2018 Leadership and Faculty Development Program Conference and Minority Health Policy Annual Meeting

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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 Faculty Development and Diversity  
Office for Multicultural Faculty Careers

Cambridge Health Alliance  
Department of Medicine, Division of Minority Affairs

The Commonwealth Fund Mongan Fellowship  
in Minority Health Policy

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
AGENDA – WEDNESDAY, MAY 2, 2018

2018 Minority Health Policy Annual Meeting

Pechet Room
The Joseph B. Martin Conference Center at Harvard Medical School
77 Avenue Louis Pasteur, Boston, MA

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 disparities issues impacting the nation’s most vulnerable populations.

12:30 PM Registration (outside Pechet Room, 1st Floor)

1:00 – 1:10 PM Opening Welcome Remarks
Joan Y. Reede, MD, MPH, MS, MBA
Dean, Diversity and Community Partnership, Professor of Medicine, Harvard Medical School; Professor of Society, Human Development and Health, Harvard T.H. Chan School of Public Health

1:10 – 2:25 PM Faculty Fellowship Research Presentations

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

“Understanding and Improving End-of-Life Discussions for Blood Cancers”
Oreofe Odejide, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor, Harvard Medical School; Department of Medicine, Dana-Farber Cancer Institute

“Development of a Rapid Point-of-Care Diagnostic for Infectious Pathogens”
Richelle C. Charles, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor, Harvard Medical School, Department of Medicine, Massachusetts General Hospital

“Antibody Neutralization of Hemorrhagic Fever Viruses”
Jonathan Abraham, MD, PhD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor, Department of Microbiology and Immunobiology, Harvard Medical School

“The Effect of Hemoglobin on Plasmodium Falciparum Growth”
Natasha M. Archer, MD, PhD
Faculty Fellow, Harvard Catalyst Program for Faculty Development and Diversity Inclusion; Instructor, Harvard Medical School, Department of Pediatrics, Boston Children’s Hospital

2:25 – 2:35 PM Break
Commonwealth Fund Mongan Fellowship Practicum Presentations

**Moderator:** Pamela Riley, MD, MPH
Vice President for Delivery System Reform, The Commonwealth Fund

“The Social Determinants of Health and the Healthcare Referral System”
Paula Magee, MD
Commonwealth Fund Mongan Fellow, Harvard Medical School

“Incompetent to Stand Trial: Strategies for Jail Release and Community Re-Entry”
Morgan Medlock, MD, MDiv
Commonwealth Fund Mongan Fellow, Harvard Medical School

“Hailey Apartments Health Action Plan: Integration of Trauma Informed Interventions into Affordable Housing Management and Design”
Alexander Amon Rodgers, MD
Commonwealth Fund Mongan Fellow, Harvard Medical School

“Providence and United Medical Center Closures: An Examination of the Effect on Perinatal Health Access, Utilization, and Outcomes in the District of Columbia”
Michelle Taylor, MD, DrPH
Commonwealth Fund Mongan Fellow, Harvard Medical School

**Commentator:** Pamela Riley, MD, MPH

3:50 PM Closing Remarks
Joan Y. Reede, MD, MPH, MS, MBA
Improving the Care of People with Disabilities through Research, Education, Policy and Advocacy

Rotunda Room
The Joseph B. Martin Conference Center at Harvard Medical School
77 Avenue Louis Pasteur, Boston, MA

The program brings together thought leaders in medicine, public health, policy and civil rights to have a robust discussion on opportunities to improve medical education, policy, as well as the quality of care delivered to patients with disabilities through keynote presentations and panel discussions.

9:00 AM  Registration (outside Rotunda, 3rd Floor)

9:20 – 9:30 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

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

9:30 – 10:10 AM  Guest Speaker
“Disabusing Disability: Striving for Diversity, Equity & Inclusion in Medicine”
Oluwaferanmi O. Okanlami, MD, MS
Founder, Executive Director, Okanlami Strong, LLC; Assistant Professor of Family Medicine and Physical Medicine & Rehabilitation; Faculty Lead for Student Success in The Office for Health Equity and Inclusion, Michigan Medicine

10:10 – 11:10 AM  Panel Discussion: Education and Policy

Moderator:  Lisa Iezzoni, MD, MSc
Professor of Medicine, Harvard Medical School; Director, Mongan Institute Health Policy Center, Massachusetts General Hospital

Panelists:  Nicole Mazwi, MD
Instructor in Physical Medicine and Rehabilitation, Harvard Medical School; Co-Director, Traumatic Brain Injury Fellowship Program, Spaulding Rehabilitation Hospital

John Winske
Executive Director, Massachusetts Disability Policy Consortium

Commentator:  Lisa Iezzoni, MD, MSc

11:10 – 11:20 AM  Break
11:20 AM – 12:35 PM  Panel Discussion: Research and Advocacy

**Moderator:** Chloe S. Slocum, MD, MPH
Instructor in Physical Medicine and Rehabilitation, Harvard Medical School, Spaulding Rehabilitation Hospital

**Panelists:** Kerry Thompson
Information and Program Coordinator, Disability Rights Fund and Disability Rights Advocacy Fund; Executive Director, Silent Rhythms

Rachel Tanenhaus
ADA Coordinator / Executive Director
Cambridge Commission for Persons with Disabilities (CCPD)

William Henning
Executive Director, Boston Center for Independent Living

**Commentator:** Lisa Iezzoni, MD, MSc

12:35 – 1:20 PM  Luncheon Guest Speaker
Greg Galeazzi
MD Candidate, Class of 2021, Harvard Medical School
Retired U.S. Army Captain

1:20 PM  Closing Remarks
Alden Landry, MD, MPH
AGENDA – THURSDAY, MAY 3, 2018

3:00 – 6:00 PM  Reede Scholars 9th Annual Health Equity Symposium & Reception
Rotunda, Joseph B. Martin Conference Center
“Oral Health & Equity: Integration in Action”

3:00 - 3:15 PM  Welcome
Mary E. Fleming, MD, MPH
Cynthia Hodge, DMD, MPH, MPA

3:15 - 3:30 PM  Introductory Remarks
Phillip Woods, DDS, MPH

3:30 - 4:45 PM  Panelist Presentations

Hugh Silk, MD, MPH
“Integration of Oral Health and Primary Care - Where Have We Come From, Where Are We and Where Are We Going?”

Natalia Chalmers, DMD, PhD
“Collaborative care: Evidence-driven policy changes to improve access to oral health care”

Paul Manos, DDS
“The Mouth-Body Connection: Integration of Dental Awareness and Dental Benefits for Improvement of Overall Health”

Marceé J. White, MD, FAAP
“An Essential Integration: Oral Health and Primary Care”

5:00 PM  Discussion

6:00 PM  Commentary & Closing
Career Development Training: Funding Opportunities

Faculty Waterhouse Room
Gordon Hall, Harvard Medical School
25 Shattuck Street, Boston, MA

Navigating funding opportunities and identifying the right match can be challenging. The purpose of the session is to provide HMS junior faculty, fellows and researchers with available resources and training tools in seeking funding opportunities within the US federal government, as well as through foundations, non-profit institutions, and corporations. Speakers from NIH, HRSA, Aetna Foundation, Hogg Foundation for Mental Health, and American Cancer Society will provide funding insights, funding sources and recommendations through presentation and panel discussion.

COS Pivot Training-- Participants will also learn how to use Pivot, a web-based, searchable database of external funding opportunities from federal, non-federal, and international sponsors in all disciplines. Researchers will learn to create a user profile and to set up customized searches with e-mail alerts about new opportunities that match their search criteria.

9:15 AM  Registration

9:30 – 9:35 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

9:35 – 10:05 AM  Guest Speaker
Garth N. Graham, MD, MPH, FACP, FACC
President, Aetna Foundation; Vice President of Community Health, Aetna, Inc.
Hartford, CT

10:05 – 11:35 AM  Panel Discussion: Funding Opportunities

Moderator:  Susan O. Gomes
Director of Research Development and Strategy
Faculty of Arts and Sciences, Harvard University

Panelists:
Durado Brooks, MD, MPH
Vice President, Cancer Control Interventions, American Cancer Society, Atlanta, GA

Nakela Cook, MD, MPH
Chief of Staff, National Health, Lung and Blood Institute/National Institutes of Health, Bethesda, MD
AGENDA – FRIDAY, MAY 4, 2018

Octavio N. Martinez, Jr., MD, MPH, MBA, FAPA
Executive Director, Hogg Foundation for Mental Health; Associate Vice President, Division of Diversity and Community Engagement; Clinical Professor, School of Social Work, The University of Texas at Austin

Maria Portela Martinez, MD, MPH
Branch Chief of Medical Training and Geriatrics, Division of Medicine and Dentistry, Bureaus of Health Workforce, Health Resources and Services Administration (HRSA), Rockville, MD

11:35 – 11:45 AM
 Break

11:45 AM – 12:30 PM
 Lunch and Training

COS Pivot Training
Jennifer Corby
Research Development Officer, Faculty of Arts and Sciences, Harvard University

12:30 PM
 Closing Remarks
Joan Y. Reede, MD, MPH, MS, MBA
Oluwaferanmi O. Okanlami, MD, MS
Founder, Executive Director, Okanlami Strong, LLC; Assistant Professor of Family Medicine and Physical Medicine & Rehabilitation; Faculty Lead for Student Success in The Office for Health Equity and Inclusion, Michigan Medicine

Dr. Oluwaferanmi Okanlami is an Assistant Professor of Family Medicine with a joint appointment in the Department of Physical Medicine and Rehabilitation. Dr. Okanlami was born in Nigeria before immigrating to the US at a young age. He attended high school at Deerfield Academy and college at Stanford University where he also ran Track & Field, serving as captain his last two seasons and achieving Academic All American recognition.

