EXTERNAL STAKEHOLDER FEEDBACK INFORMING NIH FIRST PROGRAM

In planning for the now initiated **Faculty Institutional Recruitment for Sustainable Transformation (FIRST) program**, the NIH Common Fund (CF) and the NIH Scientific Workforce Diversity office (SWD) sought input from the NIH extramural community via two mechanisms:

i)   **A Request for Information (RFI; NOT-RM-19-001) that was issued in February of 2019** to obtain input from key extramural community stakeholders, including postdoctoral scientists, biomedical faculty, scientific societies, advocacy organizations, and academic institutions, as well from interested members of the public, on institutional and/or programmatic approaches to advance inclusive excellence through institutional change.

ii)   **Virtual Discussions hosted by NIH in May of 2019**. convened leadership from academic biomedical institutions for input on strategies and challenges used at extramural institutions to recruit and retain diverse and inclusive faculty, as well as for insight on how the Common Fund might effectively facilitate this goal through a competitive funding opportunity. Several questions guided webinar discussions:
- What strategies have you undertaken at your institution to recruit and retain a diverse and inclusive faculty?
- What are the challenges that you face with diversifying your faculty and promoting inclusion?
- Would implementation of a Distinguished Scholars-like program be feasible at your institution? What challenges would this present?
- How might the CF most effectively support your efforts to hire and retain a diverse and inclusive faculty?

Executive Summary

The NIH heard from a wide range of stakeholders in response to an issued RFI and virtual discussions with deans of academic medical institutions in planning for what is now the Faculty Institutional Recruitment for Sustainable Transformation (FIRST) program. Many cross cutting themes emerged that were used to shape the program and the RFAs developed for the program. Themes included planning a program that encourages success and retention along the faculty career trajectory, not just recruitment; accounting for and understanding demands disproportionately borne by women and underrepresented minorities (URMs); and accounting for institutional type and capacity in planning for any cohort and its size. A large amount of feedback also focused on how mentoring and leadership is needed to help faculty navigate the complexities in academia. In many instances, individual responses noted that mentors and others who sponsored their development in their academic environment played key roles in their success. Many acknowledged that early-stage faculty need both protected time and sufficient resources to reach key milestones like tenure. Ensuring sufficient programming to support faculty in any cohort set up is also important.

Other feedback focused on acknowledging and building on other examples and efforts aimed at increasing faculty diversity, such as the NSF ADVANCE programs and NIH efforts like the MARC program and K awards. Personal accounts of both negative and positive experiences in an academic laboratory or with an academic colleague, highlighted the importance of how institutional environments influence career trajectories as well.

Summary of Responses to Request for Information (RFI) on Institutional Accountability to Promote Inclusive Excellence

On February 25, 2019, the NIH Office of Strategic Coordination (Common Fund) released a Request for Information (RFI; NOT-RM-19-001) to obtain input from key extramural community stakeholders, including postdoctoral scientists, biomedical research faculty, scientific societies, advocacy organizations, academic institutions, as well from interested members of the public on institutional and/or programmatic approaches to advance inclusive excellence through institutional change.
The RFI asked for input on:

- Institutional programs and approaches that have been successful in reducing isolation, increasing community building, and fostering career advancement for early-career faculty, including those from diverse backgrounds, such as groups underrepresented in biomedical research .
- Institutional mentoring programs that support faculty development, retention, and career success.
- Faculty-level cohort-model approaches that are institution-based or distributed across institutions.
- Data-driven strategies to assess and manage institutional equity and diversity.
- Capacity for institutional support of early-career scientists, including start-up packages, research, lab space/equipment, and salary.
- Role of partnerships between institutions toward reducing isolation, increasing community building, and fostering career advancement for early faculty.
- Any other comments or recommendations for NIH to consider with respect to programmatic efforts to collaborate with institutions on achieving inclusive excellence through a cohort-hiring/mentoring approach with an emphasis on institutional accountability .

