

# Novel Resident Curriculum to Combat Healthcare Disparities

## Emory Family Medicine Diversity, Equity and Inclusion (DEI) Curriculum

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### Call To Action

- A 2017 report by the Accreditation Council for Graduate Medical Education (ACGME) evaluating 297 ACGME-accredited residency and fellowship programs reported that there is a deficiency in preparing residents and fellows to address healthcare disparities.
- A novel curriculum approach tailored for medical providers, trainees, and staff is needed to address issues related to Diversity, Equity, and inclusion (DEI).

### Methods

- A group of residents with assistance from DEI leadership created a DEI curriculum for the Emory Family Medicine residency program.
- Curriculum objectives were heavily based on the AAMC “Anti-Racism Collection.”
- Some portions were taken directly from the curriculum and further expounded with ideas and input from members of the Health Equity Taskforce at Emory Family Medicine Residency Program.
- Each session was evaluated asking “Topic addressed questions commonly encountered in family practice,” “speaker demonstrated use of evidence-based material for his/her lecture,” and “overall effectiveness of speaker” with each question using a Likert scale from Strongly Agree to Strongly Disagree.

### Intervention/Curriculum

- The curriculum in AY 2020-2021 consisted of 8 topic areas separated into 12 different interactive lectures occurring during a 50-minute didactic session each month.
- Lecture topics included: microaggressions & discrimination, implicit bias, social determinants of health, race in science & medicine, medical ethics, LGBT+ Health, Advocacy, School-based medicine, maternal and child health, and transgender health. In AY 2021-2022, foundational topics were retained and additional topical sessions on HIV prevention, immigration, and criminal justice were added.
- Lecture objectives were created for each topic and given to each speaker in advance of each session.
- Sessions were taught by trained DEI staff and/or physicians or community experts and were attended primarily by residents but some sessions also included faculty and clinic staff. Nearly all residents were present, with exception of those on post-call.
- Effectiveness of individual lectures were assessed via evaluation surveys and a comprehensive pilot program assessment is being completed.



### Results

- Almost all (97%) of respondents who completed evaluations across all sessions strongly agreed or agreed that the topics addressed questions commonly encountered in family practice.
- Only 1 session had any “disagree” statements for the evaluation criteria
- All speakers were rated highly in terms of use of evidence-based material (average score: 4.70) and overall effectiveness (average score: 4.76)

### Summary and Conclusions

- There is a need for more training on combating healthcare disparities and providing concrete resources and tools for all resident physicians, from both practice and advocacy lenses.
- Incorporating DEI issues into existing curricula in residency training programs may be a good way to address this issue.
- Moving forward, we will utilize evaluation data and assessment of the current political and medical landscapes to determine new topics each year as well as providing foundational DEI topics annually in alignment with the institution’s strategic plan for DEI curricula development.
- This curriculum will serve as an exemplar for incorporating DEI curricula for other residency programs at Emory.