## Supplemental Digital Appendix 1

### Advisory Committee for the Development of the Social Mission Metrics Survey, 2016-2019

<table>
<thead>
<tr>
<th>Name</th>
<th>Participation year</th>
<th>Organization</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ali Abdallah</td>
<td>2016-2018</td>
<td>Unity Health Care, The Wright Center for Graduate Medical Education</td>
<td>Resident Physician, Family Medicine</td>
</tr>
<tr>
<td>David Acosta</td>
<td>2018-2019</td>
<td>Association of American Medical Colleges</td>
<td>Chief Diversity &amp; Inclusion Officer</td>
</tr>
<tr>
<td>Philip Alberti</td>
<td>2016-2019</td>
<td>Association of American Medical Colleges</td>
<td>Senior Director, Health Equity Research and Policy</td>
</tr>
<tr>
<td>Karen Bankston</td>
<td>2016-2019</td>
<td>University of Cincinnati</td>
<td>Associate Dean for Clinical Practice, Partnership and Community Engagement</td>
</tr>
<tr>
<td>Eileen Breslin</td>
<td>2018-2019</td>
<td>The University of Texas Health Science Center at San Antonio, School of Nursing</td>
<td>Dean and Professor University of Texas, San Antonio, and Past Board Chair</td>
</tr>
<tr>
<td>Jennifer Butlin</td>
<td>2018-2019</td>
<td>Commission on Collegiate Nursing Education</td>
<td>Executive Director</td>
</tr>
<tr>
<td>Gregory Chadwick</td>
<td>2018-2019</td>
<td>East Carolina University School of Dental Medicine</td>
<td>Dean</td>
</tr>
<tr>
<td>Alexia Charles</td>
<td>2017-2018</td>
<td>The George Washington University</td>
<td>Medical Student</td>
</tr>
<tr>
<td>Kim D’Abreu</td>
<td>2016-2017</td>
<td>American Dental Education Association</td>
<td>Senior Vice President for Access, Diversity and Inclusion</td>
</tr>
<tr>
<td>Jennifer Danek</td>
<td>2018-2019</td>
<td>Coalition of Urban Serving Universities (USU)</td>
<td>Senior Director</td>
</tr>
<tr>
<td>David Danesh</td>
<td>2017-2018</td>
<td>Harvard School of Dental Medicine</td>
<td>Dental Student</td>
</tr>
<tr>
<td>Gaea Daniel</td>
<td>2017-2018</td>
<td>Nell Hodgson Woodruff School of Nursing, Emory University</td>
<td>Doctoral Nursing Student, Robert Wood Johnson Foundation NCIN Scholar</td>
</tr>
<tr>
<td>Neal Demby</td>
<td>2018-2019</td>
<td>National Network for Oral Health Access NYU Langone Dental Medicine</td>
<td>Emeritus Board Member, Senior Vice President</td>
</tr>
<tr>
<td>Vernel DeWitty</td>
<td>2016-2018</td>
<td>American Association of Colleges of Nursing</td>
<td>Director for Diversity and Inclusion</td>
</tr>
<tr>
<td>Caswell Evans</td>
<td>2016-2018</td>
<td>University of Illinois – Chicago College of Dentistry</td>
<td>Associate Dean for Prevention and Public Health Sciences</td>
</tr>
<tr>
<td>Susan Forneris</td>
<td>2018-2019</td>
<td>National League for Nursing</td>
<td>Director, NLN Center for Innovation in Education Excellence</td>
</tr>
<tr>
<td>Name</td>
<td>Years</td>
<td>Organization/Position</td>
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<tr>
<td>Frederick Isasi</td>
<td>2018-2019</td>
<td>Families USA</td>
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</tr>
<tr>
<td>Art Kaufman</td>
<td>2016-2018</td>
<td>University of New Mexico</td>
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<tr>
<td>Katharine Lawrence</td>
<td>2016-2017</td>
<td>Herbert Wertheim College of Medicine at Florida International University</td>
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<tr>
<td>Mark A. Lopez</td>
<td>2017-2018</td>
<td>American Dental Education Association</td>
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<tr>
<td>Robyn Madson</td>
<td>2016-2018</td>
<td>University of the Incarnate Word</td>
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<tr>
<td>Veronica Mallett</td>
<td>2018-2019</td>
<td>Meharry Medical College</td>
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<tr>
<td>Beverly Malone</td>
<td>2016-2018</td>
<td>National League of Nursing</td>
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<tr>
<td>Pat Mastors</td>
<td>2016-2017</td>
<td>Patients’ View Institute</td>
<td></td>
</tr>
<tr>
<td>Linda McCauley</td>
<td>2018-2019</td>
<td>Emory University Nell Hodgson Woodruff School of Nursing</td>
<td></td>
</tr>
<tr>
<td>Thomas Nasca</td>
<td>2018-2019</td>
<td>Accreditation Council for Graduate Medical Education</td>
<td></td>
</tr>
<tr>
<td>Wesley Osler</td>
<td>2018-2019</td>
<td>National Student Nurses' Association</td>
<td></td>
</tr>
<tr>
<td>Patricia Polansky</td>
<td>2018-2019</td>
<td>Center to Champion Nursing in America</td>
<td></td>
</tr>
<tr>
<td>Beth Roemer</td>
<td>2016-2018</td>
<td>Kaiser Permanente</td>
<td></td>
</tr>
<tr>
<td>James Rourke</td>
<td>2018-2019</td>
<td>Association for Medical Education in Europe</td>
<td></td>
</tr>
<tr>
<td>Sonya Smith</td>
<td>2018-2019</td>
<td>American Dental Education Association</td>
<td></td>
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<tr>
<td>Henry Sondheimer</td>
<td>2016-2018</td>
<td>George Washington University</td>
<td></td>
</tr>
<tr>
<td>Diane Stollenwerk</td>
<td>2017-2018</td>
<td>Patients’ View Institute</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Years</th>
<th>Organization</th>
<th>Position</th>
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</thead>
<tbody>
<tr>
<td>Anne Thomas</td>
<td>2018-2019</td>
<td>National Organization of Nurse Practitioner Faculties</td>
<td>President</td>
</tr>
<tr>
<td>Sherin Tooks</td>
<td>2018-2019</td>
<td>Commission on Dental Accreditation</td>
<td>Director</td>
</tr>
<tr>
<td>Perry Tsai</td>
<td>2018-2019</td>
<td>American Medical Student Association</td>
<td>National President</td>
</tr>
<tr>
<td>Marcia Wilson</td>
<td>2018-2019</td>
<td>National Quality Forum</td>
<td>Past Senior Vice President, Quality Measurement</td>
</tr>
<tr>
<td>Jana Zaudke</td>
<td>2016-2017</td>
<td>University of Kansas</td>
<td>Assistant Dean, Academic Society</td>
</tr>
</tbody>
</table>
Supplemental Digital Appendix 2
Social Mission Metrics Survey Debriefing Interview Guideline/Script

Hi, I am Sonal Batra, the Co-Principal Investigator responsible for conducting the Robert Wood Johnson Foundation Social Mission Metrics funded project. On the phone with me today are two members of my research team, Tom Guterbock, a consultant survey scientist and Julie Orban, a research associate. Before we get started, we wanted to thank you for taking the time to participate in the Social Mission Metrics Study. Your participation helps us better develop and test the instrument for broader use. We understand that you may have many other competing priorities, so we really appreciate your willingness to fill out the questionnaire and to provide us with feedback on this call.

At this time, we would like to ask for your consent to audio record our conversation so that we may better capture what is being said. The audio record is for research purposes only and will not be shared with others outside of the research team. May we have your consent?

Consent: Yes or no

This is Sonal speaking with [name] on [date], and you’ve agreed that we can record your feedback, right? [Get respondent’s verbal OK].

The objective of this call is for our research team to learn more about your experience with the study instrument so that we can further refine it for a potential larger pilot phase and address any reliability and validity issues. Do you have any questions regarding the purpose of the project before we move forward? [Answer questions] Do you have a copy of your completed questionnaire in front of you to refer to as we move through it? [Email to them if they do not]

We would like to start with some overall questions regarding the questionnaire.

When you were filling out the questionnaire, what were your general impressions of it?

Overall, would you say it was easy or difficult to complete?

Was the questionnaire easy to understand?

Was there any part of the questionnaire that was difficult?

What would you change about the questionnaire?

What did you think about the different domains or broad topics covered within the questionnaire?

We would like to review your answers from the closing comments in section U so that we have a better understanding of what you meant.

It appears that it took you ____ time to complete the questionnaire. What was the process your institution went through to complete the questionnaire?
Was it difficult for you to get the information you needed to answer the questions? What information in particular?

[Go through each school’s answers in section U to come up with additional questions]

Now, we would like to go through the questionnaire pages with you.

Page 1, etc.

On this page: were there any questions that were hard to understand?

Were there any terms or concepts that needed better definition?

Did the answer choices fit your situation? That is, could you find an answer that described your school accurately?

[IF A QUESTION WASN’T ANSWERED]: I see that you didn’t provide an answer for (question). Was that because you didn’t have the information, you didn’t want to share the result, the question wasn’t clear, or for some other reason?

Was there anything additional under this topic heading that should have been included?

At this point we would like to ask if you had any other questions for us.

[Wait for questions from pilot school]

Just a couple more questions to wrap-up our discussion today.

In your personal opinion, where does your school stand on social mission, relative to other schools?

Are their areas or domains where your school’s social mission work is especially strong?

Areas where a lot of improvement is needed?

Does the draft questionnaire allow you to bring out these areas of strength and areas needing development at your school?

Again, thank you for your participation in our research study. We are happy to answer any more questions you may have now or you can contact us at a later date. Please contact me directly at Sonal@gwu.edu.
Supplemental Digital Appendix 3

**Activity Areas on the Social Mission Metrics Survey, 2016-2019**

<table>
<thead>
<tr>
<th>No.</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area 1</td>
<td>Social mission</td>
</tr>
<tr>
<td>Area 2</td>
<td>Curriculum</td>
</tr>
<tr>
<td>Area 3</td>
<td>Extracurricular</td>
</tr>
<tr>
<td>Area 4</td>
<td>Targeted education</td>
</tr>
<tr>
<td>Area 5</td>
<td>Global health</td>
</tr>
<tr>
<td>Area 6</td>
<td>Curriculum aligns to community needs</td>
</tr>
<tr>
<td>Area 7</td>
<td>Community collaboration</td>
</tr>
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<td>Area 8</td>
<td>Student diversity</td>
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<tr>
<td>Area 9</td>
<td>Faculty diversity</td>
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<tr>
<td>Area 10</td>
<td>Academic leadership diversity</td>
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<tr>
<td>Area 11</td>
<td>Pipeline programs</td>
</tr>
<tr>
<td>Area 12</td>
<td>Student training</td>
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<td>Area 13</td>
<td>Faculty training</td>
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<td>Area 14</td>
<td>Student-run clinics</td>
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<tr>
<td>Area 15</td>
<td>Student activism</td>
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<td>Area 16</td>
<td>Faculty activism</td>
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<td>Area 17</td>
<td>Primary care</td>
</tr>
<tr>
<td>Area 18</td>
<td>Research</td>
</tr>
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</table>
Supplemental Digital Appendix 4
Social Mission Metrics Priorities Survey

Social Mission Metrics (SMM) Priorities Survey

We need your input as we continue to develop informative ways of assessing the extent to which health professions schools are fulfilling the social mission of professional education. This questionnaire will ask you about which specific features of a school are more important when evaluating a school's social mission performance. Thanks for being willing to give a few minutes to help shape the priorities that will be built into these measures.