The RFI closed on June 14, 2019. A total of 77 unique responses were submitted. Most of the responses were from individuals and the content indicated that most were postdoctoral scientists, faculty, administration, and professional societies. stakeholders, including: Association of American Medical Colleges (AAMC), American Society for Biochemistry and Molecular Biology (ASBMB), Future of Research, American Society of Hematology, American Association of Dental Researchers, American Society of Nephrology, International Society for Biocuration, and several schools or colleges of medicine, submitted coordinated responses.

Key points and comments are briefly summarized here under topical headings. *Please note that the information below consists of summarized RFI responses submitted and does not necessarily represent the opinions of the NIH or necessarily reflect the goals or structure of the FIRST program in its current form.*

Challenges in Recruitment
- Many institutions have faced major challenges in the recruitment and retention of URM faculty.
- URM preference for being in a geographic region that provides a diverse community for self and family impacts recruitment and retention of the URM. Higher ranked medical schools have higher proportion of URMs.

Encourage Success and Retention, Not Just Recruitment
- Must have climate that is conducive for their success. No matter how excellent the faculty, if they are brought into workspaces that are hostile or non-inclusive it will prevent them from succeeding long term.
- The postdoc-to-faculty transition is major barrier. Focus also on retention and on incentivizing changes to the cultural norms of academe to ensure that people from these populations are not only present but thrive.
- People's daily experiences are determined largely by their local environment or department.
- If diversity in research is not an institutional goal, and underrepresented recruits are not supported by stand-alone services to onboard and integrate them, all attempts to attract, recruit, and retain them will fall short.
- Providing dedicated staff and programs that interface with individuals directly-for retention. Have peer mentoring.
- Workplace itself must also be improved to prevent the "minority revolving door."
- Change culture at the laboratory level.

Institutional Transparency
- Make recruitment, retention, and career progression transparent at the institutional level and to make this data available to the general public.
- Long-term commitment of an institution towards gender/URM equity should be part of goals.
- Transparent reporting of all disciplinary hearings, including names of faculty disciplined and reasons for the discipline.
- Fully public salary and startup package information, with institutional oversight.

NIH Grant System/NIH Overall
- Money is power, and well-funded researchers are Kings and Queens in the University structure. When powerful PI's are the problem, change is impossible since no one likes to upset the golden goose.
- Grant system part of problem: system which awards grants based upon a winner takes all system is disturbing. We all know that a grant which gets a 13th percentile score (and is funded) is no different from one which gets a 13.1% score (and is not funded). Some individuals have inordinately large funding amounts.
- Just 2% of institutions with NIH research project grant support get about 53% of the dollars. Institutional and interstate disparities in access to NIH funding contribute to the geographical disenfranchisement of students and trainees.
- Trend towards funding multi-lab collaborative projects such as through the U01 versus more funding allocated for single-lab grants such as the R21 and R01. Allocating more resources and funding for junior researchers can help female researchers collectively.
- Imagine institution wide grants requiring X% of faculty on the grant to be from an under-represented group. One could also evaluate the strength of the institution based in part on how diverse their faculty in the department are.
- NIH has a history of taking less responsibility than it should, and passing responsibility to research institutions, who in turn pass it back to NIH.

Extraprofessional Demands Disproportionately Borne by Women and URMs
- Women particularly face substantial extraprofessional demands such as childcare and eldercare. Use supplemental grant funds to gain extra help from research coordinators, statisticians, and technicians to offset this.

- Having kids is tough and there is no mechanism to keep research moving forward for leave etc. Incentivize faculty to employ support staff for the scientists who need them so their research can be propelled further, particularly for family leave.
- Should be more short-time opportunities for working female professionals who choose to have a family.
- Because future faculty come from postdocs-institutional support for postdocs should include things like affordable housing, day-care for children, adequate leave, and accommodations to ensure a healthy work/life balance.

