

# Leveraging Everyone's Perspective

An interview with Dr. Chemen Neal, MD



CHEMEN NEAL | PHOTO

By Eric Chen and Seungyup Sun

Eric Chen: To get started, could you tell us about your background?

Chemen Neal: I'm from San Diego, CA. I went to the University of Chicago for medical school, then did half of my residency at Loma Linda University in California, and then transferred to Indiana University to finish out my residency. Afterwards, I went out to private practice with OB/GYN for

3 years, but I ended up back at IU because I really like working with students and residents. I also enjoy impacting the medical system; my main focus is the gender, racial, and ethnic diversification of leadership in medicine.

EC: What made you interested in OB/GYN? How did you end up choosing to make that your career?

CN: Truthfully, I liked everything. I think the minority of students are those who really like something and know that's absolutely what they want to do. There are some students who like all the things and others who aren't sure where they fit in or what they like. I think I could have been happy being any kind of doctor, especially in fields where I'm solving problems, fixing things, or diagnosing something. I could probably have done a lot of specialties. OB/GYN appealed to me because there's a lot of variety and you get to do cool surgeries.

My advice is that if you fall in love with something you should do that no matter what because you can always adjust it to your lifestyle and make it whatever you want it to be. If you like multiple fields, then I think other considerations should percolate to the top of your list. Are there people here who are like me? Does my personality type align? If it matters to you, does this make a lot of money? Does this have a good lifestyle? So spend time being a student of yourself and learning what's important to you. If you can trust, and follow that, you will end up where you're supposed to be.

EC: You mentioned that one of your academic focuses is the diversification of medicine. What inspired you to focus on that issue?

CN: I'm a big culture junkie and also find personal fulfillment to be really interesting and important to me. So when I started practicing medicine, I reached out to people in my class to see how they were doing and I was really astonished at how many people were lukewarm about their jobs. It struck me as a tragedy because we had spent so much time training

# Objective: Increasing DEI at IUSM

and had given up so much to be physicians. It was not what I expected. I dug more into this issue and I realized that it wasn't just my class or the people that I knew, but that it was really an epidemic among physicians. I was surprised to learn how many physicians leave medicine. And many of those who leave are women and underrepresented people - and I thought, "that's terrible." There's already all this representation inequity and I thought, 'gosh, and these people are leaving more? We need every single one of them.' I think every person is so important and I hated that some people weren't making it in the space that they wanted to be in. I had to do something about that, so that started this whole academic interest and journey for me. I've been trying to make a difference in my space.

EC: What did you do to help you make a difference in that space?

CN: I pursued a fellowship in the Office of Faculty Affairs and worked on a project focused on the retention of women and underrepresented minorities in medicine. I got to geek out and learn all about these issues, and I ultimately created a program called the Essentials of Leadership. At IU, we do a great job of helping faculty once they decide what they want to do academically. We help them get promoted and be successful in that area. However, what I learned was that often people of color don't feel that their values are aligned with their institution's, which was a reason why they ultimately left. The same is true for women. An academic career is often sold as one where you can be whatever you want and do whatever you're passionate about. But that doesn't always apply to everybody. There are also other issues to navigate like pay inequities, getting looked over, and so on. So I wanted to create a program that could show people of color and women that they can align their values with their institutions' wherever they are.

Later on, I got coached by a physician coach who changed the way I thought about myself in 30 minutes. It was an amazing experience and I thought to myself that I needed to be able to do that. I got certified as an executive coach and started coaching students, residents, and whoever else I could. It was then when I really began to understand what I think my purpose is, which is to help people reach their full potential so they can make an impact wherever they are.

After I did all that, there was also a need for a program for the underrepresented students at the School of Medicine to provide specialized support to them so they could have

a sense of belonging and self-efficacy. URIM students often voice that they don't feel supported or that they don't have a sense of belonging. Dr. Wallach and the educational team have been interested in these issues for a long time. They found an opportunity to bring me in, and now I'm creating a longitudinal cohort program for minoritized students. It starts as a month-long summer pre-matriculation program that prepares students for Human Structure and MCT, as well as all these aspects around creating your own sense of belonging and how to align yourself with your medical school/institution wherever you are. There are additional phases throughout the four years of medical school, as well as other programs I'm working on.

In addition to that, we're creating programs for any of our students who maybe aren't performing as well as they want in their first year or for Step 1. Again, I'm focusing on helping everybody reach their full potential, so I'm making sure everybody in the school has what they need. My role as the Director of Holistic Student Success and Advocacy is a perfect fit for all of these objectives.

EC: For students interested in any of those programs, how can they get in touch with you?

