

Article

Diversity in the Life Sciences

The Life Sciences Profiles of Color Project

By John Mack

PMN76-03

Submit comments to editor online at:

<http://www.forums.pharma-mkting.com/showthread.php?t=6075>

This article is part of the June/July 2008 issue of *Pharma Marketing News*.

For other articles in this issue, see:

<http://www.news.pharma-mkting.com/PMNissueJun08archive.htm>

Published by:

VirSci Corporation

PO Box 760
Newtown, PA 18940
infovirsci@virsci.com

On October 14, 2007, Dr. James Watson, winner of the Nobel Prize as co-discoverer of DNA's molecular structure and former chancellor of New York's Cold Spring Harbor Laboratory, was quoted in the *Times of London* saying he was "inherently gloomy about the prospect of Africa" because "all our social policies are based on the fact that their intelligence is the same as ours—whereas all the testing says not really."

In response, Fard Johnmar, **HealthcareVOX** blogger, went "off topic" to comment on racist "gestures" like nooses hung on trees and doors and the brouhaha over Watson's remarks. Johnmar suggested that we should not waste our time condemning these incidents but rather counteract racist beliefs with communication:

"So, I have a simple suggestion for communicators of all colors and creeds. People are quoting the 'science,' IQ tests and SAT scores to suggest that Blacks and Whites are not of equal intelligence. They also rely on anecdotal evidence, saying 'look around, you can't help but notice that most Blacks don't take advantage of the opportunities they have in this country.' If we want to change these beliefs, we have to replace assumptions with the facts. Show people why they are wrong by citing examples of the quiet, unheralded contributions Blacks are making in business, science, education, law and other areas. Condemnation is good, but saying 'this is wrong' and going back to business as usual two weeks later is criminal." –["Off Topic: On Nooses, Watson, Racism & Why Actions Speak Louder Than Words"](#)

Johnmar cited a few names of Blacks that have made unheralded contributions to our society and more importantly he talked about his own experiences growing up in Harlem, NYC.

"I grew up going to a school system in a predominantly African American neighborhood. We were not rich. In fact, some of my neighbors were very, very poor and engaged in activities that were far from admirable. In addition, I was subtly told (by people from all backgrounds), that those who looked like me were less intelligent, capable and strong than whites. Over time, I began to internalize this message."

Luckily for Johnmar his elementary school teachers educated him "about the African Americans who helped build America. It's important to note that the people we learned about were not just entertainers," said Johnmar. "...the accomplishments of people like Bill Cosby and

Michael Jackson were wonderful. But, they also understood that we needed to see examples of people excelling in areas Blacks were not expected to, including policymaking, law and science. I learned about Dr. Charles Drew, whose efforts to develop blood storage technology helped save countless lives. I also came to enjoy the work of celebrated artists, James Weldon Johnson and Zora Neale Hurston. The list goes on. Over time, I recognized that despite what the wider world (and some in my own community) believed, Blacks were just as capable of creating, innovating, inventing and excelling as Whites."

Johnmar went on to say:

"So, I have a simple suggestion for communicators of all colors and creeds. People are quoting the 'science,' IQ tests and SAT scores to suggest that Blacks and Whites are not of equal intelligence. They also rely on anecdotal evidence, saying 'look around, you can't help but notice that most Blacks don't take advantage of the opportunities they have in this country.' If we want to change these beliefs, we have to replace assumptions with the facts. Show people why they are wrong by citing examples of the quiet, unheralded contributions Blacks are making in business, science, education, law and other areas. Condemnation is good, but saying 'this is wrong' and going back to business as usual two weeks later is criminal."

I took up Johnmar's challenge and suggested that we tell the stories of Blacks currently employed in the pharmaceutical industry. These stories, if told, could help inspire young Blacks seeking careers in the sciences and also help put a human face on the pharmaceutical industry, something I have suggested before (see, for example, ["Blogs and the Pharmaceutical Industry"](#)).

