DIVERSITY & INCLUSION AT HHS
“One Department — One Mission — One HHS”

WINTER/SPRING 2016 ISSUE

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The U.S. Department of Health and Human Services (HHS), Office of Human Resources (OHR), Diversity & Inclusion (D&I) Division proudly presents the 2016 Winter/Spring Issue of Diversity & Inclusion at HHS — a quarterly newsletter that showcases efforts to promote D&I across HHS. We sincerely hope that you find this publication informative, educational and enjoyable.

HHS DISPARITIES ACTION PLAN

The Office of Minority Health (OMH) is leading the charge to put into practice the HHS Action Plan to Reduce Racial and Ethnic Health Disparities, at all levels of the Department and in the communities with which we work. With this Plan, HHS Commits to continuously assessing the impact of all policies.
and programs on racial and ethnic health disparities. The five goals of the Plan are to:

- Transform health care
- Strengthen the nation’s health and human services infrastructure and workforce
- Advance the health, safety and well-being of the American people
- Advance scientific knowledge and innovation
- Increase the transparency, accountability, and efficiency of HHS programs

To download a copy of the Plan, in PDF format, or to request additional information, visit the OMH portal on HHS.gov.

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**INFÓRMATE: ACF’S MONTHLY UPDATE FOR AND ABOUT THE LATINO COMMUNITY**

The Administration for Children and Families (ACF) promotes the economic and social well-being of families, children, individuals and communities with partnerships, funding, guidance, technical assistance, and training. Additionally, the ACF administers more than 60 programs with a budget of more than $51 billion.

One of the main goals at ACF is to be more inclusive of and responsive to the needs of the Latino community.

**Infórmate** is the ACF’s update for and about the Latino community. Leaders of the community receive monthly updates about the agency’s programs and initiatives designed to help people start a path to economic self-sufficiency, and to help build successful communities and families. These include job training, child care and Head Start, temporary assistance for families struggling to get back on their feet and other vital human services.

Should you have any questions about Infórmate and other related initiatives, please contact Jesus Garcia, Special Assistant, ACF Office of Communications, at: jesus.garcia@acf.hhs.gov.

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**ACL ADMINISTRATION ON INTELLECTUAL AND DEVELOPMENTAL DISABILITIES**

The Administration for Community Living’s (ACL) Administration on Intellectual and Developmental Disabilities (AIDD) provides financial and leadership support to organizations in every state and territory in the United States to ensure that individual with developmental disabilities and their families can fully participate in and contribute to all aspects of community life.

AIDD manages four grant programs established by the Developmental Disabilities Assistance and Bill of Rights Act of 2000, oversees the President’s Committee for People with Intellectual Disabilities, and administers the disability provisions of the Help America Vote Act. In each state or territory, the four grant programs form a developmental disabilities network, or DD Network.

To learn more about AIDD, please visit the Administration’s site.

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**STAFF PICKS**

If you want to know more about diversity and inclusion, following are examples of free online training opportunities available via HHS Learning Management System.

- **Global Diversity** *(Module: LCHR_01_A96_LC_ENUS, 2.2)*
  This course highlights the characteristics of inclusive workplaces and benefits of supporting diversity. It also covers accommodation practices and the challenges and barriers to inclusion in the workplace.

- **Diversity on the Job: Diversity and You** *(Module: PD_07_A02_BS_ENUS, 2.2)*
  This course identifies strategies to help you become aware of your attitudes toward diversity; increase your acceptance of diverse cultures, people, and ideas; and become an advocate for diversity within the workplace.
The Day-to-Day D&I “Lunch & Learn” Series, is an initiative sponsored by the HHS/OHR Diversity and Inclusion (D&I) Division to help create a more inclusive environment at HHS. Below is the schedule for the next six sessions:

**HRSA – 5600 FISHERS LANE, RM. 5W07 • 1-888-946-7602 (PASSCODE: 3538517) • 12 P.M. – 1:00 P.M.**

**Wednesday, April 20, 2016**
**UNCONSCIOUS BIAS – B. Winona Chestnut, Diversity Program Manager, Office of Equal Opportunity, Civil Rights and Diversity Management, HRSA.**
**Adobe Connect:** [Click here](#)

