



Faculty Council Minutes May 8, 2024

Present: Aguayo-Mazzucato, Agudo, Bauer, Bi, Chen, Cluett, Daley, del Carmen, Fregni, Gehrke, Giannobile, Goldstein, Greenberg, Haigis, Hedt-Gauthier, Henske, Irani, Jena, Kaban, Katz, Mathis, Morton, Murray, A. Nazarian, R. Nazarian, Parangi, Royce, Shih, Shin, Spring, Stern, Treister, Wu

Guests: Messrs. Callahan; Mss. Bennett, DeCoste, Friedman, Jimenez, Lewis, Limaye, Oke, Tadikonda, Totwani; Drs. Becker, Bittinger, Chang, Golan, Huang, Mayer, Muto, Park, Saldaña, Westlund

Staff: Mss. Hecht, Ivins, Ryan, Spearman

This Faculty Council meeting was held virtually, via Zoom.

Dr. Josh Goldstein called the meeting to order at 4:01pm. Next, Dr. Goldstein asked for and received approval for the April 11, 2024 meeting minutes, as submitted. Dr. Goldstein mentioned that the June meeting will be held in person, and reviewed the agenda.

Next, Dr. Goldstein introduced Dr. Sang Park, Associate Dean for Dental Education at the Harvard School of Dental Medicine (HSDM), to present on the HSDM match and to give the HSDM admissions report.

Dr. Park thanked Dr. Goldstein and addressed the Faculty Council (FC). Dr. Park mentioned that there has been an increasing number of candidates who are interested in attending HSDM. She stated the top reasons that students choose HSDM including:

- Integrated oral and general health approach
 - Relationship with HMS
 - Curricular programs
- Patient-centered comprehensive clinical care (Case Completion Curriculum)
- Pass/Fail curriculum
- Resources and opportunities available in the Harvard environment
- Small class size

Then, Dr. Park delved into the holistic review process of HSDM and discussed the response to the SCOTUS ruling. They have implemented a new two-step funnel interview model that “funnels” candidates to the Admissions Committee for early review and voting. They have also redesigned the interview evaluation form to include key criteria:

- Leadership potential, empathy, compassion, interest in research, desire to help others, and fit with mission
- “Distance traveled” overcoming a lack of resources, family support, discrimination, etc.

Dr. Park added that they have provided rigorous implicit/anti-bias training and calibration for Admissions Committee members prior to and during the admissions cycle. They have also increased pathways program to reach diverse applicants, including the following:

- Bridge to Dental School program & ASDA Introduction to Dentistry
- MedScience – Dental

Dr. Park discussed the HSDM DMD Admissions Cycle. She explained that in 2024, they received a higher number of applicants and that there has been a specific increase in female students at HSDM. The Class of 2028 is 63% female. Then, Dr. Park projected a table that included annual data from 2017-2024 on the number of applications received, applicants who are underrepresented in medicine (URiM), interviews held, enrolled students, and the percent yield. Dr. Park presented on data regarding those interviewed versus those enrolled. More than half of the 15 disciplines of accredited advanced dental education programs added new programs, and most of them received a significantly higher number of applications over the past decade. Dr. Park next focused on national postgraduate applications and enrollment. She stated that HSDM has a 100% match rate. She gave an overview of the post-graduate plans for the Class of 2024. 22% of the Class of 2024 will focus on Oral and Maxillofacial Surgery, 18% on Advanced Education in General Dentistry, 15% on General Practice Residency, and 15% on General Practice Residency. These are the highest areas of focus for the HSDM Class of 2024, followed by Periodontics, Pediatrics, Private Practice, Endodontics, and Prosthodontics.

Next, Dr. Goldstein introduced Dr. Fidencio Saldaña, Dean for Students at Harvard Medical School (HMS), to present on the HMS match and to give the student society reports.

