An Evolution of Diversity

Cato T. Laurencin, M.D., Ph.D.

University Professor
The University of Connecticut

Cato T. Laurencin M.D., Ph.D.

Editor-in-Chief

The Journal of Racial and Ethnic Health Disparities



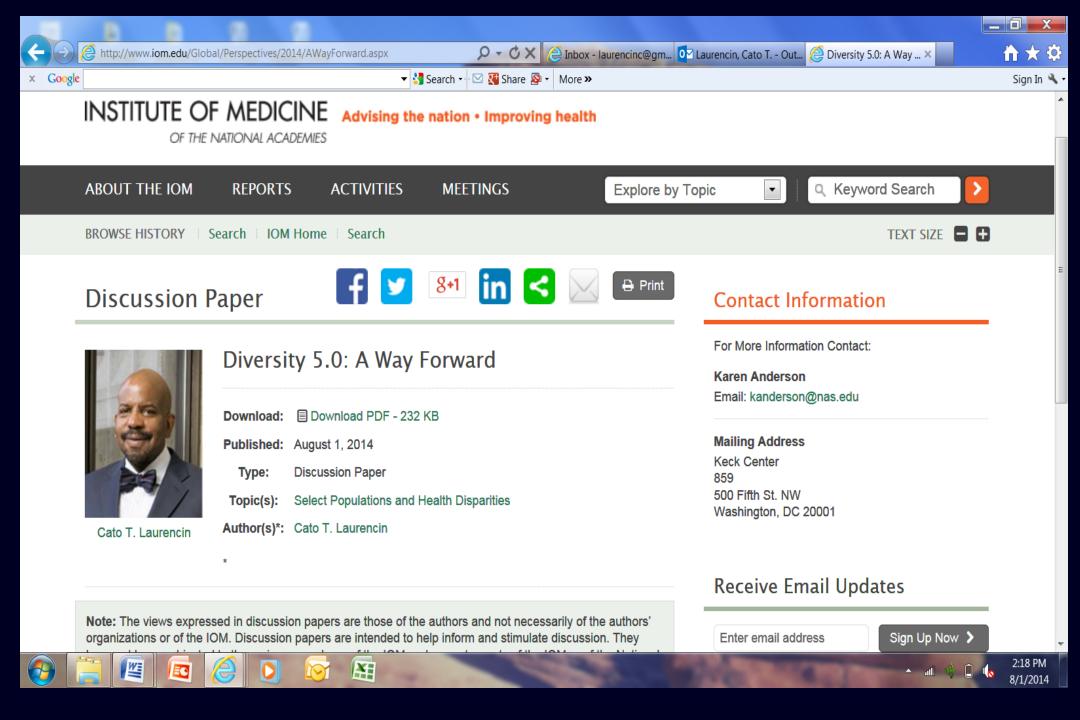
Cato Laurencin Honored for Promotion of Social Justice in Medical Education

Filed in Honors & Awards on September 11, 2020



Cato T. Laurencin, the Albert and Wilda Van Dusen Distinguished Endowed Professor of Orthopaedic Surgery, professor of chemical engineering, materials sciences, and biomedical engineering, and one of only two University Professors at the University of Connecticut, was selected as the recipient of the 2020 Herbert W. Nickens Award from the Association of American Medical Colleges.

The award is bestowed on an individual who has made monumental contributions to promoting justice in medical education and health care equity throughout the nation. Dr. Laurencin will receive the prestigious award in November during the virtual AAMC





Diversity 5.0: A Way Forward

Cato T. Laurencin, M.D., Ph.D. August 1, 2014

The views expressed in this discussion paper are those of the author and not necessarily of the author's organization or of the institute of Medicine. The paper is intended to help inform and stimulate discussion. It has not been subjected to the review procedures of the institute of Medicine and is not a report of the institute of Medicine or of the National Research Council.

