



**STRATEGIC PLAN 2021-2023**

# DIVERSITY EQUITY & INCLUSION



**IUPUI**

RICHARD M. FAIRBANKS  
SCHOOL OF PUBLIC HEALTH

# SCHOOL STATISTICS

## POPULATION

**75%**  
WOMEN



**25%**  
MEN



## RACE

**43%**

STUDENTS OF COLOR



## PROGRAMS

**20%**

OF UNDEGRADUATE  
STUDENTS ARE  
21<sup>ST</sup> CENTURY SCHOLARS



## COLLEGE

**32%**

OF UNDEGRADUATE  
STUDENTS ARE  
FIRST GENERATION



## GRANTS

**41%**

OF UNDEGRADUATE  
STUDENTS RECEIVED  
A PELL GRANT



The Fairbanks School of Public Health (FSPH) aims to maximize student, staff, and faculty diversity. Principles associated with diversity, equality, inclusion and social justice (DEIJ) support the excellence of our learning environment and represent one of our core institutional values. This document represents a dynamic plan that will change as internal and external needs change. Our Diversity Strategic Plan (DSP) includes attention to gender, sexual, religious, ethnic, rural/urban, racial and socio-economic background diversities.

Public Health as a discipline embodies DEIJ principles. Our school fully embraces these values. Our diversity strategy is not just aspirational; it is also a celebration of the many assets and successes that energize our school's activities. Examples (see Addenda) are displayed in the DSP and will be updated annually.



## TABLE OF CONTENTS

Diversity Indicator I: Institutional Viability and Vitality .....	5
Diversity Indicator II: Education and Scholarship .....	7
Diversity Indicator III: Climate and Intergroup Relations .....	10
Diversity Indicator IV: Access and Success .....	13
Addendum 1 .....	15
Addendum 2 .....	18
Addendum 3.....	20
Addendum 4.....	22
Addendum 5.....	23
Addendum 6.....	25
Addendum 7a.....	27
Addendum 7b.....	30

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## Diversity Indicator I: Institutional Viability and Vitality

### PREPARE FACULTY AND STAFF TO SUPPORT DIVERSE STUDENTS

*Goal #1: Create a repository of resources, policies, and events that support diversity, cultural competence, and inclusion.*

#### A. **Create a repository of campus resources that support diversity and cultural competence**

1. Adaptive Educational Services (AES), Counseling and Mental Health Services (CAPS), Office of International Affairs (OIA), Office of Diversity and Inclusion, LGBTQ+ Center. Review the repository of resources listed at this FSPH site: <http://fsph.iupui.edu/diversity> and add/edit the list as needed.
2. The *FSPH Roundup of News* will include upcoming religious holidays.

#### B. **Create a list of campus policies related to diversity and inclusion**

1. Office of Equal Opportunity
2. Office of Academic Affairs

#### C. **Post these on FSPH Diversity page (<http://fsph.iupui.edu/diversity>)**

**Strategies:** Amanda Briggs; Rachel Forster (final activity TBD); other to be added

- Complete audit of IUPUI and FSPH resources and policies annually and edit *FSPH Diversity* page as necessary.

**Responsible party:** Student Success, Dean's Office; others to be added

**Timeline:** Summer (annually)

- Add "Events Calendar" to *FSPH Diversity* page, highlighting cultural events, celebrations, and holidays in the US, and in those countries where faculty and students originate.

**Responsible party:** Marketing and Communication; other to be added

**Timeline:** Summer 2022; ongoing for maintenance

- Design a webpage format for the repository that is engaging and user-friendly.

**Responsible party:** Marketing and Communication; other to be added

**Timeline:** Summer 2022

- Include a description and link to repository in monthly *Roundup News* and in messages to new employees and new students.



**Responsible party:** Marketing and Communication, Student Success, Dean's Office; other to be added

**Timeline:** Summer 2022, ongoing

**Metrics:**

- Diversity committee will own diversity content and provide regular updates (every 6-12 months)
- Marketing will provide analytics on website, email and social media communications to Diversity Committee on diversity efforts with suggestions for improvement if needed

*Goal #2: Promote trainings on diversity, cultural competence, and inclusion*

**Strategies:**

- Identify IUPUI diversity trainings and events, and add them to the "Event Calendar" on FSPH Diversity page

**Responsible party:** Marketing and Communication; other to be added

**Timeline:** Ongoing

- Share diversity trainings and events in monthly Roundup News

**Responsible party:** Marketing and Communication; other to be added

**Timeline:** Monthly

- Encourage faculty and staff to attend diversity events.

**Responsible party:** Dean's Office, Departments; other to be added

**Timeline:** Ongoing; kick-off Summer 2022

**Metrics:**

- Track attendance at diversity trainings and events
- Track trainings and events posted to Events Calendar and FSPH Roundup

*Goal #3: Raise awareness of issues of diversity, cultural competence, and inclusion*

**Strategies:**

- Launch a diversity-focused book club, podcast or other e-media resource accessible to anyone at FSPH; host (virtual) meetings to discuss topics in a safe, judgement-free setting; share the "theme of the month" and encourage faculty, staff, students to read and add.

**Responsible party:** Sue Babich; Jack Turman

**Timeline: Plan Summer 2022, launch by 2023.** Ongoing. The Community Solutions Podcast was launched in 2019 and has continued to expand. The Department of Social and Behavioral Sciences (SBS) launched the podcast and by mid 2021 has posted 32 podcast episodes with over 8,500 downloads. The podcast has listeners in all 50 states and in more than 25 countries around the world. The episodes address issues of diversity, cultural understanding and inclusion, with each episode providing listeners with skills that they can use to help their communities: <https://fsphsbs.podbean.com/>.

## Metrics:

- Track utilization and access metrics of the podcast on a consistent basis
- Support continuity, expansion, and visibility of podcast within and outside IU

## Diversity Indicator II: Education and Scholarship

### RECRUIT DIVERSE FACULTY, STAFF AND STUDENTS

#### A. Outward facing marketing and recruitment materials/website (as well as relevant outcomes) will reflect our school's commitment to diversity

1. Percentages of diverse students are highlighted on the FSPH website on the [Diversity Web Page](#)
2. Expand the number of [images](#) (virtual and physical) that represent diversity. For example, SBS recently completed revising its departmental landing page, research landing page, and research projects page. The department highlight students from diverse backgrounds, the departmental statement encouraging anti-racism activities, and highlight their commitment to health equity research, showing the diverse range of community members and neighborhoods that we work in.
3. Recognizing that the website provides a recruitment window to the FSPH academic programs, proactive steps have been taken to revise the website to make it more inviting and inclusive through [Student Highlights](#), the [Home Page](#), and [Academics](#) sites. The FSPH website was revised to include additional information and resources to enhance diversity and inclusion: [FSPH Website](#).
4. Ensure our scholarly and professional activities involving DEI (see Addenda 1-7b) are clearly showcased throughout FSPH websites and media – and updated annually.

#### B. The school will work with OEO to attract and retain a diverse complement of faculty and staff

1. Office of Equal Opportunity (OEO) will review faculty and staff search ads to make sure the language is appropriately inclusive and attractive to diverse qualified candidates
2. Search committees will be as diverse as possible. For example, when SBS recruited their last community member for a large-scale project, the department made sure that we had representation from minority faculty members and community members on the search committee.
3. Faculty search committees will engage in intentional efforts to diversify the candidate and finalist pools (e.g., soliciting applications from qualified minority



candidates). For example, when SBS has launched a faculty search, they always include targeted outreach to Minority Serving Institutions that train PhD students and postdoctoral fellows in the SBS fields, encouraging them to apply for positions.

