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Sponsors:

Beth Israel Deaconess Medical Center
Office of Diversity, Inclusion, and Career Advancement

Boston Children’s Hospital
Office of Faculty Development

Boston Children’s Hospital
Office of Health Equity and Inclusion

Brigham and Women’s Hospital
Center for Diversity and Inclusion

Cambridge Health Alliance
Department of Medicine, Division of Minority Affairs

The Commonwealth Fund Fellowship in Minority Health Policy at Harvard University

Dana-Farber Cancer Institute
Office for Faculty Development

Dana-Farber/Harvard Cancer Center
Initiative to Eliminate Cancer Disparities

Harvard Catalyst
Program for Faculty Development and Diversity Inclusion

Harvard School of Dental Medicine
Office of Diversity and Inclusion

Joseph L. Henry Oral Health Fellowship

Massachusetts General Hospital
Center for Diversity and Inclusion

McLean Hospital
Office of the Chief Academic Officer

Hosted by:

Harvard Medical School
Office for Diversity Inclusion and Community Partnership
164 Longwood Avenue, 2nd Floor
Boston, Massachusetts 02115

Special Acknowledgement: Reede Scholars—The Commonwealth Fund Fellowship Alumni Organization sincerely thanks its sponsors: CareQuest Institute for Oral Health; DentaQuest; and AltaMed for supporting this year’s Symposium
2023 Leadership and Faculty Development Program Conference

EQUITY AND SOCIAL JUSTICE

The Intersection of Poverty and Health

1:00 - 3:00 PM

This ESJ will focus on the impact of poverty on health and vice versa. Recognizing the limitations of our current health care payment systems, we will discuss the intersection of poverty and health across the spectrum of a patient’s life and identify policy interventions to improve health.

1:00 pm  Opening Welcome Remarks
Joan Y. Reede, MD, MPH, MS, MBA
Dean, Diversity and Community Partnership;
Professor of Medicine, Harvard Medical School; Professor of Society, Human Development and Health, Harvard T.H. Chan School of Public Health

1:05 pm  Panel Discussion

Moderator: Alden Landry, MD, MPH
Associate Professor, Emergency Medicine, Beth Israel Deaconess Medical Center; Assistant Dean, Office for Diversity Inclusion and Community Partnership, Associate Director and Advisor, Castle Society, Harvard Medical School

Panelists:
Benjamin Cook, PhD, MPH
Director of the Health Equity Research Lab, Director of Research Department of Psychiatry at Cambridge Health Alliance;
Associate Professor, Department of Psychiatry, Harvard Medical School

Jose Figueroa, MD, MPH
Assistant Professor, Health Policy and Management
Harvard T.H. Chan School of Public Health

Denise De Las Nueces, MD, MPH
Assistant Professor of Medicine - Internal Medicine
Boston University School of Medicine;
Chief Medical Officer of Boston Health Care for the Homeless Program (BHCHP)

Benjamin C. James, MD, MS
Assistant Professor of Surgery, Harvard Medical School;
Section Chief, Endocrine Surgery
Associate Surgery Clerkship Director
Beth Israel Deaconess Medical Center

2:45 pm  Q&A Session

3:00 pm  Adjourn
The Minority Health Policy Annual Meeting is designed to expose health professionals, students, residents, staff, and individuals from community agencies and organizations to health care and health disparity issues impacting the nation’s most vulnerable populations.

9:15 am  Opening Welcome Remarks  
Joan Y. Reede, MD, MPH, MS, MBA  
Dean, Diversity and Community Partnership; Professor of Medicine, Harvard Medical School; Professor of Society, Human Development and Health, Harvard T.H. Chan School of Public Health

9:20 am  Commonwealth Fund Fellowship in Minority Health Policy at Harvard University and Joseph L. Henry Oral Health Fellowship Practicum Presentations

Moderator: Joan Y. Reede, MD, MPH, MS, MBA

Presenters:  
“A Community-Centered City of Boston Chronic Disease and Cancer Early Detection Plan”  
Nora Abo-Sido, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Communicating a Framework for Improving Health Equity Data Collection in MassHealth”  
Eftitan Akam, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Examining Commercial Dental Insurance Reimbursement Patterns by Geographic Area”  
Zerita Buchanan, DDS  
Joseph L. Henry Oral Health Fellow

“The Role of Hospital Policies in Reducing Inequities in Organ Transplantation”  
Nasrien Ibrahim, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Navigating Youth Behavioral Health in Boston as Chief Behavioral Health Officer”  
Kevin M. Simon, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University; Chief Behavioral Health Officer, Boston Public Health Commission

“Advancing Person-Centered Care for People Living with Multiple Chronic Conditions to Improve Quality and Outcomes of Care”  
Brittany Watson, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Commentator: Laurie Zephyrin MD, MPH, MBA  
Senior Vice President, Advancing Health Equity, The Commonwealth Fund

10:55 am  Break
11:00 am  Harvard Medical School Faculty Fellows Presentations

Moderator:  Joan Y. Reede, MD, MPH, MS, MBA

Presenters:  “Examining Stroke Symptoms among US Latinos”
Monik Jimenez, ScD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor of Medicine, Harvard Medical School, Brigham and Women’s Hospital

“How Language Used in Pediatric Residents’ Performance Evaluations Differ by Gender and Underrepresented in Medicine Status”
Marcella Luercio, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor in Pediatrics, Harvard Medical School, Boston Children’s Hospital

“The Placental Transcriptome and Newborn Adiposity: Characterizing the Role of Novel Lipid Bioactives in Human Pregnancies”
Carmen Monthé-Drèze, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor of Pediatrics, Harvard Medical School, Brigham and Women’s Hospital

“Modification of Gut Microbiome Antibiotic Resistance through Dietary Glycans”
Dennis Spencer, MD, PhD
Faculty Fellow, Harvard Catalyst Program for Diversity Inclusion (PFDI); Instructor in Pediatrics, Harvard Medical School, Boston Children’s Hospital

Commentator:  Francisco J. Quintana, PhD
Professor of Neurology, Kuchroo Weiner Distinguished Chair in NeuroImmunology
Ann Romney Center for Neurologic Diseases
Brigham and Women’s Hospital
Harvard Medical School;
Associate Member, The Broad Institute

12:15 pm  Keynote Address
“An Improbable Journey: 25 Years as a Commonwealth Fund Fellow”
Joseph Betancourt, MD, MPH
President, The Commonwealth Fund

12:55 pm  Closing Remarks
Joan Y. Reede, MD, MPH, MS, MBA

1:00 pm  Lunch
Reede Scholars 14th Annual Health Equity Symposium

Advancing Health Equity: Opportunities & Challenges within our Payer System

1:30-3:30 pm

REB Auditorium, Harvard School of Dental Medicine | 190 Longwood Avenue, Boston, MA

Earlier this year, CMS released an updated framework to, among other things, advance health equity. The five health equity priorities include: 1) Expanding the collection, reporting, and analysis of standardized data, 2) Addressing inequities in policies and operations to close gaps, 3) Building capacity, 4) Advancing language access, health literacy, and provision of culturally tailored services, and 5) Increasing all forms of accessibility to health care.

As the nation’s largest health insurer, CMS has often taken the lead on various initiatives, including advancing health equity. In this panel discussion, we will be taking a deeper dive into the programs and policies that various payers have initiated to advance health equity. We will take a closer look at Medicaid and Medicaid managed care programs and their efforts to address the social determinants of health. Finally, we will examine the opportunities and challenges payers face in achieving meaningful results.

1:30 pm  Welcome, Introduction of Panelists
Mary Fleming, MD, MPH, FACOG
President, The Reede Scholars, Inc.

1:45 pm  Panel Discussion

Moderator:  Mary Fleming, MD, MPH

Panelists:
Clara Filice, MD, MPH, MHS
Deputy Chief Medical Officer, MassHealth

Tamiko Foster, MD, MPH
Corporate Medical Director, Centene Corporation

Darrell Gray, II, MD, MPH
Chief Health Equity Officer, Elevance

Seiji Hayashi, MD, MPH, FAAFP
Interim Chief Medical Officer, Community Health Plan DC
CareFirst Blue Cross BlueShield

J. Nwando Olayiwola, MD, MPH, FAAFP
Chief Health Equity Officer & Senior Vice President, Humana

3:00 pm  Q&A Session

3:20 pm  Vision Award Presentation
Mary Fleming, MD, MPH

Closing Remarks
Career development training sessions provide Harvard Medical School (HMS) and Harvard School of Dental Medicine (HSDM) junior faculty, clinical fellows, and research fellows, and administrators with information and skills needed for professional and career advancement in academic medicine, and specifically advancement within the Harvard Medical School community. These sessions are open to HMS and HSDM faculty, trainees, administrators, and health policy alumni fellows only.

**2023 Leadership and Faculty Development Program Conference**

*Career Development Training*

Career development training sessions provide Harvard Medical School (HMS) and Harvard School of Dental Medicine (HSDM) junior faculty, clinical fellows, and research fellows, and administrators with information and skills needed for professional and career advancement in academic medicine, and specifically advancement within the Harvard Medical School community. These sessions are open to HMS and HSDM faculty, trainees, administrators, and health policy alumni fellows only.

**9:30 am—11:00 am**

*“Authorizing Ourselves and Others”*

**Presenter:**

William Kahn, PhD  
Everett W. Lord Distinguished Faculty Scholar  
Professor, Management & Organizations  
Boston University, Questrom School of Business

**Location:**  
Ballard Room | Countway Library, 5th Floor

This session focuses on the choices that we make to bring ourselves fully into spaces in which we work with and for others. We will examine the nature of those choices and the consequences for us and the work that we wish to do in the world. We will examine the implications as well for when and how we create space for others – which we can understand as acts of leadership.

**11:30 am—1:30 pm**

*“Communication as an Essential Leadership Skill”*

**Presenter:**

Mary Shapiro, MBA  
Professor of Practice  
Organizational Behavior Management  
Simmons University

**Location:**  
Minot Room | Countway Library, 5th Floor

Over our lives we’ve each developed a preference for how we like to communicate and interact with people. This style impacts how we set up and run our teams, enact leadership, and contribute in our organizations. Challenges arise when we are communicating across different styles, potentially leading to misunderstandings and misinterpretations. Prior to this session participants will complete an online diagnostic. This self-knowledge becomes the basis for becoming effective when interacting with people who have different rules. The workshop will focus on strategies for three important situations:

- improving critical relationships, particularly those challenged by diverse styles;
- managing how your leadership is perceived, ensuring that it is seen and valued;
- and influencing others in ways that make sense to them.
Joseph R. Betancourt, MD, MPH
President
The Commonwealth Fund

Dr. Joseph R. Betancourt is the president of the Commonwealth Fund. One of the nation’s preeminent leaders in health care, equity, quality, and community health, Betancourt formerly served as the senior vice president for Equity and Community Health at Massachusetts General Hospital (MGH), overseeing the organization’s diversity, equity, inclusion, and community health portfolio, including its Center for Diversity and Inclusion, Disparities Solutions Center, Center for Community Health Improvement, and centers focused on gun violence prevention, community health innovation, immigrant health, and global health. Previously, Betancourt led the Mass General Brigham (MGB) system’s COVID Equity and Community Health response and served as Vice President and Chief Equity and Inclusion Officer at MGH, where he helped develop and launch the organization’s Structural Equity Ten-Point Plan and MGB’s United Against Racism Initiative. As director of MGH’s Disparities Solutions Center, which he founded, Betancourt worked to develop the capacity of health care organizations to improve quality, address disparities, and achieve equity. The center’s Disparities Leadership Program worked with more than 350 operating health care systems across the country, providing guidance on how they can improve quality and value in the care of diverse, minority, and vulnerable populations.

An author of nearly 80 peer-reviewed articles, Betancourt has served on several Institute of Medicine committees, including the committee that produced the seminal report Unequal Treatment: Confronting Racial/Ethnic Disparities in Health Care. He is an Associate Professor of Medicine at Harvard Medical School and a board-certified internist, focusing on Spanish-speaking and minority populations. He earned his M.D. from the University of Medicine and Dentistry of New Jersey and completed an internal medicine residency at New York Hospital–Cornell Medical Center. Following his residency, he was a member of one of the first classes in the Commonwealth Fund–Harvard University Fellowship in Minority Health Policy, where he earned an M.P.H.
Nora Abo-Sido, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Dr. Nora Abo-Sido was most recently a resident physician in Internal Medicine and Pediatrics at Massachusetts General Hospital in Boston, MA. Dr. Abo-Sido aspires to be a physician-advocate with a career as both a clinician and leader in health policy for vulnerable communities. She is co-founder of the Massachusetts General Hospital (MGH) Comprehensive Sickle Cell Disease Program. While in medical school, Dr. Abo-Sido collaborated with students and faculty to establish a multidisciplinary clinic in a Boston jail to provide incarcerated patients with compassionate, evidence-based healthcare and continuity of care post-release. She is the recipient of the Medicine & Pediatrics Program Directors Association (MPPDA) Walter W. Tunnessen, Jr., M.D., Award, presented to one resident nationally for excellence in clinical care, education and advocacy. Dr. Abo-Sido received her medical degree from Harvard Medical School in 2018.

