

**Office of the President**

**TO MEMBERS OF THE ACADEMIC AND STUDENT AFFAIRS COMMITTEE:**

**DISCUSSION ITEM**

*For Meeting of May 15, 2019*

**ACCOUNTABILITY SUB-REPORT ON DIVERSITY: UC HEALTH SCIENCES  
DIVERSITY TRENDS AND OUTCOMES**

**EXECUTIVE SUMMARY**

The Annual Accountability Sub-Report on Diversity at the University of California is presented to the Committee on Academic and Student Affairs in May 2019. The report is prepared as part of ongoing efforts to ensure greater accountability across the UC system using data contained in the Accountability Report at the University (<http://accountability.universityofcalifornia.edu/2018>).

This report provides an overview of the diversity trends and outcomes in the University's 18 health professions schools and five academic medical centers—organized as UC Health. This report provides diversity trend data for UC Health students, faculty, and staff, as well as highlights promising programs designed to increase diversity and foster inclusive campus and workplace climates.

Key findings include the following:

- The proportion of underrepresented students in the health sciences has doubled over the last decade. (11.5 percent to 20.4 percent) but remains lower than the proportion of underrepresented undergraduate students at UC. The proportion of women faculty increased from 34.7 percent in 2006 to 45.2 percent in 2018. Disciplines like medicine and dentistry observed progress in the hiring of women faculty.
- UC Health sciences schools employ more non-Senate faculty members than Senate faculty members; the proportion of women and underrepresented faculty are higher in non-Senate faculty compared with Senate faculty.
- Non-white academic and non-academic employees make up nearly 2 out of 3 (63.2 percent) of all staff in the health sciences. The proportion of staff in underrepresented groups (URGs) in the Professional Support Staff classification (PSS) is notably higher than in the management and senior management categories.
- UC health sciences programs operate a wide range of programs and services aimed at diversifying the health science student body and professoriate. Promising efforts include the systemwide Programs in Medical Education (PRIME) and UC Berkeley's Biology Scholars Program.

## **BACKGROUND**

Today, the University's 18 health professions schools and five academic medical centers—organized as UC Health—are international leaders in the education of health professionals, in research that develops new cures and treatments, and in public service that provides health care that is accessible to all Californians, regardless of ability to pay. UC's health sciences schools and programs include the following:

- Dentistry (UCSF, UCLA)
- Medicine (UC Davis, UCSF, UCLA, UC Riverside, UC Irvine, UC San Diego)
- Nursing (UC Davis, UCSF, UCLA, UC Irvine)
- Optometry (UC Berkeley)
- Pharmacy (UCSF, UC San Diego)
- Public Health (UC Berkeley, UCLA)
- Veterinary Medicine (UC Davis)
- Other health sciences

UC's health science schools are among the best in the nation, according to U.S. News & World Report 2019 rankings. All across the state, each of the UC academic medical centers has earned a place among U.S. News & World Report's "Best Hospital" rankings.

UC Health collectively employs over 9,900 faculty and over 76,400 academic and non-academic staff (excluding student staff and residents). Nearly 15,000 students and health/medical residents are enrolled in UC Health's schools and residency programs. Approximately 86 percent of UC health sciences students and 77 percent of UC medical residents are expected to remain in the state after completing training or education, based both on historical patterns and national data published by the Association of American Medical Colleges. This high rate of retention makes UC Health one of the primary and most successful sources for the training and education of health professionals for California.

California is home to the most diverse population in the nation, yet this diversity is not reflected in its health professions workforce. The imperative for increasing diversity in health care has been well documented and frames the importance of these efforts as a means to increase access to care for underserved communities, reduce health disparities, shape a more inclusive research agenda, and enhance the cultural competence of providers. It also recognizes that unequal educational opportunities and other forms of exclusion and discrimination persist and must be addressed. Understanding measures of success that extend beyond compositional diversity, yet contribute to institutional excellence in UC's teaching, research, and service missions, are becoming increasingly important for driving change using evidence-based, data-driven approaches for improving diversity and inclusion.

In light of this imperative, as part of UC Health's Strategic Plan goal to "Advance Progress in Promoting Diversity and Inclusion," UC Health has convened a new UC Health Diversity and Inclusion Task Force to identify effective policies, practices, and/or assessments that aim to improve diversity and campus climate, increase accountability, and create opportunities to share

