2021 Leadership and Faculty Development Program Conference and Minority Health Policy Annual Meeting

TUESDAY, MAY 4
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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

Harvard T. H. Chan School of Public Health
Division of Policy Translation and Leadership Development

Joseph L. Henry Oral Health Fellowship
in Minority Health Policy

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
2021 Leadership and Faculty Development Program Conference (Virtual)

The Role of Primary Care in Health Equity
12:00-2:00 PM

Primary care has been a pillar in the practice of medicine in the U.S. for decades. Recently, positive factors, such as the Affordable Care Act, have reduced barriers to primary care. Meanwhile, negative factors, such as the COVID-19 pandemic, have exacerbated health disparities. During this Equity and Social Justice Lecture we will discuss the challenges facing primary care and opportunities and interventions to confront disparities, paving the way for equitable health care. Following the keynote address, “Advancing Health Equity: The Essential Role of Primary Care,” panelists will cover the topics of men’s health, access to care, career professions in primary care, and the insurance payer perspective.

12:00 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

12:05 pm “Advancing Health Equity: The Essential Role of Primary Care”
Judith Steinburg, MD, MPH
Chief Medical Officer, Infectious Disease and HIV/AIDS Policy, Office of Assistant Secretary Health, U.S. Department of Health and Human Services

12:40 pm Q&A Session

12:55 pm Panel Discussion

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

Panelists: Sara Fazio, MD
Professor of Medicine, Beth Israel Deaconess Medical Center and Harvard Medical School; Associate Director of Innovation in Medical Education, Harvard Center for Primary Care

Maria Portela Martinez, MD, MPH
Assistant Professor, Chief of Family Medicine; Bridge to Care Medical Director, The George Washington University School of Medicine and Health Sciences
AGENDA – TUESDAY, MAY 4, 2021

Ross Jones, MD, MPH
Clinical Assistant Professor, University of Florida; Medical Director of Community Health, Medical Director of Total Care Clinic Group, University of Florida Health-Jacksonville, FL

Juan Lopera
Vice President of Marketing, RI Medicaid, Public Plans; Business Diversity Officer, Tufts Health Plan

1:45 pm  Q&A Session

2:00 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.

12:00 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

12:05 pm  
“Complex Challenges at the Intersection of Health Equity Research and Policy”  
Marcella Nunez-Smith, MD, MHS  
Founding Director, Equity Research and Innovation Center (ERIC); Associate Professor of Internal Medicine, Public Health, and Management, Yale School of Medicine

12:25 pm  
Commonwealth Fund Fellowship in Minority Health Policy at Harvard University and Joseph L. Henry Oral Health Fellowship Practicum Presentations

Presenters:  
Magdala Chery, DO, MBS  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Health Equity Hack-a-thon: Bringing Diverse Minds Together to Solve Large Problems”  
Yamicia Connor MD, PhD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Understanding the Health & Serious Illness Care Experience One Year into the COVID-19 Pandemic”  
Carine Davila, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Unintended Consequences: The Impact of the 21st Century Cures Act on Health Equity and Adolescent Confidentiality Protections”  
Frinny Polanco Walters, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

1:15 pm  
Break

1:25 pm  
“Operationalizing a COVID-19 Vaccine Clinic for the City of Boston: Lessons Learned”  
Sarimer Sanchez, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

“Opportunities for Family-Oriented Multidisciplinary Team-Based Care”
AGENDA – WEDNESDAY, MAY 5, 2021

Carmela Socolovsky, MD
Commonwealth Fund Fellow in Minority Health Policy at Harvard University

Siobhian Sprott, DDS, MPA
Joseph L. Henry Oral Health Fellow in Minority Health Policy

“Integrating Oral Health and Primary Care”
Shelly Taylor, DMD
Joseph L. Henry Oral Health Fellow in Minority Health Policy

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

2:25 pm Closing Remarks
Joan Y. Reede, MD, MPH, MS, MBA

2:30 pm Adjourn
Racial inequities in policing are well documented. Recent events have led to increased media attention. Men of color – particularly Black and Native American men are much more likely to have fatal encounters with police than white men. Members of other marginalized communities including Black women, members of LGBTQ+ communities, people with mental health or substance use disorders, and individuals with developmental disabilities are also at increased risk of experiencing negative police encounters and can suffer emotional, mental, and physical harm as the result of these interactions. Numerous health profession organizations have renewed declarations that police violence is a public health issue. What is the origin of our current system of policing in the United States? Why is policing reform important now? What is the role of the health professions community in addressing this public health crisis? These, and other important questions are addressed today with our presenters. We welcome your input and feedback.

1:00 pm  Welcome Remarks
Mary Fleming, MD, MPH
President, The Reede Scholars

Introduction of Speakers/Moderator
D’Nyce Williams, MD, MPH, MPA
Associate Clinical Professor, Morehouse School of Medicine
Ft. McPherson Women’s Center, Atlanta VA Medical Center
~ AMA Board of Trustees Position Statement Video 2020

“Framing the Symposium”
Brian J. Swann, DDS, MPH,’08
Assistant Professor, Harvard School of Dental Medicine
Emeritus Chief of Oral Health, Cambridge Health Alliance

1:15 pm  Panel Discussion

Moderator:  D’Nyce Williams, MD, MPH, MPA

Panelists:   “History and Evolution of Policing in the United States”
Hannah Cooper, ScD
Professor, Dept. of Behavioral Sciences and Health Education
Rollins School of Public Health at Emory University

“The Impact of Policing Encounters on Physical and Mental Health”
Shairi Turner Davis, MD, MPH
Chief Transformation Officer
Crisis Text Line

“Re-imagining Policing Reform”
Barry Friedman, JD
Founding and Faculty Director
New York University Policing Project

“Policing Reform – Local Government Perspective”
Phillipe Cunningham, BA
Councilmember
Ward 4, Minneapolis

“Policing Reform – Law Enforcement Perspective”
Celeste Murphy, MS
Deputy Chief, Community Services
Atlanta Police Department

2:30 pm Q&A Session

2:50 pm Vision Award Presentation

3:00 pm Closing Remarks
2021 Leadership and Faculty Development Program Conference  
**Career Development Training**

“*Be Your Own Advocate for Career Advancement: Moving Beyond Imposter Syndrome and Self-Sabotage*”

9:00-10:30 AM

Imposter Syndrome (or Phenomenon) is a common experience by professionals, in particular individuals in academic medicine. The goal of this session is to define imposter syndrome, identify its impact on personal health and welling being as well as professional growth and development, and lastly, to identify strategies to overcome imposter syndrome.

**9:00 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

**9:05 am - 10:30 am**

**Presenters:**

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

**Stephanie Mueller, MD**  
Assistant Professor of Medicine, Director of Faculty Development, Department of Medicine, Brigham and Women’s Hospital

“*Managing Stress During COVID-19 and Beyond*”

10:45 AM – 12:15 PM

The demands of working in our rapidly evolving healthcare system can be extremely stressful. Although some stress is helpful in improving performance, too much stress can have negative effects. In many situations, getting rid of stress is not a realistic goal, but changing how we manage and respond to it is. This workshop is designed to introduce clinicians to practical strategies that can be used to maintain personal resilience within the stressful work environment.

**Presenter:**

Lauren Mednick, PhD  
Assistant Professor of Psychology, Department of Surgery  
Boston Children’s Hospital
Judith Steinburg, MD, MPH
Chief Medical Officer, Infectious Disease and
HIV/AIDS Policy, Office of Assistant Secretary Health, U.S. Department of Health and Human Services

Judith Steinberg is the Chief Medical Officer (CMO) of the Department of Health and Human Services Office of Infectious Disease and HIV/AIDS Policy (OIDP). This Office, which is part of the Office of the Assistant Secretary for Health, coordinates the Ending the HIV Epidemic: A Plan for America initiative and the development and implementation of our national strategic plans for HIV, viral hepatitis, sexually transmitted infections, vaccines and vector-borne diseases. As the CMO, Dr. Steinberg serves as a senior subject matter expert, providing medical and scientific expert advice and counsel across the broad infectious disease portfolio of the Office. Dr. Steinberg serves on the Advisory Committee for Immunization Practices COVID-19 vaccine safety technical subgroup. She also served as the safety CMO for the US Public Health Service Commissioned Corps Command Center that oversees and steers the COVID 19 deployments of our public health officers.

