Introduction and Background
What Is CFAS?

• The Council of Faculty and Academic Societies (CFAS) represents U.S. medical school faculty and academic society member of the AAMC

• CFAS representatives number 350 from medical schools and academic societies

• CFAS is one of three AAMC councils that have direct representation on the AAMC's Board of Directors through our chair and chair-elect
What Does CFAS Do?

The Council of Faculty and Academic Societies provides a voice for academic faculty and specialty societies within the AAMC’s governance and leadership. The council is charged with:

- Identifying critical issues facing faculty and academic societies;
- Providing a voice about those issues to the AAMC as they relate to creation and implementation of the AAMC’s programs, services, and policies; and
- Serving as a bidirectional communications conduit regarding matters related to the core missions of academic medicine
But What Does CFAS Really Do?

By convening faculty members of diverse backgrounds and expertise from across the country, CFAS taps into the brain trust of academic medicine to identify key issues and initiate processes and reforms that can, and often have, been taken back to improve institutions. CFAS also,

• Brings reps and societies together to join the AAMC’s influential voice on national advocacy issues
• Convenes committees to create reports and publications on critical topics in academic medicine
• Develops programming for AAMC events and meetings
• Develops our own annual spring meeting for CFAS reps
• Publishes and disseminates CFAS-led meeting sessions in *Academic Medicine* and elsewhere
• Has its reps invited to join national efforts, like the NAM Action Collaborative
• Creates a learning community for faculty nationwide where we share best practices and expertise
What Are the Big Issues?

Major advocacy priorities – GME and NIH funding, and others
Gender equity and harassment
Faculty identity and leadership
Faculty well-being and resilience (CFAS is an AAMC pioneer on this topic)
Clinical and basic science enterprise
Biomedical research advancement
The teaching and learning environment
Health equity and diversity
Faculty professional development and training
2019 Meeting Attendance

• More than 130 attended the meeting, including an array of CFAS reps, speakers, AAMC staff, and guests

• Of CFAS reps, approximately 55% were senior reps, and 45% were junior reps

• Near split between society reps and school reps in registration
## CFAS Representative Membership Report

### 2019 CFAS MEMBER STATS

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Notes</th>
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<tr>
<td>Society reps</td>
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<td>School reps</td>
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<tr>
<td><strong>Total reps</strong></td>
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<tr>
<td>Junior reps</td>
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<tr>
<td>Chair or vice chairs</td>
<td>87 (30% women)</td>
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New Meeting Features
Tweet Chats

For the first time at a CFAS meeting, CFAS reps engaged in a dynamic, two-part virtual conversation via tweet chats, which involved two distinct themes on Friday, April 5: Medical education and diversity and inclusion.
Tweet Chats

- 336 total tweets using #CFASChat
- 110 contributors
- Potential reach: 195,230
- Potential impressions: 789,112
- National thought leaders noticed our tweet chats and joined in the conversations
- The AAMC’s Twitter account and the accounts of faculty diversity and development offices at some institutions also noticed and joined the conversations
A New Breakout Approach

In an effort to keep CFAS reps working together, there were fewer concurrent breakouts – and more workshops and shorter presentations to reflect a wide variety of perspectives

Workshop sessions (in two concurrent groups):

**Workshop I: Engaging with Our Communities to Advance the Academic Medicine Mission**
- Explored, described, and shared specific ways academic health centers can achieve real integration within their communities, while also defining “community engagement” in 2019
- Moderated by Vincent D. Pellegrini, MD, CFAS Immediate Past Chair

**Workshop II: Global Health Sans Frontières**
- Explored trends and anticipated future directions in global health and canvassed a broad landscape extending from infectious diseases and cardiovascular diseases to grave problems that are purely human-induced
- Speakers included Katherine Gold, MD, Joseph A. Hill, MD, and Samuel Matheny, MD
Workshop sessions, continued:

