

**PROGRAM OF CULTURAL DIVERSITY
UNIVERSITY OF MARYLAND, BALTIMORE
2009-2010 PROGRESS REPORT**

The University of Maryland, Baltimore (UMB) is the State of Maryland's public academic health and law university devoted to excellence in professional and graduate education, research, public service, patient care and client service. President David J. Ramsay communicated UMB's commitment to cultural diversity in the President's Statement. www.hr.umaryland.edu/diversity/president.htm. UMB's Program of Cultural Diversity uses two complementary strategies: UMB-wide programming and programs specific to the Schools of Dentistry, Law, Medicine, Nursing, Pharmacy, and Social Work.

**Campus Wide Data Comparison¹
2008-2009 2009-2010**

Student Enrollment - 2008/2009	Number	Percent	Male	Female
African American	1,069	17%	231	838
American Indian / Alaska Native	19	0%	6	13
Asian / Pacific Islander	821	13%	266	555
Hispanic	239	4%	74	165
White	3,547	58%	985	2,562
Non-Resident Alien	254	4%	94	160
Not Reported	207	3%	70	137
Total	6,156	100%	1,726	4,430

Student Enrollment² - 2009/2010	Number	Percent	Male	Female
African American	1,103	17%	235	868
American Indian / Alaska Native	18	0%	4	14
Asian / Pacific Islander	894	14%	297	597
Hispanic	239	4%	76	163
White	3,647	57%	1,033	2,614
Non-Resident Alien	230	4%	82	148
Not Reported	251	4%	90	161
Total	6,382	100%	1,817	4,565

¹ Source: UMB Office of Institutional Research and Planning

² Two or more races data is not available because new race and ethnicity classifications were not yet implemented for the 2009 – 2010 academic year per federal education agency data reporting schedules.

Faculty - 2008/2009	Number	Percent	Male	Female
African American	205	9%	83	122
American Indian / Alaska Native	9	0%	4	5
Asian / Pacific Islander	341	14%	202	139
Hispanic	64	3%	29	35
White	1,717	73%	929	788
Not Reported	22	1%	10	12
Total	2,358	100%	1,257	1,101

Faculty - 2009/2010	Number	Percent	Male	Female
African American	221	9%	85	136
American Indian / Alaska Native	8	0%	4	4
Asian / Pacific Islander	353	14%	209	144
Hispanic	71	3%	26	45
White	1,777	72%	943	834
Not Reported	34	1%	21	13
Total	2,464	100%	1,288	1,176

Staff - 2008/2009	Number	Percent	Male	Female
African American	1,370	34%	387	983
American Indian / Alaska Native	12	0%	4	8
Asian / Pacific Islander	342	9%	115	227
Hispanic	70	2%	24	46
White	2,158	54%	712	1,446
Not Reported	54	1%	25	29
Total	4,006	100%	1,267	2,739

Staff - 2009/2010	Number	Percent	Male	Female
African American	1,353	33%	398	955
American Indian / Alaska Native	12	0%	4	8
Asian / Pacific Islander	365	9%	120	245
Hispanic	76	2%	27	49
White	2,255	55%	728	1,527
Not Reported	52	1%	22	30
Total	4,113	100%	1,299	2,814

UMB-Wide

As a result of UMB's commitment to diversity, the entire campus community joins together in shared efforts to:

1. Cultivate an environment that fosters an awareness and understanding that diverse perspectives are not only educationally sound and vital, but are an indispensable part of continuous human learning.
2. Build a harmonious culture that capitalizes upon the unique backgrounds and experiences of its students, faculty and staff as a primary key to continued growth.
3. Provide opportunities to learn respect for each other and to value each other's unique skills and different perspectives.
4. Help individual members recognize the inherent value and dignity of all members of the Campus community and their impact on the University's well being and overall progress.³

Consistent with these four foundational principles, UMB has a long term partnership with the Baltimore City Mayor's Office of Employment Development. Through the MOED YouthWorks Summer Job Program, UMB provides six week, full-time employment on campus for a number of students from the Baltimore City Public School System. In addition to a paycheck, the Youth Works Program provides a valuable opportunity for students to be mentored by UMB staff, faculty and students. This guided mentoring assists the students by providing educational and career direction. By participating in YouthWorks, UMB gives members of its community a chance to expand their horizons and to become more acquainted with the challenges facing youth growing up in Baltimore City. Cognizant of the benefits gleaned from the YouthWorks program, UMB has recently begun a mentoring program for new employees. www.hr.umaryland.edu/diversity/mentoring.htm HRS has also recently added a "Diversity Calendar" to its website. www.hr.umaryland.edu/diversity/calendar/feb2010.html

UMB also participates in a program that enhances disability awareness. Specifically, through a partnership with the Arc of Baltimore, the Baltimore City Public School System, and the Division of Rehabilitation Services (DORS), UMB provides structured employment/internship opportunities for students and adults with disabilities.

