

Dr. Richard Homan Statement from Press Conference (05/22/19)

We want to welcome everyone to the news conference today. As you know, on February 1st, an abhorrent image that appeared in the Governor Northam's medical school yearbook page was posted online. That photo's publication in 1984 was a failure of the administrative oversight on the part of EVMS. Its publication was particularly hurtful to the African-American community and our academic community. It should never have happened.

Within 48 hours of the abhorrent image being posted online, we hired McGuireWoods to conduct an investigation. Their focus was on the EVMS yearbooks and on the past culture of EVMS.

We made it clear from the beginning that we wanted the investigation to be independent, objective, not limited in scope, and transparent with its results. And that's why we are here today. I received the report yesterday at noon. We are here, today, to share the report contemporaneously with the public.

Before I turn it over the podium to Mr. Cohen of McGuireWoods, I want to discuss a few brief findings and observations of EVMS. That abhorrent photo represents neither the core values nor the individual or institutional ethos of EVMS. EVMS is an outstanding institution of higher education and professional schools.

Notwithstanding, in numerous meetings after the image appeared online and at our February 5th press conference, I apologized on behalf of EVMS for the pain that photo caused. I apologize again today.

Nonetheless, those apologies would be empty without action. Eastern Virginia Medical School is taking sustained and durable steps to improve our diversity inclusion efforts. Sadly, EVMS is not the only school facing a problematic past. Similar reports and images began appearing in an array of social media posts citing yearbook pages from other institutions of higher education, not just from schools in Virginia and not just schools in the South.

On February 1st, a review of 900 publications from 120 schools across the United States was reported in USA Today which revealed numerous images exhibiting what was termed blatant racism. That's not an excuse, but regrettably a troubling diagnosis of the unconscious bias, conscious bias, and racism that continue in this nation today. Unless we confront this fact, this bias and racism will not abate.

Uncomfortable silence only perpetuates these problems. We must engage in direct conversations even if they are uncomfortable and even if they are difficult. I also encourage other institutions of higher education to do the same.

Notwithstanding, talking is not enough. You may recall that I empowered a community advisory board for diversity inclusion to help us learn from this experience. Their work will evaluate our current culture and make recommendations for further work and improve our future on diversity

and inclusion. We look forward to receiving the advisory board's report in the fall, and we'll make that report public when we receive it.

Internally, we launched a strategic planning process entitled Advancing Diversity and Health Equity for Academic and Community Benefit. It will focus on improving diversity, equity, and inclusion across all of our mission areas of education, research, clinical care, and administrative processes. This process will include nearly 100 representatives from across the campus, and they will end their work in June and make their recommendations at that time.

We have also done much at EVMS to be able to improve the diversity within our campus over the last several years. In 2013, we created an Office of Diversity and Inclusion and hired our founding vice president at that time. We implemented a holistic review process for admissions for the medical students to look beyond the MCAT and GPA in order to include components of their background and life experiences. That process resulted in nearly doubling the number of minority medical students in our program over the past six years.

Concurrent with the diversity increase within the school, we also had improvement in our national medical licensing examinations, exceeding national benchmarks. Our quality is improved and our diversity is improved. We've also implemented unconscious bias training across institutions. And I can obviously share even more examples, but EVMS has been a leader and not a follower in this area.

It is important remind everyone that, on March 6th, the National Association of Diversity Officers in Higher Education awarded us the Institutional Excellence Award. Only one university each year is selected for this national award. We recognize the irony of the timing. However, EVMS earned this award by demonstrating measurable progress in sustaining innovative diversity and inclusion efforts on our campus.

Our work toward a more equitable and inclusive campus is not and has not been reactionary. It has been a focus since 2013, and it will continue to be an area of high priority for us in the years to come.

This national recognition is a testament to the hard work of our faculty, students, residents, and staff. The award is further encouragement to work harder and to become a national leader for schools of medicine and health professions in the areas of diversity and inclusion. This work makes us all better clinicians healers and citizens.

We cannot change the past, but we can refuse to be defined by it. We reflect critically upon our past and commit to learning everything possible from it. Today, we take another important step in learning those lessons.

The report, really, is part of our commitment to learn from the past and become a stronger institution in the future. Much of the good work which was done in the past to improve the culture of diversity and inclusion at a relatively young institution happened before I arrived in 2013. Since then, we've taken even more steps to improve the culture, provide an embracing and welcoming environment for students, faculty, and staff.

I'm very pleased that we received national recognition for a lot of the work that our staff and faculty and students have done over the past several years. We will continue to build on this infrastructure to make our school even stronger.

I'll close on a medical metaphor. When you have an infection and your physician tells you that you need to take the medication for 21 or 14 days, you do not stop when the fever breaks or the symptoms abate because you're likely to have a recurrent infection. And similarly, we are committing ourselves to long-term durable and sustaining treatment for providing an opportunity for us to improve the culture of diversity and inclusion here, eliminate racism and bias wherever we find it and wherever it is within our reach.