This Executive Summary draws from the AIME Final Report describing the final outcomes of the AIME Mentorship pilot project. According to the Institutional Review Board protocol for the pilot project, the goal was to adapt, develop, and rigorously evaluate best practices for mentoring Faculty of Color working toward promotion and tenure. The objective of the project was to implement and test a cross-cultural faculty mentoring program with the goals of increasing psychosocial support, career-related self-efficacy, job satisfaction, perceptions of institutional recognition, support and institutional connectedness and self-efficacy; while increasing the HSC's capacity for cross-cultural communication and collaboration.

In order to achieve this objective, the AIME Mentorship pilot project sought to develop more effective faculty interactions and collaborations among mentee Faculty of Color and mentors by facilitating discussions about the psychosocial dimensions of academic life, including identity, implicit bias, career decision-making, cross-cultural communication, and other related professional development topics with an emphasis on the promotion and tenure system. As a result of this pilot, participants had increased job satisfaction, satisfaction with the HSC as an institution, increased connectedness, knowledge of promotion and tenure, and felt valued as Faculty of Color. These results support the AIME program’s efficacy in increasing the HSC’s overall capacity in identifying, managing and cultivating the range of talent and abilities represented by its diverse faculty, thereby gaining the dividends of diversity that flow to all stakeholders.

**METHODOLOGY**

The AIME Mentorship pilot project was composed of two components: an online mentoring platform (Insala), and an orientation workshop and four in-person training luncheons with a curriculum based on Cognitive Diversity scholarship (Page 2007 & 2015), the RESPECT model (Mostow et al., 2010), and an AIME case study. A core feature of the AIME curriculum was the focus on four cross-cutting themes: 1) racial/ethnic identities and cognitive diversity; 2) implicit bias; 3) faculty agency in promotion and tenure; and 4) cross-cultural communication. Each mentee was matched with potential mentors using online profiles created on the Insala platform. The mentee then selected up to three mentors.

The signature feature of this mentoring program was an emphasis on cognitive diversity, i.e., the diverse mental tools that result from different identities and cultural backgrounds, experiences, education, and training, and its importance to teamwork focused on improving healthcare outcomes. (Page, 2007 & 2015).

**EVALUATION AND ANALYSIS**

The program was evaluated through pre-, post- and follow-up surveys, narrative personal reflections, questionnaires after each program session, an Insala software evaluation, and focus groups held at the end of the program. Survey questions were designed to provide information on the following topics: institutional diversity, cognitive diversity, faculty agency, and programmatic participation. Survey questions received Likert-like scoring for agreement (Strongly disagree to Strongly agree, 1-5). For program survey data, means and standard deviations were computed to summarize scores by time period. Comparisons between time periods, pre- to post-, and pre- to program follow-up, were made using non-parametric Wilcoxon Tests. Results were also summarized graphically with statistically significant results at P < 0.05. Survey questions and their scoring are summarized by time period with counts and percentages and with means and standard deviations. Qualitative data from the narratives, questionnaires that asked participants to reflect on the discussions that happened during the lunch sessions, and focus groups were used to support and expand on quantitative survey data.

**RESULTS**

Table 1 shows characteristics of the participants. Fourteen mentees and twenty-four mentors participated, with a 2:1 female to male ratio. All mentees were faculty of color; as were 46% of mentors.

**Institutional Diversity**

Institutional diversity questions related to increasing psychosocial support, career-related self-efficacy, job satisfaction, and perceptions of institutional support.
and connectedness. In the post-survey, job satisfaction, connectedness to colleagues, and satisfaction with HSC as an institution increased significantly for both mentees and mentors (Figures 1 and 2). The majority of these measures remained significantly higher in the follow-up survey relative to the pre-survey, with the exception of mentee connectedness with colleagues, which was no longer statistically different from the pre-survey (Figure 1).

Cognitive Diversity and Faculty Agency
Cognitive Diversity questions (assessing whether mentees felt valued for their intellectual worth, and whether mentors were aware that mentees had such doubts) focused on perceptions of feeling valued by the institution. Mentees reported significantly more agreement in the post- and follow-up surveys with feeling valued by the HSC as a faculty member of color, compared to the pre-survey (Figure 1). In addition, mentors’ awareness of the unique realities of mentoring for a Faculty of Color increased significantly (Figure 2).

