

AMA curricular diversity and inclusion: outline for self-study and action plans

At the spring 2019 meeting of the *Accelerating Change in Medical Education* consortium, leadership teams from member institutions went through the following structured process to consider potential educational inequities in medical curriculum, assessment, and programming.

Consider multiple expressions of diversity

- racial/ethnic; LGBTQI; gender; socioeconomic status; first generation; religious; political

Examine potential sources of educational inequity

Informal messaging in formal curriculum

- Case vignette references to race, ethnicity, and socioeconomic status
- Naming biases in clinical examples
- Teacher dismissal of student questions regarding non-majority presentations or concerns
- Incomplete framing of equity issues (ignoring structural factors driving inequities)
- Training in bias for clinical realm, but ignoring bias in educational realm

Classroom experiences

- Critical mass of under-represented students
- Student mix in small group settings
- Diversity of teachers
- Microaggressions
- Blind spots to experiences of others

Clinical experiences

- Diversity of teachers
- Microaggressions
- Mistreatment from patients (explicit or implicit)
- Differences among student groups in educational opportunities (case mix, etc)

Structural issues See [AMA Guiding principles to protect medical students under-represented in medicine](#)

- Access to resources to promote student success: technology, environments, tutor, etc
- Diversity of mentors and advisers
- Social capital of students
- Student representation on committees
- Student-elected leadership
- Resources to process adverse experiences
- Building trust in system supports
- Examine for patterns of bias in:
 - scoring (classroom, peer, research projects, clinical, simulation)
 - grade distributions, AOA and other awards
 - promotion committee actions
 - narrative language of evaluation and letters of recommendation

Curricular content areas to support equity and inclusion

- Health Equity
- Structural and social determinants of health
- Structural competence
- Structural racism; anti-racism
- Cultural humility
- Health needs of specific diverse populations

Applying the AAMC Institutional Framework to assess **educational culture & climate**

Derived from AAMC guidance [Assessing Institutional Culture & Climate 2013](#) with select excerpts and some **modified** language to target issues related to educational programming

Reflective questions for educators

Institutional and Social Context

- What has occurred at the local and/or state level in the past year, or the past 10 or 50 years that affects students, faculty, and staff at your institution who are diverse with regard to socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age?
- Has the view of diversity and inclusion in academic medicine changed at your institution in the past year, or the past 10 or 25 years? How so?
- **Do activities that engage students in the community** involve individuals and organizations representing people from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups?
- What is the composition of the communities (with regard to socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age) from which students, and core teaching/advising faculty are recruited?

