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This – and so many other - senseless deaths provide the emotional engine for this work. With the leadership of President Danny Jacobs and Dr. Derick Du Vivier, senior vice president for diversity, equity and inclusion, OHSU is reforming our policies and practices using an anti-racist lens and there is much more to come. The school's Diversity, Equity, Inclusion and Anti-Racism Strategic Action Plan charts the path for our contribution to, and alignment with, institutional efforts in areas that are within our purview.

The School of Medicine plan includes three goals with overarching themes that capture the essence of the climate we want to create: Belong, Include, Empower. We must understand that it is our responsibility to realize these goals. To create belonging, for example, means we will stretch to embrace and welcome the unfamiliar. This is the opposite of asking people to “fit in.” Nine objectives and 79 tactics provide tangible, specific action steps and accountability to get there.

I especially want to recognize Dr. George Mejicano, senior associate dean for education, who has championed this work with passion and commitment since he came in 2012, and Leslie Garcia, M.P.A., Ed.D. (c), assistant dean for diversity, equity and inclusion, under the leadership of Dr. Sharon Anderson, my predecessor. Additional thanks to the school’s Diversity Affairs Committee, which developed this plan. This includes immediate past chair Dr. Mohamud Daya, and current chair Dr. Mina Nguyen- Driver and vice chair Dr. Paul Spellman.

We have a long way to go. But we draw tremendous strength from the good that we do as an institution. I am proud of the school for doing its part to fundamentally change what it means to be at OHSU.

David Jacoby, M.D.
Interim Dean, OHSU School of Medicine
We all reside on a continuum in our understanding of racism and the impact of power structures on personal and professional experiences and overall institutional health. In the School of Medicine, many have worked long and hard to advance diversity and racial equity. Many others have the desire but may lack an understanding of the core challenges or how best to address them.

The School of Medicine Diversity, Equity, Inclusion and Anti-Racism Strategic Action Plan is an effort to organize, prioritize and direct the learnings and best practices we have derived over many years and support our departments, centers, institutes and programs with a roadmap and the training, guidance and resources to traverse it. The plan includes tactics to create open and safe dialogue and professional development that fosters personal growth and a shared language to allow for moving forward together.

During my tenure at OHSU, I have never been as proud to do this work as I am today. In collaboration with institutional leaders and with our dean, the SoM executive leadership team, the Diversity Affairs Committee, students, trainees, faculty and staff, I know we are driving meaningful progress.

As your assistant dean for diversity, equity and inclusion, I look forward to serving as a resource, being a partner, and collaborating for alignment and impact. I believe that we can transform our work and learning environments to be more equitable, respectful, and inclusive. I have no question that together we can achieve more.

Leslie Garcia, M.P.A., Ed.D. (c)
Assistant dean, Diversity, Equity & Inclusion, OHSU School of Medicine

Goal 1: BELONG
The School of Medicine will create and foster a learning and working environment that welcomes, celebrates and supports all learners, staff, faculty, leaders and community members, especially persons from marginalized groups who historically are under-represented in medicine and the biomedical sciences.

Goal 2: INCLUDE
The School of Medicine will recruit, admit, hire, mentor, support, retain, graduate, advance and promote individuals who are representative of the increasingly diverse population of Oregon and the nation.

Goal 3: EMPOWER
The School of Medicine will commit to achieving a more just and equitable world by embracing a social mission that leverages its resources and expertise to aid underserved populations and reduce health disparities.
Belonging
We encourage the expression of individual life experiences, differences, unique capabilities and talents represented in our school and seek to anchor our learning and working environments and our professional interactions in respect, cooperation, empathy and humility. Creating belonging means stretching to embrace and welcome the unfamiliar; it is the opposite of asking people to “fit in.”

Inclusion
We strive to build an inclusive community where health professionals and scientists nurture and embrace our individual differences.

Empowerment
We recognize the power of leadership and advocacy to create meaningful dialogue and advance the health of all Oregonians by especially centering on the needs of those in under-served communities.