**NIH (OFF-CAMPUS) – 2115 EAST JEFFERSON STREET, ROCKVILLE, MD 20852, BB-57 • 12 P.M. – 1:00 P.M.**

**Wednesday, May 18, 2016**
**ANTI-BULLYING PREVENTION TRAINING**
Danny L. Dickerson, Acting Director, Diversity and Inclusion (D&I) Division, Office of Equity, Diversity and Inclusion (EDI), NIH
**Teleconference:** 1-877-356-1736 (34030772#)
**WebEX:** [Click here](#) (Access code: 629 826 632)

**Wednesday, June 15, 2016**
**GUIDANCE ON FOSTERING A SAFE WORKPLACE FOR SEXUAL AND GENDER MINORITY EMPLOYEES**
Albert E. Smith, Jr. SGM Portfolio Specialist, EDI, NIH
**Teleconference:** 1-877-668-4493 (622495771)
**WebEX:** [Click here](#) (Access code: 622 495 771 • Password: diversity)

**HHH BUILDING, RM. 405-A • 1-800-857-0127 (PASSCODE: 7682500) • 12 P.M. – 1:00 P.M.**

**Wednesday, July 20, 2016**
**FEDERAL EMPLOYEE VIEWPOINT SURVEY (FEVS) HHS RESULTS**
James L. Egbert, Human Capital Strategist
Office of Human Resources, HHS

**Wednesday, August 17, 2016**
**PERSONALITY TYPES: WORKPLACE CONFLICT & COOPERATION**
James Coffey, Organizational Development Consultant, Federal Occupational Health, HHS

**Wednesday, September 21, 2016**
**ALTERNATIVE DISPUTE RESOLUTION (ADR)**
Neil Kaufman, Esq., Chief, ADR Division and Patrick Chapman, Esq., Dispute Resolution Specialist, Alternative Dispute Resolution Branch, Departmental Appeals Board, HHS

For further information or to request reasonable accommodation call 202-260-6675 or e-mail: diversity@hhs.gov. Please be alert to location and remote access updates via HHS News E-blasts.
The New Inclusion Quotient (New IQ)

Len Gerald, HHS Diversity Program Manager, D&I Division, OHR, HHS

One of the major issues in fostering inclusive and diverse work environments and realizing the full potential of our workforce is to properly measure and improve an inherently intangible aspect of group interactions so that employees feel that they are “...able to bring their whole self to work.” To help accomplish these goals, in 2014, the U.S. Office of Personnel Management (OPM) introduced the “New IQ” or Inclusion Quotient.

What this means for anyone interested in inclusion metrics and data from the federal sector is that now we have metrics in place and a year of data to make government-wide comparisons at all levels.

What is Inclusive Intelligence? Inclusive Intelligence is the intentional, deliberate, and proactive acts that increase work group intelligence by making people feel they “belong” and are “uniquely” valued. Research confirms that workplace inclusion is a contributing factor to employee engagement and organizational performance.

In addition, the New IQ index scores are calculated using a subset of 20 questions from the Federal Employee Viewpoint Survey (FEVS). This metric is then grouped into 5 Habits of Inclusion: Fair, Open, Cooperative, Supportive, Empowering. Hence, the New IQ is built on the concept that individual behaviors, repeated over time, form the habits that create the essential building blocks of an inclusive environment.

As a part of the Day-to-Day D&I: Special “Lunch & Learn” Series, I provided the background and resources to help you better understand the New IQ, access resources and metrics you can use on the job, and provided small meaningful steps which you can take TODAY so that our workplaces are not just models of inclusion on paper, but embody “the intentional, deliberate, and proactive acts which increase inclusion.”

D&I DID YOU KNOW?

FACT: Our brains are wired for efficiency and speed. This basic wiring of the brain can work against us in communicating and working effectively across differences.

FACT: Brain research shows that our brain state directly impacts our perception. Our brain states impacts how we perceive others, events and our ability to foster relationships across differences.

