

The logo for Kansas State University, featuring the text "KANSAS STATE" in a large, bold, serif font above a horizontal line, and "UNIVERSITY." in a smaller, spaced-out, serif font below the line. The entire logo is set against a dark purple rectangular background.

KANSAS STATE
UNIVERSITY.

Physician Assistants & Advocacy: Cultivating Community

Rana Johnson, PhD
Vice President for Diversity, Equity, Inclusion and Belonging

AGENDA



- Next Gen K-State Strategic Plan
- Foundational Definitions
- Diversity, Equity, Inclusion and Belonging Team
- Unconscious Bias
- Communication
- Recommendations
- Self-Care

NEXT-GEN K-STATE



President Richard Linton launched a new strategic plan: *Next-Gen K-State*.

Kansas State University will lead the nation as a next-generation land-grant university – setting the standard for inspiring learning, creativity, discovery and engagement that positively impacts society and transforms lives in Kansas and around the world.



OUR PLAN

Leveraging our rich history as the nation's first operational land-grant university, we will positively impact our communities, our economy and the world through teaching, research and service.



STRATEGIC IMPERATIVES

The Next Gen K-State Strategic Plan includes 10 imperatives to assist Kansas State University with meeting the goals across all campuses: Manhattan, Olathe, and Salina.

We envision a learning population of 30,000

We will grow our first-year retention rate to 92%, our four-year graduation rate to 55% and our six-year graduation rate to 75%

Every degree-seeking student will receive applied learning experiences

Our research enterprise and annual research expenditures will grow to \$300 million and our sponsored programs and awards to \$270 million

We will nimbly and proactively meet the needs of learners, employers and society.



STRATEGIC IMPERATIVES

We will be known as a university that is open and aggressively pursues partnerships at all levels with a shared focus on making easy and seamless for partners to work with K-State.

We will be a positive force for Kansans — generating significant economic impact for the state of Kansas, contributing to the economic prosperity of all 105 counties....

We will become One K-State in all we do, supported by a culture that binds and connects us — prioritizing a mindset of operational excellence at all levels to move our university forward.

We will become an employer of choice in Kansas and higher education that prioritizes a culture of well-being, satisfaction and engagement, competitive rewards, recognition of excellence, opportunity, continuous improvement and innovation.

We will grow our total fundraising and philanthropic giving to new heights – with a target of raising a total of \$2 billion from FY21-22 to FY29-30, further amplifying our ability to serve and support our learners, scale our impact and fulfill our mission.

Office of Diversity, Equity, Inclusion and Belonging



Rana Johnson, PhD

Vice President for Diversity,
Equity, Inclusion and Belonging

Inclusive Excellence Focuses on institutional accountability to enhance diversity, equity, inclusion and belonging.

Institutional Equity Training, outreach, affirmative action planning, equal employment opportunity compliance and conducting investigations.



Corey Williamson

Associate Vice President for Diversity,
Equity, Inclusion and Belonging

Office of Civil Rights and Title IX

The Office of Institutional Equity is engaged in training, outreach, affirmative action planning, equal employment opportunity compliance and conducting investigations in accordance with [PPM 3010](#), laws, regulations, executive orders and other applicable policies that uphold equal opportunity and civil rights laws.



Justin Frederick
Director and Title IX
Coordinator



Eric Bicaba
Investigator



Derron Borders
Investigator



**Amber
Shumway**
Investigator



**Amanda
Ruthstrom**
Office Manager



Questions regarding discrimination, harassment, and sexual harassment.

If you have any other questions about the investigation or investigation process, please do not hesitate to contact the Office of Institutional Equity (OIE) at:
785-532-6220 | TRS 711 or equity@k-state.edu.

For more information, see [Title IX](#).

Resource: Office of the Ombudsperson



Dr. Kimathi Choma
Student Ombudsperson

KAWSE

KAWSE programs work to increase the participation, retention and advancement of girls and women in Science, Technology, Engineering and Math (STEM).



Dr. Chardie Baird
Executive Director
Spainhour Family Chair





Foundational Definitions

DIVERSITY is the presence and representation of differences that enrich the community and workplace. Differences include, but are not limited to identity, culture, background, abilities, opinions, and experiences.

EQUITY and equity-mindedness, is the action of ensuring access, resources, and opportunities through removing systemic barriers, particularly for historically underrepresented groups.

INCLUSION is the intentional action of valuing everyone, regardless of background, beliefs, or identities. This includes creating a culture and community where everyone, especially those from historically underrepresented groups, have access to resources, voices are heard, and contributions are valued.

BELONGING is the feeling individuals, particularly those from historically underrepresented groups who have experienced exclusion in the past, have in places that have intentionally actionized diversity, equity, and inclusion to create a culture that supports the feeling of security, acceptance, and value.