Support Beyond Early Career Stage
- Target URMs doing biomedical research at the mid-level career stage, because while entry into faculty positions is important, retention and promotion is where even greater attrition occurs.
- Funds to diversify faculty should also be directed to senior faculty who have shown themselves to be agents of change.

Analyze and Fund Full Career Trajectory
- Provide incentives and analyze every single stage, perhaps also incentivize successful mentors, the K99/R00 MOSAIC notion is a fine start.
- More pipeline programs targeted at underrepresented demographics like minorities and women.

Establish Dedicated Funding
- Programs now being established to diversify the background of researchers that are entering the professoriate. Suggest that a pipeline for funding be established for historically underrepresented minority investigators who have not had a record of funding but are at more advanced stages in their careers.
- Aggressive university start-up packages without fund expiration dates.

Learn from/Synergize with Other Efforts
- The general goals and tactics of the HHMI Inclusive Excellence Initiative appear like the new NIH initiative, and I applaud NIH's intentions.
- Recommend discussing efforts with the National Research Mentoring Network (NRMN).

"Minority Tax" and Enhanced Expectations
- Departments can seem to expect an even greater performance record from URM faculty when hiring, to assuage any concerns that the hiring was done solely to increase diversity.
- Feel the need and pull to do service and outreach. Service and outreach have monetary value and should be treated as such. I was not a "minority hire" and that felt good. I think I am being treated just like everyone else here. Wish there was more of a national connectivity of minority PIs in different disciplines.

Lure of Industry and Other Attractive Careers
- Many Ph.Ds. from underrepresented groups leave academic research and join industry after receiving their degrees. If only students from privileged backgrounds can afford the sacrifice of a below-market wage during postdoctoral fellowship, then future faculty will be disproportionately from privileged backgrounds.
- Many historically underrepresented trainees are choosing not to go into the academic research world, they favor of a wide range of other highly productive options.

Make Research Careers Attractive
- Increase pool of potential researchers, increase appeal of research careers, support those choosing research.

Mentoring
- NIH could provide more mentorship grants for institutions or researchers to specifically incorporate students of color at the undergraduate level to be involved in research.
- Need carrot for mentoring.

Cohort Size and Feasibility
- Mid-size and small institutions will need to be cross-institutional (maybe better stated as inter-institutional) programs/networks should built that only include mid-sized and small institutions with each participating institution having a role in developing the cohort.
- The successful transition of a postdoc to faculty or a junior faculty to associate professor has a great impact and the "hidden curriculum" is an even larger weight to be borne by members of underrepresented in research investigators. RWJF Harold Amos Scholars Program (then known as the Minority Faculty Development Program).
- Cohorts work – our cluster hires – from experience- two psychology, two health sciences, they support one another on meaningful projects that benefit students. It is important to each of our cluster hired and multicultural faculty that they have mentors off campus.
- Involve multiple life-science academic units and potentially multiple academic institutions.
- Departments rarely have enough open faculty slots to allow them to recruit a cohort, and in our experience department chairs are inclined to want to recruit individually.
- Uneasy feeling about forced cohorts.
- A cohort model at the faculty-level, while having the potential to benefit the community and increase both diversity and inclusion in higher positions in biomedical research, would come with key challenges that would require a tailored approach. Cohorts should be inter-institutional and discipline specific, to be able to form a large group.
- Enough cohort and to meet its specific needs. The NIH should look to existing cohort models to inform its own development of such a program. For example, the Texas CTSA Consortium Mentored Research Career Development (KL2) Program in Clinical and Translational Science25 – an NIH-sponsored, cross-institutional, two-year program - brings together junior faculty from across Texas institutions. In industry, Dow Chemical has a program called Employee Resource Groups, which brings together eight internal groups based on shared backgrounds and interests, e.g., a women's group, a group for people with disabilities, an LGBT group, groups for different races and ethnicities, and a veterans' group."
- A cohort program—while useful and laudable (and should be pursued)—is still a primarily individual-level solution for a systemic / structural problem.
- Develop and support an inter-institutional, virtual cohort program to support faculty; cohorts should be formed based on discipline in addition to career stage.
- Propose consideration of a 5-year postdoctoral cohort program focused on establishing a community of tenure-track bound biomedical researchers (broad, not just biomedical).
- Partnering with professional societies can help reduce isolation and other barriers.

