# Diversity, Equity, and Inclusion: Our FY21 Purpose, Accomplishments, Lessons Learned, & FY22 Next Steps

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<u>HTTPS://APP.SLI.DO/EVENT/SASW8BB1</u>

# Background

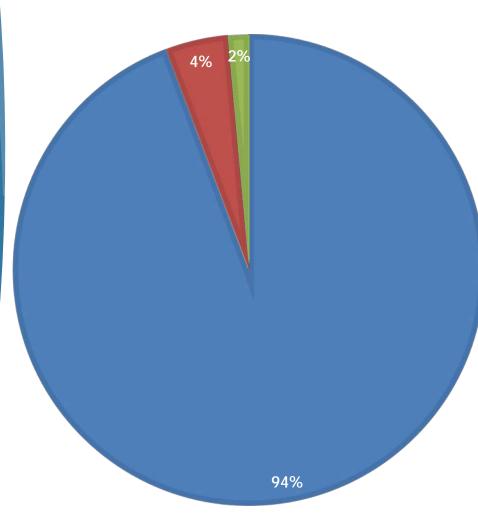
- ▶ 2019, shifts in faculty turnover led to focus on URM faculty retention
  - ▶ 2009-19 (57 FT and PT faculty left)
  - ▶ 15/57 URM faculty 26%
  - ≥ 2014-19 5/16 FT faculty departures were URM 31%

# Disproportionate Impact

- Fall 2019, 66 Total FT clinical faculty
- ▶ 3/66 FT URM; 1 PT URM

#### ALL FT CLINICAL FACULTY





# Background Cont.

# Small committee formed to evaluate the issues

# Informal survey was sent to all the URM faculty who had left the dept

- What were your experiences in this department related to diversity and inclusion?
- Do you feel your racial identity, or any other cultural factor negatively affected your time here or your decision to leave?
- Would you ever return to this department if these issues were addressed?

# Background Cont.

### ▶ Sample responses:

- "I left because when I asked for adjustments to my clinical duties, I was told formally and informally that no adjustments could be made for me. It made me feel like I had no value to the department and that I was disposable."
- "I was not supported. I was not fostered in my scholarly growth. I saw no path for my career to advance."
- "The main reason I left was in part feeling like it was my time to leave but also feeling underappreciated as well."
- "I would have enjoyed my time better and had greater job satisfaction had I had more opportunities. It would have made it harder for me to leave."

# Background Cont.

- Core Themes:
  - Not feeling valued within the dept
  - Lack of career direction and goals
  - Lack of agency/voice to address issues
- Summer 2020 George Floyd is murdered; national awakening regarding systemic racism and bias
- ► Fall 2020 A re-organized formal diversity committee is formed

# Why a Diversity Committee?

- Problems related to D/E/I can be subtle and diffuse
- In order to more directly address systemic issues; core areas of need were identified
  - ► Faculty Recruitment/Retention
  - Staff Recruitment/Retention
  - Social Justice Curriculum and Education
  - Research
  - Department Initiatives/Community Outreach and Engagement

# Leadership Retreat

With any new large-scale endeavor; there is going to be a need to disseminate information and communicate the purpose and goals

Leadership is critical to any change initiative

• Input, Understanding, and Buy-In

Two-day retreat with exercises aimed at increasing understanding

 Courageous Conversations, review the current DEI issues

At the end of the retreat, a statement of purpose is generated

# Statement of Purpose

This leadership group agrees to an **ongoing commitment** to recreating and improving the department culture as it relates to diversity, equity, and inclusion. Our priority is **to establish processes that will**lead to long term sustainable gains in both faculty and staff recruitment and retention. With specific focus on increasing diverse representation in leadership positions for both faculty and staff.

We will continue to work with the department leadership and the diversity committee to better understand the needs in our divisions by conducting systematic needs assessments and continuing the work of improving the climate of inclusivity. We understand that our system benefits most from transparency, accountability, and continued education for those who are in the position to effect lasting change. This intentional change will ultimately serve to improve the care we provide to our patients and the service we bring to our community.