THE CASE FOR DEIB



The Office of Diversity, Equity, Inclusion and Belonging supports the mission and vision of the Next-Gen K-State Strategic Plan:

- To foster excellence in teaching, research and service
- To develop highly skilled & educated citizens necessary to advance the well-being of Kansas, the nation, and international communities to create pathways to higher education for all
- To cultivate a campus culture in which all feel a sense of belonging
- To encourage dialogue on thought provoking topics
- To support the university's core values

DIVERSITY INCLUDES:



- Atheist/Humanist
 - Body Types
 - Gender
 - Gender Expression
 - Gender Identity
 - Generation (baby boomers, x, y, z)
 - Homeless Community
 - Intellectual (various abilities)
 - International Community
 - Language Differences
 - Marital Status
 - Neurodiversity
 - Personality Type
 - Persons with a Disability
 - Physically Abused
 - Political Affiliation
 - Religious Affiliation
 - Sex
 - Sexual Orientation
 - Sexually Abused
 - Socioeconomic Status
 - Veteran Status
- ... as well as other communities/groups



INTERSECTIONALITY



INTER= Between/Among

SECTION= Distinct/Divided

ALITY= State or Condition



FOUR INTERRELATED PRINCIPLES

Equity: Equity is different than equality. If social justice was only concerned with equality, it wouldn't lead to a just society. Equity leads to a society with reduced inequalities.

Access: To serve the people, a healthy society must offer services and resources. These include education, healthcare, shelter, and food. However, in many societies, there's unequal access. Education is a prime example of the consequences.

Participation: Society must allow everyone to voice their concerns and take part in making decisions. If something affects a person's life, that person needs to be a part of the process. If there's only a select group making decisions, with others silenced through discrimination, that's social injustice. This is where access and equity come into play again.

Human Rights: For a society to be just, it must ensure the protection of everyone's civil, political, economic, cultural, and social rights. These rights include the right to life, the right to free speech, the right to vote, the right to a fair trial, and so on. Governments must be held accountable when they violate these rights or fail to protect them.



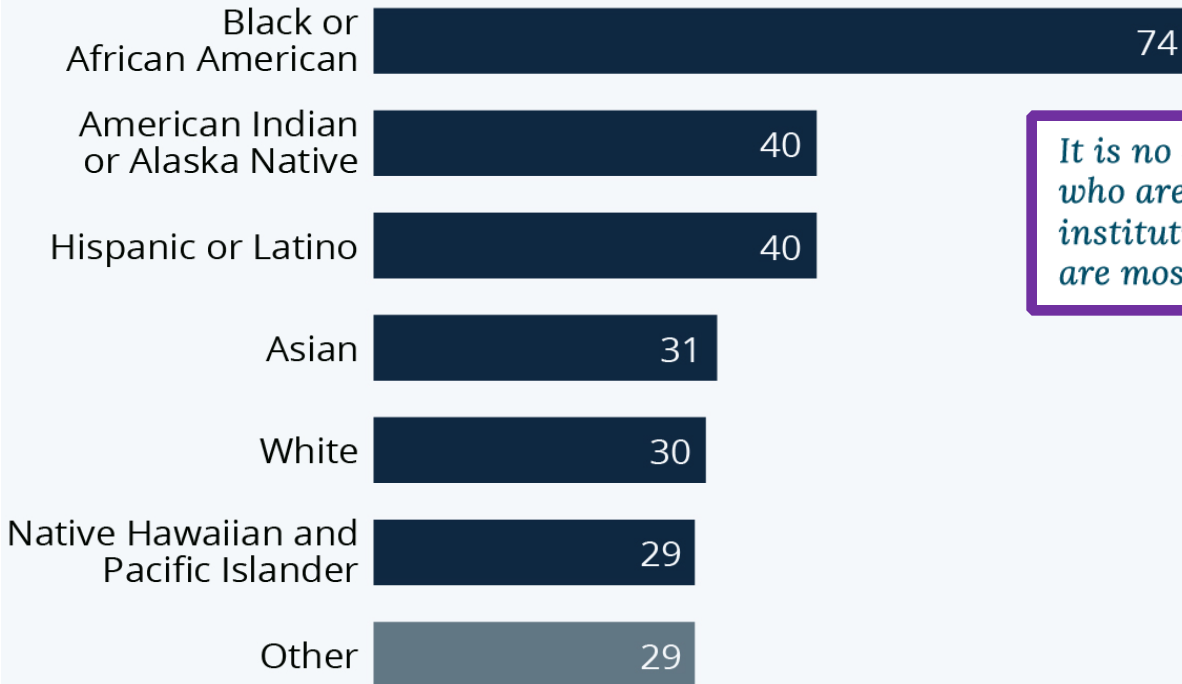
Biggest Social Justice Issues of 2024



- 1.Voting Rights
- 2.Climate Justice
- 3.Healthcare**
- 4.Refugee Crisis
- 5.Racial Injustice
- 6.Income Gap
- 7.Gun Violence
- 8.Hunger/Food Insecurity
- 9.Equality

The Pandemic's Racial Disparity

Covid-19 deaths per 100,000 people in the U.S.
by race or ethnicity (as of July 30, 2020)



It is no coincidence that the people who are most at risk of dying due to institutional racism are also those who are most at risk of COVID-19.