The Face of Leadership/Lack of Mentors
- Need educational programs to enhance attainment of prominent leadership positions by senior scientists from traditionally under-represented groups (especially women and race-ethnic minorities) through leadership coaching, networking, and mentorship. Resources and short-term

training opportunities are frequently withdrawn for the critical transition from mid-level to senior-level scientists.
- Going into academic medicine right now is very unattractive and makes it particularly difficult for women and minorities due to the lack of mentors, other life issues, and not being pushed forward or sponsored into leadership goals.

More/New K-type Awards
- Consider "new" hybrid K-award career development application as an important steppingstone for ESIs (at the pre-faculty) stage to advance forward. To address this, one needs to consider what it takes to be competitive for K-awards and how the institution will respond to support these new "hybrid type" career development awards.
- Consider existing K grant mechanisms to support diversity, could use using a different funding percentile for diversity applicants for K grants or by creating unique Kdiversity grants, these awards could be used to build diversity.
- Regarding K01 awards, there is a predominating view that these awards are primarily targeting junior faculty (assistant professors) rather than postdoctoral researchers due to the requirement that K01 awardees have clear institutional commitment (which is usually interpreted to be a tenure track faculty position with a solid start up package). Whether that was intended or not, the fact is that postdoctoral researchers are severely under competitive in that funding space. Thus, current K01 awards (including the diversity awards) are not poised to address the diversity gap, as they require applicants to have already made the transition.
- Provide funding for institutions to bring back URM graduate student alums who have to complete an aspect of their training elsewhere - provide milestones for them to meet to be brought back. Possibly through a mechanism similar to K99/R00 funding.
- The only open K99/R00 diversity awards were released as part of the BRAIN initiative, which has a very limited research focus. One option would be to release a K99/R00 diversity award that is open to the many research priorities of the NIH's Institutes and Centers.
- We recommend developing a K99-to-R00 grant pathway, or Institutional National Research Service award (T32) with the goal of increasing diversity in the professoriate.
- Consider trainees on visas.
- Cut & paste statements of D&I with no real teeth had little chance of success. Require diversity and inclusion programs for institutional postdoctoral NRSA and faculty centric K awards.

Unintended Consequences
- Individual institutions may feel absolved of their duty to provide this type of support to their URM faculty if the NIH provides it.
- Partnerships between smaller and larger schools wane after funding ends.
- Some current mechanisms provide funding and prestige for the institution rather than ESIs themselves/strongly discourage R25 or T32 type program. INSTEAD, consider mentored research programs pairing URM ESI with younger mid-career mentors of at least minority background (regardless URM or not), a national panel of minority scholar mentors, and R21 level funding for the ESI.
- The use of targeted faculty searches to increase departmental diversity can also be a useful tool for recruiting faculty from underrepresented groups. Care should be taken, however, with grouping these individuals into cohorts. While cohort development is useful for tracking and providing targeted support for like-groups, developing a cohort based on "special" hiring criteria may present challenges. Identifying individuals by an alternative faculty hiring mechanisms may lead to the perception that the individual is not otherwise qualified.