Dr. Okanlami then earned his M.D from the University of Michigan before matching into Orthopedic Surgery at Yale. At the beginning of his 3rd year he suffered a spinal cord injury, paralyzing him from the chest down. After two surgeries and intense rehabilitation, he was blessed with some return of motor function.

Dr. Okanlami went on to earn a Master’s degree in Engineering, Science, and Technology Entrepreneurship from The University of Notre Dame, and completed his Family Medicine Residency at Memorial Hospital in South Bend, Indiana. He served on the St. Joseph County Board of Health, appointed by Mayor Pete Buttigieg; is the Vice President of the River City Challenged Athletes, a non-profit that supports the local adaptive sports teams, wheelchair basketball and sled hockey. He was the Chairman of the capital campaign for St. Joseph County Clubhouse, a community organization for people with serious mental illness, and is the Director of Design the Future: Midwest, a summer program that teaches high school students to utilize design thinking and entrepreneurship to create solutions for problems facing people with disabilities. He was awarded one of Michiana’s 2017 Forty under Forty awards and has a catch phrase, “Disabusing Disability,” hoping to demonstrate that DIAbility doesn’t necessarily mean INability, with a goal of creating a health system that is both inclusive and accessible for all.
Garth N. Graham, MD, MPH, FACP, FACC
President, Aetna Foundation;
Vice President of Community Health, Aetna, Inc.

Dr. Graham is a leading authority on social determinants of health. President of the Aetna Foundation and Vice President of Community Health for Aetna, Inc., Dr. Graham is also a cardiologist and public health expert. He oversees the community health initiatives for the Foundation and Aetna, Inc., bringing his experience as a former deputy assistant secretary at the U.S. Department of Health and Human Services under the Obama and Bush administrations where he also ran the Office of Minority Health. He directed the development of the federal government’s first National Health Disparities Plan released under the Obama administration.

He has been a contributor to *The Hill, The Chicago Tribune, Fortune, Quartz, Health Affairs,* and *Ebony,* and has been featured in *Essence, CNN,* and *The New York Times* among others. His original research has been published in the *Journal of the American Medical Association, American Journal of Public Health, Health Affairs* and other publications. Along with his role at the Aetna Foundation, Dr. Graham is a clinical associate professor of medicine at the University of Connecticut.

Prior to joining the Foundation, in his role as the assistant dean for health policy at the University of Florida School of Medicine, Garth led several research initiatives looking at how to improve outcomes and readmission rates in cardiac patients in underserved populations. He contributes to several boards including being named by the President to the U.S. Federal Coordinating Council on Comparative Effectiveness Research, the Institute of Medicine Board on Population Health, the American Heart Association/American Stroke Associational National Quality Oversight Committee, the American College of Cardiology/American Heart Association Task Force on Clinical Data Standards and many others.

Dr. Graham holds a medical degree from Yale School of Medicine, a master’s in public health from Yale School of Public Health and a bachelor of science in biology from Florida International University in Miami. He completed clinical training at Massachusetts General Hospital and Johns Hopkins where he trained in cardiology and interventional cardiology. He holds three board certifications including internal medicine, cardiology and interventional cardiology.
Jonathan Abraham, MD, PhD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor, Department of Microbiology and Immunobiology, Harvard Medical School, Boston, MA

Jonathan Abraham, MD, PhD is an Assistant Professor of Microbiology and Immunobiology at Harvard Medical School (HMS) and a Clinical and Research Fellow in Infectious Diseases at Brigham and Women’s Hospital (BWH) and Massachusetts General Hospital. He is a physician-scientist and his current work focuses on developing antibody-based therapeutics to treat emerging viral infections. Dr. Abraham graduated from Harvard College (2005) where he studied biochemical sciences, and from the MD-PhD program at Harvard Medical School (2012), through which he obtained his PhD in Biophysics (2010). He completed residency in Internal Medicine at BWH. He is a recipient of the HMS Dean’s Postdoctoral Fellowship Award, the Burroughs Wellcome Fund (BWF) Postdoctoral Enrichment Award, the BWH Hearst Foundation Young Investigator in Medicine Award, an NIH Director’s Early Independence Award (DP5), and a BWF Career Award for Medical Scientists (CAMS). His research uses methods in human immunology and structural biology (including X-ray crystallography and Cryo-EM) to study how the human immune system fights off infections by viruses that cause highly lethal diseases, including the hemorrhagic fever viruses Junin, Machupo, Ebola, and Marburg.

Natasha M. Archer, MD, PhD
Faculty Fellow, Harvard Catalyst Program for Faculty Development and Diversity Inclusion; Instructor, Harvard Medical School, Department of Pediatrics, Boston Children’s Hospital, Boston, MA

Dr. Archer is a pediatric hematologist/oncologist at Dana-Farber/Boston Children’s Cancer and Blood Disorders Center, an instructor in pediatrics at Harvard Medical School, and associate physician in the Division of Global Health Equity at Brigham and Women’s Hospital. She is also the senior health and policy advisor for Hematology at Zanmi Lasante (the Haitian sister organization of Partners In Health). Dr. Archer’s research focuses on the delivery of effective sickle cell disease care to children worldwide. Her research interests include the implementation of sickle cell disease screening and management programs in low resource settings and the effect of different hemoglobins on malaria infectivity. As a PFDD faculty fellowship award recipient, Dr. Archer intends to understand the basis of *Plasmodium falciparum* inhibition by fetal and sickle hemoglobin and to use her data to inform the use of hydroxyurea and anti-sickling agents worldwide.

Dr. Archer completed her fellowship in pediatric hematology/oncology at Dana-Farber/Boston Children’s in 2014 and her medicine and pediatrics residency in the Harvard Combined Internal Medicine/Pediatrics Residency training program in 2011. She also completed the Doris and Howard Hiatt Global Health Equity Residency in 2011. Dr. Archer earned her BS from Yale College in 1999, her MD from Yale University School of Medicine in 2006, and her MPH from Harvard School of Public Health in 2011.
Durado Brooks, MD, MPH
Vice President, Cancer Control Interventions, American Cancer Society, Atlanta, GA

Dr. Brooks has worked for the American Cancer Society’s national headquarters since 2000. He oversees the design, implementation and evaluation of cancer prevention and early detection programs at the national, state and local levels to increase access to high quality prevention and screening, and to decrease cancer-related disparities. He also serves as Deputy Editor of the Society’s peer-reviewed journal CA: A Cancer Journal for Clinicians.

A graduate of the Ohio State University and the Wright State University School of Medicine, Dr. Brooks completed his internal medicine residency and chief residency at Wright State’s Affiliated Hospitals in Dayton, Ohio, and practiced primary care medicine at safety net facilities in Dayton and in Dallas, Texas for fifteen years. He completed the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy (now the Commonwealth Fund Mongan Fellowship) in 1999 and holds a Master’s degree from the Harvard School of Public Health. He subsequently worked in the US Department of Health and Human Service’s Dallas Regional Office before joining the American Cancer Society.

In 2015 Dr. Brooks was honored with the Prevent Cancer Foundation’s Laurel Award for National Leadership in cancer prevention and early detection.

Richelle C. Charles, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Assistant Professor, Harvard Medical School, Department of Medicine, Massachusetts General Hospital, Boston, MA

Dr. Richelle C. Charles is an Assistant Professor of Medicine at Harvard Medical School, and a physician-scientist in the Division of Infectious Diseases at Massachusetts General Hospital (MGH). Dr. Charles received her Bachelor’s degree in General Biology from the University of Maryland, College Park and a Doctorate in Medicine from Johns Hopkins University School of Medicine. She completed her residency in internal medicine at MGH in 2006; and in 2009, completed the clinical infectious disease fellowship in the Infectious Disease Fellowship Training Program of MGH and the Brigham and Women’s Hospital. Dr. Charles’ research is focused on decreasing the global burden of mucosal and enteric infections of import affecting resource-poor and marginalized populations. More specifically, her work involves the application of high-throughput proteomic and genomic technologies to further our understanding of host-pathogen and immune responses during human infection by V. cholerae (the cause of cholera) and Salmonella enterica serovar Typhi and Paratyphi A (the primary causes of enteric fever) and to identify immunogenic antigens for vaccine and diagnostic development. She has ongoing collaborations with the International Centre for Diarrhoeal Disease Research, Bangladesh and with Partners In Health in Haiti.
Nakela Cook, MD, MPH
Chief of Staff, National Health, Lung and Blood Institute/National Institutes of Health, Bethesda, MD

Dr. Nakela Cook is the chief of staff in the Immediate Office of the Director (IOD) of the National Heart, Lung, and Blood Institute (NHLBI), part of the National Institutes of Health (NIH). Dr. Cook provides management support for activities initiated by the NHLBI director, serves as his liaison to senior officials within and outside of the Institute, and provides oversight to the support operations of the IOD.

Prior to her appointment as chief of staff, Dr. Cook served as a medical officer in the Clinical Applications and Prevention Branch in the Division of Cardiovascular Sciences at the NHLBI. Her work at the NHLBI involved outcomes research, epidemiology, and clinical trials. Dr. Cook’s research portfolio includes comparative effectiveness research, cardiovascular imaging, racial/ethnic and gender disparities in cardiovascular disease, and cardiovascular health services research.