Prior to joining the OIDP, Dr. Steinberg was the CMO of the Bureau of Primary Health Care (BPHC), part of the Health Resources and Services Administration, which funds and administers the health center program. Dr. Steinberg was an associate professor of medicine at the University of Massachusetts (UMass) Medical School and an assistant professor of medicine at Boston University School of Medicine. She has more than 25 years of experience in primary care and infectious disease, including caring for patients at community health centers and safety net hospitals in Massachusetts. At UMass Medical School, she provided clinical expertise and leadership in the design and implementation of new healthcare delivery and value-based payment models.

Dr. Steinberg earned her medical degree from the University of Texas, and completed a residency in internal medicine at Beth Israel Hospital in Boston, as well as an infectious disease fellowship at Beth Israel/Brigham and Women’s Hospitals in Boston. She was a Commonwealth Fund/Harvard University Fellow in Minority Health Policy and received a master’s degree in public health from Harvard University.
Marcella Nunez-Smith, MD, MHS
Founding Director, Equity Research and Innovation Center (ERIC); Associate Professor of Internal Medicine, Public Health, and Management, Yale School of Medicine

Dr. Marcella Nunez-Smith is Associate Dean for Health Equity Research; Associate Professor of Medicine, Public Health, and Management; and Founding Director of the Equity Research and Innovation Center (ERIC) in the Office for Health Equity Research at Yale School of Medicine. ERIC’s research focuses on promoting health and healthcare equity for structurally marginalized populations with an emphasis on centering community engagement, supporting healthcare workforce diversity and development, developing patient reported measurements of healthcare quality, and identifying regional strategies to reduce the global burden of non-communicable diseases. Dr. Nunez-Smith currently serves as Senior Advisor to the White House COVID-19 Response Team and Chair of the DHHS COVID-19 Health Equity Task Force. Previously, she served as co-chair of the Biden-Harris Transition COVID-19 Advisory Board and community committee chair for the ReOpen Connecticut Advisory Group on behalf of Connecticut Governor Lamont. She is the principal investigator on several NIH and foundation-funded grants. Dr. Nunez-Smith is also Director of the Center for Research Engagement (CRE); Associate Director for Community Outreach and Engagement at the Yale Cancer Center; Chief Health Equity Officer at Smilow Cancer Hospital; Deputy Director of the Yale Center for Clinical Investigation; Core Faculty in the National Clinician Scholars Program; Director of the Pozen-Commonwealth Fund Fellowship in Health Equity Leadership; and Co-Director of the Doris Duke Clinical Research Fellowship. Dr. Nunez-Smith is board certified in internal medicine, having completed residency training at Harvard University’s Brigham and Women’s Hospital and fellowship at the Yale Robert Wood Johnson Foundation Clinical Scholars Program, where she also received a Masters in Health Sciences. Originally from the US Virgin Islands, she attended Jefferson Medical College, where she was inducted into the Alpha Omega Alpha Medical Honor Society; she earned a BA in Biological Anthropology and Psychology at Swarthmore College.
Magdala Chery, DO, MBS
Commonwealth Fund Fellow in Minority Health Policy at Harvard University
Harvard Medical School

Dr. Chery was most recently an Assistant Professor of Medicine at Rowan University School of Osteopathic Medicine in Stratford, NJ. Named one of South Jersey Magazines Top Docs in 2018 and 2019, Dr. Chery is among South Jersey’s leading physicians making a noticeable impact in the health care world. She was selected to be an Albert Schweitzer Fellow in 2010 as well as a New Leaders Council Fellow for the New Jersey Chapter in 2018, which shows her longstanding dedication to public health and service. Outside of the office, she is an in-demand motivational speaker who has delivered many keynotes at events across the nation. Most recently, she has suffered the loss of her father to COVID-19. Through this tragic experience, she personally witnessed the impact of injustice and racism in our healthcare system. Realizing that her father’s story was simply an amplified narrative that exists in our communities, she turned her pain into purpose and created the #NotJustABlackBody campaign. This platform is dedicated to honoring the Black lives cut short by COVID-19, while equipping the community with knowledge about the injustice and racism embedded in the healthcare system. Dr. Chery is also passionate about expanding the conversation on primary care and health in minority communities outside of the exam room/office. She has an interest in evaluating policy to address trauma-informed care for Black women, social determinants of health unification into the electronic medical record, and the integration of mental health in primary care. Dr. Chery received her medical degree from Rowan University School of Osteopathic Medicine (formerly UMDNJ School of Osteopathic Medicine) in 2014 and completed her internal medicine residency at the University of Connecticut in 2017.

Phillipe Cunningham, BA
Councilmember
Ward 4, Minneapolis

Phillipe M. Cunningham (pronounced fil-LEAP) is the Minneapolis City Councilmember representing the 4th Ward in North Minneapolis. He is the first and currently only out trans man of color elected to office in the United States. Councilman Cunningham serves as Chair of the Minneapolis City Council’s Public Health and Safety committee and is the lead Councilmember for the city’s transforming community safety work.

Prior to being elected and unseating a 50-year family political dynasty in 2017, Councilman Cunningham served in former Mayor Betsy Hodges’ administration as her Senior Policy Aide for education, racial equity, and LGBTQ+ rights. He also previously worked with youth as a special education teacher and youth worker for over 10 years. As a policy wonk and fierce community advocate, CM Cunningham’s primary goal is to work alongside his neighbors to build intergenerational peace and prosperity in North Minneapolis.
They graduated from DePaul University with a BA in Chinese and is completing their Master’s in Organizational Leadership and Civic Engagement at Claremont Lincoln University. His writings have been published in The Guide for White Women Who Teach Black Boys and Millennial Compact with America. CM Cunningham and his husband Lane are passionate about rescuing animals and have a total of 8 fur babies – 6 dogs and 2 cats.

Yamicia Connor MD, PhD
Commonwealth Fund Fellow in Minority Health Policy at Harvard University
Harvard Medical School

Dr. Connor was most recently a Chief Resident Physician at Beth Israel Deaconess Medical Center in Boston, MA. She has a diverse training background in medicine, science and engineering. Yamicia received a dual SB degree in Biology and Chemical/Biological Engineering and a minor in Biomedical Engineering from MIT in 2007, where she developed research interests at the intersection of medicine, engineering, and science. She further cultivated these interests in graduate school, where she obtained a PhD in Health Sciences and Technology: Medical Engineering and Medical Physics from Massachusetts Institute of Technology in 2013 and a medical degree from Harvard Medical School in 2016. She was recognized as a 2019 STAT Wunderkind, a cohort of the best young researchers in health and medicine in North America as chosen by STAT’s editorial staff. Dr. Connor founded Tech Tutors, an educational services provider that specialized in technical fields. She was also featured in the "I Am a Scientist" Campaign aimed at providing tools to make STE(A)M careers technically and psychologically accessible to all students. Dr. Connor hopes to use her passion for science, engineering, and medicine to promote the health of all women. She is interested in developing a comprehensive and generalizable approach to incorporate disparities into the quality improvement process; she proposes that we change the way we think about health care disparities and manage these issues with the same scientific rigor that we approach any other problem in medicine.

Hannah Cooper, ScD
Professor, Dept. of Behavioral Sciences and Health Education
Rollins School of Public Health at Emory University

Hannah Cooper, ScD is the first Rollins Chair of Substance Use Disorders at Emory. She is a Professor in the Department of Behavioral, Social, and Health Education Sciences at the Rollins School of Public Health. Dr. Cooper directs Spark, a center focused on helping to end suffering from substance use disorders and related harms, like overdoses, hepatitis C, HIV, and neonatal opioid withdrawal syndrome.

Her research expertise includes studying the social determinants of health, with a particular focus on the social determinants of drug use, drug users’ health, and health disparities. She applies multilevel, geospatial,
and qualitative methods to explore these topics. Dr. Cooper co-authored “From Enforcers to Guardians: A Public Health Primer on Ending Police Violence,” with Mindy Thompson Fullilove, MD.

**Carine Davila, MD**
Commonwealth Fund Fellow in Minority Health Policy at Harvard University
Harvard Medical School

Dr. Davila was most recently a Palliative Care Clinical Fellow through Harvard’s Interprofessional Palliative Care Fellowship at Massachusetts General Hospital, Brigham and Women’s Hospital, and Dana Farber Cancer Institute. In three separate years, Dr. Davila was recognized as a Young Scholar in SGIM (Society for General Internal Medicine), a national award presented to a group of 25 promising young scholars based on academic achievement and research interest, and she presented her work at the SGIM annual meetings. For the presidential election in 2016, Dr. Davila mobilized resources to bolster the voting rights of patients in a safety-net hospital; she expanded those efforts to reach an even greater number of patients for the election in 2018. Dr. Davila seeks to gain the skills and experience necessary to narrow disparities in serious illness and end-of-life care for Latinx patients and families. Dr. Davila received her medical degree in 2016 from Icahn School of Medicine at Mount Sinai, and completed her internal medicine residency at University of California, San Francisco in 2019, where she received the Keith Johnson Award, given to the second-year resident who best exemplifies the personal and professional qualities of a UCSF physician.

