Anti-Racism Commission (ARC)
University of Utah School of Medicine

Report and Recommendations
February 26, 2020
Background

Following nationwide protests on diversity, equity, and inclusion, the leadership of the University of Utah School of Medicine (UUSOM) received recommendations from the UUSOM Chapter of White Coats 4 Black Lives (WC4BL) on June 12, 2020. Dr. Good formed the Anti-Racism Commission (ARC) and met with students on June 24, 2020. The recommendations encompass four major domains: 1) Law enforcement; 2) Admissions; 3) Support for Black, Indigenous, and/or Persons of Color; and 4) Curriculum. The first ARC Steering Committee meeting was held on June 25, 2020 and created four subcommittees to address specific recommendations. The final recommendations by the ARC Steering Committee and Subcommittees were presented at the SOM Executive Committee meeting on December 9, 2020 and approved by the group.

Overarching Recommendation

"Publicly acknowledges that Racism is a Public Health Crisis."

- **Acceptance:** Yes. Dr. Good’s message to SOM faculty, staff, and on the webpage (Good Note). Recommendation completed on July 21, 2020

Recommendation 1: Law Enforcement

General Recommendation

"Policing is incompatible with education; police do not ensure safety and instead compromise the security of some of our most vulnerable community members. The University of Utah School of Medicine must take the following actions in order to ensure all individuals are safe on campus."

Recommendation 1.a.

"End relationship with local law enforcement, including the University of Utah Police Department. We demand that the University of Utah Department of Public Safety be a safe and accessible resource for all members of the University of Utah community."

- **Acceptance:** Working towards being able to operationalize this goal with the chief safety officer
- **Alternative:** The work group would like the institution to pilot a “behavioral response team” approach to campus safety, recognizing that campus safety issues require de-escalation, not an armed response.
- **Action Needed:**
  - Officer Lynch to meet with group in the next few weeks to share data and new initiatives that have been implemented by campus safety as an alternative to and separate from policing
  - Dr. Rodriguez reaching out to the “Immigration Officer” on Phyllis Vetter’s Department, but current policy has any immigration issue must be handled
by General Counsel and security officers refer even those with "warrants" to general counsel.

- **Timeline for Completion:**
  - Spring 2022

**Recommendation 1.b.**

"Publicly commit not to collaborate with ICE enforcement actions."

- **Acceptance:** Yes
- **Alternative:** n/a
- **Action Needed:**
  - Further communication with General Counsel's office immigration specialist
  - There is currently no cooperation with ICE, only with USCIS on visa issues.
  - Working with legal department to find a way balance transparency with safety.
  - From Counsel Vetter's email "The University of Utah is committed to our diverse global community and the extraordinary value that DACA, undocumented and international students, faculty and staff contribute to our mission. Routine immigration enforcement does not occur on campus because the U is designated as a sensitive location (which includes hospitals and health clinics, as well as colleges and universities). University police do not inquire about immigration status and the university protects the privacy of student records."

- **Timeline for Completion:**
  - 2021 - 2022

**Recommendation 1.c.**

"Publicly and in a timely fashion release data on the race of students, residents, faculty, staff, and community members involving in interactions with campus police officers, and develop a clear action plan to address racist inequities in campus police interactions."

- **Acceptance:** There is no existing infrastructure to acquire these data, but we are seeking a way to operationalize this recommendation to receive past and present data.
- **Alternative:** n/a
- **Action Needed:**
  - A hand-pull of data is not feasible at this time, despite repeated inquiries.
  - It is troubling that there hasn't previously been a way for the public or the department to evaluate their performance and trends based on these data.
  - Officer Lynch has informed us that this work is in progress, and these data will be available in real time on a public website some time in the future—potentially December 2021.

- **Timeline for Completion:**
  - 2022

**Recommendation 1.d.**
“Eliminate the budget for campus policing, and reallocate those funds to programs supporting BIPOC (Black, indigenous, and people of color) students, faculty, staff, and individuals in crisis.”