Life Sciences Profiles of Color Project

Thus was born the idea for "Life Sciences Profiles of Color" ([LSPOC](#)) project and blog.

Johnmar and I solicited the assistance of Craig DeLarge, Associate Director, eMarketing & Relationship Marketing at Novo Nordisk Inc. Craig is very well connected and volunteers as a mentor to young people interested in a career in the life sciences.

How people of color achieve success in the life sciences and what prepared them to assume positions of power and responsibility in the industry is often an untold story. The "Life Sciences Profiles of Color" (LSPOC) blog aims partially to fill this gap by:

Continues...

- highlighting the achievements and contributions of people of color in the Life Sciences industry, and
- encouraging and inspiring young professionals and students who are considering a career in the Life Sciences industry.

Industry Reputation

According to a recent Harris Interactive poll, the drug industry's reputation has declined over the past year despite programs like PPA and other efforts to improve it (see box, pg. 5). I don't believe, however, that greater engagement with customers by CEO's will help much. Greater engagement from ordinary employees telling us their stories—why they chose the life sciences, what challenges they had and met, etc.—would go along way to improving the image of the industry.



As an example, I offer "Clarence," the research scientist featured in GSK's TV ads about the difficulty of doing research in the life sciences. These ads resonated with me because Clarence is a real person, not a trained corporate communications specialist. At the time, I did not take any notice that Clarence was also a person of color. Now, in retrospect, Clarence is just the type of person whose story would be perfect for the LSOC project!

NOTE: Clarence Young is now Chief Medical Officer at Protez Pharma, a privately-held Philadelphia-based pharmaceutical company, with corporate headquarters and laboratories in Malvern Pennsylvania. See his bio [here](#).

Racism in the Pharmaceutical Industry

Of course, not all stories of people of color in the pharmaceutical industry are 100% positive or inspiring. Although Eli Lilly's chief financial officer and a senior vice president is Derica Rice, a black employee, Lilly is also being accused by dozens of current and former workers and the NAACP of racial discrimination "adding heft to an ongoing lawsuit that paints the company as hostile to black employees," according to a [story in the Indy Star newspaper](#).

Although Lilly has said that 16 percent of its employees are minorities, the Indy Star article notes that some outsiders say Lilly and the drug industry as a whole is vulnerable to racial charges because relatively few senior executives are minority.

"From what we can tell, the senior management ranks of major pharmaceutical companies are not particularly diverse, which makes them incrementally more of a target of discrimination suits," Les Funtleyder, a drug analyst at Miller Tabak & Co., wrote in a research note to clients.

Lilly and other pharmaceutical companies could counteract these conceptions about its diversity program by (1) critically evaluating the program, and (2) soliciting the stories from employees of color. They may not win the Nelson Mandela award for Health and Human Rights, but it could help.

Case Study: Dierdre Connelly

Perhaps its highest ranking Puerto Rican Lilly employee is Dierdre Connelly, president of U.S. Operations. At a lunchtime presentation during a drug industry conference, Connelly took a swipe at online forums that attract "disgruntled" sales reps,

Continues...



**Pharma
Marketing Talk™**
Interviews with Innovators

Racism in the Life Sciences: What Should be the Response?

Guests: **Craig DeLarge**, Associate Director, eMarketing & Relationship Marketing at Novo Nordisk Inc. and **Fard Johnmar**, founder of Envision Solutions.

A conversation about The Life Science Profiles of Color (LSPOC) project and blog, which highlights the vast achievements and contribution of people of color in the life sciences industries.

Some questions/topics covered:

1. Is there racism in the pharma and life sciences industries?
2. How did the idea for LSPOC come about?
3. What are the goals of the LSPOC project/blog?
4. How can people help?