Source: The COVID Tracking Project



Three Keys to Improving Health Equity

Awareness

Increase awareness of inequity and the role of bias in health disparities, especially the extent to which these systematic processes harm health outcomes.

Measurement

Detect and measure healthcare disparities, and assess the causes and impact of health disparities on patient outcomes.

Action

Develop impactful interventions to address health disparities using data-driven approaches to improve outcomes and well-being.

www.arbormetrix.com

 ArborMetrix

Judgements or characteristics attributed to specific groups of people – races, genders, age groups, etc. – that may or may not be true for any one specific individual within that group.

STEREOTYPES

MICROAGGRESSIONS

IMPLICIT BIAS

Subtle verbal or nonverbal insults, indignities, or denigrating messages directed toward an individual due to their marginalized identity. Often committed by well-intentioned people who are unaware of the hidden messages conveyed or the impact of their statements.

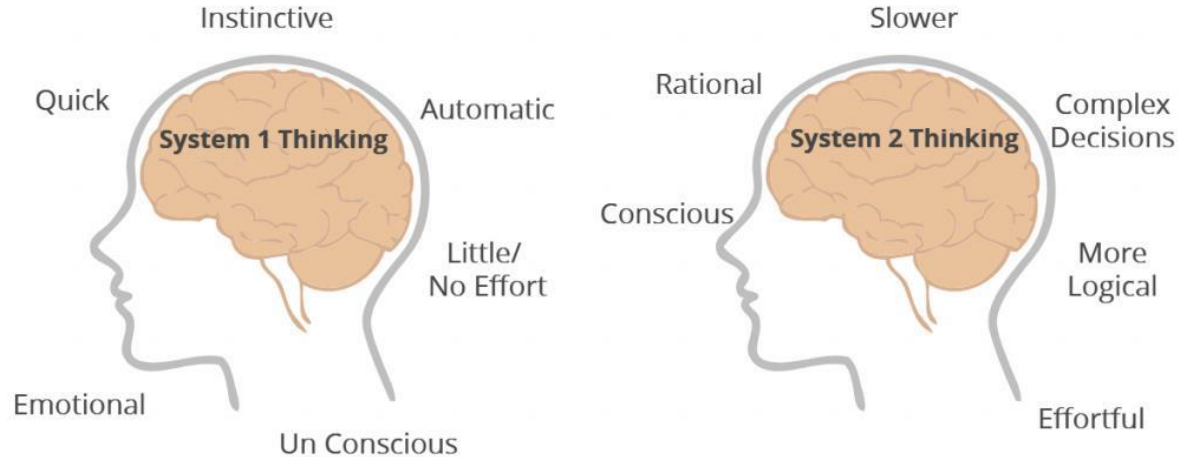
Subconscious attitudes, perceptions and stereotypes that influence our understanding, actions, and behavior when interacting with various identities.



Stereotypes Prejudice Unfair
Research Behavior Beliefs
Groups UNCONSCIOUS Subtle
Measure BIAS Implicit
Reaction Respect
Corporations Decisions Race
People Social Subconscious
Judgement Hidden Ethnicity
Cognition Preferences Gender

COMMONALITIES & PATTERNS

DANIEL KAHNEMAN'S SYSTEMS OF THINKING



Biases often arise as a result of trying to find patterns and navigate the stimuli our mind takes in. Culture, media, and upbringing also contribute to the development of biases.

Removing these biases is a challenge, especially because we don't know they exist, but research reveals potential interventions and provides hope that levels of implicit biases could decrease over time.

Source: <https://www.simplypsychology.org/implicit-bias.html>



STEREOTYPES ABOUT PAIN & RACE



PERSPECTIVE OF SOME DOCTORS/MEDICAL PROFESSIONALS INCLUDE:

- Certain groups feel pain less than whites.
- Certain patients do not comply with instructions about taking medicine.
- Some patients can not afford the medicine/treatment- no point in prescribing it.

PERSPECTIVE OF SOME DIVERSE PATIENTS:

- Pharmacists and doctors are disrespectful to me/my family.
- Medical personnel have been condescending to me/my family.
- No compassion or empathy from medical professionals.
- Inability to understand my background or what my life is like.
- There is no point in taking any medicine they prescribe.

