



Clinical Research United





Diversity in Recruitment: Including Underrepresented Groups in Research

DATE: JANUARY 22, 2020





Agenda

1. Introduction of Speakers
2. Internal Focus: Study team diversity
3. External Focus: Rural populations
4. Diversity and Inclusion in Recruitment
5. Q&A
6. Wrap-up and Announcements

Speakers

- Jacob Lindsley
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- LeAnn Michaels
Director of Clinical Trials
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- Jenny Lee Berry
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Study Team Diversity

Jacob Lindsley

Layton Aging & Alzheimer's Disease Center



I-CONECT Research Study

- Does decreasing social isolation help keep cognition healthier, longer in older adults?
- Is video chat an effective medium for social interaction?
- 5 year long NIA study at the Layton Aging and Alzheimer's Disease Center.

www.i-conect.org



Our Team

- 30 Research Staff (Associate, Senior, RA2, RA1)
- 12 In-Office
- 18 Remote Staff

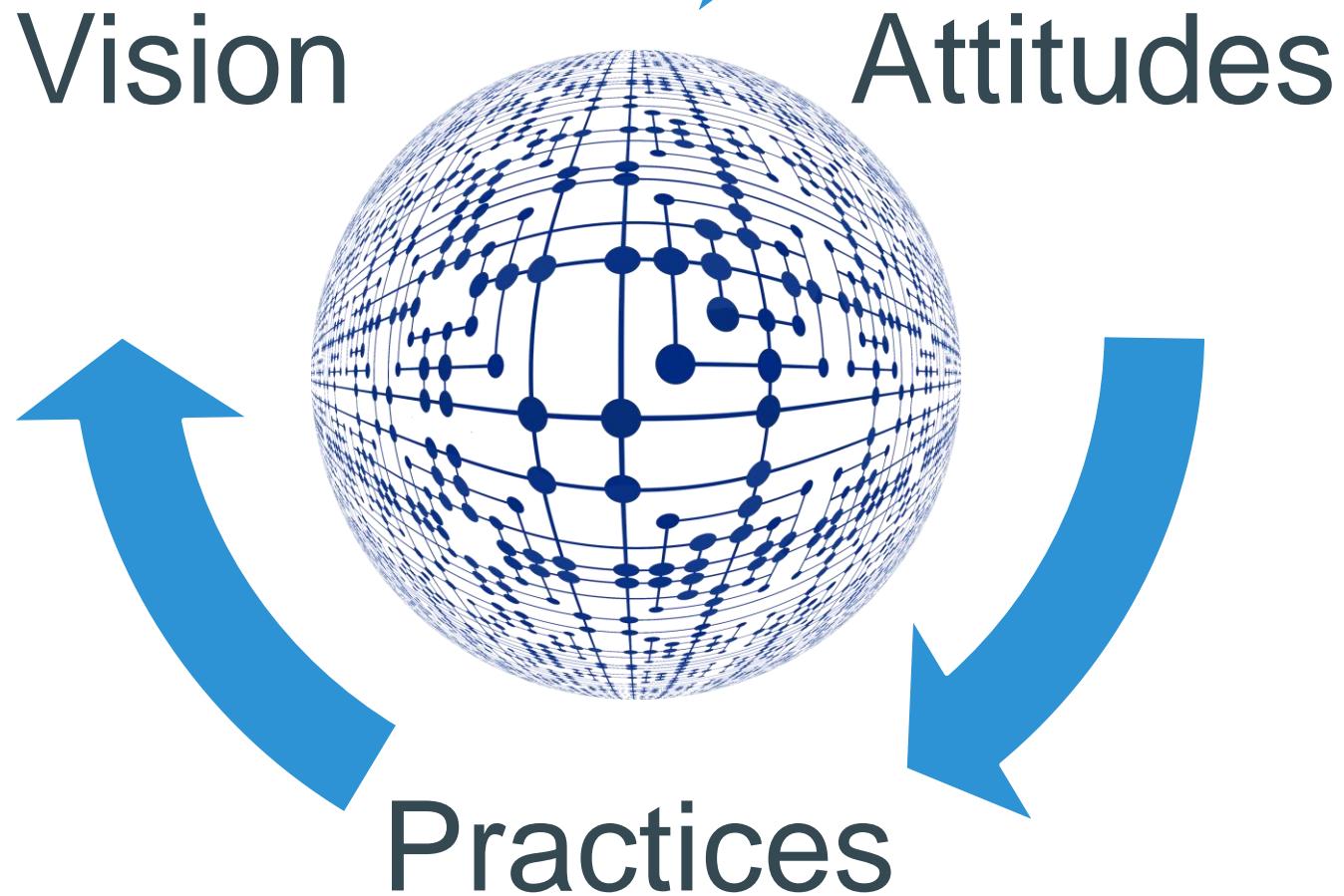
- Diverse in age, gender, ethnicity, culture, and education, etc.