4. The Dean will review final candidates of faculty and senior staff. The dean will interview and give due consideration to all qualified finalists
  5. If there are no minority candidates among the list of finalists, the search committee will describe the situation leading to not having at least one minority candidate in that pool
- C. The school will recruit and retain a diverse student body
1. The school will document its efforts to achieve percentages that meet or exceed the IUPUI percentages of First-Generation students, 21st Century Scholars, Pell Grant recipients, and underrepresented minority students. For example, SBS launched in the 2021-2022 academic year a dedicated student recruitment effort to grow diverse undergraduate and graduate programs. They are reaching out to over 30 student organizations on campus that focus on diverse student populations, three living learning communities with diverse student populations, all the high schools in a five-mile radius of IUPUI, and the SBS related programs at the downtown Ivy Tech campus.
  2. The school has two scholarships committed to diversity and one committed to first-generation college students. Students will be notified of the opportunity and encouraged to apply.

Goal #1: Outward facing marketing and recruitment materials/website will reflect our school's commitment to diversity

### Strategies:

- Create a Diversity subsite on the FSPH website and/or implement a review of the website architecture to ensure usability and visibility

**Responsible party:** Amanda Briggs, Andy Ware, Angela Evertsen; other to be added

**Timeline:** Summer 2022





- Make the FSPH current diversity more visible in our marketing materials and website  
**Responsible party:** Amanda Briggs, Andy Ware, Angela Evertsen  
**Timeline:** Spring and Summer 2022, ongoing as web pages are updated
- Continue to showcase in our printed and electronic materials the scholarly activities that are directly relevant to DEIJ research, service, and teaching, to attract like-minded staff and faculty. Several examples of established and expanding scholarship in DEIJ are enclosed in terms of publications (Addendum 1), external and internal grant funding (Addendum 2), community-engaged projects (Addendum 3), presentations in scientific conferences (Addendum 4), as well as community-oriented conversations and dissemination talks (Addendum 5).  
**Responsible party:** All faculty and staff; other to be added  
**Timeline:** Ongoing

### Metrics:

- Maintain currency of FSPH webpages

Goal #2: The school will work with OEO to attract and retain a diverse complement of faculty and staff

### Strategies:

- Enhance our recruitment of qualified Faculty and qualified Staff by adding a link to the FSPH Diversity Webpage to all job postings  
**Responsible party:** HR director  
**Timeline:** Ongoing
- Host a listening session with current employees to understand the strengths and challenges related to diversity (and diverse persons experiences). Use that information to guide next steps.  
**Responsible party:** Lisa Dinsmore, Tho Le; others to be added  
**Timeline:** Ongoing in Staff Resource Forum and Faculty Assembly meetings
- Encourage current faculty and staff to use their networks with peers and colleagues as a recruitment tool to help recruit a diverse complement of faculty and staff at FSPH  
**Responsible party:** All faculty and staff; others to be added  
**Timeline:** Ongoing
- Continue to showcase in our printed and electronic materials the scholarly activities that are directly relevant to DEIJ research, service, and teaching, to attract like-minded staff and faculty.  
**Responsible party:** All faculty and staff; others to be added  
**Timeline:** Ongoing
- **Maintain a consistent stream of recruitment initiatives for diverse faculty and staff.**  
**Responsible party:** HR director  
**Timeline:** Ongoing

### Metrics:

- Track postings on websites with wide audiences
- Track record of publications (Addendum 1), external and internal grant funding (Addendum 2), community-engaged projects (Addendum 3), presentations in scientific conferences (Addendum 4), and community-oriented conversations and dissemination talks (Addendum 5)

5), and keep those assets highly visible in our printed and electronic materials.

Goal #3: The school will recruit and retain a diverse student body

### Strategies:

- Use all tools available to help recruit a diverse student body, including effective strategies to reach minoritized and international candidates  
**Responsible party:** Rachel Forster, Christal Hitchens, Sarah Schmitt (final activity TBD); other to be added  
**Timeline:** Ongoing
- Use our student groups as an arm for recruitment. For example, SBS has created a student leadership/advisory group for SBS that will consist of undergraduate and graduate student representatives from diverse backgrounds. This group will receive leadership training and will be consulted in activities developed to help grow the department. Another example is that Global Health has instituted a student-driven, student-staffed initiative (JEDI) to uphold DEIJ principles as a part of its program in DrPH in Global Health (see Addenda 7a and 7b). The goal of the JEDI student group is to serve as an advisory liaison between students, faculty, and staff to hold the DrPH program administration accountable to DEIJ principles and support students from marginalized communities and those committed to working toward those principles in school, career, and community.  
**Responsible party:** Student Success; other to be added  
**Timeline:** Ongoing
- Continue to showcase in our printed and electronic materials the scholarly activities that are directly relevant to DEIJ research, service, and teaching, to attract like-minded students.  
**Responsible party:** All faculty and staff; other to be added  
**Timeline:** Ongoing

### Metrics:

- Track admissions trends  
**Responsible party:** Office of Student Success and Office of Marketing, Communication and Recruitment  
**Timeline:** Each semester
- Track record of publications (Addendum 1), external and internal grant funding (Addendum 2), community-engaged projects (Addendum 3), presentations in scientific conferences (Addendum 4), and community-oriented conversations and dissemination talks (Addendum 5), and keep those assets highly visible in our printed and electronic materials.  
**Responsible party:** Office of Marketing, Communication and Recruitment and Associate Dean of Research  
**Timeline:** Ongoing

### Diversity Indicator III: Climate and Intergroup Relations

#### PARTICIPATE IN CONVERSATIONS TO ENHANCE DIVERSITY AND CULTURAL COMPETENCE

- A. Invite faculty, staff, students and alumni to participate in conversations to increase diversity in our school

1. Plan and promote conversations around diversity in our school
  2. Promote conversations and workshops available on campus and in the community
  3. Encourage faculty and staff participation in at least one conversation or workshop annually
- B. Create inclusive course environments
1. Create learning environments that are inviting and accessible for all students
  2. Ensure the curriculum content and pedagogical strategies reflect a culturally relevant context and a commitment to diversity
    - i. Guest lecturers, preceptors and others who interact directly with our students are mindful of diversity of students, diversity of course content, and diversity of populations and communities
    - ii. Use inclusive language in course syllabi
    - iii. Include teaching examples that are diverse
    - iv. Include reading assignments from diverse authors



For example, in SBS, a number of courses are taught at the undergraduate and graduate levels that provide detailed instruction and analysis of DEI issues. For the MPH program, advancing health equity in a curricular thread that is woven throughout each required course in our curriculum. In our courses students read scholarly works by researchers dedicated to address disparities in health (e.g., David Williams, Camara Jones, Michael Lu, Paul Farmer), they read non-fiction or fiction works that address disparities and how break them down (e.g., Half the Sky), and watch videos or films documenting real world examples of people suffering from discrimination and disparities. Students are mentored as they study and reflect on these materials and as they develop strategies (programmatic and policy) to address inequities and inclusion. Enclosed below are some examples of courses:

- PBHL-S 337 Health Equity and Social Determinants of Health
- PBHL-S 340 Cultural Considerations in the Promotion of Health
- PBHL-S 460/S635 Biosocial Approach to Global Health
- PBHL P510 Introduction to Public Health
- S620 A Biopsychosocial Approach to Stress
- S619 Health Disparities and Health Equity
- S630 Global Maternal and Child Health
- S640 Culture and Health

Goal #1: To create and sustain a welcoming, supportive, and respectful institutional climate that cultivates diversity and inclusion.