**Sara Fazio, MD, FACP**
Professor of Medicine, Beth Israel Deaconess Medical Center and Harvard Medical School; Associate Director of Innovation in Medical Education, Harvard Center for Primary Care

Dr. Fazio practices General Internal Medicine at the Beth Israel Deaconess Medical Center and is a Professor of Medicine at Harvard Medical School. At Harvard, she is the Advisory Dean and Director of the Walter Bradford Cannon Society and oversees the core clinical curriculum and all clerkships. She is the Associate Director of Medical Education at the HMS Center for Primary Care. She is a past board chair of the Alliance of Academic Internal Medicine, and is currently a co-investigator with the HMS and HSDM Center for Integration of Primary Care and Oral Health (CIPCOH). Dr. Fazio received her undergraduate and medical degree from Brown University. After completing her internal medicine training at the Beth Israel Hospital in Boston, she was a chief resident at the Beth Israel Deaconess Medical Center, and subsequently completed a Rabkin Fellowship in Medical Education.
Mary Fleming, MD, MPH  
President, The Reede Scholars

Dr. Mary E. Fleming is an ardent champion of health equity. As President of the Reede Scholars, (2014- present) she hosts their interactive podcast, Reede Scholars Live! The platform promotes discussion of a variety of health equity topics with experts across the country. The organization continues to develop strategies for collective action among the Scholars to address health equity and social justice.

She completed her 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 also obtained a Masters in Public Health. She practiced in Norristown, PA for four years before deciding to transition to 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.

An international traveler, Fleming currently serves as a clinical Ob/Gyn in shortage areas in the northeast region. She continues to explore avenues to grow her skill set to serve the vulnerable populations of this country and globally, and recently, joined Cayaba Care as Founding Medical Director, based in Philadelphia, PA. Cayaba Care works to bridge the gap in maternal health by offering home based care.

Barry Friedman, JD  
Founding and Faculty Director  
New York University Policing Project

Barry Friedman serves as the Faculty Director of the Policing Project at New York University School of Law, where he is the Jacob D. Fuchsberg Professor of Law and Affiliated Professor of Politics. The Policing Project is dedicated to strengthening policing through ordinary democratic processes; it drafts best practices and policies for policing agencies, including on issues of technology and surveillance, assists with transparency, conducts cost-benefit analysis of policing practices, and leads engagement efforts between policing agencies and communities. Friedman has taught, litigated, and written about constitutional law, the federal courts, policing, and criminal procedure for over thirty years. He serves as the Reporter for the American Law Institute’s new Principles of the Law, Policing.

Friedman is the author of Unwarranted: Policing Without Permission (Farrar, Straus and Giroux, February 2017), and has written numerous articles in scholarly journals, including on democratic policing, alternatives to police responses to 911 calls, and the Fourth Amendment. He appears frequently in the popular media, including the New York Times, Slate, Huffington Post, Politico, and the New Republic. He also is the author of the critically acclaimed The Will of the People: How Public Opinion Has Influenced the Supreme Court and Shaped the Meaning of the Constitution (2009). Friedman graduated with honors from the University of
Chicago and received his law degree magna cum laude from Georgetown University Law Center. He clerked for Judge Phyllis A. Kravitch of the US Court of Appeals for the 11th Circuit.

Ross Jones, MD, MPH
Clinical Assistant Professor, University of Florida; Medical Director of Community Health, Medical Director of Total Care Clinic Group, University of Florida Health-Jacksonville, FL

Dr. Jones serves as the medical director of community health at UF Health Jacksonville and medical director of the Total Care Clinic Group. He is a board-certified family medicine physician with a focus on chronic disease management, preventive medicine and community engagement. He is a native to Jacksonville, earned his medical degree at the University of Florida and completed his residency in family medicine at St. Vincent’s Medical Center in Jacksonville.

In addition to his role as a family medicine physician, Dr. Ross Jones is focused on the UF Health Urban Health Alliance, a program improving the health of the citizens of Duval County through reduction of poverty, reducing social isolation, prevention of chronic diseases and empowering community members to be their own agents of change. This program is a dynamic hub for policies and programs that positively impact the lives of those in our community, priority areas to improve the quality of life for Duval County residents.

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

Dr. Landry is an Assistant Professor of Emergency Medicine physician at Beth Israel Deaconess Medical Center, Faculty Assistant Director of the Office for Diversity Inclusion and Community Partnership, Associate Director and Advisor for William B. Castle Society, and Director of Health Equity Education at Harvard Medical School. He also serves as Senior Faculty at the Disparities Solutions Center at Massachusetts General Hospital and is the founder and co-director of the non-profit organization Motivating Pathways. 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 the Harvard T.H. Chan School of Public Health and teaches cultural competency 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 leads 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 in 2006. He completed his residency in Emergency Medicine at the Beth Israel Deaconess 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.

Juan Lopera
Vice President of Marketing, RI Medicaid, Public Plans; Business Diversity Officer, Tufts Health Plan

Juan is responsible for business development, marketing and community relations for all products offered by Tufts Health Plan’s public plans division across Massachusetts and Rhode Island. Juan also leads the company’s Rhode Island Medicaid division, responsible for all market expansion functions. He is also Corporate Business Diversity Officer, responsible for company-wide business diversity efforts including health equity, multicultural customer offerings and economic inclusion, closely collaborating with human resources on workplace inclusion. Previously, Juan was the company’s director of health care services where he led medical cost management and provider contracting strategy and analytics. He also held management roles at Blue Cross Blue Shield and Deloitte Consulting.

He serves on several boards including Vice-Chair of the Dimock Center Board, Co-Chair of The Boston Foundation’s Latino Legacy Fund, The State of Massachusetts COVID-19 advisory groups for health equity and vaccine communications, and The State’s Latino Advisory Commission, Eastern Bank’s Board of Corporators, Greater Boston Chamber of Commerce Economic Opportunity Board and ConsejoSano’s Advisory Board.

Juan earned a B.S. from the School of Management at Boston College. He is originally from Medellin, Colombia and resides in Waltham, MA with his wife and two children. In his spare time, Juan is a competitive cyclist and was the 2019 Massachusetts Masters Road Champion.
Lauren Mednick, PhD
Assistant Professor of Psychology, Department of Surgery
Boston Children’s Hospital

Lauren Mednick received her PhD in Child Clinical Psychology, with an emphasis in health psychology, from The George Washington University in 2005. After completing her training at Boston Children’s Hospital, Dr. Mednick joined the Department of Psychiatry, initially as a clinician in the Medical Coping Clinic and later as the director of the Outpatient Psychiatry Service. Dr. Mednick recently transitioned to a new role in the Department of Surgery where she is utilizing her expertise and passion for preparing patients and families for medical interventions to develop an innovative program aimed at enhancing surgical preparation for children and their families.

Stephanie Mueller, MD
Assistant Professor of Medicine, Director of Faculty Development, Department of Medicine, Brigham and Women’s Hospital

Dr. Stephanie Mueller is a clinician-investigator within the Division of General Medicine at Brigham and Women’s Hospital (BWH), and an Assistant Professor of Medicine at Harvard Medical School, where she works as a hospitalist and conducts research on hospital-based care transitions. She completed her medical school training at University of Massachusetts in 2005, followed by internal medicine residency and chief residency at Beth Israel Deaconess Medical Center in Boston. She pursued fellowship training at the Harvard General Medicine Fellowship where she earned a Masters of Public Health, prior to joining as faculty at BWH in 2012. Dr. Mueller is a nationally recognized expert in hospital-based care transitions with grant-funded research focused on improving the quality and safety of inter-hospital transfers. She has over 20 publications and has received national recognition awards related to her research. In addition to her research activities, Dr. Mueller has a strong passion for mentoring and faculty development. She serves as the Faculty Development Director of Programs for the BWH Department of Medicine, the Associate Director of Clinical Research and Director of Mentorship and Promotion for the BWH Hospital Medicine Unit where she won an award for Excellence in Mentoring, and is the Associate Director of the Harvard-Brigham Research Fellowship in Hospital Medicine and former faculty co-chair for the HMS Joint Committee on the Status of Women (JCSW). She is also actively involved in the Society of Hospital Medicine where she has served as the co-chair for the local chapter of SHM in the Boston area, and is the chair-elect for the SHM Research Committee.
Frinny Polanco Walters, MD  
Commonwealth Fund Fellow in Minority Health Policy at Harvard University  
Harvard Medical School

Dr. Polanco Walters is currently an attending physician in the Adolescent and Young Adult Medicine Division at Boston Children’s Hospital. She is passionate about promoting health education, safety, and violence prevention for all adolescents and young adults, especially those with developmental disabilities, and about advocating for policies that support greater access and better quality services to the underserved, including racial/ethnic minorities and those impacted by food insecurity. As a Congressional Hispanic Caucus Institute Fellow, she worked with health policy experts on issues affecting disadvantaged communities. While in the DC area she worked at the National Institutes of Health doing research on the importance of minority populations’ involvement in clinical trials. Dr. Polanco Walters received her medical degree in 2014 from New York Medical College, Valhalla, NY, completed her pediatric residency at Floating Hospital for Children at Tufts Medical Center in Boston in 2017, and completed her fellowship in Adolescent Medicine at Boston Children’s Hospital in 2020.