Disclaimer: Discomfort and Uncertainty

- There isn't a clear definition, set of rules, or easy formula for creating successful diverse teams.
- You will need to build an environment where bias, equity, and diversity can be discussed openly by leadership.
- A willingness to listen, ask for help, admit mistakes, and revise your approach is essential.

Hiring Diverse Teams

- Interview Attitudes
- Bias-Resistant Practices
- Vision of Diversity



Interview Attitudes

- Background:
 - Multi-cultural education
 - Display rules, “respect”, authenticity.
 - Proactive reflection
 - What are biases?
 - What are my biases?



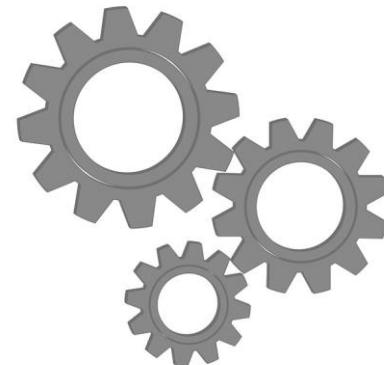
Interview Attitudes

- Practice:
 - Self-Awareness of Biases
 - Why did I react that way?
 - Positive relationship to difference
 - Diversity as a bonus!
 - Curiosity about unusual behavior
 - What could it mean?



Bias-Resistant Practices

- Adequate Time
 - Reflection & deliberation takes space
- Hiring Committee Model
 - Shared decision and discussion



Bias-Resistant Practices

- Standardized Skill-based Evaluation Methods
 - Rubrics, broad-skill assessments, rating systems.
- “Getting to know” a candidate
 - Break the formality at least once.



Vision of Diversity



- Defining “diversity” is precarious, but it resists the stagnation of the status quo.
- Be wary of “tokenism” and “cultural fit”.
- Make your vision open ended, active, and iterative.

- Questions you might ponder:
 - What communities might our team serve, and who might help us respond most authentically?
 - How can we balance existing team traits? Is my unit's culture dominated in any particular way?
 - Is perspective ever more important than skill?

Research with Rural Populations

An introduction to practice-based research and
the Oregon Rural Practice-based research network

