who are interested in exploring health careers. “The goal of the program is really to expose the high school student to the possibility of going into the health science field,” Mitchell says. “We want to get them on track at an early age.”

The workshops are held monthly, November through April. Mentors not only introduce participants to topics within medicine and health sciences, but also help them with skill building and preparing for college and careers.

“The goal of the program is really to expose the high school student to the possibility of going into the health science field. We want to get them on track at an early age.”

- Latasha Mitchell, MedLink program coordinator
Since MedLink’s inception, the number of participating high school students has increased from just 12 in the program’s first year to more than 100 in the 2011-2012 school year. Over the last 10 years, more than 300 medical students have served more than 500 high school students through the program.

Mitchell believes the program helps create meaningful connections for both parties. “It gives [high school students] the confidence that they can navigate these processes so that they can go into graduate-level education and health professions,” she says. “Also, for the medical students who participate, it provides them with an opportunity to be in contact with members from the local community and to engage in service learning.”

School of Dentistry Admits DREAMers
The UCSF School of Dentistry continues to build a diverse community of students by accepting two DREAMers into its Class of 2019.

Thanks to the Deferred Action for Childhood Arrivals (DACA) program, a U.S. immigration policy implemented by the Obama administration in June 2012, students José Carrasco Sandoval and Laura Aguilar can now pursue their dream of going to dental school.

The policy allows certain immigrants who entered the U.S. before their 16th birthday and before June 2007 to receive a renewable two-year work permit and exemption from deportation. These students are often referred to as DREAMers because they comprise most, though not all, of the individuals who meet the general requirements of the Development, Relief, and Education for Alien Minors (DREAM) Act.

Sandoval and Aguilar both grew up in northern California but came from different areas of Mexico. Sandoval’s parents came to Napa from Jalisco, Mexico, when he was 2 years old; Aguilar’s parents traveled from Guadalajara to Napa when she was 4.

“Students with diverse backgrounds, such as those with DACA status, bring an important component to the university,” says John D.B. Featherstone, dean of the UCSF School of Dentistry. “One of my highest priorities is that we do everything possible to open the doors to dental education for the best and the brightest, regardless of their social or economic backgrounds.”

Alexandra Vollman is the editor of INSIGHT Into Diversity.
Louisville School of Medicine Tackles LGBT Health Disparity with Competency Training

By Alexandra Vollman

At the University of Louisville School of Medicine, preparing students to provide the best quality care will soon go beyond textbooks to address inherent human bias and a lack of sensitivity.

“I think, as we look at our roles as physicians, it’s really important that we provide high-quality, compassionate, competent care to our patients,” says Dr. Toni Ganzel, dean of the School of Medicine. “And certainly, what we hear from some of our LGBT patients about their experience is that they still continue to experience bias.”

With the implementation of a new pilot program, Louisville’s School of Medicine will be the first institution of higher education in the nation to directly address the healthcare issues faced by the LGBT, gender nonconforming, and differences of sex development (DSD) population. The program will train medical students on the unique concerns faced by these communities in order that they may provide culturally competent, sensitive care to all patients.

“It was coming up again and again that treating LGBT patients and providing them with competent care really takes a certain set of skills, most especially around having conversations about identity, using inclusive questions, and thinking about who people are — what they might bring with them to their appointments,” says Brian Buford, assistant provost for diversity and director of the LGBT Center at the University of Louisville.

The program is based on standards developed by a subcommittee of the Association of American Medical Colleges (AAMC). In November, the AAMC’s Advisory Committee on Sexual Orientation, Gender Identity, and Sexual Development released a list of 30 competencies physicians must master in order to confront LGBT health disparities. The list was adapted from the Physician Competency Reference Set, a list of 58 competencies that all physicians should master.

“These competencies address knowledge, they address attitudes, and they address the skills that are needed to operate within the healthcare system..."
to support patients who are LGBT, gender nonconforming, or who have been born with DSD,” says Kristen Eckstrand, chair of the AAMC subcommittee and fourth-year medical student at Vanderbilt University School of Medicine. “I think, first and foremost, these competencies will help people see their patients as a whole person.”

The pilot program at Louisville came about as a result of conversations between Stacie Steinbock, director of the University of Louisville LGBT Center’s satellite office, and co-authors of the competencies, Eckstrand and Jennifer Potter, MD — who are both assisting with the development of the training.

The School of Medicine, the LGBT Center, and the Health Science Center Office of Diversity and Inclusion are working together to develop the curriculum for the pilot program, which will launch with incoming students in the 2015-2016 academic year. The university hopes to have the training fully integrated into the curriculum by the following year.

Instead of exposing students through a one-time course, the training will permeate all learning and cover a wide range of topics across eight domains, says Steinbock.

“It will actually be integrated throughout the curriculum as a thread,” she says. “What’s really cool about that is it means we get to train faculty and staff along the way. So [students] will be hearing about LGBT health from everywhere — from their first-year courses in basic sciences to when they’re doing their rotations. It’s actually, I think, a much more powerful message to have it integrated throughout the curriculum.”

The impetus for the program was the result of a lack of knowledge and an increasing need to know expressed by students.

(From left to right) University of Louisville’s David Wiegman, associate vice president for health affairs; Stacie Steinbock, director of the LGBT Center’s satellite office; Dr. Toni Ganzel, dean of the School of Medicine; and Brian Buford, assistant provost for diversity and director of the LGBT Center pose during the university’s 2014 Pride Week celebration.
At the LGBT Center, Buford has been accustomed to receiving regular requests for physician referrals from students who have had negative experiences and are looking for an LGBT-friendly provider. These experiences have included everything from a subtle lack of sensitivity to more blatant discrimination.

“Their identity has been misunderstood or they’ve been treated badly,” Buford says. “[Or] it can be there’s no place on the form to indicate that you have a partner or nowhere to indicate the gender that you identify with. So from the community, the interest in this project is tremendous because they’ve all suffered at some point in their lives from a lack of competent care.”

