School of Medicine
Diversity Plan
Diversity is essential for UCSF to completely fulfill its mission of excellence in education, research, clinical care and community service. Excellence within the academic community creates a more vigorous and stimulating intellectual, social and scientific environment, and is promoted when there is diversity in the life experiences and cultural backgrounds of the community’s members.

- Diversity among investigators promotes development of novel research questions and research approaches;
- A diverse faculty can serve as role models for current URM students and help to attract new students from a variety of ethnic and socio-economic backgrounds;
- Diversity enhances the educational experience for all students by encouraging reflection on assumptions and biases, fostering different perspectives, and improving skills in interacting with individuals from different backgrounds; and
- Physicians who are more culturally sensitive and linguistically competent provide superior patient care.

Promoting diversity simply means widening the door of opportunity so excellence can walk through. It does not mean promoting mediocrity or lowering standards; rather it reinforces that all candidates should be accepted based on their qualifications. Therefore all aspects of SOM, education, research and clinical practice, must link diversity to excellence, and diversity must be an institutional priority.

I. Diversity Goals

- The UCSF School of Medicine will be known as an environment in which qualified individuals are welcomed encouraged, and successful regardless of their gender, racial, ethnic or socioeconomic backgrounds.

- Only with diversity of background, experience and ideas, can UCSF achieve its goals of advancing science and medicine.

- The School will develop a pipeline so that students, staff and faculty meet or exceed benchmarks for diversity based upon qualified applicant pools.

II. Staff Diversity

As of June 30, 2005, the School of Medicine had 3,908 staff employees, of whom 1,849 were minority and 2,750 were women. The School’s performance bonus program and Management Incentive Program (MIP) are being used to encourage diversity efforts among departments.
During the current fiscal year, staff members eligible for the MIP were given suggested diversity goals to incorporate into their plan for the year. In addition, the School’s Office of Human Resources Services is promulgating best practices for inclusive recruitment, such as increasing diversity on search committees, expanding outreach, and a review of the screening and interview process to reduce cultural bias wherever possible.

III. Filling the Student Pipeline

The Post Baccalaureate Program was established seven years ago to help California residents from disadvantaged backgrounds and underserved communities improve their chances of gaining admission to medical school. The eleven-month program includes rigorous MCAT preparation, workshops on application/interview preparation, academic skills workshops, health care seminars, and upper division science courses at San Francisco State University. Participants receive personalized counseling, mentoring, and are tested for learning disparities, and meet with a learning specialist.

Sixty-eight of the 89 individuals who participated in the program between 1999-2005, applied to medical school between 1999 and 2005. Sixty-three gained acceptance and are currently enrolled or have graduated from U.S. medical schools. Twenty-one of our former students have graduated from medical school; 10 of those are in primary care residencies, two are in emergency medicine residencies, and the remainder are in other specialty residencies.

IV. Undergraduate Medical Education

The School’s current entering class, the Class of 2010, includes 28% from groups that are under-represented in medicine, a significant increase over the previous year, in which 18% were from under-represented in medicine groups. UCSF also leads among all UC schools for diversity among entering MD students.

The leadership of the School and the Admissions Office have worked hard to create a welcoming environment for applicants and entering students, which includes letting them know that people with similar backgrounds are already here. Current students who are active in the Student National Medical Association and the National Hispanic Medical Association have volunteered as the School’s ambassadors when students come for interviews or other campus visits, and the School’s admissions web site was overhauled in 2005 so that it reflects the School’s true diversity.

Another significant barrier that the School has worked to eliminate was a procedural one. Previously, students often would be required to select their medical school before learning whether UCSF was extending any financial aid. In addition to shifting funds so that financial aid is more evenly distributed across all four years, notification is made before the May 15 decision date.

V. Graduate Medical Education
The population of non-white residents has increased from about 44% in 2001 to nearly 50% in 2006. GME leadership has worked hard to coordinate diversity efforts across departments, including targeted outreach at SNMA and NHMA meetings and improving programs for candidates to visit UCSF. A part-time diversity coordinator was appointed within the GME leadership, and one of the programs underway is a mentoring program that serves as a bridge across the school: Faculty mentor housestaff who mentor undergraduate students who mentor high school students.

VI. Faculty

The School’s faculty is well more than half (62%) men, only a slight change from 67% in 2001. By ethnicity, 19% were reported as non-white in 2001, compared to 25% in 2006. The disparity is even greater when considered by rank: Only 12% of full professors are non-white.

The School’s Office of Academic Affairs has conducted a number of efforts to improve diversity and recognize and reduce barriers to diversity among the faculty ranks. A gender equity survey was conducted in 2005, with the results shared with departments for appropriate action.

Efforts to improve faculty development include an enhanced mentorship program and a series of faculty development workshops. The School also has sponsored faculty to attend AAMC and other faculty development programs and supported and encouraged faculty to participate in organizations with significant participation by physicians from under-represented in medicine groups.

VII. Next Steps

One of the key recommendations of a Diversity Task Force led by Associate Vice Dean Renee Navarro in 2004-2005 was to establish a dean’s office level person charged with leading diversity efforts. The School now plans to create the Office of Multicultural Affairs to serve this purpose, clearly designating a point person who can serve as an “engine” for developing novel outreach, research and support programs and open up new channels for communication and collaboration across the campus.

Given the active participation of the School’s current leadership and faculty in diversity activities, the establishment of this position should enable greater coordination, collaboration and effectiveness.

The School has taken and will continue steps to increase the visibility of diversity in the School and among its leadership and to hold departments accountable for establishing and achieving diversity targets.