Workshop III: Mitigating Bias in Academic Medicine

- Participants learned and practiced new skills to disrupt unconscious bias and change our thinking. Experiential learning exercises will help participants recognize bias as it’s happening and consciously engage their empathy, helping to create a more equitable workplace
- Moderated by Vera Donnenberg, PhD

Workshop IV: Revitalizing and Invigorating the PhD Education

- Provided opportunities to discuss and engage on why and how academic institutions are transforming the way graduate schools educate future PhDs and postdoctoral researchers in order to prepare trainees for successful employment
- Speakers included Tika Benveniste, PhD, and Richard Eckert, PhD
Programming Changes

“Spark” style sessions, which featured multiple short presentations led by a range of speakers on themes of sexual harassment and medical education

Well-being breaks to mirror our own messages about the importance of well-being in academic medicine

More networking opportunities to encourage face-to-face interaction
Leadership Curriculum I: Negotiating and Negotiation Skills

Moderator: Scott Gitlin, MD, Chair, CFAS; Assistant Dean for GME, University of Michigan Medical School

Speaker: Nita Ahuja, MD, CFAS Ad Board Member; Chair, Department of Surgery, Yale School of Medicine

Objectives:

• Name two strengths and two weaknesses in your own negotiation skills
• List three practical strategies to improve your prospects in any circumstance where you must negotiate
• Identify one approach to strengthening a negotiation skill you wish to improve
Leadership Curriculum Sessions

Leadership Curriculum II: Creating a Sense of Urgency and Influencing Your Chair, Dean, and CEO

Speaker: Valerie Stone, MD, MPH, Charles S. Davidson Professor of Medicine, Harvard Medical School

Objectives:

- Describe the relationship between leadership and influence
- Demonstrate an understanding of influence skills and techniques, and a method for measuring their own effectiveness in using these techniques
- Become familiar with steps to define the problem for which they are seeking support and methods for communicating its importance
- Describe strategies for creating urgency in senior leaders and explain ways to utilize these strategies in their own professional life
Plenary Sessions and Meeting Highlights
Plenary: Addressing Sexual Harassment in Academic Medicine

Speakers:

- VJ Periyakoil, MD, Director, Palliative Care Education and Training, Stanford University School of Medicine
- Esther Choo, MD, Associate Professor, Emergency Medicine, OHSU School of Medicine
- Vivian Pinn, MD, Senior Scientist Emerita, Fogarty International Center, NIH

Moderators:

- Carolyn Meltzer, MD, Chair, Department of Radiology, Associate Dean for Research, Emory University School of Medicine
- Nathan Spell, MD, Associate Professor of Medicine, Division of General Medicine and Geriatrics, Emory University School of Medicine

Overview:

Speakers shared insights and data on the prevalence of sexual harassment in STEM and academic medicine specifically, and discussed strategies and principles institutions should follow to mitigate sexual and gender harassment.
Plenary: Addressing Sexual Harassment in Academic Medicine

Themes:

- Focusing on legal compliance is necessary but not sufficient to reduce sexual/gender harassment. The climate and culture must be changed.
- Approach problem of harassment like disease: aim for prevention, then try to detect, then obsessively measure progress until problem is mitigated or cured.
- Creating change requires: standardized policies; adequate staffing to support prevention, surveillance, and investigation; multiple, safe reporting pathways; routine training of entire workforce; root cause analysis of harassment cases; organizational restructuring to avoid steep vertical hierarchies; visible prioritization of abating harassment from highest levels of leadership.
Themes:

• Women of color experience more sexual harassment and they experience sexual harassment that includes racial harassment.

• To fight harassment and discrimination, remember concept of intersectionality: If someone has more than one social identity (black and gay, for example), they might run into specific, unique diversity issues.