Listen here:

<http://www.talk.pharma-mkting.com/show052.htm>

Craig DeLarge – the First LSPOC Story

Craig A. DeLarge, Healthcare Marketing Communicator



Professionally, Craig works as an internet marketing director at Novo Nordisk, a diabetes healthcare company, a life & career coach at Christian Stronghold Baptist Church and a marketing professor at Philadelphia University. He is a certified Gallup Organization Strengths Coach. His career has involved 20 years of marketing experience as a marketing researcher, advertising media director, product director, global eBusiness manager, and knowledge network manager for Johnson & Johnson, IMS America and Communications Media, Inc. and GlaxoSmithKline.

Academically, Craig has his MBA in Design Management from The University of Westminster, London, U.K., where his research focused on knowledge management, organizational storytelling, and professional service firm management. He has a Bachelor's Degree in Marketing from Philadelphia University.

What was your first job in the industry? Post college, in 1988, my first pharma industry job was as a client service analyst at IMS Health, a syndicated pharma marketing research firm which at the time was a part of Dun & Bradstreet

Which companies have you worked for? In 20 years, I have worked for IMS Health, (2 years), Communications Media, Inc (CMI/Compas) (5 years), Advanced Clinical Communications (0.3 years), Johnson & Johnson (10 years), GlaxoSmithKline (2.5 years), Novo Nordisk (1.7 years)

What is the best advice you have received that has helped your career? "Be the President of your piece of the business" and "take your boss solutions, not problems"

Why did you decide to work in this industry? At first for income and prospective growth as it offered the most money out of school (and I was married with 2 children shortly our of school). Today I stay in the industry to contribute to making the world a healthier place.

What has been your most challenging opportunity? Being resourceful, resilient and persistent in the face of barriers, some related to my race/gender/lack of pharma sales experience. Getting a product management opportunity without an MBA or pharma sales experience after 10 years of planning, strategizing and performing in marketing research and advertising roles.

What advice would you give a young person considering this industry? Study science in undergrad and save business for graduate school. Research the broad number of opportunities available in the global Life Sciences industry. Finish school with relevant work experience to accompany your degree even if you don't finish in 4 years.

How is your career different than what you envisioned when you started? I started out envisioning that I would go into fashion, graphic design and/or advertising and stay there indefinitely but I glad that obstacles and other opportunities forced me into marketing research before pharma advertising, and then on to product management and eMarketing with teaching (in the evenings) and career coaching interspersed in there.

Where did you go to school and what is your educational background? I received my B.S in Marketing from Philadelphia University (after spending my first year of college at Peirce Junior College) and my M.B.A. in Design Management from University of Westminster, London, U.K. which I earned via a 2.5 year online program.

What has been the biggest thrill of your career? The biggest thrill of my career so far has been developing and leading the team which launched the professional repositioning of Pepcid AC which resulted in its regaining #1 professional recommendation share.

What are the benefits and drawbacks of the industry's focus on diversity initiatives? While I cannot think of any drawbacks, the benefits of the industry's diversity initiatives, racially and otherwise, have been greater reflection of our customers in our organizations with the corresponding benefits of greater innovation and openness, customer empathy and broader more relevant perspectives. While there is always more to be done, in 20 years, I have seen pharma manufacturers come along way. That said, the service and vendor sides of the industry are seemingly lagging behind its clients.



Connelly

describing sites such as CafePharma as “outlets for people who don’t have the courage to speak out with their ideas” for improving their role and the performance of their companies. Some called her remarks courageous and others called them outrageous and she was criticized for:

- being "Far removed from reality" (see [this post at World of DTC Marketing](#))
- accusing sales reps complaining on Cafe Pharma of being cowards
- masquerading as a sales rep
- speaking out instead of staying home and minding her business

I was present at Connelly's presentation.