### Strategies:

- A. Utilize the results of IUPUI campus-climate survey (<https://studentaffairs.iupui.edu/about/assessment-and-planning/campus-climate-and-outcomes-assessment/index.html>) to proactively address potential climate concerns within the school and to guide climate improvement initiatives.

**Responsible Party:** Administration, Faculty; other to be added

**Timeline:** 2022 (after, every three years during Strategic Planning)

- B. Develop systematic climate assessment processes within the school.

**Responsible Party:** Administration, Faculty; other to be added

**Timeline:** Spring 2023

### Metrics:

- Launch the new assessment processes according to the projected timeline.
- Document climate assessment results (e.g., perceptions of institutional climate reported by FSPH students, faculty, and staff)
- Document new actions to address the concerns reflected by the assessment results.
- Track improved satisfaction of FSPH community as shown by assessment results from multiple years.

For example, in SBS, Interim Chair Jack Turman has received funding (Fall 2022) from an EPIC grant from the university to support collaborations between the department and two Historical Black Colleges and Universities and two Hispanic Serving Institutions. Its goal is to promote a departmental environment that supports women of color in tenure track faculty positions, and to engage in the development of research projects across institutions that will address disparities.

Goal #2: To develop a shared understanding of diversity and maintain high visibility of the principles of an inclusive community.

### Strategies:

- Use multiple communication tools to publicize diversity-related information, such as goals, initiative programs, promotional events, and community engagements, among students, faculty, and staff in FSPH.

**Responsible Party:** Faculty, Staff, Students; other to be added

**Timeline:** Ongoing

- Create recognition programs that acknowledge contributions made to improve diversity and inclusion.

**Responsible Party:** Administration, Faculty, Staff, Students; other to be added

**Timeline:** Summer 2023

- Continue to showcase in our printed and electronic materials the scholarly activities that are directly relevant to DEI research, service, and teaching, to maintain high visibility of our DEI mission.

**Responsible party:** All faculty and staff; other to be added

**Timeline:** Ongoing

### Metrics:

- Undertake effective dissemination of fundamental principles and shared values.
- Track new recognition programs.
- Track record of publications (Addendum 1), external and internal grant funding (Addendum 2), community-engaged projects (Addendum 3), presentations in scientific conferences (Addendum 4), and community-oriented conversations and dissemination talks (Addendum 5), and keep those assets highly visible in our printed and electronic materials.

Goal #3: Increase intercultural engagement. Invite faculty, staff, students and alumni to participate in conversations to increase diversity in our school.

### Strategies:

- A. Plan and promote programs that encourage meaningful conversations across groups and increases intercultural understanding.  
**Responsible Party:** Dean's Office, Faculty Assembly and Staff Resource Forum  
**Timeline:** Ongoing
- B. Promote conversations and workshops about diversity on campus and in the community  
**Responsible Party:** Dean's Office  
**Timeline:** Ongoing
- C. Support the development and success of student organizations focused on social and academic needs of individuals with various cultural identities.  
**Responsible Party:** Office of Student Success  
**Timeline:** Ongoing

### Metrics:

- A. Encourage faculty and staff participation in at least one conversation or workshop annually.
- B. Document number of events and participation rates.
- C. Track feedback from faculty, staff, students, and/or alumni regarding the programs and workshops.

### Diversity Indicator IV: Access and Success

ENHANCE OPPORTUNITIES FOR SUCCESSFUL ENGAGEMENT IN PUBLIC HEALTH LEARNING AND PRACTICE

- A. **The school will maintain an open dialogue and forums to identify and promote opportunities for students to have a successful learning experience, and selection of career choices.**

Goal #1: Expand community outreach for student recruiting to diverse populations of potential student groups.

*Ensure our school's recruitment materials include representation of diverse populations and our school's learning environments are inviting and accessible to diverse students.*

### **Strategies**

1. Maintain inviting and inclusive marketing efforts that (website, email, ads, recruitments events, etc.) include a percentage of diverse images and language.  
**Responsible party:** Office of Marketing, Communication and Recruitment; Office of Student Success; FSPH Diversity Task Force  
**Timeline:** ongoing
2. Invite our school's faculty, staff, and students to enhance marketing efforts to diverse populations.  
**Responsible party:** FSPH Staff & Faculty; Office of Marketing, Communication and Recruitment  
**Timeline:** ongoing
3. Ensure faculty and staff are creating learning environments that are accessible and inviting for all qualified students – always striving for success in studies and career.  
**Responsible party:** FSPH Faculty; Office of Student Success  
**Timeline:** ongoing
4. Maintain an offer of learning opportunities across the IUPUI campus, to increase visibility of the DEIJ mission in partnerships with other campus units (see Addendum 6).  
**Responsible party:** FSPH Faculty & Staff; Office of Student Success  
**Timeline:** ongoing

### **Metrics:**

- Track marketing statistics (website engagement, email engagement, etc.)
- Document enrollment of diverse students (first-generation students, 21st Century Scholars, Pell Grant recipients, underrepresented minority students)
- Track website traffic and cyber features, as well as new partnerships with other campus units

# ADDENDA

## Addendum 1. Peer-reviewed professional and scientific publications incorporating Diversity, Equity, Inclusion and/or Social Justice themes

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McCord, A., Drauker, C., & **Bigatti, S.** (2018). Cultural stressors and depressive symptoms in Latino/a adolescents: An integrative review. *Journal of the American Psychiatric Nurses Association*. doi: 10.1177/1078390318778885. [Epub ahead of print] PMID: 29862864

## Addendum 2. External and internal grants incorporating Diversity, Equity, Inclusion and/or Social Justice themes

*William T. Grant Foundation*

04/01/21 to 03/31/22

“Research Use by Local Decisionmakers in State-Level Evidence-Based Funding for Youth Substance Use Prevention”

\$49,259

PI Sean P. Grant

*Eli Lilly. Global Health Partnership*

2018-2023

Principal Investigator. Diabetes Impact Project.

\$7,000,000.

PI Lisa K. Staten

*Eli Lilly. Global Health Partnership*

2021-2026

Principal Investigator. Diabetes Impact Project 2.0.

\$5,000,000

PI Lisa K. Staten

Agency: *Riley Children's Foundation*

Dates: 8/1/18-7/31/23

Title: Grassroots Maternal and Child Health Leadership to Reduce Indiana Infant Mortality

Budget: \$2,700,000

P.I. Jack Turman, Jr.

Agency: *Indiana State Department of Health*

Dates: 10/1/20-9/30/21

Title: Grassroots Efforts to Improve Indiana MCH Outcomes

Budget: \$79,207

P.I. Jack Turman, Jr.

Agency: *Central Indiana Community Foundation*

Dates: 4/1/21-3/31/22

Title: Narrative Analysis to Undo Structural Racism in Indiana

Budget: \$50,000

P.I. Jack Turman, Jr.

Agency: *Indiana State Department of Health – Title V Funding*

Dates: 10/1/2021-9/30/2023

Title: Mothers on the Rise

Budget: \$85,500

P.I. Jack Turman, Jr.