More often than not, Buford says, issues center on miscommunication. Experiences like these can — and often do — result in an unwillingness to seek out healthcare, even when it’s most needed, putting LGBT, gender nonconforming, and DSD patients more at risk.

Steinbock hopes the competency training will help diminish the health disparity problem while covering specific techniques for providing patient-centered care. These techniques will include everything from how to take a complete health history and do a thorough physical exam to recognizing biases.

“So when you’re taking a sexual history with a patient, you need to be open to the different kinds of sexual practices someone might be involved with and be comfortable talking about those,” Steinbock says. “Another piece of the curriculum will be ethics, which has to do with coming up with specific scenarios in which students need to recognize the ethical quandary they may face as medical providers for an LGBT population. So they’ll be kind of recognizing their own biases and also figuring out how to provide the best care.”

As dean of the School of Medicine, Ganzel is hoping that the program will serve as a model for schools across the country so that one day, providing culturally competent care to all people — no matter their background — will be second nature.

“I guess what I hope is that at some point it’s not necessary to have something special like this because it’s just going to be infiltrated into how we train our students … and how we care for patients,” she says. “We hope and dream that some day there will be widespread health equity across all populations, but at this point, there’s not. And so, until there is, we need to be very conscious and intentional about it.”

Alexandra Vollman is the editor of INSIGHT Into Diversity.
SUNY Downstate Medical Center

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Health Professions Schools: Bridging the Gap for Underrepresented Minorities

Medical, dental, and veterinary schools and nonprofit organizations work to address the lack of diversity in the field and create a workforce that better represents the nation’s demographics

By Alexandra Vollman
As the U.S. population continues to grow, so do the numbers of underrepresented minorities (URMs), paving the way for a true melting pot of backgrounds, ideas, and perspectives. Yet this rich and diverse demographic makeup is largely unaccounted for across the medical, dental, and veterinary professions.

While 2010 census data show that URM populations — African American, Hispanic or Latino, American Indian or Alaska Native, and Hawaiian or Pacific Islander — make up 30 percent of the U.S. population, that number is less than representative of the U.S. physician workforce. According to the Association of American Medical College’s (AAMC) “Diversity in the Physician Workforce: Facts & Figures 2014” report, approximately 13.5 percent of the physician workforce is composed of people from URM populations. While this number is increasing, it is not keeping pace with the nation’s changing demographics. For instance, African Americans represent 13 percent of the population but only account for 4 percent of physicians.

This disparity, however, is not confined to this corner of the healthcare arena. In the dentistry field, URMs account for only 13 percent of all dental school students, according to data from the American Dental Education Association (ADEA).

Veterinary medicine statistics are even worse. A November 2013 article in The Atlantic, titled “The 33 Whitest Jobs in America,” listed the veterinary profession as the whitest profession in the country, at 96.5 percent. And while the percentage of URM students in veterinary medicine has nearly doubled since 2005 — to 14.6 percent — there is still much room for improvement.

Tackling the Issue
For Jorge Girotti, dean of admissions for the University of Illinois College of Medicine (COM), increasing the number of URMs in medical professions is critical to addressing the specific needs of different populations, as well as creating a level of ease and comfort for all patients.

“This is not just a matter of statistics — increasing the number of doctors because the population is increasing,” Girotti says. “There’s pretty solid research that shows that when the patient feels comfortable, culturally and linguistically, with their doctor, they’re more likely to follow the doctor’s advice, they’re more likely to use the medical services more often, and therefore end up with better health outcomes.”

Unlike other, non-healthcare careers, those in the medical, dental, or veterinary fields require a breadth of prior training and experience — with the need for recruitment efforts that begin long before college.

“I think we need to engage and encourage students at high school and even at middle school levels,” says Todd Ester, director of diversity and inclusion for the University of Michigan School of Dentistry. “So many students from underrepresented minorities or diverse backgrounds do not even consider dentistry as a potential option for their career because they either haven’t seen a dentist who looks like them or they never had anyone suggest to them that this could be a great career path.”

Compared with their white peers, students from URM populations often experience an unprecedented number of obstacles on their path toward receiving a medical, dental, or veterinary degree, says Topaz Sampson, national president of the Student National Medical Association (SNMA). The SNMA is an organization dedicated to supporting underrepresented minority medical students and addressing the needs of underserved communities.

These obstacles can include...
gaining exposure to and knowledge of healthcare professions, preparing for and applying to schools, and getting accepted into a program — along with completing their studies and receiving their degree.

“Those who I find are successful at getting into medical school have either a family member who is a physician or someone who was kind of preparing them since they were very young — in terms of allowing them to get exposure through shadowing or preparation through advanced courses or summer programs,” Sampson says. “So when you get to the point of applying to medical school, you have tangible experience and years of preparation to be successful on your MCAT and get in. If you don’t get this type of experience, it can be very daunting if you’re just taking the MCAT and hoping to do well.”

Another large obstacle for any student, especially those from lower-income or disadvantaged backgrounds, is the medical school price tag. “I think many people shy away from even applying because when they look at the cost, they feel it’s overwhelming,” says Girotti.

Finding a Solution
As dean of admissions for the University of Illinois COM, Girotti knows something about attracting, recruiting, and retaining a diverse set of students. According to the AAMC’s report, Illinois’ COM rises to the top in many categories. Based on data collected between 1980 and 2012, the university ranks third in the U.S. for graduating African American physicians and fourth for graduating Hispanic/Latino physicians.

Girotti attributes the COM’s success in attracting, supporting, and retaining underrepresented students to “strong institutional commitment and leadership.”

“We’ve been very fortunate, going back several decades, that regardless of who the dean of the college is, there’s been very strong and consistent support of these activities,” he says. “So that creates a very important stability, and in a way, it kind of sends the message to prospective students that this is a place that they would feel comfortable.”

