Sections Welcome	Overview	Video	Tel: 215.991.8985 © 2023 Drexel Univers Video Actor	ity Colleg	e of Medicine External Link	6102025 Discussion Questions
	 The Antiracism Curriculum to Promote Diversity, Equity, and Inclusion in Health Care Education was made possible by a generous grant from the Josiah Macy Jr. Foundation in 2021. The Antiracism module contains the following sections. Video Video 	Introduction Introduction	Dennis Novack Camille Burnett	2:03 2:22		
Medicine and Myth of Race	Although it is widely recognized that race is a social construct, biases and stereotyping based on outdated notions of biological differences persist in medical practice. Throughout U.S. history, prominent physicians have conducted pseudoscientific studies and contributed writings to "racial science" that have supported notions of the inferiority of people of color. Physicians and organizations, such as the American Medical Association, have been openly racist in the past. Today's health care students and providers can lead the way in providing just and					#1: We have inherited a health care system that has been shaped by structural and individual racism, and that delivers inequitable care. 1. How does this knowledge affect your attitudes on the care you want to deliver? 2. What are your thoughts and feelings about the history of the development of the concept of race and racism in th module? 3. How have (or might) your experiences of racism or your own racial
	equitable care to all. This section details when slavery began and highlights transgressions against Black people, some in the name of health care. The section concludes with our moral responsibility to recognize the trauma that our patients have faced and work to create effective therapeutic approaches to care.					stereotyping influence your attitudes and behaviors in the care of patients/clients? 4 What will you do to assure equity in your care of individual patients and in your institution? #2: Video - The U.S. Medical System is still Haunted by Slavery. What did you learn from this video? What was new information for you? How does this information help you understand why minoritized patients might not trust our health care system? What might you do to build trust with historically marginalized
	Video	Introduction	Will Justice & Leon	0:44		patients?
Racial Disparities in Health	Video Structural, cultural, and individual racism takes a severe toll on the health of Black, Indigenous, and people of	The U.S. Medical System is Still Haunted by Slave	McCrea ry	8:49		#3: List your understanding of the main factors that lead to health disparities in
	color communities. This toll includes increased morbidity and mortality when compared to White communities due to many factors, including wide disparities in wealth, the ability to afford and access care, and inadequate health care delivery. This section reviews the many causes of these disparities from government and private policies and the adverse psychophysiological effects of the stress of racism.					Black, Brown, Indigenous and other historically marginalized people.
The Roots of Racism: A Biopsychosocial Formulation	Video Since our country's founding, there has been systematic oppression and the creation of vast inequities between White people and people of color. A biopsychosocial approach can shed light on how racism and other biases have flourished. Racism is multidetermined and has complex origins. This section summarizes a few key features		Will Justice & Leon McCrea	0:24		#4: Answer one of these questions: 1. Why are there biases at all? What is your biopsychosocial analysis of the origins of bias?
Critical Race Theory, Intersectionalit	of its origins in biology, psychology, and the way we construct our societies. Video y, This section defines critical race theory, intersectionality, colonialism, and structural racism and explains how	Show Me Your Badge	Will Justice & Leon McCrea	5:16		 What are your responsibilities to respond to racism, at the individual, group and structural levels? #5. Video - The Impact of Race and Genetic Ancestery on Medicine. You attend a small
Colonialism, Structural Racism	each has manifested itself in the U.S.					group session on renal physiology and the faculty member presents a correction for Glomerular Filtration Rate (GFR) for African American patients. He says the estimate GFR for Black patients is multiplied by 1.16- 1.21 the estimated GFR for White patients, depending on the equation used, to account for their higher muscle mass. How might this lead to negative consequences for Black patients? b. How might you call his attention to the sociopolitical construct of race? #6: You
						are on rounds and the resident presents a patient as "A 35-year-old Black man with sickle cell presenting with chest pain and drug-seeking behavior. "Discuss the pros and cons of using the patient's race in the opening statement of the presentation. What racial stereotypes might this language provoke? What social determinants of health should be considered? How could you bring up these issues in your discussion
						of this man's illness? a. How might this lead to negative consequences for Black patients? b. How might you call his attention to the sociopolitical construct of race?
	Video Video	If He Can Succeed, You Certainly Can The Myth of Race Debunked in 3 Minutes	Will Justice & Leon McCrea	2:40 3:04	https://www.youtube.com /watch?v=VnfKgffCZ7U	
Clinical Ethics and the Mandate for Antiracism	Video Foundational concepts, principles, and duties guiding contemporary clinical ethics provide a clear mandate for antiracist action in the care of patients and communities. This section covers key points for understanding the	The impact of race and genetic ancestry? Which box do I check?		4:12	https://www.youtube.com /watch?v=H_s7iZopkJM	
Ethical Dimensions of Racism	 social contract, human rights, guiding ethical principles, essentials of caring, and virtue as a personal commitment. Medical ethics have been heavily influenced by racism, specifically through the false assumption of race as a biological difference rather than a social construct. It is the responsibility of health care clinicians to understand 					 #7: Answer two of these questions: 1. What are some strategies that can be implemented to build trust between physicians and historically marginalized patients?
	the impact of structural racism and implicit bias as they relate to their own ethical decision-making. This section looks at how history has had an impact across generations and has resulted in a high level of mistrust of patients toward clinicians, which has shaped treatment decisions.					 What role does implicit bias play in the treatment decisions of health care clinicians? How can clinicians mitigate the impact of implicit bias in their practice? What are the ethical responsibilities of health systems and medical schools to better establish or re-establish communal trust with historically disenfranchised communities?