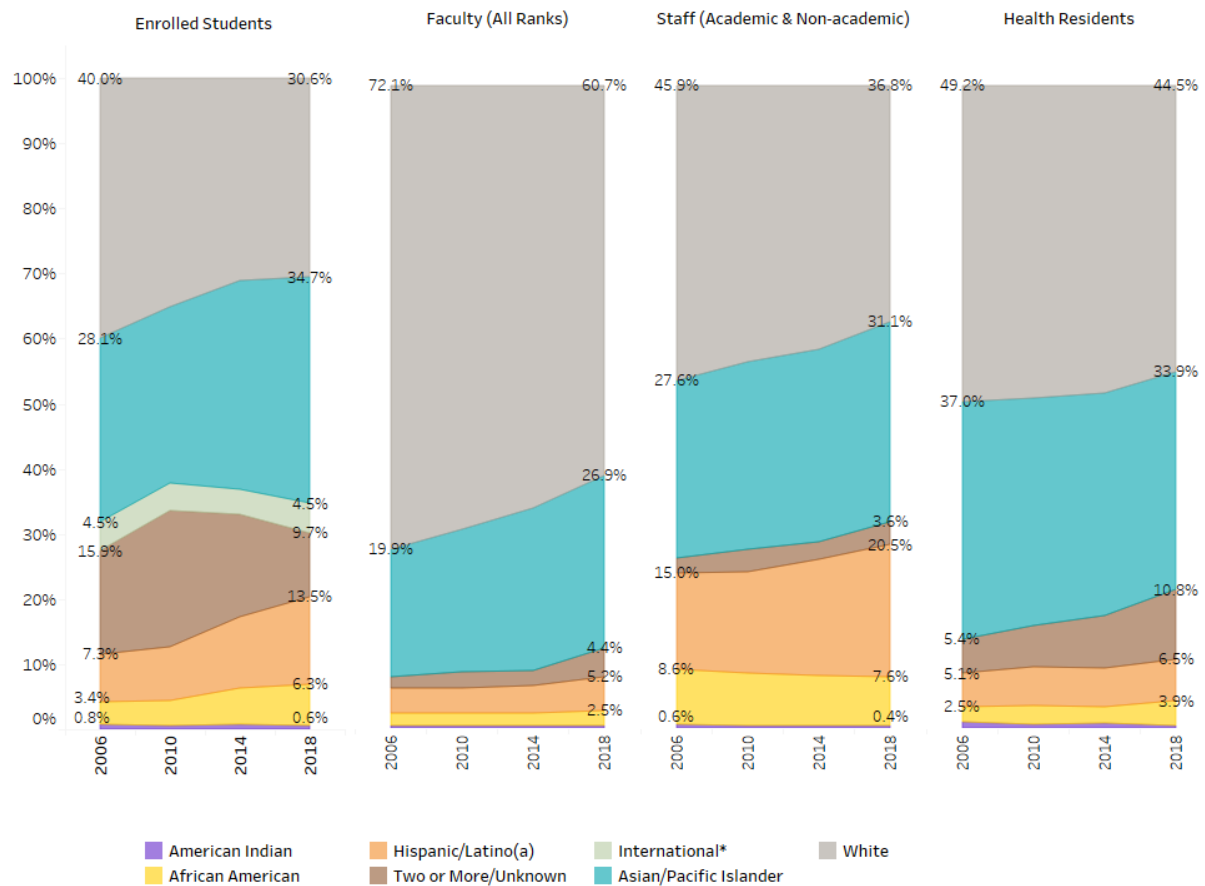
best practices across the 18 UC health professional schools. The group has also been asked to identify strategies and recommendations for improving diversity and inclusion across UC's health professional schools. The taskforce is expected to produce an initial report in 2020.

### **KEY FINDINGS**

This report presents data and information on the diversity of students, faculty, staff, and medical residents enrolled or employed at UC's 18 health professional schools and five academic medical centers. Figure 1 compares the racial/ethnic composition of the UC health sciences community across four populations: students, faculty in all ranks, academic and non-academic staff, and health/medical residents. As shown in Figure 1, the diversity of the UC health sciences community has increased between 2006 and 2018. The percentage of students from underrepresented groups (URGs) in the health sciences has doubled over the last 12 years, from 11.5 percent in 2006 to 20.4 percent in 2018. After years of stalled progress, the percentage of URG faculty in all ranks increased from 6.3 percent in 2006 to 8.0 percent in 2018.

Figure 1 also shows that non-white academic and non-academic employees make up nearly 2 out of 3 (63.2 percent) of all staff in 2018, with the largest growth since 2006 occurring among Hispanic/Latino(a) staff. Among UC health science residents, who are drawn from health sciences schools throughout the state and across the United States, the percentage of both Hispanic/Latino(a)s and African Americans has increased slightly over the last 12 years.

Figure 1: Racial/Ethnic Distribution of UC Health Students, Faculty, Staff, and Health Science Residents: Year 2006–2018



	Enrolled Students				Faculty (All Ranks)				Staff (Academic & Non-academic)				Health Residents			
	2006	2010	2014	2018	2006	2010	2014	2018	2006	2010	2014	2018	2006	2010	2014	2018
White	40.0%	35.0%	31.2%	30.6%	72.1%	69.1%	65.7%	60.7%	45.9%	43.0%	41.2%	36.8%	49.2%	48.7%	47.9%	44.5%
Asian/Pacific Islander	28.1%	27.1%	31.9%	34.7%	19.9%	22.0%	25.3%	26.9%	27.6%	29.1%	29.9%	31.1%	37.0%	35.2%	34.6%	33.9%
Hispanic/Latino(a)	7.3%	8.3%	11.0%	13.5%	4.0%	4.0%	4.4%	5.2%	15.0%	15.9%	18.1%	20.5%	5.1%	6.0%	5.9%	6.5%
African American	3.4%	3.8%	5.6%	6.3%	2.0%	1.9%	2.0%	2.5%	8.6%	8.0%	7.8%	7.6%	2.5%	2.9%	2.7%	3.9%
American Indian	0.8%	0.6%	0.7%	0.6%	0.3%	0.4%	0.3%	0.3%	0.6%	0.5%	0.4%	0.4%	0.9%	0.5%	0.7%	0.3%
Two or More/Unknown	15.9%	20.9%	15.7%	9.7%	1.8%	2.6%	2.3%	4.4%	2.3%	3.6%	2.6%	3.6%	5.4%	6.6%	8.2%	10.8%
International	4.5%	4.2%	3.9%	4.5%												
Grant Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