Broaden Diversity/Inclusion Reach
- Need to fund Osteopathic Doctor research, not just MDs.
- The osteopathic community does not feel or identify with any aspect of the NIH. Inclusion of diversity of opinion and representation is mandated by the Federal Advisory Committee Act.
- Make sure to include multiracial/multiethnic individuals.
- Physician-scientists are a threatened group. Focus on physician-scientists from underrepresented backgrounds - provide more funding opportunities so they can have more protected time and space at the beginning of their career.
- Dismayed to see that faculty members who identify as LBGTQ are not part of your efforts to increase diversity.
- There is a vast need for doctorally qualified professionals, especially of color to be at Community College level.
- Diversity and Inclusion of Deaf/ASL. The costs of sign language interpreter services are a financial disincentive to hiring a lab tech who is deaf. Diversity is often measured as a count or proportion of individuals from underrepresented groups. This creates a disincentive to work with individuals associated with higher cost, such as deaf people.
- Focus on advancement of individuals in community-based or other settings.

Other
- Programs to support graduate student transfer from minority-serving institutions (MSIs) to primarily white NIH-funded research institutions (PWIs).
- Consider providing the loan repayment program (LRP) to faculty in the proposed cohort, and consider increasing the amount of support provided by the LRP (i.e. raise the cap, or lower the floor).
- NIH taxpayer money should not be allocated to fix racism.
- Propose programs that not only encourage institutions to expand the definition of a successful scientific career but also provide them with the skills to be successful in different sectors.
- Encourage facilitated community building, participatory design, formative evaluation, and cultural activities that create new socio-cultural identities within the existing organizations.
- How about a program that links participants that were trained by NIH supported grants for those underrepresented in medicine to new investigator awards?
- Some incentives for those that are succeeding in promoting inclusive excellence.
- Move away from "tenure" label, given its significant variability across institutions. Having such support for 5-6 years (e.g., 50% salary/fringe support + $1M startup from NIH) would go a long way to help launch faculty members.
- Efforts to diversify faculty should be directed to junior faculty who will not only use the funds to engage in robust research, but who also require the funds to buy out their time to participate in numerous activities and committees.
- Challenges with cultural insensitivity of PI.

Noted Current Successful Programs and Strategies
   NIH
- MSP/MARC program was valuable way to see research careers as viable.
- K awards should be expanded.

   Outside NIH
- Extremely successful NSF ADVANCE programs has truly made a difference in women's success.

- USC has program: https://faculty.usc.edu/mentoring/castingwidenet/. The one benefit (and a significant benefit) was start up package was larger than the department could provide alone.
- The "Successfully Obtaining an R" (SOAR) Program is UTSW program.
- UCSF Mentor Training program (MTP). Incorporating a comprehensive training module focusing on "Mentoring Across Differences." Also have a collaboration between the University of California and the NRMN.
- Faculty Agents of Change (FAoC) initiative. RISE at UCSF program. Comparative study of hiring practices that focused on the department of biology at San Francisco State University found that a co-hiring policy that was used from 1994-2010 was successful in diversifying the faculty.
- The Program to Advance Gender Equity (PAGE) has led work on best practices for salary equity, for leadership, parental leave and for transforming the culture of the department with the hopes of further advancing these initiatives beyond their institution.
- ASH-AMFDP Award, the capstone program of the ASH Minority Recruitment Initiative (MRI), expands AMFDP's successful national networking and career development model by offering four years of postdoctoral research support to historically disadvantaged. Key features of the program are 360 mentorship, community-building and partnership and alumni engagement.
- Advocates & Allies for Equity is a National Science Foundation initiative designed to bring men and men-identified individuals further into the gender equity equation (NSF ADVANCE).
- Current strategies: in-person implicit bias mitigation workshop is now a requirement for leadership onboarding. Department Chair bonuses, a portion of which are contingent upon advancing diversity and inclusion as determined by the Dean during performance reviews. Accountability for leadership diversity and inclusion is built into the Medical Center scorecard that is reported to the board of trustees.
- Increasing community building: developed a curriculum for career advancement, focuses on enhancement of junior faculty skillsets in the areas of career development, scholarly writing, clinical teaching, research, and curriculum development.
- Executive Leadership On-Boarding Program provides on-going mentorship. Institutional mentoring programs that support faculty development, retention, and career success.
- Spaces that bring URMs together and in which they can speak about their accomplishments, barriers, challenges, and opportunities in the academy.
- More resources and personalized mentoring help.