Dr. Cook joined the NHLBI in 2008. Prior to working at the NHLBI, Dr. Cook’s research focused on access to secondary and tertiary levels of care for patients who were seen at community health centers; referral patterns for cardiovascular care based upon gender, race/ethnicity, insurance, and site of care; and appropriate use of implantable cardioverter defibrillators by gender and race/ethnicity.

Dr. Cook attended the University of Alabama at Birmingham where she received a Bachelor of Science degree in materials science and engineering. She received a Doctor of Medicine from Harvard Medical School, Boston, and completed her clinical training at Massachusetts General Hospital (MGH) in Boston. She is board certified in internal medicine and cardiology. Dr. Cook completed a fellowship in Health Services Research at the Harvard School of Public Health. She is also an alumnus of the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy and completed her Masters of Public Health with a concentration in health care policy as part of this fellowship.

Jennifer Corby
Research Development Officer
Faculty of Arts and Sciences, Harvard University, Cambridge, MA

Jennifer Corby is a Research Development Officer in the Faculty of Arts and Sciences’ (FAS) Research Administration Services (RAS) office. She works with ladder faculty across the three Divisions of FAS and the John A. Paulson School of Engineering and Applied Sciences (SEAS) to identify new and notable funding opportunities in their research areas. She also provides grantsmanship advice and support for developing competitive grant and fellowship proposals. Her responsibilities include monitoring funding trends for research in the federal budget and the world of private foundations. Prior to working in RAS, Jennifer held positions in research administration and program management at Suffolk University, the University of Massachusetts-Boston, and the Woodrow Wilson International Center for Scholars.
Greg Galeazzi
MD Candidate Class of 2021
Harvard Medical School, Boston, MA
Retired U.S. Army Captain

Retired Army Captain Greg Galeazzi is a member of the Harvard Medical School, Class of 2021. Originally from Glastonbury, Connecticut, he attended Loyola University in Baltimore, Maryland on an Army ROTC scholarship, and received a Bachelor's in Business in 2007. He was subsequently commissioned as a Second Lieutenant in the United States Army, and began a four-year active duty service obligation later that year. During his time in the military, Greg served as an Infantry Officer in various leadership positions and is a recipient of the Bronze Star, Purple Heart, and Army Ranger Tab.

In May 2011, while leading a foot patrol in rural Afghanistan, Greg was seriously wounded when a roadside bomb was detonated below his feet. The explosion caused the immediate loss of both legs above the knee, and severely damaged his right arm requiring a total elbow fusion. After more than 50 surgical operations, and two years of physical therapy, he returned to school in 2013 for post-baccalaureate pre-medical courses. In 2017, he was admitted to Harvard Medical School, where he trains today. He lives with his fiancée Jazmine Romero and their two cats and plays guitar as a side hobby.

Susan O. Gomes
Director of Research Development and Strategy
Faculty of Arts and Sciences, Harvard University, Cambridge, MA

As Director of Research Development and Strategy for Harvard's Faculty of Arts and Sciences (FAS) and the John A. Paulson School of Engineering and Applied Sciences (SEAS), Ms. Gomes leads efforts to foster relationships with external sponsors, develop strategies to enhance the FAS and SEAS research portfolio, and facilitate the pursuit of external funding. She manages a broad portfolio of research development initiatives including efforts to provide grantsmanship and proposal development resources, advice, service and support for 700+ faculty. She also leads the development and implementation of programs to strengthen proposal development, including on-campus workshops, web-based materials, and other resources and initiatives to assist faculty in developing competitive funding proposals across FAS.
Bill Henning
Executive Director
Boston Center for Independent Living, Boston, MA

Bill Henning has been involved in the disability rights and services field since March 1984, when he helped found the Cape Organization for Rights of the Disabled (CORD), which became an independent living center in 1989. In 2002, he left CORD to become director of the Boston Center for Independent Living (BCIL). On the national level, Henning has worked closely with ADAPT, NCIL, and Community Catalyst, among others, on disability rights and health care issues.

Besides performing executive duties as director of CORD and BCIL, and carrying a small consumer caseload for a number of years, Henning has also been a leader in numerous advocacy campaigns, including, among others, the establishment of CommonHealth (1986-88); protecting the PCA program (1991 to present); obtaining ADA compliance at the MBTA and protecting Ride services (2004 to present); promoting consumer protections in One Care (2011 to present), including establishment of the Implementation Council and IL-LTSS coordinator position; and establishing these disability housing programs funded by DHCD: Community Based Housing (2005), AHVP (1995), and Home Modifications (2000).

Prior to his work in disability rights and services, Henning advocated with Mexican farm workers, establishing an advocacy and service organization in Idaho Falls, Idaho (1979-81); with, women on public assistance on Cape Cod and across the state (1982-83); and Vietnam veterans, helping establish the Nam Vets Association in Hyannis (1982-84).

He received a BA in history and political science and a certificate in Asian Studies from the University of Massachusetts in Amherst in 1978.

Lisa Iezzoni, MD, MSc
Professor of Medicine, Harvard Medical School; Director, Mongan Institute Health Policy Center, Massachusetts General Hospital, Boston, MA

Dr. Iezzoni is Professor of Medicine at Harvard Medical School and Director of the Mongan Institute Health Policy Center, Massachusetts General Hospital. Over more than 30 years, Dr. Iezzoni has led numerous studies funded by governmental agencies and private foundations, including the Agency for Healthcare Research and Quality, the National Institutes of Health, the Medicare agency, the Patient Centered Outcomes Research Institute, the Aetna Foundation, and The Robert Wood Johnson Foundation. Her early studies focused on developing and evaluating methods for predicting health care costs, clinical outcomes, and substandard quality of care. Dr. Iezzoni has published and spoken widely on risk adjustment and has edited *Risk Adjustment for Measuring Health Care Outcomes*, now in its fourth edition. For more than a dozen years, she worked with multidisciplinary colleagues to develop the Hierarchical Condition Categories, the risk adjustment method Medicare uses to set capitated health plan payment rates.

Dr. Iezzoni serves on the editorial boards of major medical and health services research journals and on numerous national committees. She also spends considerable volunteer time as an advocate for persons with disability, including serving on the Board of Directors of the Boston Center for Independent Living (BCIL). In 2012-2013 representing BCIL, Dr. Iezzoni chaired the Medical Diagnostic Equipment Accessibility Standards Advisory Committee for the U.S. Access Board. She received degrees in medicine and health policy and management from Harvard University. Dr. Iezzoni is a member of the National Academy of Medicine in the National Academy of Sciences.

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

Dr. Alden Landry is an emergency medicine physician at Beth Israel Deaconess Medical Center and is the founder of Motivating Pathways Inc. He is Assistant Professor of Emergency Medicine at Harvard Medical School, Senior Faculty at the Disparities Solutions Center at Massachusetts General Hospital, and Faculty Assistant Director of the Office of Diversity Inclusion and Community Partnership at Harvard Medical School. He received his BS from Prairie View A&M University in 2002, MD from the University of Alabama in 2006 and completed his residency in Emergency Medicine at the Beth Israel Deaconess Medical Center in 2009. In 2010, he earned an MPH from the Harvard School of Public Health. He completed the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy in 2010 as well. He was also awarded the Disparities Solutions Center/Aetna Fellow in Health Disparities award in 2010-2011. He serves on the National Advisory Committee for the Summer Health Professions Education Program of the Robert Wood Johnson Foundation. In addition to his clinical interests, Dr. Landry is involved in research on emergency department utilization trends and disparities in care and quality of care. He is also the lead instructor for a course at Harvard T.H. Chan School of Public Health and teaches cultural competency to residents.
Paula Magee, MD  
Commonwealth Fund Mongan Fellow  
Harvard Medical School, Boston, MA

Dr. Magee most recently completed her pediatric residency at Children’s National Health System, Washington, DC. Throughout her medical career, she has focused on community health, working on behalf of underserved populations affected by their low-socioeconomic status. Throughout medical school and residency, Dr. Magee took a strong interest in increasing diversity in the medical workforce. During residency, she served on the inaugural Diversity Subcommittee, aimed at increasing the number of underrepresented minorities at her residency program.

In medical school, she conducted a needs assessment at Sheltering Arms of Dunbar Elementary School in Atlanta, GA, and implemented an intervention involving parenting classes for younger parents and created a recipe fair that focused on cooking on a budget. In residency, through her continuity clinic, she served the patients of the disadvantaged communities in Washington DC’s Wards 7 and 8. She created an intervention that focuses on lectures and cooking demonstrations for the parents of overweight and obese children. In conjunction with faculty at the University Of Maryland School Of Public Health, she worked to create opportunities for residents to rotate through their Health Advocates in-Reach and Research Program, bringing medicine to hair salons and barbershops in underserved communities. Dr. Magee received her medical degree from the Morehouse School of Medicine, Atlanta, GA in 2014.