Mission: To create a culture that honors and fosters diversity and equity as fundamental to the pursuit of excellence in education, research, clinical practice and community service and the elimination of health disparities.

Vision: That every SOM community member puts aside fears; commits to personal growth; lifts up the voices, ideas and leadership of people with lived experience; is accountable, fair and transparent, and models the innovation and positive impact that is possible when we embrace and advance diversity, equity, inclusion and anti-racism.

Values: In the School of Medicine, as at OHSU, diversity equity, inclusion and anti-racism are mission imperative. We ground ourselves in three values:
The School of Medicine Diversity, Equity, Inclusion and Anti-Racism Strategic Action Plan 2021-2025 builds on the foundation OHSU and the school has laid over many years to truly become a multi-cultural, diverse, equitable, inclusive and anti-racist academic medicine community.

First SoM Diversity Action Plan created, in keeping with institutional goals; requires departments to create their own plans and annually report to the committee on activities.

SoM helps drive the institution’s successful efforts to increase diversity among its learners and launch dozens of new programs to support diverse students and trainees.

Diversity Affairs Committee begins formally assessing all departmental Diversity Action Plans and providing support to advance their efforts. Dean integrates assessment into annual performance reviews for department chairs.

The committee overhauls the 2014 Diversity Action Plan in alignment with accreditation requirements, the OHSU 2025 Strategic Plan, OHSU’s expanded institutional commitment to anti-racism and other emerging best practices.
We value the unique contributions and perspectives of all SOM students, staff, faculty, residents, fellows, patients, students, volunteers and local and global communities. Diversity maximizes the school’s potential for innovation, quality patient care, educational excellence and service.

We acknowledge, reflect and confront the inequities of the past, reveal the inequalities of the present, and act for change aiming towards a more equitable environment.

We expect all the School of Medicine’s departments, centers, institutes and programs to take action to make our institution a place where all feel welcomed regardless of national origin, race, ethnicity, gender, sexual orientation, ability and more.

We condemn the ongoing racism, discrimination and violent acts towards historically underserved individuals and groups who experience racism, tokenism and disrespect.

We embrace diversity and seek to take action to create an environment of inclusion and equal access and opportunity to all.

We expect that SOM members treat all with respect, empathy, and seek to understand and appreciate others as the foundation of healthy work and learning environments.

We encourage all individuals to learn about our own forms of bias and search to understand how racism and its far-reaching repercussions affect all aspects of society, including healthcare and research.

We promote the belief that every SOM community member is a good role model that empowers others and sets a high standard of being fair, transparent, and consistently serves as an active bystander mitigating microaggressions and other forms of bias and oppression.
The advancement of this plan requires a common language to increase our cultural competency and humility. Below we highlight important terms and invite members to review the OHSU’s Inclusive Language Guide for a full glossary.

**Diversity** is a range of human differences, including but not limited to age, color, culture, disability, ethnicity, gender identity or expression, marital status, national origin, race, religion, sex, sexual orientation and socioeconomic status. We respect the diversity of thought, ideas and more.

**Equity** is the quality of being fair and impartial. Working toward fair outcomes for individuals or groups by treating them in ways that address advantages or barriers.

**Inclusion** is the act of creating involvement environments and empowerment in which any individual or group can be and feel welcomed, respected, supported and valued to fully participate. An inclusive and welcoming climate with equal access to opportunities and resources embracing differences and offers respect in words and actions for all people.

**Anti-Racism** is a conscious decision to make frequent, consistent and equitable choices daily. This requires ongoing self-awareness and self-reflection. In the absence of making anti-racist choices, we unconsciously uphold the dominant culture and institutions. Being a racist or an anti-racist is not about who you are; it is about what you do. Being anti-racist is about making choices and supporting policies that mitigate racial inequity.