SOURCE: Forbes. Racial Stereotypes Are Making Americans Sicker. July 27, 2019



STEREOTYPES

DISTRUST & HOSTILITY IN RELATIONSHIP DUE TO:

Structural Inequalities- Distance from hospital, limited/no health insurance, unable to take time off from work, etc. **Research has shown that healthcare providers hold onto certain stereotypes even when individuals don't fit common assumptions.**

Focus on Race/Ethnicity- One clinical research study showed that in almost all cases treating diverse patients, but only with half of traditional patients, medical staff mentioned patients' race. **When staff mentioned BIPOC patients negatively, they mentioned the color of all those patients, but only mentioned the traditional patients half of the time.**

Assignment of Negative Experience to All Racial Groups- If medical staff have a negative experience with a racial minority, they're more likely to make note of that person's race and remember it in their interactions with other people of the same group - less likely to note traditional patients' because that's common. **The rapid-fire, unconscious memory contributes to unconscious bias. Even when medical staff are unaware of the stereotypes they hold, these unconscious stereotypes affect the treatment they provide.**

MICROAGGRESSIONS

Brief and commonplace daily verbal, behavioral or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative slights and insults.” In contrast to overt racism, microaggressions are smaller, baked into daily conversation and often passed by without notice or bystander intervention.

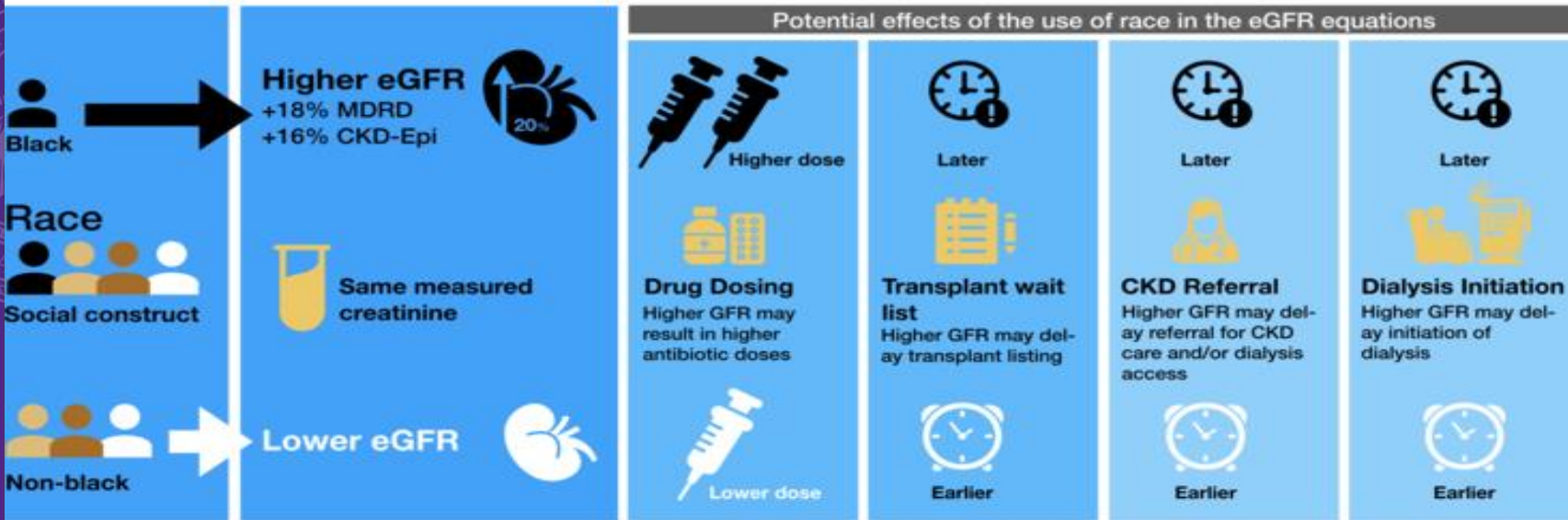


eGFRs ARE USED TO INFORM NUMEROUS CLINICAL DECISIONS:

- When to refer to nephrology
- Dosing of antibiotics and other medications
- When is it safe to use iodinated and gadolinium-based contrast agents
- When can patients be listed for a kidney transplant
- The timing of dialysis planning and initiation
- Inclusion in clinical trials

Do the current eGFR equations disadvantage the black patients?

Eneanya ND, Yang W, Reese PP. Reconsidering the Consequences of Using Race to Estimate Kidney Function. *JAMA* 322 Number 2, July 9, 2019.



Conclusions -The use of kidney function estimating equations that include race can cause problems with transparency and may unduly restrict access to care in some cases. The marginal improvement in accuracy may not justify use of this demographic variable.

Visual Abstract by Krithika Mohan (@Krithicism), NSMC Intern 2019

SOURCE: <http://www.nephjc.com/news/raceandegr>



EXAMPLE

	White	Black
Serum creatinine $\mu\text{mol/l}$ (mg/dL)	250 (2.8)	250 (2.8)
Age	55	55
Sex	F	F
Weight (kg)	80	80
Height (cm)	160	160
BSA (m^2)	1.89	1.89
Cockcroft-Gault (ml/min)	28	28
MDRD (ml/min/ 1.73m^2)	18	22
CKD-EPI (ml/min/ 1.73m^2)	18	21
CKD-EPI (de-indexed) (ml/min)	20	23

MICROAGGRESSIONS

There's Nothing 'Micro' About the Impact of Microaggressions

MICRO- Small, tiny, miniscule, little, invisible to the naked eye, microscopic

AGGRESSION- Hostile, belligerent, confrontational, quarrelsome, argumentative

A growing body of research indicates that microaggressions can seriously harm patient care by making important communication impossible and turning people off entirely from getting medical care.