Diversity enhancement and education efforts also occur as a result of the efforts of the Campus' Student Services Office. The Office plans, markets, coordinates, and implements special events and services for students. It has a specific focus on assisting students who face potential barriers such as language, acculturation, communication, and disability. These activities and services are quite broad and include educational, cultural, leisure, leadership, enrichment, and volunteer/community pursuits. The mission of the Student Services Office is: To assist the University of Maryland Baltimore in building a campus environment that values diversity and is conducive to attracting, retaining, and graduating a diverse student population.

UMB records do not indicate that there were any campus-based hate crimes or bias-motivated incidents that occurred on campus during the applicable reporting period.

³ <http://www.hr.umaryland.edu/diversity/>

School Specific

As was noted in UMB's original report:

UMB offers a number of discipline-specific academic degree programs, including those leading to the award of the degrees Doctor of Medicine, Doctor of Dental Surgery, Doctor of Pharmacy, Master of Social Work, Juris Doctor, and the Bachelor of Science in Nursing and nursing Master of Science. There are no common curricular elements at UMB. Curricula and student admissions decisions are made in each of UMB's professional schools – Dentistry, Law, Medicine, Nursing, Pharmacy, and Social Work - and are driven by the standards of the respective Schools' professional accreditation groups. The process of accreditation is an evaluation by the accrediting group to determine whether discipline-specific Schools/programs are in compliance with the group's standards.

UMB's degree programs, the M.D., DDS, PharmD, MSW, JD, and BSN and M.S. nursing programs must be accredited in order for graduates to be eligible for licensure and certain federal loan programs. Consequently, successful accreditation is of the highest importance to the University.

The reason for detailing UMB's academic/professional accreditation is that the policies and standards of these six bodies all include requirements of cultural diversity specific to that profession. These standards for cultural diversity are stringent, focused, and integrated with the requirements of professional practice. Thus UMB relies upon professional and academic accreditation to insure that the most appropriate, current, consensus derived programs, activities and expectations in the area of cultural diversity are provided by its Schools.

UMB believes that adherence to constantly evolving accreditation standards continues to be the most effective way to ensure that cultural diversity is acknowledged by and integrated in the various academic programs. Some highlights of school based actions and efforts are included below.

DENTAL

*A Physician's Practical Guide to Culturally Competent Care*⁴ is an online educational program accredited for physicians, physician assistants, nurse practitioners, and pharmacists. Year one students are required to complete the first module and are encouraged, but not required, to complete the second and third modules as part of PROF 518. A self-awareness exercise is conducted on-line to assess the student's conscious and unconscious preferences for a variety of topics. Students are required to complete at least three of the Implicit Association Tests (5-10 minutes each) to provide a theoretical foundation for, teach skills contributing to, and assess the following Dental School Competency: Communicate with and provide care for a diverse population of patients.

⁴ <https://ccm.thinkculturalhealth.org/> Developed by the Office of Minority Health, part of the U.S. Department of Health & Human Services.

The Dental School has also added two new courses. As part of CSLX 518, Community Service Learning I, freshmen students participate in a one-week rotation at the Dental School's Cecil County site gaining experience in a community setting that focuses on treating an underserved population. A pre- and post- survey is administered to help students recognize their personal concepts of cultural diversity, values, and access to care issues. PRAC 532 is a new course in year three that will discuss cultural diversity as a part of practice management.

Course expansion has also occurred. CSLX 548 was expanded in 2009-2010 to include a two-week rotation at the Cecil County site. Senior students maintain a daily journal of clinical experiences in which they reflect on challenges they encounter that directly relate to values and social context, as well as inequities in the health care system that adversely impact access to care. The course has required thought-provoking readings as well as focus group discussions that are designed to help students explore their attitudes and evaluate their impressions. The final assessment is a reflective portfolio in which students assess their experiences and evaluate their personal progress toward increased cultural competence.

