

## (.) pulse wave $^{2}$

## REPORT

## E OF CONTENTS

03
Executive Summary
04. Introduction

A1 Appendix

A2

A4

A7

A8

A13
Data Visualizations

A34
Question 10 Topic Modeling Results

A41
Data Tables

## BETTER TOGETHER

## EXECUTIVE

## SUMMARY

In the spring of 2020, Harvard Medical School (HMS) asked all faculty and trainees at HMSaffiliated hospitals and research institutions to share their perceptions about inclusion and belonging at HMS through a PulseWave 2 Survey". The goal was to take the "pulse" of the affiliate community to inform understanding of the perceived culture and climate.

The PulseWave 2 Survey, a unique collaborative endeavor undertaken by HMS and HMSaffiliate hospital and research institutions, was sent to greater than 19,000 faculty and trainees. Aggregate findings showed approximately three-quarters of respondents reported feeling like they belong at HMS. However, this sense of belonging was not shared equally by respondents of different demographic groups. Data showed that members of groups historically disadvantaged and/or underrepresented in medicine—such as those who identify as Black or African American, Hispanic or Latina/o/x, LGBTQ, women, or Muslim— reported lower positive feelings of inclusion and belonging at HMS.

In this report, we present the survey process and key findings. The Appendix provides methodology and reporting details; graphs and tables with aggregate results; and acknowledgements. Aggregate data are presented in ways that maintain confidentiality of individuals and institutions

Results from the HMS PulseWave 2 Survey will serve as a baseline for monitoring progress toward the HMS goal of inclusive excellence and for actualizing the commitment to diversity, equity, inclusion, and belonging outlined in the "Better Together" plan. It is important to recognize that there are members of the HMS community who do not experience the environment in the same way. There are individuals who feel less engaged, less included, and less like they belong. It is imperative that HMS intentionally advance a diverse, equitable and inclusive culture where barriers are removed and faculty and trainees are able to contribute, feel valued, and succeed.

[^0]
## INTRODUCTION

In the spring of 2020, faculty and trainees at HMS-affiliated hospitals and research institutions were invited to share their thoughts about the HMS culture and climate through a survey. The HMS PulseWave 2 Survey was designed to establish a baseline measure of perceptions about inclusion, belonging, and diversity. The goal was to inform ongoing and new efforts that would address identified gaps and areas of concern.

This work was rooted in the belief that we have much to learn from each other, action should be informed by data, and we each have a responsibility to move the school forward toward a culture that both embraces and exemplifies inclusive excellence.

The HMS PulseWave2 Survey was conducted in response to the HMS Task Force on Diversity and Inclusion report, "Better Together," which recommended that HMS take the "pulse" of its community around issues of diversity, equity, inclusion and belonging (DEIB); create opportunities for cross-institutional collaboration; and adopt an evidence-based, datainformed, quality-improvement approach to monitoring our DEIB efforts.

HMS Pulse Wave2 Survey was inspired by the Harvard University 2019 Pilot Pulse Survey on Inclusion \& Belonging. The questions were originally recommended by the Presidential Task Force on Inclusion and Belonging and based on current research measuring the constructs of inclusion and belonging. However, questions were adapted to be HMS-specific.

The three-minute, 10 -question survey asked participants to rate their feelings of belonging and inclusion at HMS. This included an open-ended question soliciting ideas for improvement, as well as a short (optional) demographic section. This collaborative effort involved the HMS-affiliated community. The task of reaching our faculty and trainees revealed the complexities of the HMS ecosystem and the richness of the different processes embedded in each institution.

The survey was administered in four waves between March and June of 2020. The commitment of liaisons and affiliate leadership to survey distribution and completion and attention of faculty and trainees is evidenced by the level of response during the critically challenging early months of the COVID-19 pandemic.

We thank the many faculty and trainees who paused, amid the COVID-19 pandemic and national unrest over racial injustice, to share their perceptions about inclusion and belonging. Now that the HMS community has spoken, it is time to respond. Our goal is inclusive excellence. HMS leadership remains committed to building an environment where all members of our community feel valued and can flourish.

Joan Y. Reede

## SURVEY PROCESS

The HMS PulseWave 2 Survey was modeled after the Harvard University Pilot Pulse Survey on Inclusion \& Belonging. The process was led by a committee of faculty and staff liaisons who were identified by leaders of HMS-affiliated hospitals and research institutions, and was staffed by the HMS Office for Diversity Inclusion \& Community Partnership (DICP). This committee was instrumental in modifying, reviewing, and piloting the survey, as well as working with colleagues to promote survey dissemination at their respective institutions.

The survey was distributed on a rolling basis by institution between February and June 2020. Over 10,000 clinical and research full- and part-time faculty and over 8,000 research and clinical trainees were asked to share their perceptions about inclusion and belonging at HMS.

The three-minute survey included 10 questions related to belonging, inclusion, social integration, and acceptance; meeting expectations and goals; respect and trust; and knowledge and skills. An optional demographic component sought to capture data on such areas as gender, race/ethnicity, sexual orientation, and religious affiliation. The overall participation rate of $24.9 \%$ included $32.5 \%$ for faculty and $13.5 \%$ for trainees. The faculty response rate at individual institutions ranged from $\sim 22 \%$ to $\sim 55 \%$.

This survey was a collaborative effort involving HMS-affiliated hospitals and research institutions, including: Beth Israel Deaconess Medical Center; Boston Children's Hospital; Brigham and Women's Hospital; Cambridge Health Alliance, Dana-Farber Cancer Institute; Harvard Pilgrim Health Care Institute/Department of Population Medicine; Hebrew SeniorLife; Joslin Diabetes Center; Massachusetts Eye and Ear; Massachusetts General Hospital; McLean Hospital; Mount Auburn Hospital; Spaulding Rehabilitation Hospital; and the Veterans Affairs Boston Healthcare System.

## KEY FINDINGS

- $74.1 \%$ of the faculty and trainees at HMS-affiliated institutions agreed with the statement, "I feel like I belong at Harvard Medical School." This included $14.9 \%$ who "strongly agree," $33.8 \%$ who "agree," and $25.4 \%$ who "somewhat agree."
- $14.8 \%$ of faculty and trainees at HMS-affiliated institutions disagreed with the statement, "I feel like I belong at Harvard Medical School." This included 1.7\% who "strongly disagree," $4.8 \%$ who "disagree," and $8 \%$ who "somewhat disagree." (The results omit the answer "neither agree nor disagree").
- Faculty and trainees at HMS-affiliated institutions reported similar overall agreement and disagreement with the statement, "I feel like I belong at Harvard Medical School." However, a larger percentage of faculty ( $15.6 \%$ ) responded "strongly agree" to the statement than trainees (12.7\%).
- $71.5 \%$ of self-identified "woman" respondents at HMS-affiliated institutions reported agreement with the statement, "I feel like I belong at Harvard Medical School.", compared to $78.8 \%$ of respondents who self-identified as "man".
- Respondents who identified as "Gay/Lesbian" reported $67.5 \%$ of agreement with the statement "I feel like I belong at Harvard Medical School.", while respondents who identify as "Heterosexual" reporting 75.7\% agreement.
- $56.5 \%$ of self-identified "woman" respondents reported agreement with the statement, "| receive meaningful recognition for doing good work at Harvard Medical School," compared to $63.4 \%$ of respondents who identified as "man".
- The statement with the most disagreement overall was, "I receive meaningful recognition for doing good work at Harvard Medical School.", with $29 \%$ of faculty and $15 \%$ of trainee respondents reporting disagreement.
- The statement with the highest overall agreement was, "I know what constitutes good performance in my role at Harvard Medical School.", with faculty and trainee respondents combined agreement at 79.9\%-79\% for faculty and $87 \%$ for trainees.
- Faculty from groups underrepresented in medicine were less likely to report agreement with the statement, "My relationships at Harvard Medical School are as satisfying as I would want them to be". Respondents self-identifying as "Hispanic or Latina/o/x" reported 53.6\% agreement, "Black or African American" 58\% agreement, and "Middle Eastern" 50\% agreement.
- Faculty with a "Chronic mental condition" or "Multiple" conditions reported 55\% and 52\% agreement, respectively, for the question, "My relationships at Harvard Medical School are as satisfying as I would want them to be." They also reported a $50 \%$ and $52 \%$, agreement respectively, for the question, "I receive meaningful recognition for doing good work at Harvard Medical School.
- Open-ended questioning gathered 956 comments from HMS-affiliate faculty and 210 from HMS-affiliate trainees. Computational topic modeling of faculty and trainees responses identified the following areas of focus:


## Faculty

- Institutional: focused on institutional policies and processes;
- Experiential: focused on how faculty perceive their experiences within the HMS environment;
- Practice: focused on actions by and interactions among faculty, administrators, and administration;
- Expression: focused on channels of communication and expression of diverse viewpoints and perspectives.


## Trainees

- Program: focused on experiences faced during the course of training;
- Mentorship: focused on the relationship between trainees and faculty;
- Leadership: focused on trainee perception of belonging in relation to leadership.