Healthcare microaggressions refer to implicit discrimination within the healthcare setting, whereby treatment providers who are in positions of authority inadvertently marginalize members of diverse groups through culturally insensitive interactions.



MICROAGGRESSION RESEARCH

A study from the University of Washington's Surgical Outcomes Research Center found six common microaggressions reported in healthcare settings:

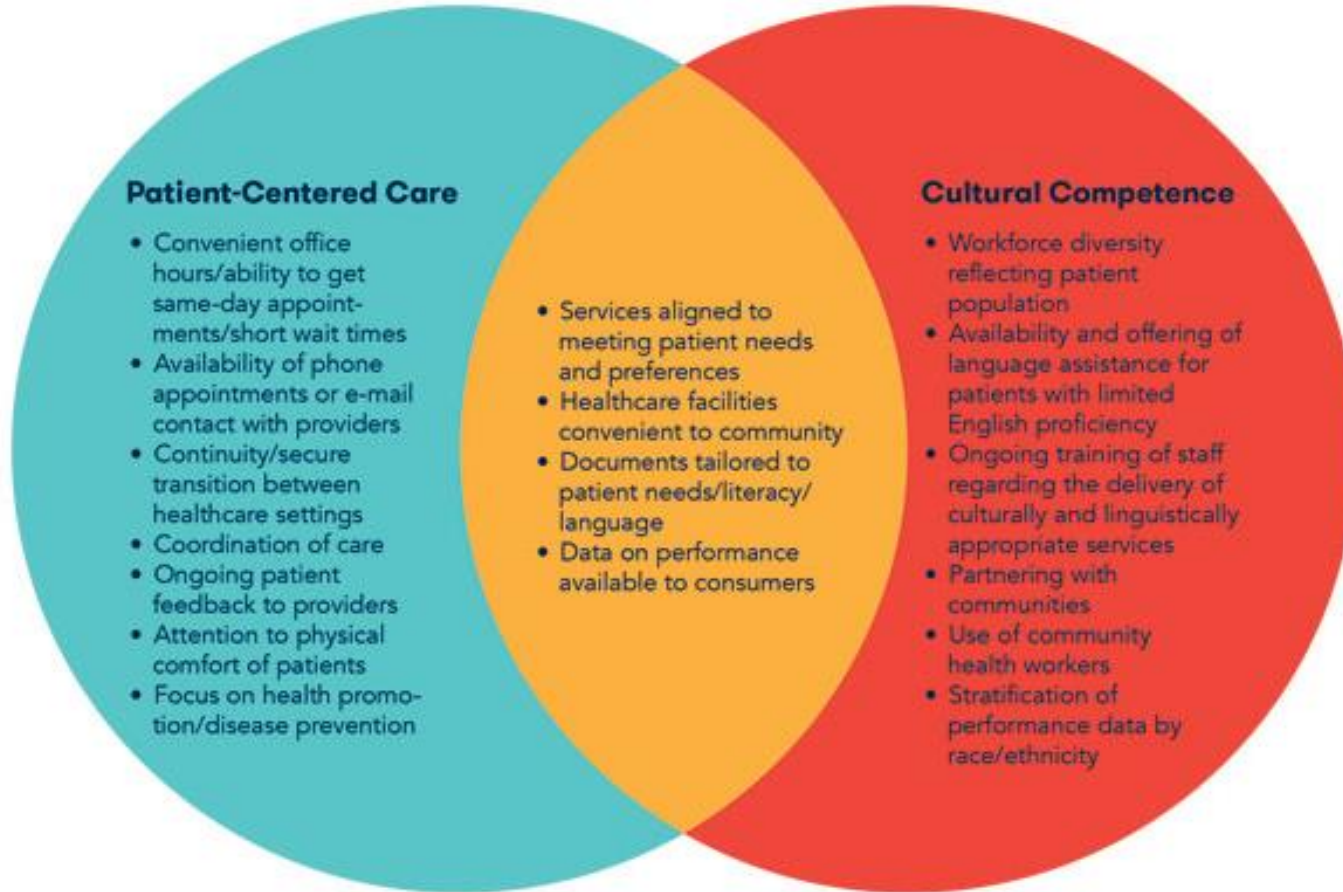
- Mistaken identity
- Mistaken relationships
- Fixed forms
- Entitled examiner
- Pervasive stereotypes
- Intersectionality

Research suggests that experiencing microaggressions leads to elevated levels of depression and trauma.