LeAnn Michaels

Oregon Rural Practice-based Research Network



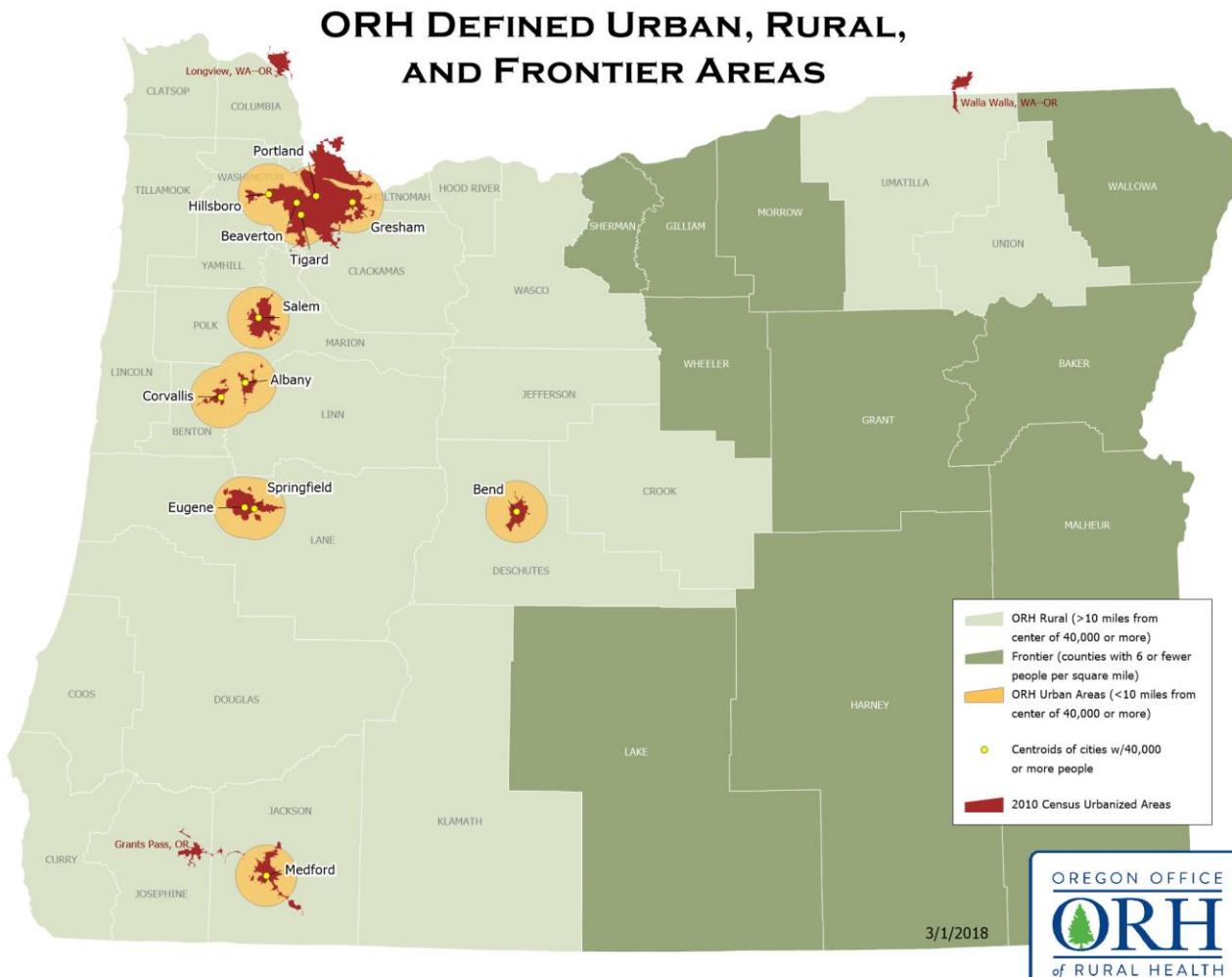
First, Some Questions for you

- How many of you have lived in a “rural” area?
- How many of you have lived in a “frontier” area?