Agency: *Indiana University Office of the Vice President of Research*

Dates: 2020-2021

Subject: Grant 1. H-COVID Rapid Response Study: Characterization of Knowledge, Attitudes and Behaviors about COVID-19 Pandemic among Hispanic Respondents in Indiana

Budget: \$11,270

P.I. Gerardo Maupome

CO-P.I. Brea Perry

Agency: *Clinical Proposal Development Team, Indiana Clinical and Translational Science Institute*

Dates: 2020-2021

Subject: Grant 2. H-COVID Rapid Response Study: Characterization of Knowledge, Attitudes and Behaviors about COVID-19 Pandemic among Hispanic Respondents in Indiana

Budget: \$15,000

P.I. Gerardo Maupome

CO-P.I. Brea Perry

Agency: *Indiana AIDS Fund*

Dates: 2020-2021

Subject: HIV Extension for Community Healthcare Outcomes (ECHO)

Budget: \$220,875

P.I. Gerardo Maupome

CO-P.I. Bree Weaver, Amy

Kressel, Andrea Janota

Agency: *Indiana State Department of Health*

Dates: 2019-2022

Subject: Indiana Peer Education Program (IN PEP) Extension for Community Healthcare Outcomes (ECHO)

Budget: \$220,875

P.I. Gerardo Maupome

CO-P.I. Andrea Janota

Agency: *Indiana State Department of Health*

Dates: 2019-2022

Subject: Indiana Communities Advancing Recovery Efforts (IN CAREs) Extension for Community Healthcare Outcomes (ECHO)

Budget: \$447,189

P.I. Gerardo Maupome

CO-P.I. Andrea Janota

Agency: *Indiana University Grand Challenges*

Dates: 2018-2022

Subject: Project Extension for Community Healthcare Outcomes (ECHO) Opioid Use Disorder Hub

Budget: \$1,007,800

P.I. Gerardo Maupome

CO-P.I. Andrea Janota & Zach

Adams

Agency: *Agency for Health Research and Quality*

Dates: 2020-2021

Subject: Project Extension for Community Healthcare Outcomes (ECHO) AHRQ ECHO National Nursing Home COVID-19 Action Network

Budget: \$1,600,000

P.I. Gerardo Maupome and Kathleen Unroe

CO-P.I. Andrea Janota

Agency: *National Institute of Dental and Craniofacial Research*

Dates: 2016-2023

Subject: Social network dynamics and oral health disparities in Mexican American immigrants (“VidaSana”)

Budget: \$3,400,000

P.I. Gerardo Maupome

### Addendum 3. Projects incorporating Diversity, Equity, Inclusion and/or Social Justice themes

**Grassroots MCH Initiative (Turman):** This statewide initiative aims to build the capacity of individuals and organizations within marginalized communities to bring about systems change that improve birth and infant development outcomes (<https://fsph.iupui.edu/research-centers/centers/cheer/grassroots/index.html>). This project focuses on:

- Building the capacity of early childhood education centers, affordable housing communities, faith based organizations within marginalized communities to improve birth and infant development outcomes.
- Building adult and teen Grassroots MCH Leaders to bring about systems change and to have a voice at MCH decision making groups for Indiana.

Develop a coordinated system of care to improve health and social outcomes of mother/baby pairs leaving the nursery unit of the Indiana Women’s Prison. (<https://khn.org/news/incarcerated-mothers-reentry-prison-program-helps-new-mom-inmates-transition/>, [https://mediatracks.com/shows/RHJ\\_20-48.mp3](https://mediatracks.com/shows/RHJ_20-48.mp3)).

- Inform policy makers of the social and economic needs of women from marginalized communities to help them develop policy that addresses the social determinants of MCH. (<https://www.indystar.com/story/opinion/2021/10/14/eviction-moratorium-indiana-black-women-wage-gap-higher-eviction-rates-op-ed/6094968001/>)

**DIP IN (Staten):** (<https://fsph.iupui.edu/research-centers/centers/cheer/diabetes-impact-project.html>) – This project is working in three different marginalized communities within Indianapolis, all of which have high diabetes rates, and are characterized by a large percentage of underrepresented minorities. Through this project, we plan to:

- increase screening-seeking behavior for those at high risk
- improve access and continuity of care for people with diabetes
- foster an environment (physical and social) that supports diabetes control and prevention.

**Your Life, Your Story, Latino Youth Summit (YLYS) (Bigatti):** Dr. Silvia Bigatti started, with other collaborators on campus, the Latinx Community University Research Coalition of Indiana. The mission of the coalition is to connect university researchers with community organizations to address equity and well-being for Latinos across the state of Indiana, through community-engaged research efforts. The conference has been featured in the local Spanish Media (<https://www.youtube.com/watch?v=HocqWqoIIRs>). As a product of such coalition, Dr. Bigatti’s team created a

resilience-building and identity development intervention, an arts-based summer camp (<https://vimeo.com/100898873>). Its interdisciplinary team brings together academics from various units on campus as well as local professional artists and therapists. The program has run for the last five years with contributions from various organizations around Indianapolis, and significant investment from IUPUI in the form of funding of undergraduate students who serve as mentors. YLYS has purported to increase resilience and decrease depressive symptoms in participants. YLYS has been highlighted by various IUPUI publications and in a WFYI piece (<http://www.wfyi.org/news/articles/mental-wellness-promoted-at-latino-youth-camp>).

### ***Evolution of egocentric networks among Hispanic immigrants (“VidaSana”):***

Build on previous and ongoing efforts of 10+ years of conducting population-based research with the Hispanic community, funded by Indiana CTSI (e.g., RR025761, UL1TR001108) and NIH grants (e.g., DE022096, DE025836), the project VidaSana is now in its 6th year. To acquire a fuller understanding of immigration dynamic processes, the ongoing VidaSana Study (DE025836) recruited 547 immigrants from Central America and Mexico who were being interviewed at baseline, 6, 12, and 18 months to ascertain evolution of personal and community networks. Besides offering a comprehensive perspective of those network factors that improve or undermine health outcomes, VidaSana is affording a unique dataset to develop and refine methods to measure evolution of peer networks over time.

### ***Dental Health Inequities Affecting Central Americans:***

With funding from the CHEP/CTSI in 2017 and 2018, Dr. Maupome, colleagues from the Richard M. Fairbanks School of Public Health, and community members (mainly through La Plaza, Inc. but not only with this preeminent community organization led by Miriam Acevedo-Davis) evaluated existing knowledge, customs and perceptions in groups of immigrants from Guatemala, Honduras and El Salvador, living in Indiana. The emphasis was on developing a manual to support the exploration and discovery of dental issues for people otherwise left out of the dental care market. This resource grew organically from focus groups, key informant interviews, developing a survey, administering as a survey to about 200 immigrants, and analyzing data. Through several iterations, we created the manual “Dental Health Inequities Affecting Central Americans: Enabling Choices at the Grass-Root Level and Supporting Change in Policy-Makers”. It is available through the VidaSana study website (scroll down to Materiales) in <http://vidasana.iuni.iu.edu/>. The manual has been widely disseminated to Hispanic and minority organizations in Indiana, and it is available free of charge electronically and in print.