• To address intersectionality, avoid exaggerating group differences and societal stereotypes, and don’t rely on a liability focus, which can be tedious and counterproductive.
Spark Presentations on Sexual Harassment

Presentations:
- This I Experienced. #MeToo Made Personal
- The Devil in Disguise: Hidden Messages Setting the Stage for Sexual Harassment
- #MeToo in Medicine: Engage, Empower, Excel
- Mentoring Victims of Sexual Harassment in Academia: Recognizing the Silent Impact on Career Growth

Speakers:
- Mona Abaza, MD, CFAS Ad Board Member; Associate Professor, Department of Otolaryngology, University of Colorado School of Medicine; Nita Ahuja, MD, CFAS Ad Board Member; Chair, Department of Surgery, Yale School of Medicine; Rosemarie Fisher, MD, Professor of Medicine Director and Associate Dean of GME, Yale School of Medicine; Serina Neumann, PhD, Professor, Department of Psychiatry and Behavioral Sciences, Eastern Virginia Medical School; Catherine Pipas, MD, MPH, CFAS Ad Board Member; Professor of Community and Family Medicine, Geisel School of Medicine at Dartmouth; Lumy Sawaki Adams, MD, PhD, Associate Professor, Physical Medicine and Rehabilitation, University of Kentucky College of Medicine; Laura Shaffer, PhD, Associate Professor, Chief, Section of Pediatric Psychology, University of Virginia School of Medicine

Moderator:
- J. David Warren, PhD, CFAS Ad Board Member; Associate Professor, Biochemistry, Weill Cornell Medicine
Lessons Learned:

• Speakers shared personal experiences of sexual and gender harassment during their careers, in medical training, and in childhood.

• Speakers described how unconscious bias sets the stage for microaggressions and low-level gender harassment, which can rise to become sexual harassment if unchecked.

• Witnesses and bystanders to bias must speak up on behalf of the victim, but we have to give people grace to make mistakes as they learn how to unlearn their biases.
Spark Presentations on Sexual Harassment

Strategies for successful culture change:

• Create policies that are easily readable, accessible, and transparent

• Institutional leaders should emphasize that sexual harassment left unaddressed causes widespread demoralization that hurts an organization’s bottom line

• Progress will come by simplifying hierarchy to make it easier for people to know who to report incidents to and institutions should track progress in mitigating incidents

• Mentors should be given training and tools that help them listen effectively, not be dismissive, and manage emotions when mentees report incidents of harassment
Plenary: Hot Topics in Bioethics, Health Policy, and Research: Overview and Issues in Advocacy

Speakers:

• Ross McKinney, MD, Chief Scientific Officer, AAMC

• Tannaz Rasouli, Public Policy and Strategic Outreach, AAMC

• David Sklar, MD, Professor, Emergency Medicine, University of New Mexico School of Medicine; Editor in Chief, Academic Medicine

• Paul Wolpe, PhD, Director, Center for Ethics, Emory University School of Medicine

Moderator:

• Arthur Derse, MD, JD, Director, Center for Bioethics and Medical Humanities, Medical College of Wisconsin; CFAS Administrative Board Member

Overview:

Panelists explained the trends and topics that are most impacting research, bioethics, and health policy, and described how faculty can successfully engage in advocacy on local and national levels.
Plenary: Hot Topics in Bioethics, Health Policy, and Research: Overview and Issues in Advocacy

Themes:

- Faculty members should closely watch and stay engaged in:
  - CRISPR and DIY genetics
  - How artificial intelligence, especially machine learning, gets incorporated into medicine
  - Public trust issues (anti-vaccination movement, climate change deniers, etc.)
  - Foreign influence in U.S. research, especially from Chinese government
  - Selling patient data

- Faculty members, always in consultation with their institution’s government relations professionals, should learn differences between politics vs. policy, and advocate for health policies that improve health of population
**Themes:**

- Incorporating AI into medicine must be done with care and transparency because once AI gets sophisticated enough to become machine learning, it’s very difficult to understand how decisions are made.
- Public trust issues worsening because of general sense science is done for political-economic agendas.
- Large amounts of data need to be sold to build neural networks and AI in health care, but patients don’t like hospitals making money by selling their data when patient paid for health care tests.
AAMC Leadership Plenary

