A recent journal-article report found that resident physicians believe training on medical racism and bias would help improve their preparation to excel in residency. Furthermore, the institutions that oversee medical training also have, in recent months, shown the necessity of training on these topics. The Accreditation Council for Graduate Medical Education and the Association of American Medical Colleges have created competencies for training related to diversity, equity and inclusion.

While residents, faculty and administrators seem to understand how such training can help increase physician workforce diversity, build safe and inclusive learning environments and promote health equity, getting that content to busy residents remains a challenge. Enter the AMA GME Competency Education Program, which has launched a series of health equity educational courses and curriculum.

The AMA GME Competency Education Program delivers education to help institutions effectively meet ACGME requirements. The program provides an award-winning virtual experience, with quality education designed for residents on the go. It saves time and cuts administrative burdens with simple reporting tools. Request a demo.

Lessons that reshape health care

The aim of the health equity curriculum is to ensure resident physicians are equipped to understand and address the root causes of health inequities, including racism and other structural determinants of health. To that end, modules include case scenarios and quizzes tailored for resident and fellow learners. “The goal of creating this content is to fill what we believe is a gap in available content for residents who are looking to deepen their understanding of diversity, equity and inclusion,” said Emily Cleveland Manchanda, MD, MPH, director of social justice education and implementation at the AMA. “From wherever they are when they enter a residency program, we are trying to get them up to speed...
to the level we think is necessary—an understanding of the skills to address equity in medicine—before they take on independent practice.”

The courses are:

- “Basics of Health Equity for GME,” an introductory course that grounds learners in common definitions, concepts and frameworks of health equity and encourages further investigation, engagement and reflection.
- “Racism in Medicine: An Introduction,” an interactive course that takes learners through the historical social construction of race and the obstacles racism poses for the attainment of health and wellness.
- “Social Determinants of Health,” which helps build a foundation for recognizing and addressing the structural drivers and social determinants of health during a clinical encounter in order to improve outcomes and health equity.

Current subscribers have access to this curriculum on the AMA GME Competency Education Program now. If you’d like to learn more, click here request information.

**Filling gaps**

The uses for these courses are many, Dr. Cleveland Manchanda said. One key gap that some residency programs may have is the lack of a faculty member with specific health equity expertise. These modules can help.

“If you're in a training institution or a program where you don't have a dedicated faculty member with expertise in teaching about health equity, racism in medicine, and other core topics, then these modules can help support programs and ensure that their trainees are able to meet those competencies,” she said. “We hope that the modules are also useful for faculty who are looking to advance their own understanding.”

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.

The work to achieve health equity across the U.S. health system is vast. Ultimately, Dr. Cleveland Manchanda said, these modules help empower residents to advance racial justice and equity.

“Diversity trainings or implicit-bias trainings don’t really get to some of the root causes of health inequities,” she said. “We’ve created content that helps doctors develop an understanding of structural forces that create inequities. From there we can develop, identify and change policy that perpetuates inequity. We can identify the ways in which it shows up in our institutions and create pathways for
redress and restoring trust with the communities that have been harmed. That's what I'm hoping that folks will take away from this.”

Learn more about what residency programs can do to boost health equity.