Note: This questionnaire is designed for use on a computer or tablet device. It is not formatted to work on your smartphone. If you're seeing this screen on your smartphone, please exit and click into the survey from a computer or tablet.

Background
The Social Mission Metrics Study began in 2016 with the aim of creating a tool to measure the social mission of a health professions school, track it over time, identify best practices, and if relevant, compare it to other institutions. The questionnaire was created with the guidance of a national multidisciplinary Advisory Committee. With their help, we developed 18 different areas that ought to be considered in assessing Social Mission performance. We then developed specific indicators for each of the areas, and these were, in turn, transformed into survey questions that we would pose to school leadership. The questionnaire was edited, shortened, and field-tested at a small number of dental, medical, and nursing schools and further revised based on this field-test process. We've collected some great pilot data from schools that have responded to the revised instrument, but two questions remain open. First, how should specific indicators be weighted when we compute a score for a given area? Second, which of the areas should be given greater or lesser weight when evaluating overall social mission performance of a school? After much discussion, we have decided that the best answers to these questions should come from the preferences expressed by actual stakeholders in health professions education.

What do we mean by “social mission”? We define the social mission of a health professions school as “the contribution of the school in its mission, programs, and the performance of its graduates, faculty and leadership to addressing the health disparities of the society in which it exists.” If you define social mission differently, feel free to work from your own definition of the concept as you answer our questions.

What will be done with the results? The results from this survey will be used to inform our decisions about the weights, to identify specific indicators within each area, and then to assign weighting factors to each area in order to develop a useful and relevant overall score for each school. We want to assign greater weight to the factors that you and others in the stakeholder community think are most important.

Do I need to have data to answer the questions? The survey aims to measure your views about which specific features of a school are more fulfilling the social mission of professional education. This questionnaire will ask you about which specific aspects of social mission are most important in health professions education. You do not need to gather any data to answer the questions in the survey.

Who is sponsoring this study? This project is funded by research grants from the Robert Wood Johnson Foundation and the Bureau of Health Workforce, part of the Health Resources and Services Administration [HRSA], an agency of the U.S. Department of Health and Human Services.

Q36.

Social Mission Metrics Priorities Survey Consent Agreement

Please read this consent agreement carefully before you decide to participate in the study.

What you will do in the study: You will complete an online survey that asks you to choose which specific aspects of social mission are most important in health professions education.

Time required: The study will require about 15 to 20 minutes of your time.

Risks: There are no anticipated risks in this study.

How will participating be beneficial? There are no direct benefits to you for participating in this research study. Your participation will greatly help our research team in the development of the Social Mission Metrics tool to identify measurable indicators of social mission in health professions educational programs. If successful, best practices could be shared with all participating institutions in a larger implementation phase of the Social Mission Metrics survey, thus encouraging needed improvements in health professional education.

How will confidentiality of my answers be protected? Your responses will only be shared with the study team. Results will be released only in aggregate form that will not allow any respondent to be identified.

What if I don't wish to share an answer? Participation is strictly voluntary and if there is any requested information that you do not wish to share, please leave the item blank.
Right to withdraw from the study: You have the right to withdraw from the study at any time without penalty.

How to withdraw from the study: If you do not complete the survey, you are withdrawn from the study. There is no penalty for withdrawing.

Payment: You will receive no payment for participating in the study.

What if I have questions?
Please email Julie Orban at juliea@gwu.edu if you have any questions.

If you have questions about your rights in the study, contact:
Tonya R. Moon, Ph.D.
Chair, Institutional Review Board for the Social and Behavioral Sciences
One Morton Dr Suite 500
University of Virginia, P.O. Box 800392
Charlottesville, VA 22908-0392
Telephone: (434) 924-5999
Email: irbsbshelp@virginia.edu
Website: www.virginia.edu/vpr/irb/sbs

Reference IRB-SBS Study #2018-0157-00

Agreement:
I agree to participate in the research study described above.

☐ I agree to participate
☐ No thanks

Q39. Thanks for taking time to consider participating. To exit the survey, click the button below and click on the ‘next’ button, below on the right.

If you reached this page in error and wish to go on to the rest of the questionnaire, please click on the “I agree to participate” button shown above.

This question was not displayed to the respondent.

Opening Demographics. First, just a few questions about you.

Q1. Q1. With which area of health professions education are you primarily concerned?

☐ Medicine
☐ Dental
☐ Nursing
☐ Other (please specify) 

Q2. Q2. What is your main role in health professions education? [Check all that apply]

☐ Faculty member
☐ Academic leadership (Deans, Assistant Deans, Etc.)
☐ School administration, staff
☐ Student
☐ House staff, resident, fellow
☐ Practicing in the profession
☐ Accreditation agency staff
☐ Education researcher
☐ Community or patient advocate
☐ Other (please specify) 

You may print a copy of this information for your records. Just click on the button below.
Q3. About how many years have you been involved with health professions education, not counting the years you spent in training?

Years 28

Glossary. You may see some of these phrases used in the survey. The definitions given here are in the context of the project.

**Culturally competent programs** maintain a set of attitudes, perspectives, behaviors, and policies – both individually and organizationally – that promote positive and effective interactions with diverse cultures.[1]

**Health disparities** are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.[2]

**Health equity research** is research that aims to eliminate health disparities and achieve optimal health for all.[3]

**Social determinants of health** are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.[4]

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**Indicators.** When evaluating how well a medical school, dental school or nursing school is doing in advancing the social mission of the health professions, there are many aspects to consider. This questionnaire has two main sections. The first section considers indicators for each evaluation area, taking the areas one at a time.

**Section A. Importance of indicators for each evaluation area:**

In this section, you will be shown short lists describing specific features that could be evaluated within a particular area of a school's social mission. You will be asked about 16 of our 18 areas. Although we are considering a number of indicators, you won't be shown more than 4 indicators for any one area, and some lists will show fewer. To avoid bias, the order of the indicators has been randomized in each questions below. **From each list, please select one item that you see as most important and one that you see as least important.**

*Note: If you don’t select a most or least important item, we’ll take that to mean that you see the unselected items as about equal in importance. There is no back button in Section A due to the randomization that we have built into the instrument.*

A1. **Evaluation area: Curricular courses and programs**

*[Please select the one indicator that is most important for social mission and the one that is the least important for social mission of those listed.]*

<table>
<thead>
<tr>
<th>MOST important</th>
<th>LEAST important</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Students required to participate in interprofessional education in clinical, classroom, and simulation settings</td>
</tr>
<tr>
<td></td>
<td>Students are required to be involved for an extended period of time in clinical rotations working with patients from a medically underserved population or community</td>
</tr>
<tr>
<td></td>
<td>School offers compensation to faculty or staff for participation in off-campus clinics or programs in a medically underserved population or community</td>
</tr>
<tr>
<td></td>
<td>Curricular materials on social determinants of health are integrated across several years of study</td>
</tr>
<tr>
<td></td>
<td>Curricular materials on health disparities are integrated across several years of study</td>
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</table>
A2. A2. Evaluation area: **Extracurricular and service learning activities**

[Please select the one indicator that is most important for social mission and the one that is the least important for social mission of those listed.]

<table>
<thead>
<tr>
<th>MOST important</th>
<th>LEAST important</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Students are required to participate in service-learning experiences</td>
<td>☐</td>
</tr>
<tr>
<td>☐ Students are required to be involved in extracurricular activities aimed at health disparities</td>
<td>☐</td>
</tr>
<tr>
<td>☐ Students are required to be involved in extracurricular activities aimed at social determinants of health</td>
<td>☐</td>
</tr>
</tbody>
</table>

A3. A3. Evaluation area: **Targeted education programs**

<table>
<thead>
<tr>
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<th>LEAST important</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ School's Public Health certificate or degree program involves large percentages of its students</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School offers training for other health careers (i.e., Community Health Workers, Medical Assistant, Dental Hygienists, Dental Assistants, Nurse's Aides)</td>
<td>☐</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>MOST important</th>
<th>LEAST important</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Clinical electives are offered to international students from low or middle income countries at the institution</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School offers global health rotations abroad</td>
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</table>

A5. A5. Evaluation area: **Community collaborations**

<table>
<thead>
<tr>
<th>MOST important</th>
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</thead>
<tbody>
<tr>
<td>☐ School has well developed collaborations with legal professionals</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with churches, temples or other faith-based organizations</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with Federally Qualified Health Clinics</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with local K-12 schools</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with local community colleges</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with local government's health department</td>
<td>☐</td>
</tr>
<tr>
<td>☐ School has well developed collaborations with philanthropic organizations</td>
<td>☐</td>
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A6. A6. Evaluation area: **Student diversity**
Holistic review is part of school’s formal admission policy

Overall ethnic and racial diversity of the student body

Student body includes Blacks and Hispanics in similar proportion to their percentage in the US population

Student body includes Blacks and Hispanics in similar proportion to their percentage in the state

Graduation rates of Black and Hispanic students, relative to rate for all students

Students are drawn from the medically underserved population or community that the institution serves

First-generation college students are present in high percentages and have good rate of graduation

Percentage of student scholarship dollars that is distributed based on need

Percentage of students who self-identify as LGBTQ

A7. Evaluation area: **Faculty diversity**

**MOST important** | **LEAST important**
---|---
- Holistic review is part of school’s formal admission policy
- Overall ethnic and racial diversity of the student body
- Student body includes Blacks and Hispanics in similar proportion to their percentage in the US population
- Student body includes Blacks and Hispanics in similar proportion to their percentage in the state
- Graduation rates of Black and Hispanic students, relative to rate for all students
- Students are drawn from the medically underserved population or community that the institution serves
- First-generation college students are present in high percentages and have good rate of graduation
- Percentage of student scholarship dollars that is distributed based on need
- Percentage of students who self-identify as LGBTQ

A8. Evaluation area: **Academic leadership diversity**

**MOST important** | **LEAST important**
---|---
- Holistic review is part of school’s formal admission policy
- Overall ethnic and racial diversity of the academic leadership
- Academic leadership includes Blacks and Hispanics in similar proportion to their percentages in the US population
- Academic leadership includes Blacks and Hispanics in similar proportion to their percentages in the state
- Academic leadership includes women and men equally
- Academic leadership includes people who identify as LGBTQ

A9. Evaluation area: **Pipeline programs**

**MOST important** | **LEAST important**
---|---
- K-12 pipeline programs have large enrollment
- K-12 pipeline programs include many students from minority groups
- K-12 pipeline programs include many students from low-income families
Undergraduate pipeline programs have large enrollment
Undergraduate pipeline programs include many students from minority groups
Undergraduate pipeline programs include many students whose parents did not attend college
Many undergraduate pipeline program students go on to get education in a health profession

A10. You're more than half way through our list of areas.