Eftitan Akam, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Dr. Eftitan Akam was most recently chief resident physician in Internal Medicine and Pediatrics at Massachusetts General Hospital in Boston, MA. Her long-term career goal is to cultivate national public health work around climate disasters and on-the-ground medical response; she is interested in climate change prevention, disaster preparedness, and humanitarian relief. In 2021, she completed a Fellowship at Auschwitz for the Study of Professional Ethics. Dr. Akam received her medical degree from Vanderbilt University School of Medicine in 2018, and is the co-founder of Melanated and Dedicated (MaD) Scientist outreach Program.

Zerita C. Buchanan, DDS  
Joseph L. Henry Oral Health Fellow in Minority Health Policy

Zerita C. Buchanan, DDS is a fourth-generation dentist and a proud HBCU graduate. Her commitment to health equity led her to be recognized as a “Healthcare Hero” by her alma mater Spelman College. Her private practice, Dental Dreams, LLC, serves as an innovation hub for HBCU students interested in the STEM sciences. Since 2014, Dr. Buchanan has served as the Assistant Director of Increasing Diversity in Dentistry (IDID), a national pipeline program for minority college students interested in pursuing a career in dentistry. She is an active member of Delta Sigma Theta Sorority, Incorporated and The Links, Inc. Dr. Buchanan received her dental degree from UNC Adams School of Dentistry in 2014.
Benjamin Cook, PhD, MPH
Director of the Health Equity Research Lab, Director of Research
Department of Psychiatry at Cambridge Health Alliance
Associate Professor, Department of Psychiatry, Harvard Medical School

Dr. Cook is the Director of the Center for Multicultural Mental Health Research and
Health Equity Research Lab; Director of Research, Department of Psychiatry at
Cambridge Health Alliance; and Associate Professor, Department of Psychiatry at Harvard Medical
School.

His research is focused on reducing and understanding underlying mechanisms of racial/ethnic disparities in
health and mental health care. He has been principal investigator on several major R01 grants from the
National Institute of Mental Health (NIMH) and Agency for Healthcare Research and Quality (AHRQ),
investigating mechanisms underlying disparities in episodes of mental health care, a R01 Supplement
developing state-by-state report cards on mental health care disparities, and a Milton Foundation grant
supporting research on tobacco use and mental health. His methodological work focuses on improving
statistical methods for the measurement and tracking of healthcare disparities, and he has received awards
from NIMH and Academy of Health for this work. Additional research interests include improving mental
health of immigrant populations, comparative effectiveness research and its influence on healthcare
disparities, substance abuse treatment disparities and healthcare equity.

Denise De Las Nueces, MD, MPH
Assistant Professor of Medicine - Internal Medicine
Boston University School of Medicine
Chief Medical Officer of Boston Health Care for the Homeless Program (BHCHP)

Dr. Nueces is the Chief Medical Officer of Boston Health Care for the Homeless
Program (BHCHP) and an Assistant Professor of Medicine at the Chobanian and Avedisian School of Medicine
at Boston University. She is a board-certified internal medicine physician and addiction medicine specialist
with a focus on vulnerable populations.

Upon completion of her residency training at the Brigham and Women’s Hospital Internal Medicine
Residency Program, Dr. De Las Nueces was granted a Commonwealth Fund Mongan Fellowship in Minority
Health Policy (renamed as the Commonwealth Fund Fellowship in Minority Health Policy at Harvard
University), completing a Master of Public Health degree in Health Policy from the Harvard School of Public
Health. In 2014, she was profiled in Boston Business Journal for her work with underrepresented
communities like her mentoring minority and low-income students through programming such as the
Poussaint Primary Care Scholars, a pre-matriculation program at Harvard Medical School.
Dr. Figueroa is an Assistant Professor of Health Policy and Management at the Harvard T.H. Chan School of Public Health (HSPH) and an Assistant Professor of Medicine at Harvard Medical School (HMS). He is also a practicing Internist and Associate Physician at the Brigham and Women’s Hospital, where he serves as the Faculty Director of the BWH Medicine Residency Management & Leadership Pathway. Dr. Figueroa received his M.D. from Harvard Medical School and his M.P.H. from the Harvard T.H. Chan School of Public Health. He completed his residency in Internal Medicine at the Brigham and Women’s Hospital.

His main research interests focus on understanding the drivers of health care spending and poor clinical outcomes among low-income and historically marginalized populations with complex clinical needs. To date, this has included work on racial and ethnic minorities, older adults with frailty, people with disabilities, and people with serious mental illness. His research also focuses on evaluating how policy interventions and payment reform aimed at improving quality of care and controlling costs are working, and, in particular, how they affect safety-net clinicians and hospitals. To support his work, Dr. Figueroa is funded by grants from the Commonwealth Fund, Robert Wood Johnson Foundation, Laura and John Arnold Foundation, and the National Institutes of Health.

Dr. Clara Filice is the Deputy Chief Medical Officer for MassHealth, where she provides clinical and strategic leadership to support delivery of high value care. She leads the MassHealth Quality Office, overseeing quality and health equity incentive programs for MassHealth providers, and also oversees key strategic population health initiatives including those related to children and adolescents, telehealth, and oral health. She earned her MD and MPH degrees at Northwestern, completed pediatric residency training at Lurie Children’s Hospital in Chicago, and was a Robert Wood Johnson Foundation Clinical Scholar at the Yale School of Medicine where she completed a Master of Health Science degree focused on health services research. She is an Assistant Professor at UMass Chan Medical School in the Department of Population and Quantitative Health Sciences and is Board Certified in Pediatrics.

A Louisville, KY native, Dr. Mary E. Fleming completed her undergraduate degree at Xavier University of Louisiana, medical degree at Vanderbilt University School of Medicine and her residency in Obstetrics and Gynecology at Meharry Medical College. Due to her interests in eradicating health inequities and improving healthcare for the underserved, she matriculated to Harvard Medical School as a Commonwealth Fellow in Minority Health Policy where she obtained a Master in Public Health from the Harvard TH Chan School of Public Health. She practiced as a
generalist in a Norristown, PA community hospital for four years before deciding to transition to be a full-time locum tenens physician. In this capacity, she has worked in several states across the country. This practice model also allowed her to travel to Kenya for six months to volunteer with Our Lady of Lourdes Mission Hospital in Mutomo.

Currently, she works clinically in Baltimore, MD, Norway, ME and for Cayaba Care, a maternal health start-up, in Philadelphia, PA. In addition to her clinical work, she consults as a medical expert reviewer and physician editor, and she leads a non-profit, Reede Scholars. As President of the Reede Scholars, she develops strategies for collective action among the Scholars to address health equity and social justice. In 2021 she became Director of the Leadership Development to Advance Equity in Health Care Program in the Executive and Continuing Professional Education department at the Harvard T.H. Chan School of Public Health. As an ardent champion of health equity, she continues to explore avenues to grow her skill set in order to serve the vulnerable populations of this country and globally.

Tamiko Foster, MD, MPH
Corporate Medical Director, Centene Corporation

“When my 3rd grade teacher asked what I wanted to be when I grew up, I said I wanted to help people.”

At the age of 8, Dr. Foster, a native of Chicago, Illinois and first-generation college student, made the commitment to help others. Over the years she has accomplished this desire by passionately providing medical care and advocacy for families as a board-certified pediatrician, in addition to her roles as Chief Medical Officer and Corporate Medical Director of health insurance plans. She attended college at the University of Illinois at Urbana-Champaign and received her medical degree from the University of Illinois at Chicago. She was selected as a Commonwealth Fund Fellow in Minority Health Policy at Harvard T.H. Chan School of Public Health/Harvard Medical School, where she received her Master’s in Public Health-Health Policy. She was appointed by the Minnesota Department of Health as a charter member of the Health Equity and Leadership Council, with additional public health task force and committee appointments to follow. She has served in multiple leadership and board of director roles. Her work has primarily focused on caring for medically and socially/economically disadvantaged populations with a holistic and integrative approach to wellness and health equity, which fostered a transition from the clinic room to board room in order to be a voice at the table for communities that have historically been left out. She is an active health advocate, mentor, and speaker in the community, and founder of the health and wellness company 2 E.D.I.F.Y. LLC, which is dedicated to social justice and equity in healthcare and bringing healing to individuals and communities through education, edification, and empowerment. As a holistic provider, Dr. Foster also received additional training in integrative medicine, health coaching, functional medicine, and herbal medicine which motivated the launching of VIP Wellness Tea™. She is the author of the book “VIP Very Important Patient: The African American Woman’s Guide to Health Care, Healing, & Wellness”.

Dr. Foster currently serves as a Corporate Medical Director at a multinational health insurance company where she helps to oversee appropriateness and efficiency of the use of health care services, techniques, and policies of medical treatments and services, in addition to leading efforts in health equity training and advocacy.
Darrell M. Gray, II, MD, MPH
Chief Health Equity Officer, Elevance

Darrell M. Gray, II, MD, MPH, FACP is an outspoken health equity advocate, a clinical and policy expert, and a passionate voice for a better healthcare system. As the inaugural chief health equity officer for Elevance Health, he leads the execution of comprehensive strategy to advance health equity through a whole-health approach (addressing physical, behavioral, social and pharmacy needs) among Elevance Health’s more than 47 million members and their respective communities.

Prior to joining Elevance Health, Gray was an associate professor of medicine at The Ohio State University, where he served as a practicing gastroenterologist and medical director of healthy communities for The Ohio State University Wexner Medical Center, as well as deputy director of the Center for Cancer Health Equity at The Ohio State University Comprehensive Cancer Center. His work leveraged meaningful partnerships across public and private sectors in Ohio and nationally to reduce health inequities and address health-related social needs among diverse populations. Notably, he co-led Ohio State’s health equity response to COVID-19 and co-designed the health enterprise’s antiracism action plan.

Gray serves in multiple national and local organizations aiming to advance health equity through innovation in community engagement, care delivery, research, and patient and provider education. He is co-founder of the Association of Black Gastroenterologists and Hepatologists and the immediate past chair of the American College of Gastroenterology Diversity, Equity and Inclusion Committee.

Gray has published widely, including high-impact peer-reviewed journals such as Nature Reviews, Lancet, and Cancer. Additionally, he has received numerous awards including the National Minority Quality Forum 40 Under 40 Leader in Minority Health Award, the Ohio Dr. Martin L. King, Jr. Health Equity and Awareness Award, and the 2020 Healio Disruptive Innovators Health Equity Award. He nonetheless cites his roles as husband to Brittney and father to Harper (8), Ella (6), Noah (4), and Zoë (1) as his crowning achievements.

Gray is a native of Baltimore, Maryland, and graduate of Morehouse College and Howard University College of Medicine. He completed his residency at Duke University Medical Center and gastroenterology fellowship at Washington University, subsequently earning a master’s degree in public health at the Harvard T.H. Chan School of Public Health as a Commonwealth Fund Fellow.

Seiji Hayashi, MD, MPH, FAAFP
Interim Chief Medical Officer, Community Health Plan DC
CareFirst Blue Cross BlueShield

Dr. Hayashi is Interim Chief Medical Officer for the Community Health Plan of DC and the Lead Medical Director for Government Programs at CareFirst BlueCross BlueShield that serves 3.6 million individuals and groups in Maryland and the Washington metropolitan area.

Dr. Hayashi is a board-certified family physician and an experienced leader in primary care, quality improvement, and health policy at the local and national levels. Prior to CareFirst, he spearheaded health
services integration and transformation at two area community health centers. Hayashi’s national health policy experience comes from his role as Chief Medical Officer for the federal Health Center Program at the Health Resources and Services Administration. He started his career at Georgetown University and at George Washington University teaching public health and conducting health policy research.

Hayashi has received a number of awards and honors, including the Samuel U. Rodgers, MD Achievement Award from the National Association of Community Health Centers.

Dr. Hayashi graduated with honors in Studio Art from Vassar College, received his M.D. with Alpha Omega Alpha distinction from the Albert Einstein College of Medicine and completed his family medicine residency training at the University of California San Francisco. He received his M.P.H. from the Harvard School of Public Health while a fellow with the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy.