- How many of you have visited a rural or frontier area (driving though on your way to somewhere else doesn’t count)?
- How many of you don’t know what a rural or frontier area is?

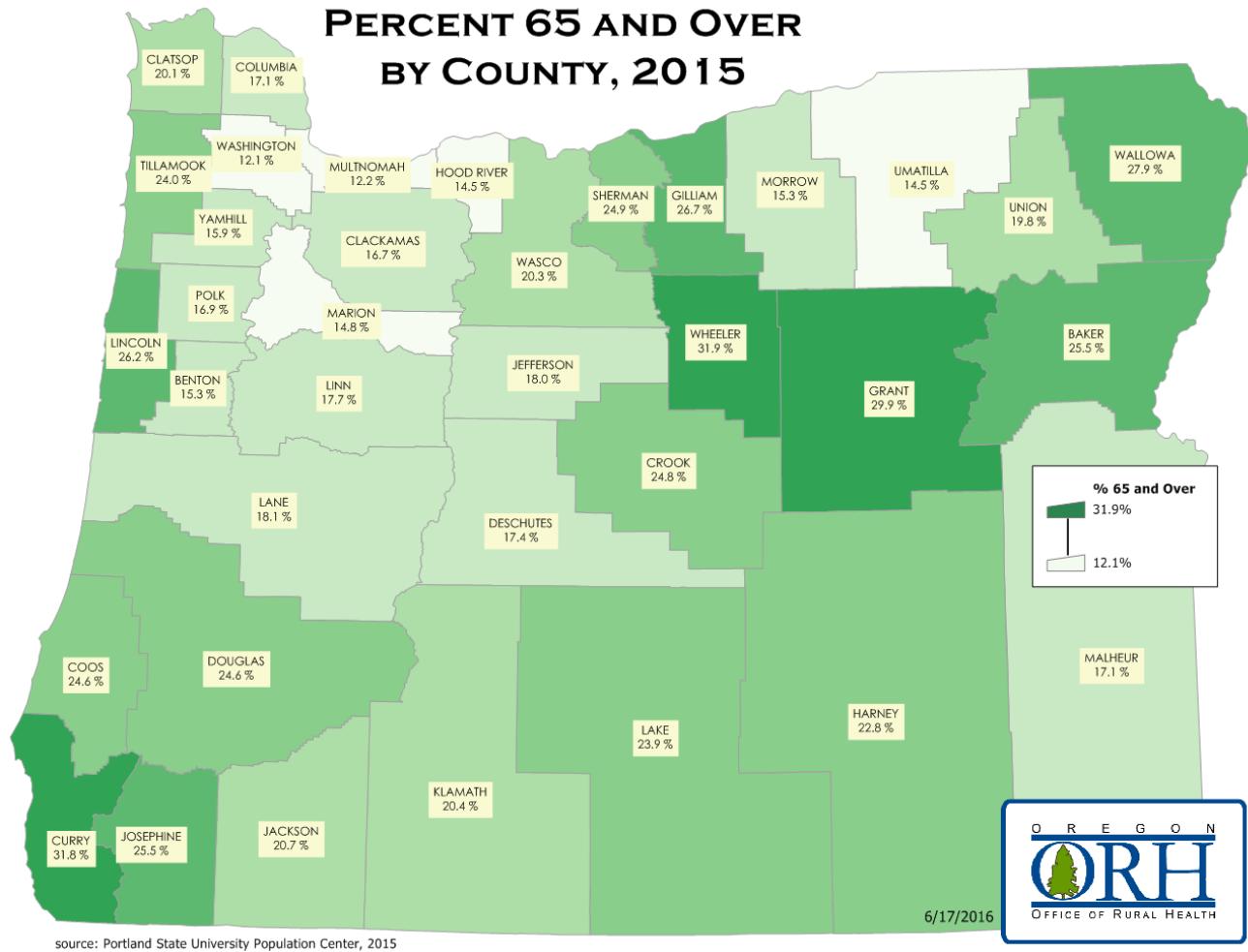


“Daddy works in a magical, faraway land called Academia.”