	Enrolled Students				Faculty (All Ranks)				Staff (Academic & Non-academic)				Health Residents			
	2006	2010	2014	2018	2006	2010	2014	2018	2006	2010	2014	2018	2006	2010	2014	2018
White	3,007	2,820	2,584	2,633	4,794	5,103	5,505	5,998	25,427	26,073	26,915	28,085	2,191	2,412	2,638	2,703
Asian/Pacific Islander	2,115	2,180	2,646	2,988	1,321	1,627	2,118	2,658	15,287	17,630	19,560	23,733	1,648	1,743	1,904	2,062
Hispanic/Latino(a)	550	666	913	1,160	265	296	367	519	8,286	9,629	11,839	15,679	226	299	326	397
African American	258	309	460	544	131	140	165	243	4,787	4,847	5,104	5,827	110	142	147	235
American Indian	58	47	58	54	20	28	27	33	305	281	272	326	41	27	40	21
Two or More/Unknown	1,194	1,684	1,301	836	117	189	192	437	1,254	2,156	1,714	2,749	239	325	452	657
International	335	341	326	390												
Grant Total	7,517	8,047	8,288	8,605	6,648	7,383	8,374	9,888	55,346	60,616	65,404	76,399	4,455	4,948	5,507	6,075

Source: UC Data Warehouse for students, UC Corporate Personnel System for employees.

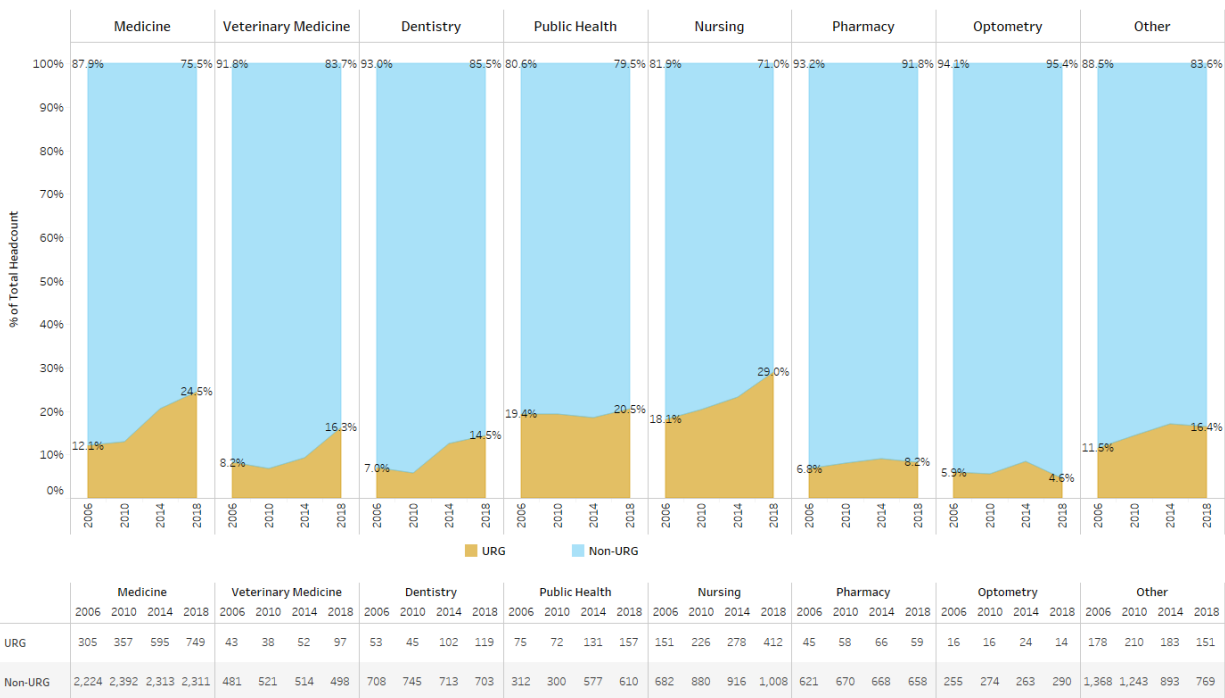
\* International employees are included in corresponding ethnic groups.

Staff category includes academic as well as non-academic staff titles and excludes student staff.

**Student Enrollment:** The proportion of underrepresented students in the health sciences has doubled over the last decade (11.5 percent to 20.4 percent) but remains lower than the proportion of underrepresented undergraduate students.

Figures 2 and 3 display the racial/ethnic and gender diversity of UC Health students across disciplines. The proportion of UC health sciences students from underrepresented groups (URGs) has grown from 11.5 percent in 2006 to 20.4 percent in 2018. Overall, this is lower than the percentage of undergraduate URG students at UC (29 percent) and higher than the percent of academic doctoral students at UC (14 percent). The programs with the largest proportion of URG students include nursing (29.0 percent), medicine (24.5 percent) and public health (20.5 percent) while the programs with the lowest URG proportions are optometry (4.6 percent) and pharmacy (8.2 percent)