INSTITUTE OF MEDICINE

OF THE NATIONAL ACADEMIES

Advising the nation - Improving health

Copyright 2014 by the National Academy of Sciences. All rights reserved.

Diversity 5.0

Cato T. Laurencin, M.D., Ph.D.

University Professor
The University of Connecticut

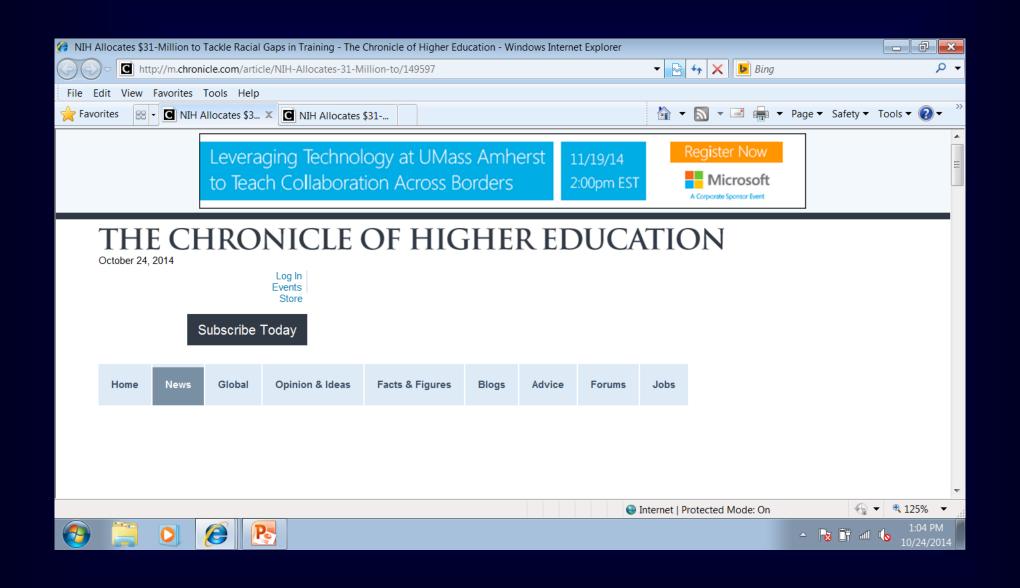
Commentary: Diversity 3.0: A Necessary Systems Upgrade Marc A. Nivet, Ed.D.

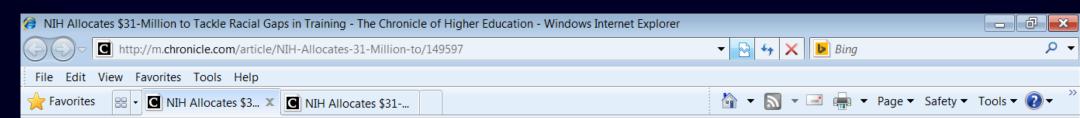
Academic Medicine, Vol. 86, No. 12 / December 2011

Diversity 5.0

For Diversity to be truly effective, the drivers of bias, discrimination and racism so rooted in our history, and manifested in our present, creating the need for initiatives involving Diversity, must be explored, discussed, and resolved. If we can succeed, we may achieve the ultimate realization of Dr. Martin Luther King's overall dream.

Advisory Committee to the Director Working Group on Diversity in the Biomedical Research Workforce





GOVERNMENT

NIH Allocates \$31-Million to Tackle Racial Gaps in Training

By Paul Basken OCTOBER 22, 2014

The National Institutes of Health on Wednesday awarded more than \$31-million to a dozen university groups that will develop and test strategies for improving the racial diversity of the nation's medical work force.

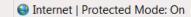
The lead universities receiving grants include some of the nation's top institutions for training minority scientists. Their projects involve modifying enrollment processes, revamping undergraduate courses, and improving mentoring, among other efforts.

The NIH, the world's leading financer of medical research, formally studied its diversity problem in 2011. It found the odds that a black scientist would win an NIH grant were 10 percentage points lower than those of a white scientist, and it promised to pour money into strategies to rectify that disparity.