Octavio N. Martinez, Jr., MD, MPH, MBA, FAPA  
Executive Director, Hogg Foundation for Mental Health; Associate Vice President, Division of Diversity and Community Engagement; Clinical Professor, School of Social Work, The University of Texas at Austin, Austin, TX

A native Texan and licensed psychiatrist, Dr. Martinez is the fifth executive director to lead the Hogg Foundation for Mental Health since its creation in 1940. The foundation’s grants and programs support mental health services, research, policy analysis, and public education projects in Texas. As chief executive officer, he oversees the vision, mission, goals, strategic planning, and day-to-day operations of the foundation. The Hogg Foundation is part of the Division of Diversity and Community Engagement at The University of Texas at Austin. Dr. Martinez holds an appointment of Associate Vice-President within the division; he is also a clinical professor with an appointment in the university’s School of Social Work; and holds an adjunct professor appointment at The University of Texas Health Science Center at San Antonio School of Medicine’s Department of Psychiatry. His academic interests include minority health, health disparities, and workforce issues.

In addition to his administrative and academic duties, he currently serves on the National Academies of Sciences, Engineering, and Medicine’s, Health and Medicine Division’s Standing Committee on Medical and Public Health Research during Large-Scale Emergency Events and on HMD’s Roundtable on the Promotion of
Health Equity and the Elimination of Health Disparities. He has formerly served on the IOM’s Committee on the Governance and Financing of Graduate Medical Education (2014) and on the Committee on the Mental Health Workforce for Geriatric Populations (2012). From 2002 to 2006, he served as a Special Emphasis Panel Member for the National Institutes of Health, National Center on Minority Health and Health Disparities. Dr. Martinez also serves on the National Advisory Committee on Rural Health and Human Services to the Secretary of Health. He is a member of the board of directors for Trust for America’s Health, a member and former chair of the board of the National Hispanic Council on Aging, a member of the editorial board for the Home Health Care Services Quarterly Journal, and a member of the University of Texas — University Charter School Advisory Board. Dr. Martinez is a Fellow of the American Psychiatric Association, a member of The American College of Psychiatrists, a member of The College of Behavioral Health Leadership, the National Hispanic Medical Association, the American Public Health Association, and the Texas Society for Psychiatric Physicians.

Maria Portela Martinez, MD, MPH
Branch Chief of Medical Training and Geriatrics, Division of Medicine and Dentistry, Bureaus of Health Workforce, Health Resources and Services Administration (HRSA), Rockville, MD

Maria Portela Martinez, MD, MPH, is the chief of the Medical Training and Geriatrics Branch at the Bureau of Health Workforce at the Health Resources Services Administration. She also currently sees patients at Unity Health Care, a Federally Qualified Health Center in Washington, DC. In 2014, Dr. Portela Martinez completed the Commonwealth Fund Mongan Fellowship in Minority Health Policy at Harvard focused on vulnerable populations. Previously, she completed training in family medicine at Duke Medical Center in Durham, North Carolina. In 2010, she shared in the development of an assessment on the health and education sectors for President Obama’s taskforce on Puerto Rico’s economic development. Dr. Portela Martinez is passionate about increasing access and quality of health care services to vulnerable populations.

Nicole Mazwi, MD
Instructor in Physical Medicine and Rehabilitation, Harvard Medical School; Co-Director, Traumatic Brain Injury Fellowship Program, Spaulding Rehabilitation Hospital, Boston, MA

Nicole L. Mazwi, MD received her medical degree from the Mayo Clinic in Rochester, Minnesota. She completed her internship at the Johns Hopkins Hospital/Sinai Hospital of Baltimore Internal Medicine Residency program and her Physical Medicine and Rehabilitation residency at the Spaulding Rehabilitation Hospital (SRH)/Harvard Medical School program where she was Chief Resident. Dr. Mazwi completed a fellowship in Neurologic Rehabilitation at SRH and Massachusetts General Hospital (MGH) and joined the staff at both hospitals in 2012. Dr. Mazwi is the first-ever dedicated consult physiatrist in the MGH Neurologic Intensive Care Unit. Since 2014 she has served as Co-Director of the Harvard Medical School Brain Injury Medicine Fellowship
Morgan Medlock, MD, MDiv
Commonwealth Fund Mongan Fellow,
Harvard Medical School, Boston, MA

Dr. Medlock most recently completed her residency in adult psychiatry at Massachusetts General Hospital (MGH)/McLean Hospital, in Boston, MA. As the inaugural director of the Spirituality and Mental Health consultation service at McLean Hospital, she developed a model for spiritual assessment and integration into mental health treatment. She was also a co-founder and chair of the MGH/McLean Resident Advocacy Committee (RAC), the residency’s first trainee-led advocacy group. In this role, Dr. Medlock was instrumental in developing mission and vision statements, a strategic plan, an online presence, and a path for partnership with the hospital and community leaders to engage at-risk individuals in preventative health practices and education. Her goal is to contribute to policymaking that increases wellness for the most vulnerable individuals, to introduce treatment and community re-entry programs that affect the decriminalization of individuals with substance use disorders, and to work in collaboration with faith leaders and churches on developing centers for healing mind, body, and spirit, especially in inner-city communities. Dr. Medlock received her medical degree from Mayo Medical School, Mayo Clinic, Rochester, MN, in 2013 and her Master of Divinity degree from Andrews University, Berrien Springs, MI in 2011.

Oreofe Odejide, MD
Faculty Fellow, Harvard Medical School Office for Diversity Inclusion and Community Partnership; Instructor, Harvard Medical School; Department of Medicine, Dana-Farber Cancer Institute, Boston, MA

Oreofe Odejide, MD, MPH is an Instructor in Medicine at Harvard Medical School, and a Hematologic Oncologist at the Dana-Farber Cancer Institute. Dr. Odejide graduated with distinction from Howard University College of Medicine, Washington, D.C. She completed her residency in internal medicine at the Brigham and Women’s Hospital, Boston, followed by a fellowship in hematology and oncology at the Dana-Farber/Partners CancerCare Program. She also obtained a Master of Public Health from the Harvard School of Public Health with a concentration in Clinical Effectiveness. Dr. Odejide’s research efforts are focused on understanding and improving quality of care for patients with hematologic cancers throughout the disease continuum – from diagnosis to the end-of-life (EOL) phase. She was the recipient of an American Society of Clinical Oncology Young Investigator Award, with which she conducted a qualitative study of hematologic oncologists to characterize perceptions and decision-making processes regarding EOL care. With funding from the Lymphoma Research Foundation, she then developed and conducted a large national survey of hematologic oncologists to identify barriers to quality EOL care, as well as potential interventions for
improvement. The Diversity Inclusion and Community Partnership Faculty Fellowship Award will give Dr. Odejide the opportunity to expand her research to develop and test interventions to improve quality of EOL care for patients with hematologic cancers.

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, Boston, MA

Dr. Joan Y. Reede is the Dean for Diversity and Community Partnership and Professor of Medicine at Harvard Medical School (HMS). Dr. Reede also holds appointments as Professor in the Department of Social and Behavioral Sciences at the Harvard T. H. Chan School of Public Health, and is an Assistant in Health Policy at Massachusetts General Hospital. Dr. Reede 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, women, LGBT, and faculty with disabilities at Harvard Medical School (HMS). This charge includes oversight of all diversity activities at HMS as they relate to faculty, trainees, students, and staff. Dr. Reede also serves as the director of the Minority Faculty Development Program, and faculty director of Community Outreach Programs at Harvard Medical School, Program Director of the Faculty Diversity Program of the Harvard Catalyst/The Harvard Clinical and Translational Science Center, and Director of the HMS Center of Excellence in Minority Health and Health Disparities. Dr. Reede has created and developed more than 20 programs at HMS that aim to address pipeline and leadership issues for minorities and others who are interested in careers in medicine, academic and scientific research, and the healthcare professions.

Dr. Reede has served on a number of boards and committees including the Secretary’s Advisory Committee to the Director of the National Institutes of Health; the Sullivan Commission on Diversity in the Healthcare Workforce; the National Children’s Study Advisory Committee of the Eunice Kennedy Shriver National Institute of Child Health and Human Development, and the Advisory Committee to the Deputy Director for Intramural Research of the National Institutes of Health. Some of her current affiliations include the Steering Committee and Task Force for the Annual Biomedical Research Conference for Minority Students (ABRCMS); co-chair of the Bias Review Committee of the Advisory Committee to the NIH Director’s Working Group on Diversity; the Association of American Medical Colleges Careers in Medicine Committee (AAMC); chair of the AAMC Group on Diversity and Inclusion (GDI), HMS representative to the GDI Diversity Strategic Planning Working Group; the CTSA Women in CTR Interest Group of the NIH, and the American Hospital Association Equity of Care Committee. Dr. Reede also served on the editorial board of the American Journal of Public Health, and she was the guest editor for the 2012 special issue, “Diversity and Inclusion in Academic Medicine” of Academic Medicine for AAMC. Dr. Reede is a past chair of the National Academy of Medicine’s (formerly the Institute of Medicine) Interest Group (IG) 08 on Health of Populations/Health Disparities.

Dr. Reede is acknowledged as an authority in the area of workforce development and diversity. Her colleagues and mentees have recognized her with a number of awards that include the Herbert W. Nickens Award from AAMC and the Society of General Medicine in 2005; election to the Institute of Medicine of the National Academy of Science in 2009; the 2011 Diversity Award from the Association of University Professors; and in 2012 she was the recipient of an Elizabeth Hurlock Beckman Trust Award. In 2013 she received an Exemplar
STEM Award from the Urban Education Institute at North Carolina A & T University in Greensboro, North Carolina, and in 2015, she was the Distinguished Woman Scientist and Scholar ADVANCE Lecturer at the University of Maryland School of Public Health. Recently, Dr. Reede was recognized by her medical school classmates as a recipient of The Mount Sinai Alumni Association and Icahn School of Medicine 2015 Jacobi Medallion for extraordinary leaders in health care, and with the Anne B. Young Diversity Scholar Award from the Massachusetts General Neurology Diversity Committee.