FACT: The neocortex is the area of the brain where we can imagine a new reality, where compassion and empathy reside. The competence of inclusion lies in our ability to intentionally access the neocortex. When we learn to recognize and manage our brain states, we increase our effectiveness in communicating and working together across differences and build new neuropathways.

Source: Day-to-Day D&I: The New IQ

Below are all the resources from this “Lunch & Learn” session, including a very informative video produced by OPM which explains the New IQ:

- The New IQ video by OPM
- D&I Dashboards and Metrics
- 2014 Federal Employee Viewpoint Survey: Employees Influencing Change
- UnlockTalent.gov Infographic
National Institute on Minority Health and Health Disparities (NIMHD) Expands Innovative Program to Hispanic Youth

Kelli Carrington, MA, Acting Director, Office of Communications and Public Liaison, NIMHD, NIH

Less than a third of high school students get the recommended 60 minutes of physical activity a day, while one in three children is overweight or obese. Unfortunately, this puts them at risk for Type 2 diabetes, heart disease, and cancer. Furthermore, children and adolescents spend much of their time at school, presenting a great opportunity to make sustainable positive change.

Fuel Up to Play 60, an in-school nutrition and physical activity program, is empowering children to make healthier food choices and get up and “play” for at least 60 minutes a day. The program, which is coordinated by the GENYOUth Foundation through collaboration between the National Football League, the National Dairy Council, and the U.S. Department of Agriculture, is the largest of its kind, with initiatives in more than 73,000 schools.

But the program may miss some children with the greatest need. Hispanic/Latino youth are much more likely to be overweight or obese than their White counterparts and less likely to get the recommended amount of exercise. That is why last fall GENYOUth launched Fuel Up to Play 60 en Español to reach out to Spanish-speaking communities. Recognizing the potential impact that Fuel Up to Play 60 en Español could have for Hispanic/Latino communities, the National Institute on Minority Health and Health Disparities (NIMHD) was ready to join efforts to promote the program.

“I believe that language should never be a barrier to battling childhood obesity and applaud Fuel Up to Play 60’s commitment to bridging cultural and linguistic gaps to meet the needs of the Spanish-speaking community so that we can all strive together for a healthier world,” said Eliseo J. Pérez-Stable, M.D., who took over as NIMHD’s Director in September 2015.

One in four children in the United States is Hispanic/Latino, and that proportion is expected to rise to one in three by 2040. In addition to language barriers, Hispanic/Latino communities may face other obstacles to healthy lifestyles, including access to healthy food.

Fuel Up to Play 60 en Español addresses these barriers by providing information, step-by-step guides to set up physical activity or nutrition programs at school, and grants to implement the program. Students collaborating with program advisors have started dance clubs, healthy snack bars, in-class exercise breaks, and other activities all across America.

NIMHD — whose mission is to promote research to improve minority health and reduce health disparities — is promoting the program through social media and other communication channels. NIMHD has a dedicated webpage directing parents and educators to a wealth of resources in Spanish, and plans to work with other organizations to spread the message and get them involved.

The benefits of programs such as Fuel Up to Play 60 en Español are likely to go beyond helping children become physically fit. Evidence suggests that children who are more active physically are also less stressed, are better able to learn, and have higher self-esteem. “NIMHD envisions a world in which all people have an equal opportunity to live long, healthy, and productive lives,” said Dr. Pérez-Stable. “The launch of Fuel Up to Play 60’s new Spanish-language site and resources brings us a step closer to that world.” For more information Fuel Up to Play 60 en Español, visit the Initiative’s portal.
On Tuesday, November 10, 2015, in the Small Auditorium of the Hubert H. Humphrey Building, the U.S. Department of Health and Human Services (HHS), Office of Human Resources (OHR), Talent Acquisition Division (TAD) presented “The Journey from Active Duty to the Senior Executive Service” – a Veterans Day Observance to honor current and transitioning service members and all veterans by recognizing their service to our country. This was webcast to reach a nationwide audience.