LAW

During their law school career, students are provided with a multitude of course offerings through an academic program which relate to issues directly affecting minority communities. Some of these courses are: South Africa: Race and the Law and the opportunity to work in South Africa through an externship program; Access to Justice Clinic; Civil Rights of Persons with Disabilities, Comparative Constitutional Law of South Africa, India & Germany, Asian Pacific Americans and the Law among others. Students can also work as research assistants for faculty members developing scholarship in these areas. Both inside and outside the classroom, the School of Law has a rich number of opportunities for all students to expand their knowledge of racial and ethnic issues.

Moreover, all students in the day division are required to provide services to poor or underrepresented clients through a clinic or legal theory and practice ("LTP") course. (Evening division students may opt to take a clinic or LTP but are not required to do so.) All clinic and LTP students participate in an orientation that addresses cultural diversity in different contexts and it is an issue regularly discussed by faculty and students throughout the semester. The purpose of these experiences and discussions is for students to understand and respect a client's cultural frame of reference and its role in their representation of that client. Students also discuss globalization and what it means to operate in settings that are not culturally familiar. The overall goal is for students to represent diverse clients in a way that honors the client and the legal profession.

In addition, under a grant from the Fetzer Institute, the law school had added a cross-cultural component to its clinical program through the newly legal clinic in Mississippi, formed in collaboration with the Mississippi Center for Justice, which builds upon Maryland students' ongoing volunteer response to the massive legal needs of low-income people and communities left in Hurricane Katrina's wake. The project has launched the law school's first international clinic in Namibia, Africa. These new clinics will take lessons learned in the school's Baltimore clinics to the broader national and international stage.

The School's Clinic and its Legal Theory and Practice seminars offer students multiple opportunities to provide, under the supervision of a full-time faculty member, representation to persons who are poor, socially disadvantaged or otherwise lack access to justice or to organizations acting on their behalf. This experience is intended to nurture a sense of responsibility to low income and otherwise disadvantaged clients. That sense of responsibility should inspire our graduates, the great majority of whom do not specialize in public interest law, to maintain in their practices a commitment to pro bono work.

MEDICINE

Cultural competency dealing with a wide variety of issues, including those of racial and ethnic disparities is an integral part of the curriculum of the School of Medicine. Rather than a specific course, the curricular material concerning cultural competency is woven throughout the full four years of the medical student experience and includes classroom, small group, and observed behavioral activities. The Liaison Committee on Medical Education [LCME] sets the overall standards for accreditation of US medical schools and mandates that the faculty of the school itself set the curriculum for obtaining a medical degree. The faculty at the School of Medicine has implemented the following:

Cultural competency as one aspect of professionalism is emphasized from the application to medical school until graduation. Applicants are expected to have a broad life experience and are often questioned during the interview process as to their views about cross-cultural matters.

During the first year of medical school, during the Introduction to Clinical Medicine course, large group lectures and small group discussions are held on a complete range of the doctor-patient relationship. This includes racial and ethnic disparities as well as areas such as gender, sexual, and economic differences. Small groups are comprised of a mix of students by gender and background in order to utilize the tremendous diversity within the medical students themselves. In addition discussion focuses on differences in age, country of origin, or other cultural/sub-cultural matters. For example, the difficulty in relating to an elderly African-American woman might be due to age, race, or gender. During the first year, the students are observed and videotaped with standardized patients [actors realistically portraying actual patients] and patients are selected during this and subsequent standardized patient exercises to represent a wide range of age, gender and ethnic combinations.

During year three, students in clinical settings are specifically evaluated on professionalism scales including the doctor-patient relationship across the spectrum of patients that they encounter on their varied rotations. This material is captured electronically as part of the student performance record. The doctor-patient relationship, access to care, and treatment options are part of the clinical education for all students during these rotations such as the ambulatory settings of family Medicine, Pediatrics, and Internal Medicine. Standardized patients are used for some of the third year rotations again focused on directly observed student performance.

