Center for Diversity and Inclusion

annual report

2020-2021

Advancing Physicians, Scientists and Nursing & Patient Care Services Staff
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Notice regarding COVID-19: Massachusetts General Hospital follows all relevant local, state, and national guidelines to halt the spread of COVID-19. Images included in this document where subjects are unmasked or not maintaining appropriate social distance were taken prior to March 2020.
welcome
During such an unprecedented year, longstanding, deeply entrenched health inequities were further exacerbated in communities of color in cities like Boston and around the country. Along with the racial reckoning during the summer of 2020, our hospital and our system resolved to take more urgent action and strengthen our commitment to tackling racism and inequities.

We immediately got to work to bring rapid relief to our hardest hit communities. The COVID-19 pandemic, while catastrophic, brought an unprecedented opportunity for hospital and community collaboration. Under the leadership of the Center for Diversity and Inclusion (CDI), we saw the collective impact of a diverse workforce of bilingual physicians coming together to support patients on our COVID floors whose first language was not English. We experienced the delivery of compassionate care that brought relief to many families who could not be with their loved ones.

As MGH’s first Senior Vice President of Equity and Community Health, I have the privilege of overseeing CDI and the groundbreaking work of our hospital to address structural racism and eliminate health disparities. Critical to that work is diversifying our next generation of physicians, scientists, and nursing and patient care services professionals.

In 2021, CDI expanded its scope and developed new areas of focus. CDI now serves Nursing & Patient Care Services staff, as well as the entire research workforce, and is driving several critical initiatives aligned with Mass General Brigham’s United Against Racism (UAR)—a system-wide campaign to create and advocate for anti-racist internal and external policies, workforce diversity, equity and inclusion education and discriminatory reporting mechanisms.

There are still significant challenges ahead, but I am optimistic about the future. MGH is the only hospital in the country that has won both major awards from the American Hospital Association and the Association of American Medical Colleges for equity and community health. With CDI driving several initiatives under UAR and our hospital’s structural equity plan, our impact can help mold the future of care delivery in our hospital and beyond.

Special thanks to the CDI team for redoubling its efforts during the pandemic. We are committed to supporting patients and those underrepresented in medicine, and together, we will get through this.

Joseph Betancourt, MD
Senior Vice President of Equity and Community Health
Massachusetts General Hospital
As I reflect on 2020 and 2021, like many of you, I am conflicted. While I am devastated by the murders of George Floyd and so many other Black men and women, I am awestruck by the enormous groundswell of people across the country rising up and demanding social justice. While I am saddened by the devastation brought on by COVID-19, especially in our most vulnerable communities, I am amazed by their resilience and ingenuity. And, while I am overwhelmed by the challenges we face, I am inspired by what everyone here at the Center for Diversity and Inclusion and Mass General Hospital has accomplished. And I am energized for what lies ahead.

Historically, CDI provides underrepresented in medicine (UiM) young scholars the opportunity to spend their summer with leading national researchers, receiving mentorship from established physicians and scientists. We offer trainees opportunities to network, develop their careers and connect with the diverse communities Mass General serves. And we provide faculty with funding and mentorship to grow their careers and become leaders. But this past year, there was more.

COVID-19 exposed to Mass General and those beyond our walls something we had long known—at the core of our excellence is the diverse workforce that makes it possible.

As evidenced by the development of a multilingual registry and the rapid deployment of an innovative Spanish Language Care Group, it is clear that our trainees, clinicians, researchers and administrators rise to the occasion and pivot when called upon. And they do so with intention, care and passion.

The heightened focus on racial justice locally and across our country galvanized CDI to redouble its efforts to address the root causes of inequities, racism and bias at Mass General. We did this through numerous initiatives, now integrated and immortalized in United Against Racism—Mass General Brigham's system-wide approach to combatting and dismantling racism. Just one example is CDI’s leadership in developing a new patient code of conduct policy that will shape the way patients, family members, and hospital staff interact with each other in an all-encompassing and respectful manner.

Thank you to everyone involved in our journey—past, present and future. We look forward to the upcoming year as we expand our scope to include the nursing and patient care services and research workforce.

I invite you to review this annual report featuring exciting highlights of what CDI has accomplished along with our partners over this unprecedented 2020–2021 academic year. Please join us as we continue to build and grow a diverse and inclusive community at Mass General.

Elena Olson, JD
Director, Center for Diversity and Inclusion
Massachusetts General Hospital
The Challenge

Despite decades of numerous interventions at the national level, the number of physicians and scientists underrepresented in medicine across the country still fail to mirror their presence in society. This is exactly what the Center for Diversity and Inclusion seeks to address.

Definition of Underrepresented in Medicine (UiM)
Mass General Hospital follows the definition of underrepresented in medicine (UiM) as established by the Association of American Medical Colleges: “The underrepresentation in medicine means those racial and ethnic populations that are underrepresented relative to their numbers in the general population.”

Blacks, Latinx, and Native Americans combined represent over 33% of the U.S. population. These same racial/ethnic groups only represent 13% of medical graduates and 10% of the medical faculty across the country and are therefore underrepresented in medicine, or UiM.

Our Mission

As one of the first academic hospital-based centers in the country of its kind, we are dedicated to building a diverse community of physicians, scientists, and nursing and patient care services staff, and fostering a culture of inclusion and respect.

Addressing the Challenge and Advancing Equity

CDI has made progress over the years in addressing this challenge through programs, initiatives and collaborations that promote and advance UiM physicians, researchers and trainees. For example, it is clear that Mass General Hospital is matching UiM residents at a much higher rate than the national pool of medical graduates (see graph above).

In 2021, MGH matched 26% of UiMs, which is double the percentage of medical graduates nationally.

Increasing diverse representation alone is not enough. We are also providing the necessary resources and opportunities to help promote career success, and create an environment where all are treated with respect and can experience a true sense of belonging.
Now under the Mass General Equity & Community Health umbrella, CDI works collaboratively with leadership, centers, departments, committees, and initiatives throughout the hospital and the MGB system. CDI also partners with external leaders—locally, regionally, and nationally—all to create an inclusive environment, advance and propel equity, and enhance the diversity of the Mass General workforce. We have built strategic partnerships with, among others:

**Massachusetts General Hospital**
- Center for Community Health Improvement
- Center for Faculty Development
- Clinical Departments and Training Programs
- Clinical Policy and Record Committee
- Departmental Diversity, Equity and Inclusion Committees
- Disparities Solutions Center
- Equity & Community Health
- Executive Committee on Community Health
- Executive Committee on Diversity and Equity
- Executive Committee on Research
- Executive Committee on Teaching and Education
- Human Resources
- LGBTQ Employee Resource Group
- Mass General Physicians Organization
- Mongan Institute
- Nursing & Patient Care Services
- President’s Office

**Harvard Medical School**
- Faculty Affairs Office
- Office for Diversity Inclusion and Community Partnership
- Office of Recruitment and Multicultural Affairs

**Regional**
- Conexión
- The Partnership, Inc.
- YW Boston
- Get Konnected

**National**
- American Association of Medical Colleges
- Latino Medical Students Association
- National Hispanic Medical Association
- National Institutes of Health
- National Medical Association
- Student National Medical Association

**Mass General Brigham**
- Community Health Equity
- Graduate Medical Education
- Office of Diversity, Equity and Inclusion
- Quality and Patient Experience
- United Against Racism
strategic priorities, programs, and initiatives
Since its inception in 1992, the Center for Diversity and Inclusion has sought to support, amplify and create opportunities for physicians, scientists, and more recently as CDI has expanded, nursing and patient care services staff and the research workforce within Mass General. These goals are aligned with CDI’s four strategic priorities:

1 Exposing UiM students to academic medicine through programs such as the Summer Research Trainee Program (SRTP) and the Visiting Clerkship Program (VCP).