**Under-Represented in Medicine (URiM)** is an abbreviation to encompass individuals under-represented in medicine and science. (See School of Medicine Policy in the Appendix).
GOAL 1: BELONG

The School of Medicine will create and foster a learning and working environment that welcomes, celebrates and supports all learners, staff, faculty, leaders and community members, especially persons from marginalized groups who historically are under-represented in medicine and the biomedical sciences.

Objective 1.1
Education and Training
(8 tactics)

The School of Medicine will work with knowledgeable experts and leverage its expertise in education and faculty development to educate and train students, residents and fellows, post-docs, staff, faculty, administrative leaders and community members on topics and issues related to diversity, equity, inclusion, anti-racism and social justice.

Tactic A – On an annual basis, inclusively determine which topics and issues are important to cover and provide a variety of forums (e.g., lectures and workshops) to cultivate and integrate cultural competency and cultural humility.

Tactic B – Require ongoing training and learning opportunities related to DEI and anti-racism for learners, staff, faculty and administrative leaders. Ensure there are consequences for individuals who are not compliant with the required training.

Tactic C - Host sessions that teach and promote diverse ideas using multicultural and multilingual perspectives.

Tactic D – Increase diverse speakers and topics for grand rounds and other educational and professional development programs sponsored by the School of Medicine.

Tactic E – Collaborate with the Center for Diversity and Inclusion, Human Resources, and other internal partners to increase awareness of resources and tools to advance DEI and anti-racism.

Tactic F – Systematically review and revise curricular materials and content used in instruction and assessment within our degree programs to ensure that teaching occurs in a culturally inclusive manner.

Tactic G – Disseminate resources and best practices related to inclusive language, community outreach and hiring diverse staff and faculty.

Tactic H – Develop a user-friendly tracking tool to identify new and ongoing DEI and anti-racism activities that meet accreditation requirements, to help the school identify gaps and duplicative efforts, and to monitor our progress towards achieving the plan’s objectives.
Objective 1.2
Engagement (6 tactics)

The School of Medicine will commit to ongoing engagement and support of diverse students, residents and fellows, post-docs, staff and faculty to address inequities, enhance the climate and amplify the collective voice of representatives from historically under-represented groups and underserved communities.

Tactic A – Include representatives of under-represented groups and underserved communities, including students when deemed appropriate, on committees and other bodies that make decisions about policy, procedures and resource allocation pertaining to the learning and working environment.

Tactic B – Reach out to diversity-focused student interest groups and employee resource groups about who to invite as guest speakers in seminars, forums and events sponsored by the School of Medicine.

Tactic C – Conduct diversity and anti-racism climate surveys every other year to identify areas that need attention and to track our progress over time.

Tactic D – Create “safe spaces” such as affinity or cultural spaces where students, faculty, and staff can network and gather; offer support and resources for maintaining these spaces.

Tactic E – Ensure that accountability structures are in place to address and curtail discrimination or instances of discrimination.

Tactic F – Create an accessible system to track resources and services available to students and employees from historically under-represented communities.

Objective 1.3
Enrichment (5 tactics)

The School of Medicine will lead efforts to enrich the experience of all our members and stakeholders by celebrating, communicating and prioritizing events and opportunities that focus on DEI and anti-racism.

Tactic A – Host inclusive events that put marginalized voices at the center.

Tactic B – Model inclusive, equitable, trauma-informed communication approaches and use respectful and consistent terms as identified in the OHSU Inclusive Language Guide in all communications.

Tactic C – Develop a digital, comprehensive DEI and anti-racism calendar of events to provide timely information about research, community engagement, events, resources, professional development and required trainings.

Tactic D – Reinforce that DEI and anti-racism are top priorities for the university by having our leaders communicate that they are committed and involved in these efforts and by having our leaders ensure accountability of all individuals.

Tactic E – Utilize experts to review and revise marketing materials, displays and websites through an anti-racist lens to ensure communications contribute to equity.
**GOAL 2: INCLUDE**

The School of Medicine will recruit, admit, hire, mentor, support, retain, graduate, advance and promote individuals who are representative of the increasingly diverse population of Oregon and the nation.