Maria Portela Martinez, MD, MPH  
Assistant Professor, Chief of Family Medicine; Bridge to Care Medical Director, The George Washington University School of Medicine and Health Sciences

Dr. Portela is the chief of the Family Medicine Section within the Department of Emergency Medicine at the Medical Faculty Associates at George Washington University (GW). She is also the medical director of the George Washington Immediate Primary Care Clinics. Through these roles, she works towards expanding GW’s footprint of primary care and family medicine. At the Medical Faculty Associates, she seeks to improve access and quality of care in the community as well as increase family medicine exposure and mentorship opportunities for students. Dr. Portela is an assistant professor at the GW School of Medicine and Health Sciences, where she serves as a Professional Development Mentor and a Public Health Mentor for medical students. Dr. Portela is also co-Principal Investigator of the Healthworkforce Diversity Initiative and Diversity Tracker.

Prior to GW, Dr. Portela worked in HHS at the Health Resources Services Administration leading efforts to re-envision primary care training focused on transforming health care delivery systems aimed at improving access, quality of care, and cost-effectiveness. Dr. Portela previously provided volunteer clinical services at Unity Health Care, a Federally Qualified Health Center in Washington, D.C. and in 2017 was an Atlantic Fellow for Health Equity at GW.

Previously, while pursuing medical school training in her native Puerto Rico, she shared in the development of an assessment on the health and education sectors for President Obama’s Task Force on Puerto Rico’s Economic Development. Subsequently, she pursued residency training at Duke, and completed the
Commonwealth Fund Fellowship in Minority Health Policy at Harvard, where she obtained her master’s degree with concentrations in Public Health Leadership and Health Policy and Management.

Dr. Portela has taken diverse leadership roles and has served in local, state and national health equity boards and committees. She is passionate about increasing access and quality of health care services to vulnerable populations, and about teaching, mentorship, diversity, and inclusion.

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.

Sarimer Sanchez, MD
Commonwealth Fund Fellow in Minority Health Policy at Harvard University Harvard Medical School

Dr. Sanchez is a Research Fellow at Massachusetts General Hospital. Dr. Sánchez recognizes the importance of public policy in the control of emerging infectious diseases, particularly among vulnerable communities. She aspires to implement policies that strengthen outbreak preparedness and response and effectively address
social determinants in health to improve health care outcomes in minority populations. Dr. Sánchez received her medical degree from the University of Puerto Rico School of Medicine in 2015. She completed an internal medicine residency at the University of Pennsylvania in 2018 and a Fellowship in Infectious Diseases, with a focus on Infection Prevention, Hospital Epidemiology, and Antibiotic Stewardship, at Massachusetts General Hospital in 2020.

Carmela Socolovsky, MD,
Commonwealth Fund Fellow in Minority Health Policy at Harvard University
Harvard Medical School

Dr. Socolovsky is a Pulmonary and Critical Care Medicine Fellow at Brigham and Women’s Hospital, Harvard Medical School in Boston. Dr. Socolovsky is interested in restructuring health care delivery to reduce the impact of social determinants of health. She aspires to develop expertise evaluating health outcomes in underserved communities to inform data-driven policy initiatives, and she has a specific interest in the impact of environmental and psychosocial exposures on pulmonary disease disparities. As a medical student, Dr. Socolovsky helped develop workshops highlighting the clinical consequences of insufficient communication with Limited English Proficiency (LEP) patients, presenting this work at the Medical Education forum at the University of Chicago and at the American Medical Association national conference. She also collaborated on the pilot implementation of Project ECHO, a “telementoring” initiative to improve subspecialty care on Chicago’s Southside, a program that persists today. During residency, Dr. Socolovsky was a founding member of the Women In Medicine Trainees Council and studied readmissions amongst ICU survivors with Medicaid insurance, work for which she was awarded Best Abstract at Resident Research Competition at MGH. Dr. Socolovsky received her medical degree from The University of Chicago Pritzker School of Medicine in 2014 and completed her Internal Medicine residency at Massachusetts General Hospital in 2017.

Siobhian Sprott, DDS, MPA,
Joseph L. Henry Oral Health Fellow in Minority Health Policy
Harvard Medical School

Dr. Sprott was most recently Chief Resident in Pediatric Dentistry at Tufts University School of Dental Medicine in Boston, MA. Previously, she worked as a general dentist in Washington, DC, Maryland and Virginia for 10 years. Dr. Sprott strives to make public health an integral part of her clinical practice; she has a strong motivation for understanding oral health care delivery from an organizational management perspective that engages the community. She has been affiliated with the DC Pediatric Oral Health Coalition, an alliance that strives to improve oral health access and care for children in Washington, DC. Dr. Sprott received her dental degree from Howard University
College of Dentistry in 2008 and completed her residency in general dentistry at Howard University Hospital in 2009. She also earned both her BS and Master of Public Administration degrees from Southern University and A&M College, Baton Rouge, LA, in 2002 and 2004 respectively.

**BRIAN J. SWANN, DDS, MPH**  
Assistant Professor, Harvard School of Dental Medicine  
Emeritus Chief of Oral Health, Cambridge Health Alliance

Brian J. Swann, DDS, MPH serves as the Emeritus Chief of Oral Health for the Cambridge Health Alliance and conducted the Oral Physician Program within the General Practice Residency, a model that integrates and builds capacity between oral health, primary care, behavioral health, nursing and pharmacy. He recently assisted in acquiring a $4.5 million multidisciplinary expansion. Dr. Swann now serves as a consultant and will assist in creating a clinical laboratory to help develop the integrated model.

As an Assistant Professor at the Harvard School of Dental Medicine and the Harvard Medical School, he assisted with introducing oral health into that curriculum and bringing the oral health examination into the medical core curriculum. This culminated into Oral Health Day. At the Harvard School of Dental Medicine, he has a certificate in Oral Health Policy and Epidemiology.

Dr. Swann is involved with outreach projects in Boston and directs a pipeline project for the Wampanoag Tribe on Martha’s Vineyard and Cape Cod. Most recently, he cofounded and now serves as a member of the Advisory Committee for the Massachusetts State Office of Oral Health, and for the Boston Healthcare for the Homeless.

Dr. Swann is a Joseph L. Henry Fellow from the Harvard School of Medicine. He received a Doctor of Dental Surgery degree from the University of California, San Francisco, and a Masters degree from the Harvard-Chan School of Public Health. He serves as the co-chair for the National Dental Association’s Global Oral Outreach Committee. His recent work has been serving vulnerable populations in Massachusetts, Tennessee, Jamaica, Haiti, and East and South Africa; and refugee populations in Lebanon and Greece.

**Shelly Taylor, DMD**  
Joseph L. Henry Oral Health Fellow in Minority Health Policy  
Harvard Medical School

Dr. Taylor is presently the Dental Director of Uphams Corner Health Center in Dorchester, MA. Prior to moving to Massachusetts, Dr. Taylor served as the Dental Director of Broward Community & Family Health Centers (BCFHC) in South Florida. Through these roles, she has demonstrated her commitment to public health and
dedication to caring for underserved communities. In her present leadership role, she has oversight of the day-to-day operations of the oral health program and provides clinical and preventative dental care to patients of the health center. Additionally, she serves as a clinical preceptor to fourth-year dental students who rotate through the clinic. Dr. Taylor values volunteerism and has taken an active role in developing programs within the community. She has an interest in designing programs that will help integrate care between medical and dental departments within the healthcare system. Dr. Taylor was a recipient of the Outstanding Leadership Award at BCFHC and received the Young Alumni Gator Great Award for her impactful work in the South Florida community. Dr. Taylor earned her Bachelor of Science and Doctor of Dental Medicine degrees from the University of Florida in 2011 and 2015 respectively. She also earned an Advanced Education in General Dentistry Certificate from the University of Tennessee College of Dentistry in 2016.