Pamela Riley, MD, MPH  
Vice President for Delivery System Reform  
The Commonwealth Fund, New York, NY

Pamela Riley, MD, MPH, is vice president for Delivery System Reform at The Commonwealth Fund. Her area of focus is on transforming health care delivery systems for vulnerable populations, including low-income groups, racial and ethnic minorities, and uninsured populations. Dr. Riley was previously program officer at the New York State Health Foundation, where she focused on developing and managing grantmaking programs in the areas of integrating mental health and substance use services, addressing the needs of returning veterans and their families, and diabetes prevention and management. Earlier in her career, Dr. Riley served as clinical instructor in the Division of General Pediatrics at the Stanford University School of Medicine. In this capacity, she was a general pediatrician and associate medical director for Pediatrics at the Ravenswood Family Health Center, a federally qualified health center in East Palo Alto, CA. Dr. Riley served as a Duke University Sanford School of Public Policy Global Health Policy Fellow at the World Health Organization in Geneva, Switzerland, and has served as a volunteer physician in Peru and Guatemala. Dr. Riley received an M.D. from the UCLA David Geffen School of Medicine in 2000, and completed her internship and residency in pediatrics at Harbor-UCLA Medical Center in Torrance, CA, in 2003. Dr. Riley received an M.P.H. from the Harvard School of Public Health as a Mongan Commonwealth Fund Fellow in Minority Health Policy in 2009.

Alexander Amon Rodgers, MD  
Commonwealth Fund Mongan Fellow  
Harvard Medical School, Boston, MA

Dr. Rodgers most recently completed his family medicine residency at Kaiser Permanente, Fontana Medical Center in Fontana, CA. His leadership roles have included: Clinical Strategic Goals (CSG) Residency Leader, Residency Diabetes Clinic Co-Founder, and Diversity and Inclusion Hospital Committee Member. He is the recipient of a Kaiser Global Health Stipend and has been a Health Policy Elective Fellow. Dr. Rodgers’ strong desire to help people live better, healthier lives, and to seek out those most underserved, led him to organize a trip to a village in the Philippines called Lingayen, a small community that had not received adequate health care for over seven years. This experience underscored for him how health policy and social determinants of health affect entire populations, and served to heighten his desire for justice in healthcare. In 2014, Dr. Rodgers received his medical degree from the David Geffen School of Medicine at UCLA, Los Angeles, CA.
Chloe S. Slocum, MD, MPH
Instructor in Physical Medicine and Rehabilitation, Harvard Medical School, Spaulding Rehabilitation Hospital, Boston, MA

Dr. Chloe Slocum currently serves at the Associate Director of Quality for Spaulding Rehabilitation Network and the Director of Health Policy for the Harvard Medical School Department of Physical Medicine and Rehabilitation in Boston, Massachusetts. She is an Instructor in Physical Medicine and Rehabilitation and specializes clinically in spinal cord injury medicine and neurorehabilitation. Dr. Slocum completed her undergraduate training in public health studies at Johns Hopkins University in 2007 and graduated from Columbia University's College of Physicians & Surgeons in 2011. She completed her residency training in physical medicine and rehabilitation at Spaulding Rehabilitation Hospital and the Harvard Medical School Department of Physical Medicine and Rehabilitation in 2015, where she also served as Chief Resident. Dr. Slocum then pursued clinical fellowship training in spinal cord injury medicine with VA Boston Healthcare System and earned her MPH in Health Policy from the Harvard T.H. Chan School of Public Health in 2017 as a Commonwealth Fund Mongan Fellow in Minority Health Policy. Dr. Slocum's interests include health promotion for people living with disability, the intersection of disability and other social determinants of health, and health equity across the post-acute care continuum. She is a member of numerous national health policy advisory committees and has served as a clinical consultant for national payment policy initiatives.

Rachel Tanenhaus, MPH
ADA Coordinator / Executive Director
Cambridge Commission for Persons with Disabilities (CCPD), Cambridge, MA

Rachel Tanenhaus, MPH spent nearly twelve years as a Program Coordinator in the Health and Disability Program at the Massachusetts Department of Public Health, helping to ensure that people of all abilities and across the lifespan have access to health care. She has provided technical assistance on the Americans with Disabilities Act (ADA), accessible information technology and other access-related topics for eighteen years, and has been participating in disability awareness panels since she was ten years old. She has worked as an information specialist on the ADA technical assistance lines at the New England ADA Center and the US Department of Justice.

She holds degrees from the University of Massachusetts at Amherst and the Boston University School of Public Health, and has served on several municipal disability commissions and on the Alumni Council for the Guide Dog Foundation for the Blind. In her spare time she loves to read, write, travel, volunteer, spend way too much time on the Internet, and watch baseball.
Michelle Taylor, MD, DrPH  
Commonwealth Fund Mongan Fellow  
Harvard Medical School, Boston, MA

Dr. Taylor is a Major, Residency Trained Flight Surgeon in the Tennessee Air National Guard and an adjunct faculty at the University of Memphis, School of Public Health. From 2014-2016, Dr. Taylor, a pediatrician, was Associate Medical Director and Deputy Administrator for Maternal and Child Health at the Shelby County Health Department. In this role, she was responsible for the overall management of Maternal and Child Health Programs (MCH) and oversaw programs geared toward providing services to under-resourced families through home visitation, case management, and outreach education. Prior to that, she was an MCH/Emergency Preparedness Physician at the Shelby County Health Department. These leadership experiences have fueled her desire to make a real difference on behalf of vulnerable populations, with regard to chronic disease, shortened life expectancies, and concentrated poverty. Dr. Taylor received her medical degree from East Tennessee State University, James H. Quillen College of Medicine in 2002, and completed her pediatric residency at East Tennessee State University/Johnson City Medical Center and the University of Tennessee Health Science Center from 2002-2005. She received her doctorate in public health from Johns Hopkins University, Bloomberg School of Public Health in 2015.

Kerry Thompson  
Information and Program Coordinator, Disability Rights Fund and Disability Rights Advocacy Fund; Executive Director, Silent Rhythms, Boston, MA

Kerry Thompson works for the Disability Rights Fund, an international grantmaker that works to advance human rights through United Nations Conventions and the Sustainable Development Goals for people with disabilities in developing countries. She is the Executive Director of Silent Rhythms Dance, which has provided access to the arts and accessible dance instruction to more than 5,000 people with disabilities. She previously worked for Brigham and Women’s Hospital as a Research Specialist. She co-created Text4Deaf, a communication tool to bridge the communication gap between the Deaf and Hearing communities in healthcare. She currently serves on the Massachusetts Statewide Advisory Council, the Board of Directors for DEAF, Inc. and serves as the Chair for the Legislative Advocacy Committee. She is a Board Liaison for the DeafBlind Community Access Network Advisory Council. In 2014, she was awarded the German Marshall Fund’s Marshall Memorial Fellowship becoming the first woman with a disability to be awarded this prestigious fellowship. She was a 2015 -2016 White House Fellowship National Finalist. She is the co-author for Human Rights and Adolescence (2014. University of Pennsylvania Press) and has written several blogs including “Hurricanes in my Backyard” and “DeafBlindness: The Lefts Behinds in a Leave No One Behind Era.” She completed a Master’s degree in Human Development and Psychology from Harvard University with a focus on international law and human rights.
John Winske
Executive Director
Massachusetts Disability Policy Consortium, Boston, MA

John is the Executive Director of the Disability Policy Consortium (DPC), a cross-disability advocacy and research organization based in Boston, Massachusetts. He brings more than thirty years’ experience in building coalitions of people with a wide variety of disabilities to bring about policy change to empower his community. John is the former Executive Director of the Massachusetts Coalition of Citizens with Disabilities. He has more than twelve years’ experience in non-profit management and has served on the Board of Directors of more than a dozen non-profit organizations. As the CEO of non-profits he has built a reputation for developing and acquiring funding for innovative programs designed to empower people with disabilities. His projects have been funded by a variety of organizations and foundations including Patient Centered Outcome Research Institute, Center for Medicare and Medicaid Services, Blue Cross Blue Shield Foundation, Community Catalyst, National Easter Seals Society, Massachusetts Rehabilitation Commission, Department of Transportation, Administering Agency on Developmental Disabilities and the Boston Foundation.

Mr. Winske served as the Vice President of Human Resources and Development with the Boston Center for Independent Living. In addition to his work in the non-profit arena Mr. Winske has also started four businesses. His unique blend of non-profit and for profit experience has allowed him to cross pollinate best practices from both sectors. Mr. Winske has testified before Congress on the Americans with Disabilities Act (ADA) and Special Education. He has extensive experience in public speaking and conducting training sessions.
Presenter: Jonathan Abraham, MD, PhD, Harvard Medical School Office for Diversity Inclusion and Community Partnership Faculty Fellow

Project title: “Antibody Neutralization of Hemorrhagic Fever Viruses”

Background: The spillover of emerging viruses into human populations continuously threatens public health. Several groups of enveloped RNA viruses cause human hemorrhagic fevers with high case fatality rates and limited treatment options. They include filo-, flavi-, bunya-, rhabdo-, and arenaviruses. Junin (JUNV), Machupo (MACV), Chapare (CHPV), Sabia (SBAV), and Guanarito (GTOV) viruses are arenaviruses that cause rapidly fatal human diseases in the Western Hemisphere (‘New World’). All five bind to host cells using the iron-uptake protein transferrin receptor 1 (TfR1). Despite their dependence on the same cellular receptor for entry, the receptor binding site (RBS) in their surface glycoprotein (GP1) is highly divergent among the group (22-45% sequence identity), probably reflecting long-term co-adaptation of the viruses as they circulate in their respective rodent reservoirs. This poses a barrier to the development of broadly reactive monoclonal antibodies that could effectively treat infection by all of the viruses.