Faculty Agency questions focused on navigating departmental expectations, rules, and requirements, including those for promotion and tenure. The mentees showed significant improvement and retention in reported self-awareness of what is expected for promotion and tenure (Figure 1). Mentors’ agreement that Faculty of Color know what is expected for promotion and tenure also increased.

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**TABLE 1**

**PARTICIPANT DEMOGRAPHICS**

<table>
<thead>
<tr>
<th></th>
<th>Mentees</th>
<th>Mentors</th>
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<td><strong>Number</strong></td>
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<td>24</td>
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<tr>
<td><strong>Gender</strong></td>
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<tr>
<td>Female</td>
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<td>Male</td>
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<td><strong>Race (Ethnicity)</strong></td>
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</tr>
<tr>
<td>URM*</td>
<td>100%</td>
<td>46%</td>
</tr>
<tr>
<td>White</td>
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<td>54%</td>
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<td>92%</td>
</tr>
<tr>
<td>Nursing</td>
<td>14%</td>
<td>8%</td>
</tr>
</tbody>
</table>

*URM (Underrepresented in Medicine) defined as underrepresented in medicine for New Mexico (Hispanic, American Indian/Alaska Native, African American) relative to the diverse cultures and needs of New Mexico’s populations. Racial demographics are based on self-identification and the categories are institutionally and personally fluid so they can change over time. We use the category American Indian/Alaska Native in this report, however, please note that the category used by the School of Medicine in the two compilations of data was Native American.
Participant agreement to the indicated questions was assessed using a 5-point agreement scale (1, strongly disagree to 5, strongly agree on the y-axis) in a pre, post, and follow-up survey. The question “Know expectations for P&T” (promotion and tenure) was not included on the follow-up survey. Comparisons between pre to post, and pre to follow up were made using non-parametric Wilcoxon Tests. Post and follow up results shown are statistically significantly different from pre at P<0.05 except for connection with HSC colleagues at follow up.
Participant agreement to the indicated questions was assessed using a five-point agreement scale (1, strongly disagree to 5, strongly agree, on the y-axis) in a pre-, post-, and follow-up survey. The question, “Aware of the unique realities of mentoring Faculty of Color,” was not included on the follow-up survey. Comparisons between pre- to post- and pre- to follow-up were made using non-parametric Wilcoxon Tests. Post- and follow-up results shown are statistically significantly different from pre at P<0.05.
Programmatic Participation
In general, mentees agreed that they found time to participate in the program and would agree to mentor in a similar program. They also reported that their expectations of what they and the institution would gain from the AIME pilot project were met or exceeded. The majority of mentees were confident in their ability to embrace cross-cultural communication and strongly agreed that cultural humility is valuable. Mentees were confident in their knowledge of, self-assessment of, and ability to listen deeply for implicit bias. Mentees consistently described gaining a sense of confidence with regard to skills pertaining to communication and navigating through promotion and tenure processes. Mentors valued the opportunity to pair up with mentees, and in addition to deriving satisfaction from helping to guide junior faculty, they also derived benefit from improving their own communication skills.

PILOT PROJECT LIMITATIONS
The overall sample size for the AIME pilot project was small, which limits replicability and generalizability. The pilot did not include a comparison group, and there was attrition across measurement periods. We also did not track responses by unique identifiers. Some mentees had low satisfaction scores that might have implications for long-term retention; however, individual participants were not identified as part of this study.

We were unable to complete the projected number of focus groups, due to program participants’ competing demands. The findings from this component may not reflect the full spectrum of experiences and perspectives. It is important to note, however, that our quantitative data analyses demonstrated consistent increases in virtually all areas of assessment.

DISCUSSION AND RECOMMENDATIONS
The pilot results show that faculty valued the program enough to find the time to participate as both mentees and mentors. AIME results align closely with a review concluding that health professions schools can improve Faculty of Color retention through focused efforts to improve the institutional culture in order to promote an inclusive environment. (Hamilton et al., 2017).

Recommendation 1: Identify Faculty of Color recruitment, hiring, and retention, especially for American Indian/Alaska Native and African American faculty, as an HSC priority.

Recommendation 2: Cultivate the wide range of talent and abilities represented by diverse HSC faculty by implementing and evaluating AIME-type mentoring and leadership programs.