The University of Illinois COM focuses its efforts on providing much-needed support to URM students — specifically those who weren’t admitted. Each year, faculty meet with these students to review ways to improve their chances of being admitted the next year and provide them with opportunities to gain more experience — a practice Girotti calls “conditional admissions.”

Another practice called “holistic admissions” is being used by colleges and universities across the country to admit a diverse set of students. As opposed to focusing solely on academic

Based on data collected between 1980 and 2012, the University of Illinois College of Medicine ranks third in the U.S. for graduating African American physicians and fourth for graduating Hispanic/Latino physicians.
As the numbers of underrepresented minorities in the U.S. continue to increase, medical, dental, and veterinary schools and nonprofit organizations are doing their part to fill the pipeline. These programs and others like them are helping create a healthcare workforce that mirrors the nation’s demographics.

American Dental Education Association
The Summer Medical and Dental Education Program (SMDEP) is a dental and medical school preparation program dedicated to increasing the acceptance rates of college students from underrepresented and disadvantaged backgrounds. Of pre-dental participants, 47 percent went on to apply to dental school, and since 2006, 75 percent of SMDEP participants who applied to dental school were accepted. For more information on SMDEP, read the stories on pages 26 and 58.

Association of American Veterinary Medical Colleges
The DiVersity Matters (DVM) program encourages veterinary schools to devote more effort and resources to increasing the number of historically underrepresented students in veterinary degree programs. Because of programs like this, the number of underrepresented students in veterinary medicine has increased nearly 5 percent since 2005. For more information on the DVM program, read the story on page 34.

University of Illinois College of Medicine
Through the Post-baccalaureate Admission Program, underrepresented minority students who need more experience in the medical field have an opportunity to build on their knowledge and skills through a rigorous 11-month program, with the potential for admission into the next incoming class — a practice called conditional admissions. Study results from 1999-2009 show that of the 274 students admitted to University of Illinois College of Medicine via conditional admissions, 81.4 percent were from underrepresented ethnic or racial backgrounds.

University of Michigan School of Dentistry
Profile for Success is a summer program aimed at preparing undergraduate students and recent college graduates from disadvantaged backgrounds to be more competitive applicants for dental or medical schools. Data from 1995 to 2013 show that more than 390 participants have matriculated through the program, and more than 56 percent of pre-dental participants have gone on to become dentists.
Texas A&M University College of Veterinary Medicine addresses diversity by holding departments accountable for their efforts. Every year, each department sends a report detailing their diversity efforts to university leadership, says Eleanor Green, the Carl B. King dean of veterinary medicine. Every other year, they must present these to the university’s diversity council.

“Each [department] is rated and then resources are distributed according to that rating,” Green says. “So it’s not only that you demonstrate what you’re doing, but you’re actually rewarded if you’re doing well. And there will be a very direct conversation if you’re doing poorly.”

While the need for increasing URM populations in the medical, dental, and veterinary fields is clear, equal representation across all spectrums is the goal of many schools and organizations. According to Yasmin Williams, diversity officer at the University of California, Davis School of Veterinary Medicine, increasing overall diversity is the best way to ensure competent, sensitive care for all.

“We need to create a workforce that will mirror the future of our society in regard to demographics, abilities, multicultural populations — people who speak different languages, people from different socioeconomic classes, different sexual orientations,” Williams says. “So by creating a more diverse pool of applicants, it’s a step in serving these different populations.”

Alexandra Vollman is the editor of INSIGHT Into Diversity.
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Interprofessional Education and Holistic Admissions Are Key to the Future of Healthcare Providers

By Rebecca Prinster

When the Affordable Care Act (ACA) was implemented in 2014, an estimated 10 million more people in the U.S. gained access to healthcare. But the influx of new patients tends to be less affluent and more diverse than previous patient populations.

Research shows that low-income, minority patients tend to have more risk factors for chronic illnesses; therefore, healthcare providers must be able to identify correlating concerns across health disciplines, such as the increased likelihood for gum disease in people with diabetes.

According to Rick Valachovic, president of the American Dental Education Association (ADEA), other evolutions in healthcare — such as the rise in ambulatory care centers — are adding to the need for healthcare providers and health professions educators to reinvent traditional methods for treating patients.

Interprofessional Education Provides Team Solutions

Interprofessional education (IPE), for which the ADEA advocates, is one way professional schools are preparing future healthcare providers to deliver culturally competent, patient-centered care.

The World Health Organization’s report “Framework for Action on Interprofessional Education & Collaborative Practice” defines IPE as follows: “Students from two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes.” The report continues, “Once students understand how to work interprofessionally, they are ready to enter the workplace as a member of the collaborative practice team. This is a key step in moving health systems from fragmentation to a position of strength.”

Increasingly, healthcare providers are required to provide care in teams. IPE emphasizes collaborative care by eliminating silos and educating students from different health fields together in the classroom.

“It’s true, dental schools developed independently of pharmacy, nursing, and medical schools because our care is mostly inpatient,” Valachovic says. “But dentistry has always had a focus on IPE, so we feel we have something to bring to the table.”

When considering other reasons for IPE’s importance, beyond a changing healthcare system, Valachovic points out that “the mouth is a mirror to the rest of the body.” For instance, diseases such as leukemia can present symptoms in the mouth, and dentists need to be aware of what those signs can indicate.

From the medical perspective, Dr. Maryellen Gusic, chief medical education officer of the Association of American Medical Colleges (AAMC) and a pediatric physician, says poor oral hygiene or prolonged bottle use can cause health issues in children. Therefore, she stresses the importance of oral care to parents.