Pat Clinton, Editor-in-Chief of *Pharmaceutical Executive Magazine*, read Connelly's resume when he introduced her—it was quite chock-full of promotions up the corporate ladder, starting off as a sales rep. Connelly grew up in Puerto Rico and, according to her, was overwhelmed when she was first hired. Her family and friends were proud of her then and probably even more so now. I wanted to hear more about her life and how she made it to the top—more in her own words telling her personal story. Unfortunately, I didn't ask her when I had the chance!

But Connelly's story must also be viewed through the lens of some “cowardly” Cafe Pharma denizens who recently engaged in a discussion of the merits of diversity at Lilly. The thread is entitled: "Diversity is killing Lilly." It's a very popular and heated discussion with over 11,000 views since it began back in May, 2007, with this comment:

"As a long term employee, it absolutely kills me to see what diversity has done to Lilly. Over the last 10 years or so, the increase in diversity (read blacks and females - not thought) has been inversely proportional to the effectiveness of the company. It looks like it will only get worse with the quotas we have at every level of the company."

Connelly may have benefited from this program. But instead of dissing reps who post problems on Cafe Pharma, Connelly should study the criticisms and use her own story to counteract them. In her keynote speech, however, she said she used to

Continues...

Pharma's Reputation Sinks A Little More

Source: [Pharmalot](#)

The latest Harris Interactive poll that examines American attitudes toward corporate America offers a sobering view of and for the pharmaceutical industry. Only 26 percent of Americans view the industry favorably which, of course, means that 74 percent have a negative or neutral impression. And 52 percent are firmly negative, which places pharma slightly below big oil, and above tobacco.

Bob Ehrlich of DTC Perspectives notes the warning signs: “The drug industry must decide what improving their reputation is worth. They could accept the second lowest ranking or decide how to make it better. Clearly their current approach has fallen short and anyone charged with making it better has largely failed, unless the goal was a controlled decline. I know all the good things the drug companies do, and why prices are higher, but you need not convince me.

“It is the 74 percent of Americans who do not like you that need the convincing. Will it happen? Maybe it will if a bunch of new wonder drugs get discovered or if prices are drastically reduced. Otherwise,” he writes, “do not look for the second-to-last reputation spot to be vacated soon. It is a challenge that must be dealt with by the ceo’s or they risk significant legislative and public backlash.”

Of course, this is not new. Unfortunately, the industry has been slow to respond these past few years and only recently has shown signs that the message has been received. Bob makes an important, however, which is that the ceo’s must deal with this. Ironically, most ceo’s are increasingly remote and, when they do appear, rarely deviate from a carefully controlled script. So here’s a hint to the ceo’s - tell the lawyers to relax and go engage your customers in a series of candid discussions.

look at Cafe Pharma but stopped doing that when she became president of U.S. Operations.

If Ms. Connelly reads this, I hope she tells her personal story in her own words (not the dry facts, which anyone can find on Wikipedia, but how she overcame obstacles to get where she is and what motivated her to do it).

How You Can Help

The **Life Sciences Profiles of Color Blog** (<http://www.lspoc.blogspot.com/>), plans to showcase the accomplishments of people of color from a wide array of companies, organizational functions and life sciences industry segments. You can participate by:

- submitting your story via an [Online Questionnaire](#) (or email to cadelarge@yahoo.com) and granting permission to post your image and responses on this blog,
- recommending others you think should be featured on the blog, and
- sharing news about the LSPOC Project with your colleagues throughout the industry.

Over time, the LSPOC Project hopes to expand its efforts by creating opportunities for individuals from diverse backgrounds to communicate, network and collaborate. Another goal is to provide people with opportunities to mentor others seeking to enter or advance in the Life Sciences industry. Won't you join us?

Pharma Marketing News

See the following pages for additional information regarding racism and diversity issues facing the medical community and the life sciences industry, including:

- **AMA Commentary on Achieving Racial Harmony for the Benefit of Patients and Communities**
- **Diversity on the Ad Agency/Vendor Side**
- **Obama and Pharma: A More Perfect Union**

Experts Consulted

The following experts were consulted in the preparation of articles for this issue.