Recommendation 3: Increase transparency by disseminating an annual report on the demographic profile of the HSC faculty and leadership.

DISCUSSION: IMPACT WITH KEY INSIGHTS
1. In Authorizing AIME, the Chancellor Heard and Responded to Faculty of Color Concerns
AIME is a partial solution to fostering an inclusive climate by promoting a fuller understanding about the contributions of Faculty of Color and by having robust discussions with faculty from different backgrounds about the complex dimensions of academic health care careers in New Mexico.

2. AIME Embraced a New Narrative about Faculty of Color Based on Cognitive Diversity
AIME was seeking to displace perceptions of deficiencies with a narrative that identity characteristics and differences in cognition are a valuable part of an individual faculty member’s skill set. In doing so, AIME was seeking to broaden the understanding of academic excellence.

3. AIME Produced Demographic Data That Revealed Important Trends
The demographic data show that the School of Medicine and its chairs have been successful in recruiting and hiring a diverse faculty. In 2002 Faculty of Color (counting non-White categories) were 16% (81 of 497) of the total faculty; by 2016 Faculty of Color (counting non-White and two-race categories) were 27% (226 of 827) of the total faculty. However, that the number of American Indian/Alaska Native faculty remained the same from 2002 to 2016, presents a challenge to be corrected by the HSC.

4. AIME Demonstrated the Utility of a User-Friendly Electronic Mentoring Platform
An electronic platform designed for the mentor-mentee matching task is a worthwhile component of a large mentoring program.
DISCUSSION: UNIQUE FEATURES

1. AIME Used Innovative Cross-Cultural Curriculum Materials
   The AIME curriculum introduced provocative and cross-disciplinary concepts, some scripted exchanges based on the RESPECT model (Mostow et al., 2010), and racially-inflected stories to challenge the participants’ points of view and generate fresh reactions and responses. The discussions of the curricular materials sought to cultivate effective relationships between faculty who were encouraged to explore their divergent identities, backgrounds, and perspectives and determine why and how such personal (and, for some, private) aspects should matter to an academic career in health care.

2. The AIME Cross-Cultural Discussions Used Storytelling Theory, Skills, and Evaluation Methods
   The discussions were designed to improve communication and interpersonal skills by drawing out personal stories, especially from the mentees, paying attention to sub-textual messages in tone, facial expressions, gestures, and what was left unsaid, and, importantly, connecting story-telling and story-listening skills to academic work. The facilitators worked to create interactive exercises based on a case study, identify the specific cross-cultural concepts, skills, and insights generated by the group discussions, and help the mentees and mentors recognize how the concept of cognitive diversity was operative in these learning and mentoring relationships. The importance of personal storytelling as a method for strengthening relationships between Faculty of Color and their department chairs, peers, and mentors was reinforced by the use of the Most Significant Change narratives as a qualitative evaluation technique (Rivera, 2012 and Dart and Davies, 2003).

DISCUSSION: NEXT STEPS

Lessons drawn from the AIME Pilot Project have improved the online mentoring videos produced by the CTSC Faculty Mentor Development Program by updating and enhancing the demographic data in the Diversity module and producing more engaging case studies with detailed discussion notes. A mentoring toolkit, based on the AIME Pilot Project, has been created through a partnership with the UNM College of Population Health (COPH). Specifically, an MD/MPH student worked on the toolkit as her MPH practicum project under the supervision of the AIME co-directors, the HSC Office for Diversity, Equity, and Inclusion staff, and COPH faculty. The recommendations in this Final Report anticipate that the AIME Pilot Project successes, while relatively small, contingent, and with temporary (and some longer-term) consequences, will lead to other mentoring and leadership development experiments. In addition to mentoring, the recommendations focus on analyses using demographic data as well as projects focused on improving the range of employment decisions affecting Faculty of Color, in order to build on the existing diversity and correct those areas that are uneven, especially the hiring, retention, and advancement of American Indian/Alaska Native and African American faculty throughout the Health Sciences Center.

References: For the full citations on sources, see the AIME Final Report.

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AIME POINTS THE WAY TOWARD HAVING ROBUST CONVERSATIONS AND THEN MAKING PURPOSEFUL DECISIONS TO ENGENDER INCLUSION BY STRENGTHENING MENTORING ...