2 Advancing careers and building community amongst UiM physicians, researchers, trainees, and now PCS staff.

3 Championing health equity and addressing bias and racism through education, policy and advocacy.

4 Driving organizational change at the national, regional, and system level.

During 2020–21, these priorities were supplemented with responding to COVID-19 equity needs. Though our work has been present and critical for close to three decades, it was the onset of the COVID-19 pandemic that highlighted the importance of those underrepresented in medicine more than ever before. In fact, vital and life-changing initiatives such as the Spanish Language Care Group would not have been possible without the Center for Diversity and Inclusion’s ability to activate its diverse workforce.
Addressing COVID-19 Equity (2020)

Development of a Multilingual Registry

When the COVID-19 pandemic hit, our health system pivoted, and CDI rapidly responded to the needs of our patients with Limited English Proficiency (LEP). CDI Executive Director Elena Olson became one of the leads for the MGH and MGB COVID Equity and Community Health Response Team. Using our existing database of Latinx, Black and Native American physicians and scientists, and a new survey tool to the MGH research and clinical communities, we created the first of its kind multilingual registry—one that identified over 2600 available MGH clinicians and non-clinical staff who were proficient in other languages to offer support in these languages to our LEP speaking patients and employees. On the clinical end, multilingual clinicians filled a critical need as families were not allowed in the hospital due to Coronavirus, and translation services were remote and scarce. The registry was also used to identify multilingual staff who could assist with LEP employee education and attestation during the height of COVID. This language information was entered into our human resource management system creating a hospital-wide system for future deployments.

Spanish Language Care Group

The Coronavirus outbreak began in the United States in March 2020, creating an urgent call for additional medical and administrative support at Mass General seemingly overnight. While we saw an increase in COVID-19 hospitalizations, we also experienced the widening gap in available linguistically concordant care on the COVID floors as more patients from neighboring communities of color were brought in for intensive care.

In fact, prior to the onset of COVID-19, Limited English Proficient (LEP) Spanish speaking patients represented only 6–7% of our inpatient population. During the height of the pandemic, however, that number swelled to close to 50% on the COVID ICU and Surge floors. In person communication with LEP patients with COVID became a challenge. Due to infection control and personal protective equipment concerns, in person visitors and medical interpreters were not allowed.

In response to the staggering numbers, CDI co-led the establishment of the Spanish Language Care Group (SLCG) in collaboration with Interpreter Services, Surge, the Emergency Department and Boston Hope clinical teams. The charge of the SLCG group, which included 51 clinicians who were native Spanish speakers, included providing in-person and virtual assistance 24 hours a day, 7 days a week. These physicians were tasked with supporting family updates, admissions and discharges, informed consents, family meetings, goals of care, and much more, delivering it with kindness, empathy and care.

Countries Represented by SLCG Members

- Argentina
- Brazil
- Chile
- Colombia
- Cuba
- Dominican Republic
- Ecuador
- El Salvador
- Mexico
- Peru
- Puerto Rico
- Spain
- Uruguay
- Venezuela
**MGH Departments Represented in SLGC**

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<thead>
<tr>
<th>Department</th>
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<td>Cancer Center</td>
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<td>Dermatology</td>
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<tr>
<td>Emergency Medicine</td>
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<tr>
<td>Medicine (general and subspecialties:</td>
<td>11</td>
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<tr>
<td>Cardiology, Infectious Diseases,</td>
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<tr>
<td>Gastroenterology and Palliative Care</td>
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<tr>
<td>Radiology</td>
<td>5</td>
</tr>
<tr>
<td>Surgery</td>
<td>6</td>
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To learn more about the MGH Spanish Language Care Group (SLCG), click here to [watch our video](#) or follow this link to the [MGH website](#).
“I am so grateful, and was moved nearly to tears today, appreciating how truly stunted our relationship with non-native English-speaking patients can be due to language barrier. The quality of care we were able to provide today would have been impossible to achieve without Gladys from the Spanish Language Care Group. We can’t sing their praises high enough.”

Victoria Sinyak, PA-C, Hospitalist Physician Assistant
Hospital Medicine Unit, Massachusetts General Hospital
Community Messengers

Not only were SLCG members available at the bedside for LEP patients, they also provided much needed multilingual messaging to local hard-hit communities by creating videos about COVID-19 safety measures in Spanish and other languages. Many providers joined the MGB Community Messenger team—a group of multi-cultural, multi-lingual clinicians deployed in person on our mobile vans and virtually to educate, inform and address community-based questions about the virus and the vaccines.

CDI also worked collaboratively with a team of researchers from MIT, notably Nobel laureate in Economics Esther Duflo, to study the lack of trust in the healthcare system within communities of color. Dr. Duflo and a group of multi-specialty UiM healthcare professionals formed the “COVID-19 Working Group.” The group recorded a series of educational and culturally proficient COVID-19 videos for Black and Latinx communities. This led to publications including the Annals of Internal Medicine and JAMA Network Open exploring the impact of physician racial concordance and other factors in improving health outcomes in communities of color.
My Sons Life Matters
Black Lives Matter
ENOUGH
ENOUGH
BLACK LIVES MATTER
United Against Racism (2021): A Systemwide Effort

The MGH Structural Equity Plan

Between 2018 and 2020, CDI co-led the race equity subcommittee of the Executive Committee on Community Health (ECOCH) which focused on policy, education and a reporting system related to racial bias and discrimination. This work became even more critical following the onset of the coronavirus. As COVID-19 cases lowered throughout 2021, a structural equity plan was introduced by Joseph Betancourt, MD, MPH, MGH, senior vice president of Equity and Community Health, to build capacity and operationalize the tenets of UAR—addressing racism and eliminating healthcare disparities to achieve a more equitable hospital for employees, patients and their families. The foundational work of CDI and ECOCH was incorporated into the plan, and CDI’s executive director Elena Olson was chosen to lead the areas of policy and practice review, diversity and equal representation, and engagement and investment in an anti-racist agenda. While the structural equity plan included 10 key points, CDI was most integrally involved with its first initiative: a policy and practice review to identify and reconcile structural racism.

At the core of structural equity is policy. A committee led by Ms. Olson including policy and patient advocacy experts, as well as safety and quality leaders, is developing a framework and a workflow process to review policies and practices through an equity lens. One early accomplishment is the new MGH patient code of conduct.

New Patient Code of Conduct Policy

The CDI led the development and implementation of a new Patient, Family, Visitor and Research Participant Code of Conduct to advance respectful treatment of staff by patients, visitors and research subjects and to monitor discriminatory, disrespectful, disruptive or harassing behaviors.

