SOCIAL JUSTICE IN MEDICAL EDUCATION

Social Justice in Medical Education is the concept that there should be equity in access, experiences, assessment, and opportunities for trainees in the health professions, with the goal of eliminating social, demographic, and economic disparities. The resources highlighted here include tools for ID educators to better understand and mitigate bias in recruitment and assessment. These can also serve as a starting point for the development of comprehensive curricula or other diversity, equity, and inclusion initiatives.

1. IMPLICIT BIAS TESTING
This is an important resource to understand your implicit biases (i.e., attitudes or stereotypes that affect your actions and decisions without your awareness). Implicit biases are distinct from biases that you already know you have and may choose to hide. There are 15 different kinds of implicit association tests (IATs) that you can take (e.g., race IAT, sexuality IAT, transgender IAT). I recommend this to anyone who is involved in faculty/staff/trainee/student recruitment/admission. Understanding your implicit biases helps you dissociate them from your actions and decision-making.
– Gerome Escota

2. UNDERSTANDING UNCONSCIOUS BIAS IN THE HEALTH PROFESSIONS AND HOW TO MITIGATE IT
This is a one hour webinar for those new to unconscious or implicit bias in health professions given by Diana Lautenberger. It is interactive, conceptual, and very engaging. She reviews key data to provide evidence for how implicit bias exists in our field and gives concrete, usable tips on how to address implicit bias.
– Darcy Wooten

3. HOW CLINICIANS AND EDUCATORS CAN MITIGATE IMPLICIT BIAS IN PATIENT CARE AND CANDIDATE SELECTION IN MEDICAL EDUCATION
This is a recent paper that provides step-by-step recommendations on how to reduce bias during recruitment. The strength of this paper is that it outlines an evidence-based approach to reduce implicit bias (e.g., common identity formation, perspective taking, consider the opposite). I recommend this to all program directors.
– Gerome Escota

4. UNDERSTANDING MICROAGGRESSIONS IN THE WORKPLACE
This is a PowerPoint presentation with three activities for the participants. At the end of each activity, there is time to circumnavigate the topic in the form of discussion. It defines the terms microaggression very well and, in the end, directs viewers to a YouTube video.
– Amit Sharma

5. BEST PRACTICES FOR RECRUITMENT AND RETENTION OF A DIVERSE STUDENT BODY
A one-hour webinar on one school’s experience with Holistic Review in medical school admissions and how this helped them with achieving a diverse student body followed by best practices from two medical schools on how they have been successful in designing programs to retain their diverse student body.
– Nate Warner
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6. **AAMC DIVERSITY AND INCLUSION**

This is a workshop that provides definitions and understanding of privilege and power. It can be used as part of a professional development series (both for faculty and trainees). The strength of this workshop is the inclusion of a team exercise that highlights various examples of privileges.

– Sade Arinze

7. **IN PURSUIT OF HONORS: A MULTI-INSTITUTIONAL STUDY OF STUDENTS' PERCEPTIONS OF CLERKSHIP EVALUATION AND GRADING.**

This study highlights student expectations in clerkship grading and the fact that mastery (a positive outcome) is weighted equally with "performance avoidance" (i.e., avoiding situations that may make a student "appear" incompetent, not a desirable outcome). Only 44% of students at Brown and UCSF felt that clerkship grading was fair. The authors note that a "performance oriented" learning culture is a driver of burnout. This is antithetical to the model that assessment drives learning. Students who identify as underrepresented were more likely to experience stereotype threat in the clerkship years. This work was, in part, the impetus for removing honors from the clerkship grading system at UCSF.

– Tara Vijayan