A10. Evaluation area: **Faculty training for a culture of inclusion**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Faculty are required to attend training in social determinants of health</td>
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</tr>
<tr>
<td>Faculty are required to attend health advocacy training</td>
<td></td>
</tr>
<tr>
<td>Faculty are required to attend cultural competency training</td>
<td></td>
</tr>
<tr>
<td>Faculty are required to attend unconscious bias training</td>
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</tbody>
</table>

A11. Evaluation area: **Student training for a culture of inclusion**

<table>
<thead>
<tr>
<th>MOST important</th>
<th>LEAST important</th>
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</thead>
<tbody>
<tr>
<td>Students are required to attend training in social determinants of health</td>
<td></td>
</tr>
<tr>
<td>Students are required to attend health advocacy training</td>
<td></td>
</tr>
<tr>
<td>Students are required to attend cultural competency training</td>
<td></td>
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<tr>
<td>Students are required to attend unconscious bias training</td>
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</table>

A12. Evaluation area: **Student-run health clinics**

<table>
<thead>
<tr>
<th>MOST important</th>
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<tbody>
<tr>
<td>Student-run health clinics have high student participation rates</td>
<td></td>
</tr>
<tr>
<td>Student-run health clinics have high faculty or staff participation rates</td>
<td></td>
</tr>
<tr>
<td>Faculty or staff are compensated for their participation in student-run health clinics</td>
<td></td>
</tr>
</tbody>
</table>

A13. Evaluation area: **Student activism**

<table>
<thead>
<tr>
<th>MOST important</th>
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</thead>
<tbody>
<tr>
<td>Students are required to be involved in community programs aimed at social determinants of health</td>
<td></td>
</tr>
<tr>
<td>School provides regular financial support for student activities in the community</td>
<td></td>
</tr>
<tr>
<td>Minority students are active in minority professional groups</td>
<td></td>
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</tbody>
</table>

A14. Just three more areas to consider.

A14. Evaluation area: **Faculty activism**
<table>
<thead>
<tr>
<th>MOST important</th>
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<tr>
<td>✓</td>
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<tr>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**A15m. A15. Evaluation area: Emphasis on primary care (medical)**

This question was not displayed to the respondent.

**A15d. A15. Evaluation area: Emphasis on primary care (dental)**

This question was not displayed to the respondent.


<table>
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<tr>
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<td>✓</td>
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<td>✓</td>
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<tr>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**A16. A16. Evaluation area: Community needs and social mission in the school’s research**

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<th>MOST important</th>
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<tbody>
<tr>
<td>✓</td>
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<td>✓</td>
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<tr>
<td>✓</td>
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</table>

**Paired Comparisons. Section B.**

Now that you’ve looked at indicators for most of the areas, we’d like to know which of the areas you see as having more importance. In each of the following questions, you will be shown two evaluation areas, and for each pair you will be asked to select the one you see as more important in evaluating a school’s performance with respect to social mission. (The areas are randomized and there is no significance to whether one is displayed in the left column or the right.) We’ll ask you to consider 15 pairs.

**Q41.** We mentioned these definitions at the start of the survey and wanted to repeat them here for your reference.

**Culturally competent programs** maintain a set of attitudes, perspectives, behaviors, and policies – both individually and organizationally – that promote positive and effective interactions with diverse cultures.[1]

**Health disparities** are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender,
education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.[2]

**Health equity research** is research that aims to eliminate health disparities and achieve optimal health for all.[3]

**Social determinants of health** are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.[4]

---


---

**B1. B1.** Considering each pair of evaluation areas, which of the two is most important in evaluating a school's performance in the area of Social Mission?

**KEY:**

1 = Item on the left is much more important
2 = Item on the left is a little more important
3 = Items are equally important
4 = Item on the right is a little more important
5 = Item on the right is a lot more important

<table>
<thead>
<tr>
<th>School has well developed collaborations with community organizations</th>
<th>Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allied institution in an LMIC to train international students and offer global health rotations for US students</td>
<td>School's mission statement and strategic plan link its work to a medically underserved population or community</td>
</tr>
<tr>
<td>Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals</td>
<td>School strongly engaged in research on community needs, health equity and promotion, and social determinants of health</td>
</tr>
<tr>
<td>School's mission statement and strategic plan link its work to a medically underserved population or community</td>
<td>Student-run health clinics have high participation from students and faculty</td>
</tr>
<tr>
<td>School strongly engaged in research on community needs, health equity and promotion, and social determinants of health</td>
<td>Required student participation in service-learning and extracurricular activities aimed at health social determinants</td>
</tr>
</tbody>
</table>

**B2. B2.** Considering each pair of evaluation areas, which of the two is most important in evaluating a school's performance in the area of social mission?

**KEY:**

1 = Item on the left is much more important
2 = Item on the left is a little more important
3 = Items are equally important
4 = Item on the right is a little more important
5 = Item on the right is a lot more important

| Student body and graduating classes reflect the racial and ethnic distribution of the population | Educational programs put strong emphasis on careers in primary care practice/fields |
| K-12 and undergraduate pipeline programs have large minority enrollment and include first-generation college students | Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals |
| Faculty are involved in programs aimed at health disparities, determinants or advocacy, with the school's recognition | Student body and graduating classes reflect the racial and ethnic distribution of the population |
| Students are involved in programs aimed at health disparities or social determinants, with the school's support | Student-run health clinics have high participation from students and faculty |
| Curriculum content focuses on medically underserved communities, health disparities and inter-professional education | Student body and graduating classes reflect the racial and ethnic distribution of the population |

**B3. B3.** Here's your last set of pairs. Considering each pair of items, which of the two is most important in evaluating a school's performance in the area of social mission?

**KEY:**

1 = Item on the left is much more important

| Student body and graduating classes reflect the racial and ethnic distribution of the population | Educational programs put strong emphasis on careers in primary care practice/fields |
| Educational programs put strong emphasis on careers in primary care practice/fields | Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals |
| Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals | Student body and graduating classes reflect the racial and ethnic distribution of the population |
| Students are involved in programs aimed at health disparities or social determinants, with the school's support | Student-run health clinics have high participation from students and faculty |
| Curriculum content focuses on medically underserved communities, health disparities and inter-professional education | Student body and graduating classes reflect the racial and ethnic distribution of the population |
Required student attendance at unconscious bias, cultural competency, health advocacy & social determinants training

Required student participation in service-learning and extracurricular activities aimed at health social determinants

School has well developed collaborations with community organizations

Student body and graduating classes reflect the racial and ethnic distribution of the population

The design of the curriculum is closely tied to the institution's Community Health Needs Assessment

Faculty reflects the racial, ethnic, and gender distribution of the population, and includes LGBTQ individuals

Curriculum content focuses on medically underserved communities, health disparities and inter-professional education

Faculty are involved in programs aimed at health disparities, determinants or advocacy, with the school's recognition

School has well developed collaborations with community organizations

Educational programs put strong emphasis on careers in primary care practice/fields

Ending demographics. Before we finish, we have some final questions about you. These are questions about your gender, race and ethnicity.

Q4. What is your gender?

☐ Male
☐ Female
☐ Other [ ]

Q5. Are you Spanish, Hispanic, or Latino or none of these?

☐ Yes
☐ None of these

Q6. Choose one or more races that you consider yourself to be [Check all that apply]:

☑️ White
☐ Asian

☐ Black or African American
☐ Native Hawaiian or Pacific Islander

☐ American Indian or Alaska Native
☐ Other (please specify) [ ]

C1. That's all the questions we have for you. Your responses will help us to shape our evaluation formulas so that they reflect the priorities of the stakeholder community.

If you have any comments about this survey, or about ways we could be measuring social mission performance, please share them here. Then, please click on the right arrow below to submit your responses. Thank you so much for your participation!

Thank you for the opportunity to participate. Will the findings of the study be shared with participants? If yes, how? Thank you.
Group: 2
P1L: 7
P1R: 9
P2L: 5
P2R: 1
P3L: 9
P3R: 18
P4L: 1
P4R: 14
P5L: 18
P5R: 3
P6L: 8
P6R: 17
P7L: 11
P7R: 9
P8L: 16
P8R: 8
P9L: 15
P9R: 14
P10L: 2
P10R: 8
P11L: 12
P11R: 9
P12L: 3
P12R: 2
P13L: 7
P13R: 16
P14L: 8
P14R: 7
P15L: 6
P15R: 17

<table>
<thead>
<tr>
<th>Location Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Location:</strong></td>
</tr>
<tr>
<td><strong>Source:</strong></td>
</tr>
</tbody>
</table>
Social Mission Metrics Questionnaire
Self-Assessment Tool

Introduction and Instructions

Thank you for participating in the self-assessment process by filling out this questionnaire about your school. This questionnaire aims to assess the social mission of your school, defined as the contribution of the school in its mission, programs, and the performance of its graduates, faculty and leadership to addressing the health disparities of the society in which it exists.

Background

The Social Mission Self-Assessment aims to measure the social mission engagement of a health professions school, track it over time, and compare it to national norms. The questionnaire is based on pre-existing tools to assess aspects of social mission, literature review, and expert opinion. It was created with the guidance of a national multidisciplinary Advisory Committee. It has been field tested at 65 dental, medical, and nursing schools and revised based on this fielding process.

Who will participate?

All dental and medical school deans in the United States are invited to participate in the self-assessment process. Given the large number of nursing schools in the U.S., compared to the other disciplines, a randomly selected sample of 400 nursing school deans will also get this invitation. Nursing schools that were not randomly selected to receive an invitation to participate may elect to participate by contacting the study team.

What will be done with the results?

The research team will provide a confidential summary report to the primary respondent at the school. This will include a summary of the responses of your school compared to aggregated data of all participating schools within your discipline. The summary report may be used to further engage in self-analysis and reflection of their baseline performance to establish performance-improving changes.