Structures and Policies

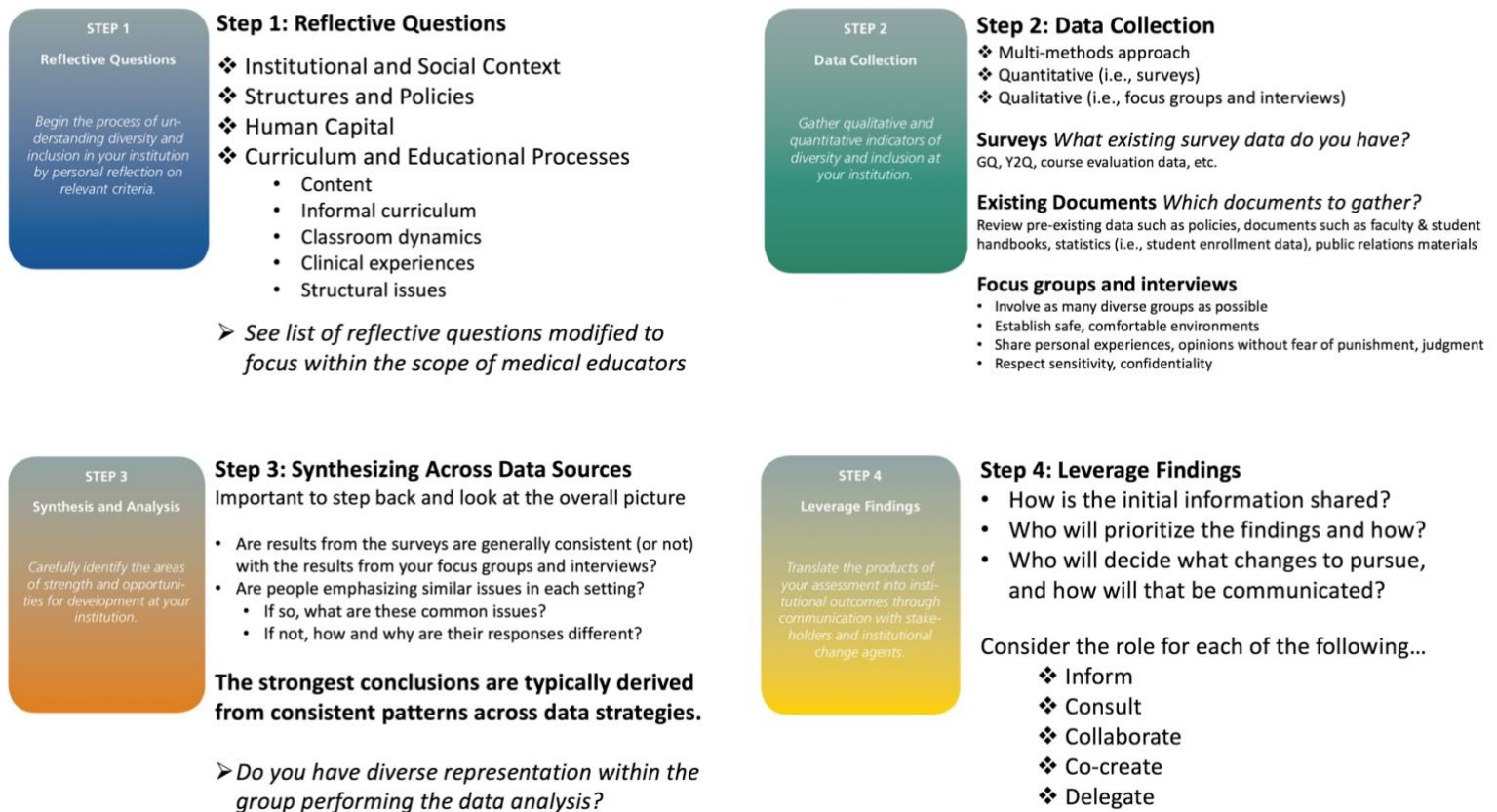
- To what extent does the institutional strategic plan integrate diversity and inclusion throughout educational programming and learning environments?
- Does the institution have programs in place to attract applicants from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups?
- What policies are in place to prevent and address instances of discrimination? Does the institution have an ombudsman to address complaints or concerns?
- What policies are in place to protect and support members from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups? For example, are there flexible schedules, maternity/paternity leaves, flexible financial aid options, adequate housing and transportation options, adequate student health programs?
- What data and reports are available **regarding the experiences of students** at the institution with respect to diversity and inclusion? Do these include information about climate and culture?
- To what extent do faculty, staff, and students work collaboratively and cooperatively in teams to examine issues in educational programming or learning environments?
- Is there a community advisory process to aid in the development of educational policy and practices?

Human Capital

- To what extent do **educational** administrators and core teaching/advising faculty serve as role models for a culture of diversity and inclusion?
- What is the structure for issues related to diversity and inclusion? Who reports to whom?
- What is the composition of the **educational administration and core teaching/advising** faculty with regard to socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age? How does the organization promote broad representation on service committees, yet avoid “minority tax?”
- What training programs are available to ensure **educational administrators, staff and core teaching/advising faculty** gain and/or maintain cultural competence?
- Does the institution offer **faculty and educational staff** from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups unique opportunities to develop in teaching, research, or practice? To what extent are these programs available across the institution rather than isolated within particular areas or units?

- How does the institution support mentoring of faculty, students, and staff from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups?
- Does the institution foster teaching avenues that assist faculty from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups in navigating the tenure and promotion process? To what extent are these efforts available across the institution rather than isolated within particular areas or units?
- What is the composition of **core teaching/advising faculty** by rank? What resources are in place to support the advancement of diverse faculty?
- What are the perceptions, attitudes, and interpersonal experiences of **students and core teaching/advising faculty** from different socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age groups? How do you know?
- Are the perceptions, attitudes, and experiences of faculty valued? Used for decision making?
- What collaborations exist with schools and universities that help build the medical student pipeline? How might the institution contribute more?
- How does the institution encourage students to practice in diverse and/or underserved areas?

Stages of review and action



Derived from AAMC guidance [Assessing Institutional Culture & Climate 2013](#)

Diversity & Inclusion Educational Culture & Climate Action Plan

1. Based on your team's review of the set of reflective questions and the list of [potential sources of educational inequity](#), what is a priority area for your educational program to enhance diversity and inclusion?

2. What [stage](#) is your institution currently at with that priority?

reflective questions

data collection

synthesis & analysis

leverage findings

3. What is the **first step** you will take to address this priority?

Consider the following:

necessary partners; support & approval; communication plan; potential barriers; monitoring progress