Global Learning Objectives:

1. Utilize an intersectional lens to recognize and develop approaches and opportunities to mitigate bias, social inequities, and systemic racism that undermine health and create challenges to achieving health equity at individual, organizational, and societal levels.

2. Describe historical examples of institutional racism in science and medicine, as well as the present-day role of structural racism and its impact on the health care system.
   a. Understand differences between individual, interpersonal, and structural racism and how the three levels of racism are implicated in medicine.

3. Recognize how privilege, oppression, exclusion, and white supremacy contribute to racism in medicine and develop mitigation tools.
   a. Develop an action plan to manage patient encounters that may be racist and develop “allies” with members of the medical team.

4. Explain how racism impacts diagnosis, treatment, and health outcomes for Black and African American, Latinx, Native, Indigenous, Asian, and other minoritized groups.

5. Examine how the use of racial and ethnic designations in research, medical education, and patient care can impact the practice of medicine and the attitudes and behaviors of medical trainees and health care providers.
   a. Understand race and ethnicity as social constructs.
   b. Understand the use of racial and ethnic categories in NIH-funded research.
   c. Examine the modern uses of race (or conflating genetics with race) to address medical questions.

6. Discuss health systems level approaches to address racial/ethnic disparities in resource allocation, education and training, hiring and promotion.
   a. Identify ways in which health professionals can support and advocate community-led efforts to improve health.

*Adapted from the University of Pittsburgh School of Medicine and Boston University School of Medicine.*

---

**YEAR 1**

*Required Summer reading prior to joining medical school*

*New Student Retreat: Privilege and Diversity in Medicine Timeline*

ITM: Everyday Bias for Health Professionals

- What is bias and unconscious bias
- How does bias contribute to poor health outcomes

Unconscious Bias and the history of racism in Clinical Anatomy

- Unconscious Bias in Clinical Anatomy Primer
- Address historical definitions and beliefs about race shaped by science and medicine (skull size, skin thickness, unethical misuse and treatment of black bodies to advance medical
knowledge where whites were the beneficiary, acknowledging medicine’s racist past that includes taking black bodies out of graves to be used in anatomy labs)

What is Race?: Exploring Race as a Social Construct
● Introduction of genetics science dispelling race as a biological factor
● Exploring historical context of race as a lever of political power and oppression
● Introduction to Critical Race Theory and Medicine

Examining Privilege and Race
● Recognizing privilege
● How does privilege contribute to racism

What does it mean to be an Anti-Racist?
● Ibram Kendi, “How to be an Anti-Racist”
● What does it mean to be an ally and take action?

Medical Racism
● How did racial difference become medicalized?
● Race in medical decision making: clinical decisions based on race
● Experimentation, Exclusion and Harm

Race as a Proxy for Social Determinants of Health
● Socio-political differences exacerbating health disparities for minoritized populations
● Why do different health outcomes exist for different races?

Intersectionality

Structural Competency

Systemic Racism as a Social Determinant of Health
● What is Systemic Racism?
● How does Systemic Racism perpetuate health disparities for minoritized populations?
● How does White Supremacy impact health
● Structural Racism as an Adverse Childhood Experience (ACE): Toxic stress and intergenerational trauma as contributors to poor health outcomes for patients of color

YEAR 2

Why does Racial/Ethnic Diversity Matter in Academic Medicine
● Explore dearth of racial/ethnic diversity in academic medicine
● Limiting factor in education, care and research

Allyship
● How to cultivate the skills to become an ally
Law, Policy and Race
● How law and policy perpetuate health inequities

Health Justice
● Ethical and moral obligation to interrupt disparate suffering and disease amongst racial ethnic minoritized groups

CAPS: Literature as a Lens for Bias
● Consider race bias through fiction and non-fiction
● Complete Race IAT

TRANS: Interrupting Microaggressions in Medicine
● Skills to intervene

YEAR 3

OBGYN: Cultural Humility and Clinical Practice
● Examining cultural humility through a Latinx Transgender patient Case, discussion of structural racism and transphobia as SDOH

Intersessions I:
● Black American Amputation Epidemic Group Activity
● “Ed Talks”: Intersection of Race and Adverse Outcomes, and Racism as a public health threat
● The Hidden Curriculum and Strategies to Address Bias
  ○ Reflecting on race and racism in medicine (silent curriculum)
  ○ Complete Race IAT

Combating Imposter Syndrome and Stereotype Threat
● Addressing issues of inferiority
● Skill building to empower learners

Minority Tax and Conscripted Curriculum
● Understanding additional burden on minoritized faculty and students to teach, represent, work on behalf of their race/ethnicity

YEAR 4

Intersessions II
● When the target of bias is the physician
● “White-washing medicine”: Activity and reflection with custom created synthetic skin for suturing of all colors (as opposed to the only white skin we all learned to suture on)
● Health Equity at the Bedside including structural interventions to advance health equity

Elective: Structural Inequities and Health Care
Anti-Racism Project: A legacy project from graduating class

- Contributions of art, poetry, reflections, stories, etc. of anti-racism