Gusic is a member of the Interprofessional Education Collaborative (IPEC), which formed in 2009, and Valachovic is its president. Along with the AAMC and ADEA, IPEC comprises the American Association of Colleges of Nursing (AACN), the American Association of Colleges of Pharmacy (AACP), the American Association of Colleges of Osteopathic Medicine (AACOM), and the Association of Schools and Programs of Public Health (ASPPH).

“IPEC’s primary goals are to help provide member institutions with a common language and ways to assess competencies,” Gusic says. “IPEC provides for faculty development, serves as a voice to promote the importance of IPE to policymakers, and evaluates...
ample numbers of racially and socioeconomically diverse physicians to better serve a diverse patient population, a growing number of schools are moving to holistic, race-neutral admissions policies to diversify their student bodies.

As the name suggests, this type of review process takes into account the whole person, not just college transcripts and entrance exam results. Essays and letters of recommendation — along with demographic data, such as first-generation status and employment history — help review committees select candidates to move on to the interview portion. Exemplary applicants have proven leadership experience, strong moral and ethical values, and a history of working with underserved populations.

Additionally, the ideal candidate will have “an aptitude to be humanistic,” says Marc Nivet, chief diversity officer for the AAMC.

“Holistic applications are meant to be customizable after schools address two things,” Nivet says. “First, understanding what is the mission of the institution. Are they preparing students for graduate research, or do they want to address shortage areas? Schools have to articulate their mission, then look for those students. Second, schools have to be willing to dive deeply into applicants’ backgrounds and be comfortable with not having all of the focus on tests and GPA.”

Nivet acknowledges the challenges associated with holistic admissions — evaluating essays for ethical traits requires more time and staff — but he believes there will soon be a way to make things more efficient, by using technology — such as Skype, for example — to do a remote pre-interview session in place of essays.

Despite these challenges, the impact holistic admissions has had on diversity in schools using this method is profound. A report published in September by the collaborative Urban Universities for HEALTH, of which the AAMC is a part, affirms its value.

Of the 228 health professions schools surveyed, those that reported using “some” or “many” holistic review elements saw a combined 89 percent increase in student body diversity. Ninety-three and 91 percent of dental and medical schools, respectively, use holistic review in their admissions processes, more than the other types of health professions schools surveyed.

Further, while increasing diversity, schools did not sacrifice academic quality. Thirty-eight percent of the schools in the report saw an increase in the average GPA of their incoming class and 52 percent saw no change. A combined 96 percent reported that graduation rates at their schools remained unchanged or had increased.

Summer Program Helps Fill the Pipeline

Encouraging underrepresented students to apply to dental or medical school has its own challenges. But Valachovic credits the Summer Medical and Dental Education Program (SMDEP) for serving as a pipeline. “The SMDEP is a very robust program, and the numbers are phenomenal,” he says.

Freshmen or sophomore undergraduate students interested in dental or medical school spend six weeks taking courses aimed at developing their study and science skills. Valachovic says the rate of acceptance to dental school for SMDEP participants is 66 percent, twice the rate for all other dental school applicants. Furthermore, 100 percent of accepted SMDEP applicants matriculate.

More health professions schools are moving toward holistic review and IPE as effective ways to create a culturally competent healthcare workforce by allowing more students who have overcome significant barriers to matriculate. When they become physicians and dentists, these students are more sensitive to the needs of their patients, especially low-income and minority patients, with whom they may share similar experiences.

Visit MedEdPortal.org for resources on developing interprofessional education skills.

Rebecca Prinster is a senior staff writer for INSIGHT Into Diversity.
The relative lack of minorities in the dental profession never deterred Devin Stewart, who is African American, from pursuing his dream of becoming a dentist.

As early as high school, Stewart sought advice from dentists in his community and shadowed them during summer breaks. “I discovered that people with beautiful teeth and smiles seemed to fascinate me,” he says. “I want to create the same experience I received as a child while visiting the dentist and make a difference in someone’s oral health — and life as a whole.”

This year, the senior biology major at Jackson State University was accepted by the University of Mississippi Medical Center’s (UMMC) School of Dentistry. He credits the Student National Dental Association (SNDA) — particularly its dental school preparation program, Impressions — with preparing him for the dental admission test and the UMMC admissions interview, as well as familiarizing him with the everyday work of a dentist.
“I found the hands-on activities to be very beneficial,” he says, “because it allows pre-dental students the chance to get a feel for what dentistry will be like once they enter into the profession.”

SNDA was formed in 1972 as an auxiliary of the National Dental Association — the professional association of minority dentists — to promote diversity in dental school enrollment and support improvements in dental care in disadvantaged communities.

SNDA launched the Impressions program in 1999 with the goal of reaching out directly to minority undergraduates to help them become stronger dental school candidates. During the 2014-2015 school year, 30 to 40 SNDA chapters — of the approximately 50 active chapters at dental schools nationwide — will host one-day Impressions events for more than 1,000 dental-school hopefuls, says SNDA President Christopher Cathey, a third-year dental student at UMMC.

“[The program is] simply a concerted effort to make strides in eliminating healthcare disparities in dentistry nationwide by providing an avenue for underrepresented minorities to have the same resources as an applicant who isn’t underrepresented or who has adequate resources to get into dental school,” Cathey says.

Students in the Impressions dental program at the University of Mississippi Medical Center’s School of Dentistry (photo courtesy of the University of Mississippi Medical Center School of Dentistry)

Dr. Wilhelmina F. O’Reilly, assistant dean for student affairs at UMMC’s School of Dentistry, says the school has participated in Impressions annually since 2006. A typical Impressions event agenda includes writing workshops, mock interviews, presentations by dental school admissions and financial aid officials, and panel discussions featuring current dental students and residents. The national organization assists local chapters with organizing the events and defraying costs.

True to its name, the program also gives undergrads the opportunity to take dental impressions on volunteer patients. For many participants, this is their first real-life experience performing a dental procedure.

