

Maintaining an Inclusive Learning Environment: Show Some GRIT

UCLA David Geffen School of Medicine

**DOM
Onboarding
4/12/2023**

DOM EDI – Who We Are & Potential Conflicts of Interest

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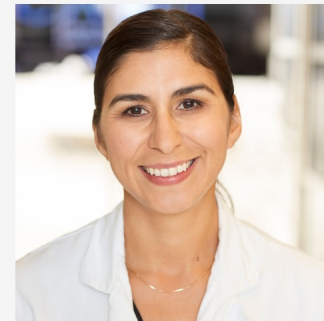
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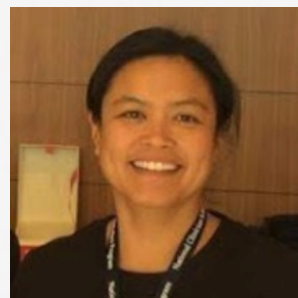


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*Our Personal Biases Based on our
Life Experiences & Commitment to
EDI Principles*

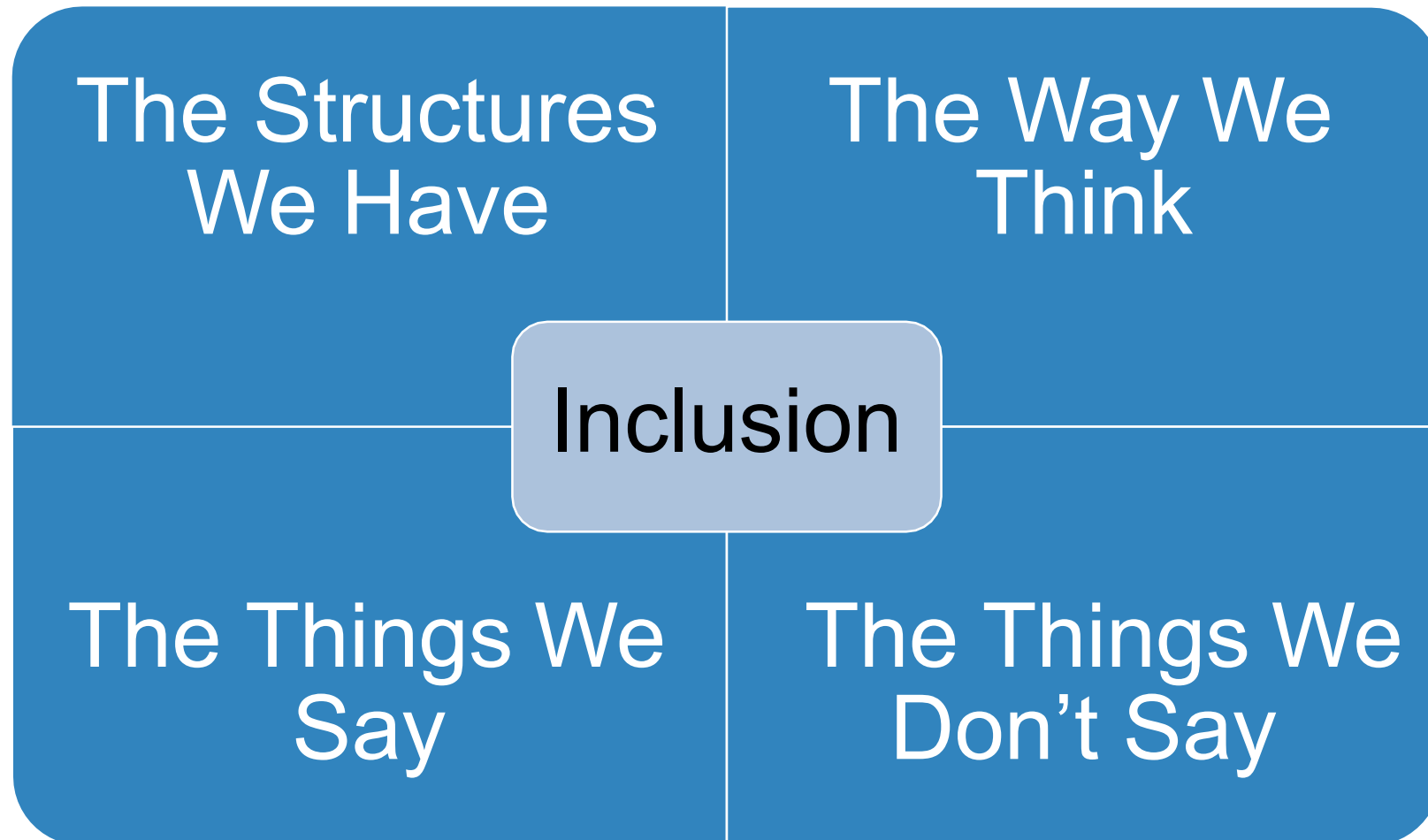


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Threats to Inclusion and our Clinical Learning Environment



Inclusive Clinical Learning Environment

Clinical Learning Environment:
the cultural norms and
institutional practices that
learners experience through
the course of their learning,
whenever and wherever they
gather to learn.

Formal Curriculum

- What we say we teach (ie. required rotations, education sessions, etc)

Informal Curriculum

- The unscripted and interpersonal forms of teaching and learning that takes place among and between faculty and learners

Hidden Curriculum

- Set of influences that function at the level of organizational structure and culture