## LEADERSHIP RESPONSE

As Harvard Medical School leadership strives toward the goal of inclusive excellence, what we have learned from the Pulse Wave2 Survey will point us toward action. By leveraging our existing resources, HMS will work to make members of our community feel more included. For example, we will work to:

- Establish current survey results as a baseline. Conduct future surveys to monitor changes in perceptions of inclusion and belonging among HMS-affiliated faculty and trainees.
- Create focus groups to discuss results of survey, confirm findings, and identify opportunities for improvement.
- Review survey results with HMS-affiliated institutions and co-identify and co-develop policies, programs and practices that address inclusion and belonging.
- Leverage current HMS Office for Diversity Inclusion and Community Partnership (DICP) efforts and initiatives to respond to survey findings.
- Engage existing HMS Better Together DEI committees, including the Diversity and Inclusion Committee, Diversity Council, and the Quad Diversity Committee in the review of findings and recommendations for action.
- Intentionally include all members (students, trainees, faculty, staff, and administrators) of the HMS community in the cultural change process towards inclusive excellence.


# APPENDIX 

## A1

Appendix

A2
Methodology

A4
Survey Instrument

A7
Respondents by Faculty \& Trainee Status

A8
Acknowledgments

A13
Data Visualizations

A34
Question 10 Topic Modeling Results

## A41

Data Tables

## Survey Instrument \& Development

The HMS PulseWave 2 Survey was derived from the Harvard University Pilot Pulse Survey on Inclusion \& Belonging. A committee of liaisons from HMS-affiliates provided expertise in survey development, deployment, and analysis. They also identified faculty and staff within their institutions who provided additional insight and guidance. This resulted in a modification of the Harvard University Pilot Pulse Survey making it more specific to the HMS environment. Following pilot and revision, the survey was administered through a secure Qualtrics web link and optimized so that it could be completed successfully on mobile devices, tablets, laptops, and desktop computers. The Qualtrics platform allowed the creation of a unique and anonymous link, with the prevention of duplicate and spam submissions.

The survey had two components. The first consisted of nine questions in declarative statement form that asked for feedback on a seven-point Likert scale, ranging from "strongly disagree" to "strongly agree." An optional 10th question, sought additional feedback through open-ended unstructured text, which was analyzed using topic modeling algorithms. The ten questions covered five domains:

## Belongingness at Harvard Medical School

Q1: I feel like I belong at Harvard Medical School.

## Social Integration and Acceptance

Q2: My relationships at Harvard Medical School are as satisfying as I would want them to be. Q7: I feel comfortable expressing my opinions to others at Harvard Medical School.

## Growth and Recognition

Q4: The goals I have for myself are being met at Harvard Medical School.
Q6: I receive meaningful recognition for doing good work at Harvard Medical School.

## Respect and Trust

Q3: I feel like I can be my authentic self at Harvard Medical School.
Q8: I believe Harvard Medical School leadership will take appropriate action in response to incidents of harassment and discrimination.

## Knowledge and Skills

Q5: I know what constitutes good performance in my role at Harvard Medical School.
Q9: I have the skills to address hostile behavior that I witness.
The second component of the PulseWave 2 survey, an optional demographic section, consisted of ten questions that captured data on identity, such as gender, race/ethnicity, sexual orientation, and religion.

## Target Population

The HMS PulseWave 2 Survey focused on research and clinical faculty and trainees employed at HMS-affiliated hospitals and research institutions. Affiliate institutions were tasked with determining the most efficient, effective, and appropriate way to disseminate the survey to their faculty and trainees.

## Implementation

The implementation was multi-phased and took into consideration each affiliate's unique processes, procedures, and internal policies for survey administration and distribution. This required working closely with the PulseWave 2 survey liaison, information technology (IT) department, communications department, and other personnel. The survey was promoted through newsletters, email blasts, posters, meeting announcements, formal invitations, and other channels.

With more than 10,000 faculty and 8,000 trainees invited to participate, it was "live" at each institution for approximately three weeks and launch dates were staggered to allow flexibility. Of note, the PulseWave 2 survey rollout coincided with the Spring 2020 surge in COVID 19 cases in Massachusetts. This required timelines to be adjusted to meet institutional conditions.

## Analysis and Confidentiality

Analysis took the following items into consideration:

- Respondent names and specific job titles were not asked.
- Survey participants were asked to omit identifying information in open-text responses. Survey identifiers were removed during the data storage process.
- For both faculty and trainees, items with less than 30 respondents are not displayed.
- Reporting reflects the combined responses across HMS-affiliates, rather than by individual institution.
- The HMS DICP has sole access to the survey raw data.

For the following statements, please rate how strongly you agree or disagree.

1. I feel like I belong at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

2. My relationships at Harvard Medical School are as satisfying as I would want them to be.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

3. I feel like I can be my authentic self at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

4. The goals I have for myself are being met at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

5. I know what constitutes good performance in my role at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

6. I receive meaningful recognition for doing good work at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

7. I feel comfortable expressing my opinions to others at Harvard Medical School.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

8. I believe Harvard Medical School leadership will take appropriate action in response to incidents of harassment and discrimination.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

9. I have the skills to address hostile behavior that I witness.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Strongly | Disagree | Slightly | Neither Agree | Slightly | Agree | Strongly |
| Disagree |  | Disagree | nor Disagree | Agree |  | Agree |

10. [Optional:] Please suggest one or two concrete actions that you believe would improve the climate for all members of the Harvard Medical School community.

# Harvard Medical School Pulse Wave 2 Survey <br> Demographic Questionnaire 

1) What is your current appointment status at Harvard Medical School?

- Faculty
- Trainee - Clinical (e.g. Intern, Resident, Clinical Fellow)
- Trainee - Research (e.g. Research Fellow)

2) What is your current gender identity? (check all that apply)

- Woman
- Man
- Trans Man
- Trans Woman
- Genderqueer, non-binary, nonconforming or gender fluid
- Another identity: [open-ended]
- I prefer not to say
- Unsure

3) Which of the following best describes you? (check all that apply)

- American Indian or Alaskan Native
- Asian or Asian American
- Black or African American
- Hispanic or Latina/o/x
- Middle Eastern
- Native Hawaiian or other Pacific Islander
- White
- Other: [open-ended]
- I prefer not to say

4) Which best describes your sexual orientation?

- Bisexual
- Gay
- Lesbian
- Heterosexual
- Pansexual
- Another orientation: [open-ended]
- I prefer not to say
- Unsure

5) Which of the following degrees have you completed? (check all that apply)

- Doctoral degree
- Professional degree (e.g., medical or dental)
- Other: [open-ended]

6) Do you identify with any of the following? (Mark all that apply)

- Learning disability
- Attention Deficit/Hyperactivity Disorder
- Autism Spectrum Disorder
- Mobility-related disability (e.g., spinal cord injury, muscular dystrophy, etc.)
- Sensory disability (e.g., hard of hearing, low vision, etc.)
- Chronic mental health condition (e.g., depression, PTSD, anxiety disorder, etc.)
- Chronic medical condition (e.g., cystic fibrosis, diabetes, chronic pain, etc.)
- Other disability, functional impairment, or chronic condition
- None of the above

7) What is the highest level of education completed by any of your parents or guardians?

- Elementary school
- Middle school
- High school / Equivalency or GED
- Technical or Trade School Certificate
- Associates Degree / Some college
- Bachelor's degree
- Master's degree
- Doctoral degree
- Professional degree (e.g., medical or legal degree)
- I prefer not to say

8) When it comes to politics, where would you place yourself on this scale?

- 1 - Very conservative
- 2-Conservative
- 3-Slightly conservative
- 4 - Moderate, middle of the road
- 5 - Slightly liberal
- 6 -Liberal
- 7 - Very liberal
- Other: [open-ended]
- I prefer not to say

9) Which best describes your religious preference? (check all that apply)

- Buddhist
- Hindu
- Jewish
- Mormon
- Muslim
- Protestant
- Roman Catholic
- Another preference: [open-ended]
- No religion
- I prefer not to say

10) How often do you attend religious services?

- Never
- Once or twice a year
- Several times a year
- 1-3 times a month
- Once a week
- Several times a week
- I prefer not to say


## Respondents by Faculty \& Trainee Status

| Category | N | Surveys Completed | Response Rate |
| :---: | :---: | :---: | :---: |
| Faculty ${ }^{1}$ | 10,265 | 3,340 | 32.5\% |
| Trainee ${ }^{2}$ | 8,017 | 1,085 | 13.5\% |
| No Answer ${ }^{3}$ | - | 133 | - |
| Total | 18,282 | 4,558 | 24.9\% |
| Note: |  |  |  |
| ${ }^{1}$ Includes affiliate clinical and research faculty at the rank of Instructor, Assistant, Associate, and Full Professor |  |  |  |
| ${ }^{2}$ Includes affiliate clinical and research trainees |  |  |  |
| ${ }^{3}$ Includes respondents that did not identify their HMS affiliate role |  |  |  |

The inaugural HMS PulseWave 2 Survey was made possible with the support and guidance of HMS-affiliate institutional leaders, liaison committee members, faculty and staff contributors. We thank each for their commitment to diversity and inclusion, for the offering of their expertise and time

## HMS Affiliated Hospital and Research Institutional Leaders ${ }^{2}$

John Christopher Bradley, MD
Chief of Psychiatry, VA Boston Healthcare System
Associate Professor of Psychiatry, HMS

## Kevin Churchwell, MD

President and CEO, Boston Children's Hospital
Robert and Dana Smith Associate Professor of Anesthesia, HMS

## Jeanette Clough

CEO and President, Mount Auburn Hospital

## John Fernandez

President, Massachusetts Eye and Ear

## Laurie Glimcher, MD

President and CEO, Dana-Farber Cancer Institute
Richard and Susan Smith Professor of Medicine, HMS

## Peter Healy

President, Beth Israel Deaconess Medical Center

## Roberta Herman, MD

President and CEO, Joslin Diabetes Center
Elizabeth Nabel, MD
President, Brigham and Women's Hospital
Professor of Medicine, HMS