**Objective 2.1**  
**Recruitment (20 tactics)**

The School of Medicine will increase the recruitment of diverse students, residents and fellows, post-docs, staff, faculty and administrative leaders so that the School of Medicine better reflects and responds to the communities we serve in Oregon and the nation.

**Tactic A** – Expand pathways that focus on diverse students in K-12 and undergraduate students. This should include continuing current programs and adding new programs that provide early exposure to science, technology, engineering, mathematics and medicine (STEMM) fields; that include partnerships with other OHSU units, K-12 schools, colleges and universities in the region, and local organizations such as museums; and that include opportunities to participate in experiential learning and research.

**Tactic B** – Utilizing best practices, increase recruitment, admission and matriculation of graduate and medical students who belong to the three prioritized diversity categories outlined in policy (i.e., persons who belong to an under-represented minority, who have lived in a rural area and/or who have overcome adversity).

**Tactic C** – Increase scholarships for students who belong to the three prioritized diversity categories outlined in policy (i.e., persons who belong to an under-represented minority, who have lived in a rural area and/or who have overcome adversity).

**Tactic D** – Utilizing best practices, increase recruitment and matching of residents and fellows who belong to the three prioritized diversity categories outlined in policy (i.e., persons who belong to an under-represented minority, who have lived in a rural area and/or who have overcome adversity).

**Tactic E** – Partner with the institution's ACGME Resident Fellow Diversity Committee (ARFDC) to co-host events that aid in the recruitment and onboarding of diverse residents and fellows.

**Tactic F** – Create a robust graduate medical education (GME) trainee-to-faculty pathway program that prioritizes the hiring of OHSU residents and fellows who belong to groups that are under-represented in medicine and the biomedical sciences, especially under-represented minorities.
**Goal 2: Include**

**Tactic G** – Increase recruitment and hiring of post-docs, staff and faculty who belong to groups that are under-represented in medicine and the biomedical sciences, especially under-represented minorities. Mechanisms to do this include but are not limited to the following:

- Identify barriers to recruiting diverse post-docs, staff and faculty;
- Overcome identified barriers to recruiting diverse post-docs, staff and faculty (e.g., provide incentives and support structures such as start-up funds, mentors, diversity navigators and eliminate “single candidate” hires);
- Implement standardized processes for recruiting diverse applicants across the School of Medicine (e.g., blind applications, ensure each department has trained search advocates, require that search committee members undergo unconscious bias training, require a diversity statement from each faculty candidate, require that search committees have diverse representatives, pause searches that do not have at least 15% of their pool come from a diverse background, etc.);
- Develop and maintain long-term partnerships with academic, professional, government and business organizations at the local, national and international levels that serve marginalized communities such as under-represented minorities;
- Secure resources to provide and optimize training and clarify the resources necessary to assist with identification and recruitment of diverse post-docs, staff and faculty;
- Disseminate relevant data such as how many offers and hires of diverse persons have occurred; and
- Hold hiring managers and leaders accountable if diversity metrics fall behind expectations including performance reviews, promotion processes, compensation formulas and incentive plans.

**Tactic H** – Disseminate information about the President’s Fund (i.e., a central pool of funds managed by the Provost’s Office that ranges from $50,000 to $75,000 per faculty member) to help recruit and hire diverse faculty members.

**Tactic I** – Develop, implement, and utilize a standardized methodology to ensure that candidate pools are diverse and that admissions and selection processes occur in a mission-driven, strategically focused manner that decreases implicit bias.
**Tactic J** – Widely disseminate the School of Medicine Mission-Appropriate Diversity Policy.

**Tactic K** – Centrally coordinate and expand the availability of medical student electives for visiting students with diverse backgrounds enrolled at other schools.

**Tactic L** – Remove barriers associated with degree program recruitment and application processes, such as application fees and standardized testing requirements.