Although Impressions is designed primarily for minority students, it has begun to attract non-minority students as well, Cathey says. And while no nationwide statistics are available, he estimates that 85 to 90 percent of participants in UMMC School of Dentistry’s program are from underrepresented minorities.

In addition to critical hands-on experience, the program offers undergraduate students the opportunity to network with school administrators and current dental students — a part of the experience Stewart found invaluable.

“One of the most important pieces of advice the admissions committee gave me was making sure I apply early,” Stewart says. “They informed me that they would be accepting numerous applications for the upcoming school year, and it was in my best interest to get into the first batch.”

Dental students in the program advised Stewart on the best ways to prepare for the dental admission test, including helpful books and software. “They also gave me helpful interview tips, including the types of questions to expect, and most importantly, making sure I practice for the interview,” he says.

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Students perform oral exams in the University of Florida College of Dentistry’s Impressions program (photo courtesy of the University of Florida College of Dentistry)

In 2002, the Institute of Medicine warned that minorities often receive unequal treatment in the U.S. healthcare system. Among other factors, “healthcare providers’ biases, prejudices, and uncertainty when treating minorities can contribute to healthcare disparities,” the report observed, even though “prejudice is not always recognized or deliberate.”

The Institute recommended that, among other measures, more individuals of color be recruited into medical professions. However, it stopped short of outlining specific ways of achieving that goal.

According to a study by the University of Colorado, in 2012, only 5 percent of U.S. dental school graduates were African American and 7 percent...
were Hispanic or Latino, indicating a need to recruit more students from these underrepresented minorities.

Based on more recent numbers, it appears that programs like Impressions may be having a positive effect. Since 2012, underrepresented minority students (including those identifying as more than one race or ethnicity) have comprised, on average, more than one-third of all students at the University of Florida College of Dentistry. That trend is likely to continue. The fall 2015 entering class, while not yet finalized, is currently made up of 42 percent minority students. This number includes Asian, black or African American, and Hispanic or Latino students, as well as students of multiple races.

Teresa A. Dolan, who was dean of the University of Florida College of Dentistry for 10 years and supported the Impressions program, says she believes the educational environment is richer and conversations deeper when the opinions and views of individuals from diverse backgrounds are included and respected.

“As the first college graduate and dentist in my extended family, I can understand why some students might feel that a career in dentistry or any of the health professions might be unattainable, or at least a little mysterious in terms of what it takes to successfully navigate the educational system to become a dentist,” Dolan says. “So the program helps demystify dental school and the dental application process.”

At the SNDA, plans are under way to provide scholarships to students who participate in the Impressions program, opening the door for more minorities and disadvantaged students to enter the profession. Cathey also hopes to one day see a national version of Impressions that would provide students exposure to dental schools across the country.

“I would like to implement a high school component,” he says. “I think it is very important to spark the interest of dentistry as soon as we can, before students begin college. This program can be a great tool in helping to recruit students at the high school level.”

Like other students who will take another step toward pursuing their dreams this fall, Stewart is eager to begin his training at UMMC’s School of Dentistry in August. And he has advice for others who share his passion. “Although minorities are underrepresented in the field of dentistry, that should not stop you from pursuing it,” he says. “If anything, you should be encouraged to pursue it even more. That way, you can one day give back to underserved, minority communities and improve their oral healthcare.”

Michael Rene Zuzel is a contributing writer for INSIGHT Into Diversity.

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Responsibilities: Teach required and elective undergraduate courses, including but not limited to: Business Computing, an introductory IT course emphasizing basic computer concepts and software fluency; Advanced Business Modeling, an elective quantitative problem-solving course emphasizing advanced Microsoft Excel fluency; Fundamentals of Database Management, an elective focusing on relational database design and implementation, and Visual Basic for Applications: End-User Programming, an advance elective demonstrating the application of VBA in a business context.

Additional Requirements: Candidates should be comfortable delivering course material in both lab and lecture settings. Candidates should be fluent in all of the Microsoft Office 2013 Productivity Suite. It is expected that you will be able to develop and revise original course material. A knowledge of relational database management systems and SQL is required. Preferred candidates will have knowledge of and experience programming using VBA and a familiarity with hospitality information systems.

In addition to teaching, faculty members are expected to engage in curriculum- and course-development activities with IT/IS colleagues, as well as service to the school in the form of faculty committees, area tasks, and other projects as required. You will be expected to pursue professional development opportunities, including developing a sound understanding of the hospitality industry and the IT/IS challenges that hospitality professionals face. The School of Hotel Administration supports such activities with an individual professional-development fund. Faculty will engage in the advising and mentoring of students.

Excellent teaching support is provided, including administrative assistance, office space, computers, and other resources. Faculty have access to state-of-the-art teaching technology.

Rank and Salary: The lecturer position is a three-year, renewable appointment beginning in the Fall of 2015. Rank and salary will be determined based upon academic achievement and experience. Appointments are nine-month terms with attractive fringe benefits.

Institution: The School of Hotel Administration, one of seven undergraduate colleges at Cornell University, has approximately 800 undergraduates and 120 graduate students. Founded in 1922, the School is the oldest hospitality management program in the world, with a resident faculty of 65 and over 8,000 alumni worldwide. Important resources to faculty include extraordinary access to industry leaders, the Center for Hospitality Research (CHR), the Center for Real Estate and Finance (CREF), and the cultural and intellectual resources of the Cornell University community.

Major Qualifications: Master’s degree with Professional Certification or Ph.D. Demonstrated teaching ability within an institution of higher education and a service-oriented environment where student-faculty relations are highly valued. A minimum of 5 years experience and skill in the area of information technology and information systems, and willingness to teach both. Hospitality industry knowledge and experience is a major advantage.