Objective: To use structures of viral GP1-antibody complexes to study the relationship between receptor-binding and antibody cross-neutralization of New World arenaviruses.

Methods: We used single B cell sorting and flow cytometry to identify monoclonal antibodies from the blood of a recipient of the JUNV vaccine, Candid #1. We used ELISAs and surface plasmon resonance to study antibody binding to GP1. We used a murine leukemia virus pseudotype assay to study antibody neutralization. We used X-ray crystallography to study the molecular details of antibody-glycoprotein interactions.

Results: We identified two monoclonal antibodies, CR1-07 and CR1-28, that bind to JUNV GP1 and neutralize JUNV pseudotypes. Both antibodies also cross-reacted with MACV GP with varying efficiency - CR1-28 weakly neutralized MACV, and CR1-07 potently neutralized MACV. We determined X-ray crystal structures of JUNV GP1 bound to the antigen-binding fragment (Fab) of CR1-28 and of MACV GP1 bound to the CR1-07 Fab.

Conclusion: The viral GP1 protein, despite its extensive sequence diversity, is therefore a target for cross-reactive antibodies with activity against divergent New World hemorrhagic fever arenaviruses of public health concern.

Mentor: Stephen C. Harrison, Giovanni Armenise-Harvard Professor of Basic Medical Sciences, Harvard Medical School and Boston Children's Hospital, and Investigator in the Howard Hughes Medical Institute.
Presenter: Natasha M. Archer, MD, MPH, Harvard Catalyst Program for Faculty Development and Diversity Inclusion Fellow

Project Title: “The Effect of Sickle Hemoglobin on Plasmodium Falciparum Growth”

Background: Compared to those without the sickle hemoglobin (HbS) mutation, individuals with sickle cell trait (AS) have a 20-90% reduction in Plasmodium falciparum (Pf) parasite densities. In addition, among children with severe malaria, the AS genotype is underrepresented. Despite the strong epidemiological evidence of selection for AS, however, the biological mechanism underlying protection against severe malaria is not completely understood.

Objective: We sought to determine if HbS polymerization at low oxygen (O₂) concentration plays a fundamental role in AS Pf malaria resistance.

Methods: In vitro, we carefully mapped parasite growth inhibition in normal (AA) and AS erythrocytes in relation to the dynamics of intracellular growth and O₂ concentration. We simulated parasite movement from an environment of high O₂ encountered in the peripheral circulation to that of low O₂ encountered during sequestration. To examine potential in vivo consequences of these observations, we developed a mathematical model of Pf parasite development within red blood cells (RBCs) in sequestered and non-sequestered environments, comparing parasite proliferation dynamics under impaired growth in hypoxic AS RBCs to reduced cytoadherence.

Results: We observed a direct correlation between O₂ concentration and parasite growth in AS RBCs and an overlap in the timing of cytoadherence and the period during which the parasite is most sensitive to low O₂. We demonstrated that HbS polymerization-induced impaired growth leads to greater reductions in parasite proliferation compared to reduced cytoadherence, and propose that HbS polymerization in various human tissues with low O₂ concentrations is a major mechanism of protection against severe malaria in individuals with AS.

Conclusion: Our studies highlight the importance of considering the physiological environment encountered by parasitized AS cells in understanding the role of AS in malaria protection. This may also be relevant to other RBC disorders, including other hemoglobinopathies and, importantly, sickle cell disease (SS).

Future Directions: Future work will include a rigorous and systematic investigation of the in vitro growth of Pf in SS cells.

Mentors: David G. Nathan, MD, President Emeritus, Dana-Farber Cancer Institute; Robert A. Stranahan Distinguished Professor of Pediatrics and Professor of Medicine, Harvard Medical School Manoj T. Duraisingh, John LaPorte Given Professor of Immunology and Infectious Diseases, Department of Immunology and Infectious Diseases, Harvard T.H. Chan School of Public Health
Presenter: Richelle C. Charles, MD, Harvard Medical School Office for Diversity Inclusion and Community Partnership Faculty Fellow

Project title: “Development of a Rapid Point-of-Care Diagnostic for Infectious Pathogens”

Background: Lack of accessible, rapid, and simple diagnostic assays for infectious diseases, such as typhoid fever, limit our ability to get accurate figures on disease burden, complicates the targeted administration of appropriate antimicrobials, and is a major obstacle to surveillance, control and prevention programs. Available commercial serologic assays for typhoid fever have limited sensitivity and specificity. Using high-throughput immuno-screening technologies, we previously identified several immuno-reactive Salmonella Typhi antigens that appear promising for possible inclusion in a new diagnostic assay: hemolysin E (HlyE); cytolethal distending toxin (CdtB), S. Typhi LPS, and S. Typhi membrane preparation (MP).

Objective: Identify a parsimonious serology signature to distinguish acute typhoid cases from controls.

Methods: We assessed plasma antibody responses (IgM, IgA, and IgG) to HlyE, CdtB, S. Typhi LPS, and S. Typhi MP via ELISA in patients with suspected enteric fever, controls with other febrile illnesses, and healthy controls in Dhaka, Bangladesh and performed Tubex, Typhidot, Widal and the Typhoid/Paratyphoid test (TPTest) on each patient. Using machine learning methods, we identified a parsimonious serology signature to distinguish acute typhoid cases from controls and then validated our findings in an independent test cohort from Nepal of culture-confirmed S. Typhi patients and controls with other bacteremic illnesses.

Results: We identified anti-MP IgG and IgA plasma responses to HlyE, LPS, and MP as important predictors of acute typhoid in the Bangladesh cohort. Using our Nepalese validation cohort, we demonstrated that the use of two antigens (HlyE and LPS) with one antibody isotype (IgA) could distinguish typhoid from other invasive bacterial infections (AUC 0.95; sensitivity 90%, specificity 92%). Use of a single antigen (HlyE) and isotype (IgA) had an AUC of 0.93.

Conclusion: Our results suggest that development of a diagnostic assay for acute typhoid fever focused on detecting IgA responses against HlyE, with or without LPS, is warranted.

Future work Creation of a lateral flow device that can be used in resource-limited setting and requires minimal expertise for sample processing and interpretation of results.

Mentor: Edward T. Ryan, MD, Professor of Medicine, Massachusetts General Hospital, Harvard Medical School
Presenter: Oreofe O. Odejide, MD, MPH, Harvard Medical School Office for Diversity Inclusion and Community Partnership Faculty Fellow

Project Title: “Understanding and Improving End-of-Life Discussions for Blood Cancers”

Background: Approximately 58,000 individuals in the United States die as a result of hematologic cancers each year. Existing data demonstrate that patients with hematologic cancers are more likely to receive intensive cancer-directed care near death and less likely to enroll in hospice compared to patients with solid tumors. While these outcomes raise concerns about quality of end-of-life (EOL) care for patients with hematologic cancers, little is known about upstream processes—such as EOL discussions—that may influence care. Indeed, timing and content of EOL discussions may partly explain the current state of EOL care for patients with hematologic cancers, and may represent a prime target for future interventions.

Objective: We aimed to rigorously characterize prevalence and outcomes of EOL discussions for a cohort of patients who died from a hematologic cancer in 2014 and received their care at a tertiary cancer center in Massachusetts.

Methods: Adult patients (18 years or older) who died from a hematologic cancer and received their oncologic care at a tertiary cancer center (≥ 2 clinic visits in last six months of life) were eligible. We excluded patients who died within 30 days of their blood cancer diagnosis and those with a concurrent solid malignancy. The primary outcome of interest was the presence of a documented EOL discussion. The secondary outcome was EOL care (intensity of cancer-directed care close to death and hospice enrollment). We determined the prevalence of documented EOL discussions as well as characteristics of such discussion (timing, content, and location). We characterized EOL outcomes. In univariable analysis, we then characterized the association of having EOL discussions with EOL outcomes.

Results: We identified 384 blood cancer decedents that met eligibility for our study. The majority were male (56.3%), white (89.8%), and married (64.8%). Of the total cohort, 235 (61.2%) had a documented EOL discussion. The median time between first documented discussion and death was 14 days. The majority of EOL discussions occurred in the inpatient setting (64.7%). Resuscitation preferences were the most common topic discussed (82.6%) and hospice preferences were included in only about 30.6% of all discussions. With respect to EOL care, 24.2% enrolled in hospice, 16.9% received chemotherapy within 14 days of death, 21.6% were admitted to the intensive care unit in the last 30 days of life, and 38.1% died in the hospital. The rates of hospice enrollment were significantly higher among those who had a documented EOL discussion compared to those who did not (30.2% vs. 14.8%, p =0.0006) but there was no association with intensity of cancer-directed care near death.

Conclusion: We found low prevalence of EOL discussions, with most occurring within 30 days of death and in the inpatient setting. Although discussions did not impact intensity of cancer-directed care at the EOL, they were associated with increased rates of hospice use. Late EOL discussions likely explain the lack of impact on the intensity of care at the EOL. Interventions to improve the timeliness of EOL discussions for patients with blood cancers are needed.