**Tactic M** – Review application questions and marketing materials to ensure that language is inclusive and anti-racist.

**Tactic N** – Train members of admissions committees on mitigating implicit bias and deploying best practices in recruiting diverse applicants (e.g., blinding of applications and using holistic review).

**Tactic O** – Create a school-wide recruitment policy to communicate our values and to improve the diversity of candidate pools for staff and faculty positions.

**Tactic P** – Increase collaboration among human resource personnel, hiring managers and central recruiters to improve the applicant pool and initial screening process to lean more toward inclusion than exclusion.

**Tactic Q** – Improve recruiting efforts for staff hiring by identifying where and how to reach a diverse pool of candidates (e.g., advertising, community outreach, relationship building, writing inclusive position descriptions, etc.).

**Tactic R** – In an authentic manner, expand local and national collaboration, reach out to community groups and develop a campaign to champion OHSU as an Employer of Choice among diverse and under-represented minorities in medicine and the biomedical sciences.

**Tactic S** – Utilize the search advocate program and Stepping In program to mitigate bias in the recruitment process.

**Tactic T** – Continue to conduct the bi-annual Diversity Benchmarking Campaign to improve the accuracy of human resources data of existing employees.
Objective 2.2
Retention (11 tactics)

The School of Medicine will build and grow effective initiatives that promote inclusion and that equitably advance the careers and professional endeavors of our diverse students, house officers, post-docs, staff and faculty.

**Tactic A** – Ensure equitable handling of investigations and disciplinary actions related to professionalism, academic dishonesty and/or job performance, with clear indicators of accountability. Ensure that there are clear consequences to individuals who exhibit harassing, disrespectful, discriminatory, and/or abusive behaviors.

**Tactic B** – Establish effective mentoring support for students, post-docs, residents and fellows, staff, faculty and administrators from marginalized groups. Ensure access to existing mentoring resources and encourage faculty to take advantage of Mentorship Academy training to facilitate the development of mentorship competencies.

**Tactic C** – Expand the diversity navigator program to include graduate students, residents and fellows, post-docs and junior faculty.

**Tactic D** – Create equitable faculty compensation policies and practices.

**Tactic E** – Develop and incorporate DEI, anti-racism and social justice core competencies in performance appraisals of faculty and staff. Include a section in annual performance reviews of staff and faculty on how the employee is contributing to improving DEI, anti-racism and social justice.

**Tactic F** – Include a section in promotion packages where faculty members report on the ways they are contributing to improving DEI, anti-racism and social justice. Reinforce the importance of these efforts by establishing clear consequences and influences on promotion packages.

**Tactic G** – Evaluate employee retention by job types, including exit interviews through a process led by the Office of Community Engagement and Support (OCES) and Human Resources.

**Tactic H** – Develop semi-annual town hall and departmental presentations to disseminate School of Medicine mentoring, leadership and professional development programs to students, residents and fellows, post-docs, staff and faculty.

**Tactic I** – Allocate appropriate resources to support the Assistant Dean for DEI to manage a centralized resource hub to support DEI and anti-racism partnerships.

**Tactic J** – Identify organizational themes associated with departures of under-represented groups through exit interviews, stay interviews, GROW conversations and the climate survey that will occur every other year.

**Tactic K** – Ensure, fair, transparent and objective criteria for promotion and assignments, and provide mechanisms for appeal and investigation when standardized criteria are ignored.
Objective 2.3
Resources and Related Support (5 tactics)

The School of Medicine will supply the necessary resources to achieve the goals and objectives outlined in this plan.

**Tactic A** – Provide and annually review the School of Medicine staffing and other resource needs related to DEI and anti-racism.

**Tactic B** – Create a comprehensive communications plan that incorporates images and stories of diverse OHSU students, residents, fellows, post-docs, staff, faculty, administrative leaders, patients, volunteers and the community at large that authentically reflects our mission, values and goals for DEI and anti-racism.