- **Craig DeLarge**, Associate Director, eMarketing & Relationship Marketing, Novo Nordisk Inc., cadelarge@yahoo.com
- **Fard Johnmar**, Founder of Envision Solutions, fjohnmar@envisionsolutionsnow.com, +1 646.723.2341

Pharma Marketing News

Pharma Marketing News is an independent, free monthly electronic newsletter focused on issues of importance to pharmaceutical marketing executives. It is a service of the Pharma Marketing Network—The First Forum for Pharmaceutical Marketing Experts—which brings together pharmaceutical marketing professionals from manufacturers, communications companies, and marketing service providers for wide ranging discussions and education on a multitude of current topics.

Pharma Marketing Network & Pharma Marketing News provide executive-level content, professional networking & business development with permission-based emarketing opportunities.

[Subscribe Online](#) • [Download Media Kit](#) • [Request a Rate Card](#)

Publisher & Executive Editor

John Mack

VirSci Corporation

www.virsci.com

PO Box 760

Newtown, PA 18940

215-504-4164, 215-504-5739 FAX

<mailto:johnmack@virsci.com>

AMA: Achieving Racial Harmony for the Benefit of Patients and Communities

In a commentary published in the July 16, 2008 issue of JAMA, Ronald M. Davis, MD, Immediate Past President of the American Medical Association (AMA), stated that the “AMA failed, across the span of a century, to live up to the high standards that define the noble profession of medicine” with regard to upholding principles that “compel physicians to treat each other, as well as their patients, without prejudice.”

In an article published in that JAMA issue, authors review and analyze ‘the historical roots of the black-white divide in US medicine.’ “This panel of experts, convened and supported by the AMA,” wrote Davis “found that (1) in the early years following the Civil War, the AMA declined to embrace a policy of nondiscrimination and excluded an integrated local medical society through selective enforcement of membership standards, (2) from the 1870s through the late 1960s, the AMA failed to take action against AMA-affiliated state and local medical associations that openly practiced racial exclusion in their memberships—practices that functionally excluded most African American physicians from membership in the AMA; (3) in the early decades of the 20th century, the AMA listed African American physicians as “colored” in its national physician directory and was slow to remove the designation in response to protests from the National Medical Association (NMA); and (4) the AMA was silent in debates over the Civil Rights Act of 1964 and put off repeated NMA requests to support efforts to amend the Hill-Burton Act’s ‘separate but equal’ provision, which allowed construction of segregated hospital facilities with federal funds.”

The AMA has established several goals for the coming years in order to “move forward on a path toward eradication of prejudice and its harmful effects and to achieve harmony...in health care...”

Measurable outcomes are an important part of achieving goals and the AMA is preparing a biennial report comparing the demographic characteristics (age, sex, and race/ethnicity) for all physicians and medical students.

Data for 2006 reveal that the proportion of African Americans was low among all physicians and medical students (2.2%). There were no African American AMA trustees in 2006.

In 2004 the AMA, the National Medical Association, and the National Hispanic Medical Association formed the Commission to End Health Care Disparities, which “invigorated” the “Doctors Back to School” program. This program connects physician volunteers to students in under-represented groups, from elementary schools to undergraduate colleges, to encourage these students to consider careers in health care.

Diversity on the Ad Agency/Vendor Side

Diversity is not only an issue for pharmaceutical companies. It is also an issue on the vendor and agency side of the business.

Craig DeLarge, in his LSPOC blog profile, closed with this statement: “While there is always more to be done, in 20 years, I have seen pharma manufacturers come along way. That said, the service and vendor sides of the industry are seemingly lagging behind its clients.”

The issue of diversity—or lack thereof—in the NYC advertising agency world was highlighted recently in the AdAge blog post “Agencies Have Funny Way of Showing ‘Commitment’ to Diversity” by Ken Wheaton who criticized the lack of ad agency presence at a recent New York City Commission on Human Rights public meeting.