### ***Hispanic-COVID***

There is little doubt that Hispanics were and are one of the groups hardest hit by the COVID-19 epidemic. They often are hourly workers with unstable employment and inadequate benefits; undocumented immigrants who are not eligible for public assistance protection or access to health care; persons with limited schooling who are less able to navigate government support opportunities; and living as isolated families or individuals who may not have peers to rely on when catastrophic financial situations arise. To address gaps in the COVID-19 body of knowledge relevant to Hispanics, Dr. Maupome designed a survey in early 2020. Its medium-term goal was assembling reliable, context-specific, and actionable resources for the community to meet health challenges. No Spanish language COVID-19 survey tools were available (summer of 2020) nor targeted Hispanic-specific issues at the time. Dr. Maupome led the Hispanic COVID-19 (H-COVID) Study to begin addressing this gap through partnering with an IU team conducting the P2P Rapid Response COVID-19 Study (RRC). RRC had contacted ~1,600 respondents as part of the Grand Challenges

Precision Health Initiative Study. Dr. Perry is the PI of the RRC and a Co-I in the H-COVID. The P2P uses a state-representative probability sampling frame. Presence of Hispanic respondents in RRC or P2P is not ideal, as they do not figure in representative numbers in sampling frameworks. H-COVID purported to sample segments of Hispanics more likely to have been undercounted in the P2P data collection. As in the case of the IUSCC Indiana Latino Cancer Survey, multiple products from the H-COVID study are envisioned for the short and medium terms. Specifically, Drs. Perry and Maupome are leading five analyses addressing discrimination, stress, quality of life, financial and residential insecurity, the roles of masculinity and parenting impacts on family welfare, and health communications in the context of COVID 19 and Hispanic-specific variables.

### **Latino Cancer Survey in Indiana**

Dr. Maupome is Co-Investigator (together with Dr. Heather O'Leary) in the IU Simon Cancer Center (IUSCC)-funded Indiana Latino Cancer Survey, led by Drs. Susan Rawl and David Haggstrom. This Hispanic-focused survey aimed to collect state-wide data to inform the perspectives that IUSCC has acquired about the state of health and cancer throughout Indiana. An earlier survey conducted in 2016 gathered considerable information about the 'average' residents in Indiana – as sampled from official rosters such as tax registries and driver licenses. This approach explicitly and consistently underestimates data pertinent to Hispanics in most surveys, in particular those Hispanics less likely to figure in such sampling frameworks. The new approach used in the Indiana Latino Cancer Survey specifically sampled those segments of the Hispanic population more likely to have been undercounted in the first survey. The research team is analyzing data from 1,649 study participants (data collected in 2020), leading to a considerable expansion of the knowledge base about risk factors, perceptions, attitudes and behaviors related to cancer experience and cancer treatment experience overall. Multiple products are envisioned as a result of the IUSCC Indiana Latino Cancer Survey, including refined patient-specific assessments, health promotion materials that are culturally appropriate and not merely translated to Spanish, and leverage points to use and build healthful approaches and behaviors in the Hoosier Hispanic community.

#### **Addendum 4. Presentations at professional and scientific conferences incorporating Diversity, Equity, Inclusion and/or Social Justice themes**

1. **Turman, Jr., JE**, Irby, A, Casavan, K, Swigonski, N (2020) Grassroots leaders working with policymakers advance social systems change to improve birth outcomes. APHA Conference, Virtual.
2. Irby, A, **Turman, Jr., JE** (2020) Grassroots leaders utilization of storytelling for community change. CityMatCH Conference, Virtual
3. Demystifying COVID-19. Panel discussion (Hasan-Pratt A, Carlos G, Moreno MJ, **Maupomé G**) at the Region 5 Medical Education Conference of the Student National Medical Association (SNMA). 10/24/20. Indianapolis IN.
4. Engaging the community: COVID-19 and its impact on minority communities. **Maupomé G**, Reid T. Indiana Pandemic Information Collaborative (IPIC) COVID-19 Seminar Series. Indiana University, Regenstrief Institute. <https://iu.mediaspace.kaltura.com/channel/channelid/18615227311/05/20>. Indianapolis IN.
5. Overview of Social Determinants of Health in the Context of Research Opportunities. Case study: Covid-19 and its impact on minority communities. T32 Fellowship Seminar Series. **Maupomé G**. Indiana University Simon Cancer Center. 12/07/20. Indianapolis IN.

6. A Conversation about IU's Responding to the Addictions Crisis Grand Challenge. Indiana University Grand Challenges: Progress, Results, and Outcomes webinar series <https://vproweb.sitehost-test.iu.edu/campaigns/grand-challenges-webinar-series/index.html>. Aalsma MC, Adams ZW, **Maupomé G**, Zapolski T, moderated by Cate F. [https://iu.mediaspace.kaltura.com/playlist/dedicated/169382541/1\\_lgo1a5pj/1\\_qkqo0knr](https://iu.mediaspace.kaltura.com/playlist/dedicated/169382541/1_lgo1a5pj/1_qkqo0knr) Indiana University Office of the Vice-President for Research. 12/17/20. Bloomington IN.
7. Nursing Homes COVID-19 Action Network (NHCAN) ECHO Program. Unroe KT, **Maupomé G**, Holtz LR, Janota AD. Indiana Pandemic Information Collaborative (IPIC) COVID-19 Seminar Series. Indiana University, Regenstrief Institute. 01/05/21. Indianapolis IN.
8. Indiana University Virtual Racial Justice Business Partner Summit. Gill V, Cate F, Jackson T, Murtadha K, Zapolski T, **Maupomé G**. <https://partnerships.iu.edu/what-we-do/racial-justice-projects/> or <https://fsp.h.iupui.edu/research-centers/hispanic-health-inequity.html> Indiana University Office of the Vice-President for Research. 03/02/21. Bloomington IN.
9. **Maupomé G**. Presentation: *Viewing and Incorporating Race and Cultural Minority Status into Oral Health Research: Issues of Equity and Social Justice*. 2021 IADR/AADR/CADR General Session & Exhibition. 8th IADR Academy: Integrating Behavioral and Social Determinants into Oral Health Research, 07/20/21. Organizers: Daniel W. McNeil, Cameron L. Randall. Boston MA (virtual meeting).
10. **Maupomé G**, Brooks CV. Workshop 3: *Workshop 3: Social Network Theory and Analysis: Toward a More Complete Understanding of Social Determinants in Oral Health*. 2021 IADR/AADR/CADR General Session & Exhibition. 8th IADR Academy: Integrating Behavioral and Social Determinants into Oral Health Research, 07/20/21. Organizers: Daniel W. McNeil, Cameron L. Randall. Boston MA (virtual meeting).
11. **Maupomé G**. IUPUI Center for Translating Research Into Practice (TRIP) Fall 2021 Showcase Annual Fall Showcase keynote speaker, Bantz-Petronio TRIP Faculty Award recipient. "Does this look infected to you?" *Peer Networks, Health Behaviors, and Healthcare Seeking Behaviors Among Hispanics*. 10/14/21. Indianapolis, IN.
12. Invited Panel, A Multi-Partner Approach to Diabetes Prevention and Control in Three Urban Indianapolis Neighborhoods (DIP-IN). 2020 National Minority Quality Forum Summit on Health Disparities and Health Braintrust. Virtual Summit. DIP-IN Panelists: **Staten, LK**, Roberts, C, Duckett, P., Gurvitz A., Jessup A., Rice R., Zapata S. Oct. 6.
13. **Stone C., Staten LK., Opp A., Childress S.,** Graham-Adams P., Adams E. (2020). Primary Prevention Focus in Diabetes Impact Project Neighborhoods. 2020 Virtual Indiana Nursing Summit. Nov. 2, 2020-Jan. 31, 2021. (poster)
14. **Stone C., Duckett P., Weathers T., Childress S.,** Adams E., **Staten LK** (2020). Diabetes Impact Project: A community-engaged approach to reducing diabetes burden at the neighborhood level. American Public Health Association 2020 Virtual Annual Meeting. Poster Oct. 25 (poster)
15. Morrow Q, **Staten LK, Weathers TD, Stone C,** Jessup A (2020). A holistic approach to community health work addressing diabetes. American Public Health Association 2020 Virtual Annual Meeting. Roundtable Oct. 27.
16. **Stone C,** Graham-Adams P, Crone B, Opp A, Staten LK (2021) Community engagement strategy for diabetes prevention. American Public Health Association. Denver, CO. (virtual presentation).
17. Schultz, L., O'Palka, J., Blackburn, S. & **Bigatti, S.** (2020). *Evaluating the Burmese population and their use of the WIC program*. Poster presented at the Academy of Nutrition and Dietetics Conference, Texas, Virtual.