Summary of Feedback from Virtual Discussions

A total of 31 Deans or their representatives participated in the virtual discussions with NIH. External invited participants are listed in the appendix. The discussions generated valuable input for NIH to consider, summarized briefly below in the following thematic areas: capacity and resources, cultural factors, programming, and challenges.

Capacity and Resources
- Small/rural institutions face tough competition recruiting candidates – especially including diverse candidates.

- There is interest in partnerships between institutions of varying size; the CTSA model may be informative.
- Meharry Vanderbilt partnership has been in place for many years, before the CTSA program, and it is a model of success based on shared goals.
- At public institutions, the number of faculty positions are capped because these institutions have to wait until tenured faculty resign. If provided additional funds (startup and salary), additional spots may become available to enable hiring across these transitions.

Support Beyond Early Career Stage
- Lack of an endowment at non-private institutions also limits availability of funds to hire new faculty.
- Faculty attrition often occurs at the 3-5 year mark after hiring; thus, institutions welcome bridging funds to help faculty succeed in the transition to independence (R01 funding).
- Institutions welcome flexibility for use of funds, as URG faculty tend to require a longer time period to tenure. Various reasons, including the documented lack of professional-network connections, contribute to this delay.
- Public institutions typically provide smaller start-up packages (< $1 million).
- Faculty cohort hiring could occur across departments, e.g., across the whole-university system, including other schools (e.g. engineering, public health, dental, nursing).
- Smaller institutions could employ distributed models such as the NIGMS MOSAIC or similar alternatives to leverage resources for faculty to participate in national cohorts.
- Several institutions noted a need for funding/start-up funds to cushion URG faculty (e.g. wraparound support) until they attain independent funding for career advancement.
- At research-intensive institutions ("R1"), startup package for a PhD basic scientist is $1.5 – 2 million, clinical scientists are $1-1.5 million.

Cultural Factors
- Institutional and departmental isolation is a big problem – bringing people together across departments can be done and is helpful.
- The "trust factor" is paramount for faculty from underrepresented groups to thrive. A program that contains institutional commitment to candidates will demonstrate long-term investment in the new hire.
- Underrepresented faculty confront frequent macro- and micro-aggressions in their everyday environment, which is suffused with suspicion and questioning about motives.
- Many early-stage faculty wonder "What goes on in the black box; how does the system work?" Mentoring and leadership is needed to help faculty navigate the environment, and this can be more challenging for a minority individual in a majority culture.
- Requiring statements of interest/track record related to diversity/inclusion from individual faculty applicants/recruits will facilitate institutional culture change over time.
- Cross-cultural mentoring is important – involve NRMN, who has a track record and many useful resources.
- People leave science for other careers – and jobs are available there. Institutions also face competition for potential applicants from industry.
- One big advantage of a cohort model is the "halo" effect - spill-over that diffuses into academic climate and culture.

Programming
- The UC Postdoctoral Fellows Program is a great model (distributed-cohort approach) with incentives built into advance fellows to faculty positions at UC campuses.