The policy, which is divided into three high-level sections and was approved in May 2021, is one of the first of its kind. The three key sections are: Promoting Safety and Security, Communicating and Acting in a Respectful Manner, and Code of Conduct Violations outlining a detailed protocol to assess policy violation, which can result in patient discharge or a family member being asked to leave the premises. This Code of Conduct also provides guidance on how to address inappropriate behaviors by using the SAFER model framework and applying scripting guidelines.

Patient, Family, Visitor and Research Participant Code of Conduct

Our Code of Conduct is intended to maintain a safe and caring environment for all patients, staff, family, visitors and research participants at MGH.

Promoting Safety and Security

- No Weapons
- No illegal or dangerous items
- No Alcohol, no drugs, smoking or vaping
- No Photography and video/audio recording

Communicating and Acting in a Respectful Manner

The following are not acceptable behaviors: Discriminatory, disrespectful or harassing behaviors or language (oral or written) including, but not limited to:

- Offensive remarks about race, color, accent/language, national origin, ethnicity, religion, sex, gender, gender identity or expression, genetic information, sexual orientation, age, disability, veteran/active military status, or immigration status.
- Requests or demands for a clinician or other staff member based on the above characteristics
- Yelling or swearing
- Splitting or throwing objects
- Any physical or attempted assault
- Sexual or vulgar remarks or behaviors
- Refusal to follow unit or practice specific policies or guidelines that guide the patient’s care and treatment
- Disrupting another patient’s care or experience
- Family/Visitor refusal to follow inpatient staff requests related to the need to provide direct patient care
- Unwanted communication with a clinician or other staff member not related to clinical care

Code of Conduct Violations

- If you are a patient, you may be discharged and you may not be able to receive care in the future at Mass General (Does not apply to emergency treatment under EMTALA)
- If you are a family member or visitor, you will be asked to leave the premises and future visitation may be restricted.

Our Code of Conduct is intended to maintain a safe and caring environment for all patients, staff, family, visitors and research participants at MGH. If you are a patient, family member, visitor or research participant and are the target of any of these behaviors, please report your concerns to a staff member.
By spearheading the Code of Conduct, CDI has made monumental strides to ensure that every employee has the guidance and tools to utilize this policy effectively. Ultimately, in creating this novel patient facing code of conduct, we now have a tool which codifies policy, allows for employees to feel supported, creates a space for accountability and safety, and above all, promotes an environment rooted in dignity and respect. And to promote this, a code of conduct Tiger Team will be developing best practices for communicating this policy to patients and employees and providing bystander training and other strategies to support the targeted employee.

**Commitment to Diversity and Equal Representation**

Building on the successes of CDI’s workforce initiatives, the Center grew its existing programs, and in June of 2021 expanded its scope to include nursing and patient care services and the research workforce. To support this growth, new directors in PCS and research joined the CDI leadership team.
Growing the Summer Research Trainee Program

CDI founded the Summer Research Trainee Program (SRTP) in 1992 to encourage historically Underrepresented in Medicine (UiM) students to pursue career paths in academic medicine and biomedical research. To date, 378 students have completed the program with over 149 colleges, universities and medical schools represented. This year, because of our commitment to increasing the diversity of trainees, SRTP hosted 29 students for the Summer of 2021, making it the largest SRTP cohort to date, compared to the average cohort of 20 students in past years.

The program, which ran from June to August 2021, allowed UiM undergraduate, medical, graduate and post-baccalaureate students to complete research with MGH faculty preceptors in science labs, clinical sites, health policy and health services settings within 16 departments. Each student was matched with a research project and preceptor, with thoughtful consideration given to the student’s research interests and long-term professional goals. In addition to one-on-one mentorship, students were introduced to virtual networking events with key hospital leadership, career workshops and research development seminars and social events, in accordance with COVID-19 protocol.

Over the course of the program, students created abstracts, completed research and made final oral presentations to the MGH research community. Students were offered a space to receive constructive feedback and evaluations from a panel of research faculty, providing them with further guidance and a powerful sense of mentorship. Every year since the foundation of the program, a select number of students are afforded the opportunity to remain at their summer sites, continuing their research and moving forward with publishing their work. Participants of SRTP have noted that this program has offered them the transferrable skills needed to further pursue their academic interests in science and medicine, while helping them create a social network of support for the coming years.

Program Demographic Statistics for 2021

29 UiM Students in Total

- 13 Medical Students
- 14 Female
- 16 Undergraduate Students
- 15 Male

- Black/African American
- MGH Departments
- Hispanic/Latinx
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<tr>
<th>Department</th>
<th>Number</th>
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<td>Anesthesiology</td>
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<tr>
<td>Emergency Medicine</td>
<td>2</td>
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<tr>
<td>Medicine (Cardiovascular, Infectious Diseases, Hematology Oncology, General Internal Medicine)</td>
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<tr>
<td>Neurology</td>
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<td>Neurosurgery</td>
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<tr>
<td>Obstetrics and Gynecology</td>
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<td>Pathology</td>
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<td>Radiology</td>
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<td>Surgery</td>
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“My participation in the SRTP internship has been one of the most significant and influential academic experiences in which I have participated. To this day, I communicate with the friends I made at the program, who continue to provide support and ongoing inspiration.”

Yaiel G. Rodríguez Avilés, MS3
Ponce Health Sciences University, School of Medicine
2019 SRTP Student
**Welcoming the Most Diverse Residency Class**

The recruitment process for residency applicants during the pandemic shifted from the traditional in-person method to a virtual recruitment effort for the first time in history. During the 2020-21 recruitment season, MGH saw a 6% increase in all applications, a 17% increase in UiM applications and a 38% increase in UiM’s interviewed compared to the prior year. To support recruitment efforts, CDI held 12 virtual receptions, including two joint receptions with Brigham and Women’s Hospital (BWH), with tremendous participation by the UiM community of MGH and applicants. Out of the 500 attendees, 88% of those who matched at MGH attended at least one CDI reception.

To address the high cost of living in Boston, CDI, BWH and MGB Graduate Medical Education (GME) created a pilot stipend program in 2018 for economically disadvantaged residents in need of additional support, and as of 2021, has transitioned from a pilot to a fully sustainable program. This year, CDI/GME also offered a low interest loan program for trainees who needed added monetary support.

CDI participated in the virtual SNMA AMEC, and LMSA National Conferences helping connect with hundreds of students from around the country.

As a result of our collective efforts with MGH and joint residency programs, 67 new UiM residents joined MGH in June 2021. This cohort is the largest in MGH history, with a 26% match of UiMs, making it our most successful year of residency recruitment and match. Overall, 15 of 20 MGH affiliated residency programs had at least one UiM match.

### MGH Residency Programs that Matched UiMs, 2021

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<td>Emergency Medicine</td>
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<td>Internal Medicine</td>
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<td>Neurology</td>
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<td>Neurosurgery</td>
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<td>Obstetrics and Gynecology</td>
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<td>Orthopaedic Surgery</td>
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<td>Pediatrics</td>
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<tr>
<td>Psychiatry</td>
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<tr>
<td>Radiation Oncology</td>
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<td>Radiology (Diagnostic)</td>
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<td>Surgery</td>
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Resident and Fellow Committee

The MGH CDI’s Resident and Fellow Committee (RFC) acts as an interdisciplinary forum of UiM residents and fellows with a Board elected by their peers. The RFC is a unique effort—not present across other Harvard teaching hospitals or the country—which is critical to creating a vibrant community of UiM trainees at MGH and in joint MGB training programs.