- **Acceptance:** Working towards being able to operationalize this goal with the chief safety officer. The pilot program is a first step in demonstrating effective ways to reallocate funds for alternative safety activities.
- **Alternative:** n/a
- **Action Needed:**
  - We expect that operationalization and acceptance of this recommendation will require continuous work.
  - Officer Lynch and his team have restructured certain aspects of community safety and reallocated funds accordingly.
  - We intend to review the results of the pilot study and take appropriate action informed by campus safety efforts done by Officer Lynch and team.
  - Officer Lynch would like to speak with the MD program students to discuss these recommendations and to share what has been done, what is planned, and what is needed to be in harmony with these recommendations.
  - Have at least one MD student on the public safety advisory committee.
- **Timeline for Completion:**
  - 2022

**Recommendation 2: Admissions**

**General Recommendation**

“Black people make up 13% of the U.S. population, but only 5% of physicians. To create a representative physician workforce, medical schools would need to admit classes made up only of Black, Latinx, and Native American students for the next 10 years. Medical schools must therefore commit to admitting incoming classes in 2021 with overrepresentation of Black, Latinx, and Native American students (at least 26% Black, 34% Latinx, and 2% Native American), as recommended by the national organization. We also demand Pacific Islanders and Native Hawaiians are actively recruited, admitted, and enrolled from our city, state, and beyond.”

**Recommendation 2.a.**

“Publicly release a detailed plan about how the institution will matriculate a first-year class in 2021 with overrepresentation of Black, Latinx, Native American and Pacific Islander/Native Hawaiian students.”

- **Acceptance:** It has been modified with student input and approval.
- **Alternative:** Provide a detailed plan about how the institution will matriculate a first-year class in 2021 and beyond built with an Anti-Racist framework that meets the needs of the changing Utah population. A plan that is fully in accordance with the University of Utah’s current diversity action plan.
- **Action Needed:**
- Share information on Black, Latinx, American Indian/Alaska Native, and Native Hawaiian/Other Pacific Islander representation on the admissions selection committee.
- Black, Latinx, American Indian/Alaska Native and Native Hawaiian/Other Pacific Islander applicant information should be shared at a granular level to increase underrepresented in medicine matriculants in our school.
- Compliance with HRSA grant for establishment of conditional admit program.
- Elimination of the shadowing requirement in the interest of equity.
- Continue transparency of requirements and filters used to screen applicants

**Timeline for Completion:**
- 2021

**Recommendation 2.b.**
 "This plan must include financial support, particularly for out-of-state students where cost is a prohibitive factor."

- **Acceptance:** Yes
- **Alternative:** n/a
- **Action Needed:**
  - Identify financial resources to sustainably fund these scholarships
  - Create scholarship for Black and other underrepresented in medicine students (Latinx, American Indian/Alaska Native and Native Hawaiian/Other Pacific Islanders)
  - Create independent scholarship administrative mechanisms, Advertisement, and Enrollment for these monies

**Timeline for Completion:**
- 2021

**Recommendation 3: Support for Black, Indigenous, and Persons of Color (BIPOC)**

**General Recommendation**
 "The UUSOM fully supports BIPOC students, faculty, and staff."

**Recommendation 3.a.**
 "Issue a clear and updated policy in which students and residents subjected to racism, harassment, or other forms of mistreatment have a direct and immediate avenue to anonymously (if desired) report the incident(s); we expect there will be no racism tolerated at the UUSOM."

- **Acceptance:** Yes
- **Alternative:** n/a
- **Actions Needed:**
  - Inform faculty regarding their mandatory reporting duties when witnessing acts of discrimination and ensure training is available for them for this purpose.
- Increase personnel by proportion of FTE for OEO collaboration with OHEDI to develop and deliver longitudinal trainings for cultural change regarding discrimination (e.g., the establishment of professionalism administrators with OHEDI oversight for each department.)
- Update online reporting modalities with information on how to report what happens after submitting a concern and the protections in place for those who report on incidents of discrimination. Publicize this effort to the student body via SBO emails, inclusion in Transitions to Medical School/Clerkship coursework, verbiage in other syllabi, and on school/Canvas webpages. Create, distribute and manage anonymous drop boxes in well-trafficked locations for physical reporting.

- **Timeline for Completion:**
  - Spring 2022

**Recommendation 3.b.**
"Publicly release data on the preclinical/clinical grades and rates of AOA election for students of different races and develop a plan to address immediately any inequities. This plan would likely include the abolition of AOA."

- **Acceptance:** No
- **Alternative:** Analyze preclinical/clinical grades of the UUSOM student body stratified by race and gender and develop a plan to address immediately inequities. Additionally, modify selection criteria and process of the local chapter of AOA honor society to promote inclusion of honorees who are members of (and show a dedication to the advancement of) BIPOC populations. If changes are insufficient, we demand dissolution of AOA.