How will the confidentiality of my answers be protected?

Your responses will only be shared with the study team. You will NOT receive any information on the responses of other schools, and no other schools will receive information on the responses of your school. No information on a particular school’s standing will be shared or published without explicit consent from that school.

Who should answer these questions?

We’ve sent this survey to you as someone who has insight into your school’s programs and is in a position to request data from various internal sources. We don’t expect that you’ll have all the answers at your fingertips, so we encourage you to look at databases at your institution and to consult with people in other departments or units who might have some of the information requested. You may delegate a primary respondent other than yourself to take responsibility for aggregating the required information.

In field tests of the survey, the following departments were typically consulted by the primary participant:

- Academic Affairs
• Curricular/Educational Affairs
• Student Affairs
• Diversity and Inclusion
• Faculty Affairs
• Admissions
• Financial Aid

What if I don’t know the answer?

Please select the answer choice “Don't Know/Information Not Available” or leave the question blank if the “Don't Know” option is not there.

What if I don’t wish to share an answer?

Participation is voluntary and for your own self-reflection, so we encourage schools to answer all questions if possible. If there is any requested information that you or your school does not wish to share, please leave the item blank or note that you decline to answer that item. If you are willing, we would be interested in understanding why you may not be interested in sharing the information as it will assist us in better refining the questionnaire.

How will participating be beneficial?

Your participation will help examine 1) the status of your school’s social mission activities; 2) current strengths and areas for improvement in these activities; and 3) your school’s proficiency in social mission in comparison to similar schools. In addition to the confidential summary report, the data from the self-assessment will enable the research team to further develop performance measures in the field of social mission.

Who is sponsoring this study?

This project is funded by a research grant from the Robert Wood Johnson Foundation.

How should school-directed questions be answered?

Please answer school-directed questions in relation to the School of Medicine. For example, if your individual school is situated in a larger university or health science center, focus on the individual degree granting school/college for your MD or DO students where possible.

What if I do not understand a term?

Text boxes throughout the document define phrases used in the study, and there is a glossary at the end included for reference. If there are other questions or terms you do not understand, please email Julie Orban (juliela@gwu.edu) for further clarification.
A. **Curricular courses and programs**

A1. What is the primary degree that you offer at your medical school?
1. Doctor of Medicine (MD)
2. Doctor of Osteopathic Medicine (DO)

A2. Does your school have required inter-professional education for all students?
1. Yes
2. No
9. Don’t know

A2a. **IF YES:** In which settings do students receive inter-professional education experiences?
1. In clinical settings only
2. In classroom/simulation settings only
3. In both clinical and classroom/simulation settings
9. Don’t know

A3. Does your school offer clinical rotations or courses where your students interact with patients from underserved communities?
1. Yes
2. No
9. Don’t know

**IF YES: Please answer A3a-A3c:**

A3a. Are these clinical rotations or courses required of students?
1. Yes, required of all our students
2. Yes, required of certain students
3. No

A3b. **IF EXPERIENCES ARE NOT REQUIRED:** About how many of your students participate in these clinical rotations or courses over the course of their education
1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
9. Don’t know

A3c. Are any of these clinical rotations or courses longitudinal i.e. clinical engagements over a prolonged period of time (at least four weeks of student time in the period of a year)?
1. Yes
2. No
9. Don’t know
Definition: Social Determinants of Health are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.\(^1\)

A4. Does your school explicitly teach students about social determinants of health in your curriculum?
1. Yes, in required courses
2. Yes, in elective courses
3. No

A4a. If YES: Is this content integrated across multiple years of study?
1. Yes, across all years of study
2. Yes, across multiple years of study
3. No

Definition: Health disparities are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.\(^2\)

A5. Does your school explicitly teach students about health disparities in your curriculum?
1. Yes, in required courses
2. Yes, in elective courses
3. No

A5a. If YES: Is this content integrated across multiple years of study?
1. Yes, across all years of study
2. Yes, across multiple years of study
3. No


Definition: LGBTQ is an acronym for lesbian, gay, bisexual, transgender, and queer.3

We understand that terminology and acronyms continue to evolve. Please use whatever terminology your school finds most appropriate.

A6. Does your school have specific curricular content focused on LGBTQ health?
1 Yes, in required courses
2 Yes, in elective courses
3 No

A6a. IF YES: Is this content integrated across multiple years of study?
1 Yes, across all years of study
2 Yes, across multiple years of study
3 No

B. Extracurricular and service learning opportunities

B1. Does your school have a service-learning or volunteer hours requirement for graduation?
1. Yes, required of all students
2. Yes, required of some students
3. No

B1a. IF EXPERIENCES ARE NOT REQUIRED: About how many of your students participate in service-learning or volunteer opportunities during the course of their education?
1. All or nearly all (approximately 91% or more)
2. Most (51-90%)
3. Some (11-50%)
4. Just a few (10% or less)
9. Don’t know

B1b. IF EXPERIENCES ARE REQUIRED: What is the total time commitment required?
1. No specific time commitment
2. 1-10 hours
3. 11-30 hours
4. 31-50 hours
5. > 50 hours

B2. Other than student-run health clinics, does your school offer its students extracurricular activities directly related to reduction of health disparities or addressing social determinants of health?
1. Yes
2. No
9. Don’t know

B2a. IF YES: About how many of your students participate in these experiences during the course of their education?
1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
9. Don’t know
C. Targeted education programs

C1. Does your institution or school offer a certification or degree in Public Health?
1  Yes
2  No
9  Don’t know

C1a. IF YES: Approximately what percentage of your medical students over the last four graduating classes have completed the Public Health certification or degree option?
1  All or nearly all (91% or more)
2  Most (51-90%)
3  Some (10-50%)
4  Just a few (less than 10%)
5  None
9  Don’t know

C2. Does your institution or school offer specific education programs that train students to enter the following health careers?

<table>
<thead>
<tr>
<th>Do you offer a program that trains students to become . . .</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Community Health Workers</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>b. Medical Assistants</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>
D. Global health

D1. Does your school have a formal partnership with an institution in a low or middle income country?

1 Yes
2 No
9 Don’t know

D1a. IF YES: Does your school facilitate students from low or middle income countries to train or study at your institution?

1 Yes
2 No
9 Don’t know

D2. Does your school offer global health rotations in low or middle income countries?

1 Yes
2 No
9 Don’t know

IF YES: Please answer D2a-D2b:

D2a. About how many of your students participate in these experiences?

1 All or nearly all (91% or more)
2 Most (51-90%)
3 Some (10-50%)
4 Just a few (less than 10%)
9 Don’t know

D2b. What is the average duration of the experience?

1 < 2 weeks
2 2-4 weeks
3 > 4 weeks
E. Statements related to your school’s mission

**Definition: Community of commitment** is the term we are using to indicate a medically or socially underserved community – this could be an underserved geographic area (local or regional), demographic group, or category of patient that your school has explicitly targeted as a focus for your work.

E1. Does your school have a written mission statement? *Please circle a number.*
1. Yes
2. No

E1a. **IF YES:** Does your school’s mission statement specifically mention any of the following terms (*select all that apply)*:

- [ ] Social determinants of health
- [ ] Underserved/underrepresented/disadvantaged populations
- [ ] Health equity or health disparities

E1b. **IF YES:** Does your school’s mission statement identify a specific “community of commitment” as defined above? If you’re not sure, please send us your mission statement or give us the Web address (URL) where we can locate it and we will attempt to make a determination.
1. Yes
2. No
9. *Don’t know*

**URL:**

E1c. **IF YES:** Please specify your school’s community or communities of commitment:

---

E2. Does your school have a current strategic plan?
1. Yes
2. No
E2a. **IF YES:** Does your school’s strategic plan specifically mention any of the following terms 
(*select all that apply*):

- Social determinants of health
- Underserved/underrepresented/disadvantaged populations
- Health equity or health disparities

E2b. **IF YES:** Does your strategic plan identify a specific “community of commitment” as defined 
above? If you’re not sure, please send us your strategic plan and we will attempt to make a 
determination.

1 Yes
2 No
9 Don’t know

E2c. **IF YES:** Please specify your school’s community or communities of commitment:
F. Concordance of curriculum with community needs

**Definition:** A Community health needs assessment (sometimes called a CHNA), refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.⁴

F1. Has your school, or a hospital with which it is closely affiliated, conducted a formal or informal Community Health Needs Assessment in the past five years?

1. Yes, formal
2. Yes, informal
3. Neither
4. Don’t know

F1a. **IF YES:** To what extent has the design of your school’s curriculum been explicitly informed by the results of the Community Health Needs Assessment?

1. Substantially
2. Moderately
3. Slightly
4. Not at all
5. Don’t know

G. Community collaborations

G1. Do your students participate in clinics, offices, or programs that are located outside of your main campus and based in the local community or in your communities of commitment?

1  Yes
2  No
9  Don’t know
10 Not applicable

G1a. IF YES: Does your school provide any compensation for time devoted by faculty or staff to the activities in these off-campus, community locations?

1  Yes
2  No
9  Don’t know

G1b. Is there a formal or informal channel for feedback from the community to the school about the value and effectiveness of these programs?

1  Yes
2  No
9  Don’t know

G2. Does your school have formalized or otherwise well-developed collaborations with any of the following? Please circle a number for each type.

<table>
<thead>
<tr>
<th>Type of collaboration</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know/Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Collaborations with legal professionals</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>b. Collaborations with churches, temples or other faith-based organizations</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>c. Collaborations, practice arrangements, or clinical teaching arrangements with a local Federally Qualified Health Center (FQHC)</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>d. Collaborations with local K-12 schools</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>e. Collaborations with local community colleges</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>f. Collaboration with your local government’s health department</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>g. Collaboration with philanthropic organizations</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>
H. Student diversity

**Definition: Holistic review** is a university admissions strategy that assesses an applicant’s unique experiences alongside traditional measures of academic achievement such as grades and test scores. It is designed to help universities consider a broad range of factors reflecting the applicant’s academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic Review has been described by the Supreme Court as a highly individualized review of each applicant’s file, giving serious consideration to all the ways an applicant might contribute to a diverse educational environment.

H1. Does your program’s admission policy include principles of holistic review of applicants?

1. Yes, as a matter of written policy
2. Yes, as a matter of informal practice
3. No
9. Don’t know

H2. What is the total number of students currently enrolled in your degree program?

*Total number of students: ________*
H3. Please fill in a percentage breakdown of the racial and ethnic composition of your current student body in the table below. Please include all full-time students currently enrolled in your primary degree program. (Note: This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros in blanks.)