The RFC assists with recruitment of UiM trainees into our MGB training programs, establishes career development and networking opportunities for trainees, and reaches out to the diverse communities we serve through health fairs and by providing mentorship and support to local youth and UiM, LGBTQ and first-generation college and medical students across the country.

In 2020–2021, the RFC was very active despite competing demands on their time to care for COVID patients.

Youth-Focused Outreach

- CDI physicians attended after-school workshops with high school students through the Revere High School Power of Know program and offered insights about academic and career pathways, as well as mentorship opportunities.

- College panel for graduating students in the MGH Youth Scholars program, discussing experiences relevant to socio-economically disadvantaged students.

- CDI/RFC had a strong presence at the virtual SNMA AMEC and LMSA National Conferences helping connect with hundreds of students from around the country.

- CDI created the PCE UiM initiative to connect Harvard Medical School students doing their PCE clinical years at MGH with identified UiM faculty and trainees in each of the main clerkships for ongoing support during their academic year. The RFC Board also hosted social events for students and connected with students at other CDI-at-large programming.

- CDI and RFC co-sponsored the first annual EMPOWER Conference, a coalition between HMS SNMA LMSA and LGBTQIA+ And Allies (LAHMS), bringing together almost 700 middle school through post-collegiate medical students and over 90+ HMS students, alumni and faculty. The goal was to support UiM, LGBTQ, first-generation and low-income students to help increase the diversity in the healthcare workforce.

- The RFC held interactive sessions with our SRTP cohort during their summer research months, including a panel of multi-specialty residents and fellows sharing their experiences and offering personal and professional insights.
The CDI RFC Board collaborated with HUECU on our first Financial Education Series—a four-part webinar focused on general introduction to financial resources in the Harvard system including retirement, debt repayment, budgeting and credit management. The goal was to help participants learn strategies for financial successes especially given the unique challenges faced by communities of color and the racial wealth gap.

To help support applicants during the unique COVID-19 pandemic restrictions, we created a Virtual Interview Tips webinar, which included a panel of MGH trainees and faculty offering strategies on how to optimize applicants’ interview experiences in the virtual space. Some of the areas addressed included: creating the ideal interview space, preparing for common questions, and how to be fully prepared in any situation that may arise during the application cycle. This was sent out to all UiM applicants to MGH programs during the 2020–2021 application cycle.

In continuing the tradition of creating connections with our CDI communities, we took our social events outdoors during the warm weather seasons, spending scenic evenings on the Charles River Esplanade and visiting Martha’s Vineyard.

As the weather changed, we took our events virtual again, including our annual holiday party, when food from a local Black-owned restaurant, Soleil, was individually delivered to participants so we could nourish our bodies even when we weren’t in the same physical space.
“During the pandemic, residents and fellows rose to the demands of not only caring for COVID-19 patients and the greater influx of patients needing care across all specialties, they dedicated themselves to supporting many in our communities who were disproportionately affected by the pandemic. These efforts included different outreach initiatives—providing health education and culturally sensitive vaccine information, mentoring students across the educational spectrum and coming together to support each other. We saw and continue to see the best of our trainees, who represent the very highest principles of humanism and altruism, core elements of the medical profession.”

Lucy Ogbu-Nwobodo, MD, MS, MAS
MGH/McLean Psychiatry Residency (PGY 4)
MGH Administrative Chief Resident
Chair, MGH CDI Resident & Fellow Committee
Expanding UiM Faculty Representation

Another great success was in the realm of UiM faculty growth. Due to CDI programs and departmental commitment and collaborations, UiM faculty representation increased across all levels, growing from 105 UiM faculty in 2004 to 282 in 2021. Our most notable progress since 2004 is at the highest academic rank of full professor, with an increase from 0 to 26. Over 5% of full professors are currently UiM, which is above the national average of 3%.

Physician/Scientist Development Award Expanded

The MGH Physician/Scientist Development Award was created in 2004 and designed for MD and/or PhD investigators at MGH who are considered underrepresented in academic medicine (UiM). This award provides transitional funding for support in the development of physicians and/or scientists who are underrepresented in academic medicine, and thereby intends to increase opportunities for UiM researchers to advance to senior positions in academic medicine.

With increased funding from Equity and Community Health and the Executive Committee on Research (ECOR), the CDI Physician Scientist Development Award increased from $138,000 in previous years ($120,000 direct; $18,000 indirect) to $207,000 in 2020 ($180,000 direct, $27,000 indirect), disbursed over 3–4 years. Four UiM faculty were awarded in 2021. This award continues to provide funding to promising UiM faculty and plays a key role in the path to independence in their research careers.

The PSDA has had a significant impact on recipients’ research progress and career advancement on thirty-six (36) UiM research faculty across Mass General. Many have gone on to leadership positions at MGH, including Department and Division Chief, and received additional research funding. In fact, in 2020, six PSDA awardees are Principal Investigators on R01 awards from NIH.
Clinician-Teacher Development Award Expanded

The MGH Clinician-Teacher Development Award (CTDA) is designed for MD and/or PhD faculty, including clinical psychologists in their final year of training at MGH who are considered underrepresented in academic medicine (UiM). The award is funded by Massachusetts General Physicians Organization (MGPO) and Equity and Community Health and intended to provide transitional funding for support in the development of academic clinicians, teachers and leaders underrepresented in academic medicine, and thereby increase opportunities to advance to senior positions in academic medicine. The award supports the pursuit of projects focused in the areas of excellence for educational leadership and/or clinical expertise and innovation that meet the criteria for promotions at Harvard Medical School.

The Clinician-Teacher Development Award has supported twenty (20) MGH clinicians in community health, education and a wide range of clinical research areas. In 2021, Paula A. Aduen, PhD and Onyinyechi F. Eke, MD received the CTDA award of $138,000 ($120,000 direct; $18,000 indirect) over 4 years.

CTDA award recipients currently hold academic titles of Instructor (11), Assistant Professor (8), Associate Professor (2) and Professor (1). This award has played a significant role in the research and career development of each award recipient.

“The Clinician-Teacher Development Award was the foundation and opportunity I needed to start my research in health care disparities. I certainly would not be where I am today if it was not for this award and the support the CDI offered me and has continued to provide.”

Marcela del Carmen, MD, President
Massachusetts General Physicians Organization
2005 CTDA Recipient
Chester Pierce Research Society Reinstated

The Chester Pierce Research Society (CPRS) is a speaker series named in honor of MGH’s late Professor Emeritus in Psychiatry, Chester Pierce, MD. Dr. Pierce was the first African American full professor and physician-scientist at MGH. CPRS is designed to promote diversity and health equity by featuring the novel research of investigators in the MGH and CDI community.

Since its inception in 2004, the CPRS has sponsored over 40 talks by Mass General UiM physicians and scientists. The event has been attended by faculty and staff across the Mass General. The CPRS is an opportunity for CDI to recognize and promote UiM faculty, particularly previous recipients of the Physician Scientist Development Award and Clinician-Teacher Development Award and their robust research. While the series was on hiatus due to COVID, the program was reinstated with quarterly talks starting in July 2021 with Dr. Jose Florez, Chief of the Endocrine Division and Diabetes Unit in the Department of Medicine and Professor of Medicine, Harvard Medical School and a previous recipient of the CDI sponsored Physician/Scientist Development Award.