MICROAGGRESSION RESEARCH

- Of the 150 American Indian patients surveyed by the University of Minnesota, over 36 percent reported experiencing microaggressions in health clinics.
- A study from the University of Colorado Boulder finds that “clinicians’ implicit bias may jeopardize their clinical relationships with black patients, which could have negative effects on other care processes. As such, clinician bias may contribute to health disparities.”
- A 2014 study in the *American Journal of Preventive Medicine* found that racial microaggressions accelerate aging at the cellular level.
- In 2015, researchers from the University of Tennessee “found that microaggressions can trigger intrusive memories of traumatic racially related incidents. This supports that for some, microaggressions are experienced as traumatic events, which is of serious concern. Many of the same principles used to care for survivors of abusive trauma might be adapted to explore and intervene on effects of racial microaggressions, referred to as trauma-informed care.”

WHAT CAN HEALTH CARE PROVIDERS DO?



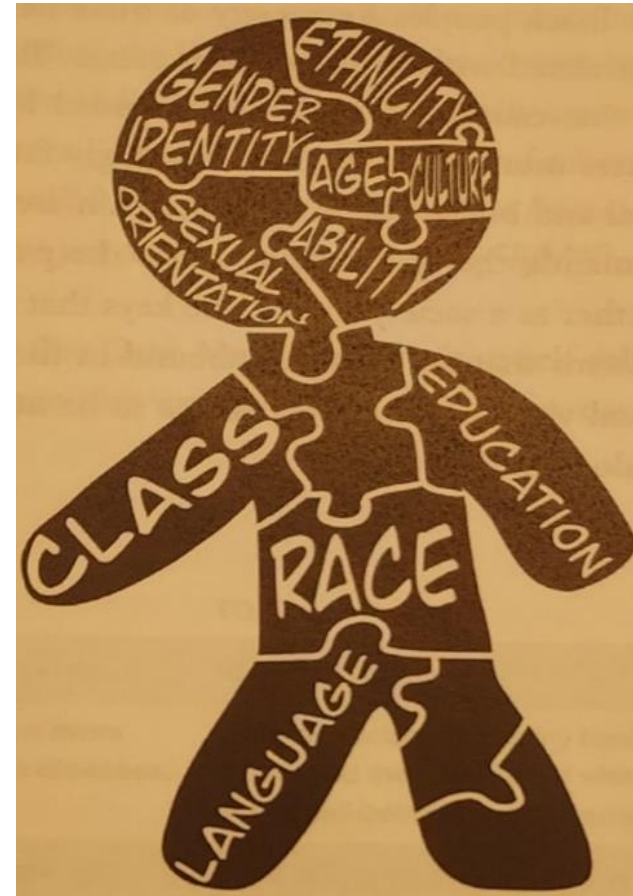
TAKE ACTION

The A.C.T.I.O.N. Method by Cheung, Ganote and Souza (2016) suggests that microaggressions be addressed in six steps:

1. **A**sk clarifying questions.
2. **C**arefully listen.
3. **T**ell others what you observed that was problematic.
4. **I**mpact consideration for yourself or potential others.
5. **O**wn your response.
6. **N**ext steps.

SOURCE: Cheung, F., Ganote, C. M., & Souza, T.J. (2016). Microaggressions and microresistance: Supporting and empowering students. In Faculty Focus Special Report: Diversity and Inclusion in the College Classroom. Magna Publication. <http://www.facultyfocus.com/free-reports/diversity-and-inclusion-in-the-college-classroom/>

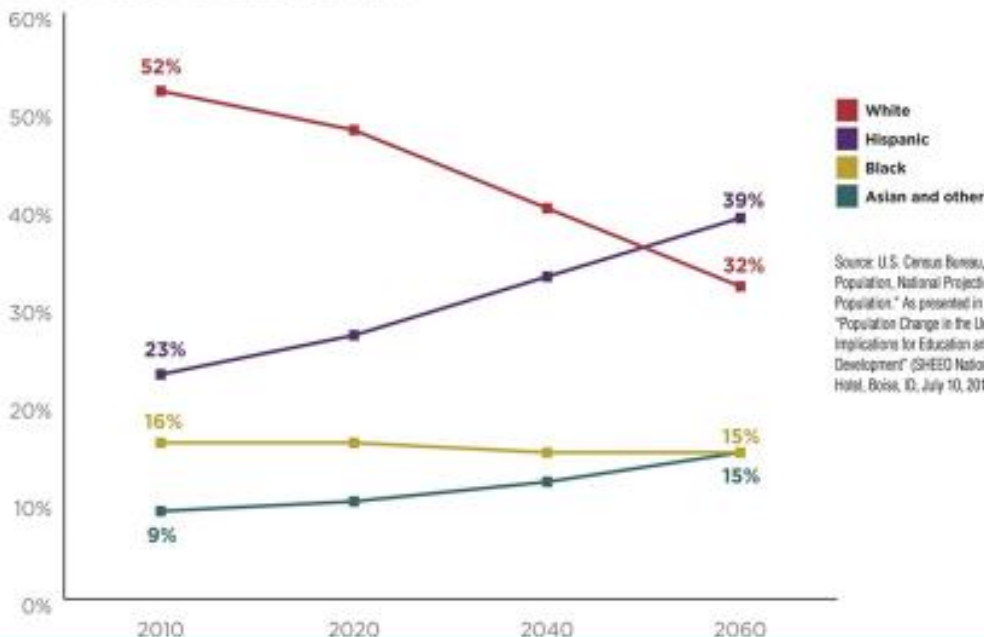
Changing Demographics



US Students Will Very Soon Be Majority Students of Color

Public elementary and secondary school enrollment, 2010–2060 (projected)