## Richard Platt, MD, MSc

Chair, Department of Population Medicine (DPM), Harvard Pilgrim Health Care Institute, HMS

## Scott L. Rauch, MD

President, Psychiatrist in Chief, McLean Hospital
Professor of Psychiatry, HMS
Assaad Sayah, MD, FACEP
CEO, Cambridge Health Alliance
Assistant Professor of Emergency Medicine, HMS
Peter Slavin, MD
President, Massachusetts General Hospital
Professor of Health Care Policy

## David Storto

President, Spaulding Rehabilitation Hospital

## Louis J. Woolf

President and Chief Executive Officer, Hebrew SeniorLife

## Liaison Committee ${ }^{3}$

Aalok V. Agarwala, MD, MBA
Chief Medical Officer, Mass Eye and Ear
Assistant Professor of Anaesthesia, HMS
Grace Chang, MD
Head, Department of Psychiatry, VA Boston Healthcare System Professor of Psychiatry, HMS

Peter Clardy, MD
Interim Chair, Department of Medicine, Mount Auburn Hospital
Assistant Professor of Medicine, HMS
Marcela Del Carmen, MD, MPH
Chief Medical Officer, Massachusetts General Physicians Organization Professor of Obstetrics, Gynecology and Reproductive Biology, HMS

Tabitha Fineburg, MHA, MSEd
Administrative Director for Academic Programs, Hebrew SeniorLife

Debra Fletcher, SHRM-SCP
Sr. Director, Human Resources, Joslin Diabetes Center
Albert M. Galaburda, MD
Director, Office of Diversity, Inclusion, and Career Advancements, Beth Israel Deaconess Medical Center
Emily Fisher Landau Professor of Neurology, HMS

## Alison Galbraith, MD, MPH

Associate Professor, Department of Population Medicine (DPM), Harvard Pilgrim Health Care Institute, HMS

## Shelly Greenfield, MD, MPH

Chief Academic Officer, McLean Hospital
Professor of Psychiatry, HMS

## Oswald ("Oz") Mondejar

Senior Vice President of Mission and Advocacy for Partners Continuing Care, Inc., Spaulding Rehabilitation Hospital

## Nawal Nour, MD, MPH

Chief Diversity and Inclusion Officer for Faculty, Trainees and Students, Brigham and Women's Hospital
Kate Macy Ladd Associate Professor of Obstetrics, Gynecology and Reproductive Biology, HMS

## Christine Power

Director, Office for Faculty Development, Professionalism and Inclusion, Dana-Farber Cancer Institute

Valerie L. Ward, MD, MPH<br>Medical Director, Office of Health Equity and Inclusion, Boston Children's Hospital Assistant Professor of Radiology, HMS<br>\section*{Debra. F Weinstein, MD}<br>Vice President, Graduate Medical Education, Partners Healthcare<br>Associate Professor of Medicine, HMS<br>Gyongyi Szabo, MD, PhD<br>Chief Academic Officer, Beth Israel Deaconess Medical Center Professor of Medicine and Faculty Dean for Academic Affairs, HMS<br>\section*{Connie Young}<br>Chief of Staff, Cambridge Health Alliance

## Contributors ${ }^{4}$

## Neel Chaudhury

Senior Director of Administration \& Operations, Office for Diversity, Inclusion and Belonging (ODIB), Harvard University

## Amine Dahab

Administrative Director, Spaulding Rehabilitation Hospital

## Karen Donelan, ScD, EdM

Senior Scientist, Health Policy Research Center, The Mongan Institute
Associate Professor of Medicine, HMS

## Tina Gelsomino

Director, Center for Diversity \& Inclusion, Brigham and Women's Hospital

## Monica King

Continuing Medical Education Coordinator, Mount Auburn Hospital

## Sara Lehrhoff

Director of Physician Programs, Massachusetts General Hospital

## Jaclyn Mallard, PhD

Research Program Manager, Office of the Chief Academic Officer, Beth Israel Deaconess Medical Center

Elena Olson, JD
Executive Director, Center for Diversity and Inclusion, Massachusetts General Hospital

## Caroline Rotondi

Assistant Director, Office of the Chief Academic Officer, McLean Hospital

## Shiv T. Sehra, MD

Interim Chair, Department of Medicine, Mount Auburn Hospital
Assistant Professor of Medicine, HMS

## Carrie Tibbles, MD

Director of Graduate Medical Education, Beth Israel Deaconess Medical Center Assistant Professor of Emergency Medicine, HMS

4

[^1]
# Sara Toomey, MD, MPhil, MPH, MSc 

Chief Experience Officer, Boston Children's Hospital
Associate Professor of Pediatrics, HMS

## Albert Wang

Associate Director of Institutional Research for Analytics, Office of Institutional Research (OIR), Harvard University

# HMS Office for Diversity Inclusion and Community Partnership (DICP) 

Joan Reede, MD, MS, MPH, MBA
Dean for Diversity and Community Partnership, HMS
Professor of Medicine, HMS

Aljani Stanley
Director of Administration, DICP, HMS

Mostafa Amini
Data Scientist, DICP, HMS

## Ferhan Gomulu

Communication and Data Base Coordinator, DICP, HMS

Leah Fygetakis, PhD
Manager, LGBT Programs, DICP, HMS

Combined Faculty \& Trainee Response, Question 1
"I feel like I belong at Harvard Medical School"


Combined Faculty \& Trainee Response, Questions 1-9


Combined Faculty \＆Trainee \％Agree by Subgroup：＂I feel like I belong at Harvard Medical School＂

Overall
74．2\％

Woman
离
© Man
Aggregate＊
Asian or Asian American 76．4\％
Black or African American 67．1\％
Hispanic or Latina／o／x
镸 Middle Eastern
区 White
Two or more
Aggregate＊

71．5\％
78．8\％

## 40．0\％

## 69．6\％

66．7\％
76．7\％

## 70．9\％

67．6\％

Combined Faculty \& Trainee \% Agree by Subgroup: "I feel like I belong at Harvard Medical School"


[^2]Combined Faculty \& Trainee \% Agree by Subgroup: "I feel like I belong at Harvard Medical School"


Combined Faculty \& Trainee \% Agree by Subgroup: "I feel like I belong at Harvard Medical School"

Very conservative
Conservative
$\stackrel{\circ}{\mathrm{N}}$ Slightly conservative
$\stackrel{5}{5}$ Moderate
흠 Slightly liberal
Liberal
Very liberal
Buddhist
Hindu
Jewish
.
흘 Protestant
Roman Catholic
No religion
Aggregate*

[^3]Combined Faculty \& Trainee \% Agree by Subgroup: "I feel like I belong at Harvard Medical School"

Never

Once or twice a year
75.3\%


Several times a week

Faculty or Trainee \% Agree by Race/Ethnicity Q1-Q5

|  |  | Faculty | Trainee |
| :---: | :---: | :---: | :---: |
| 1. I feel like I belong at Harvard Medical School. | Asian or Asian American | 76\% | 77\% |
|  | Black or African American | 69\% | 63\% |
|  | Hispanic or Latina/o/x | 68\% | 72\% |
|  | Middle Eastern | 67\% | 67\% |
|  | White | 76\% | 82\% |
|  | Two or more | 73\% | 167\% |
|  | Aggregate* | 66\% | 71\% |
| 2. My relationships at Harvard Medical School are as satisfying as I would want them to be. | Asian or Asian American Black or African American Hispanic or Latina/o/x Middle Eastern | 63\% | 72\% |
|  |  | 58\% | 60\% |
|  |  | 54\% | 68\% |
|  |  | 50\% | 62\% |
|  | White | 66\% | 73\% |
|  | Two or more | 61\% | 67\% |
|  | Aggregate* | 55\% | 71\% |
| 3. I feel like I can be my authentic self at Harvard Medical School. | Asian or Asian American Black or African American Hispanic or Latina/o/x | 66\% | 77\% |
|  |  | 50\% | 56\% |
|  |  | 59\% | 69\% |
|  | Middle Eastern | 68\% | 59\% |
|  | White | 71\% | 80\% |
|  | Two or more | 65\% | 70\% |
|  | Aggregate* | 160\% | 62\% |
| 4. The goals I have for myself are being met at Harvard Medical School. | Asian or Asian American Black or African American Hispanic or Latina/o/x | 66\% | 80\% |
|  |  | 56\% | 77\% |
|  |  | 60\% | 74\% |
|  | Middle Eastern | 67\% | 74\% |
|  | White | 69\% | 83\% |
|  | Two or more | 66\% | 86\% |
|  | Aggregate* | 57\% | 71\% |
| 5. I know what constitutes good performance in my role at Harvard Medical School. | Asian or Asian American Black or African American Hispanic or Latina/o/x | 75\% | 87\% |
|  |  | 72\% | 6\% |
|  |  | $\square 70 \%$ | 83\% |
|  | Middle Eastern | 77\% | - 77\% |
|  | White | 81\% | 88\% |
|  | Two or more Aggregate* | 80\% $79 \%$ | 71\% $81 \%$ |

[^4]5. "\% Agre" "calculation includes 'Somewhat agree, 'Agree,', or 'Strongly agre'
6. Race Aggregate includes: "American Indian or Alaskan Native","Native Hawaiian or Other Pacifici Islander", and "Other".