Nasrien E. Ibrahim, MD
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Nasrien E. Ibrahim, MD is an Advanced Heart Failure and Transplant Cardiologist. She is interested in advancing health equity and alleviating the effects of structural racism in organ allocation. In 2021, Dr. Ibrahim was invited by the White House Office of Public Engagement to participate in the Leaders in Health Equity Roundtable Series. She serves on the Dean’s Advisory Board for the University of Cincinnati, McMicken College of Arts and Sciences and is the Founder and Director of The Equity in Heart Transplant Project™, a nonprofit that provides need-based financial assistance to patients with end-stage heart failure undergoing a heart transplant. Dr. Ibrahim received her medical degree in 2008, and completed her residency in internal medicine in 2011, and a cardiology fellowship in 2015 and 2017, respectively.

Benjamin C. James, MD, MS
Assistant Professor of Surgery, Harvard Medical School
Section Chief, Endocrine Surgery
Associate Surgery Clerkship Director
Beth Israel Deaconess Medical Center

Benjamin James, MD, MS, FACS is the Martin and Diane Trust Career Development Chair in Surgery and Chief of Endocrine Surgery at Beth Israel Deaconess Medical Center and Assistant Professor of Surgery at Harvard Medical School. He currently serves as the Chair of the Health Services Research Committee for the Association for Academic Surgery and Chair of the Research Committee for the American Association of Endocrine Surgeons. He also serves as an Associate Program Director and Director of Resident Research for the general surgery residency program at BIDMC.

His clinical practice in endocrine surgery focuses on surgical diseases of the thyroid, parathyroid, and adrenal glands. He has expertise in the transoral approach to thyroid and parathyroid surgery. Dr. James’ research interests include outcomes, quality of life, and the financial burden of thyroid cancer. He received the 2021 Thyroid Cancer Survivors’ Association Award for Thyroid Cancer Research from the American Association of
Endocrine Surgeons to study the subjective and objective financial burden of patients with thyroid cancer. Additionally, he has served as a tireless research mentor to numerous medical students, post-doctoral research fellows, and general surgery residents for which he was recognized as recipient of the 2022 Award for Excellence in Research Mentorship from Beth Israel Deaconess Medical Center.

Monik C. Jiménez, ScD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor of Medicine, Harvard Medical School, Brigham and Women’s Hospital

Monik C. Jiménez is an Associate Epidemiologist at Brigham and Women’s Hospital and Assistant Professor of Medicine at Harvard Medical School and Harvard T.H. Chan School of Public Health. She received both her master’s and doctoral degrees from Harvard T.H. Chan School of Public Health and a Certificate in Oral Epidemiology from Harvard School of Dental Medicine. Her NIH-funded work has examined the combined impact of race/ethnicity and sex in understanding the role of socioeconomic and behavioral factors in predicting, mediating and modifying inequities in stroke. She is the recipient of the Brigham and Women’s Hospital’s Minority Faculty Career Development, the H. Richard Nesson Fellowship and a Health Equity Innovation Grant to support her work in cardiovascular health equity among incarcerated people. She is an elected Fellow of the American Heart Association and is the Chair of the Mid-Career Committee of the national Council Operations Committee. She is also a committed educator at the undergraduate and graduate level, serving as Program Director for a summer research program for URM students at Brigham and Women’s Hospital and course director of “Cardiovascular Epidemiology” and “Mass Incarceration and Health in the US” at Harvard T.H. Chan School of Public Health.

Monik lives in central Massachusetts with her family on a small farm dedicated to rescuing livestock.

William Kahn, PhD
Everett W. Lord Distinguished Faculty Scholar
Professor, Management & Organizations
Boston University, Questrom School of Business

Bill Kahn is Professor and Department Chair of Management and Organizations and the Everett W. Lord Distinguished Faculty Scholar at Boston University’s Questrom School of Business, where he has taught since earning his PhD in Psychology from Yale University in 1987. His teaching, writing, and consulting focuses on issues and circumstances that trigger emotional complexity within and between groups in organizations, ranging from acute organizational crises to chronic inequality. Bill employs action research with varying types of organizations as the means to develop theoretical insights about organizational resilience, group and intergroup relations, and humanistic management in organizations. In addition to publishing regularly in scholarly journals, he has published several books, including Holding Fast: The Struggle to Create Resilient Caregiving Organizations, and The Ostrich Effect: Solving Destructive Patterns at Work.
Alden Landry, MD, MPH  
Associate Professor, Emergency Medicine, Beth Israel Deaconess Medical Center; 
Assistant Dean, Office for Diversity Inclusion and Community Partnership, Associate 
Director and Advisor, Castle Society, Harvard Medical School

Alden M. Landry, MD, MPH, is an Associate Professor of Emergency Medicine 
physician at Beth Israel Deaconess Medical Center, Assistant Dean for the Office for Diversity Inclusion and 
Community Partnership and Associate Director and Advisor for William B. Castle Society at Harvard Medical 
School. He also serves as Senior Faculty at the Disparities Solutions Center at Massachusetts General 
Hospital and is the founder. He strives to lead efforts for the Department of Emergency Medicine, the 
hospital and the medical school that will address health disparities and improve quality of care for the most 
disenfranchised.

In addition to his clinical interests, Dr. Landry is involved in research on Emergency Department utilization 
trends, disparities in care and quality of care. He also co-instructs a course at Harvard T.H. Chan School of 
Public Health and teaches health equity to residents and physicians. Dr. Landry promotes careers in the 
health professions to under-represented minorities and mentors scores of pre-medical students, medical 
students, residents, fellows, and junior faculty. Dr. Landry also co-founder and co-director of the Tour for 
Diversity in Medicine, (www.tour4diversity.org) an effort to increase the number of underrepresented 
minorities in medicine, dentistry, and other biomedical careers.

Dr. Landry has been recognized by his peers and colleagues as a leader in health equity and social justice. He 
has received numerous awards for his public health work and efforts to promote health care workforce 
diversity. He was recently awarded the Outstanding Academician Award by the Academy for Diversity and 
Inclusion in Emergency Medicine of the Society of Academic Emergency Medicine and the Albert Frechette 
Award from the Massachusetts Public Health Association.

Dr. Landry received his Bachelor of Science degree from Prairie View A&M University in 2002 and his 
medical degree from the University of Alabama Birmingham School of Medicine in 2006. He completed his 
residency in Emergency Medicine at the Beth Israel Deaconness Medical Center in 2009. In 2010, he earned a 
Master’s in Public Health degree from the Harvard T.H. Chan School of Public Health and completed the 
Commonwealth Fund Fellowship in Minority Health Policy at Harvard University. He received the Disparities 
Solutions Center/Aetna Fellow in Health Disparities award in 2010-2011.

Marcella Luercio, MD  
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community 
Partnership; Instructor in Pediatrics, Harvard Medical School, Boston Children’s Hospital

Dr. Luercio is a pediatric hospitalist with a strong research background, prior and ongoing 
training in medical education (as a current fellow in the prestigious Rabkin Fellowship in 
Medical Education), and expertise in the field of health equity and inclusion. Her early 
contributions to research were in clinical and translational investigations. Before medical school, she spent 
two years at the NIH conducting health disparities research. In medical school, she served as the principal 
investigator in a study identifying molecular markers in the pathogenesis of diabetic retinopathy in humans 
as potential therapeutic targets. During her pediatrics residency and chief residency, she became passionate 
about medical education and focused my career on medical education innovation and research. Dr. Luercio
helped redesign a new care team structure on Boston Children’s Hospital’s intermediate care unit to promote resident autonomy using the framework of self-determination theory. She created and secured funding for an annual “Second-Look” Program that invites residency applicants who are underrepresented in medicine back to the Boston Combined Residency Program to network with current residents and faculty members of underrepresented backgrounds. She also devised and helped implement an equitable and inclusive residency-wide COVID-19 response to address the diverse needs of residents. From these projects, Dr. Luercio is aware of what it takes to carry out a research project with rigor and to publish the findings. Her work has resulted in several peer-reviewed publications in journals like Academic Medicine and Pediatrics. More importantly, her work on medical education and equity, diversity, and inclusion has inspired her to address inequities in medical education training.

**Carmen Monthé-Drèze, MD**
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor of Pediatrics, Harvard Medical School, Brigham and Women’s Hospital

Dr. Monthé-Drèze is a Neonatologist and researcher at the Brigham and Women’s Hospital in the Department of Pediatric Newborn Medicine, and an Instructor of Pediatrics at Harvard Medical School. She received her MD degree from Albert Einstein College of Medicine and completed her pediatric residency at the Harvard Boston Combined Residency Program. She served as a Neonatal ICU Hospitalist for two years before completing her fellowship at the Harvard Neonatal-Perinatal Medicine program, where she served as Chief Fellow. Throughout her medical training to become a neonatologist, Dr. Monthé-Drèze appreciated how maternal health in pregnancy could impact offspring health throughout its life course. Her academic focus therefore has evolved to elucidate early (prenatal) life modifiable determinants of child outcomes. Considering the rising prevalence of childhood obesity – and its associated long-term health burden throughout the life course – Dr. Monthé-Drèze’s research seeks to provide novel insights onto its developmental origins and inform future intervention studies. While postnatal lifestyle is the most immediate cause of obesity, the influence of the maternal in-utero environment, specifically maternal obesity, is a significant contributor in the intergenerational vicious cycle of obesity. However, specific mediators of these long-term effects and the likely developmental programming mechanisms through which they operate remain unclear. Her research therefore seeks to characterize the underpinnings of transgenerational obesity through 1) Characterizing the role of maternal obesity and obesity-related inflammation on the development of (a) offspring obesity and (b) other related childhood outcomes which have been linked to childhood obesity such as cognition and behavior; 2) Investigating whether maternal diet and specific nutrient intakes during pregnancy have effects on offspring growth and development; 3) Elucidating whether exposure to maternal obesity in-utero may alter neurobiological processes that regulate appetite and hedonic eating behaviors in the offspring. The Diversity Inclusion and Community Partnership Faculty Fellowship Award will give Dr. Monthé-Drèze the opportunity to expand her research into the role of specialized anti-inflammatory mediators in the developmental programming of adiposity. Dr. Monthé-Drèze aspires through her research to directly inform trials in pregnancy specifically targeted for the growing population of women with obesity, and which may have the potential to positively impact the health of the next generation.
J. Nwando Olayiwola, MD, MPH, FAAFP  
Chief Health Equity Officer & Senior Vice President, Humana

Dr. Olayiwola is a Board-certified family physician and joined Humana as its first Chief Health Equity Officer/SVP in April 2021. In this role, she led the creation of an ambitious health equity strategy, and her team is implementing multiple product, workforce, clinical and community health innovations and programs tackling health disparities and social needs for populations that have been marginalized or made vulnerable. Some highlights of this work so far include Humana’s robust data disaggregation approach, screening thousands of members for health literacy and social needs and using those insights to inform predictive models on social risk, execution of a successful cultural humility training for Humana primary care clinicians leading to positive behavior change, and creation of a comprehensive health equity composite for Humana members and patients.

Prior to joining Humana, Dr. Olayiwola served as Chair and Professor of the Department of Family & Community Medicine at The Ohio State University (OSU) College of Medicine, where she also founded the Center for Primary Care Innovation and Transformation and was selected to co-chair the OSU Wexner Medical Center’s Anti-Racism/Health Equity strategy for the medical center and 7 health sciences colleges. She has also held roles as the Chief Clinical Transformation Officer of RubiconMD, a leading health technology firm bridging the interface between primary and specialty care; Director of the University of California, San Francisco’s Center for Excellence in Primary Care, Founder of the Association of Minority Women Professionals, and Chief Medical Officer of Community Health Center, Inc, Connecticut’s largest Federally Qualified Health Center system. She continues to practice primary care part-time at Health of Ohio Family Health Center and is an Adjunct Professor at the OSU College of Medicine and College of Public Health.

In October 2022, Dr. Olayiwola was inducted to the National Academy of Medicine, one of the most prestigious honors in healthcare. She is also a published author of four books. She is an active member of the Inclusion, Diversity, Equity and Action (IDEA) Committee for the City of New Albany, a Board Member for Healthy New Albany, and a member of the Board of Advisors for the OSU College of Public Health. She is also a member of Alpha Kappa Alpha Sorority, Inc. She and her husband Paul have two teenage children.

Francisco J. Quintana, PhD  
Professor of Neurology  
Kuchroo Weiner Distinguished Professor of Neuroimmunology  
Ann Romney Center for Neurologic Diseases  
Brigham and Women’s Hospital  
Harvard Medical School  
Associate Member, The Broad Institute of Harvard and MIT

Francisco J. Quintana, PhD is a Professor of Neurology at the Ann Romney Center for Neurologic Diseases, at Brigham and Women’s Hospital, Harvard Medical School, and an Associate Member at the Broad Institute of Harvard and MIT. Dr. Quintana is also the President of the International Society of Neuro Immunology (ISNI).

