

CORNELL UNIVERSITY'S MAGAZINE EXTRA This special section, a bonus issue of the university's Ezra magazine, highlights ways Cornell initiatives intersect with philanthropy and engagement of Cornell alumni, parents and friends.

AVERY AUGUST IS BUILDING A PIPELINE FOR FACULTY DIVERSITY

Avery August, Ph.D. '94, is a professor of immunology in the College of Veterinary Medicine, the university's vice provost for academic affairs and co-director of the Cornell Center for Health Equity, which spans the Ithaca campus and Weill Cornell Medicine. Last year, in recognition of his research and help getting Cornell transfer students involved in undergraduate research, he was named a Howard Hughes Medical Institute professor.

The full conversation is available at **news.cornell.edu/** AveryAugustQA.

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"WE WANT TO REACH FACULTY HERE IN ITHACA AND FROM WEILL CORNELL MEDICINE, TO ENCOURAGE COLLABORATIONS AROUND RESEARCH AND EDUCATION ..."

- Avery August

How do you manage and balance all your roles at Cornell?

The interesting thing is, all the roles I have involve things that I'm really passionate about.

I look at all the things I'm doing each day and rebalance them as I go along. The thing that's the most difficult is to maintain the level of research discussions with the students I have in my lab, and keeping up on the most recent research in my field. Because all the other things come with deadlines and research doesn't, I'm always trying to make sure that I'm paying attention to that as well.

Tell me more about the Cornell Center for Health Equity.

This dual-campus center is partnering with local communities in New York City and upstate New York to figure out why health outcomes vary among demographic groups and how to eliminate those differences.

We had a soft rollout and an opening symposium last March at Weill Cornell Medicine in New York City; it included faculty from Ithaca and New York City, including Weill Cornell Medicine and Cornell Tech, and I think it was a great success.

Since then, the center has been expanding. We had our first pilot grant initiative this last year, small seed funds that the center is providing to members to catalyze research collaborations across the campus. We funded two of those pilot grants, one in New York City and the other in Ithaca. One will examine barriers to care for black patients with advanced symptomatic osteoarthritis, and the other, to be carried out in Ithaca, will evaluate a model of care on improving health outcomes for people who inject [illegal] drugs.

The idea is to continue to offer pilot grants with the goal of building a robust, extramurally funded collaborative research center. Another of the missions of the center is to train the next generation of researchers in health equity and to increase the proportion of students going to medical school who are interested in this area.

How do you and Dr. Monika Safford handle co-directing the center?

Monika is more of an executive director and is the co-director for Weill Cornell Medicine, and I largely lead the efforts and initiatives up here in Ithaca.

Monika brings a physician's perspective and a view of health equity from a social perspective. I'm a basic scientist, and we would like to recruit more individuals who work in the basic sciences to look at their work through the lens of health equity, to work on the biology of health equity that complements the social view of health equity.

The other thing I bring to this position is my work in developing faculty, developing investigators and developing the next round of leadership.

Much of what we're trying to do is break down some of the structural barriers that exist between the two campuses. We want to reach faculty here in Ithaca and from Weill Cornell Medicine, to encourage collaborations around research and education in the areas of health equity.

How long have you been interested in health equity?

I work on fundamental immunology. My research group tries to understand how the immune system works and how it influences the development of inflammatory diseases. And for many years we have been trying to understand how allergic asthma and lung inflammation develop.

One could look at this work and say, this is not health equity. But I work on a disease that predominantly affects communities of color. So I've always been interested in that space. As a lab-based scientist, you come at it from a biology perspective, but you soon realize that much of it has to do with policies, urban communities that are affected, and health care access that leads to exacerbation of disease.

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"Many students today are interested in working in health equity, and they come at it from many angles and perspectives."



"Once you hire, you have to ensure a faculty member arrives in a place where they want to stay." many angles and perspectives. I think the catalyzing feature here is this glaring inequity that you see in health access and health care.

What has changed regarding diversity and how faculty candidates are recruited and hired here?

One of the things we're spending a lot of time on – and that we've been changing – is, who is applying for faculty positions here? How do we broaden the pool of applicants? We understand that many potential faculty, particularly those of color, may look at Cornell and say, "I won't even apply." And so the first place to start is to reach out to those potential faculty and say, "We welcome your applications. We want to cast as wide a net as possible to get the best people here."

Even before I was in this position, Cornell began a process to ensure that for each faculty search, someone at the college level would ensure the application pool is diverse, and if it isn't, for the search committee to revisit the process they used to develop that pool.

