Dear Students of the Committee for Diversity, Inclusion, and Social Justice (CDISJ) and Colleagues:

Thank you for the document that you shared on June 24. As you have noted, we are at an historic moment when we can create meaningful change. The opportunity to realize this change was one of the things that drew me to Yale just a few months ago. I look forward to continuing to engage with you as we work together to make this happen.

I affirm that Yale School of Medicine (YSM) is committed to addressing racism, promoting diversity, equity and inclusion, and eliminating healthcare disparities. This commitment is primary to our mission and our core values.

Importantly, YSM is a professional school that prepares students to become physicians and physician associates. Many of our faculty and staff practice their profession through patient care and this informs our missions of education and discovery. Our medical and physician associate students are not working solely to advance their own knowledge but also to join a profession that holds our responsibility for human life above all else. As I have observed previously, our oaths recognize that we are also members of the community. The Hippocratic oath includes the language, “I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.” The Declaration of Geneva includes the language, “I will not use my medical knowledge to violate human rights and civil liberties, even under threat...” A fundamental tenet of our profession is respect for persons and this must pervade all our interactions.

The Yale System of medical education is unique. It holds students accountable for their own education. It promotes curiosity and provides students with the ability to reason from first principles. This curiosity and critical thinking is invaluable as we are presented with new diseases such as COVID-19 and with the opportunity to develop new understandings of the mechanisms of old diseases. Curiosity and critical thinking are also vital as we address fundamental social and structural problems that affect health.

At YSM we must remain committed to discovery and knowledge as the path to improving the human condition. As academic clinicians and scientists we have the unique honor and responsibility of improving human health through careful
observation, analysis that does not accept any observation or dogma at face value, and
discovery of molecular mechanisms that enable us to develop life-saving therapies and
deliver them effectively. For example, the observation that genetic alterations in the
gene encoding Calcium Voltage-Gated Channel Subunit Alpha1 D (CACNA1D) are
common in aldosterone-producing adenomas of patients of African descent can inform
therapeutic strategies to control blood pressure (Namba et al Hypertension 2019). That
African Americans continue to suffer disproportionately from stroke, heart failure, and
kidney failure due to inadequately-controlled hypertension reflects structural racism.
Developing strategies that reduce systemic racism in health care also requires
hypothesis-testing and the application of rigorous methods.

Lastly, as a school of medicine and academic medical center we are ultimately in the
business of developing people. We must create an environment where all can thrive and
meet their full potential.

Here I address the goals that you have elucidated. Because they overlap strikingly with
the goals that I shared during my presentations of the State of the School on June 11
and June 15, I will not go through these point-by-point but articulate general principles
and the actions we have already begun. To achieve change, we cannot continue to apply
the same strategies that have not worked over the last decade or even centuries. I look
forward to continuing our conversations and working through additional actions as we
have started to do since February.

Yale School of Medicine is committed to increasing support for the wellbeing of
underrepresented students in medicine. I am working closely with Deputy Dean
Latimore to ensure that the Office for Diversity, Equity and Inclusion (DEI), including
Diversity, Inclusion, Community Engagement and Equity (DICE), has adequate and
appropriate resources. It is important that available resources be publicized and readily
accessible, and YSM will update and maintain informational platforms. In follow-up to a
request from CDISJ, the Admissions Office recently created an opt-in list for applicants
to YSM who wish to be contacted by student groups. In considering the administrative
structure for both DEI and DICE, we will follow best practices and avoid creating
inefficient bureaucracy. Where we are investing in Community Engagement and Health
Justice (see below) we will avoid creating duplicate structures in DICE. We will also avoid
creating unnecessary group hierarchy. For example, the Office for Women in Medicine is
currently housed in DEI, as is the student-focused DICE; therefore, it would be
inappropriate to move the Office for Women in Medicine into DICE.
Today, YSM and YSPH provide significant financial aid for our students primarily through endowment revenue. The maximum annual unit loan amount was reduced to $15,000 per year in 2018. According to the AAMC, the average debt of our medical school graduates falls in the lowest decile of medical schools in the country. As indicated in the State of the School, we are committed to increasing financial aid for students. Even as a 10% decline in clinical revenue during the COVID-19 pandemic required purse tightening, I have committed to maintaining financial aid at its current level. Through the generosity of several donors, we recently increased funding for the “hardship account.” Processes for access to these resources must be equitable and transparent. There is also significant need for increased mental health resources for all students at Yale and YSM, including those URiM. To this end, we are reviewing possible strategies to increase access to behavioral health professionals and to ensure that students are aware of the resources that exist. Professionals providing mental health support must be trained and committed to providing care that meets the specific needs of each student.

