3 starter steps for understanding, addressing racism in medicine

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Timothy M. Smith
Senior News Writer

Racism can be a discomfiting topic for anyone, but physicians may have uniquely troubling feelings about it when they consider the roles the U.S. health system has played in perpetuating racial inequities.

An AMA webinar, “Racism in Medicine: Historical Foundations and Strategies for Advancing Health Equity,” explores the roots of this phenomenon, as well as some of the many ways physicians can continue their health equity education and help chart a new course for their profession.

“This work is challenging,” said Emily Cleveland Manchanda, MD, MPH, director for social justice education and implementation at the AMA. “It’s deeply uncomfortable to wake up to the realization that you may be part of an unjust system. And this can be particularly true for white folks and people who are further on in their life or their careers.”

Defensiveness, denial and guilt are normal responses when coming to terms with racism in medicine, she noted, but it’s important to not to get hung up in those reactions.

“Feeling bad about things doesn't actually help anyone, neither yourself nor the rest of society,” Dr. Cleveland Manchanda said. “To the extent that you can channel that into motivation—such that it would inspire you to learn more, change behavior—then that might be productive.”

It is more useful to think of work to advance health equity “as part of my responsibility as a member of society,” she added. “I want [us all] to live in a just world—one where we have the opportunity to learn from and work alongside people who all have the resources and opportunities needed to live up to their full potential.”

Learn more about the groundbreaking series of CME courses on health equity from the AMA that is an outgrowth of the AMA’s strategic plan to embed racial justice and advance health equity.

URL: https://www.ama-assn.org/delivering-care/health-equity/3-starter-steps-understanding-addressing-racism-medicine
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Read about it

The first order of business is to commit to learning more about the issues, and to broadening your perspective.

“Follow people of color on Twitter and other social media platforms,” Dr. Cleveland Manchanda said. “Listen to books if you don't have time to read them.”

Heather McGhee, the author of *The Sum of Us: What Racism Costs Everyone and How We Can Prosper Together*, was featured during a the November 2021 AMA House of Delegates Health Equity Forum with Jack Resneck Jr., MD, now the AMA’s president. Find out more about her book and what public swimming pools can teach us about racism’s costs.

Meanwhile, the AMA Ed Hub™ Health Equity Education Center offers a wide variety of modules to help physicians confront injustice and advance equity.

Talk about it too

“As you as you start to learn more and more frequently notice the manifestations of racial inequity around you, I'd encourage you to also try to hold each other accountable,” Dr. Cleveland Manchanda said. “Challenge those racist ideas where you see them.”

She advised that physicians call their colleagues “into the conversation rather than calling them out,” noting that “we all have some degree of internalized prejudice and racism because we all operate and exist in a highly racialized society.”

Learn more in this Q&A with AMA member Faith Crittenden, MD, MPH, on calling out systemic racism’s impact in medicine.

Put awareness into action

As you learn more, consider how your own decisions in practice and in your community may be supporting false racial beliefs, as well as how you can boost neighborhood integration and other strategies to address upstream drivers of health inequity.
Likewise, think about which of your physician practice or health care organization policies and priorities should be revisited.

“Sometimes creating change just starts with asking the simple question of: Why did we design it this way?” Dr. Cleveland Manchanda said.

Asking questions is a great technique for physicians in clinical roles to drive conversations around compensation, advancement and inclusion, as well as quality and safety, she noted. Consider this one too: Are data stratified to ensure patient care and outcomes are equitable?

“We can't fix what we don't see,” she said.

Read more about how health systems will learn together to advance health equity.