Such findings "are of grave concern to NIH," its director, Francis S. Collins, said at a briefing outlining the awards.

The lead institutions are Boston College; California State University's Long Beach and Northridge campuses; Morgan State, Portland State, and San Francisco State Universities; Xavier University of Louisiana; and the Universities of Alaska at Fairbanks, of Detroit Mercy, of Maryland-Baltimore County, and of Texas at El Paso. The University of California at Los Angeles will host a center for evaluating the success of the programs.

The NIH intentionally limited the awards to smaller-budget institutions with a history of training minority students, while expecting them to team up with a wide range of universities, Dr. Collins said. The agency hopes that improved educational approaches, such as earlier exposure to hands-on scientific experience, can cut the loss of minority students at the undergraduate level, he said.













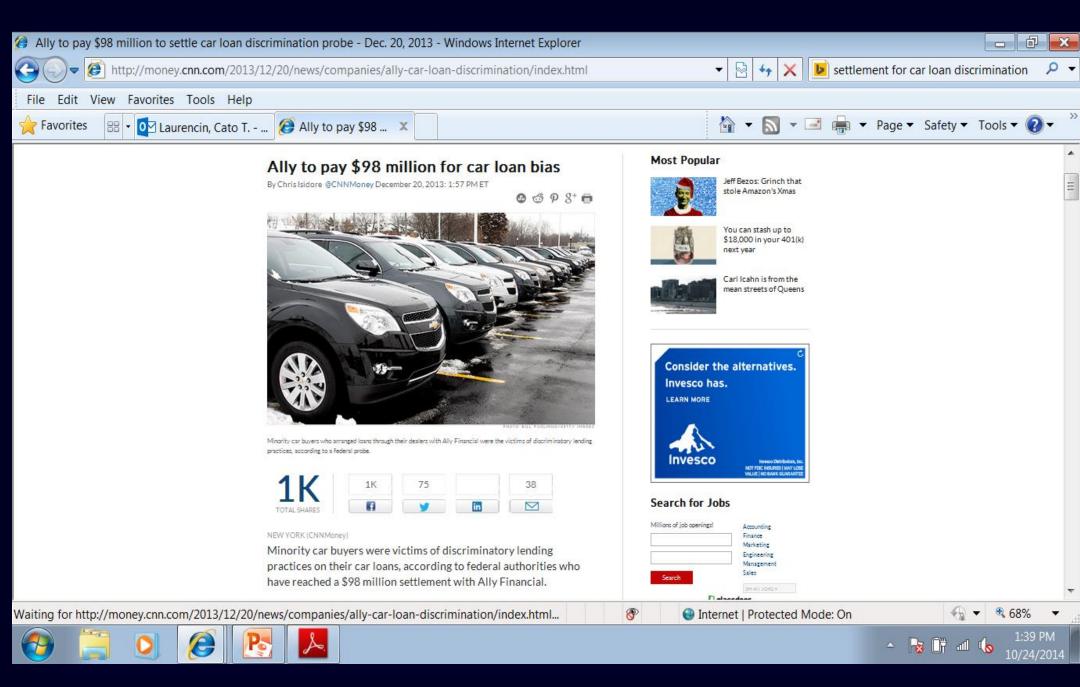


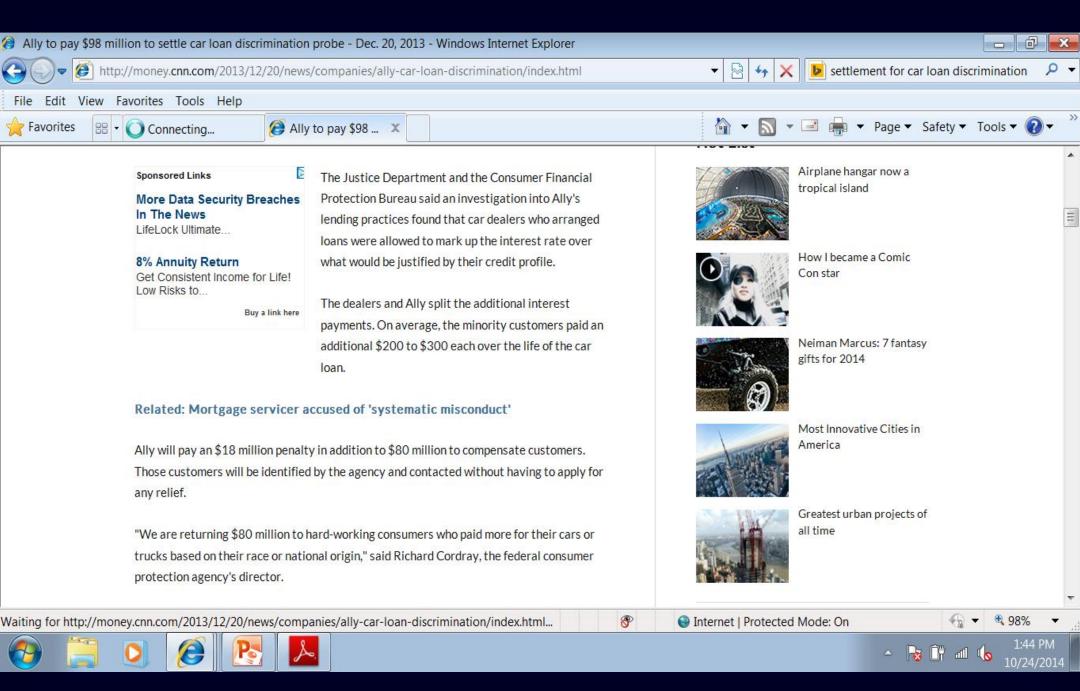






Additionally, a disturbing discrepancy in success rates for research grant (R01¹) applications between White applicants and Black applicants, even after controlling for numerous observable variables, was reported in 2011 by Ginther, et al. (see Section II).





The Crisis: A Growing Absence of Black Men in Medicine

J. Racial and Ethnic Health Disparities (2017) 4:317–321 DOI 10.1007/s40615-017-0380-y



PERSPECTIVE ARTICLE

An American Crisis: the Lack of Black Men in Medicine