## Addendum 5. Community-oriented and community engaged presentations, panels and dissemination activities.

1. IUPUI Explains Hispanic Heritage Month. **Moreno-Madriñán MJ**, Wilburn V, Espinoza-Gutarra MR, Davis J, Chastain MC. IU Studios. October 15, 2021. Indianapolis, IN, USA
2. **Gerardo Maupome**. Indiana Hispanic Health Survey for Cancer. En Contexto, with Luis Navarro, Telemundo. 08/31/20. Indianapolis, IN. <https://www.youtube.com/watch?v=5laOQIHDCvo>, <https://www.youtube.com/watch?v=hKkW35Ai7PQ>
3. **Gerardo Maupome**. Is coronavirus here to stay? En Contexto, with Luis Navarro, Telemundo. 04/20/20. Indianapolis, IN. <https://www.youtube.com/watch?v=SQFcu04OT64>.
4. **Gerardo Maupome**. Coronavirus Conspiracy Theories. En Contexto, with Luis Navarro, Telemundo. 04/26/20. Indianapolis, IN. <https://telemundoindy.com/30265/teorias-de-conspiracion-sobre-el-coronavirus/>.
5. **Gerardo Maupome**. A second wave of COVID-19 infections. En Contexto, with Luis Navarro, Telemundo. 04/26/20. Indianapolis, IN. <https://telemundoindy.com/30268/segunda-ola-de-contagios-por-covid-19/>.
6. **Gerardo Maupome**. COVID-19 Information Panel, COVID-19 Vaccines and Public Health Issues, 09/16/20. [https://www.facebook.com/watch/live/?v=735334133739884&ref=watch\\_permalink](https://www.facebook.com/watch/live/?v=735334133739884&ref=watch_permalink) (Spanish). Drs. Gerardo Maupome, Max Moreno, Elvia Hurtado. Latino Education & Outreach Program, Community Education Coalition. (<http://educationcoalition.com/about-us/#our-mission> ). Columbus IN.
7. **Gerardo Maupome**. COVID-19 Vaccine. Myths and Reality. Maupome G, Franco LE, Constant G, Ceja F, Garza C. <https://www.facebook.com/ConsulmexIndianapolis/videos/220020566574737> Spanish). Mexican Consulate in Indianapolis. FaceBook Live. 03/05/21. Indianapolis IN.
8. **Gerardo Maupome**. COVID-19 Information Panel, Delta Variant and the Future, 09/15/21. [https://www.facebook.com/watch/live/?v=154248900209666&ref=watch\\_permalink\\_o](https://www.facebook.com/watch/live/?v=154248900209666&ref=watch_permalink_o) <https://fb.watch/82Wpvps5yi/> (Spanish). Drs. Gerardo Maupome, **Max Moreno**. Su Casa Columbus (<https://www.sucasacolumbus.com/> ) and Latino Education & Outreach Program, Community Education Coalition. (<http://educationcoalition.com/about-us/#our-mission> ). Columbus IN.
9. **Lisa K. Staten**. Interview, Regenstrief Podcast: The Problem – Episode Access to Care with Diabetes (06/18/21). Includes Patrice Graham Adams and Ron Rice (CHW and community resident) - <https://www.regenstrief.org/podcast/season-4-episode-5-access-to-care-with-diabetes/>
10. **Lisa K. Staten**. Lilly Gives \$5M to Diabetes Program Targeting Indianapolis' Least Healthy Neighborhoods. Media. <https://www.indystar.com/story/news/2021/09/16/lilly-5-m-diabetes-program-indys-least-healthy-neighborhoods/8337240002/>, Sept 16, 2021.



11. **Lisa K. Staten.** Project to Improve Health Equity in Indianapolis Expands with Funding from Lilly. Media, <https://news.iu.edu/stories/2021/09/iupui/releases/16-new-funding-expands-diabetes-impact-project-indianapolis-eli-lilly.html>. News at IUPUI. Sept 16,2021.
12. **Lisa K. Staten.** Lilly Grant to Expand Indy Health Equity Program. Media. <https://www.insideindianabusiness.com/story/44749664/lilly-grant-to-expand-indy-health-equity-program>. Sept 16, 2021.
13. **Lisa K. Staten.** Media. Interview about DIP-IN. IU AP partnership. Distributed to AP. October. Downloaded in October by KOIN-TV, PRESS TV (Iran), TV Cultura (Brazil).
14. **Lisa K. Staten.** Invited Panelist, Social Determinants of Health, Indiana Wellness Virtual Summit, Indiana Chamber of Commerce. Sept. 10

Addendum 6. Activities in the Scholarly Concentration in Public Health (IU School of Medicine) that are related to Diversity, Equity, Inclusion and/or Social Justice themes (sponsored by William Tierney and supported by FSPH)

Project Description
Health Disparities in orthopedic care
Urban-rural disparities in pediatric surgery in Indiana hospitals
Introducing a composite index of socioeconomic disadvantage, with comparison to standard indices.
Survey Hispanic women visiting a clinic in Frankfurt to examine their knowledge attitudes for cervical cancer screening and HPV vaccination
Assess whether levels of poverty-related stress have decreased since the revitalization of Avondale Meadows Purpose Built Community in 2003.
Top causes of neonatal mortality in refugees
Assessing the Nutritional Values/Quality of foods provided by food pantries to low-income communities in Marion County (with Collin Wilkins)
Diabetes management, access to medications, and how to improve care with limited resources.
QI project aiming to address SDOH and ACEs among Eskenazi and IUH clinics
Project: engage with 10 participating practices in Indianapolis area with the goal of supporting and empowering individual pediatric practice systems to implement measurable process improvements for addressing maternal depression, social-emotional development, and SDoH, adverse childhood experiences (ACEs), and toxic stress
What are the most common barriers are to gender fluid people and accessing healthcare?
Examining lead testing rates in East Chicago and coming up with an intervention to increase them
What are the barriers to COVID19 vaccine compliance in the adult Latinx population in Indianapolis?