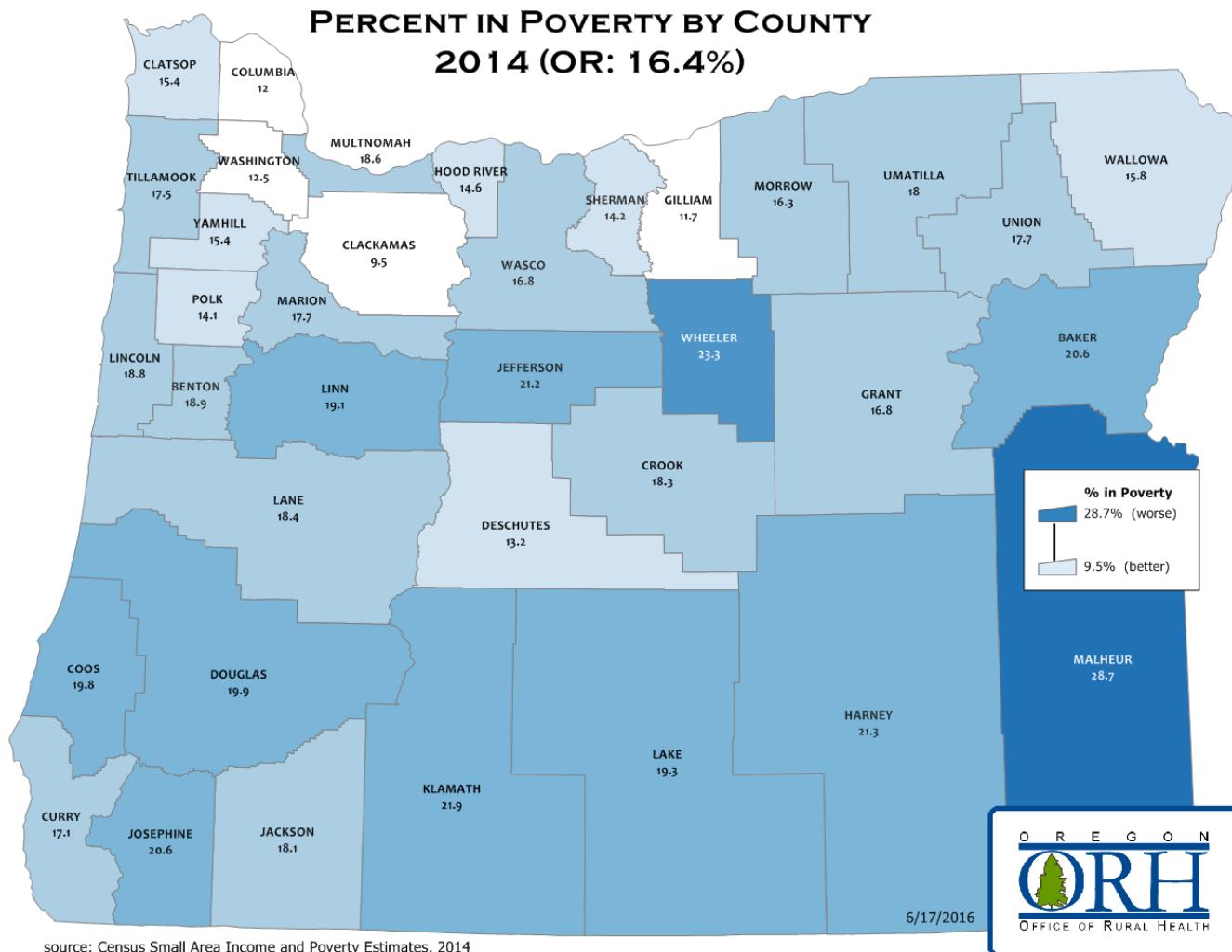
Rural and Frontier in Oregon



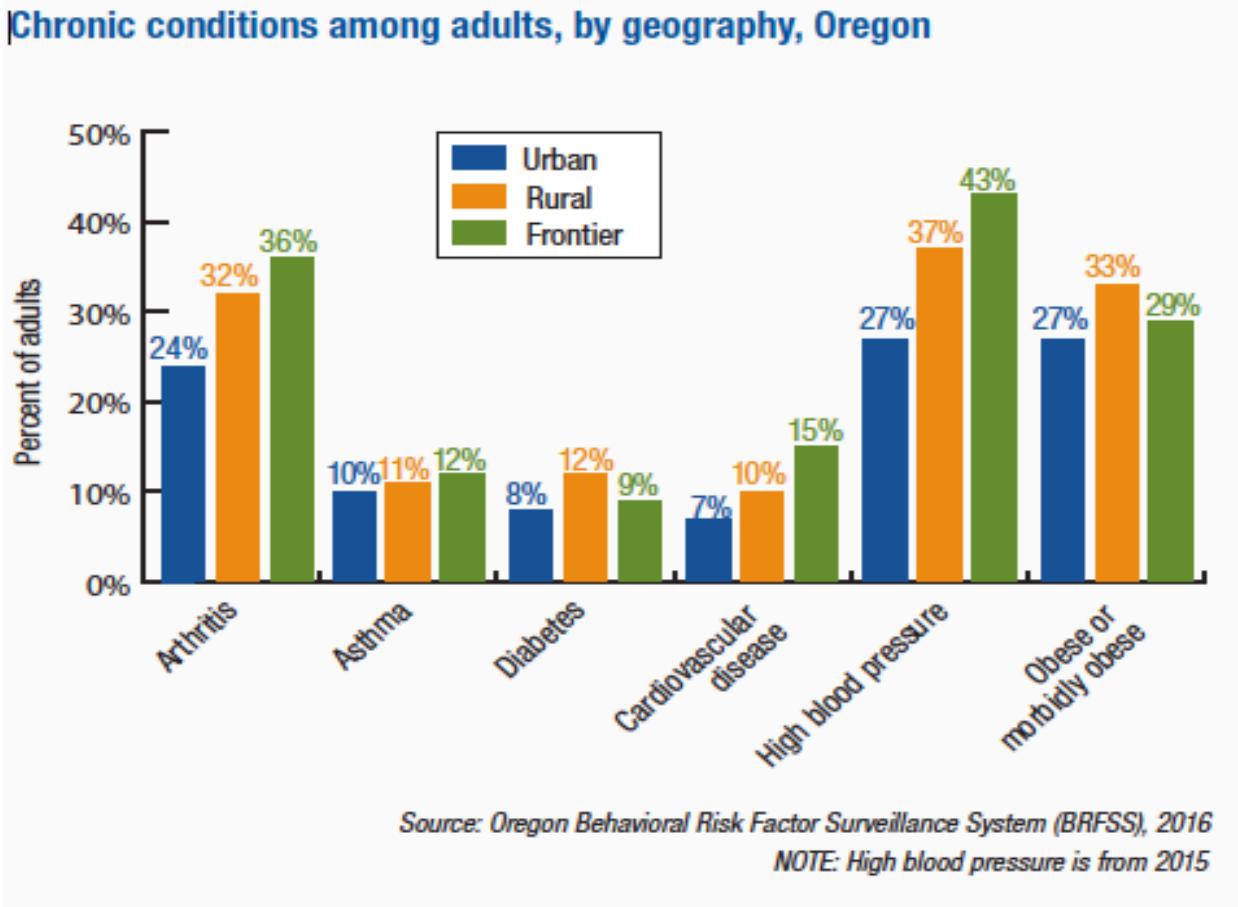
Rural Oregon is older...



Rural Oregon is poorer...