Mentor: Gregory A. Abel, MD, MPH, Associate Professor of Medicine, Dana-Farber Cancer Institute, Harvard Medical School
Presenter: Paula Magee, MD, Commonwealth Fund Mongan Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Community Referral Networks: How to Address Unmet Social Needs in the Health Care System”

Objectives: 1. To aid in the implementation of a social determinants of health screening tool and community-based referral system by offering expertise on the social determinants of health. 2. To create a comprehensive curriculum that equips Patient Resource Coordinators (PRCs) with the knowledge needed to serve as patient allies and community resource experts.

Background: In recent years, the lens on how to improve population health has shifted from solely focusing on coverage and delivery system reform to addressing health equity and unmet social needs. In 2016, MassHealth (Massachusetts Medicaid) announced the restructuring of its delivery system. Along with two other strategies, it would progress towards the utilization of Accountable Care Organizations (ACOs) and it would integrate community-based organizations and partners into the medical system, linking them to social needs.

Cambridge Health Alliance (CHA) is strengthening its commitment to addressing the social determinants of health (SDOH) by launching a SDOH screening tool and “Tip Sheets,” which provide regionally and linguistically specific information on high-level community resources. Tip Sheets will be given to MassHealth ACO patients who screen positively in specific areas, including housing insecurity, homelessness, food insecurity, public utility needs, and transportation needs.

In conjunction with the implementation of these Tip Sheets, Patient Resource Coordinators (PRCs) will connect patients to community organizations that provide SDOH specific services. Like providers, PRCs have received limited training in best practices for SDOH referrals. As a result, they have invested extensive time in researching community organizations and effective referral pathways. This still provides a paucity of content specific training on how to assess social needs, how to connect patients most efficiently with community organizations available to address unmet needs, and the disparities that exist within the social determinants of health.

The purpose of this project is to offer expertise regarding the implementation of a community-based social needs referral network, and to create a SDOH content-specific curriculum.

Methods: 1. Performed a literature review to identify iterations of community-based social needs referral networks within health care systems. 2. Engaged stakeholders (the PRCs and the Community Health Advisory Committee (CHAC)) to identify areas of focus for the Tip Sheets and the SDOH curriculum. 3. Performed a literature review and created a curriculum focused on the SDOH, steps for community engagement, the historical and root causes of disparities that exist within the SDOH, and the clinical and social impact of unmet social needs.

Results: The creation of a curriculum that identifies the root causes of disparities that exist within the SDOH, the clinical and social impact of unmet social needs, and the CHA-specific referral workflow process that includes speakers within CHA’s Community Health Improvement Department.

Future Directions: 1. Evaluating the efficacy of the curriculum by comparing PRC knowledge and referral patterns before and after curriculum implementation. 2. Creating a module for providers within CHA, focused on the social determinants of health.

Preceptors: Renée Cammarata Hamilton, MSW, MPA and Kathy Betts, MPH, Cambridge Health Alliance
Presenter: Morgan M. Medlock, MD, MDiv, Commonwealth Fund Mongan Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Incompetent to Stand Trial: Strategies for Jail Release and Community Re-Entry”

Objectives:
1. To become familiar with the policies and procedures of the Dallas County criminal justice system, especially in regard to its treatment of individuals who are incompetent to stand trial due to mental illness.
2. To engage in research that leads to a policy paper summarizing strategies for developing competency restoration programs that support individuals in their release from jail settings and re-entry into the community.

Background:
To be competent to stand trial, an individual must demonstrate ability to understand the charges faced and to assist properly in his or her defense. Each year, there are an estimated 60,000 competency evaluations in the US, with rates of incompetency falling in the range of 20-30% (12,000 cases annually). The most common reason for incompetence is the inability to rationally consult with an attorney, usually due to the presence of psychosis or intellectual disability.

Competency restoration is the court-supervised process of providing mental health treatment and/or legal education to individuals deemed incompetent to stand trial. The setting for this practicum is Dallas, TX, which ranks at the bottom among Texas cities in number of people detained following competency hearings. Several hundred people who are mentally incompetent to stand trial are being held in maximum security facilities, rather than engaged in jail- or community-based competency restoration programs. Change is on the horizon in Dallas and other Texas counties that are seeking to use newly available state funds to develop jail-based competency restoration (JBCR) programs. The goal of JBCR is to develop a system of early intervention that provides justice-involved individuals with treatment and education tools to assist with their jail release and community re-entry.

Methods:
The host organization for this practicum is Meadows Mental Health Policy Institute (MMHPI), a provider of high quality, nonpartisan and objective policy research and development to improve mental health services in Texas. In collaboration with the Adult Policy division of MMHPI, a policy paper was drafted that recommends core programmatic elements to county innovators in Texas who are developing JBCR programs with state funding.

Methods for developing a policy paper included 1) literature review on general approaches to JBCR, 2) identification and careful study of model JBCR programs in other states, along with their outcomes and financial data, 3) comparison of successful JBCR programs with Texas statutory requirements and national forensic guidelines, 4) discussion of existing JBCR models with Texas Forensic Council authorities and Dallas County Jail Health directors, and 5) drafting a position paper on recommended JBCR program design and content.

Results:
Policy paper, entitled “Issue Brief: Jail-Based Competency Restoration Programs” was authored and is currently under review by the MMHPI editorial team with plans for publication and dissemination among Texas lawmakers and behavioral health leaders.

Future Directions:
Future work involves applying policy recommendations on JBCR in Dallas County, where new programs that aid in the release and community re-entry of justice-involved individuals are being developed.

Preceptors:
John Petrila, JD, Vice President of Adult Policy, Meadows Mental Health Policy Institute for Texas
Presenter: Alexander Amon Rodgers, MD, Commonwealth Fund Mongan Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Place Matters: Mildred C. Hailey Health Action Plan”

Objectives: My practicum aimed to create a comprehensive health action plan for a large public housing complex for which Urban Edge will soon gain management and development rights. With plans for large renovations within the next 5 years, this action plan hopes to present 1) short-term, service-oriented interventions for the current residents 2) long term environmental design planning, 3) effective methods for resident trust building and engagement.

Background: Quality neighborhood resources and services are essential for the promotion of health and well being of its residents. Perceptions of neighborhood safety, housing quality, and access to sidewalks and recreation facilities all correlate to obesity rates and mental health disparities. Additionally, the assurance of certain neighborhood qualities, such as the safety, employment and education opportunities, affordable housing and health services, can greatly improve residents’ chronic disease rates, mental health, and overall life expectancy. To summarize in two words: place matters.

Methods: After a review of the basic public health data of the Roxbury and the surrounding neighborhoods, a qualitative and quantitative analysis of 192 interviews of Hailey complex residents was performed. A focused literature review was performed to identify key points of community engagement in the housing development process, as well as and potential solutions and interventions for the concerns of the complex residents. The summary of these findings and recommendations were collected in a report and delivered to Urban Edge for consideration with particular emphasis on the following: participatory development models, crime prevention through environmental design (CPTED), and trauma informed interventions.

Results: The Hailey complex, while technically in Jamaica Plain, has a demographic and socioeconomic composition more similar to Roxbury. Safety was overwhelmingly the top concern of residents interviewed. Asthma, diabetes and mental health were also primary concerns. Many residents reported few sources of hope in their community and were cautious of promises of a better one. Despite this, there was very high interest in involvement in the redevelopment process of the Hailey apartments.

Future Directions: Future work should address the effect of participatory development processes on participants’ mental health. Additionally, state and local government should consider reviewing the role citizen participation has in establishing accountability in public-private participations.

Preceptor: Sahar Lawrence, Urban Edge
Presenter: Michelle Taylor, MD, DrPH, Commonwealth Fund Mongan Fellow in Minority Health Policy, Harvard Medical School

Project Title: “Providence and United Medical Center Closures: An Examination of the Effect on Perinatal Health Access, Utilization, and Outcomes in the District of Columbia”

Objectives: 1. To determine the impact of the Providence and United Medical Center birthing facility closures on the five remaining District birthing facilities
2. To determine the impact of the closures on DC residents who once used these now closed facilities
3. To examine, qualitatively, the impact on the larger community

Background: In 2017, Washington, DC lost two birthing facilities within a 3-month period. In August of 2017, labor and delivery services at United Medical Center (UMC) were ended by the DC Department of Health due to quality concerns. Subsequently, Providence Hospital elected to close its birthing facility due to fiscal issues, in October of the same year. Prior to closing, both facilities had a history of serving underserved and disadvantaged communities, and the public outcry over losing these services has been swift, severe, and continues. The rising salience of maternal mortality in the media and in communities of color throughout the U.S. has found a nexus in the District because of these closures, even though DC has five remaining birthing facilities where women can seek labor and delivery services. Unfortunately, the one birthing facility east of the Anacostia river, UMC, that served Wards 7 and 8, two of the most impoverished of DC’s eight wards, has now lost the privilege of providing services, and many in the community are asking what future access and utilization will look like for families who are already at risk for poor maternal and birth outcomes.

The purpose of this project is to evaluate the impact of the UMC and Providence birthing facility closures on DC residents (particularly Medicaid beneficiaries), the remaining District birthing facilities, and the larger community.

Methods: Queried DC Birth and Death data for the years 2010 to 2017, to determine patterns of live births, prenatal care initiation, infant mortality, maternal mortality, and associated demographic factors before and after the two birthing facility closures in the District, and to analyze differences by birthing facility, maternal ward of residence, and DC Medicaid payer status (yes/no).