Dr. Quintana, a graduate of the University of Buenos Aires (1999, Argentina), obtained his PhD in immunology at the Weizmann Institute of Science (2004, Israel). He received postdoctoral training at the Weizmann Institute of Science and Harvard Medical School. In 2009, Dr. Quintana joined the faculty of Harvard Medical School.
Dr. Quintana’s research is focused on Neuroimmunology, investigating signaling pathways that control inflammation and neurodegeneration, with the ultimate goal of identifying novel therapeutic targets for immune-mediated and neurodegenerative disorders. Dr. Quintana has published over 230 peer reviewed articles and book chapters. Dr. Quintana’s work identified the transcription factor AHR as an important regulator of inflammation driven by adaptive and innate immune cells. He defined mechanisms by which cell-cell interactions, metabolism, the microbiome, and environmental chemicals control inflammation and neurodegeneration. Dr. Quintana’s work guided the development of Tapinarof, the first FDA-approved AHR-targeting drug for the treatment of psoriasis.

Dr. Quintana is the recipient of the Lady Anne Chain Prize for Academic Excellence and Scientific Achievements, the Junior Investigator Award from the National Multiple Sclerosis Society, the Pathway to Independence Award of the National Institute of Allergy and Infectious Diseases, the Award for Outstanding Research Achievement from Nature Biotechnology, the Tecan Award for Innovation, the Harry Weaver Award from the National Multiple Sclerosis Society, the Mentor Award from Harvard Medical School, the Milestones in Multiple Sclerosis Research Award from the National Multiple Sclerosis Society, the American Association of Immunologists-BD Biosciences Investigator Award, ISI Most Highly Cited List, the Barancik Prize of Innovation in Multiple Sclerosis Research and the Raices Prize for Excellence in Research (Argentina). In 2021, Dr. Quintana was named the Kuchroo Weiner Distinguished Professor of Neuroimmunology.

Joan Y. Reede, MD, MPH, MS, MBA
Dean, Diversity and Community Partnership; Professor of Medicine, Harvard Medical School; Professor of Society, Human Development and Health, Harvard T.H. Chan School of Public Health

Dr. Reede is Dean for Diversity and Community Partnership; Professor of Medicine, Harvard Medical School; Professor of Society, Human Development and Health, Harvard T.H. Chan School of Public Health. Dr. Reede has a lifelong passion for mentoring and supporting diversity in the biosciences. She is responsible for the development and management of a comprehensive program that provides leadership, guidance, and support to promote the increased recruitment, retention, and advancement of underrepresented minority faculty.

While at HMS, Dr. Reede created more than 20 diversity and leadership-focused programs, including founding the HMS Minority Faculty Development Program and the Biomedical Science Careers Program. Before joining Harvard, she served as the medical director of a Boston community health center and worked as a pediatrician in community and academic health centers, juvenile prisons, and public schools. She has held many advisory roles, serving on the HHS Advisory Committee on Minority Health and the Secretary’s Advisory Committee to the Director of NIH. In 2020, she became an American Association for the Advancement of Science Fellow.

Dr. Reede graduated from Brown University and Mount Sinai School of Medicine. She holds an MPH and an MS in Health Policy Management from Harvard T. H. Chan School, and an MBA from Boston University.
Mary Shapiro, MBA
Professor of Practice
Organizational Behavior Management
Simmons University

For more than 30 years, Shapiro has focused on advancing individuals of multiple social identities into leadership, and in improving the productivity of teams. She has done so in the capacity as professor, executive trainer, scholar, and consultant.

As a Fellow of Simmons University’s Institute of Inclusive Leadership and as a consultant, Shapiro works with organizations to build a work culture that enables all people to fully contribute; and with individuals to make their best contributions by navigating the often unintentional and unrecognized barriers they face as women, people of color, and introverts. This continues Shapiro’s 30 years of teaching at Simmons School of Business as a professor of Organization Behavior and in the inaugural endowed position of the Trust Professorship of Leadership when she developed a university-wide undergraduate leadership curriculum.

Shapiro researches and publishes in the areas of women and their careers; organizational efforts in moving towards gender equity; and in teams. In addition to journal articles, her books include “The HBS Guide to Leading Teams,” published by Harvard Business School Press, which captured the strategies and stories from 25 years of working with teams, and two books on interviewing and career strategies recognizing the nuances of many dimensions of diversity. Her case studies featuring women protagonists leading change are distributed through Harvard Business School Press. She developed "The Communication Styles Diagnostic," an online tool that has been used by thousands of managers to improve their effectiveness with individuals and teams.

Throughout her career, Shapiro has consulted with Fortune 500 companies, private institutions, and non-profits, including organizations such as CVS, Liberty Mutual, Harvard University, and Partners Health Care. She works with numerous Boards of Directors and for 12 years served on the Executive Board of the Girl Scouts of Eastern Massachusetts (GSEMA). She received her M.B.A. and M.S. Economics from Wright State University, Dayton, Ohio.

See more at: https://www.linkedin.com/in/mary-shapiro-b372537/
In addition to her dedication to Girl Scouts, for 20 years she has raised funds for the Dana Farber Cancer Institute through the Pan Mass Challenge, a 200-mile bike ride.

Kevin M. Simon, MD
Commonwealth Fund Fellow in Minority Health Policy at Harvard University
Chief Behavioral Health Officer, Boston Public Health Commission

Dr. Kevin M. Simon is the inaugural Chief Behavioral Health Officer for the City of Boston, Boston Public Health Commission. In addition, he is an Attending Psychiatrist at Boston Children’s Hospital, an Instructor in Psychiatry at Harvard Medical School, and a current Commonwealth Fund Fellow at Harvard University. Dr. Simon practices as a Child, Adolescent, and Adult Psychiatrist & Addiction Medicine specialist caring for youth through the Adolescent Substance use & Addiction Program "ASAP" clinic at Boston Children’s Hospital. As a researcher, Dr. Simon has received federal funding for work focused on the intersections of mental health, substance use, and justice involvement in youth and young adults. He completed clinical fellowships in child & adolescent psychiatry and addiction medicine at Boston Children’s Hospital.
Hospital / Harvard Medical School and a residency in adult psychiatry at Grady Hospital affiliated with Morehouse School of Medicine, in Atlanta, GA. He received his medical degree from Southern Illinois University School of Medicine. His writings on health equity, mental health, and substance use are in notable journals, including the *New England Journal of Medicine, American Journal of Public Health, and Health Affairs*.

Dennis Spencer, MD, PhD  
Faculty Fellow, Harvard Catalyst Program for Diversity Inclusion (PFDI); Instructor in Pediatrics, Harvard Medical School, Boston Children’s Hospital

Dr. Dennis Spencer is a Pediatric Gastroenterologist at Boston Children’s Hospital (BCH) and an Instructor in Pediatrics at Harvard Medical School (HMS). A physician-scientist, he is an investigator in the Rakoff-Nahoum laboratory (HMS/BCH) with a focus on the impact of diet on the composition and function of the gut microbiome. Dr. Spencer is a Faculty Advisor in the HMS Office of Recruitment and Multicultural Affairs as well as Faculty Chair of the BCH Graduate Medical Education Committee’s Joint Diversity & Recruitment subcommittee. He was recently awarded the 2021 Harold Amos Faculty Diversity Award from HMS. The National Medical Association has also recognized Dr. Spencer as a 2021 Top Physician Under 40 Award recipient. Dr. Spencer completed the Harvard Medical School (HMS) Fellowship in Pediatric Gastroenterology, Hepatology, and Nutrition at Boston Children’s Hospital following his residency at Lucile Packard Children’s Hospital / Stanford University. He is a graduate of the Weill Cornell / Rockefeller / Sloan-Kettering Tri-Institutional MD-PhD Program, obtaining a PhD in Microbial Pathogenesis and Immunology from The Rockefeller University. He is also a proud alumnus of Morehouse College.

Brittany Watson, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Brittany Watson, MD was most recently a family physician at Affinity Health Center, a FQHC in Rock Hill, SC. Dr. Watson has demonstrated interest and investment in public service; she is passionate about diversifying the medical workforce, and access to affordable healthcare and basic health education. She received the Society of Teachers of Family Medicine 2019 Resident Teacher Award, given to a graduating resident in recognition of demonstrated interest, ability and commitment to family medicine education. She was appointed as American Academy of Family Physicians Leading Physician Well-being Scholar in 2021. Dr. Watson received her medical degree from the Medical University of South Carolina in 2016.

Laurie Zephyrin MD, MPH, MBA  
Senior Vice President, Health System Equity  
The Commonwealth Fund

Dr. Zephyrin is senior vice president for Advancing Health Equity at the Commonwealth Fund. Dr. Zephyrin has extensive experience leading the vision, design, and delivery of innovative health care models across national health systems. From 2009–2018, she was the first national director of the Reproductive Health Program at the Department of Veterans Affairs, spearheading the strategic vision and leading systems change through the implementation of evidence-based policies and
programs to improve the health of women veterans nationwide. In 2016–2017, she served as acting assistant deputy under secretary for Health for Community Care, and later in 2017, as acting deputy under secretary for Health for Community Care. While directing the VA’s Community Care program, a key component of VA’s high-performance network with an operating budget of over $13 billion, Dr. Zephyrin spearheaded efforts to implement legislation, develop internal governance structures, and address patient outcomes through systemwide optimization of care delivery. As part of the leadership team, she also represented VA before Congress and other internal and external stakeholders. Dr. Zephyrin is a board-certified clinician. She is a clinical assistant professor of Obstetrics and Gynecology at NYU Langone School of Medicine (2013–present) and was previously an assistant professor at Columbia University, College of Physicians and Surgeons (2007–2012). She earned her M.D. from the New York University School of Medicine, M.B.A. and M.P.H. from Johns Hopkins University, and B.S. in Biomedical Sciences from the City College of New York. She completed her residency training at Harvard’s Integrated Residency Program at Brigham and Women’s Hospital and Massachusetts General Hospital.
Presenter: **Nora Abo-Sido, MD**, Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: **“A Community-Centered City of Boston Chronic Disease and Cancer Early Detection Initiative”**

Background: Boston is diverse in race, ethnicity, country of birth, and languages spoken with approximately 3 in 5 residents identifying as people of color in the 2020 Census. Boston is also city segregated by race, income, and education, with drastic disparities in life expectancy between neighborhoods seen in the high of 91.6 years in Back Bay, and the low of 68.8 years in Roxbury. This stark neighborhood-based disparity highlights the profound impact of social determinants of health. Cancer is the leading cause of death in Boston and while incidence and mortality rates are declining, disparities persist. Cancer burden remains notably high among historically marginalized residents of Boston, particularly Black, Asian, Latinx and immigrant residents. Black Bostonians are almost twice as likely to die from colorectal cancer than White Bostonians, with a 2019-2021 age-adjusted colorectal cancer mortality rate of 15.5 vs 8.5 per 100,000 and a premature (age <65 years) mortality rate of 6.1 vs 3.1. The Boston Public Health Commission (BPHC) received funding from the Colon Cancer Coalition to develop a tailored colon cancer screening campaign. The initial phase used focus groups, key informant interviews, informal feedback sessions, and continuous reporting to develop a community input strategy to increase screening rates among African American, Caribbean-American, and Latinx communities.

Objectives:

1. Implement culturally competent public-facing educational campaigns to educate and provide resources for individuals, families, and communities to improve chronic disease and cancer outcomes for minoritized Boston communities.
2. Promote key stakeholder engagement to standardize risk-based early detection for chronic disease and cancer.
3. Advocate for policy to improve chronic disease and cancer outcomes and health equity in partnership with other BPHC offices and key stakeholders across the city.

Results:

1. Reviewed literature, community needs and best practices to author a Community-Centered City of Boston Chronic Disease and Cancer Early Detection Initiative (CCEDI) adopted by the BPHC.
2. Expanded online data visualization database to map community partners and key stakeholders across the city of Boston using KUMU software.
3. Designed multilingual BPHC-branded media for the Chronic Disease Prevention and Control Division.

Future Directions:

1. Launch next phase of colorectal cancer screening communication campaign with filming of identified local leaders from Boston’s African American, Haitian Creole, and Spanish speaking communities.
2. Follow up with community members who provided input during the planning stage for feedback of materials prior to rollout.
3. Submit CCEDI workplan to BPHC leadership for tailored campaigns to address disparities in chronic disease and cancer outcomes for other minoritized groups including Asian American and Pacific Islanders, immigrants, individuals who experience incarceration and those experiencing houselessness as well as communication campaigns for other cancers (lung, melanoma) and chronic diseases (hypertension, diabetes, and obesity).