**Tactic C** – Create a health literacy model for the creation of easy-to-understand print, multimedia materials and signage in the languages most commonly used by OHSU patient populations (e.g., English, Spanish, and Mandarin).

**Tactic D** – Enhance knowledge of legal requirements associated with the Americans with Disabilities Act and share best practices and standards that meet the needs of individuals with disabilities within the School of Medicine.

**Tactic E** – Ensure transparency and equity-related to funding opportunities such as scholarships, attending conferences, inviting speakers and hosting events related to DEI and anti-racism.
Goal 3: Empower

The School of Medicine will commit to achieving a more just and equitable world by embracing a social mission that leverages its resources and expertise to aid underserved populations and reduce health disparities.

Objective 3.1
Enablement (6 tactics)

The School of Medicine will enable this plan by creating systems and structures that aid in meeting the plan’s objectives. This will include a clearly defined organizational structure with levels of reporting and accountability as well as a well-identified system of priorities and distinct details on implementation of tactics.

Tactic A – Form and charge a school-wide Diversity Alignment Team (DAT) to coordinate the implementation of this plan with the Dean’s Office and the school’s departments, centers and institutes.

Tactic B – Charge each School of Medicine department, institute and center to create a unit-level plan – aligned with the school’s overall plan but fine-tuned for the needs of each unit – that articulates each unit’s commitment to these efforts, that delineates specific actions that the unit will take to help achieve the plan’s objectives, and that will be used in annual performance reviews of the leaders of the departments, centers and institutes.

Tactic C – Expect each School of Medicine department, institute and center to create a Diversity Committee that will assist in the creation of the unit-level plan and work with the DAT on alignment with School of Medicine DEI and anti-racism priorities.

Tactic D – Indicate that DEI and anti-racism is central to the concept of leadership at all levels within the School of Medicine.

Tactic E – Widely disseminate each of the mechanisms by which OHSU members may report bias, mistreatment, harassment and/or discrimination in both learning and working environments. Restructure and give power to the reporting mechanisms so that individuals reporting an allegation can have confidence that there will be clear consequences if the allegations are substantiated.

Tactic F – Encourage and provide leadership development opportunities, especially to women and individuals who are under-represented in medicine and the biomedical sciences, and ensure that dedicated spots are available to these groups.
Objective 3.2
Extension to the Community (9 tactics)

The School of Medicine will serve the public good by collaborating with internal and external stakeholders on DEI and anti-racism initiatives that extend our reach across the region and that help reduce health disparities.

**Tactic A** – Establish a Diversity Community Advisory Board – comprised of persons external to OHSU – to understand the experiences of marginalized communities in Oregon and to help guide our engagement, advocacy and workforce development efforts related to disparities.

**Tactic B** – Equip faculty and staff to successfully partner with diverse communities in research, education and service activities (e.g., offer training in best practices for community engagement, clinical outreach and community-based participatory research related to diverse communities).

**Tactic C** – Develop best practices to increase outreach with diverse community organizations and minority chambers of commerce to enhance the procurement of services and goods to support women- and minority- owned small businesses.

**Tactic D** – Analyze and incorporate cultural and linguistic methods to increase the representation of minorities, women and other underserved populations in research trials.

**Tactic E** – Review and eliminate or revise clinical algorithms that may perpetuate bias in caring for patients from marginalized communities.

**Tactic F** – Create a plan to assess and expand the school’s research portfolio focused on diversity and health disparities.

**Tactic G** – Provide training on culturally appropriate ways to engage, communicate and work with community partners and participate in community outreach that extends our reach across the region and that highlights our commitment to reduce health disparities.

**Tactic H** – Establish and publicly detail a formal statement and define the role of partnerships in anti-racist and broader DEI efforts, and provide a definition of what constitutes an official partner.

