


Review Phase: Concerning Example Lecture Slide

TYPE 2 DIABETES!

- 46 year-old, obese Black male presents with fatigue & polyuria.
- Non-Modifiable Risk Factors:
 - Asian, LatinX, Black
 - Obesity
 - Family History
 - Age



Diabetes Risk Calculator

Sex	Male ▾
Age	years
Height	ft ▾
Weight	lb ▾
Family history	No family history of diabetes ▾
Ethnicity	Non-Hispanic white ▾
Fasting glucose	mmol/L ▾
Systolic Blood Pressure	mmHg
HDL cholesterol	mmol/L ▾
7.5-year-risk of Diabetes	%

Review: Concerning Small Group Guide

In this session, students will be reflecting on how biases impact reasoning.

Part 1: Personal Biases

- Identify personal biases related to at least 2 patient demographics (i.e., psychiatric disease, patients with obesity, patients with a history of substance abuse, race/ethnicity, etc.)
- Discuss these biases as a group including how these biases could increase the risk for error in clinical reasoning

Part 2: Review of Case

- Students will review the case of JD, an 82 year-old man (he/him, AMAB) with a history of CKD IIIa, well-controlled HTN who presents with muscle pain and an elevated CK.
- Students will then be provided with JD's race/ethnicity as: African American, white, or SE Asian with a photo and asked to reflect on how their differential diagnosis changes
- Encourage students to share their own experiences with the large group

The purpose of the [Anti-Oppression Curriculum \(AOC\)](#) initiative Curricular Review Tool is to:

1. Provide guidance on anti-oppressive (AO) considerations
2. Provide a place to share recommendations and decisions

First, complete the following:

Session Name:	
Session Type: e.g., lecture, small group	
Session Materials: e.g., slides, video lessons (e.g. ILMs), lecture recording, facilitator guides	
Curricular Area: Block, Longitudinal Element, Clerkship, etc.	

Curricular Review Tool

Reflect on each question outlined in the table below. Add questions that warrant additional discussion in the notes/questions section. Hyperlinks within the document provide context, definitions, and examples. After reflecting on the questions below, complete the recommendations section on the cover page on page 1.

Reflect on the following:	Notes/Questions (as needed):
<p>Person-first language used. e.g., 65yo woman with diabetes is preferred over a 65yo diabetic.</p> <p>Stigmatizing language used.</p>	
<p>Patient cases included. If NO, move to the next box. If YES, consider the prompts.</p>	<p>Consider the following:</p> <ul style="list-style-type: none"> • Are spoken and/or implied/coded aspects of identity/social/structural determinants included? • Are stereotypes present? • Is intersectionality acknowledged/addressed? • If experiences from communities that have been historically marginalized are discussed, are communities/ individuals portrayed in ways that uplift/empower even if cases include challenges/hardships? • Are structural factors (e.g., racism) acknowledged or are individual factors over-emphasized? • Other considerations?
<p>Questions/prompts about personal experiences or reflections on personal experiences included?</p>	<p>If YES: careful consideration is needed—e.g., implicit expectations for BIPOC/minoritized students to teach others about their experiences with racism are harmful.</p>
<p>Requirements (or unspoken expectations) for all students to respond to a given prompt?</p>	<p>The AOCI advises against requirements for all students to respond to a given prompt, especially for any personal reflections.</p>
<p>Only individual/personal level risk factors emphasized?</p>	<p>If YES, are there concerns about how these risk factors are framed? Are additional levels (e.g., systems/structural levels) integrated into prior or future sessions?</p>



Structural/systems solutions /Tools discussed or proposed?	<i>If YES, how in depth is this part of the discussion? Is additional expertise needed to flesh out this component of the session?</i>
Race, gender , or another social category pathologized and/or equated with biology?	
Disparities data discussed?	<i>If YES, is this data contextualized? (i.e., avoid implicit messages that there is an inherent problem with a particular community or population; goal is to provide structural understanding of root causes of disparities, such as redlining leading to housing instability and multiple downstream consequences.)</i>
Teaching foundations of racism (or another form of oppression) without including tools for managing/addressing racism (Or other form of oppression)?	
Content would benefit from someone from the community/consultant reviewing ?	Recommendation for a reviewer (general or specific rec):

Session Design/Pedagogy:

Consider whether other models besides traditional lectures might enable a more anti-oppressive approach (e.g., team-based lectures or panels can elevate more perspectives; including community members can be an effective way to welcome additional perspectives).

NB: If you are considering inviting community members—please discuss with course leadership/AOCI as compensation for community members is needed, and careful consideration for how to avoid an ‘extractive’ approach is critical.

Please include notes related to session design/pedagogy here:- _____

For small group sessions, pls additionally consider and share thoughts on:

Reflect on the following:	Notes (as needed):
What expertise/skills would a small group facilitator need to facilitate this session effectively and equitably? (e.g., trauma-informed teaching skills)	
Do you anticipate obstacles to learning the content that could come up during discussion that facilitators would need to be prepared to address (if so, pls describe)?	

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