Opening Remarks were provided by Mary Wakefield, Ph.D., R.N., HHS Acting Deputy Secretary, who highlighted the tremendous work by HHS to leverage assets in support of veterans. She noted, however, that there are additional opportunities to address inequities and disparities in the well-being of veterans. Further, Dr. Wakefield pointed out that the Department has plans in motion not simply to tap this “reservoir of talent,” but also to retain veterans, and ensure their professional success at HHS.

The keynote speaker was Walter Harris, Chief Operating Officer, U.S. Food and Drug Administration (FDA), who shared his unique perspective as a federally employed veteran and senior leader. A veteran of the U.S. Air Force, Mr. Harris has more than 20 years of leadership and management experience in the private sector and in the federal government. This includes managing at the executive levels in the areas of public health operations, healthcare operations, information technology, and organizational development.

The Observance’s guest speaker, Hakeem Basheerud-Deen – Director of Veterans Services, U.S. Office Personnel Management (OPM) and a 24-year U.S. Air Force Veteran – provided a status update on veterans hiring and retention across the federal government. Mr. Basheerud-Deen, in partnership with Federal agencies, Veterans Service Organizations, and other stakeholders, leads government-wide outreach, training, hiring and recruitment to increase veteran representation.

D&I DID YOU KNOW?

Every year, on November 11, Americans celebrate Veterans Day to honor the brave men and women who are serving, or who served, in our Nation’s Armed Forces. Originally called Armistice Day, it commemorated the truce between the Allies and Germany in World War I, which went into effect on the eleventh hour of the eleventh day of the eleventh month in 1918.

The first Armistice Day was observed on November 11, 1919. Public gatherings and parades were held, and all businesses were suspended for two minutes to commemorate the occasion. In 1954, following a campaign to honor all veterans, the name was changed to Veterans Day. In 1968, Congress moved Veterans Day to the fourth Monday of October; in 1974, however, President Gerald Ford returned the observance to November 11. According to the U.S Census Bureau, there are over 21 million living military veterans in the U.S.

Source: History.com

The observance is available On-Demand in its entirety. For more information about the HHS Veteran’s Employment Program, contact David “Kelly” Williams, HHS Veterans Employment Program Officer (VEPO) at: Kelly.Williams@hhs.gov.
Quite often, it is felt that having unconscious biases is a negative thing and should not be discussed or revealed; however, the reality is that we all have them and, for the most part, they are responsible for our day-to-day decision making.

Cognitive neuroscience continues to inform us that our biases impact most decisions we make about people. This can influence how we assess people and situations, cast judgment, and make decisions, all of which are influenced by our educational, religious, and cultural backgrounds, as well as personal experiences.

Bias has a purpose, and recognizing our biases is vital, for not all biases are bad. For instance, we make daily decisions on what is appropriate, safe, healthy, etc., by engaging in an “auto value decision making process.” Psychologist Joseph L. Doux called this as an unconscious “danger detector” that determines whether or not something or somebody is safe even before we can consciously make a determination.

However, according to Howard Ross, Chief Learning Officer, Cook Ross, Inc., while we are generally convinced that our decisions are “rational,” in reality, most human decisions are made emotionally, and we then collect or generate facts to justify them.

The Health Resources and Services Administration (HRSA) recognizes that workplace biases can negatively impact the Agency’s ability to recruit, develop, and retain top talent to carry out its mission. The HRSA Office of Equal Opportunity, Civil Rights and Diversity Management (OEOCRDM) offers a one-day Understanding Unconscious Bias workshop for managers and supervisors as part of a series of efforts employed by OEOCRDM to recognize the effect biases have on personnel decisions and the Agency’s overall ability to fulfill its mission.

For more information on this workshop and/or to take the journey of discovery, please contact Dr. LaKaisha Yarber at: Lyarber@HRSA.gov to learn more about how our Understanding Unconscious Bias Workshop can lead your hiring officials down a path of awareness and conscious decision making.

SAVE THE DATE

On Thursday, April 20, 2016, the HHS/OHR Division presents Day-to-Day D&I: Unconscious Bias. The session will take place at HRSA, 5600 Fishers Lane, Rm. 5W07, Rockville, MD, from 12 p.m. to 1:00 p.m. You can also join via teleconference (1-888-946-7602, Passcode: 3538517) or Adobe Connect.