Shairi Turner Davis, MD, MPH
Chief Transformation Officer
Crisis Text Line

Shairi R. Turner MD, MPH is the Chief Transformation Officer for Crisis Text Line a Not-For-Profit volunteer-supported organization delivering crisis interventions using a text platform. She is responsible for guiding the organizations’ culture transformation at a time when it is at a necessary inflection point. Previously she served at CTL as the Chief Medical Officer from 2017-2019. In this role she provided oversight to the Crisis Supervision team and led many of the clinical policy and quality initiatives within the Organization. A Stanford graduate and a Harvard-trained Internist and Pediatrician with a Master of Public Health from the Harvard School of Public Health, Dr. Turner has a long history in organization transformation. In 2005 Dr. Turner was appointed as the first Chief Medical Director in the eleven-year history of the Florida Department of Juvenile Justice (DJJ). She established the Office of Health Services that provided oversight of the provision of Health, Mental Health, Disability and Substance Abuse services to the nearly 100,000 justice-involved youth. During her tenure with the Department of Juvenile Justice, Dr. Turner’s focus also included the impact of childhood trauma (physical, sexual and emotional abuse) on youth involved in the juvenile justice system, as well as the importance of gender specific services designed to meet the unique needs of girls in the system. She has given numerous presentations nationally on issues relating to health/mental health care in the juvenile justice setting. She was instrumental in the introduction of trauma informed care to DJJ.

As the Deputy Secretary for Health and Interim State Surgeon General for the Florida Department of Health (DOH), she led the legislatively mandated reorganization for one of the largest state public health departments in the country. After her departure, she was a faculty consultant for the National Center for Trauma Informed Care where she performed numerous national trainings on the neurobiology of trauma to state and local entities including mental health and criminal/juvenile justice administrators and staff. Dr. Turner was the Project Co-Director for the U.S. Office on Women’s Health-funded Trauma Informed Care e-Cases, a comprehensive series of online virtual patient cases targeting primary care providers these cases are focused on effective approaches to the care of patients who have survived traumatic life experiences such as
sexual assault, interpersonal and community violence, military sexual trauma, child abuse, neglect, and family dysfunction. She has presented internationally on the neurobiology of trauma (Shanghai, China). She currently also holds a Research Faculty appointment at the Florida State University, College of Social Work and is a Voluntary Associate Professor of Public Health Sciences at the University of Miami, Leonard M. Miller School of Medicine. The native of New York City earned an undergraduate degree in Biology from Stanford University in 1991, a Doctor of Medicine degree from Case Western University School of Medicine in Cleveland, Ohio and in 1996 she was also inducted into the Alpha Omega Alpha Honors Medical Society. Dr. Turner then completed the four-year Harvard Combined Internal Medicine and Pediatrics Residency Program at the Massachusetts General Hospital and the Children's Hospital of Boston in 2000. From 2001 to 2002, she was a Commonwealth Fund/Harvard University Fellow in Minority Health Policy and earned a Master of Public Health from the Harvard School of Public Health with a concentration in Health Policy and Management. She is married and the mother of two teenage student-athletes.

D’Nyce Williams, MD, MPH, MPA
Associate Clinical Professor, Morehouse School of Medicine
Ft. McPherson Women’s Center, Atlanta VA Medical Center

Dr. D’Nyce L. Williams is an Associate Clinical Professor at Morehouse School of Medicine. She has served the Atlanta community for nearly 25 years as an Obstetrician-Gynecologist and is a tireless advocate for women’s health and well-being – especially those who are historically underserved. Dr. Williams was instrumental in the introduction of patient-centered, team-based specialty care to women veterans at the Atlanta Veterans Administration Medical Center (VA), with a special focus on the unique experiences of combat female veterans. During the Zika outbreak she served on a national level as an Emergency Operations Clinical Lead at the Centers for Disease Control and Prevention (CDC). She serves on the Board of Directors for MedCura Health (formerly Oakhurst Medical Centers, Inc.). Recently Dr. Williams has been involved in identifying comprehensive oral health care resources for under-insured and uninsured women who receive medical care at Grady Hospital Neighborhood Health Clinics and at the VA.

A California native, D’Nyce earned an undergraduate degree from the University of California (UC), Los Angeles and a Master of Public Health degree at UC Berkeley. She received her medical degree at UC Davis and residency training at UC San Francisco-Fresno. She completed the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy (’02), and received the Master of Public Administration degree at the JFK School of Government at Harvard University. Her compassion and dedication have been recognized by several organizations.
Laurie Zephyrin MD, MPH, MBA  
Vice President, Health System Equity  
The Commonwealth Fund  

Dr. Zephyrin is 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: Magdala Chery, DO MBS – Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School


Host Organization: Health in Her Hue (HIHH)

Objectives:
1. To collect qualitative and quantitative data about Black women on the Health in Her Hue (HIHH) platform documenting their lived experiences as Black women, their interactions within the US healthcare system, and their vision for a healthcare system that is responsive to their needs.
2. Gather information to assist with strategic planning for Health in Her Hue to expand access and services offered on the platform.

Background: Despite the significant improvements in the health of Black women in the United States over the past few decades, there is evidence that Black women continue to fare worse in many health categories – such as cervical cancer, heart disease, maternal mortality, and others. Many of this has been linked to large gaps in access to quality and innovative care. To date minimal solutions have been identified to help substantially close these disparity gaps. However, Health in Her Hue (HIHH) reaffirms the importance of moving beyond just pointing to the disparities to offering potential solutions. Health in Her Hue (HIHH) is a digital platform that is Black owned, Black founded, and for Black Women.

Health In Her HUE was founded in 2018 and serves as a platform in the femtech market space that connects Black women and women of color to culturally competent and sensitive healthcare providers, and offers health information and content that centers Black women’s lived experiences. Their mission is to reduce racial health disparities by leveraging the power of technology. This is accomplished by bringing awareness to health and wellness issues in a relevant, engaging, and accessible way. To date there are over 50,000 subscribers to the platform, and over 800 providers listed in their network for users to connect with and seek out for care. As the platform continues to grow, they are seeking out ways to expand access and services to Black Women and women of color.

The purpose of this project is to provide recommendations to the Health in Her Hue platform which may be used to guide services implemented on the platform as well as inform policy directed at improving health care delivery for Black women.

Methods:
1. Performed a literature review to pinpoint documented evidence the impacts of discrimination on health, the health care experiences of Black women, and the physiological framework of radical healing in communities of color.
2. Engaged subscribers and providers on the HIHH platform to identify areas of focus for the survey and focus groups.
3. Developed two-part survey and focus group protocol that will be used to collect data from users on the platform.


Future Direction:
1. Produce “The Believe Us” report with findings from survey and focus groups with policy recommendations.

Preceptors: Ashlee Wisdom, MPH
**Abstracts**

**Presenter:** Yamicia D. Connor, MD, PhD – Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

**Project Title:** “Health Equity Hackathon: Bringing Diverse Minds Together to Solve Large Problems”

**Problem Statement:** Can we build a low-cost, rapid process for generating health equity innovations using a hackathon model?

**Objectives:**
1. To produce a model for interdisciplinary collaboration in order to combat health inequities
2. To provide a low-cost, rapid process for development of scalable, innovative ideas to address Atrius Health’s specific health equity-related needs

**Background:** Hackathons are a mechanism for rapid innovation, traditionally used in the field of software development. Since the first Hackathon in 1999 launched by Sun Microsystems, hackathons have been used by many organizations in private industry, universities, NGOs, and governmental agencies to inspire innovation. GroupMe and Zapier are two well-known companies that have emerged from hackathons. Historically, healthcare institutions have not participated in hackathons. Since 2010, hackathons have become more popular in healthcare settings, though very few hackathons have been equity focused.