Research Awards and Honors

As the MGH research workforce becomes more diverse, the number of UiM investigators with R01 level funding continues to increase. Since 2016 the number of UiM principal investigators on R01 has increased by 54.5%. The number of R01s belonging to UiM faculty has seen an increase of 58.3%. This includes previous PSDA and CTDA recipients who currently have 7 R01s total.

Previous CTDA and PSDA and other UiM investigators have also been recognized within and outside of MGH for their excellence in research, mentoring and outstanding academic achievements. Below is a small sample of the awards and honors faculty have received between 2020–2021:

- **2021 Martin Prize**, Martin Aryee, PhD (Pathology, PSDA 2015), “Large-Scale Topological Changes Restraine Malignant Progression in Colorectal Cancer”
- **2021 MGH Research Scholar 2021–2026**, Olivia Okereke, MD (Psychiatry)
- **Inaugural Harry G. Lehnert, Jr. and Lucille F. Cyr Lehnert Endowed MGH Research Institute Chair**, Margarita Alegría, PhD (Disparities Research Unit)
- **Harvard Global Health Institute (HGHI) Burke Global Health Fellowship**, Adeline A. Boatin, MD, MPH (Obstetrics and Gynecology, CTDA 2018)
- **Alzheimer’s Association Inge-Grundke-Iqbal Award for Alzheimer’s Research**, Yakeel T. Quiroz, PhD (Psychiatry, PSDA 2016)
Diversity, Equity and Inclusion
Education and Training

During our COVID year, CDI also focused on addressing and educating our MGH community on issues of racism, bias and equity through small group conversations and public educational forums. We co-sponsored an expert panel to bring more awareness to Asian xenophobia during the pandemic and explored ways to promote an environment of dignity and respect with the MGH Radiology Diversity and Equity Committee. We co-led and organized the MGH Latino Heritage Month and co-sponsored Juneteenth celebrations, marking the first time Juneteenth was ever celebrated at MGH.

Co-Leader of the MGB Diversity Summit

The Center for Diversity and Inclusion was a summit steering committee member for the 5th Annual Diversity, Equity, and Inclusion Summit at Massachusetts General Brigham (MGB) on May 19, 2021. The theme of the 2-day summit was “Understanding and Dismantling Systemic Racism: Our Path Forward.” After a series of life changing events in 2020–2021, the goal of the summit was to foster a space for discussions on antiracism work and building an inclusive organization with an equitable outlook. The summit gave attendees the opportunity to interact with a wide range of colleagues to discuss ensuring equity amidst COVID-19, understanding the threats of racism, and addressing healthcare disparities.

External Advocacy and Policy

In 2020, CDI helped highlight the need to advance both equity and community health policy and advocacy for our community. We added equity to the Executive Committee on Community Health Policy Advocacy Committee bringing together the Executive Committee on Diversity and Equity (ECODE) to this committee. MGH employees seeking institutional endorsement of equity and community health legislative bills, petitions and policy agendas may submit a request to this committee to evaluate the merit of endorsement. As part of the United Against Racism campaign, CDI is also working closely with MGB to ensure a commitment to advancing an equity policy agenda, including serving on the selection committee for a new MGB director of equity and community health policy.

The Steering Committee of 2019 Diversity, Equity, and Inclusion Summit.
History and Timeline

1992
Established the Office of Minority Health Professions (OMHP) in the Department of Medicine. Winfred Williams, MD was the founding director.

1998
OMHP renamed to Multicultural Affairs Office (MAO); appointed three faculty associate directors.

2000
Senior administrator hired; MAO expanded to work with all hospital departments across the career continuum of physicians and scientists—students, trainees and faculty.

2001
Manager of trainee affairs position created as faculty liaison for trainees; established the Organization of Minority Residents and Fellows (OMRF); created a UiM mentorship program for medical students across Massachusetts that evolved into the Harvard Medical School URM mentorship program

2006
Advisory Board created, cochaired by MGH President Peter L. Slavin, MD and Dr. Williams; executive director and program manager positions created to meet demands of growing programs and initiatives.

2008
Senior administrator hired; MAO expanded to work with all hospital departments across the career continuum of physicians and scientists—students, trainees and faculty.

2010
Championed the development of departmental diversity action plans, which led to the creation of department-specific diversity committees and boards and departmental diversity goals.

2011
Hosted first alumni reunion, bringing back prominent UiM alumni for a weekend of seminars, networking and celebration.

2012
Became signature sponsor and organizer of the inaugural YWBoston Stand Against Racism at MGH, now an annual multidepartment event to discuss issues of race and racism across MGH.

2014
The hospital wide strategic planning effort re-vitalized the MGH/MGPO Diversity and Inclusion Committee and created an Executive Committee on Community Health. MAO was an integral part of this strategic planning effort and staff have leadership roles on both committees.
MAO was renamed to the Center for Diversity and Inclusion, to reflect the expansion of programs and initiatives. All initiatives became “CDI” focused, e.g., the CDI Faculty Development Award Program; the OMRF evolved into the CDI Resident and Fellow Committee.

SRTP expanded to 20 college and medical students, providing a more longitudinal experience.

CDI secured funding from ECOR and MGPO for two awards in each category: Physician/Scientist and Clinician-Educator.

ECOCH established 3 priority areas, including race equity, SDH and access. CDI co-led the committee focused on race equity and developed a strategic plan for addressing structural racism at MGH.

Vice President for Equity and Inclusion hired, who became executive sponsor for CDI.

CDI joined leadership of MGH and MGB COVID Equity and Community Health response team. SLCG created, as described above.

VP position expanded to Sr. Vice President for Equity and Community Health, bringing CDI, Disparities Solutions Center, and the Center for Community Health Improvement under a joint umbrella of Equity and Community Health.

CDI helped inform and implement the MGH structural equity plan in alignment with MGB United Against Racism, which incorporated the goals identified by the race equity subcommittee. The structural equity plan also expanded CDI.

CDI expansion includes program expansion of SRTP, hosting the biggest cohort yet to complete the program, and PSDA and CTDA to include 9 recipients per year. Staff growth includes a Director for Nursing & Patient Care Services, Faculty co-directors for Research, as well as administrative staff in research, student programs and communications.

The Future of CDI

In 2021–2022, CDI will grow its programming and initiatives for Nursing & Patient Care Services (PCS) staff under the leadership of Leah Gordon, NP, as CDI Director for PCS. Ms. Gordon has been working closely with all PCS units to develop a comprehensive strategic plan to address equity and inclusion in PCS. With the support and engagement of PCS leadership, CDI’s PCS goals are focused on diversity, equity and inclusion continuing education, professional development and a commitment to lifelong learning. Examples include engaging and maximizing the MGB United Against Racism training offerings, by leading follow up dialogue to Stepping Stones and training facilitators to engage in this dialogue, and conducting similar interventions with additional UAR trainings including Ending Racism and Upstander training.