Earlier this year, Francis S. Collins, Director M.D., Ph.D., Director, National Institutes of Health (NIH), reaffirmed the NIH’s commitment to the principles of equal employment opportunity (EEO), diversity, and inclusion. Dr. Collins called upon each and every member of the NIH community to join in this important rededication.

The NIH Office of Equity, Diversity, and Inclusion (EDI) helps to advance these principles through programs and services that are focused on making NIH the best place for diverse talent to work and discover. To this end, last year we launched a new customer-centric website.

This year, The EDI Blog, our latest launch, is another way that EDI is recommitting itself to you and our promise “to cultivate a culture of inclusion where diverse talent is leveraged to advance health discovery.”

Visit The EDI Blog at: http://edi.nih.gov/blog

Each month, new articles relative to equity, diversity, and inclusion will be published — in the form of news, opinions, and community stories. The goal is to further the understanding and knowledge of readers about very important concepts.

Here are a few featured articles to look for:

- Opinions: “Unconscious Bias and the Public Servant” — A Three-Part Series
- Communities: “How to Use Your EEO Office”
- News: “From the Director: EEO and Diversity and inclusion Policy Statement”

We are excited to share The EDI Blog with you and we look forward to your response to this new space! You can subscribe to the EDI Blog by sending an email to EDI-request@list.nih.gov.

In the coming weeks, we will also be sending out information about how you can submit your work for publishing.

To learn more about EDI, including, D&I and EEO-related trainings, initiatives, data and policies, visit the EDI portal at: http://edi.nih.gov.

You can also follow EDI on:
- Twitter: twitter.com/nih_edi
- Instagram: www.instagram.com/nih_edi
- YouTube: www.youtube.com/user/EDIstandard
To celebrate and highlight the diversity and tremendous contributions of American Indians and Alaska Natives, the U.S. Department of Health and Human Services (HHS), and the Intradepartmental Council on Native American Affairs (ICNAA), held a commemorative event, on Tuesday, November 12, 2015, from 10 a.m. to 12 noon, in the Great Hall of the Hubert H. Humphrey Building.

The theme of the 2015 Observance was “Honor Our Elders: Our Past, Our Present, Our Future.” The ceremony featured remarks by Mary Smith, Deputy Director, Indian Health Service and Kathy Greenlee, Administrator and Assistant Secretary for Aging, Administration for Community Living. Emil Her Many Horses, Museum Specialist, National Museum of American Indian (NMAI) was the keynote speaker and gave a presentation on a project that involved the importance of Elders in Native Communities. In addition, Native American veterans were recognized for their service, there was a demonstration of three Powwow style dances, and three HHS funded tribal grantees discussed their experiences implementing elder programs in their communities.

D&I DID YOU KNOW?

American Indian and Alaska Native Heritage Month started as an effort at the turn of the 20th century to gain a day of recognition for the significant contributions of the “First Americans.” Dr. Arthur C. Parker — proponent of American Indian Day and Director of the Museum of Arts and Science in Rochester, N.Y. — persuaded the Boy Scouts of America to set aside a day for the “First Americans,” which they did for three years.

On September 28, 1925, Rev. Sherman Coolidge, Director of the Congress of the American Indian Association issued a proclamation, which declared the second Saturday of each May as American Indian Day, and contained the first formal appeal for recognition of Indians as citizens. The first American Indian Day in a state was declared on the second Saturday in May 1916 by the governor of New York. Finally, in 1990 President George H. W. Bush approved a joint resolution designating November 1990 "National American Indian Heritage Month."

Source: [Nativeamericanheritagemonth.gov](http://Nativeamericanheritagemonth.gov)

For further information about the Observance, contact Ashley Martin at: [Ashley.Martin@hhs.gov](mailto:Ashley.Martin@hhs.gov)
On November 19, 2015, the Federal Asian Pacific American Council (FAPAC) held its first career fair at the Washington Adventist University (WAU), Takoma Park, MD – an educational institution with a diverse student body, including a large number of Asian American students.