<table>
<thead>
<tr>
<th>Percent of your full-time students who identify as:*</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>____%</td>
</tr>
<tr>
<td>i. International student (Nonresident alien)</td>
<td>____%</td>
</tr>
<tr>
<td>Total (should total to 100%)</td>
<td>____%</td>
</tr>
</tbody>
</table>

*The categories in this table are based on those that schools report to the U.S. Dept. of Education.

H4. What is the average graduation rate for students enrolled in your primary degree program over the past 5 cohorts? Note: If you do not have data over the past 5 cohorts, use whatever time frame you have available to calculate the average rate. You will be asked to specify the time frame below.

Overall graduation rate: ______%  
This rate is calculated or estimated over the past ______ years.  
This rate represents the percentage of students who graduated within ______ years.
**H5.** What is the average graduation rate for students by race/ethnicity enrolled in your primary degree program over the past 5 cohorts? Note: These rates should be calculated over the same time period as the question above. These numbers should NOT add up to 100%. For example: If you are using a time period of 5 years, and your last 5 classes included 10 self-identified white students, 9 of whom graduated, your answer should be 90%.

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Graduation Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>_____%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>_____%</td>
</tr>
<tr>
<td>Black</td>
<td>_____%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>_____%</td>
</tr>
<tr>
<td>White</td>
<td>_____%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>_____%</td>
</tr>
<tr>
<td>Race Not Reported</td>
<td>_____%</td>
</tr>
</tbody>
</table>

This rate is calculated or estimated over the past ______ years.
This rate represents the percentage of students who graduated within ______ years.

**H6.** Approximately what percentage of your students in your primary degree program are from the community of commitment referred to in section E?

- Percent of students: _____%
  - Information not available

**H7.** What percentage of students in your primary degree program are from families where neither parent finished college?

- Percent of students who were first-generation college students: _____%
  - Information not available

**H7a.** Considering only first-generation college students in your primary degree program, what is their average graduation rate? Note: This rate should be calculated over the same time period as the questions above.

- Graduation rate for first-generation college students: _____%
  - Information not available

**H8.** Please consider all the scholarship and grant dollars awarded by your school in the last academic year. What percentage of the scholarship and grant dollars were awarded based on financial need? (Do not count student loans or student wages.)

- Percent of scholarship and grant dollars that are need-based: _____%
  - Information not available
Since definitions and abbreviations are evolving, we may have omitted some letters from the LGBTQ abbreviation. Please apply your schools practice to the next section as you feel appropriate.

**H9. Does your school collect information from each student on his or her self-reported sexual orientation and/or preferred gender identity?**

1. Yes
2. No

**H9a. IF YES: What percentage of students in your primary degree program self-identify as LGBTQ?**

<table>
<thead>
<tr>
<th>Percent of students identifying as LGBTQ: ____%</th>
<th>Information not available</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>

J. Faculty diversity

The following questions ask about the composition of your faculty. Please include all full-time faculty members in your school, regardless of rank or tenure status. Faculty members on joint appointments with other schools should be included if the appointment in your school is considered to be their primary appointment. Adjunct faculty should be included if their work commitment to the school is considered to be full-time.

J1. What is the total number of full-time faculty at your school?

Total number of full-time faculty: ______

J2. Please fill in a percentage breakdown of the racial and ethnic composition of your school’s full-time faculty in the table below. (This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros in blanks.)

☐ Information not available

<table>
<thead>
<tr>
<th>Percent of your school’s full-time faculty who identify as:</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>____%</td>
</tr>
<tr>
<td>i. International employee (Nonresident alien)</td>
<td>____%</td>
</tr>
</tbody>
</table>

Total (should total to 100%) ____%

*The categories in this table are based on those that schools report to the U.S. Dept. of Education.
J3. What percentage of your full-time faculty members are women?

Percent of women among all full-time faculty: _____%

J4. Does your full-time faculty team include one or more members who openly identify themselves as members of the LGBTQ community?

1  None
2  1-2
3  3-4
4  5-9
5  10 or more
9  Don’t know

The next questions are about the people in academic leadership positions in your school. Please include members of the faculty who hold decanal positions (e.g. dean, assistant/associate dean), provost, department chair, division head, or the equivalent positions at your school. Do not include non-faculty administrators.

J5. What is the total number of academic leadership members at your school?

Total number of faculty in academic leadership: _______
J6. Please fill in a percentage breakdown of the racial and ethnic composition of your school’s academic leadership in the table below. (This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros for blanks.)

☐ Information not available

<table>
<thead>
<tr>
<th>Percent of your school's academic leadership who identify as:</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>_____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>_____%</td>
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<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>_____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>_____%</td>
</tr>
<tr>
<td>i. International employee (Nonresident alien)</td>
<td>_____%</td>
</tr>
</tbody>
</table>

Total (should total to 100%) _____%

*The categories in this table are based on those that schools report to the U.S. Dept. of Education

J7. What percentage of your academic leadership members are women?

Percent of women among academic leadership: _____%  

J8. Does your academic leadership team include any member who openly identify themselves as members of the LGBTQ community?

1 Yes
2 No
9 Don’t know
K. Pipeline programs

K1. Is your school sponsoring, running or assisting with any pipeline programs targeted to K-12 students and aimed at encouraging them to train for careers in the health professions?

1   Yes
2   No
9   Don’t know

**IF YES: Please answer K1a-K1c:**

K1a. Other than one-time contacts with students, what is the number of K-12 students who participate in your pipeline programs each year?

*Number of K-12 students impacted annually: _____*

K1b. Of the answer you gave in K1a, approximately what percentage of these students are from underrepresented racial/ethnic minority groups?

*Percent of participating K-12 students who are minorities: _____%*

K1c. Of the answer you gave in K1a, approximately what percentage of these students are in the free or reduced lunch program?

*Percent of participating K-12 students who are on free or reduced lunch: _____%*

K2. Is your school sponsoring, running or assisting with any pipeline programs targeted to undergraduate college students and aimed at encouraging them to train for careers in the health professions?

1   Yes
2   No
9   Don’t know

**IF YES: Please answer K2a-K2d:**

K2a. Other than one-time contacts with students, what is the number of undergraduate students who participate in your pipeline programs each year?

*Number of undergraduate students impacted annually: _____*

K2b. Approximately what percentage of the participating students are from underrepresented racial/ethnic minority groups?

*Percent of participating undergraduate students who are minorities: _____%*

K2c. Approximately what percentage of the participating students are the first in their family to go to college?

*Percent of participating students who are first-generation college students: _____%*

K2d. Approximately what percentage of the participating students ultimately enter education for one of the health professions? (Note: Do not include students enrolled in pre-matriculation who have already been admitted to a health professions school.)

*Percent of participating students who enter health profession education: _____%*
## INSTITUTIONAL CULTURE AND CLIMATE

### L. Training for a culture of inclusion

#### L1. How many of your current full-time faculty have taken any of the following types of training?

<table>
<thead>
<tr>
<th>Training in . . .</th>
<th>All or nearly all (91% or more)</th>
<th>Most (51-90%)</th>
<th>Some (10-50%)</th>
<th>Just a few (less than 10%)</th>
<th>Not Offered</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Unconscious/implicit bias awareness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>b. Cultural competency or cultural humility</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>c. Advocacy on issues related to health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>d. Social determinants of health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

#### L2. How many of your current students have taken any of the following types of training?

<table>
<thead>
<tr>
<th>Training in . . .</th>
<th>All or nearly all (91% or more)</th>
<th>Most (51-90%)</th>
<th>Some (10-50%)</th>
<th>Just a few (less than 10%)</th>
<th>Not Offered</th>
<th>Don't Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Unconscious/implicit bias awareness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>b. Cultural competency or cultural humility</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>c. Advocacy on issues related to health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>d. Social determinants of health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>
M. Student-run health clinics

**Definition:** Student-run health clinics are community clinics where students (with faculty supervision) provide health care services at no cost or low cost to underserved populations.

M1. In the past three years, have your students worked in any student-run health clinics?

1. Yes
2. No
9 Don’t know

M1a. IF YES: About how many of your students volunteer at your student-run health clinics?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None

M1b. IF YES: About how many of your faculty or staff members actively give time to your student-run health clinics?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None

M1c. IF YES: Does your school provide compensation for any of the time that faculty or staff devote to your student-run health clinics?

1. Yes
2. No
9 Don’t know
N. Student activism

N1. Other than time given to student-run health clinics, about how many of your students are actively involved in community-based programs or organizations that address health disparities or social determinants of health?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
9. Don’t know

N2. Does your school provide any regular financial support for community-oriented student activities outside of the curriculum (not including student-run health clinics)?

1. Yes
2. No
9. Don’t know

N3. Consider your students who are from under-represented groups in the health professions. About how many of these students are active in minority professional associations and societies?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
9. Don’t know
P. Faculty activism

P1. Other than time given to student-run health clinics, about how many of your faculty are actively involved in community-based programs or organizations that address health or issues related to health?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
9. Don’t know

P2. About how many of your faculty members are actively involved in advocating for change in issues related to health or its social determinants? (Include regional, state, national or international advocacy organizations.)

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
9. Don’t know

P3. Does your school recognize or reward faculty participation in the activities in N1 or N2?

1. Yes
2. No
9. Don’t know

P3a. IF YES: How does your school recognize or reward faculty?

1. Promotion criteria explicitly recognize these contributions
2. Awards for community activities or advocacy
3. Compensation/pay raise
4. Other _____
Q. Emphasis on primary care

Q1. How would you rate your school’s amount of encouragement or discouragement for students to enter primary care or general community-based practice?
   1. A great deal of encouragement
   2. Some encouragement
   3. A little encouragement
   4. Neither encourage or discourage
   5. A little discouragement
   6. Some discouragement
   7. A great deal of discouragement

Q2. Approximately what percentage of your graduates practice in community health centers, including Federally Qualified Health Centers (FQHCs)?

   Percent of graduates: _____%
   ❑ Information not available

Q3. Over the past four years, approximately what percentage of your graduates typically enter residency in family practice?

   Percent of graduates who enter residency in family practice: _____%
   ❑ Information not available

Q4. Approximately what percentage of your graduates typically enter primary care practice following residency (family medicine, general internal medicine, general pediatrics, med-peds, or general ob-gyn)?