- **Actions Needed:**
  - Follow up on grade analysis and develop specific recommendations to improve access to resources for struggling student populations and/or professionalism and bias recognition training for graders as appropriate.
  - Amend AOA constitution to emphasize values of social justice and anti-racism in all communities, especially in intersecting areas of race, gender, sexual orientation and economic status.
  - Increase BIPOC, with emphasis on URM, representation on student, resident and faculty AOA election committee and require demonstration of anti-racism as prerequisite for induction into UUSOM AOA chapter.

- **Timeline for Completion:**
  - Interim progress report in Spring 2021 with final report of completion in Spring of 2022
  - Note: If progress is insufficient in 2021 or the demands are not completely met by 2022, we recommend the immediate dissolution of the Utah AOA Honor Medical Society chapter.

**Recommendation 3.c.**
"Increase the funding dedicated specifically to supporting BIPOC students by at least 50 percent, including mentorship, scholarship, and dedicated support staff."

- **Acceptance:** No
- **Alternative:** None. We have been unable to evaluate this demand appropriately as we do not have the required data to make an informed recommendation. We would recommend further research of current UUSOM funds that go towards BIPOC to discover a baseline before advising a specific percentage increase in spending or where that money would go (i.e. scholarships dedicated towards BIPOC).

**Recommendation 3.c.i.**

"A commitment must be made in this plan to hire support staff, administrators, and faculty who are BIPOC. Addendum: Commit to hiring 50% more BIPOC support staff, administration, and faculty by the academic year 2021-2022."

- **Acceptance:** No
- **Alternative:** Hire support staff, administrators and faculty who are BIPOC. By 2025, the proportion of BIPOC staff of University of Utah Health will reflect the proportion of BIPOC in Salt Lake County and the proportion of BIPOC faculty will reflect national race/ethnicity data.
- **Actions Needed**
  - Hire a permanent BIPOC wellness staff-member (1.0 FTE) by spring 2021 to lead support for BIPOC and other intersectional support groups, where representation is of utmost importance for BIPOC students who need mental health/emotional help.
  - As the number of BIPOC students, faculty and staff increase, so should the number of BIPOC wellness and OHEDI staff.
  - Commit to equitable hiring framework, including but not limited to: search committees that include BIPOC staff, trainees, faculty as appropriate, hiring paperwork with a statement of commitment to antiracism, and faculty searches that require applicants to submit comments regarding diversity and inclusion.
  - Compile and publish annual reports of hiring trends to be released to and reviewed by student, faculty and staff communities at large.
  - Create and publicize social media policy that prohibits racist, misogynist, homophobic, and/or transphobic language for UUSOM employees and students.
- **Timeline for Completion**
  - As detailed above

**Recommendation 3.c.ii.**

"A safe and autonomous environment should be created for BIPOC educators."

- **Acceptance:** Yes
- **Alternative:** n/a
- **Actions Needed:**
  - Development of UCard accessible space that is warm and welcoming with greenery, ambient noise, and water architecture in the new MEDX building to allow for professional mentorship and informal networking.
  - BIPOC staff, faculty and students should be encouraged to use this space during and outside of business hours, which will feature free printing.
academic and nutritional supplies for students and student groups throughout the year.

- Student and professional organizations dedicated to advancement of BIPOC should be consulted periodically throughout construction of MEDX to ensure this space reflects their needs.

- **Timeline for Completion**
  - Pending completion of MEDX
  - If an alternative location becomes available before the completion of MEDX, priority for allocation should be for BIPOC as detailed above.

**Recommendation 3.d.**

"As part of a broader project of reckoning with medicine's troubling history of racism, the UUSOM must undertake research into the ideologies and activities of individuals featured on campus, and remove names and images of those found to have supported eugenics or other white supremacist causes. This research must extend not only to historical figures, but also to contemporary donors who have engaged in practices such as weapons manufacturing, exploitation of low-wage workers, funding of racist political causes, and employment discrimination."

- **Acceptance:** Yes
- **Alternative:** n/a
- **Actions Needed**
  - Create an independent committee to research significant benefactors who supported causes as named and detailed above.
  - Benefactors identified who supported these causes should either have their names removed or other documentation that exposes the benefactor's racist history in addition to a statement that the UUSOM condemns the participation in these racist causes should be publicized.
  - This committee should also recognize and publicize prior donors who showed a commitment to antiracism and the UUSOM will actively solicit new donors who demonstrate commitment to antiracism.