The FAPAC Career fairs help federal agencies expand their outreach and recruitment efforts in search of excellent applicants.

The event at WAU was a great success, with the collaboration of more than 30 federal agencies and organizations. Over 300 individuals from WAU and affiliated high schools attended to learn more about federal government career opportunities, such as internships, and full-time and par-time vacancies.

HHS and FAPAC have established a solid partnership, including ongoing cooperation on FAPAC Career Fairs. Led by Glorimar Maldonado, Chief Recruitment Officer, Office of Human Resources, Talent Acquisition Division, the HHS Operating Divisions present at Career Fair included the National Institutes of Health (NIH), the Center for Medicare & Medicaid Services (CMS), and the Health Resources and Service Administration (HRSA).

Ms. Maldonado works collaboratively with key community and federal stakeholders to improve the recruitment, retention and professional development of all underrepresented groups in the federal workforce. In addition, she is coordinating the participation of the HHS/OHR Talent Acquisition Division, Indian Health Service (IHS), HRSA, and the U.S. Food and Drug Administration (FDA) at the upcoming FAPAC Career Fair that will be held on Friday, April 22, 2016, at Montgomery College in Rockville, MD.

**SAVE THE DATE**

On May 9, 2016, HHS will hold the Agency Forum to celebrate the Asian American and Pacific Islander (AAPI) Heritage Month Observance. The theme of the Forum will be “Walk Together, Embrace Differences Build Legacies,” and will take place at the Masur Auditorium, Building 10 (Clinical Center), NIH Campus, Bethesda, MD. The Forum is free to all HHS employees, who may join in person or via remote access.

A new FAPAC Chapter has been established at the NIH, and was inaugurated on January 16, 2016. Dr. Jian Yang, NIH Chapter President, was presented with a plaque of recognition and was photographed with a few Chapter members and Tyrone Banks, Strategist, Asian American and Pacific Islander Portfolio, Office of Equity, Diversity, and Inclusion (EDI), NIH.

The NIH Chapter is in partnership with the leadership of the NIH’s EDI to advance NIH Chapter’s agendas. The NIH chapter is open to all NIH employees.

For additional details about the Council, visit the [FAPAC website](#).
HOLA FDA: The Hispanic Employee Resource Group (ERG) at the FDA

Gloria Sanchez-Contreras, Bilingual Press Officer, Office of Media Affairs, FDA

In October 2012, U.S. Food and Drug Administration (FDA) Latino employees came together to address the needs of Hispanics throughout the Agency and its Regional Offices. This resulted in collaboration with the HHS Hispanic Employee Organization (HEO) to examine and plan recommendations regarding Hispanic under-representation in the government, particularly at HHS.

The past few years have been a period of progress and learning. We began meeting regularly to choose a name, slogan and logo, and develop our mission, vision and by-laws. In January 2015, we were officially ratified by the FDA Commissioner.

During this time, we collaborated with the FDA Office of Equal Employment Opportunity (OEEO) to organize the FDA’s Hispanic Heritage Month Observance and employee educational fairs, and contributed quarterly articles for the OEEO Insight Newsletter.

We have also worked with the Office of Health and Constituent Affairs on the “Ciencia Scholars Program” – an annual program that hosts Latino college students to introduce them to the FDA and encourage them to pursue careers in science.

Since our inception, we have offered a Spanish Conversational Group, which has enjoyed great success and growth at the FDA campus in White Oak. Frequently, we organize social events to build comradeship and provide support for new and existing employees.

Little by little, we are becoming stronger and learning more about the different mandates and programs at HHS to increase the recruitment, hiring and retention of Latinos. We are joining forces with these programs and external organizations who share the same mission.

The work of our ERG is a small part of the great initiative to increase Hispanic representation. We are proud of our continued accomplishments, and believe we are making a difference.

If you would like to learn more about HOLA FDA or join, please visit our website or contact Gloria Sánchez at: gloria.sanchez-contreas@fda.hhs.gov.