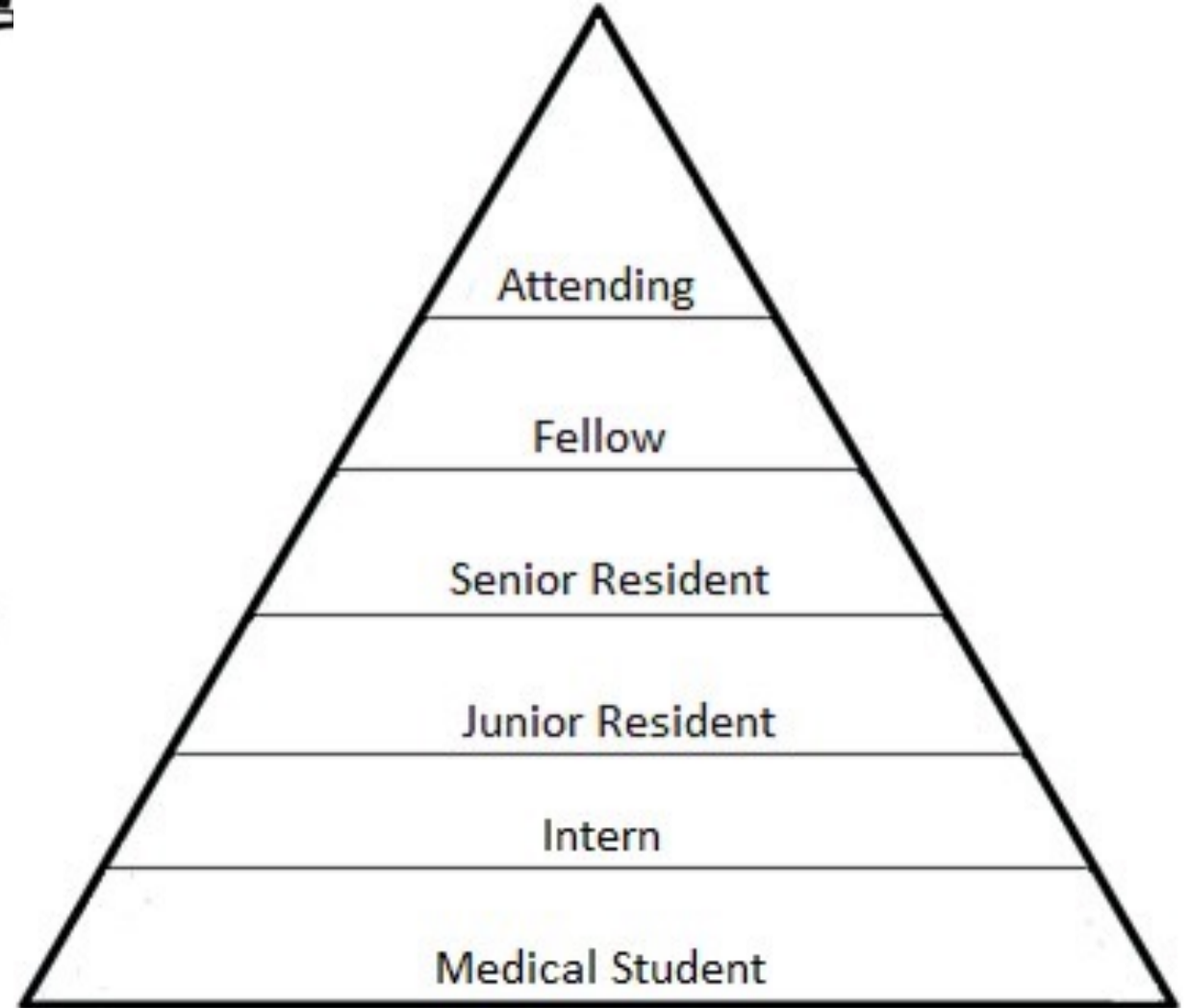
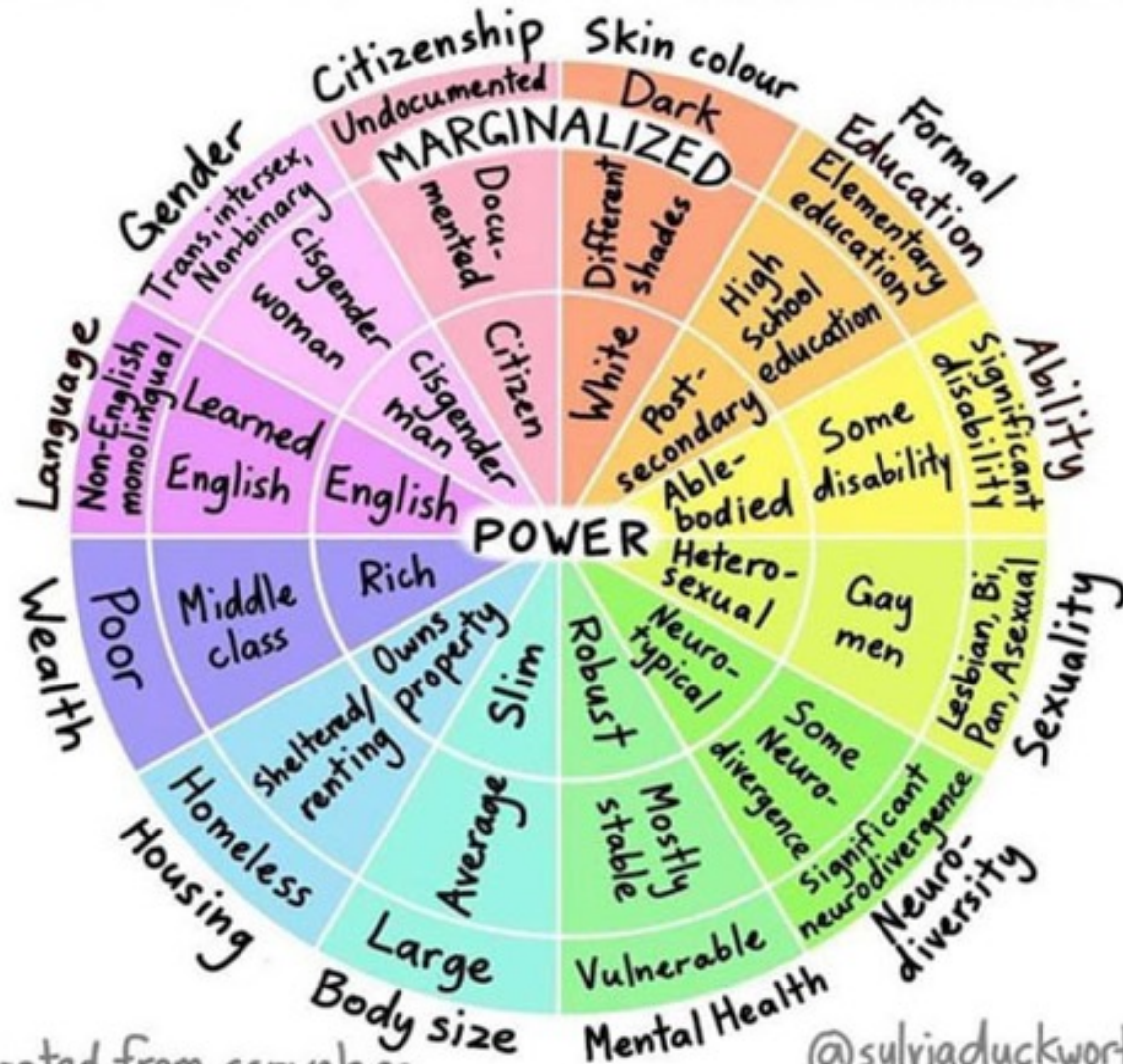
Inclusive Clinical Learning Environment