Preceptor: **Mark Kennedy, MBA**, Senior Program Manager, Chronic Disease Prevention and Control Division, Boston Public Health Commission
Presenter: Eftitan Yasin Akam, MD, Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Communicating MassHealth’s Approach to Improving Health Equity Data Collection”

Background: Accurate and complete data collection is a fundamental component of efforts to identify and address disparities. Although there has been a recognized need for improved race and ethnicity data collection for more than a decade, the COVID-19 pandemic highlighted the need for expedited health equity efforts, including improved data collection. In the 2020 Medicare and Medicaid Services’ (CMS) data quality assessment of state Medicaid agencies, Massachusetts’ Medicaid and Children’s Health Insurance Program (CHIP), called MassHealth, ranked amongst the five worst performing states at ~50% data completeness. These findings coincided with the commencement of MassHealth’s ambitious health equity initiative, which included plans to improve the quality and completeness of MassHealth’s data. From 2020-2022, MassHealth conducted a comprehensive review of data collection efforts and stakeholder assessment to establish a new method for collecting information related to equity measures. In September 2022, MassHealth received CMS approval for its 1115 waiver request, allowing MassHealth to invest approximately $2 billion over 5 years to improve health equity. These efforts have culminated in new race and ethnicity data standards, to be implemented in the summer of 2023.

Objectives: 1. To understand and document MassHealth’s process for the development of its new Data collection instrument
2. To gain an understanding of health equity data collection standards across stakeholder groups
3. To assist in establishing a framework for health equity data collection improvement
4. To publicly communicate MassHealth’s Health Equity data collection framework through a series of academic publications

Methods: 1. Performed a literature review to understand health equity data collection standards and industry recommendations for race, ethnicity, language, disability, sexual orientation, and gender identity
2. Reviewed public and internal MassHealth documents detailing findings from stakeholder engagement efforts
3. Contributed to characterizing a framework that outlines MassHealth’s three-step approach to improving data collection and the agency’s decision process for seven components of data collection.
4. Co-authored a manuscript draft detailing the above framework.

Results: A draft manuscript is currently under internal review at MassHealth and, when approved, will be published as the first of a series of publications describing MassHealth’s efforts to improve collection of different health equity data. This framework was also used to inform an individual comment letter to the Office of Management and Budget regarding their proposed standards for race/ethnicity data collection.

Future Directions: 1. Continue to refine manuscript with input from MassHealth stakeholders and publish findings
2. Undertake a similar process as above to communicate data collection of language preference, disability, sex, sexual orientation, gender identity

Preceptor: Michael Chin, MD, University of Massachusetts Chan Medical School/MassHealth
Presenter: Zerita C. Buchanan, DDS, Joseph L Henry Oral Health Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Examining Commercial Dental Insurance Reimbursement Patterns by Geographic Area”

Background: An income disparity exists in the field of dentistry. Data published by the American Dental Association Health Policy Institute in 2022 shows that, on average White dentists earn more ($254,860) than Asian ($202,967), Hispanic ($198,565), and Black ($170,097) dentists [1]. Factors such as Black dentists serving populations with higher ratios of Medicaid patients explain a portion of the income disparity. However, unexplained factors, including the role of private commercial dental insurance plans, still need to be analyzed. Despite Black dentists making less yearly income than their counterparts, black dental students graduate with the highest amount of educational debt. In order to attract and retain Black dentists to the workforce, income inequality must be addressed.

Objectives: 1. Evaluate the role commercial dental insurance plans play in the wealth disparity between white and minoritized dentists. 2. Examine whether or not commercial dental insurance reimbursement rates varied based on counties, zip codes, and provider race.

Methods: 1. Obtained financial data sets from a dental insights company that included average “in-network” submitted, allowed, and paid claim amounts from Q1 2022 for 10 CDT dental codes for all NPIs of dental providers licensed in Georgia. 2. Obtained data sets of 2021 key dentist characteristics from the American Dental Association Health Policy Institute (NPI, Race, Age, Year of Grad, Gender, Specialty, Practice Address, Practice Zip, Practice County). 3. Merged the two data sets with 2021 census-related data. 4. Completed two statistical analyses to evaluate commercial dental insurance reimbursement patterns based on county and zip codes.

Results: This study found that Black dentists submit lower fees to commercial insurance companies, receive lower contract rates from commercial insurance companies, and are paid lower amounts for procedures.

Future Directions: 1. Advocate for standardized and equitable regulation of commercial dental insurance reimbursement payments. 2. Explore “patient filtering” by race and insurance attractiveness in group practice settings and the implications that may have on racial income disparity in dentistry.

Preceptor: Marko Vujicic, Ph.D. Chief Economist & Vice President Health Policy Institute American Dental Association

**Presenter:** Nasrien E. Ibrahim, MD, Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

**Project Title:** “The Role of Hospital Policies in Promoting Equity in Organ Transplantation”

**Objectives:**
1. To review institutional living organ donor and organ recipient policies that determine eligibility criteria with a health equity lens
2. To recommend changes in institutional transplant policies that would ensure inclusivity and more equitable allocation of organs

**Background:**
Racial and ethnic minority patient populations receive less transplants than White patients, even when the disease burden is higher. For example, Black individuals are four times as likely to develop kidney failure as White individuals, but much less likely to receive a lifesaving kidney transplant.

Determining eligibility for transplant is a complicated process, whereby emotions, ethics, biases, and facts play competing roles. Transplant eligibility consists of 3 sets of prerequisites: medical, financial, and social. Inequities in transplant extend beyond the individual. They exist in a larger context of structural and institutional racism and social determinants of health.

To reduce and eventually eliminate these inequities, policies at federal, state, and institutional levels that contribute to them must be addressed. For example, Medicaid in the State of Georgia does not cover heart transplant for anyone 21 years or older; leaving patients who often have worse outcomes from heart failure with inferior access to lifesaving therapies.

The purpose of this study was to examine institutional organ transplant policies that determine eligibility criteria for both organ donors and organ recipients and make recommendations for how policies can be improved to promote inclusivity and equity in organ allocation.

**Methods:**
1. The University of Iowa Health Care’s Joint Office for Compliance flagged organ transplant policies that needed to be reviewed.
2. Eight policies on organ donor and organ recipient eligibility criteria were reviewed. A literature search was performed for items flagged by the attorneys as well as items I noted during my policy review.
3. I reconvened with members of the Joint Office for Compliance and my preceptor and shared my findings and recommendations on how policies can be changed to promote inclusivity and equity in organ allocation.

**Results:**
The hospital system has adopted the changes to one policy so far. The changes were centered on the use of more gender inclusive language and on including transgender individuals in cancer screening guidelines for both organ donors and organ recipients. Changes were made recommending against use of racialized genetic testing to exclude organ donors, using body mass index alone as a measure of overall health, and considering psychosocial barriers are relative and not absolute contraindications.

**Future Directions:**
1. Meet with various directors of transplant to discuss adoption of changes recommended to the remaining policies.
2. Convene a group of transplant clinicians, social workers, and other members of transplant disciplinary teams to write a statement on the importance of institutional policies in promoting equity in organ allocation and recommended steps to act.

**Preceptor:** Nicole Del Castillo, MD, MPH- Director of the Office of Diversity, Equity, and Inclusion at CCOM and Clinical Assistant Professor in the Department of Psychiatry, University of Iowa Health Care.
Presenter: Monik C. Jiménez, ScD, Assistant Professor of Medicine, Harvard Medical School

Project title: “Examining Stroke Symptoms as Markers of Stroke Risk among Hispanic/Latine Adults”

Background: Hispanic/Latine adults exhibit a significantly greater incidence of total stroke, younger age at stroke mortality, and worse neurologic, cognitive, and functional outcomes post-stroke than Whites. Further, endorsement of at least one stroke symptom is predictive of subsequent stroke incidence irrespective of other stroke risk factors. However, current research examining the relationship between stroke risk factors and stroke symptoms has focused exclusively on non-Hispanic Black and White adults, with a paucity of data among Hispanic/Latine adults.

Objective: To assess the association between severity and clinical control of diabetes and hypertension with stroke symptoms and examine variability across Hispanic/Latine heritage groups.

Methods: We analyzed data from 6,938 adults aged 18-74 years from the Hispanic Community Health Study/Study of Latinos (HCHS/SOL), an ongoing U.S. community-based prospective cohort of self-identified non-institutionalized Hispanic/Latine households across four U.S. regions. A baseline interview and clinical examination were conducted from 2008-2011 and 2014-2017. Visits included assessment of biological (e.g., anthropometrics, blood draw, oral glucose tolerance test, electrocardiogram, blood pressure), behavioral (e.g., diet, physical activity, tobacco, and alcohol use), and sociocultural factors (e.g., socioeconomic status, acculturation) and medication inventory. Data collected in 2017 from both clinical exams and stroke symptoms were used. Stroke symptoms were collected from the short form Questionnaire for Verifying Stroke-Free Status (QVSFS) a validated 6-item telephone-administered instrument which collects self-reported stroke symptoms over the past year: sudden onset unilateral weakness or numbness, loss of vision or half-vision, and inability to understand or communicate. Separate nested multivariable logistic regression models with odd ratios (OR) and 95% confidence intervals (95% CI) were used to estimate the association between diabetes and hypertension severity or clinical control and the prevalence of at least stroke symptoms, the primary outcome. Variability across Hispanic/Latine heritage was based on a likelihood ratio test (α=0.10) with the largest group (Mexican) as the reference.

Results: In this population-based cohort we observed that increased glycemic dysregulation was associated with greater odds of self-reported stroke symptoms. In multivariable adjusted models, prediabetes was significantly associated with a 38% greater odds (95% CI 1.06-1.79) and diabetes an 82% greater odds (95% CI 1.41-2.35) of reporting >1 stroke symptom compared to those with normoglycemia after adjustment for age, sex, social determinants of health, and lifestyle factors. In models adjusted for age and sex, treated hypertension was significantly associated with a 57% increased odds of stroke symptoms (95% CI: 1.19-2.07) with a similar association observed for untreated stage 1 hypertension (OR=1.47, 95% CI: 1.04-2.10). However, associations were substantially attenuated and no longer statistically significant, with the exception of treated hypertension (OR=1.07, 95% CI: 1.02-1.11) after adjusting for smoking status.

Conclusion: These findings suggest that prediabetes, diabetes, and history of hypertension are strongly associated with the prevalence of self-reported stroke symptoms. This study underscores the clinical importance of screening patients with prediabetes, diabetes, and hypertension for stroke symptoms in the Hispanic/Latine population.

Mentor: Kathryn Rexrode, MD, Chief, Division of Women’s, Department of Medicine, Brigham and Women’s Hospital
**Presenter:** Marcella Luercio, MD, Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor in Pediatrics, Harvard Medical School, Boston Children’s Hospital

**Mentor:** Faculty Mentor: Valerie L. Ward, MD, MPH, Senior Vice President, Chief Equity and Inclusion Officer, Director, Sandra L. Fenwick I, Health Equity and Inclusion, Director, Office of Health Equity and Inclusion, Boston Children’s Hospital, Assistant Professor of Radiology, Harvard Medical School

**Project Title:** How Language Used in Pediatric Residents’ Performance Evaluations Differ by Gender and Underrepresented in Medicine Status

**Background:** Narrative performance evaluations can introduce gender-based biased language. Research on race/ethnicity-based bias in evaluations has focused on medical students, but not residents. The intersectionality of gender and race/ethnicity biases in resident evaluations is unknown.

**Objective:** To determine whether differences exist by gender, race/ethnicity, and the intersectionality of these identities in the attributes used to evaluate the performance of pediatric residents.

**Design/Methods:** We conducted a linguistic analysis of text extracted from end-of-rotation resident evaluations completed by faculty at 2 large academic pediatric residency programs from 2014-2018. Evaluations were de-identified, and self-reported resident gender and race/ethnicity data were compiled. Attributes of interest were categorized, based on prior literature, into personality, competence/ability, grindstone, and standout categories. A modified Delphi was used to reach consensus on conflicting attribute interpretations (Table 1). We used natural language processing to provide a count of attributes of interest after 2 researchers trained a model for context (e.g., keeping the attribute “best” in expressions like “best resident,” while omitting “best way to learn”). Attribute rate (count of attributes per category appearing in composite of all evaluations for a particular resident per 1000 words) was compared via t-test between groups: female vs. male, underrepresented in medicine (UiM) vs. non-UiM. An interaction term of UiM by gender in each attribute model was added to assess for intersectionality.