## Faculty or Trainee \% Agree by Race/Ethnicity Q6-Q9



Faculty or Trainee \% Agree by Gender Identity Q1- Q9


[^5]Faculty or Trainee \% Agree by Sexual Orientation Q1- Q9

|  |  | Faculty | Trainee |
| :---: | :---: | :---: | :---: |
| 1. I feel like I belong at Harvard Medical School. | Bisexual | 73\% | 88\% |
|  | Gay/Lesbian | 65\% | 72\% |
|  | Heterosexual | 75\% | 77\% |
|  | Aggregate* | 42\% | 67\% |
| 2. My relationships at Harvard Medical School are as satisfying as I would want them to be. | Bisexual | 59\% | 91\% |
|  | Gay/Lesbian | 150\% | 68\% |
|  | Heterosexual | 64\% | 71\% |
|  | Aggregate* | 33\% | 60\% |
| 3. I feel like I can be my authentic self at Harvard Medical School. | Bisexual | 65\% | 71\% |
|  | Gay/Lesbian | 56\% | 76\% |
|  | Heterosexual | 69\% | 75\% |
|  | Aggregate* | 50\% | 67\% |
| 4. The goals I have for myself are being met at Harvard Medical School. | Bisexual | 68\% | 82\% |
|  | Gay/Lesbian | 56\% | 80\% |
|  | Heterosexual | 68\% | 81\% |
|  | Aggregate* | 50\% | 67\% |
| 5. I know what constitutes good performance in my role at Harvard Medical School. | Bisexual | 86\% | 91\% |
|  | Gay/Lesbian | 71\% | 88\% |
|  | Heterosexual | 79\% | 86\% |
|  | Aggregate* | 67\% | 87\% |
| 6. I receive meaningful recognition for doing good work at Harvard Medical School. | Bisexual | 54\% | 71\% |
|  | Gay/Lesbian | 48\% | 76\% |
|  | Heterosexual Aggregate* | 50\% $56 \%$ | 67\% ${ }^{\text {72\% }}$ |
| 7. I feel comfortable expressing my opinions to others at Harvard Medical School. | Bisexual | 74\% | 79\% |
|  | Gay/Lesbian | 61\% | 68\% |
|  | Heterosexual | 67\% | 75\% |
|  | Aggregate* | 58\% | 167\% |
| 8. I believe Harvard Medical School leadership will take appropriate action in response to incidents of harassment an.. | Bisexual | 69\% | 74\% |
|  | Gay/Lesbian | 61\% | 66\% |
|  | Heterosexual | 50\% 72\% | 67\% 76\% |
|  | Aggregate* | 50\% | 67\% |
| 9. I have the skills to address hostile behavior that I witness. | Bisexual | 73\% | 76\% |
|  | Gay/Lesbian | $\square 75 \%$ | 70\% |
|  | Heterosexual Aggregate* | 76\% | 67\% ${ }^{78 \%}$ |

[^6]Faculty or Trainee \% Agree by Education Q1- Q9


[^7]2. Results omit category of "Other"
3. "Faculty" refers to both Clinical and research faculty across HMS affiliate institutions
4."Trainee" refers to both
5. "\% Agree" calculation includes 'Somewhat agree,' 'Agree,' or 'Strongly agree'

## Faculty or Trainee \% Agree by Disability Q1- Q5



[^8]

## Faculty or Trainee \% Agree by Disability Q6 - Q9



[^9]5." "\%\% Agree" "alculation includes 'Somewhat agree,', Agreee, 'or 'Strongly agree'
6. Disability Aggregate includes: "Autism Spectrum Disorder", "Learning Disability", "Mobility-related disability", "Other disability, functional impairment, or chronic condition", and "Sensory disability".

Faculty or Trainee \% Agree by Parent Education Q1- Q5


[^10]Faculty or Trainee \% Agree by Parent Education Q6- Q9


[^11]
## Faculty or Trainee \% Agree by Political Scale Q1- Q9



## Faculty or Trainee \% Agree by Religious Preference Q1- Q5



## Faculty or Trainee \% Agree by Religious Preference Q6 - Q9

|  |  | Faculty | Trainee |
| :---: | :---: | :---: | :---: |
| 6. I receive meaningful recognition for | Hindu | 52\% | 71\% |
| doing good work at Harvard Medical | Jewish | 59\% | 69\% |
| School. | Muslim | 39\% | 67\% |
|  | Protestant | 58\% | 74\% |
|  | Roman Catholic | 56\% | 68\% |
|  | No religion | 55\% | 76\% |
|  | Aggregate* | 58\% | 58\% |
| 7. I feel comfortable expressing my | Hindu | 65\% | 74\% |
| opinions to others at Harvard Medical | Jewish | 71\% | 80\% |
| School. | Muslim | - $63 \%$ | 71\% |
|  | Protestant | -69\% | 69\% |
|  | Roman Catholic | 66\% | 73\% |
|  | No religion | 66\% | 78\% |
|  | Aggregate* | 77\% | 53\% |
| 8. I believe Harvard Medical School | Hindu | 74\% | 78\% |
| leadership will take appropriate action in | Jewish | 78\% | 72\% |
| response to incidents of harassment and | Muslim | 63\% | 71\% |
|  | Protestant | 72\% | 73\% |
|  | Roman Catholic | 71\% | 79\% |
|  | No religion | 69\% | 73\% |
|  | Aggregate* | 75\% | 47\% |
| 9. I have the skills to address hostile | Hindu | 73\% | 78\% |
| behavior that I witness. | Jewish | 80\% | 79\% |
|  | Muslim | 72\% | 86\% |
|  | Protestant | 74\% | 81\% |
|  | Roman Catholic | 77\% | 74\% |
|  | No religion | 74\% | 75\% |
|  | Aggregate* | 88\% | 63\% |

[^12]
## Faculty or Trainee \% Agree by Religious Service Q1- Q5



[^13]Faculty or Trainee \% Agree by Religious Service Q6- Q9


[^14]Question 10: "Please suggest one or two concrete actions that you believe would improve the climate for all members of the Harvard Medical School community."

Analysis of Question 10 faculty responses using computational topic modeling derived 4 topics:

## Topic 1: Institutional Focus

## Top Keywords:

$$
\begin{gathered}
\text { Behavior } \\
\text { WomanSupport Faculty } \\
\text { Minority Leadership People } \\
\text { Student StaffCommunity } \\
\text { Position } \\
\text { Hospital }
\end{gathered}
$$

## Faculty Select Comments

1. "Problem is that HMS is such a heterogeneous entity that it would be hard to know where to begin. Clearly there is a vast chasm before the med school "proper," (i.e., real Harvard) and the hospitals. The curriculum was a mess before the pandemic--did it really go from new pathways to pathways with cropping out large amounts of physiology/pharmacology and basic mechanisms. There is egregious lack of mentoring in some hospitals. I do not know the remedies, unfortunately."
2. "a) Salaries adaptations: Increases in post-docs and junior faculty members (Instructor, Assistants), reductions or no increase in full Professors. More and better starting packages for new faculty members. b) Increase meritocracy in promotions."
3. "Greater recognition of clinical and teaching accomplishments and contributions of faculty. Currently, the climate seems mostly in favor of research and less within the realm of teaching or clinical innovation. 2. Room for academic promotion of women and minorities who remain under represented within leadership roles and within the tenure track system (at ranks above instructor)."

## Topic 2 : Experiential Focus

## Top Keywords:

## Department People speak Environment ActionDiversity Inclusion $\underset{\text { Report }}{\text { Race }_{\text {Genderconcern }}}$ Experience

## Faculty Select Comments

1. "I have a faculty position at the medical school and I am involved with training but this survey makes me realize that I really don't think about my relationship with the medical school---l think about the issues mentioned above in relation to the institution where I work"
2. "teaching faculty are not prepared to cope with aggressive behavior from students. students do not understand that HMS does not employ nearly any of the teaching faculty and faculty are practically volunteering since hours worked are only compensated by hours of face time. students want faculty to be all things to all people. teaching faculty feel expendable. also, HMS does not do anything to make faculty feel like they are part of something. very few teaching faculty are on the website. there is no central "home" webpage where faculty can "go" to see what is going on."
3. "Broaden the definitions of success for Harvard faculty. If success is only measured in terms of research/publications/grants, then a diverse faculty will stagnate or leave. 2. Be more inclusive in search committees, even (or especially) for Professors, and especially for Department Chairs of clinical departments. The idea that only Professors can sit on search committees for Professors means like is choosing like. It is the definition of a selfperpetuating, highly hierarchical power structure. And token women or URiM committee members aren't sufficient."

## Topic 3 : Process Focus

## Top Keywords:

## Value SystemHospital Faculty WorkPromotionResearch AcademicIncrease Clinical Base Process Clinical

## Faculty Select Comments

1. "Because sometimes there could be micro aggressions at work and in the academic community at the hospital where I belong, that I cannot talk about due to fear of repercussions, bullying and dismissive attitude, I think there should be some mechanisms in place where leaders should be evaluated by employees and subordinates In anonymous surveys. Nobody has ever asked me to evaluate my supervisors where I work for the whole time here. It is an area that is not addressed, and I have seen some leaders freely acting as if they are kings in the departments that they lead, in a very toxic environment, where just a very benign difference in opinions leads often to singling out and never being considered as a real contributor in the department. I think there should be another supervisory authority over leaders, who can check the work of the leaders with the employees every once in a while in order not to miss out on any inappropriate and unethical leadership."
2. "Promote acceptance and tolerance of different viewpoints. Sometimes it seems the pendulum swings so far to one side that people who in good faith espouse differing opinions are automatically branded as intolerant or bigoted and "inclusion" or "diversity" only applies to certain perspectives and not others."
3. "I would recommend publication of a clear statement of diversity inclusiveness and justice for the Medical School that recognizes the need to address the social determinants of health and the negative effects of racism, sexism, and all "other-isms" on our well-being as a community of scholars and healers. This should not only be stated as an ethical principle, but codified in bylaws. I would also recommend a clear statement of sanctions and penalties for violating the principles of inclusiveness."