Application: Consideration of candidates will begin immediately and continue until the position is filled. Please send letter of application and current CV to:

Steven A. Carvell, Ph.D.
Associate Dean for Academic Affairs
IT/IS Lecturer Search
Cornell University
146 Statler Hall
Ithaca, NY 14853
Sac20@cornell.edu

Cornell University is an innovative Ivy League university and a great place to work. Our inclusive community of scholars, students and staff impart an uncommon sense of larger purpose and contribute creative ideas to further the university’s mission of teaching, discovery and engagement. Located in Ithaca, NY, Cornell’s far-flung global presence includes the medical college’s campuses on the Upper East Side of Manhattan and in Doha, Qatar, as well as the new CornellNYC Tech campus to be built on Roosevelt Island in the heart of New York City.

Diversity and Inclusion are a part of Cornell University’s heritage. We’re an employer and educator recognized for valuing AA/EEO, Protected Veterans, and Individuals with Disabilities.

UCLA DIRECTOR OF CHORAL STUDIES

The UCLA School of the Arts and Architecture and the UCLA Herb Alpert School of Music are pleased to invite applications for a tenure or tenure track professorial position as Director of Choral Studies in the Department of Music. Further information and an online application may be found at:

https://recruit.apo.ucla.edu/apply/JPF00849

UCLA School of the Arts and Architecture

UCLA PROFESSOR OF PERFORMANCE PRACTICE

The UCLA School of the Arts and Architecture and the UCLA Herb Alpert School of Music are pleased to invite applications for a tenure or tenure track professorial position as Professor of Performance Practice in the Department of Music. Further information and an online application may be found at:

https://recruit.apo.ucla.edu/apply/JPF00848

UCLA School of the Arts and Architecture

Access hundreds of additional career opportunities in our online Career Center at https://recruit.apo.ucla.edu/apply/JPF00848
Westchester Community College is committed to hiring innovative administrators, faculty members, and staff. Women, minorities and those dedicated to diversity and multiculturalism are strongly encouraged to apply.

Administrators and Staff
- Assistant Dean of Student Affairs (Educational Opportunity Center, Yonkers)
- Assistant to the President
- Biology and Health Lab Technician/St. Technical Assistant (Ossining)
- Director of Leadership Giving and Development
- Extension Center Director (Mount Vernon)
- Program Specialist (Online Education, part-time position)
- Scholarship Administrator
- Software Engineer II
- VP and Dean, Student Affairs

Full-time faculty positions. Electrical Technology, Nursing. Instructor level positions start in the Fall 2015. Requires Masters plus one-year related experience, unless otherwise indicated on website.

Adjunct Faculty. Summer and Fall 2015 openings. Specify day/evening/weekend availability.

Credit adjuncts (Masters and one-year related experience required unless otherwise indicated on website): Accounting (day only), Adjunct Academic Support Center Coordinator (science/math), Anthropology, Biology, Ceramics, Chemistry, Communications, Computer Networking (Cisco certified), Computer Science, Journalism and Media Production, Criminal Justice, Culinary Arts and Management, Dance (Broadway Jazz or Hip-Hop), Dietetic Technician/ Foods and Nutrition, Digital Illustration, Digital Imaging, Economics, English, Fashion (Fashion Design, Sewing), Geoscience, History (African-American, American, Caribbean), Human Services (Social Work), Librarian, Mathematics (including College Algebra with Trigonometry, Statistics, Geometry, Precalculus), Medical Billing and Coding, Nursing (seeking adjuncts with medical surgery specialization), Philosophy, Physics, Political Science, Psychology, Sociology, Veterinary Technology.

Non-Credit adjuncts (Bachelors required): Classes for lifelong learners may include children, adults, and seniors in various locations with day, evening, and weekend options. Also interested in candidates with ESL teaching experience (MA or certificate in TESOL preferred) or with corporate training background, and ideas for new classes. Visit website for information. Submit proposals for new classes at www.sunywcc.edu/CE; do not submit a resume without a class proposal. For ESL only, submit resume to humanresources@sunywcc.edu. For details, visit www.sunywcc.edu/jobs. Applications accepted until positions are filled. Resume to Human Resources, Westchester Community College, 75 Grasslands Road, Valhalla, NY 10595; fax 914-606-7838; email Word documents to humanresources@sunywcc.edu. Please indicate position of interest on envelope or in email “subject” field.

Canon-Clary College of Education at Harding University is seeking a full-time faculty in the area of counselor education both clinical and school. The successful candidate will have a doctorate from a CACREP-accredited program, experience teaching in higher education, licensed as a counselor, experience and/or knowledge with distance education.

Responsibilities include teaching courses on campus and online; advising and supervising students; developing distance courses; and doing limited research and publishing. This is a nine-month contract position located on the main campus in Searcy, Arkansas. Summer hours will also be required under a separate arrangement. Applicants adding to the diversity of the faculty are encouraged, including underrepresented populations and those with disabilities. Submit introductory letter, curriculum vita and contact information to Dr. Jerene Alexander, Director of Professional Counseling at jalexander@harding.edu or by mail at Harding University Professional Counseling, Box 12254, Searcy, AR 72149. Inquiries may be directed to Dr. Alexander at jalexander@harding.edu or 501-279-4150. All candidates must be members of the church of Christ and committed to Christian education.

The University of Utah, Department of Pathology is seeking a Clinical Cytogeneticist at ARUP Laboratories, an enterprise of the University of Utah. The successful candidate will have a faculty appointment in the Department of Pathology with rank based on academic experience.

ARUP is a full service reference laboratory with clients from more than half of the nation’s university teaching and children’s hospitals, major commercial laboratories, military and government facilities, and many community hospitals. As such, the laboratory sees a broad range of specimen types and indications and offers a range of testing options from traditional cytogenetic techniques to FISH and microarray in the constitutional and cancer setting.

Responsibilities include 70-80% time spent on clinical duties including interpretation of laboratory results, consultation with physicians, resident and fellow education, and quality control and quality assurance, with the remainder of time supporting the academic and test development projects with the laboratory and Department of Pathology.