PERCENTAGE OF ENROLLED STUDENTS

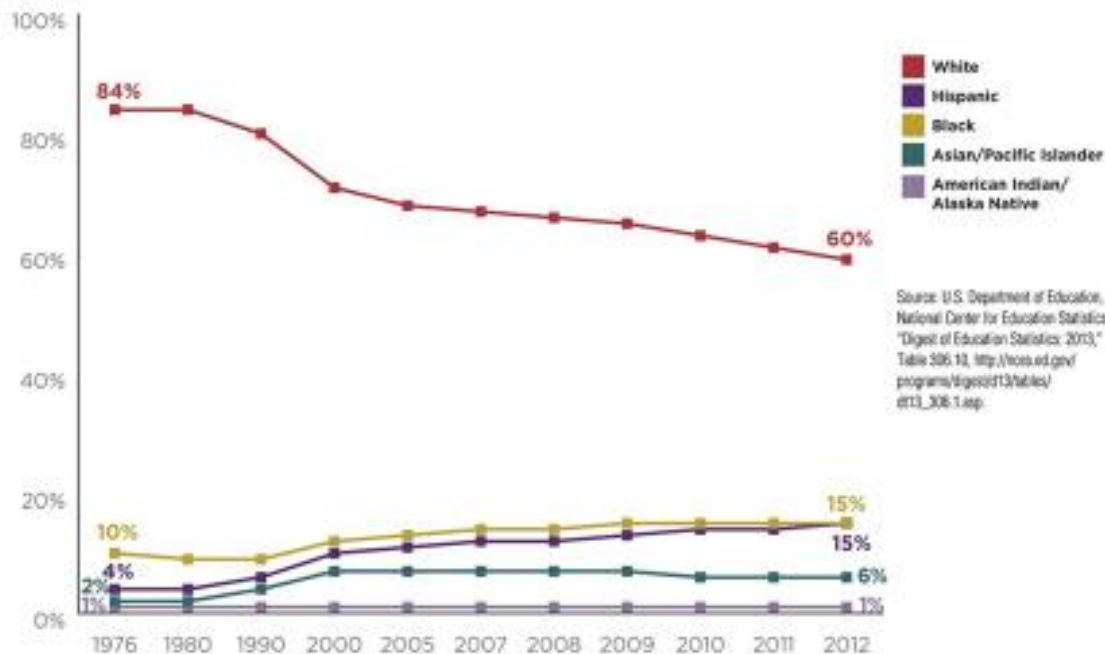


Source: U.S. Census Bureau, "2010 Census of the Population, National Projections, 2010-2060, Current Population." As presented in Steve Murdoch, "Population Change in the United States and Texas: Implications for Education and Socioeconomic Development" (SHED National Meeting, The Grove Hotel, Boise, ID, July 10, 2014).

The Face of Higher Education Is Changing

College enrollment trends

PERCENTAGE OF TOTAL FALL ENROLLMENT IN COLLEGE



LEAP



KANSAS STATE
UNIVERSITY



DO WE REALLY NEED TO DISCUSS IDENTITY?



GENDER

Gender Binary- Idea that there are only two genders and that every person is one of those two: Female/Male.

Gender Expression – The external display of one’s gender, through a combination of dress, demeanor, social behavior, and other factors, generally made sense of on scales of masculinity and femininity. Also referred to as “gender presentation.”

Gender Fluid– Identity described as a dynamic mix of boy/girl. Person may always feel like a mix of two traditional genders.

Gender Non-Conforming – Expression descriptor of a non-traditional gender presentation /outside of the gender binary.

Gender Normative/Gender Straight –Someone whose gender presentation whether by nature/choice, aligns with society’s expectations.

Genderqueer – Identity label used by people who do not identify with the binary of man/woman; non-binary identities (e.g., agender, bigender, genderfluid).

Gender Variant – Someone who either by nature or by choice does not conform to gender-based expectations of society (e.g. transgender, transsexual, intersex, gender-queer, cross-dresser, etc).

Transition /Transitioning – Term that refers to the process a person undergoes when changing their bodily appearance either to be more congruent with the gender/sex they feel or to be in harmony with their preferred gender expression.

When greeting others

Avoid:

ladies gentlemen ma'am sir girls guys etc.

Consider using instead:

“Thanks, **friends**.
Have a great
night.”