   Percent of graduates who enter primary care: _____%
   ❑ Information not available
R. Community needs and social mission in your school’s research

**Definitions:** Community based participatory research is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities.\(^7\)

Community engaged research is a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community of focus.\(^8\)

Health equity research is research that examines strategies, programs or circumstances that tend to reduce health disparities and achieve optimal health for all.\(^9\)

Health disparity research includes basic, clinical and social sciences studies that focus on identifying, understanding, preventing, diagnosing, and treating health conditions such as diseases, disorders, and other conditions that are unique to, more serious, or more prevalent in subpopulations in socioeconomically disadvantaged (i.e., low education level, live in poverty) and medically underserved, rural, and urban communities.\(^10\)

Health promotion research is research that promotes the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.\(^11\)

Disease prevention research is research designed to yield results directly applicable to identifying and assessing risk, and to developing interventions for preventing or ameliorating the occurrence of a disease or the progression of detectable but asymptomatic disease.\(^12\)

---


R1. For each of the following types of research, please tell us the number of research projects that your school have been involved in during the past three years. If appropriate, you may count a given project under more than one applicable type of research. Please circle a response for each type of research.

<table>
<thead>
<tr>
<th>How many of these projects in the last 3 years?</th>
<th>None</th>
<th>One</th>
<th>2 or 3</th>
<th>4 to 9</th>
<th>10 or more</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Community engaged research (including community based participatory research)</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>b. Health equity or health disparity research</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>c. Health promotion or disease prevention research</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>d. Research into social determinants of health</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>e. Health or research needs assessment in your school’s local community or communities of commitment</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
</tbody>
</table>

R2. Approximately what percentage of your school’s total research portfolio is focused on research in all of the above categories combined (community engaged research, health equity/disparity research, health promotion/disease prevention research, social determinants of health, community health needs assessment)

1 0-10%
2 11-25%
3 26-50%
4 > 50%

R3. To what extent has the development of your school’s research program been explicitly informed by the results of your school or hospital’s Community Health Needs Assessment or other ongoing mechanisms designed to monitor and respond to community health priorities?

1 Substantially
2 Moderately
3 Slightly
9 Don’t know
10 Our school doesn’t have a Community Health Needs Assessment
THANK YOU for sharing so much information about your school’s programs and efforts to advance the social mission in health professions education. Your responses are invaluable to our research and our efforts to advance these areas in the education of our nation’s health professionals.

We would like to hear more from you about what your school is doing in the area of social mission. Please take a moment to answer the following question:

**S. Your school’s social mission activities**

S1. What projects or ideas is your school working on in the next 3 years that is related to social mission?

Thanks again for completing the assessment.
Community based participatory research is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities.

Community engaged research is a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community of focus.

Community health needs assessment (sometimes called a CHNA), refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.

Community of commitment is the term we are using to indicate a medically or socially underserved community – a health disparity community – that could be a geographic area (local or regional), demographic group, or category of patient that your school has explicitly targeted as a focus for your work.

Disease prevention research is research designed to yield results directly applicable to identifying and assessing risk, and to developing interventions for preventing or ameliorating the occurrence of a disease or the progression of detectable but asymptomatic disease.

Health equity research is research that aims to eliminate health disparities and achieve optimal health for all.

Health disparities are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.

Health disparity research includes basic, clinical and social sciences studies that focus on identifying, understanding, preventing, diagnosing, and treating health conditions such as diseases, disorders, and other conditions that are unique to, more serious, or more prevalent in subpopulations in socioeconomically disadvantaged (i.e., low education level, live in poverty) and medically underserved, rural, and urban communities.

Health promotion research is research that promotes the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.

Holistic review is a university admissions strategy that assesses an applicant’s unique experiences alongside traditional measures of academic achievement such as grades and test scores. It is designed to help universities consider a broad range of factors reflecting the applicant’s academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic Review has been described by
the Supreme Court as a highly individualized review of each applicant’s file, giving serious consideration to all the ways an applicant might contribute to a diverse educational environment.

**LGBTQ** is an acronym for lesbian, gay, bisexual, transgender, and queer.

**Social determinants of health** are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.

**Student-run health clinics** are community clinics where students (with faculty supervision) provide health care services at no cost or low-cost to underserved populations.
Thank you for participating in the self-assessment process by filling out this questionnaire about your nursing school. This questionnaire aims to assess the social mission of your school, defined as the contribution of the school in its mission, programs, and the performance of its graduates, faculty and leadership to addressing the health disparities of the society in which it exists.

**Background**

The Social Mission Self-Assessment aims to measure the social mission engagement of a health professions school, track it over time, and compare it to national norms. The questionnaire is based on pre-existing tools to assess aspects of social mission, literature review, and expert opinion. It was created with the guidance of a national multidisciplinary Advisory Committee. It has been field tested at 65 dental, medical, and nursing schools and revised based on this fielding process.

**Who will participate?**

Approximately 400 randomly selected nursing school deans, along with medical and dental school deans, in the United States are invited to participate in the self-assessment process. Nursing schools that were not randomly selected to receive an invitation to participate may elect to participate by contacting the study team at https://socialmissionmetrics.gwhwi.org/participate-now.html.

**What will be done with the results?**

The research team will provide a confidential summary report to the primary respondent at the school. This will include a summary of the responses of your school compared to aggregated data of all participating schools within your discipline. The summary report may be used to further engage in self-analysis and reflection of their baseline performance to establish performance-improving changes.

**How will the confidentiality of my answers be protected?**

Your responses will only be shared with the study team. You will NOT receive any information on the responses of other schools, and no other schools will receive information on the responses of your school. No information on a particular school’s standing will be shared or published without explicit consent from that school.

**Who should answer these questions?**

We’ve sent this survey to you as someone who has insight into your school’s programs and is in a position to request data from various internal sources. We don’t expect that you’ll have all the answers at your fingertips, so we encourage you to look at databases at your institution and to consult with people in other departments or units who might have some of the information requested. You may delegate a primary respondent other than yourself to take responsibility for aggregating the required information.

In field tests of the survey, the following departments were typically consulted by the primary participant:

- Academic Affairs
- Curricular/Educational Affairs
- Student Affairs
What if I have multiple degree programs in my school? How should I answer these questions?

We invite you to focus on the baccalaureate level programs at your school when completing this questionnaire since it is specifically designed for bachelor’s level programs. Please contact Julie Orban (juliela@gwu.edu) if you would prefer to complete the master’s questionnaire instead. This survey is designed for either bachelor’s or master’s level programs. If you wish to continue, please select Bachelor’s Degree in Nursing in question A2 and answer the proceeding questions based on your selection. Many questions will be relevant to the School of Nursing as a whole, and you should answer those questions about your school. Some questions, such as those about curriculum or graduation rates should be answered based on the specific degree program you have chosen. Throughout the survey, we have used the term “school” when the question should be answered based on the school as a whole, and the term “program” when the question should be answered based on the program you have chosen.

What if I don’t know the answer?

Please select the answer choice “Don’t Know/Information Not Available” or leave the question blank if the “Don’t Know” option is not there.

What if I don’t wish to share an answer?

Participation is voluntary and for your own self-reflection, so we encourage schools to answer all questions if possible. If there is any requested information that you or your school does not wish to share, please leave the item blank or note that you decline to answer that item. If you are willing, we would be interested in understanding why you may not be interested in sharing the information as it will assist us in better refining the questionnaire.

How will participating be beneficial?

Your participation will help examine 1) the status of your school’s social mission activities; 2) current strengths and areas for improvement in these activities; and 3) your school’s proficiency in social mission in comparison to similar schools. In addition to the confidential summary report, the data from the self-assessment will enable the research team to further develop performance measures in the field of social mission.

Who is sponsoring this study?

This project is funded by a research grant from the Robert Wood Johnson Foundation.

What if I do not understand a term?

Text boxes throughout the document define phrases used in the study, and there is a glossary at the end included for reference. If there are other questions or terms you do not understand, please email Julie Orban (juliela@gwu.edu) for further clarification.
A. Curricular courses and programs

A1. Does your school offer the following degrees? Please circle a response for each type of degree.

<table>
<thead>
<tr>
<th>Do you offer any of these types of degrees . . .</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Associate’s Degree in Nursing</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>b. Bachelor’s Degree in Nursing</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>c. Master’s Degree in Nursing</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>d. Doctorate of Nursing Practice</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>e. Doctor of Philosophy</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>

A2. Which of the following degree programs would you like to base your answers on?
1. Bachelor’s Degree in Nursing
2. Master’s Degree in Nursing

A3. Does your program have required inter-professional education for all students?
1. Yes
2. No
9. Don’t know

A3a. IF YES: In which settings do students receive inter-professional education experiences?
1. In clinical settings only
2. In classroom/simulation settings only
3. In both clinical and classroom/simulation settings
9. Don’t know

A4. Does your program offer clinical rotations or courses where your students interact with patients from underserved communities?
1. Yes
2. No
9. Don’t know

IF YES: Please answer A4a-A4c:
A4a. Are these clinical rotations or courses required of students?
1. Yes, required of all our students
2. Yes, required of certain students
3. No
A4b. **IF EXPERIENCES ARE NOT REQUIRED:** About how many of your students participate in these clinical rotations or courses over the course of their education

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
9. Don’t know

A4c. Are any of these clinical rotations or courses longitudinal i.e. clinical engagements over a prolonged period of time (at least four weeks of student time in the period of a year)?

1. Yes
2. No
9. Don’t know

---

**Definition: Social Determinants of Health** are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.¹

---

A5. Does your program explicitly teach students about social determinants of health in your curriculum?

1. Yes, in required courses
2. Yes, in elective courses
3. No

A5a. IF YES: Is this content integrated across multiple years of study?

1. Yes, across all years of study
2. Yes, across multiple years of study
3. No

---

Definition: Health disparities are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.2

A6. Does your program explicitly teach students about health disparities in your curriculum?
1 Yes, in required courses
2 Yes, in elective courses
3 No

A6a. If YES: Is this content integrated across multiple years of study?
1 Yes, across all years of study
2 Yes, across multiple years of study
3 No

Definition: LGBTQ is an acronym for lesbian, gay, bisexual, transgender, and queer.3
We understand that terminology and acronyms continue to evolve. Please use whatever terminology your school finds most appropriate.

