

Diversity, Equity, and Inclusion in Health Services and Policy Research

A snapshot of Recommendations to AcademyHealth from the Advisory Group on DEI in HSR

As a leading professional organization for a field working to improve health and health care for all, AcademyHealth is building on previous work and strengthening our commitment to model, lead, and influence progress toward racial equity.

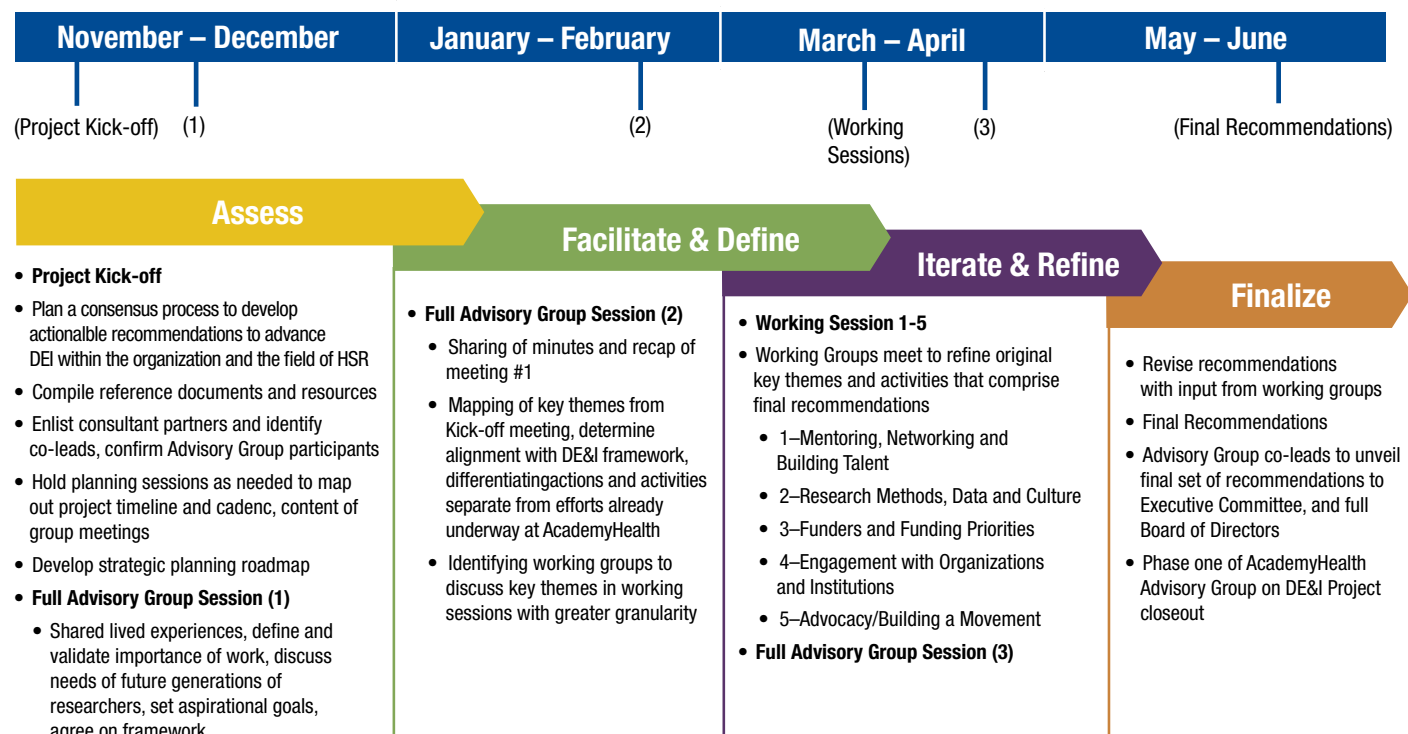
In the fall of 2020, AcademyHealth convened the Advisory Group on Diversity, Equity and Inclusion (DEI) in HSR to advise the AcademyHealth Board of Directors. The group's charge included offering input on how to prioritize and implement tangible efforts to define, facilitate, and measure meaningful change within the organization and —leveraging AcademyHealth's role in the broader health services research (HSR) ecosystem —to influence individuals, organizations and the policies that support health care and research.

A draft version of the Advisory Group's preliminary recommendations was presented to the AcademyHealth Annual Research Meeting in June 2021 and finalized in July. An abbreviated summary of the group's process and recommendations follows. Please read the full report for details.