**Results:** Evaluations from 476 unique residents were included: 69% (329) Female; 13% (61) UiM. There was no difference in attribute rate per category by gender (Table 2a). Non-UiM residents were more often described by competency attributes than UiM residents (p=0.004; Table 2b). Attribute rates in evaluations of non-UiM vs. UiM males in competency and standout categories were: 12.5±4.6 vs. 11.0±4.7 (p 0.06) and 9.2±5.1 vs. 7.8±4.4 (p 0.07) respectively (Table 2c). Word utilization rate used to describe non-UiM residents’ attributes was predominantly from competency and grindstone categories (e.g., “professional”; Table 3).

**Conclusion(s):** In performance evaluations of pediatric residents, non-UiM residents were more often described by competency attributes than UiM residents, although this difference was not seen across gender or intersectionality of identities (the latter likely being underpowered). These data suggest race/ethnicity-based biases enter into evaluations and educators must commit to uncovering and mitigating these biases.
Presenter: Carmen Monthé-Drèze, MD Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor of Pediatrics, Harvard Medical School, Department of Pediatrics, Brigham and Women’s Hospital

Project title: “The Placental Transcriptome and Newborn Adiposity: Characterizing the Role of Novel Lipid Bioactives in Human Pregnancies”

Background: Neonatal adiposity is linked to later childhood obesity, a significant risk factor for adverse cardiometabolic health through the lifecourse. Maternal obesity, which now affects 1 in 3 women of reproductive age, is a strong predictor of neonatal adiposity. Placental responses to the \textit{in utero} lipotoxic and pro-inflammatory environment of obese pregnancies underpin fetal fat accrual, and new therapeutics targeting these mechanistic pathways are urgently needed. A novel class of lipid bioactives derived mainly from omega(n)-3 polyunsaturated fatty acids (PUFA), called specialized pro-resolving lipid mediators (SPMs), have been shown to downregulate inflammation and improve dysmetabolism in pre-clinical models of obesity and metabolic syndrome. However, the role of SPM in placental function and in the developmental programming of adiposity in human pregnancies remains unknown.

Objective: The first aim was to examine whether concentrations of placental SPM and prostaglandins (PGF2a, marker of inflammation) were associated with maternal pre-pregnancy obesity and neonatal adiposity. The second aim was to investigate placental transcriptomic signatures of candidate SPMs.

Methods: We measured PGF2a, PUFA (n6, n3), SPM and SPM precursor concentrations using UHPLC-ESI-MS in n=60 placentae collected following term c-section deliveries. We assessed infant adiposity by air displacement plethysmography within 72 hours of birth. We used multivariate linear regression to estimate associations of placental SPM and PGF2a with maternal obesity and neonatal adiposity. We then used the Nanostring nCounter platform to simultaneously examine the differential expression of 750 placental metabolism genes by SPM and PGF2 concentration levels. Differential expression was defined as a 1.5-fold change (t-test $P < 0.05$).

Results: Median (IQR) maternal BMI was 27.9 (22.9, 38.6) kg/m$^2$, and mean ± SD age was 29.2 ± 5.7. Non-Hispanic Blacks comprised 40% of the cohort. Median (IQR) birthweight was 3.2 (3.0, 3.5) kg. Placentae of women with obesity (vs. normal weight) had significantly higher concentrations of n-6 AA, n-3 DPA, and n-3 DHA PUFA, but lower concentrations of PUFA-derived SPM, namely LXA4, RvD1, Mar1, and their precursors, 15-HETE, 17HDoHE, and 14HDoHE, respectively. The ratio of placental pro-inflammatory PGF2a to anti-inflammatory SPM precursors (e.g., PGF2a/14-HDoHE: $\beta$ 16.7% [95%: CI 6.3, 27.0]; PGF2a/17-HDoHE: 1.8% [0.03, 3.04]), as well as the ratio of pro-inflammatory PGF2a to anti-inflammatory SPM (RvD1, MaR1), were significantly associated with adiposity in female but not male neonates. Transcriptomic analyses revealed differential regulation of genes involved in inflammation, cellular response to stress, and nutrient metabolism in placentae with high vs. low SPM and PGF2a concentrations.

Conclusion: For the first time, we show that placental SPM are decreased in pregnancies complicated by obesity, and that their relative concentrations are associated with neonatal adiposity. Additionally, SPM may modulate placental metabolic pathways implicated in fetal fat accrual. These preliminary results lay the foundation for larger investigation into the protective role of prenatal SPM in the developmental programming of neonatal adiposity in high-risk pregnancies.

Mentor: Sarbattama Sen, Assistant Professor of Pediatrics, Brigham and Women’s Hospital, Harvard Medical School
Presenter: Kevin Simon, MD, Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Navigating Behavioral Health Equity in the City of Boston as the First Chief Behavioral Health Officer”

Background: In the City of Boston, behavioral health disparities are most acute among residents, communities, and neighborhoods most impacted by racism and structural violence. In 2022, the City of Boston Council members approved allocating one-time federal stimulus funding to address the behavioral health needs of Boston. The City received $23.6 million in American Rescue Plan Act (ARPA) federal funds to respond to the behavioral health needs of Boston residents. In June 2022, Mayor Michelle Wu appointed Boston’s inaugural Chief Behavioral Health Officer.

Objectives:
1. Advise and lead the development of a comprehensive and equitable public health plan to address Bostons’ growing mental health needs.
2. Develop and maintain ongoing community engagement processes to prioritize voice, perspectives, and needs of Black, Latino, and other residents of color, residents with adverse childhood experiences, and marginalized communities.
3. Provide liaison oversight and ensure integration and internal coordination of behavioral health services across City departments, including Boston Police Department, Boston Public Schools, and Boston Public Libraries.

Results:
1. Established the Center for Behavioral Health and Wellness (The Center) within the BPHC and identify youth behavioral health as The Centers first priority.
2. Developed and issued two Request for Proposal (RFP) in order to expand, develop and implement new and existing efforts to recruit a diverse behavioral health workforce (Behavioral Health Workforce Pathway) and education communities about behavioral health (i.e., prevalence, risk factors, treatment, local options) (Behavioral Health Communications/Public Awareness Campaign).
3. Developed and implemented enhanced RFP review process. Actively collaborating on multiple Citywide projects related to improving behavioral health outcomes for Boston residents.

Future Directions:
1. Award and announce first recipients from initial RFPs.
2. Launch behavioral health public communications campaign.
3. Host Citywide Youth Behavioral Health Conference

Preceptor: Bisola Ojikutu, MD, MPH, Executive Director, Boston Public Health Commission
Presenter: Dennis J Spencer, MD, PhD, Faculty Fellow, Harvard Catalyst for Faculty Development and Diversity; Instructor of Pediatrics, Harvard Medical School, Department of Pediatrics, Boston Children’s Hospital

Project title: “Modification of Gut Microbiome Antibiotic Resistance through Dietary Glycans”

Background: The gut microbiome plays an important role in health and disease. One of these important roles is excluding opportunistic enteric pathogens by “colonization resistance”. Bacteroides is the predominant Gram-negative bacteria of the human gut where it competes and survives with a unique capacity to metabolize a diverse range of dietary glycans encoded by distinct polysaccharide utilization loci (PULs). Depletion of the Bacteroidetes phylum such as during the necessary use of antibiotics is associated with increased risk of enteric infections, including Clostridium difficile. There is an established strong link between diet and the microbiota as well as growing evidence of an important role for metabolism in bacterial antibiotic susceptibility. Our preliminary data focusing on the diverse glycan utilizer Bacteroides ovatus establishes carbohydrate-specific antibiotic susceptibility during cultivation in both ampicillin and vancomycin.

Objective: To determine which dietary sugars impact Bacteroides antibiotic susceptibility and elucidate the mechanisms underlying this phenomenon as a novel approach to preventing severe infections by gastrointestinal pathogens.

Methods: We used our established pipeline for high throughput in vitro phenotypic analysis of Bacteroides across a diverse array of carbohydrate conditions. Specifically, we created 48h growth curves under continuous anaerobic conditions using Bacteroides defined media supplemented with a specific carbohydrate source (20 in total including mono-, di-, and poly- saccharides) across antibiotics spanning mechanisms of action including inhibitors of the cell wall (vancomycin, cefoxitin, ampicillin), and ribosome (clindamycin), DNA gyrase (ciprofloxacin), and those whose mechanism is poorly understood (metronidazole). We then used next generation Transposon Sequencing (TnSeq) to screen mutant libraries of selected strains to determine the genetic basis of sugar-specific antibiotic resistance in the Bacteroides.

Results: 40 strains of Bacteroides were screened against diverse carbohydrate + antibiotic conditions. Among those tested, 10 transposon mutant libraries were established for further analyses using TnSeq. Genes identified as the results of screens included such candidates previously known to be related to glycan metabolism including capsular polysaccharide (CPS) locus, Catabolite control protein A (CcpA), and a Xyloglucan PUL in Bacteroides ovatus. Knockout mutants of specific candidate genes have not identified expected significant impact on Bacteroides antibiotic sensitivity during in vitro validation experiments.

Conclusion: Our preliminary in vitro phenotypic screen experiments using specific glycans reveal an impact on antibiotic susceptibility although mutant knockouts of gene candidates suspected to underly this effect have not yielded convincing evidence of biological or clinical significance. Additional TnSeq screens with more conservative criteria for gene candidates are underway to identify stronger phenotypes using both solid and liquid-based experimental platforms.

Mentor: Seth Rakoff-Nahoum, MD, PhD, Associate Professor of Pediatrics, Boston Children’s Hospital, Harvard Medical School
Presenter: Brittany Watson, MD, Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Advancing Person-centered Care Planning for People Living with Multiple Chronic Conditions to Improve Outcomes”

Background: People living with multiple chronic conditions (MCCs) comprise 27% of the United States population. The prevalence will increase as healthcare continues to innovate and life expectancy rises. MCCs disproportionately impact Black and low-income individuals. Moreover, MCCs affect patients and their loved ones. The burden is felt across the healthcare system and beyond. With MCCs accounting for 71% of health care spending, and health care’s increasing impact on the gross domestic product (18.3%), society has a vested interest in improving the care of those living with MCCs. Person-centered care planning has an important role in advancing the care of individuals with and at risk for MCCs. The conversation surrounding care planning is not new, yet there is little reporting of best practices and models. Most implementation strategies are completed in silos and are not published.

The purpose of this project is to understand the current landscape of person-centered care planning. The goal is to centralize information to analyze for best practices that will improve outcomes for people living with MCCs. The United States Agency for Healthcare Research and Quality (AHRQ) released a request for information (RFI) in September 2022 in order to gather national feedback.

Objectives: 1. To understand the current state of comprehensive, longitudinal, person-centered care planning for people at risk for or living with MCC across care settings. 2. Understand existing models of person-centered care planning, their current scale, barriers, and facilitators to implementation. 3. Highlight innovative models of care, approaches, promising strategies, and solutions for clinicians and practices to routinely engage in comprehensive, longitudinal, person-centered care planning to improve the care of people at risk for or living with MCC.

Methods: 1. AHRQ published a RFI for public comment. 2. Performed a literature review to understand the current academic landscape of care planning, and to identify recommended best practices. 3. Conducted a qualitative analysis of the request for information responses. 4. Plan to release results to inform policy and practice.

Results: AHRQ’s RFI was highly successful and received fifty-nine responses. Respondents represented diverse perspectives. Patients, payers, health systems, care givers, community organizations, professional organizations, advocacy organizations, providers, researchers, educators, and more responded. Preliminary analysis shows seventeen categories, seventy subthemes, and forty-three examples/models. The highest frequency themes related to barriers, payment, and placing patients at the center of their care with providers, caregivers, and communities surrounding.

Next Steps: 1. Refine themes. 2. Distribute findings to government agencies 3. Report findings to the Office of the Assistant Secretary for Health (OASH)’s Initiative to Strengthen Primary Health Care. 4. Convey findings to the public in the form of a white paper or publication. 5. Analyze the examples/models for common elements to inform best practice standards.

Preceptor: Arlene Bierman, MD, MS Director, Center for Evidence and Practice Improvement at Agency for Healthcare Research and Quality

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Harvard Medical School
Office for Diversity Inclusion and Community Partnership

DICP Mission
The mission of the Office for Diversity Inclusion and Community Partnership (DICP) is to advance diversity inclusion in health, biomedical, behavioral, and Science Technology Engineering and Mathematics (STEM) fields that build individual and institutional capacity to achieve excellence, foster innovation, and ensure equity in health locally, nationally, and globally.