## DrPH student discussion group report back and cohort conversation: building justice, equity, diversity, and inclusion (JEDI) in the DrPH program

DRPH STUDENT DISCUSSION

MAY 13<sup>TH</sup>, 2021

CO-FACILITATED BY DRPH STUDENTS ANTONIETTE HOLT (C1) & JASON TURI (C2)

### Agenda

1. Introductions, spirit, purpose, and goals for discussion (Antioniette/Jason) 5 min
2. Presentation of key themes/suggestions/next steps(Antioniette/Jason) 10 min
3. Reflections of group participants (DrPH students that participated in discussion groups April-May invited to share) 20 min
4. Open discussion: conversation focused on ways to support JEDI in the DrPH program, focus on feedback and suggestions from DrPH students not involved in JEDI activities currently (entire Cohort) 20 min
5. Wrap-up and thank you (Antioniette/Jason) 5 min

**Spirit:** We approach this work with a spirit of humility, empathy, flexibility, good will, friendliness, and the acknowledgment that we are all on a shared journey of self-work. These issues can be challenging to discuss and address, we commit to being respectful and open to receiving differences in opinion and lived experiences.

**Purpose:** To update all DrPH students on JEDI student-led discussions thus far, bring students together in dialogue, share perspectives, and invite others to participate.

**Goal:** To review and discuss themes of April-May 2021 discussion groups with all students and to collect additional student input and suggestions on ways to build JEDI initiatives in the DrPH program

## Getting together, getting to know each other, and building for the future

- ▶ There was a general sense of excitement and hopefulness that this group was coming together to discuss these issues. There were members from each cohort present at each of our meetings.
- ▶ We spent a significant amount of time getting to know each other from each of the cohorts, some of us connected one on one after the meetings to further introduce and network.
- ▶ We plan to build long-term mechanisms to grow JEDI initiatives through the DrPH program and School of Public Health is preferred. For example, JEDI committee, affinity groups, and working groups.

## Recognizing that individual and group experiences vary

- ▶ There is a spectrum of experiences and challenges faced by DrPH students of different identities including gender, race, ethnicity, national origin, religion, sexual orientation, disability etc. This is often under recognized or even dismissed by other students, faculty, and staff.
- ▶ There have been active and passive conflicts within and between the cohorts on a variety of topics, including differential treatment by professors, aggressions between students and between students and faculty. We want to stress the importance of directly addressing issues of racism, discrimination and bias within our cohorts and in our work in the field, although at times this has been minimized by students and faculty.

## Equity is a core public health leadership issue

- ▶ Oppression, marginalization, bias and equity are critical global health issues, leaders/practitioners often lack the skills to have conversations and drive change. These inequities are often magnified at the global level, thus leadership capacity to address these issues is imperative.
- ▶ Recognition that Global Health Equity is a core leadership competency and should be integrated into the DrPH program, especially at the beginning of the program to establish a foundation of concepts and models to support students and faculty as they progress through and beyond the program.

## Suggestions

- ▶ Building an equity culture within the DrPH program through student, faculty, and staff training focused on addressing and undoing racism, discrimination, bias, and xenophobia is suggested next step to be strongly considered.
- ▶ DrPH code of ethics, respect, and conduct partnered with requirements for new students to demonstrate a commitment to equity culture and equity leadership in their DrPH personal statements should be required for admission. We are interested in transformational change of this program and the field of global public health.

### **Reflections of JEDI group participants:**

DrPH students that participated in discussion groups April-May invited to share perspectives and reflections

**Open discussion:** conversation focused on ways to support JEDI in the DrPH program, focus on feedback and suggestions from DrPH students not involved in JEDI activities currently

### **Suggestions**

- ▶ Developing and integrating BIPOC faculty at Fairbanks School of Public Health to strengthen the program, advocate for students/faculty, and serve as professional and academic mentors and role models.
- ▶ Regular feedback of our JEDI group meetings to other DrPH students, faculty, and staff to foster inclusiveness, transparency and participation.

### **Next steps**

- ▶ Report back to DrPH students during May In-Residence sessions and collect suggestions and feedback to support JEDI initiatives moving forward.
- ▶ Convene JEDI discussion group throughout Summer 2021 semester to debrief on March-May activities and plan next steps.
- ▶ Meet with DrPH program administration to feedback progress, challenges, insights, recommendations, and next steps.

## Group Discussion Notes C 3A/3B

- ▶ Bias assessment and training, emerging leadership requirement. Insightful to learn from other perspectives and opportunity to do self-reflection as well
- ▶ Multi-faceted, long-term approach is best practice
- ▶ Training that challenge comfort zones can help promote change
- ▶ Better understanding the perspectives of others and of ourselves
- ▶ Who bears the weight of the JEDI issues being faced in the DrPH program?
- ▶ What is the role of allies in this JEDI work?
- ▶ How can admin, faculty better lead this initiatives?
- ▶ Impact of colonialization and global health both historically and currently. Impact on research agendas, education systems, consistent framing issues from the global north.
- ▶ Global Health Systems: complex issues of diversity; as a policy tracking outcomes and the potential impact of bias and discrimination. Systems need to track these outcomes in order address these issues.
- ▶ Opportunity to expand leadership unit of curriculum to incorporate equity concepts and practice. Set expectations early.

## Group Discussion Notes C2

- ▶ Building curriculum for better awareness and skills in Global Health Equity
- ▶ Specific course has not yet solely focused on Global Health Equity
- ▶ Reshaping curriculum to align with current trends broadly linked to Global Health Equity.
- ▶ Access to care, SDOH, racism, social justice, disparities
- ▶ Public Health Education – shaping curriculum in 21<sup>st</sup> century
- ▶ 10 essential services for the CDC – focus on health equity
- ▶ Competency based public health practices: Council on Linkages – all PH entities in the country, developing core competencies for public health practices – curriculum can align to these new policies
- ▶ Coming this fall – recommended core competencies to help guide curriculum
- ▶ Adding electives such as Racial and Ethnic inequalities in Health
- ▶ Addressing gender violence as critical issue in global public health
- ▶ Understanding cultural aspects – is important for students and staff
- ▶ Addressing unconscious bias around gender

## Group Discussion Notes C2

- ▶ Curriculum Implementation
- ▶ Weekly interaction and actions of students and staff
- ▶ How do we deal with tension that comes up in class, building competency of students and faculty
- ▶ Building skills and awareness of the instructor and students
- ▶ W/ Public Health Council ex. Bringing more diversity esp. after issues within the group arose – set aside time for implicit bias training (PH skills, politics, equity) multi-faceted approach – sensitive to subject matter and individual experience
- ▶ Weaving in implicit bias and other skills into curriculum and offering additional trainings
- ▶ Devoting a class early in the program devoted to the topic, early implementation is important
- ▶ Setting ground rules and expectations at the onset of the program
- ▶ Influencing the culture and experience of program
- ▶ Orienting students (maybe faculty as well) to norms and expectations of program
- ▶ Engaging program administration is an important factor
- ▶ How to manage conflict and reconcile differences between students/faculty/admin
- ▶ Supportive resource to bring experience in conflict resolution, building equity culture, expert in equity to facilitate dialogue
- ▶ Applying concepts of equity to work in the program and in the field
- ▶ DrPH handbook and some syllabi reference these concepts, but there is a need to intentionally build these concepts into the program
- ▶ Engaging faculty on these issues can be extremely challenging. Many trained in practice, but not education.
- ▶ Looking at faculty development related to equity, conflict, and implementation of the curriculum.
- ▶ Limitation of representation of students from LMIC, are there scholarships available?

