VIEWPOINT

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Diversity, equity, and inclusion (DEI) programs have in the past decade become commonplace at universities and academic health institutions. Academic institutions aim to be part of the world around them and to elevate the ideas that ennoble us through excellence in scholarship and teaching. This reflects their unique potential to bring together a diversity of perspectives, experiences, and identities and to create in their spaces the potential for discussion and debate that informs how we as a society think and act. DEI programs are aspirational at heart. These programs emerged out of an awareness that many institutions, and in this particular case, universities and academic health institutions, had systematically excluded many from their ranks for decades, often on the basis of race and ethnicity, and an attempt to address the well-documented biases existing within these institutions against advancement for those who came from underrepresented groups.¹ The goal of DEI programs is to implement systemic efforts that ensure a diverse student, faculty, and staff population, all of whom are included and receive fair and equitable treatment while thriving and contributing to institutional missions. DEI programs should strive to create

in Academic Health Institutions

The Evolving Role of Diversity, Equity, and Inclusion Programs

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space for a diverse university and academic health community, including all segments of society, as demarcated by gender, race and ethnicity, migration status, and the full range of perspectives and lived experiences that characterize the world that these institutions serve. This aim closely aligns the goals of DEI with the overall goals of academic institutions.

The aspiration of DEI programs was never—and should never have been—to take a narrow view of race and ethnicity, nor to arbitrate sometimes contentious social conversations about how race operates in broader society. Although some DEI programs may have strayed from this mission, we contend that far more often, DEI programs have advanced this mission and that today universities and academic health institutions are more diverse, equitable, and inclusive than they have ever been, in no small part as a result of DEI programs. The focus of DEI programs may, and should, shift over time. Take gender, for example. Women were long excluded from elite universities and academic health institutions. However, that is no longer the case, with a majority of students in universities now identifying as women.² It remains the case that structures and systems within these same institutions disproportionately challenge the career advancement of women (eg, the expectations of achieving particular benchmarks during a certain time that often coincides with childbearing years), and as such a DEI focus on creating equitable processes to ensure that women are not disadvantaged in these institutions remains warranted. Asian American members of academic communities were especially targeted with discrimination during the COVID-19 pandemic and warranted consideration under DEI programs. Currently, attention to exclusion experienced by Jewish and Muslim students, faculty, and staff is, and should be, a central concern of all DEI programs. Conversely, decades past have seen US society instill systemic discrimination against particular groups, such as Irish and Italian immigrants. That is no longer the case and perhaps need not be the active focus of DEI programs today. DEI efforts must be flexible and, with a clear focus on the goals that animate them, adapt and evolve to the needs of par-

> ticular populations to ensure that all are represented, have a fair chance to succeed, and are included and safe within these institutions.

> Much of the public conversation around DEI programs has been mired in assumptions that the programs are monolithic and in critiques of some of their particular structural aspects. For example, DEI seminars have often been criticized for focusing too narrowly on race and dis-

crimination, reinforcing an impression that all interactions between people of different races are fraught, and in so doing, fostering-rather than narrowing-gaps between those of different races.³ Studies that have aimed to document outcomes of these seminars have also found mixed and largely unconvincing results that they change attitudes significantly.⁴ However, focusing on any single structural aspect of DEI programs in large part misses the point of these programs because they were never intended to be only about race and ethnicity. The aspiration behind DEI programs should have always been to create a diverse population within universities and academic health institutions, recognizing both that diversity reflects well on the social mission of these institutions and that diverse teams and groups are simply more successful and better at tackling complex problems than teams that are homogeneous.⁵

Two recent events have challenged DEI efforts. First, the US Supreme Court struck down affirmative action in

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recruitment by universities, making it unlawful for universities to use race itself as a criterion in deciding whether students can be admitted to a particular university.⁶ Although the Supreme Court ruling was narrow-it remains perfectly legal to take into consideration students' lived experience that may be influenced by race-this has been interpreted in the public conversation as a broader shift away from considering diversifying academic student, faculty, and staff populations and making an effort to ensure that academic institutions include populations that look like the people they aim to serve. Second, unprecedented campus schisms have emerged that have included an alarming increase in anti-Semitism and Islamophobia on US college campuses following the October 7, 2023, Hamas attack on Israel, the ongoing conflict in Gaza, and the substantial destruction and loss of life among civilians.⁷ These events, which have been accompanied by substantial campus unrest as students, faculty, and staff have advocated for their own perspectives, should push us to pause and consider the goals of DEI efforts. The clear challenge that

academic institutions have had in grappling with deeply held and diverse perspectives urges a careful reexamination of the role of DEI programs and a reengagement with the aspirations that these programs should have for themselves.

These current challenges therefore highlight the importance of going back to basics, to original principles. DEI programs are an instrumental step taken to achieve a particular set of values. These values—diversity of students, faculty, and staff; acceptance of diverse perspectives; equitable opportunity for all; and inclusion of all within the walls of academic institutions—should not be under serious threat. These values rest comfortably on a long tradition of seeing academic institutions leading societies forward to represent their aspirational best. They also reflect the science, showing that better work is indeed created by communities that align with these values. Our role then is to lean into—rather than pull back from—DEI programs in a fraught time, to pay attention to all populations who are well served by DEI efforts.

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