As part of the Introduction to Clinical Medicine in the fourth year, an examination using standardized patients must be successfully completed before graduation. This examination using 10-12 different medical problems again is designed so that all students must be able to communicate with, and discuss medical problems with a wide range of people. A small example is the use of a middle-aged African-American woman with chest pain after the medical literature revealed that this group of women didn't receive the same emergent attention for myocardial infarction. Literature is reviewed for similar health care discrepancies. The information is collected electronically during third and fourth years.

During their fourth year, all medical students take the US Medical Licensing Examination [USMLE]. Part of this exam is a standardized patient exercise again using a cross-section of patients representing age, race, and gender groups. The School of Medicine closely tracks performance on this examination as it attempts to replicate clinical problems in a varied patient population.

NURSING

Prior to the expiration of its accreditation term by the National League for Nursing Accreditation Commission (NLNAC), the School of Nursing decided to move to a more rigorous accreditation body, the Commission on Collegiate Nursing Education (CCNE). Unlike NLNAC, CCNE addresses diversity and cultural competency in the curriculum by requiring compliance with the essential elements of nursing education established by the American Association of Colleges of Nursing (AACN) for each degree level. The core components of AACN's essential elements of nursing education acknowledge the diversity of the nation's population and mandate inclusion of content addressing cultural, spiritual, ethnic, gender, and sexual orientation diversity to ensure that nursing professionals are "prepared to practice in a multicultural environment and possess the skills needed to provide culturally competent care."

CCNE conducted its accreditation site visit to the School on November 16-18, 2009. On January 7, 2010, the School received the team report, which was unequivocally favorable. Among other issues of note, the accreditation team reported that the School's programs at all degree levels met the standard for curriculum, teaching-learning practices, and student learning outcomes, which include diversity and cultural competency components. The CCNE Accreditation Review Committee (ARC) considered this report during its Feb. 11-13 meeting and formulated a recommendation on accreditation for the CCNE Board to take up at its April 22-24 meeting. The Board will announce its decision at the April meeting and communicate it to the School within 30 days. Although the School has not been apprised of ARC's recommendation and the CCNE Board will not meet for another two months, the team report indicates that School should have every expectation of receiving unconditional accreditation by CCNE.

While the School has ensured that it addresses diversity among students and future health professionals through the curriculum, it is also trying to confront the need for a more diverse faculty and nursing workforce. This requires encouraging minority enrollment in graduate programs that serve as the source for nursing faculty, as well as attracting a diverse group of new entrants into the field of nursing. The School has proven itself successful at attracting a diverse student body over the years, with a minority student enrollment that has hovered around 38%. As of spring 2010, the School reached a record minority student enrollment of 43.4%.

On the other hand, recruitment of minority faculty members has been more challenging—largely because the pool is quite small. To expand the pool, which will benefit all nursing programs in the state by putting more potential minority faculty members on the market, the School is focusing increased attention on minority graduate recruitment. Already, it should be noted, more than half of the School's minority students are in graduate programs. But over the past year, it has sought out additional previously untapped or insufficiently tapped sources of minority graduate students. For example, the School has participated in the McNair Scholars and Undergraduate Research Conference, attended the Howard University Nursing Career Day, and reached out specifically to Meyerhoff Scholars Program students at UMBC. The School is currently working with the administrators of the Scholars Program to add nursing to the list of approved sites for the Graduate Fellows Program. The School has also renewed its 2+2 articulation agreement with UMBC, which has a particularly diverse student population that is interested in nursing. On a regional level, the School is developing relationships with historically black colleges such as Morehouse, Xavier, Spelman, and Clark as a source of master's students. These efforts are expected to yield long-term benefits.

PHARMACY

Student pharmacists complete over a dozen experiential rotations throughout their four professional years. They experience a diverse study body among their peers as they begin to apply concepts learned about cultural

competency, cultural sensitivity, and health literacy. Students complete required and elective placements in community practice, institutional practice, ambulatory care clinics, senior living facilities, community health centers/clinics, and government agencies in urban, suburban and rural areas. Regardless of whether students complete rotations in proximity to Baltimore or in rural areas, they no doubt encounter the challenges of health disparities. An increasing number of students are completing the dual degree with the Master of Public Health program because of their interest in optimizing health care. All students are held accountable for evidence-based pharmacotherapy decisions, quality assurance in pharmacy practice, and optimal outcomes in patient encounters.