**Tactic I** – Maintain public lists of existing partnerships, with descriptions for each, about how they align with OHSU’s stated desire to become an anti-racist and multicultural organization.
Objective 3.3 Evaluation (9 tactics)

The School of Medicine will evaluate the impact and outcomes of this plan, monitor progress towards achieving the plan’s goals and objectives and utilize that information to refine future DEI and anti-racism initiatives.

Tactic A – Empower the DAT to serve as the central organizing and communications hub for this work across the School of Medicine.

Tactic B – Create systems of accountability and transparently report annual progress in achieving the objectives and tactics of this plan (as well as the associated departmental plans) using a continuous quality improvement framework.

Tactic C – Annually report recruitment, matriculation and hiring numbers for students, residents and fellows, post-docs, staff, faculty and administrative leaders.

Tactic D – Conduct a climate survey every two years and compare the results to initial baseline data to assess the effectiveness of DEI and anti-racism initiatives and to guide similar efforts in the future.

Tactic E – Annually report the number of persons undergoing required and elective training related to DEI and anti-racism as well as the percent compliant with the required training; annually report the aggregate evaluation data obtained about these required training.

Tactic F – Annually report summaries of reports and investigations that involve School of Medicine personnel related to bias, mistreatment, harassment and discrimination.

Tactic G – Annually report clinical health outcomes of marginalized patient groups served by the School of Medicine clinical staff and faculty.

Tactic H – Enhance community collaborations and conduct an assessment of community health needs and use results to plan and implement services that respond to the cultural and linguistic diversity of populations in the School of Medicine service line areas.

Tactic I – Collect and maintain accurate and reliable demographic and health outcomes data to monitor and evaluate the impact of initiatives to improve health equity, reduce disparities and inform and prioritize service delivery.

Approvals:

- By vote of the SOM Diversity Affairs Committee on September 14, 2021.
- By vote of the SOM Faculty Council on November 4, 2021.
- Officially approved by Dr. David Jacoby, Interim Dean, on November 4, 2021.
Next steps

Spring 2022

Diversity Affairs Committee begins reviewing initial departmental plans, progress and outcomes, reporting to the dean, senior associate dean for education and assistant dean for diversity, equity and inclusion, who will share outcomes with the school at large on the School of Medicine Diversity and Equity website.

The School of Medicine will create a Diversity Alignment Team (DAT) to organize, communicate and coordinate implementation of the plan with the Diversity Affairs Committee and the school departments, centers and institutes. The assistant dean for diversity, equity and inclusion will oversee planning, implementation, priorities, roles, accountability mechanisms, timeline and metrics. Each department, center and institute will submit to the Diversity Affairs Committee and to the assistant dean for diversity, equity, and inclusion their current Diversity Action Plan with initial updates. The committee will assess and report progress to the dean for incorporation into their annual performance reviews.

Going forward:

The Diversity Affairs Committee is charged with guiding and overseeing the continued evaluation and development of diversity, equity, inclusion and anti-racist practices and approaches, coordinating these efforts with others (Center for Diversity and Inclusion, Provost’s Office, Research and Innovation, OHSU Health), and recommending modifications to the plan as needed to achieve its goals and maintain alignment for the greatest impact.

Summer/Fall 2022

Informational sessions on the new plan with students, staff, faculty, trainees and other school community members and stakeholders.

Fall/Winter 2022

Departments, centers and institutes develop unit plans that align with the new school plan.
Authorship

The School of Medicine Diversity, Equity, Inclusion and Anti-Racism Strategic Action Plan was developed by the School of Medicine Diversity Affairs Committee, consisting of students, trainees, faculty, staff, and administrative leaders who are appointed by the dean and bring a diversity lens and their own lived experiences to this work.

Leslie Garcia, M.P.A., Ed.D. (c) assistant dean for diversity, equity and inclusion, and George Mejicano, M.D., M.S., senior associate dean for education, under the leadership of Dean Sharon Anderson, served as lead authors of the plan in collaboration with Committee Chair Mina Nguyen- Driver, Psy. D., associate professor of pediatrics; Co-Chair Paul Spellman, Ph.D., professor of molecular and medical genetics, and former Chair Mohamud Daya, M.D., M.S., professor of emergency medicine.