Speakers:

- Darrell G. Kirch, MD, AAMC President and CEO
- Karen Fisher, JD, Chief Public Policy Officer, AAMC

Moderator:

- Scott Gitlin, MD, Chair, CFAS; Assistant Dean for GME, Professor of Hematology/Oncology, University of Michigan Medical School

Overview:

AAMC leadership discussed the AAMC’s priorities, latest initiatives, progress on key issues, and the policy updates from Washington that affect academic medicine.
AAMC Leadership Plenary

AAMC Updates from Darrell G. Kirch, MD:

• As part of it’s ongoing work in the transition to residency space, the AAMC published a new resource, the “Residency Explorer”

• AAMC is laying foundation for integrating the humanities in medical education and building a more engaged, robust digital presence

• AAMC is evaluating whether it can partner with the NCAA to recruit black student athletes into STEM fields and especially medicine

Policy Updates from Karen Fisher, JD:

• Bipartisan support for increasing NIH funding is steadfast – this is 4th consecutive year of NIH budget increases
Policy Updates from Karen Fisher, JD:

- **FY19 budget:**
  - VA research and ARHQ increased
  - HRSA workforce funding preserved
  - $4 billion in Medicaid DSH cuts delayed
  - Site-neutral payment lawsuit moving through courts

- **AAMC’s 2019 advocacy issues:**
  - Lift budget caps
  - Increase NIH budget
  - Reauthorize PCORI
  - Prevent Medicaid DSH cuts
  - Preserve, increase HRSA workforce programs
  - Protect 340B program
  - Lift Medicare GME caps
  - Strengthen ACA
Plenary: Preparing Faculty for Changes in Medical Education and Training

Speakers:

- John Combes, MD, Senior Vice President, Policy and External Relations, ACGME
- Aviad “Adi” Haramati, PhD, Professor, Integrative Physiology, Director, Center for Innovation and Leadership in Education (CENTILE), Georgetown University School of Medicine
- Sheryl Heron, MD, MPH, Vice Chair of Administrative Affairs, Emergency Medicine, Emory University School of Medicine

Moderator:

- Scott Gitlin, MD, Chair, CFAS; Assistant Dean for GME, University of Michigan Medical School

Overview:
Speakers described how medical educators can adapt to the rapidly evolving landscape of medical education and get ahead of the curve.
Plenary: Preparing Faculty for Changes in Medical Education and Training

Themes:

• New educational goals involve fostering curiosity, standardizing learning outcomes, individualizing the learning process, promoting multiple forms of integration, and fostering progressive formation and development of a future physician’s professional identity

• New trends: increased integration across disciplines, reduced passive sessions (lectures), increased incorporation of active learning formats (flipped classrooms of various types), more use of simulations, more use of self-directed learning

• Move from “sage on the stage” to “guide on the side”
Plenary: Preparing Faculty for Changes in Medical Education and Training

Themes:

• Institutions have many content experts, but few true educators, so we need to educate the educators to equip them to foster curiosity, serve as role models who inspire, and create space for active learning.

• Inclusion and equity in medical education is more important than diversity, and seeing faculty members from underrepresented backgrounds boosts student morale.

• ACGME creates long-term strategic plans which explore how to build GME in economically, politically, or ecologically challenging future environments based on emerging trends such as artificial intelligence, climate change, anti-expert sentiments, and various global health challenges.
Spark Presentations on Medical Education

Presentations:
- Exploring Future UME Curricular Roles for Basic Science and Clinical Faculty
- The Emperor's New Clothes: Engaging MD and PhD Students in Team-based Translational Science Projects
- Innovation in Resident as Educator Curricula
- The Teachers of Quality Academy: Preparing Faculty to Teach Health System Science