- **Timeline for Completion**
  - July 2022

**Recommendation 3.e.**

"In order to ensure an enduring commitment to antiracism, the UUSOM must continue to hold the Antiracism Commission on a periodic basis with appropriate subcommittees and a steering committee made up of dedicated students, staff and faculty."

- **Acceptance:** This is a new recommendation developed by this subcommittee.
- **Alternative:** n/a
- **Actions Needed**
  - Create a framework in which this committee can be reestablished and maintained on an annual or biannual basis with nominations of students and faculty members who demonstrate dedication to antiracism.
  - Establish a representative in UUSOM and main campus student government who demonstrates commitment to antiracism and is a member of BIPOC.
- **Timeline for Completion**
• ARC Subcommittee members will be invited to the HS ARC in spring 2021
• ARC Steering Committee will transition to ARC Advisory Committee in 2021
• ARC Advisory Committee will schedule ARC Student Town Hall Meeting with Drs. Good and Samuelson quarterly throughout the year.

Recommendation 4: Curriculum

General Recommendation
“The medical education system as we know it teaches and propagates racist ideas that translate to harm of BIPOC patients and providers. The curriculum at UUSOM must equip graduates with the skills necessary to identify and address institutional racism as healthcare providers, community leaders, and advocates. Moreover, all graduates from UUSOM must have the skills to provide patient-centered care to BIPOC through a lens of cultural humility.”

Recommendation 4.a.
“Provide mandatory implicit bias training for all students, residents, faculty, and staff”

• Acceptance: Yes
• Alternative: n/a
• Actions Needed
  o Within one year, require a centralized implicit bias training for all University of Utah School of Medicine students, residents, faculty, and staff. This training must include opportunities for small group discussion and simulation scenarios to practice bias interventions. This training will be required a minimum of once per academic year.
  o Appoint a central arbiter to have the final say on training logistics and potentially partnering with the Office for Inclusive Excellence.
  o Implement a mandatory feedback survey for participants to evaluate the implicit bias training. The aim of the survey is to measure students’ knowledge of their racial biases and longitudinal growth in awareness of racial disparities, especially in medicine. An example question could be “do you agree that race plays a factor in the quality of healthcare patients receive?” This survey could first be administered to medical students during the Transitions to Medical School week. This survey will be administered on a serial basis, such as every six months.

• Timeline for Completion
  o As described above

Recommendation 4.b.
“Provide mandatory education in the foundational aspects of health equity and justice: including, but not limited to, the history of racism specifically as it pertains to medicine, the framework of intersectionality, the ideologies behind the creation and continuation of oppression as evidenced by the disparities in health outcomes of BIPOC, and theories of resistance and liberation to eliminate racism and other forms of oppression. This must be incorporated in all phases of medical education curriculum (Layers of
Acceptance: Yes
Alternative: n/a
Actions Needed
- Within one year, increase the number and frequency of lectures and discussions on anti-racism in medicine. Particularly, medical students should understand the history of racism in medicine, and should provide evidence of racially tied health outcomes in medicine today.
- Within one year, include specific objectives in pre-clinical and clinical curriculum that align with Community Engaged Learning and Health Equity, and inclusion domain expert instruction. Develop testable objectives aligned to lectures that address anti-racism content. This content should be assessed in quizzes, tests, OSCEs, and other assessments written in-house.
- Within two years, develop a longitudinal arc of development for continued anti-racism reflection and action that includes the clerkship years and purposefully capitalizes on foundational concepts presented by domain experts in pre-clinical training. (Need to address for those in later classes as well)
- Within one year, strengthen the program objectives UPC7, UPC8, and/or UIC1 to include knowledge of social determinants of health such as race and socioeconomic status. (Objectives listed in appendix below)
- Within one year, develop discrete lectures paired with evidence-based literature and personal vignettes that solely focus on disparities and racism in healthcare. Provide supplementary evidence-based material to sessions that tangentially address racism in medicine.
- Within one year, hold patient perspective sessions about race and racism in medicine, similar to the patient presentations of diabetes and pseudoachondroplasia in Foundations of Medicine.
- Within one year, curriculum committees should explicitly encourage interested BIPOC faculty to participate in curricular development for 2-3-year terms. Similarly, curriculum committees should explicitly recruit interested BIPOC students to serve for one-year terms to provide a lens for anti-racism curriculum delivery. This should be in addition to the representatives that are elected from each class, not in lieu of those representatives.