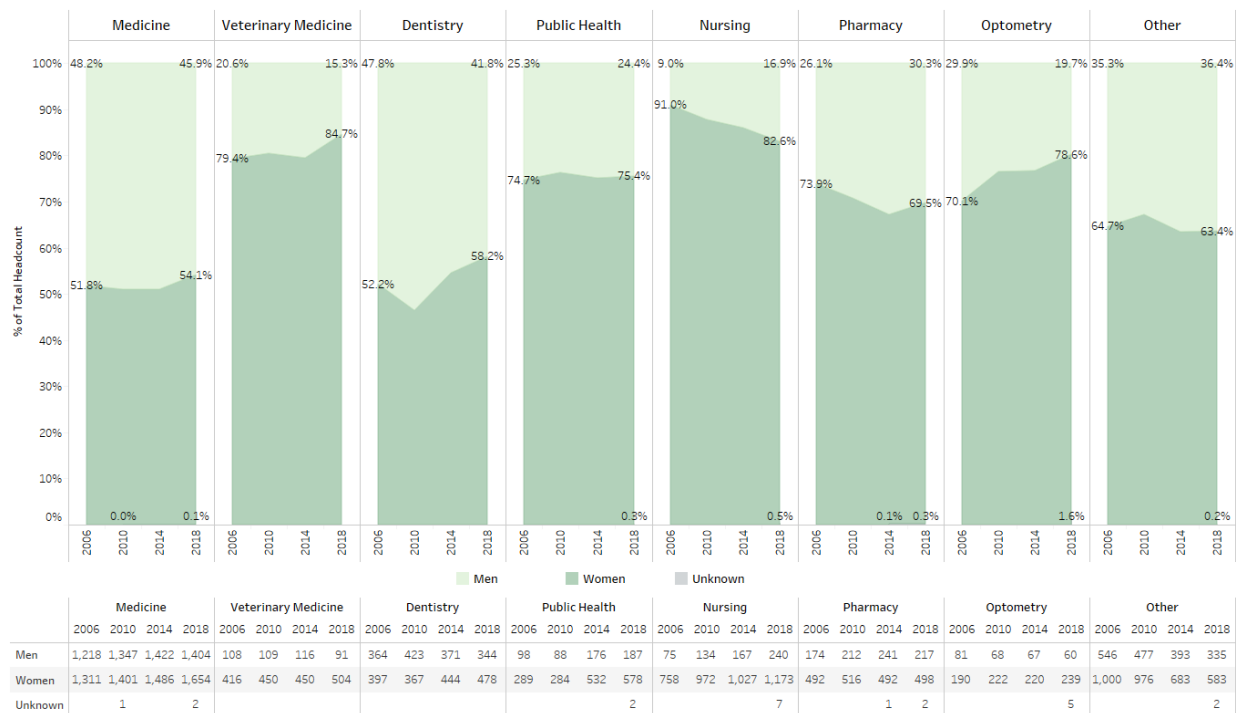
Figure 2: Racial/Ethnic Diversity among UC Health Students by Discipline: Year 2006–2018



Source: UC Data Warehouse

The proportion of enrolled women students has remain steady over time, with women making up about two-thirds (66.3 percent) of all UC health sciences students. The programs with the largest proportion of women include veterinary medicine (84.7 percent), nursing (82.6 percent) and optometry (78.6 percent). As a comparison, women make up 44 percent of academic doctoral degree students.

Figure 3: Gender Diversity among UC Health Students by Discipline: Year 2006–2018



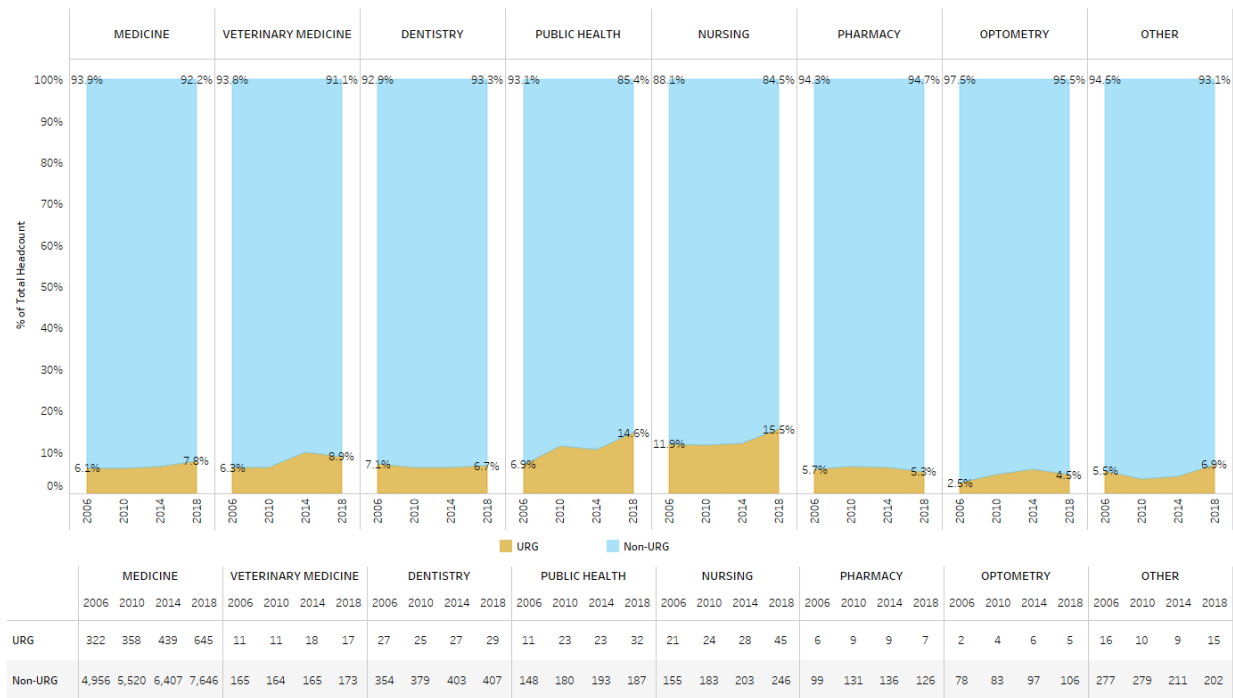
Source: UC Data Warehouse

**Faculty: The proportion of women health science faculty has increased significantly, with more gradual increases occurring in the racial/ethnic diversity of the health sciences.**

UChealth sciences schools have experienced gradual increases in racial and ethnic diversity of its faculty, and significant growth in terms of its gender diversity, as shown in Figures 4 and 5. The share of faculty from underrepresented racial and ethnic groups (URGs) increased from 6.3 percent in 2006 to 8.0 percent in 2018. This percentage increase may be due in part to the overall increase in the total number of faculty members in medicine and nursing which nearly doubled between 2006 and 2018 (Figure 4).