“... it’s not fun to sit there and put faces and names to the stories you hear in the industry,” wrote Wheaton. “It’s not fun to see grown men and women wrestling with a mix of pride and frustration, to sense that they’re just this close to throwing their hands up in defeat and that you, an agency executive, are partly responsible. It’s uncomfortable to hear a 20-something black man who has an agency job call this ‘the most discouraging business to be in.’ It isn’t easy to try to distill the cases of racial discrimination from those of talent discrimination, to parse the inside stories and personal grudges that haunt a corner of the industry that most executives probably don’t even know exist.”

“There are many reasons why the agency world looks more like a gated community than a global one,” wrote Wheaton. “There is a lack of awareness in certain minority enclaves; portfolio schools are expensive. The starting pay stinks for qualified candidates who can get better jobs with marketers. Not all of these are excuses.

Continues...

"But they start to sound that way when the executives in question don't have the decency to give the problem its due, don't have the balls to show up in person and look these people in the eye.

"Not showing up also allows charges to go unanswered. Rafee Kamaal, a TV producer, likened the industry to insects when calling for more attention to the matter. 'Roaches scatter when you shine the light on them.' Others said that a system of discrimination is 'embedded in the industry.' Euro RSCG was named-checked no fewer than three times in last night's meeting -- and it wasn't for enlightened hiring practices."

Comments to Wheaton's post include the following:

"The problem isn't NYC tho. As I and others can attest, it's not just a New York thing. If the will and the stomach for seeing the mess out in the open were there, you could hold hearings in every city from Orange County, NJ to Orange County, CA and you'd find exactly the same level of collusion and bias in effect."

"I've seen what happens when you speak out in this industry. I've seen it up close and personal. It's not pretty what can be done to you. Personally, I've had enough. It's a broken system and there are too many people who enjoy maintaining the status quo."

Obama and Pharma: A More Perfect Union

Sorry. This is not about what will happen to the profits of the pharmaceutical industry should Barack Obama become president. It's about Obama's [speech on race](#) and how it relates to diversity and racial issues in the pharmaceutical industry.

Obama spoke about discrimination:

"But for all those who scratched and clawed their way to get a piece of the American Dream, there were many who didn't make it - those who were ultimately defeated, in one way or another, by discrimination."

Is there discrimination in the pharmaceutical industry? Maybe no more than any other industry, but I see some troubling signs: "[Are Some Drug Companies Promoting a Racist Workplace Culture?](#)" and "[Why are so many blacks leaving Centocor?](#)" (a post on Cafe Pharma -- warning: racist and hateful remarks) and "[Lily-White Lilly. Homophobic and Sexist Too?](#)").

But Obama's message was also one of hope, especially in young people:

"This union may never be perfect, but generation after generation has shown that it can always be perfected. And today, whenever I find myself feeling doubtful or cynical about this possibility, what gives me the most hope is the next generation - the young people whose attitudes and beliefs and openness to change have already made history in this election."

and

"The fact is that the comments that have been made and the issues that have surfaced over the last few weeks reflect the complexities of race in this country that we've never really worked through - a part of our union that we have yet to perfect. And if we walk away now, if we simply retreat into our respective corners, we will never be able to come together and solve challenges like health care, or education, or the need to find good jobs for every American."

So instead of criticizing the pharma industry over racist incidents, which may be more common than we think, I think we should "work through" the complexities and solve the challenges in a positive way.

A few people have discussed the need to offer young people of color who are interested in working in the pharmaceutical industry positive role models through the stories of people who have "made it." And the people of color who have made it should not only tell their stories, but also help mentor young people however they can.

I know that there are people out there that are already doing this. Perhaps Obama's speech will encourage them to come forward and not feel cynical or doubtful, but pass their learnings on to the next generation with the hope that it will make a more perfect union.

-- John Mack, [Pharma Marketing Blog](#)