About DICP
The Office for Diversity Inclusion and Community Partnership (DICP) was established in 2002 (originally named Faculty Development and Diversity, est. 1995) to promote the increased recruitment, retention and advancement of diverse faculty, particularly individuals from groups underrepresented in medicine (URM), at HMS and to oversee all diversity activities involving Harvard Medical School (HMS) faculty, trainees, students and staff. DICP supports its mission through several, interconnected programs that focus on specific aspects of the career pathway from K-12 to leadership, including attending to points of transitions. Policies and practices are designed to build a culture based on inclusive excellence.

This is achieved through efforts that support the career development of junior faculty and fellows; train leaders in academic medicine and health policy; provide programs that address crucial pipeline issues; and sponsor awards and recognitions that reinforce behaviors and practices that are supportive of diversity, inclusion, mentoring, and faculty development. In addition, DICP activities support Better Together framework that is the result of deliberations of HMS Task Force on Diversity and Inclusion, as they relate to addressing culture and communication, developing people and infrastructure, building community and belonging, holding ourselves accountable and generating knowledge. These recommendations are guided by the HMS Mission Statement, Community Values Statement and Diversity Statement. DICP also acts as a central resource for faculty development and diversity efforts of Harvard Catalyst, Harvard University's Clinical and Translational Science Center. Recognizing the importance of addressing issues that impact faculty recruitment, impede faculty advancement and thwart faculty retention, in 1990, HMS initiated the Minority Faculty Development Program (MFDP). The MFDP, a component of DICP, offers consistent programming that is responsive to identified needs of individuals and institutions and serves as a nexus for collaborative work among HMS, HMS-affiliate faculty development programs and/or diversity/multicultural affairs offices. In addition, MFDP addresses issues of increasing the pool of minority and disadvantaged students interested in careers in science and medicine, and has built a three-pronged effort to encourage URM and disadvantaged students from all levels of the educational pipeline to pursue biomedical, STEM and health-related careers. Programs begin as early as the middle school level and carry on through the postgraduate level and involve curriculum development, teacher training, enhancing student research, and career development. DICP/MFDP’s work addresses HMS’ relationship with the community (internal and external) through the provision of programs that link HMS faculty, trainees and students with local, regional and national community-related activities.

Through DICP’s research and evaluation arm, Converge: Building Inclusion in the Sciences through Research, DICP conducts evaluation for DICP programs, as well as research addressing national, regional and local strategies that support workforce diversity and inclusion in the biomedical sciences. Of particular interest are groups that are traditionally underrepresented in these fields. Knowledge is generated through rigorous, theory-based scientific research; linking policy and practice with scientific evidence; and convening interdisciplinary stakeholder groups. Converge’s systems-based perspective for diversity and inclusion serves as the foundation for the work that it undertakes. The current research focuses on building a knowledge base and training mechanism for sustained capacity-building and decision making that enhances workforce diversity and human resource development in academic medicine.

For further information, please contact us:
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Office for Diversity Inclusion and Community Partnership (DICP)
Faculty Fellowship Program

The Office for Diversity Inclusion and Community Partnership (DICP) Faculty Fellowship is a two-year, non-degree Faculty Fellowship Program for Harvard Medical School (HMS) junior faculty that enables fellows to pursue activities that enhance their development as researchers and clinicians/teachers, leads to their advancement within the Harvard system, and promotes diversity within the HMS community. The Program provides two years of fellowship support in the amount of $50,000 per year intended to provide release time from clinical work to conduct an individual, mentored research project, participate in Fellowship-related activities, meet regularly with mentors, and present research findings at the annual Minority Health Policy Meeting.

Requests for further information about The DICP Faculty Fellowship Program should be addressed to:

Joan Y. Reede, MD, MPH, MS, MBA
Program Director
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https://mfdp.med.harvard.edu/DICP_Faculty_Fellowship

Beth Israel Deaconess Medical Center
Office for Diversity Equity and Inclusion

Beth Israel Deaconess Medical Center was formed by the merger of two hospitals: The Beth Israel Hospital and the New England Deaconess Hospital. Both were founded to serve the poor and those who were discriminated against. A century later, this tradition continues and the spirit of serving those at the periphery of the society and the disadvantaged remains in the “DNA” of the institution. In fact, Beth Israel Deaconess Medical Center proudly serves Boston’s vulnerable patients and provides care at affiliated community health centers, with a focus on providing equitable care for our diverse communities.

Our history inspires us to continue our efforts to redress inequalities in the health care system. The CODEI will strive to increase the number of UIIM physicians in our ranks and to support those who are already our colleagues, because we recognize that our collective wisdom is richer when it includes and values the experiences of African Americans, Latinos, Native Americans, Pacific Islanders, women, and LGBTQIA+ and disabled people, who may have faced barriers to entering, staying and advancing in the health professions. The ODEI also works to inform all in our community about the ongoing hidden biases, structural racism and health care disparities affecting people of color, sexual minorities, and the disabled, and to educate about the cross-cultural dynamics that impact on how these groups access and experience health care.

Contact:
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Daniele Ölveczky, MD MS FACP
Director, Center for Diversity Equity and Inclusion
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The mission of the Office of Faculty Development (OFD) at Boston Children’s Hospital is to facilitate the career advancement and satisfaction of Boston Children’s Hospital faculty, fostering careers particularly of early-stage faculty, and increasing leadership opportunities for women and Underrepresented in Medicine (UiM) faculty. The OFD staff includes Faculty Director Hans Oettgen, MD, PhD; Associate Director and Director of the Office for Women’s Careers, Nicole Ullrich, MD, PhD; Director of Basic Science Career Development, Carla Kim, PhD; Program Director Maxine Milstein, MBA; and Program Manager Jill Dobriner, PhD. The OFD goals include facilitating communication with faculty through a newsletter (Perspectives), website, Twitter page, and targeted email distribution lists; fostering academic advancement; providing skill building workshops; establishing a climate of success through a mentoring network; promoting excellence in teaching; supporting work/life balance initiatives; promoting diversity and cultural responsiveness; and forging collaborations within Children’s and across institutions to develop synergies for pathway/retention efforts.

The OFD collaborates closely with the Chief Education Officer and Director of the Department of Education, Alan Leichtner, MD, MSHPEd at BCH to foster the continuous improvement of teaching and learning. In collaboration with the BCH Office of Health Equity and Inclusion and Senior Vice-President and Chief Equity and Inclusion Officer, Valerie L. Ward, MD, PMH, the OFD has developed a multi-dimensional program to promote faculty diversity which encompasses communication strategies; supports a hospital-wide, systemic approach to; and fosters academic promotion, professional guidance, and career satisfaction. With sponsorship from Boston Children's Hospital Research Executive Committees, the OFD offers two-year fellowships, awarded annually to junior faculty, including designated slots for UiM faculty and faculty with family responsibilities.

The OFD collaborates with career development offices at eight other teaching hospitals and the HMS Office for Faculty Affairs and Office for Diversity Inclusion and Community Partnership, through CHADD (Consortium of Harvard-Affiliated Offices for Faculty Development and Diversity) to invite speakers, sponsor events, and develop courses, search committee guidelines, and diversity initiatives. The OFD also collaborates with the Harvard Catalyst to improve training and mentorship opportunities for investigators, by increasing the quality and scope of clinical and translational research resources.

The mission of Boston Children’s Hospital’s (BCH) Office of Health Equity and Inclusion, founded in 2017, is to provide guidance on achieving a culture that honors equity, diversity, respect, inclusion and excellence. The Office of Health Equity and Inclusion works collaboratively with other Boston Children’s and Harvard Medical School offices, including the BCH Office of Faculty Development, the BCH Academy for Teaching and Educational Innovation and Scholarship, the BCH Office of General Counsel, the BCH Office of Experience, Human Resources, and BCH Program for Patient Safety and Quality. The goals of the Office are: to advance culturally effective pediatric care; to conduct research to improve pediatric health outcomes and reduce pediatric healthcare disparities; to recruit, develop and advance a diverse and inclusive workforce; and to support an environment of respect for different viewpoints, backgrounds and experiences. The Office of Health Equity and Inclusion supports innovative programming focusing on health equity, diversity, and inclusion across the four Boston Children’s missions: clinical care, research, community, and education. The work of the Office of Health Equity and Inclusion aligns with the goals and commitments in the Boston Children’s Hospital Declaration on Equity, Diversity and Inclusivity.

Valerie L. Ward, MD, MPH: Senior Vice President and Chief Equity and Inclusion Officer; Director, Office of Health Equity and Inclusion; Director, Sandra L. Fenwick Institute for Pediatric Health Equity and Inclusion
Amanda Grice, MS, RDMS - Program Director
In 2021, Boston Children’s launched the Sandra L. Fenwick Institute for Pediatric Health Equity and Inclusion. The Fenwick Institute aims to advance pediatric health equity and inclusion locally, nationally and globally in three focus areas:

- **Health Equity Research** - shape and give voice to research in pediatric health disparities and translate findings into practice to create equitable health care access, delivery and outcomes for all children.
- **Inclusion** - lead our nation’s children’s hospitals, and the world, in robust efforts around diversity and inclusion so that patients and their families encounter more people - more caregivers and leaders - from a variety of backgrounds in pediatric health care.
- **Public Policy** - act as a change-maker in pediatrics by growing our influence as a think tank on health equity, diversity and inclusion, creating forums for education, discussion and knowledge sharing, and securing systemic change by translating research findings into public policy recommendations that produce meaningful changes.

Valerie L. Ward, MD, MPH - Senior Vice President and Chief Equity and Inclusion Officer; Director, Office of Health Equity and Inclusion; Director, Sandra L. Fenwick Institute for Pediatric Health Equity and Inclusion
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The Center for Diversity and Inclusion (CDI) aims to enhance workforce diversity by providing career advancement and professional development opportunities and through promoting increased recruitment, retention and advancement among all diverse faculty, trainees and students. CDI’s mission is to promote a vibrant, diverse and inclusive professional community where every person thrives.

Housed within the CDI is the Office for Women’s Careers (OWC), a collaborative yet unique entity that serves to support Established in 1988 and housed within the Center for Diversity and Inclusion (CDI), the Office for Women’s Careers (OWC) is a collaborative office supporting women, nonbinary, and transgender faculty with professional and leadership development while advancing gender equity in our institution and in academic medicine.

Contact information:
Website: cdi.brighamandwomens.org
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**SPONSORS’ DESCRIPTIONS**

**Cambridge Health Alliance**  
**Department of Medicine, Division of Minority Affairs**

The Office of Minority Affairs at Cambridge Health Alliance (CHA), a Division of the CHA Department of Medicine, assists in minority recruitment and retention at both the faculty- and house staff-level. This includes mentoring house staff and medical students of color, teaching cross cultural care to house staff and medical students, and participating in the Harvard Medical School subcommittee on cultural competency curriculum. Cambridge Health Alliance is a regional healthcare system with two hospitals and more than twenty primary care and specialty practices. Based in Cambridge, Somerville, and Boston’s metro-North communities, CHA serves a highly-diverse patient population and is known nationally for cultural competency and its commitment to community-based care.

**The Commonwealth Fund Fellowship**  
in Minority Health Policy at Harvard University

The Commonwealth Fund Fellowship in Minority Health Policy at Harvard University is a one-year, full-time academic degree-granting program designed to prepare physicians, particularly physicians from groups underrepresented in medicine, to become leaders who improve the health of disadvantaged and vulnerable populations through transforming healthcare delivery systems and promoting innovation in policies, practices and programs that address health equity and the social determinants of health. Up to three one-year, degree-granting fellowships based at Harvard University are awarded yearly. Based at Harvard Medical School under the direction of Joan Y. Reede, MD, MPH, MS, MBA, Dean for Diversity and Community Partnership, the year-long fellowship offers intensive study in health policy, public health, and management for physicians committed to transforming delivery systems for vulnerable populations. Fellows also participate in leadership forums and seminars with nationally recognized leaders in health care delivery systems, minority health, and public policy. Under the program, fellows complete academic work leading to a master of public health degree at the Harvard T.H. Chan School of Public Health or a master of public administration degree at the Harvard Kennedy School.

This May, over 150 fellows and scholars will have been trained academically and professionally in public health, health policy, and health management including those funded by the California Endowment, the Health Resources and Services Administration, and the Dental Services of Massachusetts/Delta Dental Plan. 100% of the graduates have been actively engaged in aspects of policy, research and/or service delivery related to minority health and/or public health.

Requests for further information about the Fellowship and/or application materials should be addressed to:

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Please visit our Website: [https://cff.hms.harvard.edu/](https://cff.hms.harvard.edu/)

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

The Dana-Farber Cancer Institute’s Office for Faculty Development, Professionalism and Inclusion (OFDPI) was launched in 2007 with a mission to strengthen and facilitate the development of Dana-Farber faculty. Key objectives include promoting a work environment that enhances faculty productivity, promotion and retention,
and job satisfaction; advancing the career development of all faculty at Dana-Farber; and advocating for the
diversity of faculty and faculty leadership.