**YSM will continue curricular reform to develop structural competency and promote anti-racism.** Six months ago, we tapped Dr. Beverly Sheares to serve as an equity thread leader and provided support for an associate director in the Office of Education. Yale University provides a unique environment in which to develop educational collaboratives with those with expertise in law, behavioral science, etc. The Yale System affords students the opportunity to dive deeply into their studies to understand the mechanism of how cultural and structural factors or individual genetic factors — not race — cause disease or alter responses to therapies. During the COVID-19 pandemic, four of six new clinical electives were developed by students; these serve as a model for the development of courses.

Importantly, we have launched a search for a new Deputy Dean for Education. Transitions in leadership bring additional opportunity for innovation. The new Deputy Dean will have the opportunity to lead a review of the entire educational program and to make changes. This review should not delay the implementation of changes to the curriculum already identified as needed, and we will work closely with students to ensure that these are enacted. Similarly, we will ensure that all involved in education, including graduate medical education, are adequately trained to recognize and address discrimination, racism and sexism.

**We must foster and maintain a genuinely inclusive environment at YSM for students, faculty, and staff who are women and/or underrepresented in medicine.** When I
accepted the position of Dean of YSM, I appreciated that we have much work to do, but I also understood from my conversations first with the search committee and later with faculty, staff, and students that there was a readiness for change. Three climate committees focusing on leadership, engagement and clinician well-being had just completed and shared their work. For the last several months Deputy Dean Latimore has led the development of a strategic plan for the Office of Diversity, Equity and Inclusion. While still under development, this plan includes education in unconscious bias, micro-aggressions, ally-ship and bystander training, crucial conversations/dialogues, and leading across differences. To address behaviors such as racism, gender discrimination and harassment, and bullying, we must hold people accountable, regardless of rank or position. For this reason we have created a standardized approach to behavior (Beyond Sterling Hall March 16, 2020 and June 29, 2020); the approach includes counseling and behavioral interventions but also consequences for repeated and egregious behaviors. We are launching a system for confidential reporting and tracking patterns at the individual or unit level in the newly reconstituted Office for Academic and Professional Development. Since February, we have completed climate reviews of seven departments, sections, or labs.

Accountability also requires that we select value-driven leaders and provide them with training and tools to hold others accountable. In the last four months we have revised our search processes for senior leadership and focused on constituting inclusive search committees. We have revised the annual faculty survey and review process for senior leaders and are providing coaching for new leaders.

As I shared in the State of the School, I have established a committee to review departmental compensation plans and revise compensation guidelines to ensure equity, reward desired behavior, and meet the need for “mastery, autonomy and purpose,” highlighted by Daniel Pink in his book Drive. As I also shared, we can make our space more inclusive. Beginning in August, the portraits on the I corridor of Sterling Hall will be taken down and the portraits of YSM deans moved to that corridor to make room for additional exhibits developed under the leadership of the Committee for Art in Public Spaces.

YSM is investing in recruiting and retaining trainees and faculty who are underrepresented in medicine. While 28% of our students are URiM, only 9.4% of assistant professors are URiM. In order to retain our best and brightest, we must develop a strong culture of mentorship. We are investing in career and professional development programs for our faculty. In my experience, attention to career
development and mentorship particularly benefits women and URiM faculty. Career development resources make the appointment and promotion process transparent. Mentors can empower students, trainees, and faculty to say no to institutional tasks that do not advance their career, for example. We must also define criteria that distinguish paid institutional service. We have begun to conduct exit interviews with faculty who have left YSM in the last three years. We will also start to conduct “stay interviews,” in which we identify needs of trainees and faculty proactively. We must regularly review parity not only of salaries but of other resources. With this in mind, we recently revised our policies for endowed professorships, such that professorships appointed in 2020 and beyond are subject to review on a ten-year cycle.