You can also follow HOLA FDA on Facebook.
Building, Renewing, and Strengthening Existing Relationships: Tips for Fostering a Safe Workplace for Sexual and Gender Minority (SGM) Co-Workers

Albert E. Smith, Jr., SGM Portfolio Specialist, EDI, NIH

In light of the U.S. Equal Employment Opportunity Commission (EEOC) holding that discrimination against an individual based on sexual orientation and gender identity is prohibited under Title VII, more attention has been given to promoting and ensuring a safe workplace for Sexual and Gender Minority (SGM) employees.

As more individuals are bravely stepping forward and identifying in the workplace as SGM, the call for greater understanding and awareness is imperative to ensure a safe and inclusive environment for all.

Creating a safe space for SGM employees demonstrates to the world HHS’ continued commitment to diversity and inclusion in the workplace and providing world-class customer service to the public.

So, here are a few tips to consider as you build, renew, or strengthen existing relationships with SGM co-workers.

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GET FAMILIAR

Using the correct terms can go a long way toward making your co-worker feel like the workplace is sensitive to the SGM community. Getting familiar with sexual orientation and gender identity terms and concepts demonstrate cultural sensitivity, awareness, and knowledge.

To learn more about SGM terms and definitions, visit: http://edi.nih.gov/people/sep/lgbti/safezone/terminology.

GET EDUCATED

- Register and attend NIH’s Safe Zone Training and other workshops that encourage workplace equality: http://edi.nih.gov/people/sep/lgbti/safezone.

- Take initiative and seek out opportunities to increase your awareness and understanding of differences.


RESPECT

Respect how people choose to name and identify themselves and their experiences. Moreover,
understand that you only know someone’s orientation or gender identity after they tell you, and know that this might change over time or based on situation. Thus, it is of great importance to respect the privacy of SGM people and do not “out” them to others.

DON’T ASSUME

Never assume a person’s gender identity or sexual orientation based on secondary sex characteristics or what you hear in passing.

CHALLENGE

Challenge stereotypes and confront homophobic, heterosexist, cisgender and/or privilege — regardless of who is present. Interrupt — and do so unapologetically. Report any behavior that violates the Agency’s anti-harassment, discrimination, and EEO diversity policy.

INTEGRATE

Include SGM co-workers in your work. No one wants to be excluded from the after-work happy hour. Further, when speaking up or providing educative moments on SGM related topics, know that you might be assumed to be SGM yourself. Resist the urge to correct people. Experience the oppression and watch your sensitivity and empathy expand.

FAMILIARIZE

Familiarize yourself with policies, procedures, and resources and demand a workplace environment that affirms and respects the dignity of all persons irrespective of differences.

BE VISIBLE

Presume that, wherever you go, there may be SGM individuals present who are wondering how safe the environment is for them—so, show support. Go to events, champion equality causes, use inclusive language.

Now that you have been provided these tips, you are well on your way towards creating an inclusive workplace for your SGM co-workers. We hope that these tips will serve as valuable and accessible practices to integrate as you work alongside and provide quality service to SGM people and their communities.

Today is a great day to start supporting equality for all. Join us as we make our workplace and communities a safe place to work and discover.

Learn more about the SGM Portfolio at NIH by visiting: http://edi.nih.gov/sgm.
Summary Calendar of Upcoming Events

**DAY–TO–DAY D&I: “Lunch & Learn” Series, 12:00 p.m. – 1:00 p.m.**

- **Wed., April 20, 2014:** Unconscious Bias
- **Wed., May 18, 2016:** Anti-Bullying Prevention Training
- **Wed., June 15, 2016:** Guidance on Fostering a Safe Workplace for Sexual and Gender Minority Employees
- **Wed., July 20, 2016:** Federal Employee Viewpoint Survey (FEVS) HHS Results
- **Wed., August 17, 2016:** Personality Types: Workplace Conflict & Cooperation
- **Wed., September 21, 2016:** Alternative Dispute Resolution (ADR)

**Mon., May 9, 2016 –**

Federal Asian Pacific American Council (FAPAC) Pre-Conference Agency Forum, in observance of Asian American and Pacific Islander (AAPI) Heritage Month, at the Masur Auditorium, Building 10, NIH Campus, Bethesda, MD.