Cato T. Laurencin 1 · Marsha Murray 1

Received: 5 April 2017 / Revised: 2 May 2017 / Accepted: 4 May 2017 / Published online: 22 May 2017

© W. Montague Cobb-NMA Health Institute 2017

PROCEEDINGS OF A JOINT WORKSHOP

An American Crisis

The Growing Absence of Black Men in Medicine and Science

The National Academies of SCIENCES • ENGINEERING • MEDICINE

The context of diversity

he term "diversity," which came about in connection with the passage of the U.S. Civil Rights Act of 1964, has been expanding to include an evergrowing list of identities—from race, gender, and sexual orientation to physical appearance, belief systems, thought styles, socioeconomic status, and rural/urban geographic location, among others. This is a welcome extension of representation, but this added texture has a downside—it threatens to muddle targets and obscure actions when achieving diversity is the goal. This consequence is particularly serious in the context of addressing equity for specific underrepresented racial and ethnic groups. Next week, the U.S. National Academies will convene the Roundtable

on Black Men and Black Women in Science, Engineering and Medicine to focus on confronting issues that threaten the future of Blacks broadly in science. Forging systemic changes that bring Black diversity at all education and career levels will hopefully bring racial equity to practices in these fields and in doing so, expand the benefits of science, engineering, and medicine to society.