Speakers:
- Anca Dobrian, PhD, Associate Professor, Department of Physiological Sciences, Eastern Virginia Medical School; Lee Eisner, PhD, Associate Professor of Cell Biology, State University of New York Downstate Medical Center College of Medicine; Susan Keen, MD, Medical Student Education Division Director, Brody School of Medicine at East Carolina University; Francisca Nwoke, DPT, Class of 2020 SUNY Downstate College of Medicine; Neil Osheroff, PhD, Professor of Medicine, John G. Coniglio Chair in Biochemistry, Vanderbilt University School of Medicine; Timothy Reeder, MD, Associate Professor, Executive Vice Chair, Brody School of Medicine at East Carolina University

Moderator:
- Alan Dow, MD, Professor of Medicine and Health Administration, Virginia Commonwealth University School of Medicine
Innovations and Insights:

• One institution implemented a 2-year, individualized immersion phase with the goal of deepening foundational science knowledge

• PhD and masters students need to work more closely with MD students earlier on in training

• Translational science needs to be taught more in medical school curricula
Spark Presentations on Medical Education

Innovations and Insights, cont’d…

• One institution has students work with faculty mentors to do projects that can result in students getting published if they develop a novel hypothesis

• Working with faculty makes residents and students think more about their needs, professional identity, and expectations that people will have of them in the future

• One institution wants to embed students and residents in teams for future quality improvement projects
Navigating different cultures:

• Discussion on how to dialogue with people who have differences of opinion that are outside of what is considered acceptable

• Focusing on sexual and gender harassment the way this meeting did gave some of the men in the audience an opportunity to hear messages they otherwise wouldn’t

• It’s OK to have cultures that differ and have different social expectations we might be uncomfortable with; cross cultural learning is about having the cultural humility to learn these things without being critical

• We must teach our learners to start with a curious mindset so they can be sensitive to different cultures and able to quickly adapt when challenging differences of worldview and opinion emerge
Navigating different cultures, cont’d:

• We don’t know what we don’t know. Be correctable and say “thank you” when people point out that you’re in error in terms of microaggressions.
• When confronting microaggressions, don’t embarrass the person in the moment, wait to talk with them one-on-one.
• Correcting microaggressions and behaviors takes time and work.
• An environment where learners feel free to tell educators when they’re wrong is a healthy environment.
• Caring for patients with different beliefs that interfere with care is complicated and the team often has to find the balance between safety and respecting cultural needs.
Dealing with abusive patients:

- It’s important to protect learners and make them feel like they’re part of the team when a patient says something objectionable. There needs to be a plan to immediately deal with these instances of patient abuse.
  - It’s OK, and often necessary, to tell learners they can leave the room in abusive patient situations
  - Telling abusive patients they can’t talk to team members in a certain way is important for bystanders, students, residents to hear, even if patient doesn’t listen
  - Discussion on how to get learners out of “weird situations” that haven’t yet reached the point of crisis
Pulling It All Together: Conference Overview and Next Steps

CFAS reps gathered at the end of the meeting to discuss takeaways and next steps

• Discussion on how CFAS communicates with the AAMC’s other two councils: the Council of Deans and the Council of Teaching Hospitals, and how more communication can be established, especially about topics CFAS discussed at meetings

• Reps wanted a joint discussion between all three councils during the 2020 co-located spring council meetings

  • Whatever joint session materializes, it should be a deep dive on one or two important issues (i.e., harassment or diversity and inclusion) with no formal agenda
Pulling It All Together: Conference Overview and Next Steps

- Future meeting programming should allow for more deep dives into a few of the most important issues with lots of time for discussion and Q&A
- Discussion around having more active engagement during sessions with more focused, intentional conversation
- Reps discussed whether there should be pre-meeting reading assigned to help focus discussion and increase productivity in the meeting
CFAS Program Committee Members

Chair, Gabriela Popescu, PhD
Scott D. Gitlin, MD, CFAS Chair
Nita Ahuja, MD
Steven Angus, MD
Lisa Bellini, MD
Richard Eckert, PhD
Shirley Eisner, PhD