## Topic 4 : Expression Focus

## Top Keywords:

## QuestionWelcome

$$
\begin{aligned}
& \text { Viewpoint chief Conservative } \\
& \text { Black Political Difference } \\
& \text { Deal View Opinion Feel }
\end{aligned}
$$

## Faculty Select Comments

1. "The community has become increasingly intolerant of non-liberal points of view. As a liberal, I need people to be comfortable expressing viewpoints that are not in agreement with the orthodox liberal dogma that of the med school and university. No one should be punished for ANY point of view."
2. "Leave politics out of everything (emails, etc.)...even subtle references. Especially now, politics is divisive and we need a sense of community. It doesn't matter whether I'm liberal or conservative, I don't want to hear about politics at work. Plus, I would bet that there are conservatives at Harvard who feel very much in the minority in liberal academia and by politics being infused at work, they may feel this is not an inclusive environment. Harvard goes out of their way to be inclusive of those of different genders, different races, etc. but not different political views. A good first step is to be conscious to just leave politics, even subtle undertones of it, out of communications and other forums."
3. "We have swung the pendulum to the point of silencing the voices of people with different views, whether politically or otherwise from the mainstream. Men are being censored or self-censored tremendously. The current movement, which I support, of acknowledging challenges facing women/minorities and seeking to root out offenders has been hijacked by people seeking to silence others with different views. Any suggestion that the current direction that things are going is not ideal is seen as misogynistic and predatory. This is not the right environment for thoughtful academic discussion and debate."

Question 10: "Please suggest one or two concrete actions that you believe would improve the climate for all members of the Harvard Medical School community."

Analysis of Question 10 trainee responses using computational topic modeling derived 3 topics:

## Topic 1: Program Focus

## Top Keywords:

$$
\begin{array}{cc}
\text { Would } & \text { Increase } \\
\text { AddresspeopleDiversity } \\
\text { Training } & \text { Transparency } \\
\text { Faculty } & \text { Program }
\end{array}
$$

## Trainee Select Comments

1. "Min training at the start of each year that teaches any trainees patient facing how to respond to racist sexist comments from patients. This is not an uncommon experience and the best of us freeze up. Could use training that allows us to practice what and how to say something."
2. "Workshop for medical trainees in how to deal with bias/hostility etc. in everyday practice."
3. "While seemingly not at the forefront of general thinking along these lines I would suggest that creating an atmosphere of inclusiveness and tolerance of those with a range of religious backgrounds all encompassing is an area that could use some work."

## Topic 2 : Mentorship Focus

## Top Keywords:

$$
\begin{aligned}
& \text { RecruitClass Improve } \\
& \text { BlackResidentDedicate } \\
& \text { CandidateGive Mentor } \\
& \text { Famous }
\end{aligned}
$$

## Trainee Select Comments

1. "Some PIs need to learn how to motivate their students and postdocs. It would be very helpful if HMS could implement a more inclusive academic and public policy to promote the carriers [sic] of students and postdocs from underrepresented communities such us latinos, indigenous, black, etc. For instance, to use Harvard's web sites and awards to highlight their carriers [sic] and from where they are coming from, this will definitely help them to promote their carriers to better impact the live of other people around the world, as well as the scientific development of their home countries."
2. "Increasing diversity within Harvard Medical School community is not enough if different group of people don't interact with each other. Let's be honest here, people feel more comfortable among others that are from similar background/race/culture/country etc. Maybe 1) setup a platform that encourage and allow people from different background to interact with each other comfortably? Like give someone an option to be a mentor/mentee with someone different from themselves? 2) Hire/promote people of colour into leadership position ?"
3. "There should be a better way that residents and fellows can communicate with educational leaders about the leadership and teaching of various attendings. One action would be to meet after either every or every other rotation (so there are 2 trainees who have completed the rotation) with one of the leaders (eg program director) and discuss if there could be ways to improve the rotation from the perspective of trainee-attending interaction, teaching, and mentorship."

## Topic 3 : Leadership Focus

## Top Keywords:

# Foster <br> OpinionSense Integration Activity Faculty Behavior PurposeRecognition <br> <br> Power 

 <br> <br> Power}

## Trainee Select Comments

1. "Leaders should strive to ensure openness to diverse points of view and dissenting opinions. This is done by fostering dialogue rather than taking sides. There is a difference between psychological "safety" and psychological "comfort." Psychological safety is the feeling that we can speak our mind without fear of retribution--physically, physiologically, mentally, emotionally, and socially. It's about giving candid feedback, openly admitting mistakes, and learning from each other. The foundation of a "psychologically safe" culture is trust, which allows individuals to show vulnerability, thus revealing their true selves, thoughts, and ideas. Vulnerability is inherently uncomfortable, yet it is essential for learning and growth. When discussing polarizing topics, it is important for Leaders to facilitate conversations in a responsible way--this means modeling respectful behavior, leading through discomfort, encouraging dialogue, and actively seeking divergent points of view. Because there is no growth in the comfort zone."
2. "As a female resident, I am more prone to be written up for actions that will normally be ignored for my male peers. The leadership in my department is not aware of this and treats us differently compared to our male colleagues."
3. "Involve fellows from the same subspecialty across HMS in integration activities. Invest in starter packages for young URM faculty trying to go into a physician-scientist pathway."

## Table 1.1: Overall agreement per question

1. I feel like I belong at Harvard Medical School.
2. My relationships at Harvard Medical School are as satisfying as I would want them to be.
3. I feel like I can be my authentic self at Harvard Medical School.
4. The goals I have for myself are being met at Harvard Medical School.
5. I know what constitutes good performance in my role at Harvard Medical School.
6. I receive meaningful recognition for doing good work at Harvard Medical School.
7. I feel comfortable expressing my opinions to others at Harvard Medical School.
8. I believe Harvard Medical School leadership will take appropriate action in response to incidents of harassment and discrimination.
9. I have the skills to address hostile behavior that I witness.
Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis $=$ 'Somewhat disagree', 'Disagree', or 'Strongly disagree'.
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \% 'Neither agree nor disagree.'

| N | \% Agr | \% Dis |
| :---: | :---: | :---: |
| 4,558 | 74.2\% | 14.9\% |
| 4,558 | 64.1\% | 22.6\% |
| 4,558 | 68.3\% | 19.3\% |
| 4,558 | 69.3\% | 18.0\% |
| 4,558 | 79.9\% | 10.6\% |
| 4,558 | 59.2\% | 25.7\% |
| 4,558 | 67.6\% | 19.9\% |
| 4,558 | 71.1\% | 14.2\% |
| 4,558 | 75.2\% | 13.6\% |

Table 2.1: I feel like I belong at Harvard Medical School

|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |


| Jewish | $76.5 \%$ | $12.5 \%$ | $81.7 \%$ | $9.9 \%$ |
| :--- | :--- | :--- | :--- | :--- |
| Muslim | $63.0 \%$ | $18.5 \%$ | $81.0 \%$ | $11.9 \%$ |
| No Religion | $73.3 \%$ | $15.4 \%$ | $77.0 \%$ | $13.6 \%$ |
| Protestant | $78.0 \%$ | $13.1 \%$ | $79.0 \%$ | $13.7 \%$ |
| Roman Catholic | $74.2 \%$ | $14.3 \%$ | $74.3 \%$ | $15.0 \%$ |
| Other | $78.2 \%$ | $12.8 \%$ | $73.0 \%$ | $14.3 \%$ |
| Aggregated* | $72.2 \%$ | $19.4 \%$ | $76.7 \%$ | $0.0 \%$ |
| Frequency of attendance at religious service |  |  | $77.9 \%$ |  |
| Never | $74.4 \%$ | $14.2 \%$ | $74.4 \%$ | $12.9 \%$ |
| Once or twice a year | $75.5 \%$ | $13.1 \%$ | $14.6 \%$ |  |
| Several times a year | $75.7 \%$ | $14.5 \%$ | $76.6 \%$ | $14.9 \%$ |
| $1-3$ times a month | $77.2 \%$ | $15.4 \%$ | $79.0 \%$ | $14.1 \%$ |
| Once a week | $75.4 \%$ | $12.0 \%$ | $100.0 \%$ |  |
| Several times a week | $59.5 \%$ | $24.3 \%$ | $0.0 \%$ |  |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.2: My relationships at Harvard Medical School are as satisfying as I would want them to be

|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |


| Jewish | 66.2\% | 21.7\% | 74.6\% | 9.9\% |
| :---: | :---: | :---: | :---: | :---: |
| Muslim | 53.7\% | 27.8\% | 64.3\% | 28.6\% |
| No Religion | 61.3\% | 25.4\% | 71.0\% | 16.8\% |
| Protestant | 67.0\% | 19.6\% | 73.4\% | 16.1\% |
| Roman Catholic | 64.0\% | 22.9\% | 68.3\% | 21.6\% |
| Other | 66.4\% | 24.2\% | 65.1\% | 27.0\% |
| Aggregated* | 61.1\% | 19.4\% | 73.3\% | 13.3\% |
| Frequency of attendance at religious service |  |  |  |  |
| Never | 61.8\% | 24.5\% | 72.0\% | 17.4\% |
| Once or twice a year | 64.7\% | 20.8\% | 66.9\% | 20.1\% |
| Several times a year | 65.4\% | 23.6\% | 70.1\% | 16.2\% |
| 1-3 times a month | 64.7\% | 23.9\% | 70.3\% | 15.6\% |
| Once a week | 63.4\% | 24.3\% | 72.8\% | 22.2\% |
| Several times a week | 62.2\% | 32.4\% | 75.0\% | 15.0\% |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.3: I feel like I can be my authentic self at Harvard Medical School