There are unintended negative consequences of the expanded definition of diversity. With so many groups, success in achieving di-

versity is increasingly measured in a pick-and-choose manner, where progress is defined through any lens that shows success. Also, with so many groups, diversity is often described through the lens of gender, leaving other groups as seemingly less important, or unimportant. And with so many groups, it has become easier for diversity efforts to disregard the historical and present drivers of discrimination that concepts of diversity began with. In other words, the greater context of inclusion and equity can get lost, making strides to diversify meaningless. The latter point is particularly relevant to Blacks in the United States who have experienced slavery, legally enforced segregation and discrimination, and now battle conscious and unconscious racism, and mass incarceration. Institutionalized racism, past and present, has resulted in the disregard, disrespect, and dismissal of Black people from all walks of life, and this is true in science, engineering, and medicine.

These may be factors in the crisis-level changes seen across the academic landscape of Blacks in science, engineering, and medicine. For example, the number of Black males entering medical school between 2013 and 2014 in the United States was only 500, a historic low. Black men represented only 37.7% of Blacks entering medical school, which represented only 2.5% of all students entering medical school. This occurred during a historic increase in the number of medical schools in the nation. While this was happening at the trainee level, the U.S. National Academy of Medicine's most recent election in 2019 had no Black men in a class that recently increased by over 30% in size. Thus, there is a crisis taking place at all points in the medical educa-

"Embracing the

expanding definition

of diversity is easy,

but using the word

with focus...for achieving

diversity will

take great attention."

tional and career spectrum for this particular group.

In response to this downward trend of Blacks in science and medicine, a number of individuals, including me, convened a U.S. National Academies workshop in 2017 that focused specifically on the growing absence of Black men in medicine in the United States. The ideas became a blueprint for actions that address not only Black men in medicine, but also the trajectory for Black women, and issues in engineering and science overall.

Embracing the expanding def-

inition of diversity is easy, but using the word with focus so as not to weaken the paths for achieving diversity will take great attention. Next week, as leaders from academia, industry, government, foundations, and other nonprofits gather at the U.S. National Academy for this historic first meeting, the goal will be to begin to understand the barriers, explore opportunities, and develop actionable plans to increase the number of Blacks pursuing science, engineering, and medicine. The Roundtable will have a laser focus on racism and bias, early to graduate education, financing, public advocacy, mentorship, and mental health/behavioral factors. We're at the starting point of a roadmap that could potentially break cycles so rooted in the past for Blacks, and perhaps also help other groups navigate their pursuit of success in science too.

-Cato T. Laurencin



Cato T. Laurencin is the Albert and Wilda Van Dusen Distinguished Endowed Professor of Orthopaedic Surgery, and the chief executive officer of the Connecticut Convergence Institute for Translation in Regenerative Engineering at UConn Health, Farmington, Connecticut, USA. He is the University Professor at the University of Connecticut, Storrs. Connecticut, USA laurencin@uchc.edu

OTO: UCONN PHOT

10.1126/science.aba2319

..and with so many groups, it has become easier for diversity efforts to disregard the historical and present drivers of discrimination that concepts of diversity began with. In other words, the greater context of inclusion and equity can get lost, making strides to diversify meaningless. The latter point is particularly relevant to Blacks in the United States who have experienced slavery, legally enforced segregation and discrimination, and now battle conscious and unconscious racism, and mass incarceration. Institutionalized racism, past and present, has resulted in the disregard, disrespect, and dismissal of Black people from all walks of life, and this is true in science, engineering, and medicine.

ROUNDTABLE ON

BLACK MEN & BLACK WOMEN



IN SCIENCE, ENGINEERING, & MEDICINE

The National Academies of

SCIENCES ENGINEERING MEDICINE

The National Academies of SCIENCES • ENGINEERING • MEDICINE

Roundtable on Black Men and Black Women in Science, Engineering, and Medicine

Cato Laurencin, MD, PhD (NAE/NAM) (chair)*

University Professor

University of Connecticut

Albert and Wilda Van Dusen Distinguished Professor of Orthopaedic Surgery

Professor of Chemical, Materials and Biomolecular Engineering

Director

Raymond and Beverly Sackler Center for

Biomedical, Biological, Physical and Engineering Sciences

Chief Executive Officer

The Connecticut Convergence Institute for Translation in Regenerative Engineering

