

Review Paper

Diversity in the Academy - The Challenge of Sustainability

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ABSTRACT

The ADEA Minority Dental Faculty Development (ADEA/WKKF MDFD) Program was supported in part by a grant from the W.K. Kellogg Foundation (2004-2010). ADEA/MDFD was designed to promote health systems change through networks of educational and community partnerships focusing on leadership development within the faculty of U.S. dental schools while providing care to needy communities. The grant funds were used primarily to support direct educational costs for underrepresented minority and low-income dentists that were being recruited to faculty positions to help promote health

systems changes. The American Dental Education Association had the responsibility for: distribution of the ADEA/MDFD funding to the grantee schools, oversight, assessment, reporting progress and outcomes of the grant. ADEA and the grantee institutions supplemented WKKF grant funds through other grants and resources allocated for outreach, diversity and related programming.

Keywords: Dentistry; Community partnerships; Prosthodontics; Periodontics; Pediatric dentistry

Implementation

The ADEA/MDFD grants were awarded to ten U.S. dental schools and one advanced dental education institution over the six-year period of time, 2004-2010. Six dental schools and one consortium of five dental schools in New York comprised the seven grantees. These were: the University of Oklahoma College of Dentistry; University of Michigan School of Dentistry; University of Alabama School of Dentistry; Howard University College of Dentistry; Texas A&M University Baylor College of Dentistry; University of Illinois at Chicago College of Dentistry; and the New York State Academic Dental Centers that includes: New York University, Columbia University, State University of New York at Stony Brook, and the University of Rochester Eastman Dental Center. The seven grantees were chosen for their unique capacities to implement the ADEA/MDFD grant objectives, and to leverage resources that would support an infrastructure for sustainability. Grant objectives included: academic/community partnerships, formal mentoring, community-based care, leveraging of resources, leadership and cultural competency training. A major challenge to the grantees was the vertical integration of the program into the mission, goals and objectives of the parent institution and dental school. A logic model was used for strategic implementation evaluation, program progress and outcomes, Institutional site visits, grantee meetings and surveys of deans and trainees contributed to evaluation of this pilot project for institutional capacity building.

Outcomes

The interface of ADEA/MDFD grant trainees with the ADEA/WKKF Access to Dental Careers (ADC) Pipeline grant [1] pool has produced a unique talent pool of 358 individuals for future dental faculty across clinical disciplines: prosthodontics, periodontics, orthodontics, pediatric dentistry, endodontic, restorative dentistry, oral surgery, and public health. The grantee schools are challenged for both sustainability of diversity

initiatives as well as continued and future engagement of alumni who have benefitted from MDFD funding in pursuit of their academic goals. The MDFD schools now have the data for continued involvement of MDFD graduates in a variety of community outreach, recruitment and service programs throughout the U.S. Other dental schools have benefitted also, from experiences of the leaders that have completed the mentorship, strategic thinking and planning during their training. The eleven academic/community partnerships that were formed are now positioned to become a part of statewide and regional alliances that are anticipated in the transformation of the dental health care system in the U.S. The skills that were learned by MDFD program leaders will be useful in the systemic changes envisioned for increased access to care in a team-based delivery system. The MDFD program has produced a group of minority leaders who possess skills and behaviors required for increased academic/community engagement and sustainable partnerships that improve the health of underserved communities.

Eighty-three academic/community partnerships were created during the six-year grant period. Patients received their care from undergraduate, post graduate and allied dental students in remote sites such as: school clinics, mobile units, nursing homes, Indian Health Service (HIS) clinics, migrant workers and a health disparities center. The inclusion of advanced level treatment in the community settings was of value to both students and patients as complex patient needs were addressed in team delivery of care. Through this grant, dental schools will continue their "safety net" role in caring for the underserved. The dental school outreach programs are now linked with a variety of social services and community-building opportunities in challenged neighborhoods. The FQHC's neighborhood health centers, dental schools and their remote clinics form a triad of resources for dental care for the underserved. There has not been a "quality of care" issue in the remote academic/community partnerships because direct supervision and standards of care are the same as those in the accredited dental school dental clinics [2].

Dean's Leadership

The leadership of the Dean emerged as the consistent, critical driver in both implementation and perceptions of the value of diversity and inclusion. However, changes in leadership at the MDFD grantee institutions approaches 99%! These leadership changes present a major challenge for creative realignment and marketing of diversity and inclusion objectives among priorities. The sustainability efforts at schools such as: Michigan, Howard, Oklahoma and Alabama are bound to both history and missions. There is much to be learned from these schools whose institutional missions bring historical perspective to diversity as a national challenge. Baylor and UIC, on the other hand, are models that are University-mission oriented. They sustain diversity activities through commingling of institutional resources and strategies.

The Challenge

The MDFD Schools have served as academic laboratories from which continuous new insights and knowledge are applied to operations and sustainability efforts [3]. For example the concept of "inclusion" became important to the academic fabric for linkage of diversity objectives with access and inter-professionalism in team-based care initiatives. Lessons Learned from the MDFD experience and Leadership Core Competence (Attachments A, B) have evolved from institutional site visits, document reviews, grantee meeting and surveys of deans and trainees at the MDFD schools. Lessons Learned and Leadership Core Competencies are useful "Tools" as institutions prepare for changes that are now delineated in the Accreditation Standards for Dental Education Programs (Commission on Dental Accreditation. Implemented July, 2013). The new Standards include specific language regarding: diversity and cultural competence. Accreditation Standards 1-3 and 1-4 speak specifically to diversity requirements and institutional expectations.

Summary

A "Growing Your Own" philosophy for the recruitment, retention and the advancement of a diverse faculty prevailed throughout the grantee schools. Through innovation,

commitment and enthusiasm, the ADEA MDFD grant program and its grantees, individually and collectively, have produced a whole that is greater than the sum of its parts. The ADEA/MDFD grantee institutions serve as academic models for other health professional institutions as they accept the continuing challenge to increase diversity in health workforce, improve access to care in underserved communities, and meet accreditation standards that support quality and innovation in dental education. The original ADEA/WKKF MDFD grantees are academic/community laboratories which serve as in situ resources from which continuous new insights will be gained as new knowledge is applied to changing concepts, ideas, and operations. These seven laboratories will experience continuous quality improvement from their collaborative partnerships and complex packaging of resources for sustainability of diversity and inclusion as a core value.

REFERENCES

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