- All Members share a responsibility to treat others with respect and fairness, be responsible and honest, and uphold the highest standards of academic integrity.
- Learners should not have to conform to the norms of the majority to fit in. Learners must be allowed to show up as themselves and belong.

But there must be mutual respect.

Threats to Inclusion: Hierarchy, Power and Privilege

WHEEL OF POWER/PRIVILEGE



Adapted from ccrweb.ca

@sylviaaduckworth

Medical Student Climate Data

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Student Climate Data: AAMC Global Questionnaire

Administered annually to all seniors graduating from LCME-accredited medical schools

Covers a wide array of topics:

- Pre-clerkship, clerkship, and elective experiences
- General medical education and readiness for residency
- Student services, financial aid and indebtedness
- Career intentions
- Strengths of the medical school and areas that need improvement



& Experiences of negative behaviors

- Denied opportunities for training or rewards based on identity
- Subjected to offensive remarks/names based on identity
- Received lower evaluations or grades solely because of identity rather than performance

Bottom Quartile (Nationally) – Race/Ethnicity

Experienced Behavior	DGSOM 2018	DGSOM 2019	DGSOM 2020	National 2020
Denied opportunities for training or rewards based on race or ethnicity	8%	6%	8%	4%
Received lower evaluations or grades solely because of race or ethnicity rather than performance	6%	7%	9%	4%
Subjected to racially or ethnically offensive remarks/names	13%	20%	21%	9%

Also, below national average for sex and sexual orientation

Sources of mistreatment (excludes patients)

Source*	% of total incidents reported on GQ
Preclerkship faculty	3%
Clerkship faculty (classroom)	3%
Clerkship faculty (clinical setting)	41%
Resident/Intern	34%
Nurse	10%
Administrator	2%
Other institution employee	6%
Student	2%

*GQ- Global Questionnaire

Looks like as Faculty should know this

Barriers to reporting

If you experienced mistreatment but didn't report it, why?	
The incident did not seem important enough to report	47%
I resolved the issue myself	7%
I did not think anything would be done about it	33%
Fear of reprisal	26%
I did not know what to do	11%
Other	7%

What is the DGSOM doing ?

Committee on Learning Environment Oversight (CLEO)

- Reporting (confidential* or anonymous)
- Incident Review -> “feedback, counseling, discipline”
- Monitoring of Learning Environment metrics
- Training

“Driving Real Change” initiative

Handling Microaggressions

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Threats to Inclusion: Macro/Microaggressions

Introduced in 1970 by Dr. Chester Pierce and later expanded by Dr. Derald Wing Sue

Subtle but offensive comment or action directed at a minority or non-dominant group that is often *unintentional or unconsciously* reinforces a stereotype.