We have [since] developed a faculty pipeline tool, to provide all departments with information to assist in searches, such as identifying institutions that are graduating significant numbers of women with Ph.D.s in STEM fields and those that are graduating significant numbers of students of color with Ph.D.s. Departments can then reach out to those institutions as they develop their search, so that they can ensure that [potential faculty] know about Cornell and that we want them to apply.

That is in addition to what the provost has already done: bridge funding to colleges for five years to support their efforts in hiring faculty who diversify our ranks. He has since tripled his commitment, from the equivalent of 25 percent salary to 75 percent.

Once you hire, you have to ensure a faculty member arrives in a place where they want to stay. We ask departments to develop a mentoring plan for new faculty. Approaches already exist, but we want to make sure that they are deliberate, that there are processes in place.

We are calling it pre-emptive retention. It's ensuring that the faculty member has what they need, and that we are recognizing them for all their work, so that they don't look elsewhere. If faculty are doing extraordinary mentoring, they should be recognized for that. It's making sure in multiple ways that people feel that their work is valued here. If we're able to do that effectively, and another institution calls them, they'll say, "I'm happy at Cornell – I don't need to go anywhere else."

Tell me about your proposal to enhance and promote the research experience for transfer students in the biological sciences?

When community college transfer students come here, they're already at a disadvantage



finding research experiences compared to students who came here as freshmen, who have had two or three years to find such opportunities. The goal is to enhance their ability to do research here.

We're still in the startup phase. We started meeting with a small cohort of students who arrived in the summer. We have a related course, Preparing Future Researchers, that focuses on mentoring, community development, peer interactions and sharing ways of being successful.

We're hearing from the students that this is something they've really been looking for.

How has your background prepared you for your multiple roles today?

I went to community college and was a transfer student; I went to a non-Research I institution, but I also then attended Weill Cornell Graduate School of Medical Sciences. Those experiences led me to develop the program promoting research experiences for transfer students.

I understand the culture and the community at Weill Cornell Medicine; I think that has allowed me to be more effective helping to get the cross-campus center established.

I'm an immigrant; my mother was undocumented when she first came to this country. We have DACA students here, and I can understand how those students feel.

When I look at what I can do as a scientist, working in a community that intersects with health equity and also in training students of color, I am trying to make sure I'm able to mentor and give back – to students of color, to faculty of color, as a chair of microbiology and immunology in the College of Veterinary Medicine, and now as vice provost.

So much of this work keeps coming back to this idea of "increasing the pipeline." It's a goal that encompasses undergraduates, graduate students, and faculty recruitment and retention.

Opposite page:

Drs. Avery August, left, and Monika Safford, codirectors of the Center for Health Equity, at the center's opening in March 2018. **Above:** August in his immunology lab with members of his research team.

GIFTS IN ACTION _____

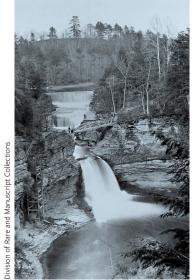
Endowment: A stable dynamo

Income from invested funds has provided capital to build and sustain Cornell since its founding.

The Morrill Act of 1865 granted land to New York state for the establishment of a university. Ezra Cornell purchased the scrip for these parcels of land from the state and held it, knowing it would increase in value over time. His payment to the state for the scrip, the revenue from the eventual sale of the land to others, and Cornell's additional outright gift of \$500,000 are the three sources of the university's original endowment.

Since then, many others have had the foresight and dedication to contribute to the endowment, and Cornell continues to employ investment strategy and time to grow its overall value. Cornell University's long-term investments returned 10.6 percent for the year ending June 30, 2018, bringing the endowment's value to \$7.23 billion, an increase of \$445.6 million from the previous fiscal year after taking into account net payouts in support of the mission of the university.

Together with other sources of revenue, payout from endowment is used to support every priority at Cornell, providing for grant aid and other student needs, faculty salaries and stipends, research, programs in every college and corner of the university, facilities, and the physical beauty of our campuses. Endowment funds are funds held in perpetuity, and the university may only spend a portion (as determined by the board of trustees) of the earnings from the investments. The solidity of permanence and the generative power of invested capital make endowment a kind of stable dynamo powering all corners of the university with a managed flow of operational cash.



Left: Triphammer Falls, Ithaca, New York (approx. 1884). Between 1829 and 1838, Ezra Cornell engineered a tunnel and then a dam to capture Fall Creek water power for the plaster and flour mills of Col. Jeremiah S. Beebe