Timeline for Completion
- As described above

Recommendation 4.c.
"Provide transparency in curriculum decisions and actively recruit and hire BIPOC educators who are experienced in meeting the demands of point 4b: the UUSOM must demonstrate intentional placement of educators in learning spaces."

Acceptance: Yes
Alternative: n/a
Actions Needed
Within 3 months, all departments should share their current practices and data in recruitment of BIPOC trainees and faculty. This could include current racial distribution of faculty and staff per department, diversity plans, measurable goals in terms of recruitment, etc. These data can be collated as recommended best practices for the School of Medicine.

Within 3 months, create a centralized, interdepartmental group to oversee implementation of recommendations listed under 4c and ensure accountability.

On a variable timeline (3 months to 3 years), provide sponsored opportunities for BIPOC educators, students, and clinicians to visit and work at the University of Utah via grand rounds presentations, seminars, away rotations, research opportunities, sabbaticals, etc. Provide funding for which BIPOC faculty can apply.

Timeline for Completion
- As described above

Recommendation 4.d.
"Reinforce and evaluate specific skills that will prepare medical students to take action against systemic racism and oppression."

- Acceptance: Yes
- Alternative: n/a
- Actions Needed
  - As soon as possible update course evaluations to allow students to give course directors and presenters feedback regarding their cultural humility. These updates should be in place for spring 2021 course evaluations.
  - A domain expert develops objectives about how students can take action against systemic racism, as well as how students can reflect and iterate on their actions.
  - Within a year, improve the representation of BIPOC in Clinical Skills and Decision-Making standardized patients and CBL cases, and representation of clinically relevant knowledge in pre-clinical courses like Foundations of Medicine and Host and Defense.
  - In line with the above recommendation, there is an accepted curriculum committee proposal on diversity of skin in image-teaching that we specifically recommend supporting. It can serve as a model for similar initiatives. This proposal, authored by Dr. Sarah Cipriano and MS2 Ha Le, is linked: [https://uofu.app.box.com/file/760730474129](https://uofu.app.box.com/file/760730474129)

Timeline for Completion
- As described above
Anti-racism Commission (ARC)

Steering Committee
- Satoshi Minoshima (chair)
- Kola Okuyemi
- Paloma Cariello
- José Rodríguez

Liaison, Collaborators, Advisor
- Cynthia Best (administrative liaison)
- Juliana Simonetti, Michelle Vo, Maia Hightower (collaborators)
- Mary Ann Villarreal (executive advisor)

Task Group: Law Enforcement
- Madison Kieffer (WC4BL, MS2)
- Laurel Hiatt (WC4BL, MS2)
- Michael Kennedy-Yoon (SG, MS3)
- Angelo Giardino (SOMEc/Dept Chair)
- Kamisha Johnson-Davis (CC)
- José Rodríguez (EDI)

Task Group: Admissions
- Siale Tegaup (WC4BL, MS2)
- Olaoluwa Omotowa (WC4BL, MS1)
- Marisol Monzón (SG, MS3)
- Chris Hill (SOMEc/Asst Dean)
- Sarah Cipriano (CC)
- José Rodríguez (EDI)

Task Group: Support for BIPOC
- Megan Asadian (WC4BL, MS1)
- Lilly Kanishka (WC4BL, MS1)
- Ajay Giri (SG, MS4)
- Angie Fagerlin (SOMEc/Dept Chair)
- Jacob Kean (CC)
- Paloma Cariello (EDI)

Task Group: Curriculum
- Sridharan Radhakrishnan (WC4BL, MS1)
- Amy Loret (WC4BL, MS1)
- Alex Jacobs (SG, MS4)
- Bob Silver (SOMEc/Dept Chair)
- Jan Christian (CC)
- Paloma Cariello (EDI)
Respectfully submitted by the ARC Steering Committee:

Date   February 26, 2021

Satoshi Minoshima, MD, PHD

Paloma Cariello, MD, MPH

Kola Okuyemi, MD, MPH

José Rodriguez, MD, FAAFP

Received and acknowledged
by: Date

Michael Good, MD

Wayne Samuelson, MD