A7. Does your program have specific curricular content focused on LGBTQ health?
1 Yes, in required courses
2 Yes, in elective courses
3 No

A7a. If YES: Is this content integrated across multiple years of study?
1 Yes, across all years of study
2 Yes, across multiple years of study
3 No

B. Extracurricular and service learning opportunities

B1. Does your program have a service-learning or volunteer hours requirement for graduation?
1. Yes, required of all students
2. Yes, required of some students
3. No

B1a. **IF EXPERIENCES ARE NOT REQUIRED FOR ALL STUDENTS:** About how many of your students participate in service-learning or volunteer opportunities during the course of their education?
1. All or nearly all (approximately 91% or more)
2. Most (51-90%)
3. Some (11-50%)
4. Just a few (10% or less)
5. Don’t know

B1b. **IF EXPERIENCES ARE REQUIRED:** What is the total time commitment required?
1. No specific time commitment
2. 1-10 hours
3. 11-30 hours
4. 31-50 hours
5. > 50 hours

B2. Other than student-run health clinics, does your program offer its students extracurricular activities directly related to reduction of health disparities or addressing social determinants of health?
1. Yes
2. No
3. Don’t know

B2a. **IF YES:** About how many of your students participate in these experiences during the course of their education?
1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
6. Don’t know
C. Targeted education programs

C1. Does your institution or school offer a certification or degree in Public Health?
   1. Yes
   2. No
   9. Don’t know

C1a. **IF YES:** Approximately what percentage of your nursing students over the last four graduating classes have completed the Public Health certification or degree option?
   1. All or nearly all (91% or more)
   2. Most (51-90%)
   3. Some (10-50%)
   4. Just a few (less than 10%)
   5. None
   9. Don’t know

C2. Does your institution or school offer specific education programs that train students to enter the following health careers?

<table>
<thead>
<tr>
<th>Do you offer a program that trains students to become . . .</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Community Health Workers</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>b. Nurse’s Aides</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>
D. Global health

D1. Does your school have a formal partnership with an institution in a low or middle income country?
1 Yes
2 No
9 Don’t know

D1a. IF YES: Does your school facilitate students from low or middle income countries to train or study at your institution?
1 Yes
2 No
9 Don’t know

D2. Does your program offer global health rotations in low or middle income countries?
1 Yes
2 No
9 Don’t know

IF YES: Please answer D2a-D2b:

D2a. About how many of your students participate in these experiences?
1 All or nearly all (91% or more)
2 Most (51-90%)
3 Some (10-50%)
4 Just a few (less than 10%)
9 Don’t know

D2b. What is the average duration of the experience?
1 < 2 weeks
2 2-4 weeks
3 > 4 weeks
E. Statements related to your school’s mission

**Definition: Community of commitment** is the term we are using to indicate a medically or socially underserved community – this could be an underserved geographic area (local or regional), demographic group, or category of patient that your school has explicitly targeted as a focus for your work.

E1. Does your school have a written mission statement? *Please circle a number.*

1. Yes
2. No

E1a. **IF YES:** Does your school’s mission statement specifically mention any of the following terms *(select all that apply):*

- [ ] Social determinants of health
- [ ] Underserved/underrepresented/disadvantaged populations
- [ ] Health equity or health disparities

E1b. **IF YES:** Does your school’s mission statement identify a specific “community of commitment” as defined above? If you’re not sure, please send us your mission statement or give us the Web address (URL) where we can locate it and we will attempt to make a determination.

1. Yes
2. No
9. *Don’t know*

**URL:**

E1c. **IF YES:** Please specify your school’s community or communities of commitment:

---

E2. Does your school have a current strategic plan?

1. Yes
2. No
E2a. **IF YES:** Does your school’s strategic plan specifically mention any of the following terms (select all that apply):

- [ ] Social determinants of health
- [ ] Underserved/underrepresented/disadvantaged populations
- [ ] Health equity or health disparities

E2b. **IF YES:** Does your strategic plan identify a specific “community of commitment” as defined above? If you’re not sure, please send us your strategic plan and we will attempt to make a determination.

1. Yes
2. No
9. Don’t know

E2c. **IF YES:** Please specify your school’s community or communities of commitment:
F. Concordance of curriculum with community needs

**Definition:** A Community health needs assessment (sometimes called a CHNA), refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.¹

F1. Has your school, or a hospital with which it is closely affiliated, conducted a formal or informal Community Health Needs Assessment in the past five years?

1. Yes, formal
2. Yes, informal
3. Neither
9. Don’t know

F1a. **IF YES:** To what extent has the design of your school’s curriculum been explicitly informed by the results of the Community Health Needs Assessment?

1. Substantially
2. Moderately
3. Slightly
4. Not at all
9. Don’t know

G. Community collaborations

G1. Do your students participate in clinics, offices, or programs that are located outside of your main campus and based in the local community or in your communities of commitment?
   1. Yes
   2. No
   9. Don’t know
   10. Not applicable

G1a. IF YES: Does your school provide any compensation for time devoted by faculty or staff to the activities in these off-campus, community locations?
       1. Yes
       2. No
       9. Don’t know

G1b. Is there a formal or informal channel for feedback from the community to the school about the value and effectiveness of these programs?
       1. Yes
       2. No
       9. Don’t know

G2. Does your school have formalized or otherwise well-developed collaborations with any of the following? Please circle a number for each type.

<table>
<thead>
<tr>
<th>Type of collaboration</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know/Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Collaborations with legal professionals</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>b. Collaborations with churches, temples or other faith-based organizations</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>c. Collaborations, practice arrangements, or clinical teaching arrangements with a local Federally Qualified Health Center (FQHC)</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>d. Collaborations with local K-12 schools</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>e. Collaborations with local community colleges</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>f. Collaboration with your local government’s health department</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>g. Collaboration with philanthropic organizations</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
</tbody>
</table>
H. Student diversity

**Definition: Holistic review** is a university admissions strategy that assesses an applicant’s unique experiences alongside traditional measures of academic achievement such as grades and test scores. It is designed to help universities consider a broad range of factors reflecting the applicant’s academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic Review has been described by the Supreme Court as a highly individualized review of each applicant’s file, giving serious consideration to all the ways an applicant might contribute to a diverse educational environment.

H1. Does your school’s or program’s admission policy include principles of holistic review of applicants?

1. Yes, as a matter of written policy
2. Yes, as a matter of informal practice
3. No
4. Don’t know

H2. What is the total number of students currently enrolled in your degree program?

*Total number of students: ______*

---


H3. Please fill in a percentage breakdown of the racial and ethnic composition of your current student body in the table below. Please include all full-time students currently enrolled in your primary degree program. (Note: This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros in blanks.)

<table>
<thead>
<tr>
<th>Percent of your full-time students who identify as:*</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>____%</td>
</tr>
<tr>
<td>i. International student (Nonresident alien)</td>
<td>____%</td>
</tr>
<tr>
<td>Total (should total to 100%)</td>
<td>____%</td>
</tr>
</tbody>
</table>

*The categories in this table are based on those that schools report to the U.S. Dept. of Education

H4. What is the average graduation rate for students enrolled in your primary degree program over the past 5 cohorts? Note: If you do not have data over the past 5 cohorts, use whatever time frame you have available to calculate the average rate. You will be asked to specify the time frame below.

Overall graduation rate: _______%

This rate is calculated or estimated over the past _____ years.

This rate represents the percentage of students who graduated within _____ years.
H5. What is the average graduation rate for students by race/ethnicity enrolled in your primary degree program over the past 5 cohorts? Note: These rates should be calculated over the same time period as the question above. These numbers should NOT add up to 100%. For example: If you are using a time period of 5 years, and your last 5 classes included 10 self-identified white students, 9 of whom graduated, your answer should be 90%.

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Graduation Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaskan Native</td>
<td>_____%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>_____%</td>
</tr>
<tr>
<td>Black</td>
<td>_____%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>_____%</td>
</tr>
<tr>
<td>White</td>
<td>_____%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>_____%</td>
</tr>
<tr>
<td>Race Not Reported</td>
<td>_____%</td>
</tr>
</tbody>
</table>

This rate is calculated or estimated over the past ______ years.
This rate represents the percentage of students who graduated within ______ years.

H6. Approximately what percentage of your students in your primary degree program are from the community of commitment referred to in section E?

Percent of students: _____%
☐ Information not available

H7. What percentage of students in your primary degree program are from families where neither parent finished college?

Percent of students who were first-generation college students: _____%
☐ Information not available

H7a. Considering only first generation college students in your primary degree program, what is their average graduation rate? Note: This rate should be calculated over the same time period as the questions above.

Graduation rate for first-generation college students: _____%
☐ Information not available

H8. Please consider all the scholarship and grant dollars awarded by your school or program in the last academic year. What percentage of the scholarship and grant dollars were awarded based on financial need? (Do not count student loans or student wages.)

Percent of scholarship and grant dollars that are need-based: _____%
☐ Information not available
Since definitions and abbreviations are evolving, we may have omitted some letters from the LGBTQ abbreviation. Please apply your schools practice to the next section as you feel appropriate.

**H9. Does your school or program collect information from each student on his or her self-reported sexual orientation and/or preferred gender identity?**

1. Yes
2. No

**H9a. IF YES: What percentage of students in your primary degree program self-identify as LGBTQ?**

- Percent of students identifying as LGBTQ: _____%
  - Information not available

**J. Faculty diversity**

The following questions ask about the composition of your faculty. Please include all full-time faculty members in your school, regardless of rank or tenure status. Faculty members on joint appointments with other schools should be included if the appointment in your school is considered to be their primary appointment. Adjunct faculty should be included if their work commitment to the school is considered to be full-time.

**J1. What is the total number of full-time faculty at your school?**

*Total number of full-time faculty: _____*
J2. Please fill in a percentage breakdown of the racial and ethnic composition of your school’s full-time faculty in the table below. (This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros in blanks.)

- Information not available

<table>
<thead>
<tr>
<th>Percent of your school’s full-time faculty who identify as:</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>_____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>_____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>_____%</td>
</tr>
<tr>
<td>i. International employee (Nonresident alien)</td>
<td>_____%</td>
</tr>
<tr>
<td>Total (should total to 100%)</td>
<td>_____%</td>
</tr>
</tbody>
</table>

*The categories in this table are based on those that schools report to the U.S. Dept. of Education

J3. What percentage of your full-time faculty members are women?

Percent of women among all full-time faculty: _____%

J4. Does your full-time faculty team include one or more members who openly identify themselves as members of the LGBTQ community?

1  None
2  1-2
3  3-4
4  5-9
5  10 or more
9  Don’t know
The next questions are about the people in academic leadership positions in your school. Please include members of the faculty who hold decanal positions (e.g. dean, assistant/associate dean), provost, department chair, division head, or the equivalent positions at your school. Do not include non-faculty administrators.

**J5. What is the total number of academic leadership members at your school?**

Total number of faculty in academic leadership: _____

**J6. Please fill in a percentage breakdown of the racial and ethnic composition of your school’s academic leadership in the table below.**

(This should be self-reported race and ethnicity data that is on file with your school. Please enter zeros for blanks.)