Statement of Principles/Vision Statement

Health services and policy research (HSR) generates timely evidence about what works, for whom, at what cost, and under what circumstances to improve health and health care for all. As the professional home for HSR, AcademyHealth is working for an equitable future where the field of HSR is diverse, representative, inclusive, and trusted by a variety of stakeholders, including researchers, policymakers, system leaders, clinicians, communities, and individuals. In partnership with the HSR community and other stakeholders, AcademyHealth will address the power dynamics of structural racism and increase support for the production, dissemination and use of evidence to achieve a more just, equitable, and healthy society.

Process for Developing Recommendations



Five Areas of Action Recommended by the Advisory Group

1. Be a catalyst for changing the field of HSR to address racism and promote equity by becoming a resource for members and others.

- 1.1. Create a Center of Excellence that develops or curates guides and tools, and make them freely available. Identify, adapt and share training and self-assessment tools.
- 1.2. Develop and disseminate a glossary of terms to build a shared language for this work. The glossary should be a living document with opportunity for community input.
- 1.3. Catalyze or help coordinate a Truth and Reconciliation process for HSR.

2. Elevate the importance and visibility of health equity research and researchers within HSR.

- 2.1. Serve as a model of diversity, equity, and inclusion for member organizations and the field at large by reevaluating and redesigning how AcademyHealth centers people of color and underrepresented researchers within its own culture.
- 2.2. Use conferences and leverage relationships with official journals to model best practices. Use the organization's influence to increase the representation of minoritized and marginalized individuals on review panels and work with key stakeholders to establish a set of anti-racism criteria or standards that are required for both journal submissions and conference presentations.
- 2.3. Develop anti-racist criteria for contracting and use partnerships to set an example by encouraging or requiring member organizations to follow anti-racism criteria and standards.

3. Promote and develop the careers of health equity researchers and improve workforce diversity in HSR.

- 3.1. Track and report workforce diversity and representation and provide ongoing professional development to researchers and employees from traditionally marginalized communities. Working with experts in the field of workplace diversity, the organization could create, adopt, and disseminate standards for the collection and reporting of these data from members and partners.
- 3.2. Expand the size and scope of mentoring models. Help create mentoring environments where people can learn and thrive. Promote best practices both for mentors and mentees.
- 3.3. Develop individual and organizational awards for mentoring and for using anti-racist methods in research and recognize researchers in marginalized groups.

3.4. Increase access to training and professional development opportunities. Expand pre- and post-doctoral training opportunities for minoritized groups, and offer guidance about what memberships and events have the most impact on an individual's career.

3.5. Review promotion and tenure criteria to include DEI and professional service. Work with member organizations to attempt to influence criteria for promotion and tenure so that it reflects the importance of disparities work and prioritizes it across the full spectrum of research topics.

4. Promote quality, accountability, and transparency of health equity data and research methods.

4.1. Create a collaborative guidance document and trainings for anti-racism research methods. Work with colleague organizations to expand dissemination of research about the social and structural drivers of health equity from an SDOH perspective.

4.2. Increase the availability and accuracy of data for underrepresented and minoritized groups.

4.3. Increase the role of marginalized groups in all aspects of publishing. Leverage relationships with editors of official journals and other journals to apply the transparency principles to manuscripts that are submitted, such as by adding a section or text box on known biases or flaws in the data.

5. Increase support for health equity research through meaningful partnerships and collaborations.

5.1. Develop a coordinated funding strategy with accountability metrics. Consider forming or joining a Council of Funders to create a statement of priorities (a white paper or road map) that describes the fundamental value for funding, conducting, reviewing, and disseminating research.

5.2. Expand the advocacy agenda of the organization and its members. Encourage its member organizations and partners to engage in local, place-based equity efforts using the tools and models provided by the Government Alliance for Racial Equity (GARE), a national network of governmental jurisdictions working to achieve racial equity and advance opportunities for all.

5.3. Develop a model anchor institutions project. The Advisory Group believes that the anchor collaboratives model used by the Democracy Collaborative could work well with members and partners because this model explains that anchor institutions are usually nonprofit or public entities such as universities or hospitals that are tied to a place-based community by "their mission, invested capital, or relationships to customers, employees, residents and vendors."

Next Steps

The AcademyHealth staff and Board of Directors are reviewing the recommendations and soliciting input from the larger health services and health policy research community, including AcademyHealth members, partners, and peer organizations. In response, staff will develop an implementation plan that details both immediate and longer-term actions, as well as required financial and staff resources, for Board review and approval. The implementation plan will be publicly announced in the fall of 2021.