CDI is expanding its programming and footprint with the research workforce under the direction of Faculty Co-Directors for Research Julie Price, PhD, and Cesar Castro, MD. Their goals include advancing the student and PhD research pipeline, as well as the careers of UiM faculty in research and academic medicine. Strategies include building a robust collaboration with research leadership, including the MGH Research Institute, ECOR and the Center for Faculty Development, as well as with T32 grant Principal Investigators; developing career development awards for PhD post-docs; and, establishing a speaker series across the country for UiMs at MGH and beyond.

Through CDI leadership’s collaborations with MGB diversity, equity and clinical leadership, workforce and policy and advocacy related efforts continue to grow, and together we will establish a process by which all medical policies will be reviewed through an equity lens.
Executive Leadership

Joseph Betancourt, MD, MPH
Senior Vice President of Equity and Community Health

Elena Olson, JD
Executive Director

Administrative Staff

Patrice Charlot, Communications Specialist
Sandra Ordoñez, Program Manager
Karen L. Osborne, Administrative Director of Research
Amanda Pickett, Student Project Coordinator
Bebina Shrestha, Program Coordinator

Clinical and Research Faculty

Sherri-Ann Burnett-Bowie, MD, MPH
Associate Director

Jocelyn Carter, MD, MPH
Manager of Trainee Affairs

Cesar M. Castro, MD, MMSc
Faculty Co-Director for Research

Leah Gordon, DNP, RN, CNP-C
Nursing & Patient Care Services Director

Julie Price, PhD
Faculty Co-Director for Research

Winfred Williams, Jr., MD, CDI Founding Director
Executive Leadership

Joseph Betancourt, MD, MPH
Senior Vice President, Equity and Community Health

Joseph Betancourt, MD, MPH, is the Senior Vice President of Equity and Community Health at Massachusetts General Hospital, the founder, senior advisor and faculty of the Disparities Solutions Center (DSC) at MGH, faculty at the Mongan Institute, an Associate Professor of Medicine at Harvard Medical School and a practicing Internal Medicine physician. He has also served on the leadership team of the Mass General Center for Diversity and Inclusion.

Dr. Betancourt is a nationally and internationally recognized expert in health policy, health care disparities, diversity and cross-cultural medicine, and has served on several Institute of Medicine Committees, including those that produced the landmark reports, Unequal Treatment and Increasing Diversity in the Healthcare Workforce. Dr. Betancourt has secured grants and contracts that have led to over 60 peer-reviewed publications and advises private industry, government and not-for-profit health systems on approaches to eliminating racial and ethnic disparities in health care. He sits at on the Board of Trinity Health, a large national health system, and sat on the Boston Board of Health and the Board of Neighborhood Health Plan in Boston. He is also an 2015 Aspen Institute Health Innovator Fellow.

Dr. Betancourt received his Bachelor of Science from the University of Maryland, his medical degree from Rutgers-New Jersey Medical School, and completed his residency in Internal Medicine at the New York Hospital-Cornell Medical Center. Following residency, he completed The Commonwealth Fund-Harvard University Fellowship in Minority Health Policy and received his Master’s in Public Health from the Harvard School of Public Health.

Elena Olson, JD
Executive Director

Elena Olson, JD has worked with the CDI team for over two decades. Under her leadership the CDI is now a full-service central resource for clinical and research students, trainees, faculty, as well as patient care staff. Ms. Olson is currently co-leading the implementation of the MGH Structural Equity 10 Point Plan which docks into the MGB United Against Racism campaign. In this role, she is spearheading initiatives focused on policy review and external advocacy through an anti-racism and equity lens, as well as workforce diversity. During the COVID pandemic, she served on the MGH and Mass General Brigham (MGB) COVID Equity and Community Health Response teams, which were created to ensure the hospital’s and MGB’s COVID-19 response efforts to equity and community health issues for patients and staff.

Ms. Olson serves on various MGH, MGB and HMS leadership committees, including the MGH Executive Committee on Community Health, the Executive Committee on Diversity, the Clinical Policy and Record Committee; Mass General Brigham United Against Racism committees on reporting, policy and a Diversity Summit; and the HMS Dean’s Taskforce on Diversity and Inclusion. She also has helped lead MGH strategic planning efforts focused on community health, equity and workforce diversity; and has helped design and facilitate trainings in cross-cultural teamwork and communication for residents, nurses and physicians. Prior to joining CDI, Ms. Olson practiced as a civil and commercial litigator for eight years following her studies in which she earned a BA in International Affairs with a minor in Biology from Goucher College, a JD degree from Santa Clara University School of Law, and a Certificate from the International Institute for Human Rights in Strasbourg, France. Born and raised in Buenos Aires, Argentina, Ms. Olson is trilingual in English, Spanish and French and is passionate about championing social justice and equity issues, especially in education and healthcare.
Administrative Staff

**Patrice Charlot, Communications Specialist**
Patrice Charlot serves as Communications Specialist for Equity & Community Health and the Center for Diversity and Inclusion. Her work as Communications Specialist serves as a dynamic intersection of Patrice's passion for design rooted in empathy and inclusivity, as well as equity through health, wellness and social justice.

As an undergraduate student at the University of Massachusetts Amherst where Patrice earned her bachelor's degree in Public Health and Sociology, she conducted research and presented two theses projects on the impact of race on infant mortality rates. Heavily impacted and inspired by the experience of Black women, and Black mothers especially, Patrice's work has always been rooted in the same ideology which is to amplify and provide a voice for historically excluded populations within her community and beyond. When asked why, Patrice says “I’m motivated daily by my family, and I strive each and every day to actualize the dreams of my mother who immigrated from Haiti over two decades ago. Everything I do is for her, people like her, and people like me. People who deserve to have their voices represented in every meeting, at every table, and on every platform.”

Prior to her work at Mass General, Patrice brought her mission to life in her work in the non-profit and education spaces by supporting first-generation, low-income students navigate and excel in their pursuit of higher education, most recently at Brandeis University where she is also a Master of Science candidate in Digital Marketing and Design.

**Sandra Ordonez, BS**
Sandra Ordonez, BS

**Program Manager**
Sandra grew up in Bogota, Colombia and graduated as an Industrial Engineer from Universidad Libre, with a minor in Time Management. Sandra is a proud Latina and a single mother and grandmother, living in a 4th generation home who loves her heritage and is proud of the resilience the people in her community display. She is grateful to be part of this great work and service at MassGeneral. Sandra’s passion is working in diversity, equity and inclusion and it is her dream to increase the number of healthcare providers who come from racial minority backgrounds, because, it is this Sandra believes, that will help improve the health of all our communities.

In her role as Program Manager for the Center for Diversity and Inclusion, she works collaboratively with the CDI team to plan and implement numerous initiatives and programs and its in this role where Sandra is able to focus her energy on enhancing the diversity of students, trainees and faculty across MGH. As CDI’s program manager, she coordinates residency recruitment, and is the administrative liaison to the Resident and Fellow Committee and for students. In particular, she is responsible for providing day to day management of the Summer Research Trainee Program, which brings in 20 talented medical and college students for a summer research experience with MGH investigators. Her general responsibilities also include internal marketing, event planning and logistics, and evaluation and outcome data analysis. Before joining the CDI team in 2018, Ms. Ordonez had 15 years of professional experience in Graduate Medical Education, including serving as a residency program coordinator across other Boston teaching hospitals. She is a member of an advisory council and the Diversity Committee for the program administrators’ group at Alliance for Academic Internal Medicine (AAIM), and the advisor for the planning committee for Massachusetts Society of Academic Medical Administrators (MSAMA).