Race Consciousness and Antiracism	Video Race consciousness is an explicit acknowledgment of the workings of race and racism in social contexts or in one's personal life. In health care, this means acknowledging that racial health inequities are the result of	I Need to Dress Up	Will Justice & Leon McCrea	3:08		#8 : Video - Why Colorblindness Will not End Racism. One of your peers in a small group classroom discussion of health disparities shares "My parents taught me not
	racism, not the result of genetics. Applying race-consciousness to health care requires an appreciation of the complex historical journey of Black people and/or persons of color, knowledge of disparities in health that may facilitate or inhibit optimal levels of care for these individuals and their families, and the self-appraisal of one's attitudes, feelings, beliefs, and biases towards Black people and/or persons of color. This section describes the					see color." How would you go about explaining to them how this view can be harmfu #9: Using the privilege wheel, make a list of your "privileged" identities and a separa list of your "oppressed" identities below. Feel free to add identities that may not be included on the wheel. Underline those identities which are "hidden" i.e., are not immediately apparent to others. Lastly, think about the last 48 hours. Give an examp
	privilege wheel and White fragility.					of something you were able to do because of one of your privileged identities (that another person without that privilege would not have been able to do) and write it down. If you would rather not share this information in the group blog, please write your thoughts down on paper and bring it to your small group. You can then share whatever you feel comfortable sharing, including what you learned from the exercise
						#10: Think about the times you have been in or witnessed conversations about race involving White people. What emotions, behaviors or claims have you experienced or witnessed that exemplify White Fragility? OR Which of the 11 Unspoken Rules of White Fragility have you experienced or witnessed? Also, comment on this question: How might the emotions, behaviors, claims or rules have been shifted in your example?
	Video Video	Why Would You Think That? Privilege and Fragility - White Privilege Glasses	Will Justice & Leon McCrea	0:24	https://www.youtube.co	
	Video	Seeing White Fragility			m/watch?v=swDQiUwme zg&t=9s https://www.youtube.co m/watch?v=CdFCRHhygH	
	Video Video	3 Ways to Challenge White Fragility Robin DiAngelo on "White Fragility"	Robin DiAngelo Robin DiAngelo	9:12	https://www.youtube.co m/watch?v=5xtZ0nAFHo w https://www.youtube.co m/watch?v=6027_yBQ8	
Racial Conflict	Video Racial conflict is a type of social conflict that results in threatened or actual harm to the targeted racial group	Why Colorblindness will not end racism			Oc&t=167s https://www.youtube.co m/watch?v=H4LpT9TF_e w	#11 : Video- Housing Segregation and Redlining in America. Answer one of the
	based on perceived racial differences. Racial conflict is inextricably linked to stereotypes, bias, privilege, discrimination, racism, and inequities. This section includes the nature of racial conflict and contributing factors					following questions: 1. What is your vision for a just and equitable society? 2. Given that structural racis is so pervasive, what can you contribute to promoting your vision? 3. What commitment will you make to yourself and others to ending health care disparities? #12: Answer one of these questions:
						 What are your thoughts and attitudes about race, and how might they contribut to racial conflict? How can health disparities be reduced when they are so intertwined with racial histories? What have you been taught about race, health care and the physical body that
	Video	Housing Segregation and Redlining in America		6:36		needs to be reconsidered and relearned? Give examples of historical assumptions which have led to disparities.
Confronting Our Biases Diversity and Cultural Humility	Biases are learned beliefs and attitudes about others that may be positive or negative, like prejudice and stereotypes. Being targeted on a daily basis leads to heightened watchfulness or even vigilance, which has serious implications for chronic stress and health. This section explains how Black people and other non-White racial groups regularly face discrimination from health care providers. Since conscious and unconscious bias					#13: Video - A Trip to the Grocery Store. Put yourself in Dr. DeGruy's shoes in the grocery store checkout line. What would you be thinking and feeling? What would influence your decision to speak up (or not) in the moment? #14 : Take the Harvard Implicit Association Test, or IAT https://implicit.harvard.edu/implicit/ on race. Answer these questions: 1. What are your thoughts and feelings about the results of
	involve learned stereotypes, values, and behaviors, it is believed that they can be unlearned and reduced through conscious attention.			2.40		your test? 2. What family and cultural experiences contributed to your explicit and implicit assumptions about race? 3. What will you do to transform any negative stereotypes you may hold?