There is nothing micro about their impact.

No negative intent is required.

Focus is on the harm.

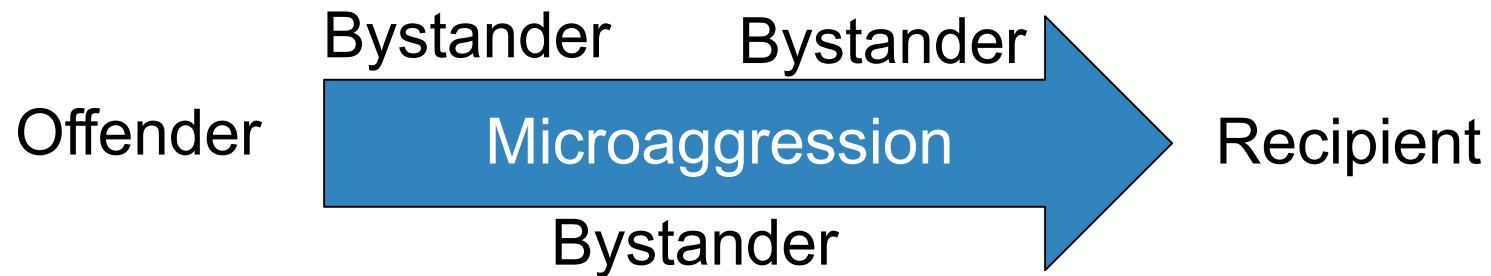


The Thing We Say & Don't Say

Threats to Inclusion: Macro/Microaggressions

Everyone's doing it..... 😞

Microaggressions: **Subtle verbal and non-verbal insults** often done automatically and unconsciously. They are layered insults based on one's identity: race, gender, class, sexuality, language, immigration status, phenotype, accent, or surname. (Reflect both individual's biases and society's most deeply-held biases)



Examples:

“Oh, you're a mom in residency, what were you thinking?”

“How can you be a surgeon if you can't even reach the table?”

“This may be too long of a road for you”

“Everyone can succeed in society if they work hard enough”

Why we don't speak up

“It's none of my business”

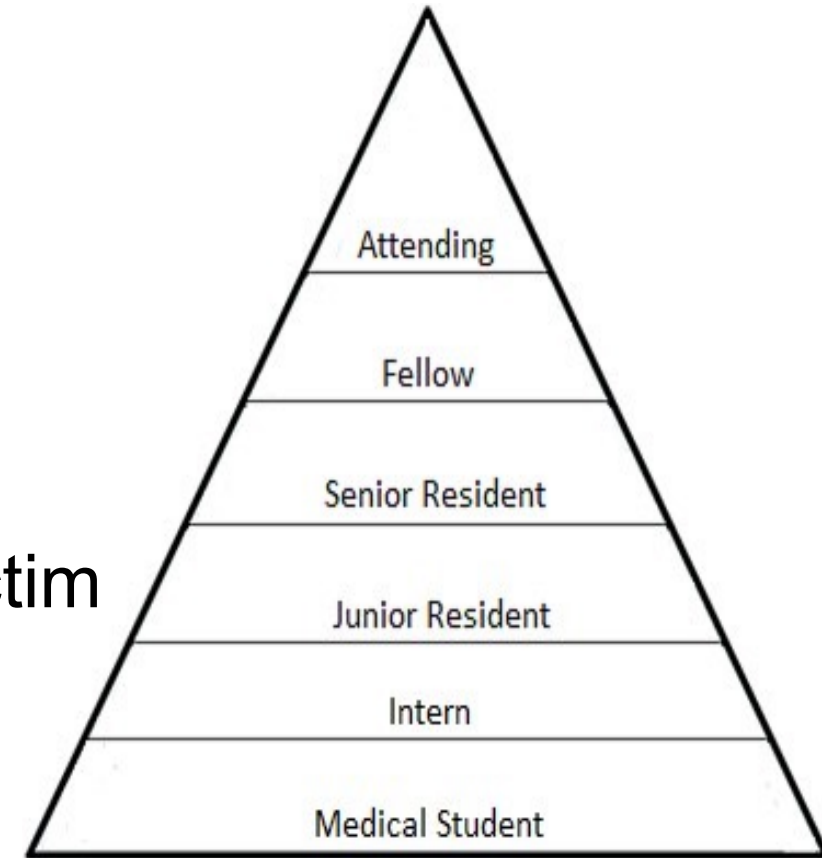
“It doesn't really bother me”