|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |


| Jewish | $73.3 \%$ | $13.9 \%$ | $80.3 \%$ | $14.1 \%$ |
| :--- | :--- | :--- | :--- | :--- |
| Muslim | $68.5 \%$ | $25.9 \%$ | $66.7 \%$ | $19.0 \%$ |
| No Religion | $65.8 \%$ | $21.8 \%$ | $75.2 \%$ | $15.2 \%$ |
| Protestant | $69.3 \%$ | $17.1 \%$ | $76.6 \%$ | $19.4 \%$ |
| Roman Catholic | $67.1 \%$ | $21.5 \%$ | $70.7 \%$ | $17.4 \%$ |
| Other | $65.4 \%$ | $22.3 \%$ | $68.3 \%$ | $23.8 \%$ |
| Aggregated* | $72.2 \%$ | $25.0 \%$ | $70.0 \%$ | $6.7 \%$ |
| Frequency of attendance at religious service |  |  | 75 |  |
| Never | $67.0 \%$ | $20.8 \%$ | $71.4 \%$ | $15.6 \%$ |
| Once or twice a year | $69.0 \%$ | $17.1 \%$ | $71.9 \%$ | $15.4 \%$ |
| Several times a year | $71.1 \%$ | $15.7 \%$ | $70.4 \%$ | $16.9 \%$ |
| $1-3$ times a month | $67.6 \%$ | $19.5 \%$ | $85.0 \%$ |  |
| Once a week | $62.7 \%$ | $26.8 \%$ | $21.0 \%$ |  |
| Several times a week | $62.2 \%$ | $29.7 \%$ | $10.0 \%$ |  |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.4: The goals I have for myself are being met at Harvard Medical School

|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |


| Jewish | 67.1\% | 17.6\% | 90.1\% | 2.8\% |
| :---: | :---: | :---: | :---: | :---: |
| Muslim | 66.7\% | 25.9\% | 73.8\% | 11.9\% |
| No Religion | 67.4\% | 18.4\% | 79.3\% | 11.0\% |
| Protestant | 68.4\% | 21.2\% | 83.9\% | 11.3\% |
| Roman Catholic | 65.4\% | 20.9\% | 77.8\% | 10.2\% |
| Other | 65.4\% | 22.7\% | 76.2\% | 15.9\% |
| Aggregated* | 69.4\% | 19.4\% | 80.0\% | 13.3\% |
| Frequency of attendance at religious service |  |  |  |  |
| Never | 66.1\% | 19.2\% | 80.8\% | 8.8\% |
| Once or twice a year | 67.9\% | 16.5\% | 79.1\% | 13.4\% |
| Several times a year | 65.6\% | 22.7\% | 79.2\% | 11.0\% |
| 1-3 times a month | 70.6\% | 20.6\% | 84.4\% | 9.4\% |
| Once a week | 65.5\% | 22.9\% | 79.0\% | 14.8\% |
| Several times a week | 70.3\% | 21.6\% | 85.0\% | 5.0\% |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.5: I know what constitutes good performance in my at Harvard Medical School

|  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
|  |  |  |  |  |


| Jewish | $81.5 \%$ | $8.4 \%$ | $87.3 \%$ |
| :--- | :--- | :--- | :--- |
| Muslim | $64.8 \%$ | $20.4 \%$ | $71.4 \%$ |
| No Religion | $79.6 \%$ | $12.4 \%$ | $87.8 \%$ |
| Protestant | $77.7 \%$ | $12.7 \%$ | $89.5 \%$ |
| Roman Catholic | $78.3 \%$ | $11.2 \%$ | $86.2 \%$ |
| Other | $77.7 \%$ | $11.4 \%$ | $87.3 \%$ |
| Aggregated* | $83.3 \%$ | $11.1 \%$ | $66.7 \%$ |
| Frequency of attendance at religious service |  |  | $8.8 \%$ |
| Never | $78.4 \%$ | $12.5 \%$ | $8.8 \%$ |
| Once or twice a year | $79.1 \%$ | $9.8 \%$ | $85.0 \%$ |
| Several times a year | $77.9 \%$ | $11.6 \%$ | $89.0 \%$ |
| $1-3$ times a month | $80.5 \%$ | $11.0 \%$ | $87.5 \%$ |
| Once a week | $79.9 \%$ | $12.3 \%$ | $82.7 \%$ |
| Several times a week | $78.4 \%$ | $13.5 \%$ | $90.0 \%$ |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'.
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.6: I receive meaningful recognition for doing good work at Harvard Medical School

|  | Faculty |  | Trainee |  |
| :---: | :---: | :---: | :---: | :---: |
|  | \% Agr | \% Dis | \% Agr | \% Dis |
| Overall | 55.1\% | 29.3\% | 71.8\% | 14.9\% |
| Gender Identity |  |  |  |  |
| Woman | 52.9\% | 31.2\% | 68.1\% | 16.8\% |
| Man | 59.0\% | 26.1\% | 76.9\% | 11.5\% |
| Aggregated* | 33.3\% | 16.7\% | 33.3\% | 44.4\% |
| Race/ethnicity |  |  |  |  |
| Asian or Asian American | 56.6\% | 26.6\% | 76.9\% | 12.6\% |
| Black or African American | 46.2\% | 33.7\% | 61.4\% | 17.5\% |
| Hispanic or Latina/o/x | 51.2\% | 35.8\% | 59.3\% | 22.2\% |
| Middle Eastern | 43.3\% | 36.7\% | 66.7\% | 20.5\% |
| White | 57.3\% | 27.6\% | 75.3\% | 11.7\% |
| Aggregated* | 42.6\% | 42.6\% | 61.9\% | 33.3\% |
| Two or more | 58.1\% | 29.0\% | 78.9\% | 7.0\% |
| Sexual Orientation |  |  |  |  |
| Bisexual | 53.8\% | 26.3\% | 70.6\% | 8.8\% |
| Heterosexual | 56.5\% | 27.8\% | 72.1\% | 14.5\% |
| Gay/Lesbian | 48.0\% | 39.0\% | 74.6\% | 15.5\% |
| Aggregated* | 60.0\% | 20.0\% | 77.8\% | 22.2\% |
| Education |  |  |  |  |
| Doctoral degree | 56.8\% | 28.1\% | 66.5\% | 17.8\% |
| Professional degree (e.g., medical or dental) | 52.9\% | 30.3\% | 75.5\% | 13.2\% |
| Multiple | 58.7\% | 28.9\% | 69.4\% | 15.3\% |
| Aggregated* | 52.2\% | 26.1\% | 75.0\% | 12.5\% |
| Disability |  |  |  |  |
| Attention Deficit/Hyperactivity Disorder | 57.1\% | 33.9\% | 75.0\% | 15.6\% |
| Chronic medical condition | 48.7\% | 37.0\% | 72.7\% | 18.2\% |
| Chronic mental health condition | 52.3\% | 29.4\% | 64.7\% | 15.7\% |
| Multiple | 50.0\% | 34.8\% | 68.0\% | 12.0\% |
| Aggregated* | 53.3\% | 29.3\% | 69.2\% | 23.1\% |
| None | 55.2\% | 29.4\% | 72.9\% | 14.3\% |
| Parent education level |  |  |  |  |
| Technical or Trade School | 51.0\% | 31.4\% | 76.2\% | 4.8\% |
| Professional degree (e.g., medical or dental) | 54.7\% | 29.9\% | 70.7\% | 14.5\% |
| Elementary School | 47.8\% | 39.1\% | 46.2\% | 7.7\% |
| Bachelor's Degree | 54.4\% | 28.4\% | 75.1\% | 11.5\% |
| Master's Degree | 55.1\% | 30.6\% | 68.8\% | 19.3\% |
| Middle School | 51.4\% | 35.1\% | 77.8\% | 11.1\% |
| Doctoral degree | 58.7\% | 26.1\% | 73.2\% | 14.6\% |
| Associate Degree/Some College | 60.0\% | 29.6\% | 80.0\% | 14.5\% |
| High School/Equivelancy or GED | 53.5\% | 26.5\% | 67.5\% | 16.9\% |
| Political Perspective |  |  |  |  |
| Conservative | 57.0\% | 28.3\% | 68.4\% | 21.5\% |
| Moderate | 53.1\% | 31.8\% | 70.4\% | 14.5\% |
| Liberal | 55.9\% | 28.4\% | 72.5\% | 13.9\% |
| Religious Preference |  |  |  |  |
| Buddhist | (c) | (c) | (c) | (c) |
| Hindu | 51.9\% | 33.7\% | 70.7\% | 13.8\% |