Evelyn Granieri, PhD, MPH
Mark Jordan, MD
Robin McGoe, MD, MS
Carolyn Meltzer, MD
Dixon Santana, MD
Lumy Sawaki Adams, MD, PhD
Laura Shaffer, PhD
CFAS Updates
Current Ad Board (through November 2019)

Scott D. Gitlin, MD, Chair
Gabriela Popescu, PhD, Chair-Elect
Vincent D. Pellegrini, MD, Immediate Past Chair
Mona Abaza, MD
Nita Ahuja, MD
Steven Angus, MD
Arthur Derse, MD, JD
Vera Donnenberg, PhD

Alan W. Dow, III, MD
Richard L. Eckert, PhD
Robin McGoey, MD
Carolyn Meltzer, MD
Elza Mylona, PhD (Ex-Officio GFA Chair-elect)
VJ Periyakoil, MD
Catherine Pipas, MD
J. David Warren, PhD

Council of Faculty and Academic Societies
2019 Spring Meeting
Proposed CFAS Administrative Board, Nov. 2019

- new leadership role
- new ad board member

Gabriela Popescu, PhD, Chair
Aviad “Adi” Haramati, PhD, Chair-elect
Scott D. Gitlin, MD, Immediate Past Chair
Mona Abaza, MD
Nita Ahuja, MD
Steven Angus, MD
Stewart Babbott, MD
Arthur Derse, MD, JD

Vera Donnenberg, PhD
Alan W. Dow, III, MD (renewed)
Richard L. Eckert, PhD (renewed)
Elza Mylona, PhD (Ex-Officio GFA Chair-elect)
VJ Periyakoil, MD
Catherine Pipas, MD
Lumy Sawaki Adams, MD
J. David Warren, PhD

Council of Faculty and Academic Societies
2019 Spring Meeting
CFAS Committee Updates

Two papers in the works from CFAS-related activity:

• One from the Value of Faculty as Educators Committee (led by Lisa Bellini, MD)
• One from the Definition of Faculty project started by former CFAS Chair Rosemarie Fisher, MD, and contributed to by many CFAS reps

Various CFAS projects and meeting sessions are being adapted into peer-review publications:

• Paper on Academic Health Center Governance (ePub)
• Paper on the 4th Year of Med School (under review)
• “Creating a Value Proposition for Teaching” (being edited)
Committee Updates

Advocacy Committee
Arthur Derse, MD, JD, interim chair

- Received short updates of the AAMC’s work with Congress, NIH, and other federal administrators
- Plans to create a primer for societies to better explain sign-on letter opportunities
- Advocacy Committee members were invited to join the advisory panel for AAMCNews coverage and to author perspective pieces on issues of importance to societies
Committee Updates

Basic Science Committee
Rich Eckert, PhD, chair
• Impact of basic science department and research center structure and viability on the institutional research mission, institutional prestige, and faculty well-being
• Impact of the USMLE step 1 exam on medical school curriculum content and delivery, and student achievement

Communications Committee,
Alan Dow, MD, and David Warren, PhD, interim co-chairs
• Development of Tweet chats as a communication tool and community-building strategy in CFAS
• Improving readability and access to items in CFAS News
Committee Updates

Diversity Committee

VJ Periyakoil, MD, chair

- Document a 5-year strategic plan
- Continue to work on training 100% of CFAS reps on unconscious bias training

CFAS Diversity Resource on AAMC.org

https://www.aamc.org/members/cfas/diversity-and-inclusion-toolkit/

Council of Faculty and Academic Societies
2019 Spring Meeting
Committee Updates

Evaluation Committee
Carolyn Meltzer, MD, chair

- Evaluation of all surveys/meeting feedback to optimize future meetings/programs
- Communication matters: (a) Future Tweet chat on value of CFAS and how reps communicate activities to their schools/societies (b) Strengthen bi-directional communication between CFAS and AAMC affinity groups
- Assess CFAS’ impact to schools/societies and to AAMC on key issues (e.g., burnout, sexual harassment)