Rural Oregon has poorer health

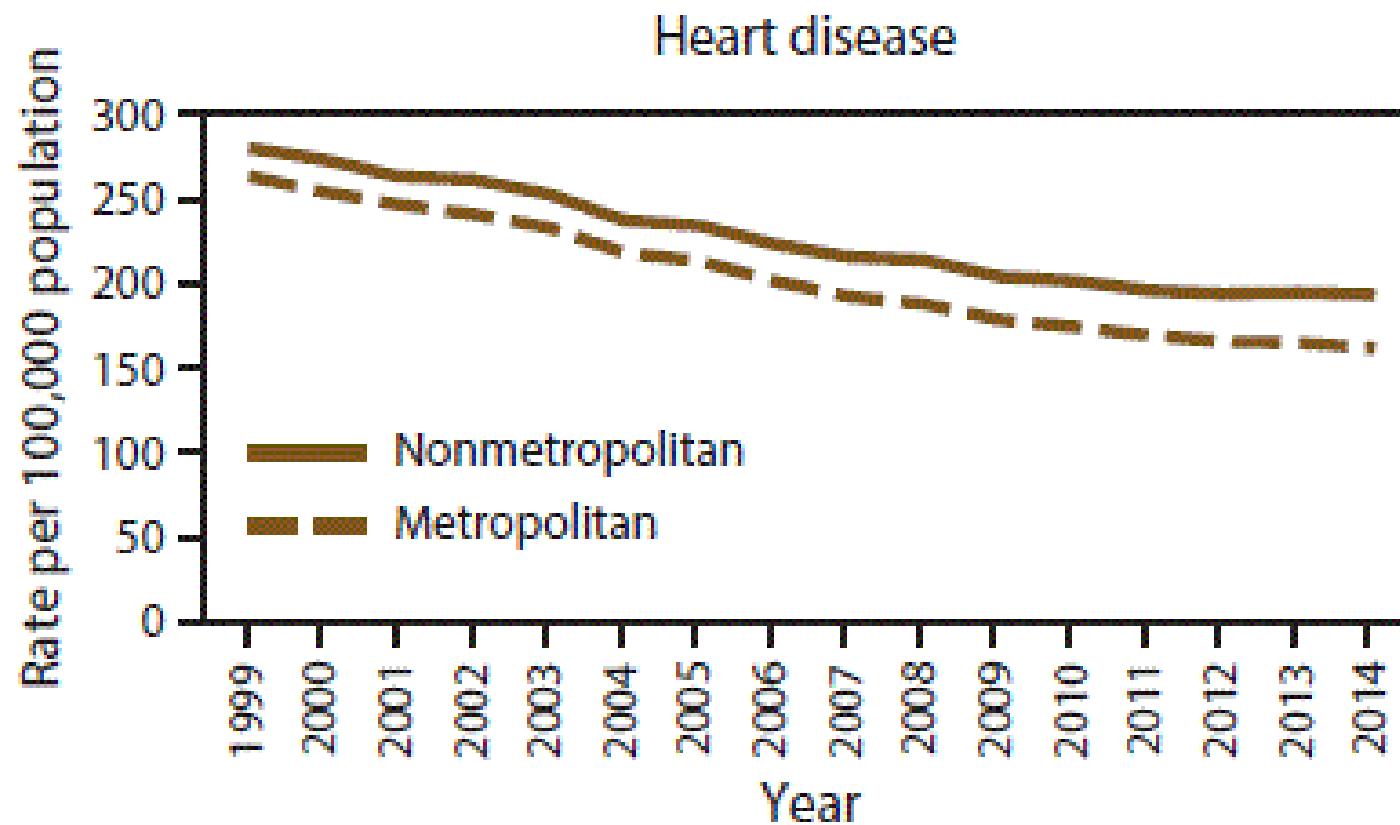


Why include rural populations in research?

- Increasing rural-urban disparities in life expectancy and mortality have emerged in the past few years
- Americans living in rural areas are more likely to die from five leading causes than their urban counterparts. In 2014, many deaths among rural Americans were potentially preventable:
 - 25,000 from heart disease
 - 19,000 from cancer
 - 12,000 from unintentional injuries
 - 11,000 from chronic lower respiratory disease
 - 4,000 from stroke