	Video Leaders in various disciplines are increasingly realizing the importance of recognizing diversity and applying cultural humility for successful outcomes. Educators are shifting away from the goal of achieving cultural	A Trip to the Grocery Store	Dr. Joy DeGruy	3.48	/watch?v=Wf9QBnPK6Yg	#15: Answer one of these questions: 1. How does power imbalance lead to discordar perspectives among individuals? 2. How does cultural ambivalence and/or
	competence to that of cultural humility, which is self-evaluation in addressing the power imbalances of the patient-clinician dynamic. This section describes cultural humility, the behaviors to adopt cultural humility, and the alignment of cultural humility with diversity to support positive outcomes.					destruction lead to negative outcomes? For learning and practice? 3. Lifelong learning supports positive outcomes. What decisions and actions support cultural humility in the education environment? 4. The worldview of diversity influences personal beliefs and values. Provide an example from your professional or personal life. Diversity and cultural humility can be positive influences in both clinical care and education. Provide an example from your professional role(s). 5. How can our
Microaggressions	Microaggressions are defined as verbal, nonverbal, and/or environmental slights, snubs, or insults that are					physical environments (clinical and education) positively influence diversity and represent cultural humility? #16: What are your thoughts and feelings about the videos above? What
Discrimination	either intentional or unintentional. They convey hostile, derogatory, or otherwise negative messages to target persons based on their membership in a structurally oppressed social group. Individual microaggressions may appear small or insignificant, but part of the harm is the day-to-day accumulation of being targeted repetitively in a variety of different contexts over time. This section provides examples of microaggressions and appropriate responses.	,				microaggressions have you seen or experienced? In retrospect, what microaggressions might you have unknowingly committed? How responsible are you for the impact of your words? What can you do to become more knowledgeable about the lived experiences of your colleagues of color? If you are a student of color, under what circumstances might you share your experiences of microaggressions/disrespect with your White colleagues? Please share only as muc
	Video Video Video	Faculty Microaggression The Microagression Attending Physician Reflection	Will Justice & Leon McCrea Dennis Novack	3:25 0:47 0:33		as you feel comfortable sharing.
	Video Video Video Video Video	Intern's Reflection Student's Reflection 4th year Medical Student Reflection Patient's Reflection Resident Discusses the Microagression with		0:30 0.31 0.17 0.13 1:45		
	Video Discrimination is behavior arising from shared cultural stereotypes and other mistaken beliefs about groups of people based on one aspect of their social identity, such as race, age, or gender. There are three different types of discrimination: direct, indirect, and intersectional. This section defines discrimination, offers some examples	Attending Attending Apologizes s		1:28		#17 : Video: Racial/Ethnic Prejudice & Discrimination Answer this question: What thoughts and feelings did this sociologic analysis provoke in you? How might it have expanded your understanding of prejudice, discrimination, and racism? #18: Answer one of these questions:
	of racial discrimination throughout history, explains the impact it can have on health, and discusses how discrimination is a systemic issue.					 In what ways does racial discrimination impact your life? Did you learn about the United States' history of racial discrimination when you were growing up? In what settings did you learn about it and in what settings was it not discussed? If you did not learn much about discrimination or structural racism, why not? When should we begin teaching children or young people about these
	Video	The Burden of Being a Minority Student	Will Justice & Leon	1:12		 issues? 3. What are some ways we can begin to address systemic discrimination? 4. How can an institution be biased? Provide examples. 5. What is a positive stereotype? Provide examples.
Advancing Racial Equity	Video This section defines health and health care equities, inequities, and disparities; social and structural determinants of health; and racism as a determinant of health. We also examine how each of five social	Racial/ Ethnic Prejiduce and Discrimination	McCrea	11:39		watch?v=gSddUPkVD24 #19: Think about where/how you grew up and what factors influenced your health today? Which SDOH has had the biggest impact/influence on your health?
· ·	determinants likely impact overall health and explain how lack of access to oral health contributes to health disparities.	Have Difficult Conversations!	Will Justice & Leon	0:38		#20: Answer one of these questions:
	Video The pervasive impact of racism is systemic in its deepest and broadest roots. To achieve racial equity, we must		McCrea			 When you review research, ask yourself what institutions and policies contributed to the problem at hand, how do they perpetuate racial inequity and how can we change institutions and policies to mitigate the racial inequity in this area? Clinicians or scientists may use very specific diseases such as Cystic Fibrosis of Sickle Cell Anemia to justify the biologic basis for race. How can this thought proces
Racial Equity in Research, Policy,	The pervasive impact of racism is systemic in its deepest and broadest roots. To achieve racial equity, we must explore and address oppressive policies, procedures, and practices. Medical and scientific research that informs health care policies, procedures, and practices must be intentional to use an inclusive approach that promotes health equity. This section covers structural racism and competency, racial equity in research, race as a social construct, race norming, and race-based protocols.		McCrea			be harmful in the care of patients?
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