| Jewish | $59.1 \%$ | $26.7 \%$ | $69.0 \%$ | $12.7 \%$ |
| :--- | :--- | :--- | :--- | :--- |
| Muslim | $38.9 \%$ | $38.9 \%$ | $66.7 \%$ | $26.2 \%$ |
| No Religion | $55.2 \%$ | $28.4 \%$ | $76.3 \%$ | $10.6 \%$ |
| Protestant | $57.9 \%$ | $27.4 \%$ | $74.2 \%$ | $14.5 \%$ |
| Roman Catholic | $55.6 \%$ | $28.8 \%$ | $68.3 \%$ | $16.8 \%$ |
| Other | $56.9 \%$ | $28.4 \%$ | $58.3 \%$ | $20.6 \%$ |
| Aggregated* | $52.8 \%$ | $36.1 \%$ | $75 \%$ |  |
| Frequency of attendance at religious service |  |  | $70.3 \%$ |  |
| Never | $55.3 \%$ | $28.7 \%$ | $69.5 \%$ |  |
| Once or twice a year | $54.2 \%$ | $28.2 \%$ | $73.4 \%$ | $10.8 \%$ |
| Several times a year | $57.6 \%$ | $28.5 \%$ | $70.4 \%$ | $16.5 \%$ |
| $1-3$ times a month | $57.4 \%$ | $28.3 \%$ | $70.0 \%$ | $12.5 \%$ |
| Once a week | $60.6 \%$ | $25.7 \%$ | $19.8 \%$ |  |
| Several times a week | $67.6 \%$ | $29.7 \%$ | $25.0 \%$ |  |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.7: I feel comfortable expressing my opinions to others at Harvard Medical School

|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |


| Jewish | 70.6\% | 17.6\% | 80.3\% | 14.1\% |
| :---: | :---: | :---: | :---: | :---: |
| Muslim | 63.0\% | 24.1\% | 71.4\% | 9.5\% |
| No Religion | 66.1\% | 21.1\% | 77.7\% | 13.8\% |
| Protestant | 68.8\% | 18.5\% | 69.4\% | 20.2\% |
| Roman Catholic | 65.9\% | 21.1\% | 73.1\% | 17.4\% |
| Other | 64.9\% | 20.4\% | 66.7\% | 20.6\% |
| Aggregated* | 72.2\% | 22.2\% | 53.3\% | 26.7\% |
| Frequency of attendance at religious service |  |  |  |  |
| Never | 67.5\% | 20.8\% | 77.0\% | 14.7\% |
| Once or twice a year | 68.1\% | 17.5\% | 73.2\% | 13.8\% |
| Several times a year | 68.5\% | 19.7\% | 73.4\% | 15.6\% |
| 1-3 times a month | 70.2\% | 15.8\% | 79.7\% | 18.8\% |
| Once a week | 61.3\% | 25.7\% | 61.7\% | 23.5\% |
| Several times a week | 54.1\% | 40.5\% | 75.0\% | 15.0\% |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.8: I believe Harvard Medical School leadership will take appropriate action in response to incidents of harassment and discrimination

|  | Faculty |  | Trainee |  |
| :---: | :---: | :---: | :---: | :---: |
|  | \% Agr | \% Dis | \% Agr | \% Dis |
| Overall | 70.5\% | 14.5\% | 73.9\% | 13.6\% |
| Gender Identity |  |  |  |  |
| Woman | 64.7\% | 17.6\% | 70.7\% | 15.1\% |
| Man | 78.2\% | 9.7\% | 78.2\% | 10.9\% |
| Aggregated* | 50.0\% | 50.0\% | 44.4\% | 44.4\% |
| Race/ethnicity |  |  |  |  |
| Asian or Asian American | 68.6\% | 15.7\% | 76.0\% | 12.6\% |
| Black or African American | 47.1\% | 29.8\% | 56.1\% | 29.8\% |
| Hispanic or Latina/o/x | 56.1\% | 27.6\% | 79.0\% | 12.3\% |
| Middle Eastern | 70.0\% | 10.0\% | 79.5\% | 10.3\% |
| White | 74.8\% | 11.0\% | 75.6\% | 11.4\% |
| Aggregated* | 70.2\% | 21.3\% | 85.7\% | 0.0\% |
| Two or more | 67.7\% | 16.1\% | 66.7\% | 15.8\% |
| Sexual Orientation |  |  |  |  |
| Bisexual | 68.8\% | 13.8\% | 73.5\% | 14.7\% |
| Heterosexual | 72.3\% | 13.0\% | 76.4\% | 11.4\% |
| Gay/Lesbian | 60.2\% | 23.6\% | 66.2\% | 23.9\% |
| Aggregated* | 66.7\% | 33.3\% | 66.7\% | 33.3\% |
| Education |  |  |  |  |
| Doctoral degree | 70.8\% | 12.8\% | 71.3\% | 15.2\% |
| Professional degree (e.g., medical or dental) | 70.5\% | 15.9\% | 75.9\% | 12.3\% |
| Multiple | 70.2\% | 12.7\% | $72.9 \%$ | 13.2\% |
| Aggregated* | 60.9\% | 26.1\% | 68.8\% | 31.3\% |
| Disability |  |  |  |  |
| Attention Deficit/Hyperactivity Disorder | 64.3\% | 17.9\% | 75.0\% | 18.8\% |
| Chronic medical condition | 71.4\% | 17.6\% | 72.7\% | 9.1\% |
| Chronic mental health condition | 62.4\% | 15.6\% | 64.7\% | 17.6\% |
| Multiple | 65.2\% | 27.3\% | 52.0\% | 36.0\% |
| Aggregated* | 67.4\% | 16.3\% | 84.6\% | 7.7\% |
| None | 71.7\% | 13.5\% | 76.0\% | 12.0\% |
| Parent education level |  |  |  |  |
| Technical or Trade School | 70.6\% | 21.6\% | 85.7\% | 4.8\% |
| Professional degree (e.g., medical or dental) | 71.8\% | 14.4\% | 75.1\% | 14.5\% |
| Elementary School | 71.7\% | 13.0\% | 69.2\% | 15.4\% |
| Bachelor's Degree | 71.4\% | 13.6\% | 77.0\% | 12.0\% |
| Master's Degree | 71.5\% | 12.4\% | 69.7\% | 15.6\% |
| Middle School | 67.6\% | 8.1\% | 83.3\% | 5.6\% |
| Doctoral degree | 69.2\% | 14.7\% | 70.7\% | 14.1\% |
| Associate Degree/Some College | 68.1\% | 17.8\% | 85.5\% | 10.9\% |
| High School/Equivelancy or GED | 72.3\% | 12.3\% | 72.7\% | 11.7\% |
| Political Perspective |  |  |  |  |
| Conservative | 71.7\% | 12.0\% | 70.9\% | 15.2\% |
| Moderate | 67.5\% | 17.7\% | 75.7\% | 11.2\% |
| Liberal | 71.7\% | 13.7\% | 73.3\% | 14.2\% |
| Religious Preference |  |  |  |  |
| Buddhist | (c) | (c) | (c) | (c) |
| Hindu | 74.0\% | 12.5\% | 77.6\% | 6.9\% |


| Jewish | $77.8 \%$ | $9.8 \%$ | $71.8 \%$ | $14.1 \%$ |
| :--- | :--- | :--- | :--- | :--- |
| Muslim | $63.0 \%$ | $14.8 \%$ | $71.4 \%$ | $11.9 \%$ |
| No Religion | $69.5 \%$ | $15.0 \%$ | $72.9 \%$ | $13.3 \%$ |
| Protestant | $72.4 \%$ | $14.3 \%$ | $72.6 \%$ | $14.5 \%$ |
| Roman Catholic | $71.2 \%$ | $13.3 \%$ | $79.0 \%$ | $12.0 \%$ |
| Other | $71.1 \%$ | $13.7 \%$ | $77.8 \%$ | $17.5 \%$ |
| Aggregated* | $75.0 \%$ | $16.7 \%$ | $74.7 \%$ |  |
| Frequency of attendance at religious service |  |  | $74.4 \%$ |  |
| Never | $69.9 \%$ | $14.7 \%$ | $75.3 \%$ | $120.0 \%$ |
| Once or twice a year | $72.1 \%$ | $13.8 \%$ | $73.4 \%$ | $13.4 \%$ |
| Several times a year | $76.2 \%$ | $11.0 \%$ | $71.6 \%$ | $17.2 \%$ |
| $1-3$ times a month | $71.7 \%$ | $12.5 \%$ | $85.0 \%$ | $16.0 \%$ |
| Once a week | $69.4 \%$ | $13.7 \%$ | $0.0 \%$ |  |
| Several times a week | $70.3 \%$ | $21.6 \%$ |  |  |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".