<https://www.cdc.gov/media/releases/2017/p0112-rural-death-risk.html>

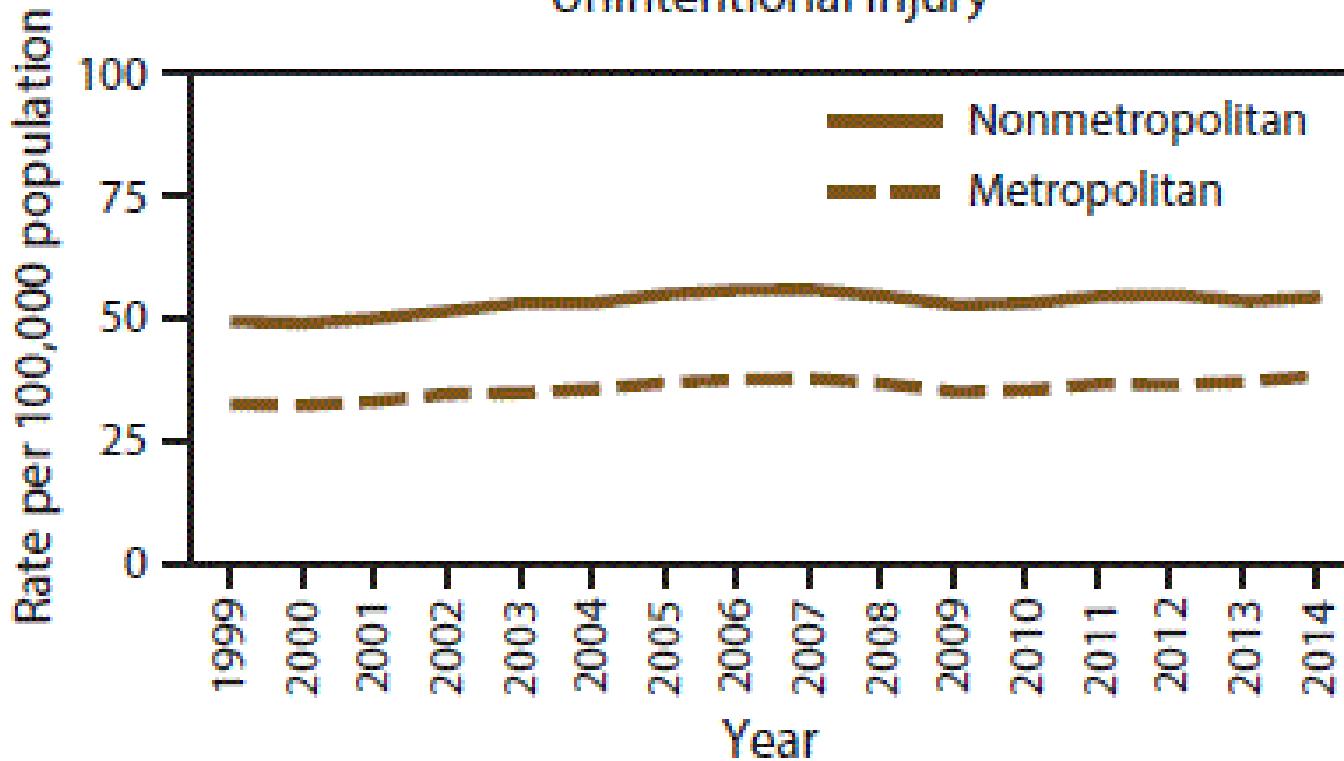




MMWR / January 13, 2017 / Vol. 66 / No. 1

US Department of Health and Human Services/Centers for Disease Control and Prevention

Unintentional injury



What disparities do rural residents experience?

Rural has higher than urban ...

- % of children living in poverty
- % those under 65 uninsured or under-insured
- Mortality rates for children and young adults
- Smoking, obesity, inactivity
- Disability
- Suicide
- Preventable hospitalizations
- Food insecurity

What is a Practice-based Research Network (PBRN)

“A group of ambulatory practices devoted principally to the primary care of patients, and affiliated in their mission to investigate questions related to community-based practice and to improve the quality of primary care.”

- Ongoing commitment, transcends individual projects
- Linking clinicians with investigators
- Building capacity of network members

Agency for Healthcare Research and Quality (AHRQ), 2011





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Oregon Rural Practice-based Research Network (ORPRN)

ORPRN's mission is to improve health outcomes and equity for all Oregonians through community partnered dialogue, research, coaching, and education.

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ORPRN Structure

- Advisory Board of community physicians, staff, learners
- Leadership Team
 - Network Director - Nancy Elder
 - Senior Advisors - Bruce Goldberg, LJ Fagnan
 - Assoc. Director of Healthcare Initiatives - Anne King
 - Educational initiatives Director - Maggie McDonnell
 - Assoc. Director of Research - Melinda Davis
 - Clinical Research Director - LeAnn Michaels
- Project Managers, Research Associates and Assistants; And Practice Facilitators (aka PERCS)!



What is a Practice Facilitator/PERC?

- A supportive service provided to a primary care practice by a trained individual or team
- They use a range of organizational development, project management, QI and practice improvement approaches
- Support the implementation of research interventions within a practice
- Build the internal capacity of a practice over time and support it in reaching incremental and transformative improvement goals.

Examples of current ORPRN research

ANTECEDENT – Quality improvement and mixed methods for unhealthy alcohol use

SMARTER CRC – Clinical trial screening rural adults for colorectal cancer using adapted interventions

CASCADE – Clinical trial of parent/infant dyads to prevent eczema and allergies in newborns

PINPOINT – Quality improvement to improve pain management and opioid prescribing in primary care

CAPTURE – COPD screener in primary care to identify undiagnosed respiratory disease and exacerbation risk

AHC – Accountable Health Communities screening and connecting patients with social determinants of health needs

Meta-LARC ACP – Comparative effectiveness trial for advance care planning with seriously ill patients

RAVE – Quality improvement trial to increase initiation and completion of HPV vaccination series in rural OR



What Skills/Resources Can ORPRN Bring to the Research Enterprise?

- Relationships, access and deep knowledge of communities & their needs throughout Oregon
- Connections with PBRNs across North America
- Expertise in QI, Implementation & Dissemination, Clinical Trials, Pragmatic Research, & Comparative Effectiveness Research
- Experience with “Boot Camp Translation:” a process where complicated medical information is translated into concepts, messages, and materials that are meaningful and engaging to community members.
- Opportunities to:
 - Address and measure “meaningful” outcomes/needs: integrated care, obesity, substance use, healthy aging, etc.
 - Demonstrate population impact of research

How to connect with ORPRN?

- Email addresses:
 - ORPRN@ohsu.edu
 - eldern@OHSU.edu
 - michaell@OHSU.edu
- Go to the ORPRN website: <https://www.ohsu.edu/oregon-rural-practice-based-research-network>



1880 ~ 1950 Indigenous, ethnic and immigrant communities long practiced forms of traditional medicine and healing. Yet with the establishment of educational institutions in the eighteenth and nineteenth centuries, scientific training relating to health care became available to those with privilege and the financial means to enroll in colleges and universities. Women, people of color and other minorities were largely excluded from attending higher education institutions due to discrimination and segregation. Colleges and universities began hesitantly accepting students from diverse backgrounds in the first half of the twentieth century. Nevertheless, restrictions to admissions based on race, gender, religion, national origin and other diverse characteristics persisted, causing barriers to equal access and opportunity.