**Karen L. Osborne Greene**
Karen L. Osborne Greene

**Administrative Director for Research**
Karen L. Osborne Greene is the Administrative Director for Research in the Center for Diversity and Inclusion building on decades of diversity, equity and inclusion work by CDI and others within and outside of Mass General. Karen’s focus is on the MGH research workforce and coordinating with departments/centers, investigators and administrators within and outside of MGH to support and promote efforts that will increase diversity, ensure equity and inclusion for all and support and promote UiM faculty.
Working with the CDI Co-Faculty Directors for Research, Karen will identify and implement strategies to remove obstacles to career development for UiM research faculty. She will collaborate with HMS, HMS affiliates and other MGH departments on developing UiM research faculty and fellows and assist in the identification and communication of leadership opportunities. She will help ensure our youth are exposed to careers in healthcare and their interest and passion to assist others through careers in research is supported. She will also provide insight and implement strategies and programs to assist with work-life balance of UiM researchers.

In addition to CDI, Karen is also the Assistant Director for Grants and Awards for the Executive Committee on Research (ECOR), in which she is responsible for overseeing ECOR's internal grants and awards program and staffing research committees. This includes the MGH Committee on Awards and Honors which promotes MGH research and its esteemed investigators by ensuring nominations to prestigious awards and scientific societies and the Subcommittee on Animal Resources (SAR) which supports the MGH research community.

Karen has received numerous awards and recognitions, including a Partners in Excellence Award for her involvement in the 2006 NIH Regional Seminar on Program Funding and Grants Administration and a Greater Boston YMCA Achievers Award, given in recognition of the professional and community-based achievements of African-American professionals throughout the Boston area. In her personal time, Karen serves as the Co-Chair of a non-profit organization of volunteers who help local residents in a temporary crisis by preparing/delivering meals, running errands, providing rides to medical appointments and other tasks to provide support and help to those in need.

Amanda Pickett, Student Project Coordinator

Amanda Pickett (she/her) is the CDI Student Project Coordinator. She leads, facilitates, and directly supports planning and implementation of all CDI programs and initiatives related to students. Amanda provides support and execution of the Summer Research Trainee Program, especially as the program expands to support students on a PhD career track. Her project coordination for SRTP includes marketing and advertising, application system management, student onboarding, program execution, and alumni network management. Additionally, Amanda is taking a lead in the design and coordination of a new nursing and patient care services student program. She manages public relations and marketing for the CDI student community, as well as internal and external constituents. Furthermore, Amanda is providing support for a new Post-Doc initiative as well as the Visiting Clerkship program.

After completing her master’s degree at Simmons University in Gender and Cultural Studies, Amanda co-organized the Cambridge Forum for Feminist Discussion of Masculinities while also working at Voice Male, a non-profit publication for engaging men in advancing gender equity. Concurrently, Amanda worked in Prehealth Advising at Massachusetts Institute for Technology (MIT), where she took initiative to launch health equity programming and communications for the MIT Prehealth community. She was also a leader in her staff division's diversity, equity, and inclusion council as well as in a staff and faculty group for advancing white accountability for antiracism learning and action.

Bebina Shrestha

Program Coordinator

As the office coordinator for the Center for Diversity and Inclusion (CDI), Bebina provides frontline customer service to the CDI community of students, residents, fellows and faculty. She assists with planning and implementation of CDI events, workshops and meetings; manages and updates databases; prepares reports for various initiatives and programs; maintains office systems, finances and expenses; and provides general administrative support to the CDI executive director. Prior to her position with CDI, Ms. Shrestha worked at Mass General for four years as a staff assistant and patient service coordinator in the Nephrology Division, coordinating delivery of care for patients and providing administrative support to the physicians and nurses who care for them. Ms. Shrestha was born and raised in Kathmandu, Nepal and is bilingual in Nepali and English. After completing her diploma in Melbourne, Australia, in 2009, she
came to Boston. Ms. Shrestha graduated from Bunker Hill Community College in 2013 with a concentration in Medical Science and Management System and is currently completing her undergraduate degree in Management Science and Information System at University of Massachusetts Boston. She is committed to applying these new skills and knowledge to advance diversity and health equity at Mass General. When not at work or studying, Ms. Shrestha enjoys spending time with her husband and two daughters.

Clinical and Research Faculty

Sherri-Ann Burnett-Bowie, MD, MPH, Associate Director

Dr. Burnett-Bowie received her AB in Biochemical Sciences cum laude from Harvard College in 1993, MD from the University of Pittsburgh, School of Medicine in 1997, and MPH degree from the Harvard T.H. Chan School of Public Health in 2005. Dr. Burnett-Bowie completed her residency in Internal Medicine and fellowship in Endocrinology at Massachusetts General Hospital. Dr. Burnett-Bowie holds a faculty appointment as an Assistant Professor of Medicine at Harvard Medical School. She is a staff endocrinologist in the Mass General Endocrine Unit. She serves as an Associate Director of the Mass General Center for Diversity and Inclusion; and as the Director of Multicultural Affairs for the Department of Medicine (DOM), where she co-chairs the DOM’s Diversity and Inclusion Board. In 2005, Dr. Burnett-Bowie was awarded the Mass General PSDA for a project that investigated the relationship between vitamin D deficiency and insulin resistance in humans. Her research also focuses on the epidemiology of menopause.

Jocelyn A. Carter, MD, MPH
Manager of Trainee Affairs

Dr. Jocelyn A. Carter has been the MGH Center for Diversity and Inclusion Manager of Trainee Affairs since 2015 and is passionate about addressing training and career equity in healthcare for students, trainees and faculty. Through numerous programs including the MGH CDI Summer Research Training Program, Career Development Liaison Program, and the HMS Visiting Clerkship Program, Dr. Carter has been honored to contribute to pipeline and developmental efforts to uplift trainees and faculty that are underrepresented in medicine. She also serves as director of the MGH Community CAre Transitions (C-CAT) Initiative linking inpatients at risk for readmission with community health workers focused on addressing issues related to the social determinants of health. Clinically prepared in internal medicine and preventive medicine, Dr. Carter is a practicing internal medicine hospitalist (Albright Medicine) and physician-scientist within the MGH Division of General Internal Medicine (DGIM). Her primary research interests include patient-centered and innovative care delivery models that improve health outcomes for vulnerable patients with serious-illness through evidence-based interventions. Dr. Carter is particularly interested in clinical and social determinants of health-related interventions that leverage technology while promoting prevention, the subject of her NHLBI K23 award. Dr. Carter also serves as the DGIM Director of Research Equity and is an active member of the MGH Department of Medicine Diversity and Inclusion Board, the DOM Community Council and the MGH ECOCH Social Determinants of Health Subcommittee. Dr. Carter also enjoys being a member of the MGPO Clinical Performance and Contracting Committee, the ABIM American Board of Preventive Medicine Public Health Committee, and the Contemporary Clinical Trials Editorial Board.