- Information not available

<table>
<thead>
<tr>
<th>Percent of your school’s academic leadership who identify as:</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Hispanic or Latino</td>
<td>_____%</td>
</tr>
<tr>
<td>b. American Indian or Alaskan Native (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>c. Asian (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>d. Black or African American (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>e. Native Hawaiian or Other Pacific Islander</td>
<td>_____%</td>
</tr>
<tr>
<td>f. White (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>g. Two or more races (not Hispanic)</td>
<td>_____%</td>
</tr>
<tr>
<td>h. Race/ethnicity not reported/not known</td>
<td>_____%</td>
</tr>
<tr>
<td>i. International employee (Nonresident alien)</td>
<td>_____%</td>
</tr>
</tbody>
</table>

Total (should total to 100%) _____%

*The categories in this table are based on those that schools report to the U.S. Dept. of Education*

**J7. What percentage of your academic leadership members are women?**

Percent of women among academic leadership: _____%
J8. Does your academic leadership team include any member who openly identify themselves as members of the LGBTQ community?

1. Yes
2. No
3. Don’t know

K. Pipeline programs

K1. Is your school sponsoring, running or assisting with any pipeline programs targeted to K-12 students and aimed at encouraging them to train for careers in the health professions?

1. Yes
2. No
3. Don’t know

IF YES: Please answer K1a-K1c:

K1a. Other than one-time contacts with students, what is the number of K-12 students who participate in your pipeline programs each year?

Number of K-12 students impacted annually: ____

K1b. Of the answer you gave in K1a, approximately what percentage of these students are from underrepresented racial/ethnic minority groups?

Percent of participating K-12 students who are minorities: ____%

K1c. Of the answer you gave in K1a, approximately what percentage of these students are in the free or reduced lunch program?

Percent of participating K-12 students who are on free or reduced lunch: ____%

K2. Is your school sponsoring, running or assisting with any pipeline programs targeted to undergraduate college students and aimed at encouraging them to train for careers in the health professions?

1. Yes
2. No
3. Don’t know
IF YES: Please answer K2a-K2d:

K2a. Other than one-time contacts with students, what is the number of undergraduate students who participate in your pipeline programs each year?

Number of undergraduate students impacted annually: 

K2b. Approximately what percentage of the participating students are from underrepresented racial/ethnic minority groups?

Percent of participating undergraduate students who are minorities: 

K2c. Approximately what percentage of the participating students are the first in their family to go to college?

Percent of participating students who are first-generation college students: 

K2d. Approximately what percentage of the participating students ultimately enter education for one of the health professions? (Note: Do not include students enrolled in pre-matriculation who have already been admitted to a health professions school.)

Percent of participating students who enter health profession education: 

L. Training for a culture of inclusion

L1. How many of your current full-time faculty have taken any of the following types of training?

<table>
<thead>
<tr>
<th>Training in . . .</th>
<th>All or nearly all (91% or more)</th>
<th>Most (51-90%)</th>
<th>Some (10-50%)</th>
<th>Just a few (less than 10%)</th>
<th>Not Offered</th>
<th>Don’t Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Unconscious/implicit bias awareness</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>b. Cultural competency or cultural humility</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>c. Advocacy on issues related to health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>d. Social determinants of health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>

L2. How many of your current students have taken any of the following types of training?

<table>
<thead>
<tr>
<th>Training in . . .</th>
<th>All or nearly all (91% or more)</th>
<th>Most (51-90%)</th>
<th>Some (10-50%)</th>
<th>Just a few (less than 10%)</th>
<th>Not Offered</th>
<th>Don’t Know</th>
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</thead>
<tbody>
<tr>
<td>a. Unconscious/implicit bias awareness</td>
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<td>9</td>
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<tr>
<td>b. Cultural competency or cultural humility</td>
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<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
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<tr>
<td>c. Advocacy on issues related to health</td>
<td>1</td>
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<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>d. Social determinants of health</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
</tr>
</tbody>
</table>
M. Student-Run health clinics

**Definition:** Student-run health clinics are community clinics where students (with faculty supervision) provide health care services at no cost or low cost to underserved populations.

M1. In the past three years, have your students worked in any student-run health clinics?

1. Yes
2. No
9. Don’t know

M1a. IF YES: About how many of your students volunteer at your student-run health clinics?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None

M1b. IF YES: About how many of your faculty or staff members actively give time to your student-run health clinics?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None

M1c. IF YES: Does your school provide compensation for any of the time that faculty or staff devote to your student-run health clinics?

1. Yes
2. No
9. Don’t know
N. Student activism

N1. Other than time given to student-run health clinics, about how many of your students are actively involved in community-based programs or organizations that address health disparities or social determinants of health?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
6. Don’t know

N2. Does your school provide any regular financial support for community-oriented student activities outside of the curriculum (not including student-run health clinics)?

1. Yes
2. No
3. Don’t know

N3. Consider your students who are from under-represented groups in the health professions. About how many of these students are active in minority professional associations and societies?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
6. Don’t know
P. Faculty activism

P1. Other than time given to student-run health clinics, about how many of your faculty are actively involved in community-based programs or organizations that address health or issues related to health?

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
6. Don’t know

P2. About how many of your faculty members are actively involved in advocating for change in issues related to health or its social determinants? (Include regional, state, national or international advocacy organizations.)

1. All or nearly all (91% or more)
2. Most (51-90%)
3. Some (10-50%)
4. Just a few (less than 10%)
5. None
6. Don’t know

P3. Does your school recognize or reward faculty participation in the activities in N1 or N2?

1. Yes
2. No
3. Don’t know

P3a. IF YES: How does your school recognize or reward faculty?

1. Promotion criteria explicitly recognize these contributions
2. Awards for community activities or advocacy
3. Compensation/pay raise
4. Other _____

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Q. Emphasis on practice location of graduates

Q1. How would you rate your school’s amount of encouragement or discouragement for students to enter primary care or general community-based practice?

1. A great deal of encouragement
2. Some encouragement
3. A little encouragement
4. Neither encourage or discourage
5. A little discouragement
6. Some discouragement
7. A great deal of discouragement

Q2. Approximately what percentage of your primary degree program graduates practice in community health centers, including Federally Qualified Health Centers (FQHCs)?

Percent of graduates: _____%
☐ Information not available

Q3. Approximately what percentage of your primary degree program graduates typically enter public health nursing or primarily work with underserved populations?

Percent of graduates who enter public health nursing or work with underserved populations: _____%
☐ Information not available
R. Community needs and social mission in your school’s research

Definitions: Community based participatory research is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities.\(^7\)

Community engaged research is a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community of focus.\(^8\)

Health equity research is research that examines strategies, programs or circumstances that tend to reduce health disparities and achieve optimal health for all.\(^9\)

Health disparity research includes basic, clinical and social sciences studies that focus on identifying, understanding, preventing, diagnosing, and treating health conditions such as diseases, disorders, and other conditions that are unique to, more serious, or more prevalent in subpopulations in socioeconomically disadvantaged (i.e., low education level, live in poverty) and medically underserved, rural, and urban communities.\(^10\)

Health promotion research is research that promotes the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.\(^11\)

Disease prevention research is research designed to yield results directly applicable to identifying and assessing risk, and to developing interventions for preventing or ameliorating the occurrence of a disease or the progression of detectable but asymptomatic disease.\(^12\)


R1. For each of the following types of research, please tell us the number of research projects that your school or program have been involved in during the past three years. If appropriate, you may count a given project under more than one applicable type of research. Please circle a response for each type of research.

<table>
<thead>
<tr>
<th>How many of these projects in the last 3 years?</th>
<th>None</th>
<th>One</th>
<th>2 or 3</th>
<th>4 to 9</th>
<th>10 or more</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Community engaged research (including community based participatory research)</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>b. Health equity or health disparity research</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>c. Health promotion or disease prevention research</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>d. Research into social determinants of health</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
<tr>
<td>e. Health or research needs assessment in your school’s local community or communities of commitment</td>
<td>0</td>
<td>1</td>
<td>2-3</td>
<td>4-9</td>
<td>10+</td>
<td>9</td>
</tr>
</tbody>
</table>

R2. Approximately what percentage of your school’s total research portfolio is focused on research in all of the above categories combined (community engaged research, health equity/disparity research, health promotion/disease prevention research, social determinants of health, community health needs assessment)

1 0-10%
2 11-25%
3 26-50%
4 > 50%

R3. To what extent has the development of your school’s research program been explicitly informed by the results of your school or hospital’s Community Health Needs Assessment or other ongoing mechanisms designed to monitor and respond to community health priorities?

1 Substantially
2 Moderately
3 Slightly
4 Not at all
9 Don’t know
10 Our school doesn’t have a Community Health Needs Assessment
THANK YOU for sharing so much information about your school’s programs and efforts to advance the social mission in health professions education. Your responses are invaluable to our research and our efforts to advance these areas in the education of our nation’s health professionals.

We would like to hear more from you about what your school is doing in the area of social mission. Please take a moment to answer the following question:

**S. Your school’s social mission activities**

S1. What projects or ideas is your school working on in the next 3 years that is related to social mission?

Thanks again for completing our questionnaire.
GLOSSARY

Community based participatory research is a collaborative approach to research that equitably involves all partners in the research process and recognizes the unique strengths that each brings. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action and achieving social change to improve health outcomes and eliminate health disparities.

Community engaged research is a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community of focus.

Community health needs assessment (sometimes called a CHNA), refers to a state, tribal, local, or territorial health assessment that identifies key health needs and issues through systematic, comprehensive data collection and analysis.

Community of commitment is the term we are using to indicate a medically or socially underserved community – a health disparity community – that could be a geographic area (local or regional), demographic group, or category of patient that your school has explicitly targeted as a focus for your work.

Disease prevention research is research designed to yield results directly applicable to identifying and assessing risk, and to developing interventions for preventing or ameliorating the occurrence of a disease or the progression of detectable but asymptomatic disease.

Health equity research is research that aims to eliminate health disparities and achieve optimal health for all.

Health disparities are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.

Health disparity research includes basic, clinical and social sciences studies that focus on identifying, understanding, preventing, diagnosing, and treating health conditions such as diseases, disorders, and other conditions that are unique to, more serious, or more prevalent in subpopulations in socioeconomically disadvantaged (i.e., low education level, live in poverty) and medically underserved, rural, and urban communities.

Health promotion research is research that promotes the process of enabling people to increase control over, and to improve, their health. It moves beyond a focus on individual behavior towards a wide range of social and environmental interventions.

Holistic review is a university admissions strategy that assesses an applicant’s unique experiences alongside traditional measures of academic achievement such as grades and test scores. It is designed to help universities consider a broad range of factors reflecting the applicant’s academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic Review has been described by
the Supreme Court as a highly individualized review of each applicant’s file, giving serious consideration to all the ways an applicant might contribute to a diverse educational environment.

**LGBTQ** is an acronym for lesbian, gay, bisexual, transgender, and queer.

**Social determinants of health** are the complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors.

**Student-run health clinics** are community clinics where students (with faculty supervision) provide health care services at no cost or low-cost to underserved populations.