The History of Diversity at OHSU

The banner features a central title 'Diversity milestones in Oregon and the United States' in large, serif capital letters. Below the title are several black and white portraits of historical figures, each accompanied by a quote. The figures include a woman in a 19th-century dress, a man in a suit, a man in a tuxedo, a woman in a 1920s-style dress, a man in a suit, a woman in a 1940s-style dress, a man in a suit, a woman in a 1960s-style dress, and a man in a suit. The quotes are as follows:

- "The journey of a thousand miles begins with one step."
- Leo Tolstoy
- "Our solutions must be broad enough to include the aspirations and needs of others for their sake and for our own."
Gore V. Chafee
- "It does not require many words to speak the truth."
Guy de Maupassant

The banner also includes small text boxes for specific milestones, such as the 1860 Missouri Compromise and the 1954 Brown v. Board of Education decision.

The timeline features several historical figures and milestones:

- 1870:** Sophie Bégin Morrissey, MD
- 1900:** Madeline Fournier, MD
- 1920:** Sophie Bégin Morrissey, MD
- 1940:** Renée Roy, MD
- 1960:** Renée Martineau, MD
- 1980:** Renée Martineau, MD
- 2011:** Sophie Bégin Morrissey, MD

Other exhibits shown include a collection of portraits of women in medicine, a group photo of the University of British Columbia Women in Medicine class of 1971, and a portrait of Sophie Bégin Morrissey.

Diversity, Equity & Inclusion

Why it Matters & What YOU can Do

Jenny Lee Berry

Community Relations Manager

OHSU Public Affairs

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Case for Diversity, Equity, Inclusion

1. Social Justice/Moral Case
2. Economic Case
3. Market Case
4. Results Case

Source: Kapila, M., Hines, E., and Searby, M.; ProInspire, 2016/10/6. [Article](#).

Changing demographics

- K-12 public schools: majority minority students of color in the US ([National Center for Education Statistics](#))
- Increase access to global travel for work and leisure
- Oregon, people of color have higher labor force participation rates than white residents.
- 1 in 3 people in Salem-metro is a person of color
- Consider intersectionality

Sources:

Maxwell, L., 2014/08/19, Education Week. [Article](#).

Cunningham, S., *Race and Ethnic Diversity in Oregon's Workforce*, 2020/01/09. [Article](#).

Urness, Z., The Statesman Journal, 2017/11/16. [Article](#).

OHSU 2025

OHSU will partner to be a leader in health and science innovation for the purpose of improving the health and well-being of people in Oregon and beyond.

We must be as committed to each other as we are to our vision.



Diversity: Representation Matters

Who is and who is not included?

- Race/ethnicity
- Age
- Sexual/gender identity
- Faith
- Culture
- Socio-economic status
- Ability/mobility
- Cognitive/developmental
- Geographic

Diversity: Representation Matters

Factors for exclusion:

- Historical Context
- Language/Cultural
- Access to Care
- Safety
- Accessibility
- Immigration status
- Cost
- Time

Equality



Equity



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Learning Opportunity

- Credible articles from reputable organizations
- CultureVision – Link on O2
- Webinars
- Trainings
 - Unconscious Bias
 - Trauma Informed care
 - Bystander
- Center for Diversity & Inclusion Resources
 - Spiritual & Cultural Guide
 - Recruitment Manual
 - Events & Connections
- Employee Resource Groups
- Community Organizations or Networks

Community Engagement

- Build meaningful relationships
- Participate in community events (internal/external)
- Participation in boards/commissions
- OHSU-sponsored community events
- Employee Resource Group network
- Inclusion Ambassadors
- Find ways to collaborate on projects (internal/external)

Diversity | Equity | Inclusion

Party analogy:

- Diversity is the people at the party.
- Inclusion is who you dance with.
- Privilege is who gets to plan the party.
- Equity is the people on the party planning committee.
- Access is making sure that anyone that wants to come to the party, gets to come to the party.
- Culture is the types of food you have and music that's played at the party.

Questions & Answers



Wrap Up & Announcements

Announcements

The NIH is interested in soliciting comments and suggestions from a range of stakeholders regarding the inclusion of pediatric, geriatric, and other underrepresented populations in clinical research.

[RFI Notice: NOT-OD-20-044](#)

This Notice will remain open until February 15, 2020.



Announcements

Newest Recruitment Toolkit Documents are Available Online!

- [Including Underrepresented Groups in Research](#)
- [Recruiting in the Community: Best practices and tips for community engagement and collaboration](#)

Past guidance documents and presentations can be accessed on the OCTRI Recruitment [website](#).



Upcoming Events

For other upcoming events, stay tuned for announcements in future editions of CRU news.

Don't receive CRU News? Email OHSUCRU@ohsu.edu to be added to the listserv.

For more information on OCTRI Recruitment Services, additional resources, or to request a recruitment consultation, please email octrirecruitment@ohsu.edu or visit our website at <https://www.ohsu.edu/octri>





Thank You