# Dept Wide Needs Assessment



# To critically evaluate our systems and processes related to D/E/I

Identify potential starting points

Foster active participation in our D/E/I initiative



# Understand of the importance of value in the Dept for all members

Tools: D/E/I based surveys, focus groups, start of courageous conversations

Beginning to identify members of the department with D/E/I interests, background, knowledge

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Strict deadlines don't work in the initial phases of cultural shift

Not every group will need to conduct a needs assessment in the same way

- Never assume that all members of a group have enough psychological safety to participate in a safe space or courageous conversation
  - Safety must be established via a nonpunitive process of understanding and open dialogue
- The focus of the assessment is to "know what you don't know"
  - Get input from those who may not traditionally be invited or have opportunities to provide it regarding D/E/I issues

- ► Formal grievance/complaint reporting can be harmful to the D/E/I process
  - Needs a process of understanding
  - How can we avoid retaliation/retribution for complaints?
- One size fits all formal diversity training is a MYTH!!
  - ► Targeted trainings with specific goals can be useful

- No checklist of diversity can/should be expected from the Dept
  - ► Each division/workgroup has their own unique starting place
  - Operating from a checklist provides an assumption that we are done once tasks are completed
  - Leaves no room for re-evaluation of process

- ▶ Safe space conversations are most effective when:
  - Safety has been established
  - Done in the moment something has caused conflict or harm
  - Impromptu/Informal conversations >>>> Formal scheduled meetings
  - One on one/small group discussions >>>> Large group conversations

- Cultural shift is a process mostly based in selfreflection
  - Requires a clear understanding of the overall values and goals
- D/E/I initiatives are most transformative when:
  - ► Integrate relevant topics into our daily work
  - ▶ Not viewed as additional/burdensome activities
  - Promote individual self-efficacy
  - ▶ Discourage silence/inactivity/apathy
  - ► Embrace uncertainty and open discourse

#### Faculty Recruitment/Retention

- Completed a guide for faculty hiring
- Best practices for inclusive hiring
- D/E/I related questions to ask during the interview
- Connection with the Mentorship Committee – focus on retention

#### Staff Recruitment/Retention

- Partnerships with local HBCUs to establish recruitment pipelines
- Data on available incentives (Loan forgiveness, Tuition reimbursement etc)
- Diversity statement on position listings



#### Research

Active collaborations for talented research faculty pipelines

Partnership on HRSA Grant targeting COVID-19 hesitancy in underserved minority populations



# Dept Initiatives/Community Outreach and Engagement

Identifying and establishing several community partners

Fostering a potential collaboration with Healing Cities

#### Social Justice Education/Curriculum

- D/E/I Grand Rounds series
  - ▶ Dr. Chuck Callahan Baltimore: The Impact of Historical Structural Racism on Health
  - ▶ Mr. Steven Ragsdale History of medical racism in Baltimore
  - Dr. Nhi-ha Trinh Cultural humility and Anti-racism in psychiatry
  - ▶ Dr. Sarah Vinson Social injustice and mental health
  - ▶ Dr. Ruth Shim Dismantling structural racism in psychiatry
- Early work on creating a DEI QI toolkit to empower any employee to conduct quality improvement around DEI issues within their workplace
- Library of Education Resources: <a href="https://www.zotero.org/groups/2563610/university\_of\_maryland\_department\_of\_psychiatry\_diversity\_curriculum\_sub\_committee/library">https://www.zotero.org/groups/2563610/university\_of\_maryland\_department\_of\_psychiatry\_diversity\_curriculum\_sub\_committee/library</a>

Groups with present and active leadership engagement as well as dedicated times/meetings to discuss and strategize regarding D/E/I have made tremendous strides:

- Creating new times/meetings is not always possible and may be seen as a burden
  - Utilize existing times/meetings to incorporate D/E/I discussions

Modeling of how to have a safe space/courageous conversation during monthly Diversity Committee meetings