Cesar M. Castro, MD, MMSc
Faculty Co-Director for Research

Dr. Castro, MD, MMSc is an Associate Professor of Medicine at Harvard Medical School and Director of the Gynecologic Oncology Program at the MGH Cancer Center. Dr. Castro is a translational oncologist with experience leveraging nanotechnology and molecular imaging for solid tumor detection and serial profiling. He also directs the Cancer Program within the MGH Center for Systems Biology. He serves on the steering
committee for the National Cancer Institute Liquid Biopsy Consortium. Dr. Castro graduated from the University of California, Berkeley and received his medical degree from the UCSF School of Medicine where he also completed his Internal Medicine residency training. Dr. Castro completed an adult oncology fellowship from the Dana-Farber / Mass General Brigham Cancer Care program. During this period, he also received a MMSc from Harvard Medical School. Dr. Castro has received funding from the National Institutes of Health, Department of Defense, Robert Wood Johnson Foundation, and Ovarian Cancer Research Fund, among various other sources. He has also been the recipient of the CDI/ECOR Physician Scientist Development Award.

Dr. Castro has received funding from the National Institutes of Health, Department of Defense, Robert Wood Johnson Foundation, and Ovarian Cancer Research Fund, among various other sources. He has also been the recipient of the CDI/ECOR Physician Scientist Development Award.

Leah Gordon, DNP, RN, CNP-C
Nursing & Patient Care Services Director

Leah Gordon, DNP, RN, CNP, FNP-C, is the Diversity Director for PCS as part of the extension for the Center for Diversity and Inclusion (CDI). Dr. Gordon leads diversity and inclusion activities for the Department of Nursing & Patient Care Services, plays a critical role in implementing initiatives within the MGH Structural Equity Plan, focused on advancing workforce diversity, equity, and inclusion across the hospital. She oversees PCS-related training and education, program design, administration, implementation, and evaluation while incorporating these initiatives into the CDI mission.

Dr. Gordon has worked as a staff nurse at Brigham and Women Hospital and has been a chemotherapy infusion nurse at Dana Farber Cancer Institute and Massachusetts General Hospital. As a Nurse Practitioner, she has worked in Hematology and Breast Medical Oncology at Dana Farber and Thoracic Radiation Oncology at Mass General.

Dr. Gordon’s career in nursing academia includes serving as adjunct faculty at various Boston area schools of nursing, at Simmons College as a mentor to diverse nursing students in the Dotson Scholars Program, and an Academic Advisor to nursing students at the MGH Institute of Health Professions. In February 2019, Dr. Gordon served in role of the Assistant Director of Multicultural Programming and Inclusion at the MGH Institute of Health Profession.

In January 2020, Dr. Gordon served as the track coordinator for the UMass Boston Family Nurse Practitioner program.

Dr. Gordon received her Associate’s degree in nursing from Massachusetts Bay Community College in 2003. She went on to pursue her Bachelor’s, Master of Science and Family Nurse Practitioner degrees in nursing from Regis College. In 2017, she earned her Doctor of Nursing Practice (Nursing Education Track), also from Regis College, with a focus on culturally competent and attentive nursing education.

Julie Price, PhD
Faculty Co-Director for Research

Julie Price, PhD is an investigator and Professor in the Department of Radiology at Massachusetts General Hospital, Harvard Medical School and Director of PET Pharmacokinetic Modeling at the Athinoula A. Martins Center for Biomedical Imaging. Her expertise is in PET imaging methodology for translational imaging of protein targets in aging, neurodegeneration, and neuropsychiatric disorders. Her primary PET research is focused on in vivo quantification of amyloid-beta and tau deposits in neurodegeneration. She completed physics (BS) and medical physics (MS) degrees at the University of Wisconsin-Madison, doctoral training (specializing in radiation health sciences) at Johns Hopkins University (PhD), and postdoctoral training at the NIH PET/Nuclear Medicine Department. She served as Chair of the NIH Clinical Neuroscience and Neurodegeneration study section (2013-2015) and on the Advisory Council to the Director of NIH Center for Scientific Review (2017-2021). She is a 2021 Fellow of the Society of Nuclear Medicine and Molecular Imaging (SNMMI), 2021 SNMMI Brain Imaging Council Kuhl-Lassen awardee, and a recipient of the MGH Department of Radiology Thrall mentoring award.
Winfred Williams, Jr., MD
CDI Founding Director

Dr. Williams is the associate chief of the MGH Division of Nephrology and founding director of the MGH Center for Diversity and Inclusion. Dr. Williams has a long, foundational track record at MGH in the development of programs to enhance the diversity of the physician workforce here and at Harvard Medical School (HMS). Over the past two decades, he has helped develop critical initiatives to support hospital wide diversity goals. Dr. Williams graduated from Harvard College, cum laude, with a B.A. in Biochemical Sciences. He went on to medical school at the New York University School of Medicine and completed his residency and fellowship training at Brigham and Women’s Hospital. He is a nationally and internationally recognized expert in health policy addressing disparities in the care of end stage renal disease and organ transplantation. He is currently serving (and has served) on several national committees addressing key policy issues in nephrology and transplantation and is past chair of the AST and OPTN/UNOS Minority Affairs Committees and member of the Board of Directors at UNOS, the governing body for organ allocation in the U.S. In his research endeavors, Dr. Williams’ most recent work focuses on transplantation across select ABO incompatible blood groups to increase access to transplantation for ethnic minority patients. The findings of his 2015 landmark study—published as the cover article for the American Journal of Transplantation—helped provide the basis for a new kidney allocation algorithm, resulting in an increase in the rate of transplantation for ethnic minority patients in this country.

Resident and Fellow Committee

The Resident and Fellow Committee for 2021–2022 is comprised of a group of residents who are interested in helping MGH CDI build a more inclusive and social environment for members to network and enjoy their medical residency stay. This year the following residents are holding committee positions:

CHAIR
Lucy Ogbu-Nwobodo, MD, MS, MAS
Adult Psychiatry (Resident PGY 4)

VICE CHAIR
Michelle Diop, MD, ScM
Internal Medicine (PGY 3)

EDUCATION AND CAREER DEVELOPMENT
Linda Herrera Santos, MD, PhD
Adult Psychiatry (Resident PGY 3)

EDUCATION AND CAREER DEVELOPMENT
Richard Bido-Medina, MD, PhD
Adult Psychiatry (PGY 3)

PUBLIC RELATIONS
Giovanni (Vanni) Rodriguez, MD
Emergency Medicine (PGY 2)

PUBLIC RELATIONS
Tafadzwa L. Chaunzwa, MD, MHS
Radiation Oncology (PGY 3)

COMMUNITY OUTREACH
Jossie Antoinette Carreras Tartak, MD, MBA
Emergency Medicine (PGY 3)

COMMUNITY OUTREACH
Ana-Lucia Garcia Guarniz, MD
Neurology (PGY 4)
Contact Us

You can reach the MGH CDI office by emailing cdi@mgh.harvard.edu, or visiting us at: massgeneral.org/cdi.

Social Media

Please follow the Center for Diversity and Inclusion social media handles for more up-to-date content around initiatives and programs.

Facebook
MGH for Diversity and Inclusion
facebook.com/mgh.cdi

Twitter
@MGHCDI
twitter.com/mghcdi

Instagram
@MGH_CDI
instagram.com/mgh_cdi
We wish to acknowledge former MGH President Dr. Peter Slavin for his steadfast support and unwavering commitment to CDI’s mission, and the work of advancing equity and inclusion at MGH.