At the same time, significant gains have been made in gender diversity, with the proportion of women faculty increasing from 34.7 percent in 2006 to 45.2 percent in 2018. Disciplines like medicine and dentistry observed considerable progress in the hiring of women faculty (Figure 5).

Figure 4: Racial/Ethnic Diversity among UC Health Faculty (all ranks) by Discipline: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

Figure 5: Gender Diversity among UC Health Faculty (all ranks) by Discipline: Year 2006–2018

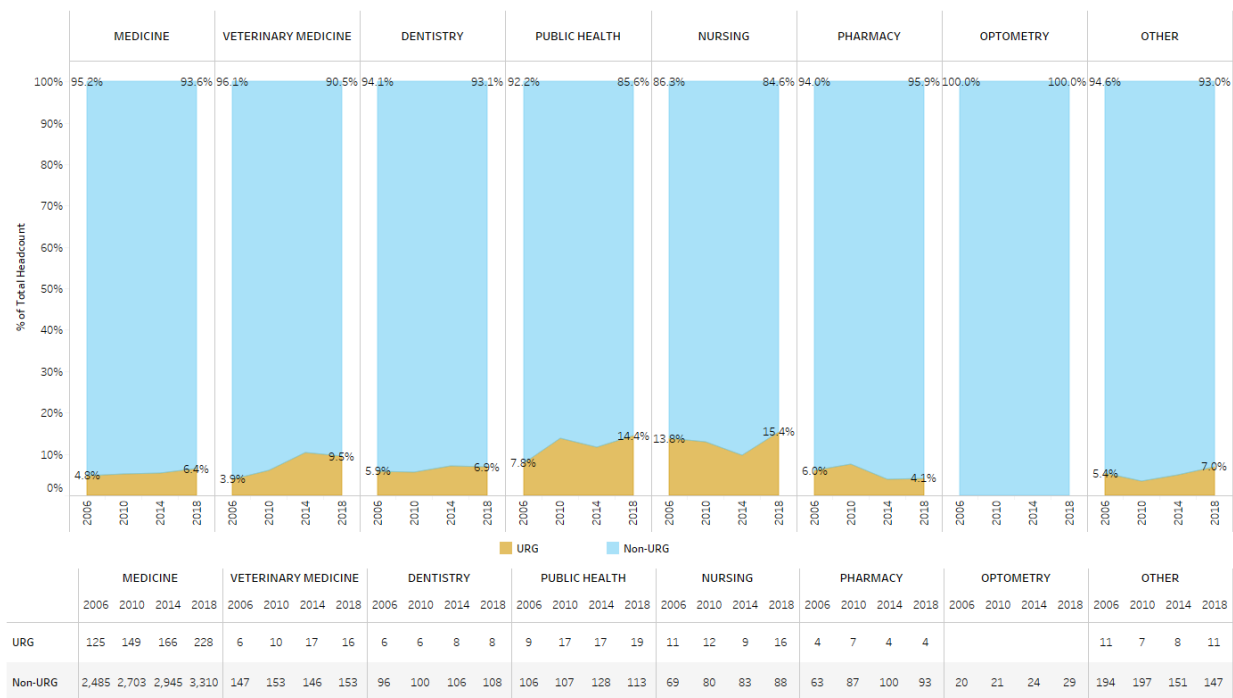


Source: UC Corporate Personnel Data Warehouse

Figures 6 through 9 display the racial/ethnic and gender diversity of Senate and non-Senate faculty in the health sciences. It is important to note that, unlike the case for general campus departments, the health sciences have comparatively fewer ladder-rank faculty positions or budgeted faculty full-time equivalents (FTEs). Health Sciences departments also make use of the full range of faculty titles, so that faculty responsibilities in research, teaching, clinical practice, outreach, and service can be supported. Those faculty in Senate titles maintain a broader range of responsibilities, including teaching, research, service and often clinical practice as well. Non-Senate faculty are often more focused on clinical, teaching, and mentoring activities and may also be involved in clinically-based scholarship. Overall, the number of non-Senate faculty (about 5,550) outnumber the Senate faculty (about 4,300) in the health sciences schools

Figures 6 and 9 show that Non-Senate faculty are more diverse than Senate faculty across most disciplines. For example, in 2018, seven percent of Senate faculty are from underrepresented groups, compared to 8.9 percent of non-Senate faculty (Figures 6 and 8). In terms of gender diversity, 35.5 percent of Senate faculty are women, whereas 52.9 percent of non-Senate faculty are women (Figures 7 and 9).