Teams channel usage and membership steadily increasing:

- Positive learning and growth is happening via Teams
- Members are sharing their experiences more authentically in our safe space discussions
- Members are more empowered to share stories and resources which positively affects the growth of the entire department
- Use of e-mail blasts and impersonal announcements do not necessarily affect change over time

# Personal reflection is sparking change

- Culturally sensitive hygiene product pilot
- Juneteenth celebrations
- Community activism
- Intentional recruitment
  - Potential candidates are seeking us out (Website, Word of mouth)

# Attention/Collaboration outside of our department

- SOM Faculty Recruitment/Retention
- Anesthesia
- OB
- SOM Ambulatory Care
- Anne Arundel Medical Center
- Northwell Health Systems NJ

#### **Process of Cultural Change**

Only possible with Investment (Time, Leadership Involvement, and Resources)

**Create Opportunities** (Make room for others to rise, Create spaces to connect)

What are the issues? What is the Intention? Why are we doing this? Awareness Sustainability Encourage curiosity nterest Discourage silence/shaming/apathy Growth Change Be Honest. **Action** Practice Self-Reflection **Engagement** (Be mindful of the intention) Be transparent and Accountable **Practice Humility** 

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- Change cannot be forced
- Change occurs gradually
  - ► Requires guidance, transparency, accountability, and safeguards for expected setbacks/resistance
- Change must be supported at the highest levels of leadership
  - ► Active, Engaged, and Energized



Wanting immediate action affects understanding about how much you might not know



Establishing an infrastructure allows for partnerships to develop and facilitates collaboration

Identifying talented potential comes in many forms but you must seek it out



Vision must align with the broader values of the department

One person can spread the message The vision must be understood and shared by most of the group

#### Learning must be continuous

 Inclusive of a wide variety of perspectives, and non-punitive

Defensiveness, insecurity, and denial are a part of the process

• "Saying the wrong thing" is less important than demonstrating your commitment to the process

Providing safe spaces for difficult/courageous conversations is essential – but not easy to do



Perceptions may drive discontent

Transparency and open dialogue are required to minimize these effects



No man is an island



An engaged coalition is most effective at communicating progress, updates, and vision



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### Next Steps....

- It never ends
- Understanding the problems requires continuous learning
  - Each individual and group within the department must evaluate their openness and willingness to continue the journey
  - We must never become complacent and feel the job is done
  - We need systems to reflect on and re-evaluate on the processes we have
  - We must take breaks and re-engage to limit apathy and burnout

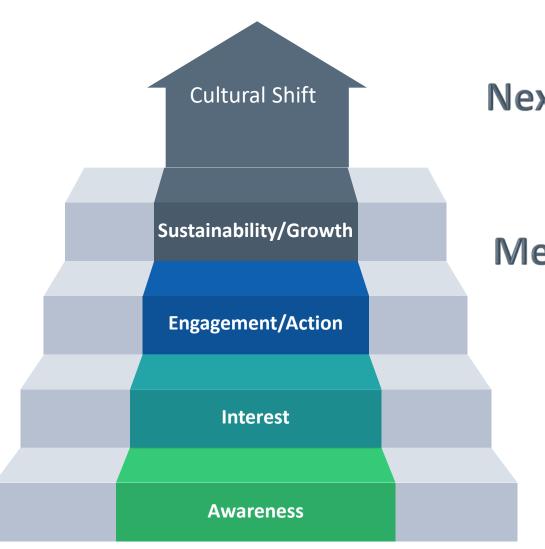
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## Next Steps

- Formation of D/E/I Implementation Team
  - ▶ Team will undergo specific training 8/3/21
- Each division will have an assigned implementation lead to help them focus and move forward with their identified goals
  - Continue to establish safe spaces
  - Have difficult conversations and hold space for individual self-reflection and learning

## Be Intentional

https://youtu.be/CvkdnQsWwgY



Next Diversity Committee Meeting: Thurs, Aug 26<sup>th</sup> at 4pm

Meeting Link is available on Teams