Feel powerless to make a difference

Avoid drawing attention onto them

Worry about retribution or becoming another victim

POWER STRUCTURES!



Don't know what to do – Response Paralysis



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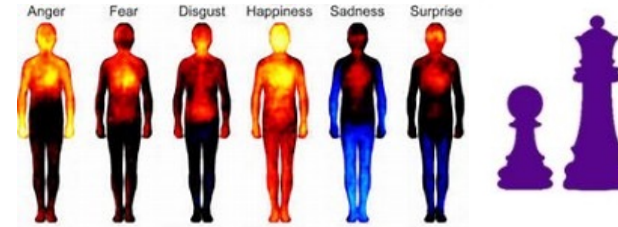
Show some “GRIT”

Gather your thoughts. Pause. Do not react with anger. Don’t try to talk yourself out saying something that makes you feel uncomfortable. Decide if it is the appropriate time or place to address.

Restate. Restate the comment OR ask the speaker to restate their comment. Allow the person to clarify or realize the potential negative impact of the words or action

Inquire. Dig deeper and seek clarification. Be nonjudgmental. Address the comment or action rather than making it about the person.

Talk it out. Assume the best. Separate the person from the action. Discuss the impact on you or potential impact on others and your personal perception. Leave opportunity for follow up conversation if needed



“I think I heard you say XYZ (paraphrase their comment). Is that correct?”

“Can you say that again? I want to make sure I heard it correctly.”

“Please help me understand what you mean by that statement.”

“Could you say more about what you mean?”

“I don’t get it....”

“Why is that funny?”

“I know you may not realize it, but

“It made me feel.....”

“I think that comment may perpetuate a negative stereotype.”

“I don’t think that is appropriate because...”

“I know you really care about.....but that comments really undermines those intentions”.

Other tips

Technique	Example
Appeal to values/principles	"I know you really care about _____. Acting like this undermines that."
Promote empathy	"How would you feel if someone said that about your sister/girlfriend?"
Tell them they're too smart	"Come on. You're too smart to say something so ignorant/offensive."
Pretend you don't understand	"I don't get it..." "Why is that funny?"
Use humor or gentle sarcasm	"She plays like a girl? You mean she plays like Serena Williams?"
Point out commonalities	"Do you know he also likes to _____? You may want to talk with him about that. You actually have a lot in common."
What's in it for them?	"In the real world, we are going to have to work with all sorts of people, so might as well learn how to do it here."

Adapted from: https://www.aacap.org/App_Themes/AACAP/docs/resources_for_primary_care/cap_resources_for_medical_student_educators/responding-to-microaggressions-and-bias.pdf⁹

What if you are the Offender

- Take a breath. Be thankful that they trust you enough to say something.
- Don't make it about you.
- Listen with an open heart and mind.
- Don't overdo it.
- Seek to understand in your own time and maybe follow up.

Apologize: You must address the harmful comment, acknowledge the impact it had, and commit to doing better.

Acknowledge the Impact and show empathy

Act- State how you will change your actions

Summary

- Responding to microaggressions is important to maintaining an inclusive learning environment.
- We are constantly “teaching” our students
- Silence can be seen acceptance
- Speaking up is everyone’s responsibility
- We each need to find our individualized voices and approach so that we can overcome response paralysis.
- The more you speak up, the easier it gets.

“Difficult Conversations are almost never about getting the facts right. They are about conflicting perceptions, interpretations, and values.”

– Douglas Stone (Lawyer, negotiator and author of *Difficult Conversations*)

extras