



What Happened and Why?

Evaluation of a Pilot Program to Address Bias and Discrimination for First Year Medical Students

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The Problem

- Bias and discrimination exists among health care providers
- Implicit bias alone may be a stronger predictor of patient outcomes than treatment processes
- Bias and discrimination curriculum should be a priority of all pre-health professional training programs
- Patients, medical students of historically marginalized identities are particularly impacted by bias and discrimination

The Program

Preparation:

- Collection of cases
- Development of learner and facilitator guides
- Facilitator Training

During First Course for First Year Medical Students:

- Large group introduction by second year medical students
 - Focus on setting expectations of open-dialogue, respect, and confidentiality
- Small group case-based learning (3 cases) lead by second or fourth year medical students with faculty support
 - Case 1: African American Cisgender-Male Student Interaction with Campus Police
 - Case 2: Cisgender-Female Student Interaction with Teaching Assistant
 - Case 3: Transgender Student Interaction with Peers and Faculty
- Large group wrap-up with personal narrative shared by case subject
- Campus resources provided



Methods

- Retrospective thematic network analysis
- Open-ended qualitative data
 - "Complete the following sentence: After participating in the 'What Happened and Why?' session, I feel..."
- First-round of exploratory coding using Affective Methods
- Multiple codes per response allowed

Results

- 18 codes identified
 - 1 code for negative reactions (4 data)
- Many students expressed:
 - Increased insight/awareness of bias and discrimination
 - Feeling empowered to confront bias and discrimination

Areas of Intrigue

- Increased positive feelings about CU SOM
- Disappointment with the school's responses within the cases
- Feeling less safe at CU SOM because of the knowledge that these cases had occurred in the past year

I Feel...

- "...Very privileged. Being a white male sometime[s] you don't realize how much other people need to worry about and deal with in their daily lives."
- "...Empowered to stand up against micro aggressions, for myself, my peers, and my patients."
- "Acknowledged as a sexual minority and safe to share concerns with CU faculty/staff."
- "Disturbed that such scenarios took place. It's frustrating that these things happen at the medical campus."

Implications

- Implementing curricula for health professional students is feasible and can facilitate conversations around the implications of bias and discrimination in healthcare

Next Steps

- What Happened and Why? Will be adapted and led for next year's first year class by student leaders of SNMA and WC4BL student leadership
- Pre- and Post- program data will be collected

Acknowledgments

- Mike Levy and Lauren Heery
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References

- Hall, W. J., et al. (2015). "Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review." *Am J Public Health* 105(12): e60-76.
- Karani, R., et al. (2017). "Commentary: Racism and Bias in Health Professions Education: How Educators, Faculty Developers, and Researchers Can Make a Difference." *Acad Med* 92(11S Association of American Medical Colleges Learn Serve Lead: Proceedings of the 56th Annual Research in Medical Education Sessions): S1-S6.
- Williams, R. L., et al. (2018). "Racial/Gender Biases in Student Clinical Decision-Making: a Mixed-Method Study of Medical School Attributes Associated with Lower Incidence of Biases." *J Gen Intern Med*.