The COVID-19 pandemic has highlighted the health inequities that have been present within our society since its inception. Brown and black communities have been disproportionately affected by COVID-19 but the conditions that led to these disparities are not new. Black men and women have always suffered from greater disease burden and therefore lower life expectancy compared to their white counterparts. Furthermore, there has been little improvement in disparities of life expectancy over the past 30 years. Over 90% of quality metrics measured by the Agency for Healthcare Research and Quality (AHRQ) indicate that quality of care is either worsening or remains unchanged for minority populations. We hypothesize that hackathons can be used to drive innovation for health equity to tackle the problem of stagnated outcomes in health equity. We also hypothesized that a collaboration including partners providing the hackathon experience, the health equity experience, and a sponsoring health system would increase the likelihood of success.

**Methods:** The concept for the health equity hackathon was developed by harnessing the power of engineering to drive innovation with the goal of reframing health equity from a descriptive, academic framework into an intervention-focused framework that is community-based, patient focused, and collaborative. Our approach involved the following.
1. Convening stakeholders and discussing an array of possible approaches. The three primary collaborating organizations are (1) Atrius Health, a physician-led accountable care organization, (2) MIT hacking racism, a subset of the MIT Hacking Medicine with a specific focus on dismantling structural racism in healthcare, and (3) Race to Better Health, a patient-centered interdisciplinary organization dedicated to Engineering Health Equity.
2. Securing resources and developing a relationship with the sponsoring organization
3. Design of the pre-hackathon workshops in order to give participants a foundation in health equity
4. Development and execution of the hackathon
5. Post-Hackathon: Continued mentorship of the winning teams to implement and test the innovations
6. Evaluation and assessment of the programming
7. Dissemination of results and scaling considerations

**Results:** We have been successful in securing financial resources ($25,000) and are in process of development of the pre-hackathon curriculum and post-hackathon mentorship program.

**Future:** Pre-hackathon events (July - Sept. 2021), hackathon (Sept 2021), post-hackathon, evaluation, dissemination (Oct. 2021 - March 2022)

**Preceptors:** Brenda Thompson Stuckey, Director, Diversity, Equity & Inclusion at Atrius Health, Joe Kimura, MD, MPH, CMO of Atrius Health
Presenter: Carine Davila, MD – Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Serious Illness Care in A Time of COVID-19: Understanding Experiences among At-risk Communities”

Objectives:
1. To understand individual’s experiences with health care system, specifically around feeling heard & understood by clinicians, and trust and respect by health care system & clinicians.
2. To understand the greatest perceived medical, social and financial needs when it comes to improving serious illness care in the US.
3. To identify how individual engagement rates in advance care planning have changed ~1 year into the COVID-19 pandemic

Background: High quality communication, shared decision-making, and advance care planning are crucial to the well-being and quality of life for individuals facing serious illness. Identifying whether an individual has a serious illness is a necessary first step, as there is not a single, consensus definition. We know that the COVID-19 pandemic has prompted more conversation and engagement around serious illness care and communication, particularly from consumer-facing advance care planning web applications. Similarly, many health care systems began to do proactive outreach calls to check-in on high-risk and complex patients, including elements of advance care planning and serious illness conversations. These observations suggest there is a potential increase in advance care planning engagement rates. However, it is not clear whether people consider COVID-19 to be a serious illness in the same way as other serious illnesses such as cancer, heart disease or stroke, and advanced lung disease. The Massachusetts Coalition for Serious Illness Care (MCSIC, host organization) agreed there is still much to learn about how people are engaging in advance care planning in the context of the pandemic.

Despite this uptick in advance care planning engagement, there is reason to believe that previously documented disparities in advance care planning may have increased during the COVID-19 pandemic. Prior research has shown that for at-risk communities who have not engaged in this activity, especially among low-income communities of color, the driving reasons were a lack of trust in the health care system, feelings of overwhelm and anxiety regarding other life priorities, and low confidence when it comes to navigating the health care system and clinical interactions. All these experiences and perceptions have been impacted since the pandemic.

MCSIC sought to understand patient experiences about engaging with the health care system and their clinicians, including: if they feel heard & understood by clinicians, if they have trust in their clinicians and the health care system, and what they feel are the greatest medical, social, and financial needs to improve serious illness care. We plan to engage in a quantitative survey to sample both a national population, as well as a Massachusetts-based sample, with intentional oversampling of specific population subgroups (low-income Blacks, low-income Latinx, people with disabilities, people who live in nursing homes or assisted living facilities, and caregivers of individuals with disabilities and/or who live in nursing homes or assisted living facilities) to better understand their experiences. The purpose of this research is to offer insight of individuals’ experiences, particularly those from specific at-risk communities, to help inform strategies for how clinicians can improve the serious illness care experience for these patients.

Methods:
1. Reviewed existing MCSIC surveys and performed a literature review to identify how “serious illness” is defined and how issues of trust and respect for and by providers has been queried in the past.
2. Engaged stakeholders to identify areas of focus for the quantitative survey and how we can explore issues of trust, feeling heard and understood, and the greatest perceived medical, social, and financial needs.
**Abstracts**

**Presenter:** Frinny Polanco Walters, MD – Commonwealth Fund Fellow in Minority Health Policy at Harvard University, Harvard Medical School

**Project Title:** “Unintended Consequences: The Impact of the Cures Act on Health Equity and Adolescent Confidentiality Protections”

**Background:** The U.S. Department of Health and Human Services’ (HHS) Office of the National Coordinator (ONC) 21st Century Cures Act supports the use of electronic health information in a manner that is convenient, immediate, and free to the patient. Research has shown many benefits to having access to one’s health information including improvement in the quality of health care patients receive. However, this new rule may negatively affect adolescent minor patients and other vulnerable populations—those with limited English proficiency, low health literacy, and low digital literacy—who face barriers accessing their electronic health information. I partnered with the Action for Boston Community Development (ABCD), an organization that provides comprehensive family planning and reproductive health care to tens of thousands of Boston area residents annually regardless of gender, immigration, or health insurance status.

**Objectives:**
1) Evaluate the ONC’s Cures Act Final Rule impact on health equity.
2) Examine ONC’s Cures Act Final Rule as it applies to adolescent confidentiality.
3) Educate clinicians at 20 ABCD sites to provide adolescent minors with their confidential electronic health information while also protecting adolescent privacy in the implementation of the Cures Act Final Rule.

**Methods:**
II. Performed a literature review to identify considerations for the implementation of the Cures Act.
III. Presented analysis and legal implications at ABCD Clinical Advisory Council Meeting.
IV. Interviewed two ABCD site directors, one attorney, and a physician expert in consumer informatics.

**Results:** I developed educational material to inform clinicians in the 20 ABCD sites how to maintain compliance with the Cures Act Final Rule while providing adolescent minors access to their electronic health information in a secured manner. Lessons learned include:

- There is significant complexity in adapting the Cures Act in all 20 ABCD sites given the unique barriers faced by each site as they use different electronic health record platforms.
- Expanding access to confidential health information to adolescent minors has the potential to promote autonomy and agency over their health care.
- Having access to notes has many benefits and potential improvements in quality of health care vulnerable populations receive.
- Digital health inequities must be addressed to avoid the exacerbation of already existing health disparities.

**Future Directions:**
1) Engaging with all stakeholders (clinicians, patients, EHR experts) of the ABCD sites.
2) Develop efficient strategies to allow all patients to have access to their health information.

**Preceptor:** Christina Lombardo, MPH (ABCD)
Presenter: Sarimer Sánchez, MD – Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School, Infectious Diseases Bureau Director, Boston Public Health Commission

Project Title: “Operationalizing a Pfizer BioNTech COVID-19 Vaccine Clinic for the City of Boston: Lessons Learned”

Objectives:

1. Develop a clinical staffing model, vaccine management protocols, and infection control guidelines for BPHC’s COVID-19 Pfizer-BioNTech vaccination clinic
2. Identify best practices and strategies to increase vaccination of Roxbury residents and racial and ethnic minorities in the City of Boston

Background:

Ensuring timely access to COVID-19 vaccinations and outreach for our most vulnerable communities is a priority for the Boston Public Health Commission (BPHC). In February 2021, BPHC established a Pfizer-BioNTech COVID-19 Vaccination Clinic in Roxbury, a predominantly Black and Latinx neighborhood, to improve vaccine access for Boston’s residents of color. At the time, there was a paucity of clinical and operational models for public health departments to rapidly stand up a COVID-19 vaccine clinic with use of the Pfizer-BioNTech COVID-19 vaccine. There was also limited guidance on best practices to operationalize equity with vaccine clinic planning.