Dr. Saldaña began his presentation by giving some background on the match. He explained that there are 182 graduates, of which 176 are Clinical, 3 are Oral and Maxillofacial Surgery, and 3 are non-Clinical. Then, Dr. Saldaña focused specifically on the match. For the Urology Match, 2 out of 3 students matched and the non-matched student obtained a preliminary spot. For the San Francisco Match (Ophthalmology), 4 out of 5 matched, and the non-matched student also obtained a preliminary spot. For the National Residency Matching Program for specialty and preliminary year, 174 out of 180 students matched, 4 will delay graduation and reapply, 1 obtained a preliminary spot, 1 student did not match for preliminary but did match for specialty and obtained a preliminary spot. Non-Matched areas include Urology, Ophthalmology, IM, Psychiatry, OBGYN, Anesthesia, Neurosurgery, preliminary year. Next, Dr. Saldaña presented on HMS for training. He broke this down into some part of training and primary specialty, explaining the difference between non-HMS and HMS training. Within the Some Part of Training category, 51% are HMS and 49% are non-HMS. For the Primary Specialty group, 46% are HMS and 54% are non-HMS. 6% are staying for their main specialty training. He also stated that 44% are URiM, and 51% are non-URiM. Dr. Saldaña explained that typically, it is around 50% for our URiM, though it can differ year to year. There will be some interviews with URiM to discuss why the student is leaving. Then Dr. Saldaña explained that many students from the 2024 match will go into internal medicine (56), anesthesia (12), dermatology (10), OBGYN (12), psychiatry (10) and radiology (10). Dr. Saldaña explained that specialties differ year to year.

Next, Dr. Goldstein introduced Ryan Callahan, Director of Financial Aid at HMS, for the Medical Education Financial Aid Update. Mr. Callahan began his presentation by presenting on the

packaging model (Tuition + Mandatory Fees minus EFC = HMS Scholarship), explaining that that HMS scholarship consists of mandatory fees minus the expected family contribution (EFC). He explained that full need students (EFC=0) receive full tuition and fees in scholarship support. These students only have to borrow for living expenses. Next, Mr. Callahan presented on the financial aid award. He broke the financial aid award down over 4 years. He explained that his office assess tuition, fees, EFC and the HMS scholarship. Mr. Callahan added that loans make up the cost-of-living expenses at HMS. The loan programs may be made up of a combination of institutional, federal and private loan sources. Another key fact that Mr. Callahan noted is that Stanford, Yale and Columbia all award up to the Cost of Attendance, and that even with the same EFC, the student in his example would receive funds for cost-of-living in additional scholarship funding. Mr. Callahan then explained the Dean's Resilient, Excellence, Achievement, Compassion, and Helping the underserved (REACH) Scholarships and loan forgiveness programs.

Next, Mr. Callahan focused on the 2022-2023 Financial Aid Summary Report Executive Overview, which is privately owned by HMS. He focused on the distribution of total financial aid at HMS versus all medical schools. The distribution of financial aid at HMS is made up of mostly grants and scholarships (71%), with 29% of the distribution being made up of loans. The distribution of financial aid at other medical school, on the other hand, is mostly made up of loans (70%), with 30% of the distribution being made up of grants and scholarships. Mr. Callahan also presented on the percent of graduates with debt, where HMS falls much lower than other medical schools. 58% of HMS students graduate with debt, in comparison to 71% of graduates at other medical schools. Not only are less students in debt at HMS, the average debt of indebted students is lower at HMS than at other medical schools (\$103K at HMS, versus 189K at other medical schools). Next, Mr. Callahan focused on key high-level statistics and updates, including the improved middle-income initiative. Some takeaways about this include the following: 60% of scholarship recipients benefited from Middle Income Initiative, and the average additional benefit under the new policy is \$5,981.

Mr. Callahan then gave various financial aid updates. 71% of students received some form of financial aid. The average annual scholarship is \$59,915 for 2023-2024. The average scholarship offered to the incoming Class of 2028 was \$68,318. They have approved 22 incoming student appeals, which is an average increase of \$12,990. The Public Service and Primary Care Loan Forgiveness Programs are \$456,605 (\$50,362 per student). The average HMS graduating debt in 2023 was \$103,519. The national average at private medical schools is \$189,469.

- Yale \$113,254
- Stanford \$122,830
- Columbia \$95,578

Then Mr. Callahan took questions via the chat.

Dr. Goldstein then introduced Dr. Bob J. Mayer, Faculty Associate Dean for Admissions to discuss the HMS Admissions Report and preliminary data for the incoming class. Dr. Goldstein added that he asked Dr. Mayer to address lessons learned from University of California, Davis. He also mentioned that Dr. Mayer's presentation is full of data and that he will take questions at the end.

Dr. Mayer began his presentation by focusing on the preliminary results from the 2024 recruitment season.