“Good morning,
folks!”

“Hi, **everyone!**”

“And for **you?**”

“Can I get
you **all**
something?”

Why?

Shifting to gender-inclusive language respects and acknowledges the gender identities of all people and removes assumption.

Be mindful of language

Based on Toni Latour's "Hello there" cards.

Learn more at qmunity.ca

Respect for Diversity

CREATE A SAFE PLACE WHERE CONFIDENTIAL INFORMATION IS NOT REPEATED!

Gender diversity is important because our country, hospitals, clinics, colleges, universities and workplaces increasingly consist of varied groups. We can learn from one another, but first we must have a level of respect and understanding about each other in order to facilitate collaboration and cooperation.

Tips for Demonstrating Respect

- Treat others with courtesy and be polite... even when you disagree with them.
- Encourage coworkers to express opinions and ideas... **DO NOT JUDGE THEM.**
Listen, Listen, LISTEN to what others have to say before expressing your viewpoint.
- Use other's ideas to change/improve work product without criticizing.
ENCOURAGE COLLEAGUES TO OFFER BETTER IDEAS!

FOUR TYPES OF COMMUNICATORS



ANALYTICAL

- Questions about numbers.
- Where's the data from?
- How do we know?
- Are we sure?



INTUITIVE

- Where does this get us?
- What's the bottom line?
- Can we skip to the end?



FUNCTIONAL

- What's the process?
- What happens first?
- How long?
- Who does what?



PERSONAL

- Feeling words.
- Who will be involved?
- How do they/you feel?

LEADERSHIP IQ



RECOMMENDATIONS

Become a leader at Kansas State University (KSU) and in the community in DEIB through collaborative efforts and actions.

- Develop an internal DEIB repository of resources for Applied Medicine and Rehabilitation Majors
- Host an KSU Statewide Physician Assistant Symposium
- Hold an annual DEIB End of the Year Celebration

Increase the number of opportunities to celebrate and share innovative work, practices and partnerships.

- Connect and share research ideas through Research Staff Brown Bags
- Increase communication & collaboration internally
- Spotlight faculty, staff, student, donors and alumni stories and share with stakeholders through social media, website, email, newsletters, etc.



DISCUSSIONS OF INCLUSION

Acculturation, Assimilation
Americans with Disabilities Act (ADA)
Artificial Intelligence
Atheist/Humanists
Benefits: Diversity, Equity Inclusion (DEI)
Bias
Campus Climate
Conscious Inclusion
Cultural Appropriation
Cultural Competency
Culturally Responsible Pedagogy
Discrimination & Prejudice
Diverse Administrators/Faculty/Staff
Diverse Student Body
Emotional Support Animals (ESA)
Empathy: Multiple Perspectives
Entitlement
Equity of Opportunity
Graduate Education
Human Resources
Identity & Belonging
Immigrants and Refugees
Inclusive Excellence
Intellectual Perspectives



Intercultural Communication
Intergroup Relations
Interpersonal Communication
Intersectionality
Intrapersonal Communication
Lavender Graduation
Learning Styles
LGBTQIAP

Mentoring
Microaggressions
Multicultural Graduation
Multiculturalism
Organizational Climate
Outreach
Pipeline Programs
Political Viewpoints
Preferred Name Policy
Privilege
Racism
Recruitment, Retention, Graduation
Religious Groups
Search Committee Workshops
Sexism
Socialization
Stereotypes
Strategic Planning
Student Learning Outcomes
Support Structures
Unconscious Bias
Women in Leadership

IMPORTANCE OF SELF-CARE!



Physical Self-Care

- Nutrition
- Sleep
- Exercise
- Water intake
- Medication
- Supplements
- Breathing

Spiritual Self-Care

- Prayer
- Meditation
- Spiritual community
- Forgiveness
- Finding purpose and meaning

The Goal
To feel
vital and balanced,
free from depression
and anxiety

Lifestyle

- Structure/routine
- Relaxation
- Setting goals
- Fulfilling work
- Time in nature
- Pleasure

People Support

- Family
- Friends
- Psychiatrist/therapist
- Minster/rabbi
- Support group
- Day treatment
- Community service

Mental/Emotional Self-Care

- Positive self-talk
- Positive beliefs
- Feeling one's feelings
- Mood journal
- A library of positive memories
- Psychotherapy
- Family of origin healing
- Working through grief
- Working with a good therapist

QUESTIONS?



Be Kind Because Everyone You Meet May Be Fighting a Hard Battle

תודה
Dankie Gracias
Спасибо شكراً
Merci Takk
Köszönjük Terima kasih
Grazie Dziękujemy Děkojame
Ďakujeme Vielen Dank Paldies
Kiitos Täname teid 谢谢
Thank You Tak
感謝您 Obrigado Teşekkür Ederiz
Σας ευχαριστούμε 감사합니다
ขอบคุณ
Bedankt Děkujeme vám
ありがとうございます

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