The applicant should hold an M.D. and/or Ph.D. degree, and be board certified/eligible in Cytogenetics by the American Board of Medical Genetics.

Applicants should submit electronically to http://uofu.peopleadmin.com/postings/39758 a curriculum vitae, a brief cover letter and the names and addresses of three references.

For more information please contact Allison Boyer, allison.boyer@path.utah.edu

The University of Utah Health Sciences Center is a patient focused center distinguished by collaboration, excellence, leadership, and Respect. The University of Utah HSC values candidates who are committed to fostering an environment of compassion, collaboration, innovation, accountability, diversity, integrity, quality, and trust that is integral to the mission of the University of Utah Health Sciences Center.

The University of Utah is an Affirmative Action/Equal Opportunity employer and does not discriminate based on race, national origin, color, religion, sex, age, sexual orientation, gender identity/expression, status as a person with a disability, genetic information, or Protected Veteran status. Individuals from historically underrepresented groups, such as minorities, women, qualified persons with disabilities and protected veterans are encouraged to apply. Veterans’ preference is extended to qualified applicants, upon request and consistent with Utah law and state policy.

Applications accepted until positions are filled. Upon request, reasonable accommodations in the application process will be provided to individuals with disabilities. To inquire about the University’s nondiscrimination or affirmative action policies or to request disability accommodation, please contact: Director, Office of Equal Opportunity and Affirmative Action, 201 S. Presidents Circle, Rm 135, (801) 581-8685.

The University of Utah values candidates who have experience working in settings with students from diverse backgrounds, and possess a strong commitment to improving access to higher education for historically underrepresented students.

For more information on the university and ARUP Laboratories, see www.utah.edu, www.aruplab.com, or www.aruplab.com/genetics

Clinical Cytogeneticist - ARUP Laboratories, University of Utah, Salt Lake City

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For more information on the university and ARUP Laboratories, see www.utah.edu, www.aruplab.com, or www.aruplab.com/genetics

Vice President for Enrollment Management

Woodbury University invites applications and nominations for the position of Vice President for Enrollment Management. Reporting to the President of the University, the Vice President for Enrollment Management will serve as a member of the president’s cabinet. The Vice President will be responsible for developing, proposing, and maintaining the institution’s enrollment management.

Woodbury University is a leading institution offering graduate and undergraduate programs through a variety of delivery methods. Programs include the College of Architecture and Planning (two locations—Burbank & San Diego), interior architecture, real estate development (San Diego), accounting, management, marketing, fashion marketing, animation, communication, fashion design, filmmaking, game art & design, graphic design, media technology, multimedia, psychology, politics & history, leadership and interdisciplinary studies.

The Vice President for Enrollment Management will provide leadership, direction, and implementation of a comprehensive and innovative enrollment management strategy that (a) is continuously assessed and refined and (b) is consistent with the goals, mission, and resources of the university. The selected candidate will provide executive oversight of all enrollment management activities including undergraduate admissions, graduate admissions, and financial aid at both locations.

The Vice President will work collaboratively with the Chief Marketing Officer, other Vice Presidents, Deans, and other members of the university’s leadership team and staff in advancing the university’s academic quality of students. In addition, he/she will participate in enhancing marketing and communications messages and outreach; identifying emerging markets; supporting student development efforts; projecting short and long-term enrollment and net tuition revenue; and structuring, planning, and managing financial aid expenditures.

The successful candidate should have at least five years of experience in higher education; a Master’s degree; and senior-level experience in undergraduate and graduate enrollment operations. Demonstrated experience recruiting, developing, and managing enrollment management staff; strong understanding of marketing and financial aid leveraging. A strategic thinker to develop and implement creative communications goals and priorities.

Applications and Nominations are accepted immediately and until the position is filled. Applications submitted by April 17, 2015 will be given a priority consideration. Please submit a letter of interest addressing qualifications; resume; salary history; and names, addresses, and telephone numbers of three professional references to:

Human Resources Office
Woodbury University
7500 N. Glendale Boulevard
Burbank, CA  91504-1052
Fax – 818-787-7607
E-Mail: HR@woodbury.edu

Woodbury University is an EO/A Institution committed to multicultural diversity in its peoples and programs.
Gallaudet University is the world leader in liberal education and career development for deaf and hard of hearing students. The University enjoys an international reputation for its outstanding academic programs and for the ground breaking research it conducts.

Gallaudet University seeks progressive and dynamic leaders to fill the positions of Dean of the Graduate School and Continuing Studies, and Dean of the School of Education, Business, and Human Services (SEBHS).

Dean of the Graduate School and Continuing Studies

The Dean of the Graduate School and Continuing Studies provides academic leadership for graduate education, continuing studies and distance education at the University in collaboration with the deans of the College of Arts and Sciences (CAS) and the School of Education and Human Services (SEBHS). The Graduate School draws on Gallaudet’s rich heritage, distinguished faculty and staff, and ASL-English bilingual environment to prepare deaf, hard of hearing and hearing scholars, leaders and practitioners from diverse backgrounds to excel in their professions and disciplines and to generate knowledge through research and scholarship to inform theory and practice in the disciplines and professions represented by graduate programs. The ideal candidate for this position, in addition to ensuring the continuing high quality of existing programs, will inspire and support innovation, collaborating with the school deans and department chairs to develop new 21st century online and hybrid graduate and continuing studies offerings, including new interdisciplinary programs and research. In addition to overseeing the daily administration of offices related to graduate education, continuing studies and distance education, the dean works in collaboration with the Council on Graduate Education (CGE) to review and approve curriculum actions and to develop and ensure compliance with graduate school, continuing studies, and distance education policies and procedures. The dean administers graduate tuition scholarships and assistantships, and, in collaboration with the deans of CAS and SEBHS, promotes and supports the recruitment, mentoring, and retention of exemplary faculty, staff, and students from diverse cultural and linguistic backgrounds.