Dr. Mayer provided an update on the 2023-2024 Admissions Cycle. The applicant pool remains stable in number and composition. This year, HMS received 6856 applications. 757 (11%) of applicants were interviewed and 207 (3%) were offered admission. Dr. Mayer explained that this is similar to last year. He then provided the following data on this year's applicants:

- 207 admitted students
 - 59% female, 37% male, 4% other
 - LGBTQ (self-reported) 51 (25%)
 - median age - 22
 - 72 different undergraduate schools
 - representatives of 39 US states and 9 foreign countries
 - 26 offered entry to both HST and Pathways
- 75 presently on Wait List
 - 13 wait list offers were made in the past week

Next, Dr. Mayer focused on challenges in recruiting the HMS class entering in 2024. It has been challenging to maintain diversity, Dr. Mayer explained. He added that maintaining diversity without knowing a candidate's ethnic and/or racial origin has been challenging. The Admissions Office has welcomed guidance from Office of the General Counsel, and Dr. Mayer explained that the "mix" of students at recent Admitted Students Preview Days looked "familiar." He added that the screening process ("who to invite for an interview") has also become increasingly complex. This is due to undergraduate grade inflation, the demise of functional premedical composite committee evaluation letters, and the enormous variability in the quality of letters of recommendation. Legacy has also been a challenge in recruiting the HMS class entering in 2024. They have been discussing placing a diminished emphasis on legacy status. Dr. Mayer explained that there seems to be an impression that there are fewer legacy applicants, now than there were in the past. He added that this might represent a trend.

Next, Dr. Mayer focused on data from 2023 regarding declined acceptance and provided the following data:

- 222 offers made; 54 declined
- 168 accepted the offer for the 2023 application cycle
 - includes 10 deferred to future years
 - excludes 6 returning from deferral
- 168 accepts/222 offers = 76% yield

Dr. Mayer also projected reasons for declined acceptance as a percentage of 31 response. 77% who gave a reason for declined acceptance cited "financial aid." Other reasons for declined acceptance include: family/location/personal (19%) and program/curriculum/fit (3%). HMS does not offer merit-based scholarships. They only offer need-based scholarships, in comparison to other schools. Dr. Mayer shared data from 2021, 2022 and 2023 regarding joint accepts, individuals who chose HMS, individuals who chose other, and the HMS/other ratio, across four schools: University of Pennsylvania, Stanford University, University of California, San Francisco, Johns Hopkins University,

New York University, and Columbia University. This data showed that overall HMS is very attractive for medical school applicants.

Next, Dr. Mayer focused on the USCD School of Medicine Holistic Admissions Practices. He gave a short overview of the background, explaining that in 1996, Proposition 209 banned race-conscious admissions in California. The enrollment of URiM students subsequently dropped by 37%. Nevertheless, enrollment of URiM students at USCD School of Medicine, which had previously been 10% of entering classes, had tripled. This was due to the development of an admissions model which focuses on the mission fit, experience, and socioeconomic background of applicants and emphasizes state workforce needs. USCD also de-emphasizes the MCAT and, to a lesser extent, the GPA of applicants. They also have developed a continuous measure of socio-economic, disadvantage-incorporating factors of their medical school applicants, including parental income and education, and other socio-economic variables, called the “Davis scale.” Dr. Mayer also explained that there is a difference between the USCD and HMS mission statements, where HMS has a more national-international focus versus the local-regional focus of USCD School of Medicine.

Then, Dr. Mayor then focused on his personal thoughts on the USCD School of Medicine Holistic Admissions Practices. He explained that the USCD School of Medicine program focuses on state workforce needs and lacks the breadth and national/international leadership goals that characterize graduates of HMS. Dr. Mayer added that while the “Davis scale” may increase the percentage of URiM students in classes at USCD, ironically, it may foster a less diverse class than that found at HMS. He closed by mentioning that 24.4% of the class which entered HMS in 2023 were comprised of URiM applicants. It remains to be seen whether that percentage will remain now that affirmative action is no longer a part of the selection process.

Then Dr. Mayer took questions via the chat and Dr. Goldstein opened up the floor to questions from the FC.

Dr. Goldstein thanked the FC for the discussion and then introduced the Student Council, represented by Mayowa Oke, Class of 2027 Student President, Val Ortiz Jimenez, HSDM President, Mansi Totwani, Vice President (VP) of Operations, Ananya Tadikonda, VP of Community Health and Action, Serenity Bennett, VP of Mental Health and Wellness, and Aditi Limaye, VP of Programming, to give their second update of the year to the FC on student experience during the second half of the academic year.

Ms. Serwald began her portion of the presentation by introducing the Student Council. Following introductions, Ms. Serwald shared a schematic of the Student Council structure, mentioning that they are a large team. Ms. Serwald then focused on their three goals for 2023-2023.