Advancing career development for DFCI faculty is a multi-pronged approach:

- Working with committees to advocate for the needs of specific populations of faculty (URiM, women, clinical faculty)
- Clarifying career trajectories through a system of categories for Instructors
- Creating a recognition path for clinicians through Institute Titles for Clinical Faculty
- Reviewing faculty rosters with each department chair to identify opportunities for advancement and any support that OFDPI can offer
- Offering opportunities for faculty to build community, such as the Retreat for Women Faculty and faculty networking dinners

Fostering a supportive work environment is a core focus for the OFDPI; the Gloria Spivak Faculty Advancement Fund, which provides funding to facilitate the research of faculty members who are at critical junctures in their lives in balancing work and family demands, is a hallmark effort in this arena. The OFDPI hosts events that facilitate leadership growth and strengthen microclimate environments such as Leadership Bootcamp.

For more information contact:
Christine Power, MS, Senior Director
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Dana-Farber/Harvard Cancer Center
Initiative to Eliminate Cancer Disparities

Dana-Farber/Harvard Cancer Center (DF/HCC), an NCI-designated comprehensive cancer center, was founded in 1997 to integrate and build upon the collective talent and resources of the Harvard cancer research community. Five Boston academic medical institutions—Beth Israel Deaconess Medical Center, Boston Children’s Hospital, Brigham and Women’s Hospital, Dana-Farber Cancer Institute, and Massachusetts General Hospital—and two Harvard Schools—the Harvard Medical School and the Harvard T.H. Chan School of Public Health—combined their scientific strengths to create a rich, collaborative environment that transcends institutional borders.

A centerpiece of DF/HCC is the Initiative to Eliminate Cancer Disparities (IECD), which was launched in 2007. The IECD was created to provide a centralized and coordinated structure for addressing concerns about cancer disparities. It was among the nation’s first integrated, inter-institutional, multi-pronged approaches for addressing cancer disparities and inequities. Its mission has been to support and encourage disparities research in all disciplines and across all DF/HCC member institutions. In order to advance this mission, the IECD has focused on: a) community engagement and education, b) reducing barriers to care through patient navigation, c) facilitating minority representation in cancer clinical trials and, d) Promoting science education through cancer research training. Cutting across these four areas are the activities of a dedicated staff/support team that is charged with identifying and removing organizational barriers to initiating and sustaining IECD projects.

For more information, please visit:
http://www.cancerdisparities.org
Harvard Catalyst Program for Diversity Inclusion (PFDI)

Established in 2008, Harvard Catalyst | The Harvard Clinical and Translational Science Center is dedicated to improving human health by enabling collaboration and providing tools, training, and technologies to clinical and translational investigators. As a shared enterprise of Harvard University, Harvard Catalyst resources are made freely available to all Harvard faculty and trainees, regardless of institutional affiliation or academic degree.

Harvard Catalyst is funded by the National Institutes of Health (NIH) Clinical and Translational Science Awards (CTSA) Program (grant 1UL1 TR001102-01), and by contributions from Harvard University, Harvard Medical School, Harvard T.H. Chan School of Public Health, Beth Israel Deaconess Medical Center, Boston Children’s Hospital, Brigham and Women’s Hospital, Dana-Farber Cancer Institute, and Massachusetts General Hospital. This CTSA is part of a network of over 60 centers across the US dedicated to advancing C/T research.

Harvard Catalyst works with Harvard schools and the academic healthcare centers (hospitals) to build and grow an environment where discoveries are rapidly and efficiently translated to improve human health. We catalyze research across all clinical and translational domains by providing investigators with opportunities such as pilot funding, with free resources such as biostatistics consultations, with educational programs such as the Clinical and Translational (C/T) Research Academy and over a dozen courses, and with a range of web tools that assist in data collection and team collaboration efforts.

The Program for Diversity Inclusion (PFDI) emphasizes the recruitment and retention of a diverse clinical and translational workforce as a top priority throughout Harvard Catalyst governance, programming, training, and resource allocation.

Specifically, the program:

- Supports institutional efforts to increase diversity among Harvard faculty and trainees, through annual Faculty Development and Career Development Programs which include lectures and workshops aimed at addressing key career development issues.

- Offers education, mentoring and community-building events aimed at improving the promotion and retention rates among diverse faculty who are conducting clinical and translational research.

- Improves the cultural competence of all Harvard faculty.

- The PFDI collaborates with Faculty Development and Diversity Inclusion offices at Harvard Medical School and Harvard-affiliated academic healthcare centers, and is a member of the Consortium of Harvard Affiliated Offices for Faculty Development and Diversity Inclusion (CHADD).

- Co-Sponsors the New England Science Symposium (NESS) that promotes careers in biomedical science. NESS, offered annually since 2002, provides a national competitive forum for postdoctoral fellows; medical, dental, and graduate students; post-baccalaureates; college and community college students (particularly African-American, Hispanic, and American Indian / Alaska Native individuals) involved in biomedical or health-related scientific research, to present their research projects through oral or poster presentations.

CONTACT:

Office for Diversity Inclusion and Community Partnership | Harvard Medical School
164 Longwood Avenue, 2nd Floor /Boston, MA 02115
Harvard Catalyst Program for Faculty Development and Diversity Inclusion (PFDI) Faculty Fellowship Program

Harvard Catalyst Program for Faculty Development and Diversity Inclusion (PFDD) Faculty Fellowship is a two-year, non-degree Faculty Fellowship Program for Harvard junior faculty. The Fellowship is designed to address faculty need for additional support to conduct clinical and/or translational research and to free junior faculty from clinical and teaching demands at a key point in their career development. Each Faculty Fellow will receive $100,000 over a two-year period to support scholarly efforts. Faculty Fellows are required to devote appropriate time toward the development of their academic career, to meet regularly with their mentors, and to present at the annual Minority Health Policy Meeting.

CONTACT:
HMS Office for Diversity Inclusion and Community Partnership, 164 Longwood Avenue, 2nd Floor
Boston, MA 02115-5818, E-mail: Jessica_St.Louis@hms.harvard.edu

Harvard School of Dental Medicine
Office of Diversity, Equity, Inclusion, and Belonging

The Office of Diversity, Equity, Inclusion, and Belonging promotes increased recruitment, retention, and advancement of underrepresented minority students and faculty at the Harvard School of Dental Medicine. The Office seeks to emulate the Harvard tradition of excellence in education, science, and public health by supporting a well-trained faculty, while creating oral health leaders reflecting the larger community that we serve.

Goals
- Foster an environment that is comfortable and welcoming to all members of the community
- Provide support for a diverse population
- Develop a recruitment strategy to increase enrollment of students from underrepresented minority groups
- Develop and implement a plan to recruit faculty from underrepresented minority groups
- Enhance and develop curricula that address issues of diversity, cross-cultural care, and sensitivity

Partners
The HSDM Office of Diversity, Equity, Inclusion, and Belonging partners with several offices at Harvard Medical School, including the Office for Diversity Inclusion and Community Partnership and Office of Recruitment and Multicultural Affairs.

Contact: Dr. Fadie Coleman  Assistant Dean of Diversity, Inclusion, and Belonging, email: fadie Coleman@hsdm.harvard.edu
The Joseph L. Henry Oral Health Fellowship in Minority Health Policy

The Joseph L. Henry Oral Health Fellowship in Minority Health Policy is supported by the Dental Service of Massachusetts/Delta Dental Plan and previously the Health Resources and Services Administration (HRSA) through a cooperative agreement between the Office of Minority Health and Minority Faculty Development Program at Harvard Medical School. The Oral Health Program is a one-year or two-year academic degree-granting program, designed to prepare the next generation of oral health leaders, particularly minority oral health leaders, in minority health, health policy and oral epidemiology to improve the capacity of health care and to address the needs of vulnerable populations. The program is intended to incorporate the critical skills taught in schools of public health, government, business, and dental medicine with supervised practicum, leadership forums and seminar series conducted by leading scholars and nationally-recognized leaders in minority health and public policy.

The program is designed to prepare oral health leaders who will, over time, improve the capacity of the health care system to address the health needs of minority and disadvantaged populations. To accomplish this, the program will:

- Provide strong academic training, including a graduate degree, for highly qualified dentists.
- Enhance the leadership ability of dentists, offering them substantive knowledge in health policy and management, while creating a network of oral health leaders capable of advancing successfully among the public, non-profit, and academic sectors.
- Provide each fellow with mentoring by Harvard senior faculty and administrators, and access to national leaders in oral health, health policy and public health practice.
- Provide firsthand experience in private and public sectors, allowing the fellows to integrate academic leadership training with its practical application in a real world setting.
- Bring together the faculty and resources of Harvard Medical School, Harvard School of Dental Medicine, Harvard T.H. Chan School of Public Health, and the Harvard Kennedy School of Government to provide an enhanced curriculum that addresses issues of public health, oral health, health policy and practice — particularly as they relate to minority health issues.
- Utilize resources at Harvard Medical School and Harvard School of Dental Medicine, including the offices of Minority Faculty Development Program, to enhance the networking, career development, and career advancement of participating fellows.

The requirements for Fellows of the Joseph L. Henry Oral Health Fellowship in Minority Health Policy are to complete the course work leading to a graduate degree from the Harvard T.H. Chan School of Public Health. The Program includes courses, seminars, leadership forums, a research practicum, site visits and mentoring by senior faculty and public health leaders.

Qualifications:
- DDS or DMD and an active dental license required
- Experience with addressing and improving needs of minority, disadvantaged and vulnerable populations
- Interest in minority health, public policy and public health
- US citizenship or permanent US residency

Requests for further information about The Joseph L. Henry Oral Health Fellowship in Minority Health Policy, should be addressed to:
Joan Y. Reede, MD, MPH, MS, MBA
Program Director
Harvard Medical School
164 Longwood Avenue, 2nd Floor
Boston, MA 02115-5818 | Phone: (617) 432-2313 | Web: http://www.mfdp.med.harvard.edu/oral_health
McLean Hospital
Office of the Chief Academic Officer

The Office of the Chief Academic Officer (OCAO) is charged with upholding McLean's education and training mission and supports the full breadth of activities which enhance the academic environment and maximize scholarship and productive inquiry into the etiology, prevention and most effective treatment of psychiatric disorders across McLean's research, educational and clinical communities. The OCAO provides researchers and clinicians with educational, training, and professional development opportunities and resources. As a Harvard-affiliated teaching hospital, McLean trains and mentors more than 700 clinical trainees, doctoral students and post-doctoral fellows each year. The OCAO focuses on strategic goals supporting recruitment, retention, and career advancement, while lessening burning/enhancing wellness, and increasing diversity, equity and inclusion across the hospital. It is the ongoing goal of the OCAO to ensure that faculty and trainees have access to the information and materials they need for all issues related to McLean's academic mission.

Current programming centers around faculty and trainee career development, mentoring, responsible conduct of research, academic promotions, continuing education, diversity and inclusion and networking opportunities. The OCAO continues to develop and refine its existing programming and resources by seeking feedback from faculty and trainees at McLean, by conducting needs-based assessments, and by working directly with faculty and trainees, the OCAO can ensure that the needs of our unique population are met efficiently and effectively as they arise.

For more information contact Caroline Rotondi, Assistant Director of the OCAO at officeofcao@mclean.harvard.edu or 617-855-3145.

Massachusetts General Hospital
Center for Diversity and Inclusion
"Advancing Physicians and Scientists"

The MGH Center for Diversity and Inclusion (CDI) is one of the first academic hospital-based centers in the country dedicated to building a diverse community of physicians, scientists and patient care services (PCS) staff, and fostering a culture of inclusion and respect. CDI provides numerous career-enhancing resources to students, trainees, and faculty and nurses and PCs staff underrepresented in medicine (UiM) to support their unique professional paths and expand their aspirations and goals. We also advance health equity through advocacy and cross-cultural education, contributing to a more welcoming hospital environment.

Working closely with all departments at Mass General, as well as Harvard Medical School and many local and national strategic partners, CDI accomplishes its mission by focusing on four strategic priority areas:

• Expose UiM students to academic research and clinical careers;
• Advance UiM trainees and faculty through recruitment, career development, networking, mentorship and funding;
• Champion health equity, community outreach and social justice through advocacy and education;
• Drive organizational change by helping embed diversity and inclusion into the fabric of Mass General.

Here are the top five reasons we believe Mass General is an incredible place to grow your career and one of the MGH Residency and Fellowship programs, CDI exposes students to Academic Careers with programs like the Summer Research Trainee Program (SRTP).

For more information about CDI programs and initiatives and If you would like to stay connected with Mass General and the CDI, join us on our social media.