Candidates should possess an earned doctorate and evidence of increasingly responsible leadership and supervisory experience in higher education; a record of commitment to multicultural organizational development and efforts that have maximized the effective education of deaf and hard of hearing students from diverse backgrounds and cultures; a record of successful teaching at the undergraduate and graduate levels and consistent engagement in research activities with an extensive history of scholarly publications in peer-reviewed journals; excellent organizational, interpersonal, communication, writing and advocacy skills. Fluency in American Sign Language required at the time of application.

Review of applications begins on March 16, 2015 and continues until the position is filled.

To Apply: Please submit a letter of interest, curriculum vitae, and a completed job application to personnel.office@gallaudet.edu.

View this position opening at: http://jobs.gallaudet.edu/?select=Administrators#15001

Dean of the School of Education, Business, and Human Services (SEBHS)

Gallaudet University seeks a dynamic and innovative leader to serve as dean of the School of Education, Business and Human Services (SEBHS). The school houses eight academic departments that collectively enroll approximately 600 diverse deaf, hard of hearing and hearing students in undergraduate majors/minors and masters and doctoral degree programs. These departments, with approximately 75 faculty, are Business, Counseling, Education, Government and Public Affairs, Hearing, Speech, and Language Sciences, Interpretation, Physical Education and Recreation, and Social Work. The dean serves as chief administrator, spokesperson, and advocate for SEBHS. The ideal candidate for this position, in addition to ensuring the continuing high quality of existing programs, will inspire and support innovation, collaborating with the dean of the College of Arts and Sciences and the dean of the Graduate School and Continuing Studies to develop new 21st century online and hybrid undergraduate and graduate offerings, including new interdisciplinary programs and programs of research.

Candidates should possess an earned doctorate and evidence of increasingly responsible leadership and supervisory experience in higher education; a record of commitment to multicultural organizational development and efforts that have maximized the effective education of deaf and hard of hearing students from diverse backgrounds and cultures; a record of successful teaching at the undergraduate and graduate levels and an established record of research and publication; excellent organizational, interpersonal, communication, writing and advocacy skills; demonstrated expertise in budgeting and resource allocation to achieve strategic objectives. Fluency in American Sign Language required at the time of application.

Review of applications begins on March 16, 2015 and continues until the position is filled.

To Apply: Please submit a letter of interest, curriculum vitae, and a completed job application to personnel.office@gallaudet.edu.

View this position opening at: http://jobs.gallaudet.edu/?select=Administrators#14142

Gallaudet University is an equal opportunity employer/educational institution and does not discriminate on the basis of race, sex, national origin, religion, age, hearing status, disability, covered veteran status, marital status, personal appearance, sexual orientation, family responsibilities, matriculation, political affiliation, source of income, place of business or residence, pregnancy, childbirth, or any other unlawful basis. Employees and recruiting sources are encouraged to refer qualified individuals from protected classes for available positions. Individuals who may have inquiries regarding the University’s policy and procedures or who may wish to file a complaint should contact the University’s EEO Office, Gallaudet University, 800 Florida Avenue, N.E., Washington, DC 20002-3695, 202-651-5462.
West Virginia University, Charleston Division is seeking two Pulmonary/Critical Care physicians. The successful candidates must have an M.D or equivalent. BC/BE in Pulmonary/Critical Care Medicine and the ability to obtain an unrestricted West Virginia medical license. In addition, candidates must have an interest in active teaching of medical students and residents. Research and other scholarly activities are encouraged and supported.

Candidates will work in a teaching hospital environment that provides training to 175 interns, residents and fellows. The successful candidate is expected to be involved as teaching faculty and to participate in clinical research. Preference will be given to candidates with specialty and educational abilities in an ACGME accredited GME program and/or an active involvement in research and scholarly activity with documented publication/presentation.

This dynamic position commands a competitive salary enhanced by an attractive benefits package and a collegial work environment within an established, democratic group. The search will remain open until a suitable candidate is identified. This position is not qualified for J-1 Visa Waiver.

If you are looking for a vibrant and versatile urban city that is affordable and tranquil, then Charleston, West Virginia is the ideal location to work and raise your family.

To apply, please send your CV and cover letter to Carol Wamsley via e-mail: carol.wamsley@camc.org

West Virginia University

ROBERT C. BYRD HEALTH SCIENCES CENTER
CHARLESTON DIVISION

WVU is an EEO/Affirmative Action Employer – Minority/Female/Disability/Veteran
They volunteer to tutor and mentor local grade-school students. In the same neighborhoods, they also help build community by providing seasonal fresh fruits and vegetables. This year, they celebrate the 25th anniversary of the clinic for the homeless and uninsured, which they founded. They celebrate as well, the first anniversary of their Equality Clinic. For nearly a half century now, they have spent a portion of their summers with high school and college students from underrepresented-in-medicine populations across our vast state, sharing what it really takes to be a doctor and serving as inspirational examples. They’ve even been known to sing a song and dance a step to raise support for children with cancer and their families.

Come change the world with them.

The Medical College of Georgia at Georgia Regents University

For more information about the Medical College of Georgia at Georgia Regents University, please visit, gru.edu/mcg or gru.edu/mcg/admissions or call the Office of Admissions at 706-721-3186.
At UVA, we recognize that our greatest asset is our people—our faculty, staff and students. We strive to empower them to do great work and to create an atmosphere of inclusion, collaboration, innovation and lifelong learning. The result is a place where a great idea is only a starting point.

We invite you to learn more about this tremendously exciting environment.

- UVA School of Medicine: medicine.virginia.edu
- Staff and faculty openings: jobs.virginia.edu

The University of Virginia is an equal opportunity and affirmative action employer. Women, minorities, veterans, and persons with disabilities are encouraged to apply.