As is the case at a number of other UMB Schools, aspects of required pharmacy coursework focus on issues of cultural competency. For example, in PHAR 507, Professional Ethics and Pharmacy Practice, students are introduced to the skills necessary for success as a student pharmacist and practitioner including presentation, computer and literature-retrieval skills. Cultural diversity and the importance of independent and cooperative learning activities are emphasized. Professionalism, oral and written communication, ethics, and critical evaluation of problems are stressed. Students are introduced to diverse perspectives on goals, training, functions, settings, and opportunities in potential pharmacy careers. In PHAR 522, Context of Health Care, students receive an overview of health disparities research. This course allows students to examine sources of disparities and opportunities for enhanced cultural competence which pharmacists and other health care providers can address. Similarly, PHSR 620, Health Behavior Theory, includes a presentation dedicated to understanding the health behaviors of patients from a variety of ethnic backgrounds.

SOCIAL WORK

The Master of Social Work degree consists of 60 credits of graduate study. The foundation curriculum includes courses in policy, research, human behavior theories, practice along with a field placement in an agency setting (usually two days per week for the academic year). In the advanced curriculum, a concentration and a specialization are chosen. Eight courses, along with an advanced field placement reflect the chosen concentration and specialization. There are also opportunities for sub-specializations in substance abuse, EAP, and child, adolescent, and family health.

The MSW Program is accredited by the Council on Social Work Education (CSWE) and programs are accredited for an eight year period. In 2007 the school submitted a self-study report that was part of the reaccreditation of 2008. On October 12, 2008 CSWE wrote that our program met the educational policy and accreditation standards and was reaccredited until October 2016. The following section is directly from the School's self-study report.

Social work values and ethics, concern with and attention to diversity, promotion of social and economic justice and populations-at-risk are characteristics of every concentration, specialization, and class offered by the school. These three important related issues are addressed in all areas of the curriculum, are identified in the objectives of all courses and have specific content in each course.

Beginning in the first semester of the Foundation curriculum, students are asked to wrestle both personally and professionally with recognizing "isms"—including racism, sexism, heterosexism, classism and ethnocentrism. For example, the Foundation Social Work Practice classes are structured so that reflection on diversity begins at the personal level for students in a written assignment they complete. Students are required to explore their own ethnic and racial identity and then examine how this might impact their engagement with clients. The interconnectivity of macro-level social structures, processes and institutions with families, groups, communities and organizations is presented throughout the introductory coursework. From this understanding of key concepts related to equality

and diversity, students are encouraged to advocate for social science research and social policies consistent with democratic values of human worth and universal access to needed services.

The MSW program also has an advanced diversity requirement, so that competence in this area can be demonstrated at a level beyond a basic level. The School's 'Statement on Diversity' mandates that courses designated as fulfilling the requirement for advanced diversity content must include people from diverse backgrounds and/or ethnic cultural populations and communities. The course must also examine how membership in these groups is unique and leads to special sensitivities, knowledge, and practices in social work interventions. Moreover, the course is designed to assist students in identifying how factors such as gender and social class intersect with group members' experiences. Lastly, students are expected to develop competence in social work intervention at the appropriate level with populations at risk.

The course syllabus for each of the approved courses must: 1) reflect readings on these topics; 2) identify a grading mechanism intended to assess student learning (exam, paper, other); and 3) identify how classroom discussion and exercises will give students opportunities to develop competence in relation to practice, policy analysis, advocacy, or research, depending upon the purpose of the course. The following courses have been approved by the Masters Program Committee to fulfill the requirement:

SOWK 713 - Social Policy and Health Care
SOWK 715 - Children and Social Services Policy
SOWK 720- Comparative Social Policy
SOWK 764 – Multicultural Perspectives: Implications for Practice
SOWK 783 - Qualitative Cross-Cultural Research
SWCL 710 - Advanced Group Methods
SWCL 724 - Clinical Social Work with the Aging and Their Families
SWCL 726 - Clinical Social Work with African-American Families
SWCL 730 - Clinical Social Work in Relation to Chronic Mental Illness
SWCL 748 - Clinical SW in Relation to Death, Dying & Bereavement
SWCL 749 - Clinical Social Work with the LGBT Community
SWCL 752 - Best Practices and Innovations in School Mental Health
SWOA 704 - Community Organization
SWOA 706 - Multicultural Practice in Organizations and Communities