The school wishes to also acknowledge past committee members who played key roles:

- Gregory Blaschke, M.D., M.P.H., Professor of Pediatrics
- Alice Fung, M.D., Professor of Diagnostic Radiology
- Kim Lu, M.D., Associate Professor of Surgery
- Devon Ritter, Program Design Specialist, Office of Faculty Development
- Sam Rogers, PA-C, Knight Cardiovascular Institute
School of Medicine Diversity Affairs Committee
2021-2024 Members:

Mina Nguyen-Driver, Associate Professor, Pediatrics, Chair
Paul Spellman, Professor, Molecular and Medical Genetics, Co-Chair
Jyoti Chouhan, Assistant Professor, Urology
Christopher Evans, Assistant Professor, Medicine
Ambar Faridi, Assistant Professor, Ophthalmology
Reem Hasan, Assistant Professor, Medicine
Marissa Kellogg, Assistant Professor, Neurology
Annie Kuo, Assistant Professor, Ophthalmology
Dekey Lhewa, Assistant Professor, Medicine
Lina Reiss, Associate Professor, Otolaryngology- Head & Neck Surgery
Mikaela Rodriguez, Assistant Professor, Psychiatry
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Thomas Cordova, Resident
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Sharon Anderson, M.D., Dean, OHSU School of Medicine, 2017-2021
Amanda Peña Administrative Coordinator, Dean's Office

View online roster

Thank you for your support, advice and contributions:

Brian Secrest, Executive Specialist
Mariana Phipps, M. Sc., Senior Communications Specialist
Erin Hoover-Barnett, Director of Communications and Senior Advisor to the Dean
DEI & Anti-Racism Strategic Action Plan

School of Medicine Diversity Categories

While the School of Medicine recognizes that overall diversity among all physicians and scientists is crucial to our mission, we are limited in our ability to track all relevant diversity categories. Further, the organization that accredits medical education programs and medical schools in the United States requires each school to prioritize specific categories in order to focus resources that will optimize outcomes to improve diversity.

The School of Medicine has formally selected a subset of diversity categories to align our ongoing systematic recruitment and retention activities (e.g., pathway programs, partnerships, outreach efforts), financial resources (e.g. student scholarships, startup packages, resources, etc.), and development of program evaluation methods to determine the effectiveness and outcomes of our diversity efforts among students, house officers, faculty, and senior administrative staff.

To this end, the school has formally defined diversity categories per its approved mission-appropriate diversity policy, adopted on February 4, 2021.

A. For students and residents, the OHSU School of Medicine defines diversity as:

- Persons from racial or ethnic groups that are under-represented in medicine and biomedical sciences: (a) Black or African American, (b) Hispanic or Latino/a (individual of any gender identity originating from Mexico, Central or South America, or Caribbean cultures), (c) American Indian or Alaska Native, and (d) Native Hawaiian or Other Pacific Islander.

- Persons from rural environments, defined as the majority of childhood years in a frontier environment or rural town as specified by the Oregon Office of Rural Health (i.e., a town of less than or equal to 40,000 population and at least 10 miles from a community of that size or larger).

- Persons who have experienced significant disadvantage or adversity (i.e., a first-generation college graduate; a recipient of social service resources while in elementary or secondary school, enhanced education or other programs for diverse populations; or by experience of economic, cultural, educational or family adversity).

B. For faculty and senior administrative staff, the OHSU School of Medicine defines diversity as:

Persons from racial or ethnic groups that are under-represented in medicine and biomedical sciences: (a) Black or African American, (b) Hispanic or Latino/a (individual of any gender identity originating from Mexico, Central or South America, or Caribbean cultures), (c) American Indian or Alaska Native, and (d) Native Hawaiian or Other Pacific Islander.