Olujimi Ajijola, MD, PhD

Assistant Professor of Medicine
UCLA Cardiac Arrhythmia Center
David Geffren School of Medicine at UCLA

Mark Alexander, PhD

Secretary

National Executive Committee, Health and Wellness 100 Black Men of America

Gilda Barabino, PhD (NAE)

Dean & Daniel and Frances Berg Professor Office of the Dean The City College of the CUNY

Cedric Bright, MD, FACP *

Associate Dean for Admissions Brody School of Medicine East Carolina University

L.D. Britt, MD, MPH, D.Sc (Hon), FACS (NAM)*

Henry Ford Professor and Edward J. Brickhouse Chairman Department of Surgery Eastern Virginia Medical School

Kimberly Bryant

Founder and Executive Director Black Girls CODE

Theodore Corbin, MD, MPP

Associate Professor of Emergency Medicine Drexel University

Andre Churchwell, MD

Chief Diversity Officer
Vanderbilt University Medical Center
Senior Associate Dean for Diversity Affairs
Vanderbilt University School of Medicine
Professor of Medicine (Cardiology)
Professor of Radiology and Radiological Sciences
Professor of Biomedical Engineering

George Q. Daley, MD, PhD (NAM)*

Dean of Faculty and Professor Harvard Medical School

Wayne Frederick, MD, MBA

President Howard University

Garth Graham, MD, MPH

President

Aetna Foundation

Paula T. Hammond, PhD (NAM/NAE)

David H. Koch Professor of Engineering Department Head Department of Chemical Engineering MIT

Evelynn Hammonds, PhD, MS (NAM)

Barbara Gutmann Rosenkrantz Professor of The History of Science Professor of African and African American Studies Chair, Dept of the History of Science Harvard University

^{*} denotes Steering Committee member

The National Academies of SCIENCES • ENGINEERING • MEDICINE

Ian Henry, PhD

Section Head, R&D Analytical Chemist Proctor and Gamble

Camara Phyllis Jones, MD, MPH, PhD

Senior Fellow
Satcher Health Leadership Institute and
Cardiovascular Research Institute
Adjunct Associate Professor
Dept of Community Health and Preventive Medicine
Morehouse School of Medicine
Adjunct Professor
Dept of Epidemiology
Dept of Behavioral Sciences and Health Education
Rollins School of Publi c Health
Emory University

Orlando Kirton, MD, FACS, MCCM, FCCP, MBA

Surgeon-in-Chief, Chairman of Surgery
Chief Division of General Surgery
Abington-Jefferson Health
Vice Chairman
Jefferson Health Enterprise Dept of Surgery
Professor of Surgery
Sidney Kimmel Medical College
Thomas Jefferson University

John Lumpkin, MD, MPH (NAM)

Senior Vice President Robert Wood Johnson Foundation

Shirley Malcom, PhD, MA (NAS)

Directorate for Education and HR Programs AAAS

Cora Bagley Marrett, MA, PhD

Emeritus Professor Department of Social Sciences University of Wisconsin-Madison

Alfred M. Mays, MS

Program Officer Burroughs Welcome Fund

Valerie Montgomery Rice, MD (NAM)

President and Dean
Office of the President and Dean
Morehouse School of Medicine

Randall C. Morgan, MD, MBA *

Executive Director
W. Montague Cobb/NMA Health Institute

Elizabeth Ofili, MD, MPH, FACC (NAM)*

Senior Associate Dean, Clinical Research Director Clinical Research Center Morehouse School of Medicine

Vivian W. Pinn, MD (NAM)*

Senior Scientist Emerita
Fogarty International Center
Former Director (Retired)
Office of Research on Women's Health
National Institutes of Health

Joan Y. Reede, MD, MS, MPH (NAM)

Dean for Diversity and Community Partenership Associate Professor of Medicine Dept of Medicine Harvard Medical School