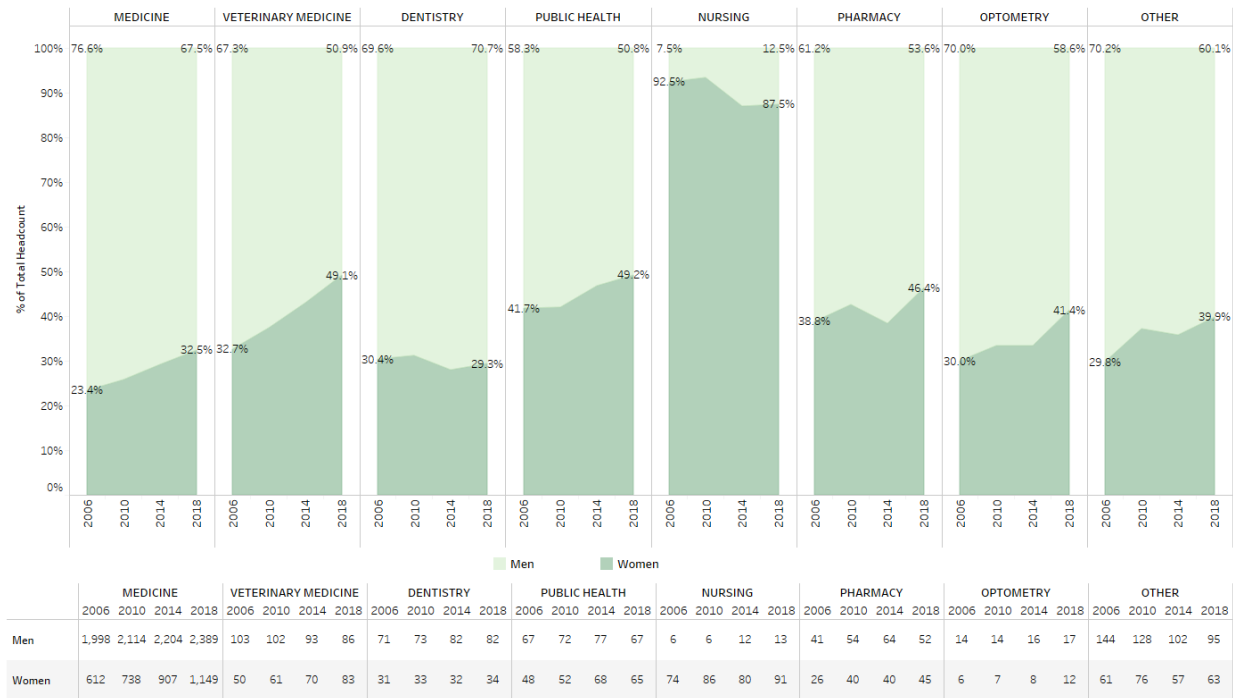
Figure 6: Racial/Ethnic Diversity among UC Health Senate Faculty by Discipline: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

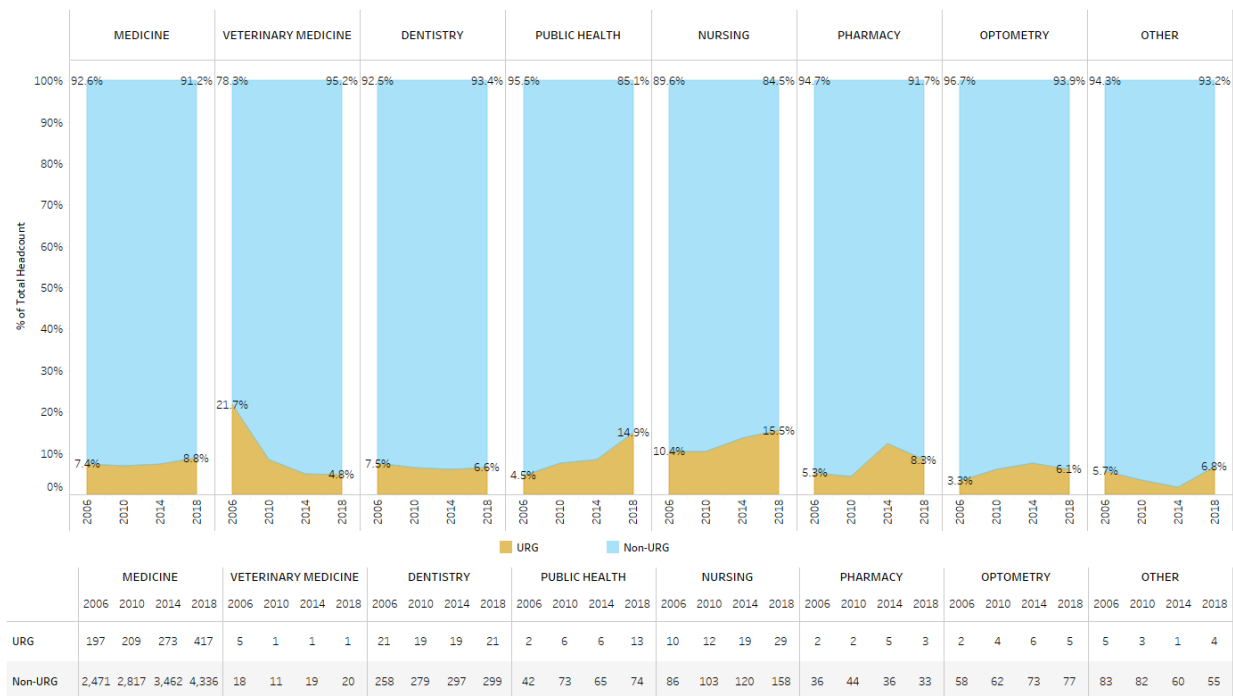


Figure 7: Gender Diversity among UC Health Senate Faculty by Discipline: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

Figure 8: Racial/Ethnic Diversity among UC Health Non-Senate Faculty by Discipline: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

Figure 9: Gender Diversity among UC Health Non-Senate Faculty by Discipline: Year 2006–2018