Table 2.9: I have the skills to address hostile behavior that I witness

|  | Faculty |  | Trainee |  |
| :---: | :---: | :---: | :---: | :---: |
|  | \% Agr | \% Dis | \% Agr | \% Dis |
| Overall | 75.1\% | 14.0\% | 75.9\% | 12.4\% |
| Gender Identity |  |  |  |  |
| Woman | 69.7\% | 18.0\% | 71.8\% | 16.8\% |
| Man | 81.9\% | 9.1\% | 80.5\% | 8.0\% |
| Aggregated* | 83.3\% | 16.7\% | 55.6\% | 11.1\% |
| Race/ethnicity |  |  |  |  |
| Asian or Asian American | 69.7\% | 16.2\% | 75.1\% | 11.7\% |
| Black or African American | 70.2\% | 18.3\% | 59.6\% | 28.1\% |
| Hispanic or Latina/o/x | 74.0\% | 19.5\% | 80.2\% | 9.9\% |
| Middle Eastern | 61.7\% | 16.7\% | 76.9\% | 15.4\% |
| White | 78.8\% | 11.5\% | 78.9\% | 9.6\% |
| Aggregated* | $70.2 \%$ | 23.4\% | 85.7\% | 14.3\% |
| Two or more | 74.2\% | 17.2\% | 70.2\% | 15.8\% |
| Sexual Orientation |  |  |  |  |
| Bisexual | 72.5\% | 15.0\% | 76.5\% | 17.6\% |
| Heterosexual | 76.2\% | 13.3\% | 77.6\% | 11.1\% |
| Gay/Lesbian | 74.0\% | 13.8\% | 69.0\% | 14.1\% |
| Aggregated* | 80.0\% | 13.3\% | 77.8\% | 22.2\% |
| Education |  |  |  |  |
| Doctoral degree | 76.1\% | 11.8\% | 72.2\% | 14.6\% |
| Professional degree (e.g., medical or dental) | 74.4\% | 15.4\% | 78.8\% | 10.9\% |
| Multiple | 75.5\% | 13.5\% | 73.6\% | 11.8\% |
| Aggregated* | 65.2\% | 30.4\% | 75.0\% | 18.8\% |
| Disability |  |  |  |  |
| Attention Deficit/Hyperactivity Disorder | 80.4\% | 14.3\% | 78.1\% | 9.4\% |
| Chronic medical condition | 74.8\% | 16.0\% | 81.8\% | 9.1\% |
| Chronic mental health condition | 66.1\% | 20.2\% | 66.7\% | 19.6\% |
| Multiple | 78.8\% | 12.1\% | 52.0\% | 24.0\% |
| Aggregated* | 78.3\% | 14.1\% | 69.2\% | 15.4\% |
| None | 75.4\% | 13.8\% | 77.6\% | 10.9\% |
| Parent education level |  |  |  |  |
| Technical or Trade School | 84.3\% | 7.8\% | 90.5\% | 4.8\% |
| Professional degree (e.g., medical or dental) | 75.1\% | 15.8\% | 75.9\% | 12.9\% |
| Elementary School | 78.3\% | 10.9\% | 61.5\% | 30.8\% |
| Bachelor's Degree | 75.7\% | 12.7\% | 78.5\% | 10.5\% |
| Master's Degree | 76.4\% | 16.2\% | 77.5\% | 11.5\% |
| Middle School | 78.4\% | 16.2\% | 66.7\% | 11.1\% |
| Doctoral degree | 74.2\% | 14.7\% | 74.7\% | 12.1\% |
| Associate Degree/Some College | 70.4\% | 16.3\% | 69.1\% | 16.4\% |
| High School/Equivelancy or GED | 80.0\% | 11.5\% | 74.0\% | 16.9\% |
| Political Perspective |  |  |  |  |
| Conservative | 75.3\% | 12.4\% | 78.5\% | 8.9\% |
| Moderate | 72.5\% | 14.1\% | 82.9\% | 9.2\% |
| Liberal | 76.0\% | 13.9\% | 73.5\% | 14.2\% |
| Religious Preference |  |  |  |  |
| Buddhist | (c) | (c) | (c) | (c) |
| Hindu | 73.1\% | 17.3\% | 77.6\% | 15.5\% |


| Jewish | $80.2 \%$ | $10.3 \%$ | $78.9 \%$ | $9.9 \%$ |
| :--- | :--- | :--- | :--- | :--- |
| Muslim | $72.2 \%$ | $14.8 \%$ | $85.7 \%$ | $4.8 \%$ |
| No Religion | $73.9 \%$ | $14.6 \%$ | $75.2 \%$ | $11.5 \%$ |
| Protestant | $74.4 \%$ | $14.9 \%$ | $74.3 \%$ | $9.7 \%$ |
| Roman Catholic | $77.5 \%$ | $14.1 \%$ | $73.0 \%$ | $15.0 \%$ |
| Other | $76.8 \%$ | $12.6 \%$ | $60.0 \%$ | $14.3 \%$ |
| Aggregated* | $91.7 \%$ | $5.6 \%$ | $76.7 \%$ |  |
| Frequency of attendance at religious service |  |  | $76.0 \%$ |  |
| Never | $74.7 \%$ | $14.9 \%$ | $73.4 \%$ | $11.5 \%$ |
| Once or twice a year | $75.0 \%$ | $13.5 \%$ | $75.0 \%$ | $17.6 \%$ |
| Several times a year | $80.3 \%$ | $11.0 \%$ | $79.0 \%$ | $10.9 \%$ |
| $1-3$ times a month | $75.0 \%$ | $15.4 \%$ | $90.0 \%$ | $8.6 \%$ |
| Once a week | $77.1 \%$ | $12.7 \%$ | $5.0 \%$ |  |
| Several times a week | $73.0 \%$ | $13.5 \%$ |  |  |

Note:
$\% \mathrm{Agr}=$ 'Somewhat agree', 'Agree', or 'Strongly agree'.
$\%$ Dis = 'Somewhat disagree', 'Disagree', or 'Strongly disagree'
$\%$ Agree and \% Disagree columns do not sum to $100 \%$. The remainder is \%
'Neither agree nor disagree.'
Cells with fewer than 30 observations concealed, and categories with fewer than
30 observations within any role were aggregated. Indicated with "(c)".


[^0]:    ${ }^{1}$ The PulseWave 2 Survey followed the format of the 2019 Pilot Pulse Survey conducted by Harvard University for individuals employed directly by the University. As such, the Pilot Pulse Survey did not include faculty and trainees employed by HMS-affiliate institutions.

[^1]:    All positions and titles were current as of the survey development process in 2020.

[^2]:    1. Results omit "neither agree nor disagree" in scale. "Other"
    
     5. "\% Agree" " calculation includes "Somewhat agree", "Agree", and " "Strongly agree"".
    2. Sexual Orientation Aggregate $n$ includes: "Another identity", "Unsure", and multiple selections. 6. Sexual Orientation Aggregate "ncludes " "Another identity"
    3. Degree Aggregate includes: "Otherr"
[^3]:    
    4. "Trainee" refers to both clinical and research trainees across HMS affilate institutions.
    5. "\%\% Agree" "alculation includes ""Somewhat agre"," "Aree", and "Strongly agree".
    6. Religious Preference Aggreate includes: "Mormon" and "Multiple".

[^4]:    1. Results omit "neither agree nor disagre"" in sca
    2. Results omit category of"| $\mid$ refer not tos say
    3. "Faculty" "ferers to both clinical and research faculty across $H$ MS affiliate institutions
    4. "Trainee" refers to both lininal and research trainees across HMS affilate institutions
[^5]:    1. Results omit "neither agree nor disagree" in sca
    2. Results omit category of "I prefer not to say
    3. "Faculty" "ferers to both clinical and research faculty across $H$ MS affiliate institutions
    4. "Trainee" refers to both clinical and research trainees across HMS affilate institutions
    
[^6]:    1. Results omit "neither agree nor disagree" in scale
    2. Results onit category of"" $\mid$ prefer not to say"
    3. "Faculty" "efers to both clinical and research faculty across $H$ MS affiliate institutions
    4. "Trainee" refers to both clinical and research trainees across HMS affilate institutions
    
[^7]:    1. Ressults omit " "either agree nor disagree" in scale
[^8]:    1. Results omit "neither agree nor disagre"" in sca
    2. Results omit category of"| lofer notto say"
    
    3. "Traine"" referst to both clicical and research trainees across HMS 'fafilite instititution
[^9]:    1. Results omit "neither agree nor disagree" in sc
    2. Results omit category of" " prefer not to say
    3. "Faculty" " "ferest sto ot oth clinicicl and research haculty across $H$ HS affiliate institutions
    4." Trainee" refers to both clinial and research trainees across HMS affilate institutions
[^10]:    1. Results omit "neither agree nor disagre"" in sca
    
    2. "\% Agree" calculation includes 'Somewhat agree,' 'Agree,' or 'Strongly agree'
[^11]:    1. Results omit "neither agree nor disagree" in sca
    
    5."\% Agree" calculation includes 'Somewhat agree, 'Agree,' or 'Strongly agree''
[^12]:    1. Results omit "neither agree nor disagree" in scale "Another preference"
    2. Results omit category of " $\mid$ | refer not to say" and
    3. "Faculty" " eferest torboth clinical and nesearearch faculty across H HMS affiliate institution
    4. "Traine"" refers to obth bothictical and research faculty across HMS affiliate instititutions
    5. "\% Agree" "calculation includes 'Somewhat "agree,' Agree,' $\begin{aligned} & \text { or 'Strongly } \text { agree }\end{aligned}$
    6. Religious Preference Aggregate includes: "Mormon" and "M
    7."Buddhist" omitted due to being below reporting threshold
[^13]:    1. Results omit "neither agree nor disagree" in sca
    2. Results omit category of" I prefer not to say
    3. "Faculty" $r$ refers to both clinical and research faculty across HMS affiliate institutions
    4."Trainee" refers to both clinical and research trainees across HMS affilate institutions
    4. "\% Agree" calculation includes 'Somewhat agree,' Agree,' or 'Strongly agree'
    5. Trainee responses for "Several times a week" omitted due to being below reporting threshold
[^14]:    1. Results omit "neither agree nor disagre"" in sca
    2. Results omit category of"| lofer notto say"
    3. Results omit category of" " prefer not to say
    4." "Trainee" refers to bothth lininical and researarch trainees across HMS affilate institutions
    4. "\% Agree" calculation includes 'Somewhat tagree,'Agree,' or'Strongly agree'
    5. Trainee responses for "Severara t times a week" omitted due to to being below reporting threshold