Louis Sullivan, MD (NAM)*

President Emeritus Morehouse School of Medicine

Lamont R. Terrell, PhD

Head, R & D Talent and University Diversity GlaxoSmithKline

Hannah Valentine, MD, PhD

Chief Officer for Scientific Workforce Diversity NIH

^{*} denotes Steering Committee member

The National Academies of SCIENCES • ENGINEERING • MEDICINE

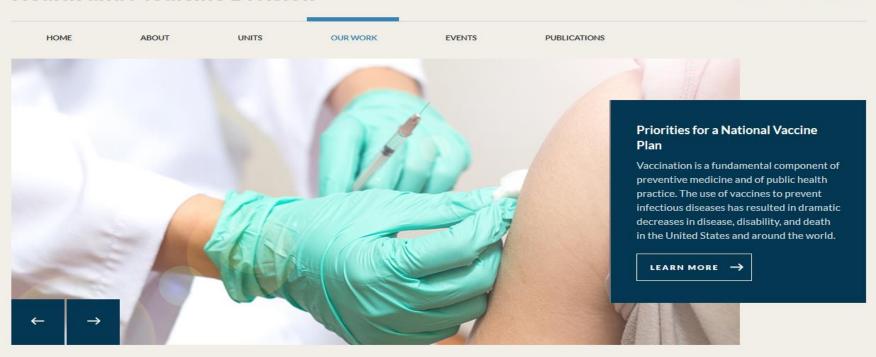
Clyde W. Yancy, MD, MSc, MACC, FAHA, MACP, FHFSA (NAM)

Vice Dean, Diversity and Inclusion Magerstadt Professor of Medicine Professor of Medical Social Sciences Chief, Division of Cardiology Feinberg School of Medicine Northwestern University Associate Director Bluhm Cardiovascular Institute Northwestern Memorial Hospital Deputy Editor JAMA Cardiology

^{*} denotes Steering Committee member

Health and Medicine Division





Featured

Our Response to COVID-19: A Message from the Presidents of the NAS, NAE, and NAM

The Presidents of the National Academies of Science, Engineering and Medicine issued a statement on the National Academies'

L COMP 46

Upcoming Events

9:30AM - 3:30PM (EST) WORKSHOP APR 13

MULTIDAY EVENT | APRIL 13-14, 2020

The Impacts of Racism and Bias on "Black" People Pursuing Careers in Science, Engineering, and Medicine: A Workshop

Our Work

- The Food and Nutrition Board 80th Anniversary Symposium
- > Office of Military and Veterans Health
- Current Issues in the Assessment of Respiratory Protective Devices: A Workshop
- > Incorporating Weight Management

THE IMPACTS **OF RACISM AND BIAS ON BLACK PEOPLE PURSUING CAREERS** IN SCIENCE, ENGINEERING, AND MEDICINE

The National Academies of SCIENCES • ENGINEERING • MEDICINE

April 13-14, 2020

The Impacts of Racism and Bias on "Black" People Pursuing Careers in Science, Engineering, and Medicine: A Workshop

This workshop examined the role of racism and bias in the decline of Black students in science, engineering, and medicine. The workshop explored the historical trends of the enrollment of Black students in medical and engineering schools and the sciences, discussing the impact of the Flexner report, the Bakke and Fischer decision, other court challenges, and the Supreme Court decisions regarding the use of race in admissions. Some of the questions participants considered were: What are the historical trends of Black faculty representation in science, engineering, and medicine? How does training on implicit and explicit bias mitigate the impacts of bias on Black students? Does explicit bias training combat the effects of racism and, if not, what else is needed?

Where are we headed now?

Diversity Inclusion Equity

Diversity Inclusion Equity Anti-Black Racism

ROUNDTABLE ON

BLACK MEN & BLACK WOMEN



IN SCIENCE, ENGINEERING, & MEDICINE

The National Academies of

SCIENCES ENGINEERING MEDICINE

Thank You