Results: • The problem started before the closures
  o UMC had fewer than one birth a day by the time it was closed for quality issues
  o Between 2010 and 2017, of women who resided in wards 7 and 8, the largest percentage delivered at Washington Hospital Center, followed by George Washington University Hospital
• Early prenatal care initiation (first trimester initiation) may be difficult for residents in Wards 7 and 8
  o Between 2010 and 2017, less than 50% of women residing in Wards 7 and 8 (47.31% and 46.03%, respectively), initiated prenatal care in the first trimester, compared to percentages ranging from 56.06% (Ward 5) to 81.71% (Ward 3) for Wards 1-6.

Future Directions: Policy recommendations include the development of a campaign to encourage early prenatal care, improved care coordination at federally qualified health centers, support for hospital messaging regarding service availability, and Medicaid transportation assistance tracking to evaluate unmet needs in prenatal care access and utilization.

Preceptors: LaQuandra Nesbitt, MD, MPH, Director, DC Department of Health
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Harvard Medical School
Office for Diversity Inclusion and Community Partnership
Minority Faculty Development Program

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 the Faculty Development and Diversity Task Force recommendations, particularly as they relate to mentoring, professional development and the design, creation and monitoring of workforce metrics. DICP also acts as a central resource for faculty development and diversity efforts of the Harvard Catalyst (HCat) through the HCat Program for Faculty Development and Diversity Inclusion (PFDD). 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
The Office for Diversity, Inclusion, and Career Advancement (ODICA), in close association with the Center for Education and the Chief Academic Officer, was founded in January of 2015 to further the mission of Beth Israel Deaconess Medical Center by developing, implementing, and evaluating programs for increasing the numbers and job satisfaction of faculty and trainees from underrepresented minorities in medicine (URMM). The ODI is the successor of the Office of Multicultural Affairs, which was created in 2008 to affirm and support the institution’s commitment to the underrepresented community of students, house staff, and faculty, which in turn reflects the Medical Center’s commitment to all of the people we serve.

Our society has come a long way since the days when the former Beth Israel Hospital was founded as a premier medical center where the Jewish community, and other groups not welcome at Boston’s renowned hospitals, could receive the same top quality health care. That core mission of openness and nondiscrimination has always guided our work, and has expression today in ODICA.

Our history inspires us to continue our efforts to redress inequalities in the health care system. ODICA will strive to increase the number of under-represented minority 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. ODICA also works to inform all in our community about the ongoing hidden bias 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:
Albert Galaburda, MD
Director, Office of Diversity and Inclusion
Beth Israel Deaconess Medical Center
Emily Fisher-Landau Professor of Neurology
Harvard Medical School
Phone: 617-667-9120
Fax: 617-667-9122

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; Program Coordinator Jill Dobriner, PhD; Chief Medical Education Officer and Director of the Department of Medical Education, Alan Leichtner, MD, MSHPEd; and Medical Director of the Office of Health Equity and Inclusion and Faculty Director of the Diversity and Cultural Competency Council Valerie L. Ward, MD, MPH. The OFD collaborates with career development offices at six other teaching hospitals (BWH, MGH, BIDMC, 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 Medical Education at Children’s to foster the continuous improvement of teaching and learning. In support of its mission to promote faculty diversity, 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 has taken an active role in developing Boston Children’s Office of Health Equity and Inclusion with expanded vision and faculty leadership.

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/research/ofd](http://www.childrenshospital.org/research/ofd)

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**Boston Children’s Hospital**  
**Office of Health Equity and Inclusion**

The mission of Boston Children’s Hospital’s Office of Health Equity and Inclusion, founded in 2017, is to provide guidance to achieve a culture that honors diversity, respect, inclusion and excellence. The OHEI works collaboratively with other BCH and HMS Offices, including the BCH Office of Faculty Development, the BCH Academy for Teaching and Educational Innovation and Scholarship, the BCH Office of Experience, and Human Resources, to advance culturally effective pediatric care; to reduce pediatric healthcare disparities; to establish a pediatric health equity education series/grand rounds; to recruit, develop and retain a diverse and inclusive workforce; and to support an environment of respect for different viewpoints. The OHEI, in conjunction with the BCH Diversity and Cultural Competency Council (DCCC) and a Senior Advisory Board, supports innovative programming focusing on health equity, diversity, and inclusion across the 4 BCH missions: clinical care, research, teaching, and community service. The work of this new Office is closely aligned with other ongoing work at BCH. Valerie L. Ward, MD, MPH is the Medical Director of the OHEI and Faculty Director of the DCCC.

**Valerie L. Ward, MD, MPH,** Medical Director  
**Rachelle Pierre,** Administrative Associate III  
**Office of Health Equity and Inclusion**  
**Boston Children’s Hospital**  
300 Longwood Avenue, Boston, MA 02115  
Office: 617-919-6511 | E-mail: [healthequity@childrens.harvard.edu](mailto:healthequity@childrens.harvard.edu)
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 and retention among all diverse faculty. CDI’s mission is to promote a vibrant, diverse and inclusive professional community where every person has the opportunity to thrive.

The Office for Multicultural Faculty Careers (OMC) provides hospital-wide leadership and support in the areas of recruitment, retention and advancement of faculty, fellows, residents, and trainees who are underrepresented in medicine (URIM). The Office provides professional development and mentoring to support the career satisfaction and engagement of the underrepresented minority (URM) community.

The CDI also includes the Office for Women’s Careers (OWC) which facilitates the professional development and advancement of women faculty at Brigham and Women’s Hospital. The OWC’s programs support, inform, and educate women faculty, provide individuals with career planning, encourages departments to develop mentoring programs, and facilitate academic promotions.

For more information on OMC, please visit: http://cfdd.brighamandwomens.org/our-offices/omc/

For more information on OWC, please visit: http://cfdd.brighamandwomens.org/our-offices/owc/

For more information on LGBTQ, please visit: https://www.brighamandwomens.org/about-bwh/human-resources/diversity-and-inclusion/brigham-health-lgbt-and-allies-employee-resource-group

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 Mongan Fellowship in Minority Health Policy

The Commonwealth Fund Mongan Fellowship in Minority Health Policy (formerly the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy) is designed to prepare physicians for leadership roles in transforming health care delivery and promoting health policies and practices to improve access to high quality care for vulnerable populations, including racial and ethnic minorities and economically disadvantaged groups. 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
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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, 132 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:

Joan Y. Reede, MD, MPH, MS, MBA
Program Director
The Commonwealth Fund Mongan Fellowship in Minority Health Policy
Harvard Medical School
164 Longwood Avenue, 2nd Floor
Boston, MA 02115
Phone: (617) 432-2922, Fax: (617) 432-3834, Email: mfdp_cfmf@hms.harvard.edu

Please visit our Website: https://mfdp.med.harvard.edu/cfmf/

Dana-Farber Cancer Institute
Office for Faculty Development

The Dana-Farber Cancer Institute’s Office for Faculty Development (OFD) 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 (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 OFD can offer
- Offering opportunities for faculty to build community, such as the Retreat for Women Faculty, Clinical Faculty Brunch, and faculty networking dinners

Fostering a supportive work environment is a core focus for the OFD; 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 offers Caregiver Travel Awards for junior faculty needing extra caregiving for dependents while travelling to career building conferences. The OFD hosts events that facilitate leadership growth and strengthen microclimate environments such as the President’s reception for junior faculty and Leadership Bootcamp.
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For more information contact: Christine Power, MS, Director at 617-582-8714 or 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, b) minority training, recruitment, and faculty development, c) increasing minority enrollment to cancer clinical trials, and d) enhancing cultural competency throughout DF/HCC institutions and its membership. 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

Program for Faculty Development and Diversity Inclusion (PFDDI)

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

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

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

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

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

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

- Improves the cultural competence of all Harvard faculty.

- The PFDDI 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.

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Joan Y. Reede, MD, MPH, MS, MBA
Dean for Diversity and Community Partnership
Director, Program for Faculty Development and Diversity Inclusion
Carol Martin, MPA
Program Manager, The Program for Faculty Development and Diversity Inclusion

Harvard Catalyst Program for Faculty Development and Diversity Inclusion (PFDDI)
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.
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, staff, and faculty at the Harvard School of Dental Medicine. The Office, led by Josephine Kim, Ph.D., LMHC, NCC, seeks to emulate the Harvard tradition of excellence in education, science, and public health by supporting a well-trained faculty, while producing oral health leaders who reflect the larger community that we serve.

Goals of the Office of Diversity and Inclusion are to:

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

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.

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

MISSION AND GOALS:
The Center for Diversity and Inclusion (CDI) helps advance and promote an inclusive and diverse community of physicians and scientists at Mass General Hospital.

The CDI provides numerous career-enhancing resources to students, trainees and faculty who are underrepresented in medicine to support their unique professional paths and expand their aspirations and goals. We also help educate our workforce on cross-cultural interactions with patients and colleagues, contributing to a more inclusive and welcoming hospital environment.

Working closely with all departments at Mass General, CDI focuses on three strategic areas:

- Professional leadership development and workforce recruitment at all stages of a URM physician’s and scientist’s career: student, trainee, and faculty
- Cross-cultural education of staff and physicians to enhance the quality of care of patients and employee engagement
- Advance the science of diversity and inclusion by measuring outcomes of our programs and interventions

For more information, please visit: http://www.massgeneral.org/cdi
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