Methods:

- A literature review of vaccine storage, transport, and administration safety guidelines, as well as Pfizer-BioNTech COVID-19 vaccine educational materials, was conducted to inform rapid development of our standard operating procedures.
- The PrepMod digital platform served as the primary registration method for our vaccination site. We also leveraged community partnerships to facilitate vaccine access for Boston’s most vulnerable residents through use of dedicated appointment slots and creation of on-call “waiting lists” to be used in the event of extra vaccine.
- Individual demographic and clinical information was collected and extracted from PrepMod to continually monitor outcomes and prepare this analysis.

Results:

- 4,186 individuals were vaccinated at our COVID-19 vaccination site from February 2-February 24. An average of 233 vaccines were administered during each clinic session.
- A total of 2,287 doses were administered to Boston residents. Residents from adjacent Roxbury, Dorchester, and Jamaica Plain neighborhoods constituted 47% of vaccinated Boston residents at our clinic. Among vaccinated Boston residents, 31.9% were Black/African American and 14.9% were Latinx/Hispanic.

Future Directions:

- Our experience suggests that proximity to a COVID-19 vaccination site improves vaccine access for residents in nearby neighborhoods. Strategic planning with regards to the geographic distribution of vaccine sites across Boston neighborhoods, especially those that have been disproportionately affected by COVID-19, is critical to ensure equitable access.
- Clinical staffing models to deliver Pfizer-BioNTech COVID-19 vaccines should incorporate heterogeneity in number of doses per vial into their operational planning strategies.
- Use of community partnerships to assist with appointment enrollment and creation of “on-call lists” is an effective strategy to increase equitable vaccine access for Boston’s residents of color and minimize wastage of doses.

Preceptor: Jennifer Lo, MD, Medical Director, Boston Public Health Commission
Presenter: Carmela Socolovsky, MD – Commonwealth Fund Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Opportunities for Family-Oriented Multidisciplinary Team-Based Care”

Objectives: To define a population of interest for a family-oriented multidisciplinary team-based care model and parameters by which to identify these cases using information available in electronic medical records

Background: Family, broadly defined as a group caregivers and dependents associated by close social bonds, impact health across each other’s lifetime. The mechanism of this influence varies, spanning a spectrum from shared biochemical exposures, like cigarette smoke, to social determinants of health (SDOH) such as food insecurity or difficulty accessing care. To this end, a nascent body of evidence suggests incorporation of caregiver or family needs into patients’ care plans leads to more effective health management. There is growing interest in the promise of a family- oriented team-based care delivery to improve long-term health outcomes, particularly for vulnerable or underserved communities, but fragmentation across healthcare infrastructure and technology create significant barriers to implementation. As a result, there exists little data documenting experience with or value of this model.

The Massachusetts General Hospital (MGH) Medicaid Accountable Care Organization (ACO) has sought methods to pilot this delivery model that circumvent existing structural barriers. Phone numbers were found to be an effective means to identify family members of index pediatric patients with high utilization, information otherwise not documented in the electronic medical record (EMR). Using this data, summarized in an electronic dashboard, and clinician judgement, the ACO selected family cases to discuss in a multidisciplinary “Complex Family” Review (CFR) to address the patients’ unmet psychosocial or medical needs. This preliminary test of family-oriented care delivery has faced several operational challenges, including identification of candidate cases.

This project aims to better characterize the population that would most benefit from this intervention and strategies to more systematically identify these families using the limited information available in the EMR. Collectively, these findings will be used to plan an IRB-approved pilot of family-oriented team-based care. Results of such a pilot could provide the first demonstration of value of this care delivery innovation, a potentially scalable means to address health disparities.

Methods:
- Performed a literature review and solicited stakeholder expertise regarding multidisciplinary team- based care, utilization patterns signaling unmet SDOH, and care delivery implementation
- Engaged in experiential learning through CFR to identify effective clinical and operational practices
- Performed a qualitative and quantitative analysis of families selected for CFR and thematic analysis of multidisciplinary discussion

Results: A coherent definition of the medical and psychosocial features of the target population for CFR, a data- based methodology for identification of family cases within the EMR and an assessment of operational practices to facilitate a scalable CFR pilot.

Future Directions:
- Incorporating methodology into the CFR electronic dashboard
- Planning formal CFR pilot with an explicit operational protocol and defined outcome measures to demonstrate the value of team-based family-oriented care as an innovative care delivery model

Preceptor: Dr. Alexy Arauz-Boudreau MD, MPH
ABSTRACTS

Presenter: Siobhian M. B. Sprott, DDS, MPA – Joseph L. Henry Oral Health Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Improving Access to Oral Healthcare in Underserved Pediatric Population through Education”

Host Organization: American Dental Education Association (ADEA).

Objectives: To evaluate and assess the current CODA standards for Advanced Pediatric Dental Education for their feasibility in addressing access to care within underserved pediatric populations and current educational value to advanced pediatric dental education training programs.

Background: Oral diseases pose a significant burden to vulnerable populations across the United States, where multiple disparities exist. In pediatric populations, these disparities have transitioned away from financial barriers to with the passage of the Affordable Care Act and its identification of children’s oral health as an essential benefit. Despite this, untreated dental caries within Hispanic children and Black adolescents is higher than that of non-Hispanic white children and adolescents and the level of disease severity is also higher amongst these two minority groups.

Academic Dental Institutions play an important role in addressing this disparity by serving as ‘Dental Safety Net Providers’. The standards that guide these institutions to provide the level of care to these communities is established by the Commission on Dental Accreditation (CODA) with the great majority of that care being provided at the pre-doctoral level. However, at that educational level, there is typically limited exposure to pediatric dentistry, leading to institutions playing less of a role as safety net organizations within the pediatric population.

The purpose of this project is to provide recommendations to CODA which may be used to guide curriculum development in advanced pediatric dental residency programs to include specific programs which increase access to oral healthcare.

Methods: 1. Performed a literature review to evaluate existing and proposed CODA standards and their intent. During this review, four standards were identified within the proposed guidelines which contained language that could lend itself to addressing access to care issues.

2. Collaborated with experts in the field of dental education to identify key areas in addressing access to oral healthcare through education programs.

3. Constructed a survey instrument within Qualtrics which was then piloted. Based on feedback form the survey pilot, the survey instrument was modified and then launched to the Program Directors and/or Department Chairs of 60 CODA accredited pediatric dental residency programs and the CODA manager for pediatric dentistry.

Results: Our surveys (launched on April 15th), is still in progress. It is slated to close on May 5th, at which time data analysis and interpretation will be completed.

Future Direction: Based on the analysis of the data, a policy brief will be prepared for use by ADEA in their advocacy work.

Preceptor: Tita Gray, Ed.D, Senior Vice President of Access, Diversity and Inclusion, ADEA (principal) and Carolyn Booker, PhD, Senior Vice President for Educational Pathways, ADEA
Presenter: **Shelly D. Taylor, DMD** – Joseph L. Henry Oral Health Fellow in Minority Health Policy, Harvard Medical School

**Project Title:** “Integrating Diabetes & Oral Health within Federally Qualified Health Centers”

**Host Organization:** National Network for Oral Health Access (NNOHA)

**Objectives:**
1. To evaluate the attitudes, behaviors, and expectations of members of the learning collaborative towards integrating diabetes and oral health
2. To offer recommendations that enhance the functions and outcomes of the learning collaborative

**Background:** Successful and sustained integration of primary care and oral health is key for increasing positive health outcomes and access to care for under resourced populations. Expanding working partnerships between dentists and primary care physicians expands the potential for these individuals to seek treatment for both their medical and dental needs. In America, the trends of diabetes diagnosis among males and females is increasing. Additionally, people of color are disproportionately diagnosed with diabetes. Research demonstrates that providing dental care can support patients in controlling blood sugar levels and improve outcomes for people living with diabetes.

There is a bidirectional relationship between periodontitis and diabetes. Periodontitis is a disease that causes infection and inflammation of the gingiva and bone that surround and support the teeth. Diabetes is believed to promote periodontitis through an exaggerated inflammatory response to the periodontal microflora, while the effect of periodontitis is reported to influence blood sugar levels through production of inflammatory mediators which can gain access to tissues and organs at distant sites. Due to this interactive relationship, increasing working partnerships between medical and dental providers is essential to promoting optimal health.

The purpose of this project is to assist the NNOHA Integrating Oral Health and Diabetes Learning Collaborative goal of improving health outcomes for people with diabetes by increasing the number of dual users of medical and dental services and offer recommendations that enhance the functions and outcomes of the learning collaborative.