**YSM is making substantial investments in Community-Based Participatory Research (CBPR), Participatory Action Research (PAR), health disparities research, and anti-oppression scholarship and will continue to promote anti-racist practices in research.** In collaboration with Yale Law School, we recently founded the SEICHE Center for Health and Justice to identify and apply strategies to improve the lives of individuals and communities impacted by incarceration in Connecticut, nationally, and globally. The center will focus on health services and outcomes research, and will identify assets in communities that have been impacted by mass incarceration that can become the basis of interventions to improve health. In addition to research and legal cores, the center will create educational programs to train students in health equity and incarceration. A Steering Committee on Community Projects was established in 2005 to support community based participatory research activities within the Robert Wood Johnson Foundation Clinical Scholars Program, now the National Clinical Scholars Program. This group of over 30 community leaders from the non-profit and public sectors has guided dozens of projects and initiatives, including many that serve as national models. Now a resource across the health professional schools and including recent members from other local academic institutions, the Steering Committee remains committed to community accountable research that is designed, implemented, interpreted, and disseminated through genuine community-academic partnership. We are furthering our investment with the launch of the Bridge Center for Health Equity Partnerships, a new infrastructure that will unify our institution's community engagement and outreach programs and advance partnered scholarship that addresses the urgent health priorities faced in Black, Indigenous and People of Color (BIPOC) and other marginalized communities. The Bridge Center will also expand opportunities for education and training, clinical redesign, and community outreach.
Further, ten years ago in partnership with the Connecticut AME Zion Churches and Junta for Progressive Action, YSM formed the Yale Cultural Ambassadors program, which has addressed issues of diversity and inclusion in our clinical research, working on areas such as prostate cancer, diabetes, substance abuse, mental health and many other diseases disproportionately impacting communities of color. The Ambassadors have supported expansion of their important work to partners in North Carolina and in Puerto Rico. More recently, given the disparities highlighted by the COVID-19 pandemic, the Ambassadors asked that we pivot our work together to address specific needs in their community and to help develop stronger pipeline programs in direct partnership with the group. We have been actively working with our community partners on these bidirectional initiatives for the past several months, with other activities in the early stages of development, including a focus on flu vaccination and uptake of an eventual COVID-19 vaccine.

The Ambassadors have offered to meet in small groups with students and others to share more about the essential partnership that has evolved between the school and leaders who understand the needs of their communities.

The Yale School of Medicine community will engage in the public dialogue on the role of the Yale Police Department. YSM denounces police brutality against Black people and all other forms of abuse. In recent weeks, Yale University released a statement regarding the Yale Police and the report of a comprehensive assessment of its campus police department by 21CP Solutions, as a first step in reforming practices. It is important that we engage in open, safe and respectful dialogue about the role of the police on the YSM campus and that all voices are heard. We will schedule a gathering at YSM to allow for this dialogue. In addition, we will work collaboratively with the university and Yale New Haven Health to promote techniques of de-escalation and to review and revise educational materials related to security.

Yale School of Medicine is committed to serving and protecting the rights of all patients. This includes patients who are BIPOC; patients without formal immigration status; patients who are lesbian, gay, bisexual, transgender, and queer (LGBTQ+); patients who are intersex or with differences of sexual development (DSD); and patients who are uninsured and underinsured. Ensuring that students and residents are adequately supervised is fundamental. (On a personal note, I have recently completed credentialing for the HAVEN free clinic and look forward to working with students there.) Bridgeport, Yale New Haven and Greenwich Hospitals have been awarded Human Rights Campaign (HRC) leader status for meeting all the criteria for LGBTQ
patient-centered care in the Healthcare Equality Index. We will continue to evaluate the quality of this care. This past year, Yale New Haven Hospital provided $426.6 million and Yale Medicine $16.3 million in charity and un-reimbursed care.

YSM further supports the important work of the Office of Graduate Medical Education (GME) related to well-being and diversity, equity, and inclusion under the leadership of Drs. Andrea Asnes and Inginia Genao, respectively. The Office of GME provides access to community-based behavioral health providers for residents and fellows. With the support of Steve Huot, Associate Dean of Graduate Medical Education, in May two of our residents established “The Yale Association for Trainees with Chronic Illness” that began as a virtual community to provide support to self-identified residents and fellows at risk for severe infection from COVID, with the aim of becoming an established group for national advocacy, guidance of GME support, and events.

As Dean of Yale School of Medicine, I am committed to communication and transparency. As you are aware, we have begun a formal review of the school’s mission statement and many of you have provided input. This work precedes the conduct of a formal strategic planning process for education, following the identification of a new Deputy Dean for Education. We will include students on search committees for student-facing leadership positions. I look forward to engaging students in appropriate roles related to school governance and will take every opportunity to mentor you when you are serving in those roles. I look forward to discussing and prioritizing our plans with the Medical Student Council and, specific to diversity, equity, and inclusion issues, with the CDISJ. I am committed to presenting data on our progress at the annual State of the School, and as I shared in this presentation in June, we are actively engaged with members of the community to identify priorities in addressing health inequities.

In closing, as I recently wrote to the broader YSM community, every member of our community has the ability to contribute to the work that lies ahead. I look forward to working together to realize our common vision for the future.

Sincerely,

Nancy J. Brown, MD