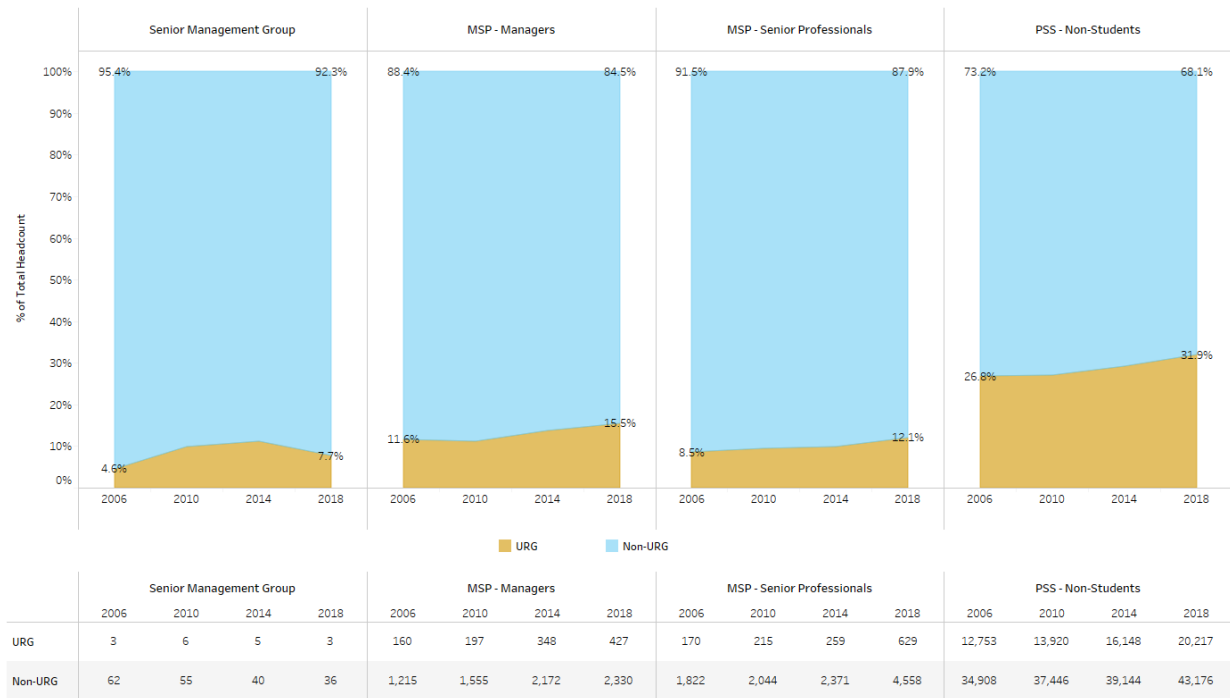


Source: UC Corporate Personnel Data Warehouse

**Staff: Racial and gender diversity is greatest at the professional support staff level.**

Non-white academic and non-academic employees make up nearly 2 out of 3 (63.2 percent) of all staff, with the largest growth since 2006 occurring among Hispanic/Latino(a) staff. However, when disaggregated by job classification as displayed in Figure 10, the proportion of URGs in the Professional Support Staff classification (PSS) is notably higher than in the categories of MSP-Senior Professionals, MSP-Managers, and Senior Managers Group (SMG). The representation of women has grown at the MSP-Senior Professional levels, has stayed relatively steady at the MSP-Manager and PPS levels, but has decreased in SMG (see Figure 11).

Figure 10: Racial/Ethnic Diversity among UC Health Staff: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

Figure 11: Gender Diversity among UC Health Staff: Year 2006–2018



Source: UC Corporate Personnel Data Warehouse

## **PROMISING PROGRAMS FOR INCREASING DIVERSITY AND INCLUSION**

The UC health sciences system has mission-driven programs designed to recruit and train physicians and other health providers to meet the needs of California's increasingly diverse and aging population. The following section describes selected promising programs and efforts to meet statewide needs and to enhance diversity among students, faculty and staff in the health sciences.

### **Efforts to increase undergraduate, graduate and professional student diversity**

The University of California continues to make concerted efforts to increase the diversity of all its undergraduate and graduate programs, including its health professions programs. Educational and community outreach programs are established elements of all UC health professions schools. Collectively, these programs are intended to strengthen and expand educational pathways, encourage students from diverse backgrounds to consider the health professions as a career choice, mentor and support them as they pursue science and health related educational goals, and provide a variety of resources to ensure their academic and personal success. Although there are well over 100 programs currently offered by UC health professions schools, the following are examples of model programs that continue to achieve success in increasing student diversity in UC health sciences programs.

#### Latino Center for Medical Education and Research

The Latino Center for Medical Education and Research (LaCMER), based at UC San Francisco Fresno, is devoted to addressing the severe shortage of Latino physicians and other health care professionals in the San Joaquin Valley. Its mission is to prepare culturally competent health care professionals who will return to the region to practice. The Center has developed a rigorous and comprehensive educational pathway within select public schools in Fresno County by recruiting, mentoring and tutoring economically and educationally disadvantaged students. The program has supported high school students for the last 20 years; 100 percent of those students have graduated from high schools at which the average graduation rate is under 50 percent, and all of these students have gone on to attend four-year colleges. Students from the program have high college graduation rates, and many have entered into health professions schools in medicine, nursing, public health, behavioral health, pharmacy, and social work. The majority have returned to practice in the Central Valley.

#### Biology Scholars Program

The Biology Scholars Program (BSP) is an undergraduate program at UC Berkeley designed to promote the success of students from groups historically underrepresented in the biological sciences. Program components include academic workshops and study groups, professional seminars, research internships, and community service opportunities. The BSP challenges the traditional beliefs about who can or should pursue science. Over the past 26 years, more than 3,500 undergraduates have completed the program. Of these, 60 percent have been from underrepresented groups, 70 percent have been women, and 80 percent have come from low-

income backgrounds or were first-generation college goers. On average, 85 percent of BSP graduates—most of whom plan to pursue careers in health fields—are accepted to medical school. In terms of diversifying the STEM professoriate, at least 25 BSP alumni hold faculty positions at UC and other universities in California and the rest of the nation.