**Methods:**
1. Sampled 10 health centers for participation in the learning collaborative
   **Selection Criteria:**
   a. Co-located on-site medical and dental services
   b. Expanded state adult Medicaid coverage
   c. Utilize electronic medical records (EMR)
   d. Ability to report the race and ethnicity of dental patients
2. Constructed a survey instrument within Qualtrics to evaluate the participant’s thoughts on the ease of providing integrative care, expectations of the integrative care model and knowledge of quality improvement exercises
   a. **Participants:** Medical Champion, Dental Champion, IT Dept, Senior Leader, Team Lead
3. Collaborated with participants and experts in the fields of quality improvement, periodontics, diabetes management, and motivational interviewing to develop clinical practice workflows

**Results:** The creation of preliminary clinical practice workflows that expand and enhance working partnerships between the medical and dental departments within Federally Qualified Health Centers.

**Future Directions:** The learning collaborative is still in progress. The final learning collaborative meeting for this cohort will be on June 4, 2021.
1. Evaluate the sustainability of the clinical practice workflows developed
2. Advocate for expanded adult Medicaid dental coverage
3. Increase interdisciplinary education at the pre- and post-doctoral level

**Preceptors:** Colleen Lampron MPH, Irene Hilton DDS, MPH
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N. Cambridge Neighborhood Health Center
Cambridge Health Alliance
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Deputy Associate Director
Initiative to Eliminate Cancer Disparities
Dana-Farber/Harvard Cancer Center
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.

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:
Phone: 617-432-2413  |  Fax: 617-432-3834  |  dcp_mfdp@hms.harvard.edu  |  www.hms.harvard.edu/dcp
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 CDEI will strive to increase the number of UIM 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, gay/lesbian/bisexual/transgendered people, and the disabled, who may have faced barriers to entering, staying and advancing in the health professions. The CDEI 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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The mission of the Office of Faculty Development (OFD) at Boston Children’s Hospital is to recruit and retain the best faculty, facilitate career advancement and satisfaction, and increase leadership opportunities, particularly for women and minorities. The OFD staff includes Faculty Director S. Jean Emans, MD; Administrative Director Maxine Milstein, MBA; and Program Coordinator Jill Dobriner, PhD; who work in collaboration with the Chief Education Officer and Director of the Department of Education, Alan Leichtner, MD, MSHPEd; and the Chief Equity and Inclusion Officer and Medical Director of the Office of Health Equity and Inclusion, Valerie L. Ward, MD, MPH. The OFD collaborates with career development offices at seven other teaching hospitals (BWH, MGH, BIDMC, Joslin, DFCI, McLean, and CHA) and HMS Offices for Faculty Affairs and 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 OFD works closely with the Department of Education at Children’s to foster the continuous improvement of teaching and learning. In support of its mission to promote faculty diversity, in collaboration with the BCH Office of
Health Equity and Inclusion, the OFD has developed a multi-dimensional strategy that encompasses communication strategies; supports a hospital-wide, systemic approach; 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 under-represented minority faculty or faculty with family responsibilities. The OFD also sponsors, with the Children’s Human Resources Department, several fellowships to under-represented minority faculty for The Partnership, Inc. and Conexión Leadership Programs, local organizations committed to workplace diversity and inclusion through professional and organizational development. 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 pipeline/retention efforts.

For more information, please visit: http://www.childrenshospital.org/ofd

Boston Children's Hospital
Office of Health Equity and Inclusion

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 and the BCH Office of Experience, 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. 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, teaching, and community service. The work of the Office of Health Equity and Inclusion is closely aligned with the goals and commitments in the Boston Children’s Hospital Declaration on EDI. In 2021, Boston Children's announced a new major initiative to advance pediatric health equity with its establishment of the Sandra L. Fenwick Institute for Pediatric Health Equity and Inclusion. This new Institute will also include the Sandra Labas Fenwick Family Endowed Chair in Equity and Inclusion and Valerie L. Ward, MD, MPH will hold this endowed chair.

Valerie L. Ward, MD, MPH – Chief Equity and Inclusion Officer
Nikki Tennermann, LICSW – Administrative Director
Geeranan Chuersanga, MS – Program Coordinator
Patrice Melvin, MPH, Senior Data Analyst

Contact: 617-919-6511½ healthequity@childrens.harvard.edu
**SPONSORS’ DESCRIPTIONS**

**Brigham and Women’s Hospital**  
**Center for Diversity and Inclusion**

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 women faculty and trainees with professional and leadership development as well as advance the work of gender equity in our institution and in academic medicine.

Contact information:
- Website: cdi.brighamandwomens.org
- E-mail: bwhcdi@partners.org

**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 cultural competency 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, 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:
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, Clinical Faculty Brunch, and faculty networking dinners

In response to the impact of COVID-19 on faculty career trajectories, the OFDPI launched Faculty Support Microgrants for faculty who have had career progress slowed due to increased time required with caregiving. Faculty can apply for funding for writers/editors, research support or additional support at home.

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 OFD hosts events that facilitate leadership growth and strengthen microclimate environments such as Leadership Bootcamp.

For more information contact:
Christine Power, MS, Director
617-582-8714
christinem_power@dfci.harvard.edu
Dana-Farber/Harvard Cancer Center
Initiative to Eliminate Cancer Disparities

Formed in 1997, Dana-Farber/Harvard Cancer Center (DF/HCC) is an innovative research collaboration between seven participating institutions, including Beth Israel Deaconess Medical Center, Brigham and Women's Hospital, Children's Hospital Boston, Dana-Farber Cancer Institute, Harvard Medical School, Harvard T.H. Chan School of Public Health and Massachusetts General Hospital.

A centerpiece of DF/HCC is its 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, c) facilitating minority representation in cancer clinical trials, and d) fostering diversity in cancer researchers. 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, 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.
Sponsors’ Descriptions

- 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
Email: Jessica_St.Louis@hms.harvard.edu
Site: https://mfdp.med.harvard.edu/node/208

Joan Y. Reede, MD, MPH, MS, MBA
Dean for Diversity and Community Partnership
Director, Program for Faculty and Diversity Inclusion

Jessica St. Louis
Program Manager, Harvard Catalyst | The Harvard Clinical and Translational Science Center, CTSC Program for Diversity Inclusion, Office for Diversity Inclusion and Community Partnership

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 Inclusion
The Office of Diversity and Inclusion promotes increased recruitment, retention, and advancement of underrepresented minority students and faculty at the Harvard School of Dental Medicine. The Office, led by Vincenzo G. Terán PsyD, 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 of the ODI, include: 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; and enhance and develop curricula that address issues of diversity, cross-cultural care, and sensitivity.

Partners:
The HSDM Office of Diversity and Inclusion partners with several offices at the Harvard Medical School, including the Office for Diversity Inclusion and Community Partnership and Office of Recruitment and Multicultural Affairs. 
For more information, visit: http://hsdm.harvard.edu/office-diversity-inclusion

Harvard T.H. Chan School of Public Health
Division of Policy Translation and Leadership Development

The Division of Policy Translation and Leadership Development aims to translate scientific knowledge to those individuals in positions that can effect major policy changes, thus improving the public's health, and to develop a new kind of multinational leadership capacity based on scientific evidence. This is relevant not only to current local, state, national and global figures, but to the leaders of the future – including the students who study at Harvard T.H. Chan School of Public Health and those who take our courses from other graduate Schools across Harvard University.

The Division is working to close the gap by building interpersonal networks with high quality videoconferencing capability and exploiting new media channels through programs in The Leadership Studio, our state-of-the-art webcasting and videoconferencing facility. Programs include The Forum at Harvard School of Public Health and Decision-making: Voices from the Field.

The Division also offers ministerial level and executive leadership programs, is developing innovative centers and initiatives, and collaborates with current and former leaders on a local and global stage. This effort is infusing a culture of exchange throughout the School’s academic activities.

https://www.hsph.harvard.edu/policy-translation-leadership-development/about/
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
The Office of the Chief Academic Officer (OCAO) was formed in 2009 as a part of the hospital’s larger strategic plan, charged with developing a vision for our growing academic programs at all levels of the institution. The academic strategic plan advanced ten initiatives designed to enhance the academic environment and to maximize scholarship and productive inquiry into the etiology, prevention, and most-effective treatment of psychiatric disorders across our research, educational and clinical communities. 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.

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 and scientists and fostering a culture of inclusion and respect. CDI provides numerous career-enhancing resources to students, trainees, and faculty underrepresented in medicine 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 URM students to academic research and clinical careers;
- Advance URM 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.
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:

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https://mfdp.med.harvard.edu/DICP_Faculty_Fellowship