Mission Alignment and Impact of Faculty Educators Committee
Stewart Babbott, MD, chair (Adam Franks, MD, leading committee during meeting in Dr. Babbott’s absence)

- Career Path of the Clinician Educator
  1. Define the term Clinician Educator (with the GFA) and clinical educator track
  2. Best Practice for Hiring, Mentoring and Faculty Development
  3. Plan to extend this model to the other tracks (Basic Science)
- Medical Student Issues
  1. The USMLE issue
Committee Updates

Faculty Resilience Committee
Mona Abaza, MD, chair

- Further elaboration and creation of potential Standpoint Survey questions on wellbeing as it relates to individuals, teams, or organizations

Program Committee
Gabriela Popescu, PhD, chair

- Began discussing the format, location and opportunities for the 2020 meeting that will be co-located with COD and COTH
CFAS Society Summit

June 3, 2019
8 a.m. – 2:30 p.m.

655 K Street NW, Washington, DC 20001

Goal: Convene executives of AAMC-member societies and society reps, along with AAMC leaders to create and reinforce a stronger connection between the association and its member societies.
Society Sign-on Letters

Through CFAS, the AAMC has distributed several advocacy sign-on letters that bring societies together to have a unified voice on important issues that affect academic medicine broadly. In 2019 alone, sign-on letters have been sent on topics including:

- FY 2020 VA Research Program Funding
- Ad Hoc Group for Medical Research’s FY2020 NIH Funding Recommendation Endorsement
- NDD United letter advocating increase in FY2020-21 budget caps
- Health Professions and Nursing Education Coalition (HPNEC) brochure
- GME funding to create new slots

Half of all CFAS Societies have signed onto these letters
AAMC Updates
AAMC Leadership: July 2019

David J. Skorton, MD
Next AAMC President and CEO

CFAS was represented on the Search Committee

More details in Leadership Plenary this afternoon

Council of Faculty and Academic Societies
2019 Spring Meeting
2019 AAMC Leadership Forum

This annual event brings together key leaders from all AAMC councils and groups for a two-day meeting to explore a key topic and challenge facing the academic health environment

- 2019 Theme will be gender equity
- AAMC Board of Directors has been engaged in this topic and requested all AAMC affinity groups to create programming
- CFAS has been ahead of the curve, as our 2019 spring meeting demonstrated through detailed programming and extensive group discussion on sexual harassment themes
Societies Consortium on Sexual Harassment in STEMM

AAMC NEWS

PRESS RELEASES

Friday, February 15, 2019

Leading Science, Education, and Medical Organizations Announce New Initiative: Societies Consortium on Sexual Harassment in STEMM

Leading academic and professional societies have announced their launch of the Societies Consortium on Sexual Harassment in STEMM (science, technology, engineering, mathematics, and medicine) to advance professional and ethical conduct, climate, and culture across their respective fields.

AAMC NEWS

AAMC is a sponsor

~100 participating societies in all STEMM disciplines – including CFAS-member biomedical-focused societies

Goal: to provide impactful resources and guidance to address sexual harassment in the member societies and more broadly within the fields they represent

Council of Faculty and Academic Societies
2019 Spring Meeting
AAMC Faculty Salary Equity Project:

Overall Objective: This project aims to encourage medical schools to undertake their own salary equity projects by providing them with new AAMC data, tools, and community promising practices to facilitate their success.

Overall project goals:
1) Understand current state of medical school faculty compensation by gender

2) Identify promising practices within the academic medicine community to help facilitate and advance salary equity studies at the local level.

Several CFAS reps were consulted for input through this project.
2020 COD/COTH/CFAS Co-located Spring Meeting

March 12-15 in San Diego

Joint programming between councils is being planned
For More Information…

CFAS basics
Membership
Issues
Leadership

www.aamc.org/cfas.org

Contact Eric Weissman at eweissman@aamc.org or call Eric at 202-828-0044