- Institutional accountability is essential for developing and sustaining inclusive excellence, and NIH can help.
- Early-stage faculty need protected time and sufficient resources to be eligible for tenure. A Distinguished Scholars Program (DSP)-like extramural model could leverage best practices (diverse search committees, best practices for diversity/inclusion, bias education, promote belonging) to the extramural community.
- One idea is to designate "faculty inclusion ambassadors," individuals who are nominated/appointed and are given protected time (and recognition) for this level of mentorship/support for early-stage faculty. Such service should not be volunteer positions, but a reputable component of academic scholarship for career advancement.
- DSP-like program could help "mandate" avoiding diversity tax duties often confronted by underrepresented faculty at institutions.
- Senior executive-level mentoring is a key aspect of faculty professional development, and it is a key element of the NIH DSP program.
- There is reciprocal value in pairing senior mentors with diverse early-stage faculty mentees. The experience can facilitate institutional culture change. Some institutions are experimenting with a diversity advisory role for each search (personnel provided by faculty affairs office or diversity office) to promote inclusive search practices that are needed to recruit from the broadest talent pool that extends beyond the typical word-of-mouth networks and feeder institutions.
- Performance goals can be linked to departmental incentives (e.g., diverse talent pools for searches).
- One example is the AAMC Foundational Principles of Inclusion Excellence (FPIE) pilot.
- Climate surveys at the institutional level can unveil previously unappreciated differences and guide programming.

Challenges
- Departments/chairs hold a tight grip on controlling searches and often resist centralized searches.
- Implicit bias restricts broader recruitment and hiring efforts.
- Underrepresented scientists often don't see institutions as welcoming/supportive environments.
- They want to see role models in leadership positions; lack of diverse senior faculty sustains this circular problem.
- Could cohort hiring approach also include recruitment of senior diverse talent/mentors?
- Time commitment for senior leadership is a consideration – linking this activity to value/reward will encourage participation.
- Some faculty from underrepresented groups are interested in joining academia but find no research relevant to them (e.g., that related to health disparities and health equity). Many institutions have not invested substantially in this space and thus have no guidance or support for it.
- Behavioral and health-disparities research relies on community-engagement activities, and these resources/funds are not always available. Such activities are vital to building trust relationships with communities who participate in NIH-funded research.

Appendix : Virtual Discussion Participants

- **Dr. Robert Alpern**
  Yale University School of Medicine
- **Dr. David Brown**
  University of Michigan School of Medicine
- **Dr. Haywood Brown**
  University of South Florida
- **Dr. Namandje Bumpus**
  Johns Hopkins University School of Medicine
- **Dr. Leslie Caromile**
  University of Connecticut Health
- **Dr. Augustine Choi**
  Weill Cornell Medicine
- **Dr. Camille Clare**
  New York Medical College
- **Dr. Iryna Ethell**
  University of California-Riverside
- **Dr. Henri Ford**
  University of Miami School of Medicine
- **Dr. Terry Flotte**
  University of Massachusetts Medical School
- **Dr. DeAnna Baker Frost**
  Medical University of South Carolina

- **Dr. Toi Blakley Harri**
  Baylor College of Medicine
- **Dr. Linda Hazlett**
  Wayne State University School of Medicine
- **Dr. Jerris Hedges**
  University of Hawaii, John A. Burns School of Medicine
- **Dr. Joshua Jacobs**
  Washington State University
- **Dr. Ronn Johnson**
  Creighton University School of Medicine
- **Dr. Mary Klotman**
  Duke University School of Medicine
- **Dr. Yvonne (Bonnie) A. Maldonado**
  Stanford University School of Medicine
- **Dr. Veronica Mallett**
  Meharry Medical College
- **Dr. Saleh Rahma**
  University of Central Florida School of Medicine
- **Dr. Cynthia Rand**
  Johns Hopkins University School of Medicine

- **Dr. Joseph Ravenell**
  New York University School of Medicine
- **Dr. Steven Shelov**
  New York University Long Island School of Medicine
- **Dr. Robert Simari**
  University of Kansas School of Medicine
- **Dr. Amanda Termuhlen**
  University of Minnesota
- **Dr. Jay Vadgama**
  Charles Drew University
- **Dr. Jen Westendorf**
  Mayo Clinic
- **Dr. David Wilkes**
  University of Virginia School of Medicine
- **Dr. Consuelo H. Wilkins**
  Vanderbilt University Medical Center
- **Dr. Sheree Wilson**
  Washington University School of Medicine in St. Louis
- **Dr. Steve Zweig**
  University of Missouri-Columbia School of Medicine