#### UC Post-Baccalaureate and Conditional Acceptance Programs

UC post-baccalaureate (post-bacc) programs are designed to assist capable and dedicated students from disadvantaged backgrounds in gaining admission to health professions school. Through a combination of advanced science coursework, test preparation, collaborative study and personalized support in preparing for the professional school application process, participants are able to distinguish themselves as competitive candidates for health professions schools. Approximately 46 percent are Latino and 25 percent are African-American. Eighty-three percent of program participants gain admission to medical school. Forty-two percent practice in federally designated underserved areas, compared with ten percent of the general population. Sixty-one percent practice primary care, compared with 40 percent of the general population.

The Conditional Acceptance Programs (CAP) at UC San Diego and UC Irvine offer programming and strategies, similar to those offered by post-baccalaureate programs, to promising future physicians who need additional academic preparation for medical school. CAP students are admitted to medical school upon completion of the year-long program if certain conditions are met (e.g., coursework is completed with a 3.5 GPA).

#### Programs in Medical Education (PRIME)

UC Programs in Medical Education (PRIME) offer specialized education, training and support for UC medical school students who wish to acquire added skills and expertise as they pursue careers caring for underserved populations in both rural communities and urban areas. Each program has an area of focus that is selected based upon faculty expertise, the populations served by each school and its medical center, and other local considerations. Areas of focus include: rural health and telemedicine (Davis); the Spanish-speaking Latino community (Irvine); leadership and advocacy (Los Angeles); health disparities and health equity (San Diego); the urban underserved (San Francisco); and the San Joaquin Valley (Davis/San Francisco). The PRIME program's focus on underserved populations continues to attract a more diverse group of students. Systemwide, 354 PRIME students are enrolled for the 2018–19 academic year, and approximately 64 percent are from groups that are underrepresented in medicine.

#### UC Davis Accelerated Competency-based Education in Primary Care

Since 2013, UC Davis School of Medicine (UCDSOM) has trained 29 primary care-bound students to complete their MD degrees in three years through their Accelerated Competency-based Education in Primary Care (ACE-PC) program. Students start medical school early, have a longitudinal primary care clinic starting in the first week, and complete a curriculum tailored for a career in primary care. Nearly 80 percent of ACE-PC students are from disadvantaged

backgrounds, 60 percent are from a community underrepresented in medicine, and 75 percent speak a second language that is not English. ACE-PC students graduate with less educational debt and enter the primary care workforce one year earlier. All ACE-PC students receive scholarships worth from \$20,000 up to \$45,000 funded by the Permanente Medical Group and UCDSOM.

### **Efforts to increase faculty diversity**

UC has expanded its efforts to recruit, support and retain a diverse faculty at each of its campuses. Several recently initiated or expanded programs demonstrate real potential to increase diversity at UC.

#### Advancing Faculty Diversity Grants

For three years, the State has funded UC's Advancing Faculty Diversity Grant program, in which campus academic units have competed for funding that can be used to support new efforts to diversify the ladder-rank faculty. UCSF ran a successful program in the 2017–18 year and succeeded in recruiting accomplished new faculty who will make major contributions to diversity. In this current year, the School of Medicine at UC Davis is part of a campuswide program to increase faculty diversity, and the School of Public Health at UC Berkley is focused on improving the workplace climate for underrepresented faculty and students. The President is extending funding for the program into future years through an additional commitment of \$7.1 million to the faculty diversity pipeline.

#### President's Postdoctoral Fellowship Program (PPFP)

The President's Postdoctoral Fellowship Program (PPFP) is a signature UC program that recruits top post-doctoral researchers to UC, scholars who are interested in faculty careers and whose research, teaching, and service will contribute to diversity and equal opportunity at UC. The program has a long-term strength in the life sciences, and many of the post-doctoral fellows in life sciences join labs in UC health sciences schools. Both UCSD and UCSF have developed a culture of advocacy for PPFP fellows, and their faculty Principle Investigators (PIs) often partially or fully fund the fellows from their grant money, allowing the program to increase its capacity. Just last year, President Napolitano and Provost Brown extended the eligibility for the Faculty Hiring Incentive to professional schools, and PPFP fellows are now joining the health sciences ladder-rank faculty in increasing numbers.

#### Center for the Advancement of Multicultural Perspectives on Science

The vision of forming a community of scholars who bring a range of gendered and multicultural perspectives to STEM science became a reality at UC Davis through the creation of the Center for the Advancement of Multicultural Perspectives in Science (CAMPOS). The program initially prioritized the hiring of UC Davis faculty whose contributions to research, teaching and service addressed issues affecting Latinas in STEM. Over time, the vision grew to include other

underrepresented community perspectives. To date, twenty-five ladder-rank faculty comprise the CAMPOS community of faculty scholars.

**Efforts to improve campus and workplace climate**

UC health professions schools are developing programs dedicated to fostering a more inclusive climate for all. Berkeley, Davis, Irvine and San Francisco have Multicultural Resource Centers, and UCSF also has the LGBT Resource Center. The campuses also offer undocumented student support services and have advisory committees on campus climate, culture, and inclusion. In addition, UC health professions schools provide education and training to support faculty and staff members to better understand diversity and inclusion issues in the workplace. Trainings include topics such as unconscious bias and cultural humility. For example, UCSF has started to work with its medical center to help reduce language and literacy-associated disparities in patient care.