What forms your identity? It’s key to coaching diverse med ed learners

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Being conscious of one’s identity doesn’t just help physicians connect with patients; it also helps them coach the next generation of doctors to professional success.

A textbook published this spring, *Coaching in Medical Education: Students, Residents and Faculty*, explores how successful medical school coaching programs further learners’ personal goals. Chapter 8, "Coaching and Ethics, Diversity, Equity and Inclusion,” looks at how coaches’ understanding of their own identities can help them fight the inequities facing medical students, residents and fellows from historically excluded racial and ethnic groups.

Separately, the AMA Academic Coaching in Medical Education Video Series features nine short videos that explore academic coaching competencies through hypothetical situations involving both experienced and inexperienced coaches. All of these videos can be accessed for free on the AMA YouTube channel and the AMA Ed Hub™.

It takes about 15 minutes

“We are very attached to our stories, our identities of who we are,” the chapter authors wrote. “But how do we know what those are and how we developed those identities?”

Each reader is encouraged to craft a personal story based on those beliefs. This process begins with simply completing the statement, “I am …” which could include being a white woman, an Indian man, a Black surgeon, a middle-aged physician. Think hard about your most important identities, the authors advised, but no more than two of them.
Then, reflect on the following:

- When did you first learn that there was something called gender, race, ethnicity or whatever is the basis of your strongest identity?
- How did you learn about this identity? Was it from a family member or a friend? What were the circumstances?
- What exactly was that experience or incident?

By consciously gathering this story in your mind, you can bring honor and awareness to your identity, shining a light on how it may influence how you make decisions. It can also help you reflect on how that identity has shaped your experiences, how it sends unconscious signals to the people around you, and how those signals affect the ways in which you interact with colleagues or direct reports who identify differently.

Academic medicine has a legacy of marginalization and continues to be shaped by structural racism, so it is important to be thoughtful in designing faculty development that is inclusive. This should be an ongoing endeavor, the authors noted, not a one-time activity.

The reflections that physicians gain in this exercise “are essentially meant to help us know ourselves better, such that we are more open and mindful about receiving other’s life experiences and are able to minimize the impact as educators and caregivers,” they wrote.

The chapter also includes guidance on ethical principles in the context of coaching, how inequities may exist for learners from racial and ethnic groups historically excluded from medicine, considerations in coaching a diverse group of learners, the ubiquity of bias and its structural basis, and the importance of self-awareness in overcoming bias.

For more insight on the new textbook, read this great Q&A with the lead authors, who are: Maya M. Hammoud, MD, Nicole M. Deiorio, MD, Margaret Moore, and Margaret Wolff, MD, MHPE. The textbook is part of the AMA MedEd Innovation Series, which provides practical guidance for local implementation of the education innovations tested and refined by the AMA Accelerating Change in Medical Education Consortium.

An earlier reference, *It Takes Two: A Guide to Being a Good Coachee* (PDF) focuses on what medical students, residents and fellows need to know to get the most out of a coaching relationship.

Get more guidance from the AMA on coaching in medical education.