## Thank you for your time and participation!

- ▶ Antoniette Holt: [amholt@iupui.edu](mailto:amholt@iupui.edu)
- ▶ Jason Turi: [jasturi@iu.edu](mailto:jasturi@iu.edu)

## Justice, Equity, Diversity, and Inclusion (JEDI) committee: Cohort 4 welcome and introduction



IUPUI DRPH: GLOBAL HEALTH LEADERSHIP PROGRAM  
AUGUST 17<sup>TH</sup>, 2021  
CO-FACILITATED BY JEDI COMMITTEE MEMBERS COHORTS 1-3

### Open discussion and Q/A:

Suggestions/Reflections from Cohorts 3 & 4 collected from the session

- Given that we are a Global Leadership Program, we may want to lean on the WHO language (e.g. SDOH), some of our US language is not well understood OUS - but the SDOH language seems to work more universally, food for thought...
- I would say we would need to be mindful that JEDI in the international setting will have different parameters. The equity issues that we (USAID) has been working on in India and Indonesia are defined very differently. I agree that the language from both WHO as well as some of the other frameworks being developed by groups addressing colonialism in global public health
- HIPAA is a canvas course. But there are a multitude of D & I courses also.
- Thinking of perspective of international students. How is "equity" training viewed from the perspective of our diverse global students. Need to be careful that our conversation of equity action items, do not forget that US views and language may be viewed differently in other cultures.
- We have International students in our cohorts, and professors! how do we make sure that their voices are heard and not overwhelmed by the Americans? (we deal with this in HCP advisory boards a lot, especially if English is not a native language - as these are very tough concepts to discuss with confidence)
- Is the JEDI program integrated with the broader university efforts? IUPUI has a division <https://diversity.iupui.edu/> and the med school has a division <https://medicine.iu.edu/about/diversity>. Are there similar efforts at the school of public health that can support this? Could other programs at the school be included in addition to the DrPH program?

### Sue's comments from JEDI follow-up meeting August 18th

- ▶ Interest in applying JEDI principles and recommendation to the following areas of the DrPH program
  - ▶ Initial application and personal statement
  - ▶ DrPH Website Homepage
  - ▶ Embedding in programmatic structure and curriculum
  - ▶ Integrating into the School of Public Health accreditation process
  - ▶ New student and faculty orientation/trainings
- ▶ In general, robust support of the JEDI committee, recommendations, and excitement for potential value this holds from the program, students, and faculty.

**Thank you for your time, good luck to all, and stick together!**



## **Background Information**

COLLECTED MAY 2021

## **Recognizing that individual and group experiences vary**

- ▶ There is a spectrum of experiences and challenges faced by DrPH students of different identities including gender, race, ethnicity, national origin, religion, sexual orientation, disability etc. This is often under recognized or even dismissed by other students, faculty, and staff.
- ▶ There have been active and passive conflicts within and between the cohorts on a variety of topics, including differential treatment by professors, aggressions between students and between students and faculty. We want to stress the importance of directly addressing issues of racism, discrimination and bias within our cohorts and in our work in the field, although at times this has been minimized by students and faculty.

## **Equity is a core public health leadership issue**

- ▶ Oppression, marginalization, bias and equity are critical global health issues, leaders/practitioners often lack the skills to have conversations and drive change. These inequities are often magnified at the global level, thus leadership capacity to address these issues is imperative.
- ▶ Recognition that Global Health Equity is a core leadership competency and should be integrated into the DrPH program, especially at the beginning of the program to establish a foundation of concepts and models to support students and faculty as they progress through and beyond the program.

## Suggestions

- ▶ Building an equity culture within the DrPH program through student, faculty, and staff training focused on addressing and undoing racism, discrimination, bias, and xenophobia is suggested next step to be strongly considered.
- ▶ DrPH code of ethics, respect, and conduct partnered with requirements for new students to demonstrate a commitment to equity culture and equity leadership in their DrPH personal statements should be required for admission. We are interested in transformational change of this program and the field of global public health.

## Suggestions

- ▶ Developing and integrating BIPOC faculty at Fairbanks School of Public Health to strengthen the program, advocate for students/faculty, and serve as professional and academic mentors and role models.
- ▶ Regular feedback of our JEDI group meetings to other DrPH students, faculty, and staff to foster inclusiveness, transparency and participation.

## Agenda

1. Introductions and welcome (10 min) (Keith/Jason/other JEDI members to say a few words each)
2. Spirit of the group and purpose for today's meeting (5 min) (Keith)
3. Mission statement, objectives, and activities thus far (10 min) (Keith/Jason)
4. Our current priorities (5 min) (Delilah)
5. How to get involved (5 min) (Ericka)
6. Open discussion & Q/A (15 min) (Ericka leading group)

## Welcome to the DrPH program - Cohort 4!





**Spirit:** We approach this work with a spirit of humility, empathy, flexibility, good will, friendliness, and the acknowledgment that we are all on a shared journey of self-work. These issues can be challenging to discuss and address, we commit to being respectful and open to receiving differences in opinion and lived experiences.

**Purpose of today's meeting:** To introduce Cohort 4 to the JEDI committee, share our experiences and planned next steps of the group, and invite participation.

**JEDI is just getting started!** We organized ourselves into a group in the Spring 2021 semester in response to issues we are facing academically, professionally, personally, and in our communities.

## JEDI Working Mission Statement

To serve as Indiana University's DrPH Program's advisory liaison between students, faculty, and staff to hold the DrPH program administration accountable to the principles of **justice, diversity, equity and inclusion** and support students from marginalized communities and those committed to working toward JEDI principles in school, career, and community.

## Main objectives

- ▶ To **support**, offer **mutual aid, mentorship** and **networking** for students from marginalized communities and those committed to working toward JEDI principles in school, career, and community.
- ▶ Serve as an **advisory mechanism** to the DrPH program to make recommendations and **foster accountability and implementation** of JEDI principles
- ▶ Initiate and/or support individual and group projects aimed at **implementing JEDI principles** through the program and field of global public health and public health education.

## Key activities thus far

- ▶ Organized JEDI committee from Cohorts 1-3 (April-May 2021)
- ▶ Facilitated JEDI committee report back and discussion to students and administration (May & June 2021)
- ▶ Maintained bi-weekly committee meetings (May-August 2021)
- ▶ Drafted mission statement, objectives, and group Applied Practical Experience (APE) project proposal
- ▶ Introduced faculty advisors (July & August 2021)
- ▶ Organized JEDI activities for August 2021 in-residence session

## Our current priorities - What actions are needed at this time and what is missing?

- ▶ Faculty and administrative involvement in building an equity focus/foundation in the delivery of the curriculum
  - ❖ Training and accountability for faculty/staff
  - ❖ Increasing awareness and building baseline level of understanding of equity principles/practices
- ▶ Programmatically declaring equity/global health equity (internally/externally) as key pillars of the DrPH program
  - ❖ Building equity into the curriculum and expectations of the program
- ▶ Building equity culture and practices within the cohorts (student to student) and creating mechanisms to address these issues.
- ▶ Increased diversity of faculty, staff, and students of the program

## How to get involved

- ▶ If you're interested in learning more and/or would like to attend an upcoming meeting please email us at [jasturi@iu.edu](mailto:jasturi@iu.edu)
- ▶ We've been meeting on Saturdays at 11 am EST to accommodate global schedules