CN: Email is the best way to reach me. I do have a personal website called [WhiteCoatProject.com](http://WhiteCoatProject.com) where I can be contacted. As time goes on, I plan to have reached all the underrepresented students at IUSM. I try to personally reach out to everyone in the first year class; so within the next three years, I will have talked to everybody at least one time. We're hoping to increase awareness about my role and what other resources students can access beyond me.

EC: Can you tell us more about your work as the co-chair of the Diversity Council? What kind of work has the council done so far?

CN: I co-chair the council with Dr. Sylk Soto, who is amazing. We wanted the Diversity Council to become an advisory council so that institutional leaders could vet things with us. We started out by inviting leaders to hear about the things they were doing. But now this year, leaders bring multiple initiatives and issues to the attention of the council. Last month, we met with Dennis Murphy and Dave Ingram to talk about the Dr. Susan Moore case, the findings, and what was going to be changed. So now we're a voice of the faculty for all things diversity, equity, and inclusion. Sometimes we also see things where we need to be different. One of our previous

faculty members did a study with the students looking at all of the spaces at IUSM and cataloguing the pictures on the wall. Thanks to the study, we were able to advocate for two paintings to be commissioned and put up on the walls: one of an African-American physician and one of a woman physician.

One of the members also noticed that the dedication of Chihuly's sculpture in the Med-Sci building was dedicated to James Watson, who was a very vocal racist and sexist. We wrote a letter to the dean and asked that it be repurposed and dedicated to somebody else. They agreed and changed it. We also try to take on one project per year. This past year our project was about faculty of color and leadership. We found that the school actually puts in a significant amount of money into funding leadership programming for faculty of color but for some reason, it's not translating into actual changes in the diversity of our leadership. So we were then able to present to the school and say, "Look at all these people who are interested in these positions and how much you are investing in these people, but you're not seeing that return on investment."

EC: For the past year, most medical schools and institutions have been trying to address and increase diversity. Have you noticed anything at IUSM that's been different from other places?

CN: I'm in a consortium with the AMA and we talk about this with institutions from all over the country. It's interesting because IUSM is actually a little ahead of the curve. We have faculty development programming that specifically targets underrepresented faculty and other initiatives. Regarding our mistreatment reporting, there are some schools that I think are maybe a little ahead of us in the way that they're able to be transparent with their mistreatment reporting. Some places are creative in how they are transparent. However, the structure of our mistreatment system is actually ahead of a number of places and I think our openness and attention we're putting on DEI issues shows a lot of progress. I definitely think there's always more that we could be doing but I hope we maintain the momentum we have right now.

EC: Is there anything IUSM or the diversity council has in the pipeline for the future that excites you?

CN: I'm excited about all the initiatives that are taking place right now. The hospital systems now have a new Associate Dean for Health Equity Research for the School of Medicine and Chief Health Equity Officer for IUH, Dr. Tucker Edmonds, who is amazing. I'm excited about the relationships the Diversity Council is building with the leadership of the medical school and the hospitals. This year, we saw growth in our membership too; there's more leaders interested in being on the council and I'm excited to see it become a voice. I can't wait to see where it goes.

EC: Have there been any challenges or barriers that you've experienced along the way?

CN: For sure. One of the things that has always attracted me to academia is that it kind of is a little bit of a bubble and there's a lot of emphasis on trying to make everybody get along. And so it's definitely surprising sometimes when people don't agree with the work that we do. Some aren't interested in it and sometimes actively fight against it, so that surprises me at times. But if you look outside of academia, it's not that unusual. Not everybody wants to do this work and talk about racism, sexism, how we can move forward and be different. Some people feel like it's not true, that it's not American. That's definitely out there and you have to navigate that in a thoughtful and creative manner. Often you have to have lots of evidence and spend lots of money that doesn't need to be spent in order to make things happen.

EC: For the underrepresented students at our school, do you have any advice for them?

CN: There are lots of resources and you're not alone. There are many people who care about the success of our underrepresented students because they understand how special they are and how hard it is to get to where they are considering the circumstances of our society. If you're having a hard time or you're not feeling included, please reach out.

EC: Why is it important to you to increase diversity in gender, ethnicity, and cultural experience, especially in medicine?

CN: Society is a long, infinite game. In order to not have our society and civilization crumble, we have numerous complex problems to solve going forward. We can't solve those problems if we're only leveraging a small portion of the people on our planet to solve complex problems. We need everybody to be able to do that. We need to be able to leverage the creativity, the passion, the curiosity, the reason and logic of everyone on the planet. The only way we can allow people to be their full selves and to contribute to these complex problems is if there is equity and inclusion for these people to reach the point where they can give their input and make an impact. Just think of all of the people who have been looked over and ignored; we're not hearing what they have to say and have to contribute. That is not only a tragedy, but it just won't work. We're not going to make it without all of us. We have to dismantle all the things that are preventing us from leveraging all the minds of the people we have.

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