1. Foster a culture of student wellness
2. Build a vibrant community among the first-year class
3. Facilitate and mobilize class service and engagement with communities both within and outside of Boston

Then Ms. Bennet walked the FC through various events the Student Council has hosted for their community, including a wellness dinner series, a December holiday social and gift exchange, a self-love event for Valentine’s Day, and a goat yoga event. Ms. Bennet then focused on advocacy including following efforts: Clarifying and changing the wellness grant application process, the January 2024 Mental health Climate survey and establishing a “Mental Health Fund.”

Next, Ms. Limaye, presented on a few other important events including, a December finals week massage event, a speed friending and holiday event, a hot-chocolate bar and back to school party, a February Boston exploration and night out, a mixer with Harvard Law School and Harvard Business School students, inter-Longwood events, a “promposal” event, and the Med Ball. Then, Ms. Limaye presented on upcoming events including a coffee cart study event, an open mic night and a coffee meet up event. Ms. Limaye explained that students have been showing up to these events at high rates.

Ms. Tadikonda then focused on facilitating and mobilizing class service and engagement with communities both within and outside of Boston. She first presented on community health and action. They are working on integrating community health and action into the curriculum by offering opportunities for student engagement through summer projects, and scholarly projects. Next, Ms. Tadikonda presented on the First Year Community Accompaniment Program, which fosters longitudinal engagement with Community Based Organizations (CBOs) in Boston. Sample Office for Community Centered Medical Education CBOs include: Boston Public Health Commission, Family Van, Community Servings, Louis D. Brown Peace Institute, We Got Us. Student-Interest CBOs include: Saheli, Boston Health Care for the Homeless Program Oral Health Program. Ms. Tadikonda explained that they are also working a basic needs survey assessment which assess prevalence of unmet basic needs amongst medical students including food insecurity and other basic needs (housing, transportation, etc.). Their findings were shared at the Association of American Medical Colleges Learn Serve Lead Conference. Then, Ms. Tadikonda focused on next steps, including the second wave of survey to understand the impact of interventions, including a Longwood Area Food Pantry. To close out their year, the Student Council is also working on a prison book program donation drive.

Next, Ms. Totwani presented on Diversity Equity and Inclusion (DE&I). She stated that there are currently over 20 registered identity-based student groups. Ms. Totwani also spoke about DE&I and admissions. The Student Council paid particular attention to admissions given the Supreme Court of the United States decision on affirmative action. They have set up Fireside Chats with an emphasis on DE&I. Ms. Totwani explained that they had 5 sessions throughout the admissions cycle with around 50 attendees at each. The Student Council has also developed a Canvas site, with a video on diversity at HMS. This Canvas site helps to connect URiM admitted students with identity groups. Ms. Totwani also mentioned that there is a free stethoscope initiative to provide free stethoscopes to first-year students. Next, Ms. Jimenez presented on the Harvard School of Dental Medicine (HSDM) and shared a few HSDM events, including a large game of Assassin for the Class of 2027.

Then, Ms. Oke presented on the biggest topics affecting students this year, student activism and climate. She explained that the war and humanitarian crisis in Gaza has brought differences in opinion to light and that the state of campus discourse has changed since the Winter FC presentation. She also mentioned that recent bubbling up of tensions has brought to light several student concerns including the following:

- Treatment and portrayal of student activists
- Desire for broader acknowledgement that war & humanitarian crisis is challenging for everyone
- Student handbook concerns (professionalism and protest policies)

Next, Ms. Bennett focused on Mental Health and Burnout at HMS and HSDM. She explained that due to political and personal turmoil, students have experienced extreme burnout. The Student Council believes that their wellness events have somewhat helped students, but an increased focus on

mental health care is needed. Ms. Bennet explained that Medical Students are seeking therapy session 4 times per month, and added that there are gaps in services provided by Timely Care and the Counseling and Mental Health Service. She concluded by stating that future efforts to reimagine mental healthcare at HMS are needed beginning with financial and logistical support of the Mental Health Fund.

Ms. Totwani then closed their presentation by focusing on what is coming up next for the Student Council. She included the following:

- End-of-term programming
 - Open mic night
 - Coffee chats
 - Finals week study hall (w/coffee cart & pastries)
- Summer & Fall programming
 - Society Olympics
 - Boat cruise
 - Boston-area medical school social
 - Revival of Second Year Show?
- Student Council Constitution changes

The Student Council then fielded questions from the FC and Ms. Bennett explained the wellness grant program in more depth.

After some discussion, Dr. Goldstein thanked all the speakers and adjourned the meeting at 5:29 pm.