

Cultural Mortality & Morbidity Curriculum: Enhancing DEI Education in Obstetrics & Gynecology Department

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INTRODUCTION

- Racial and ethnic minority groups face significant disparities in Obstetrics and Gynecology.
- Medical institutions advocate for educational opportunities in diversity, equity, and inclusion (DEI) principles.
- Our Department of Obstetrics, Gynecology & Reproductive Sciences has implemented a **Cultural Mortality and Morbidity curriculum**, adapted from programs developed by the University of Michigan and the University of Maryland.
- Curriculum consists of a case-based scenario designed to highlight scientific evidence regarding DEI concepts followed by small group discussions led by trained peer facilitators.
- Topics covered included **stereotype threat, intersectionality, and gender schema.**

OBJECTIVE

The surveys aim to evaluate knowledge and attitudes towards DEI principles, the impact of these principles in healthcare, the strategies employed by faculty, residents, and students in challenging situations, and the efficacy of our curriculum.

METHODS

- Pre- and post-surveys were disseminated before and after the session to medical students.
- Pre- and post-surveys completed were linked via a unique identifier and analyzed utilizing a paired T-test.
- Attending physicians and residents completed post-survey only. These results were not included in the paired T-test analysis.
- This study protocol was reviewed as exempt by our institution's Institutional Review Board.

RESULTS

Demographics of Survey Respondents

- Pre- and post-surveys were sent to 77 medical students who attended a session between November - May 2024.
- Pre-Survey Respondents (n=44)**
 - Ages: 23-33
 - Gender: Female (71.1%), Male (28.9%)
 - Sexual orientation: Heterosexual (92.2%), Bisexual (7.9%)
- Post-Survey Respondents (n=61)**
 - Medical Students (63%), Attending Physicians (32.6%), Residents (4.3%)

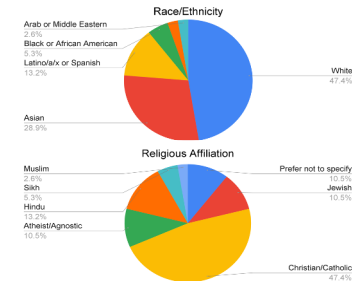


Figure 1: Representation of racial/ethnic (top) and religious (bottom) backgrounds of pre-survey respondents

Baseline Assessment of DEI Training & Experiences with Bias & Discrimination

- 82%** of students reported that DEI principles are important for delivering good patient care.
- 59%** of students reported experiencing bias/discrimination.
- 82%** of students believe their peers/colleagues from marginalized groups experience bias/discrimination.
- 88%** believe patients experience bias/discrimination.

Paired Pre- vs. Post-Session Analysis: Evaluating Efficacy of Cultural M&M Curriculum

"I feel I have effective strategies to address subtle bias when I encounter it with people who I perceive as above me in my organizational hierarchy."

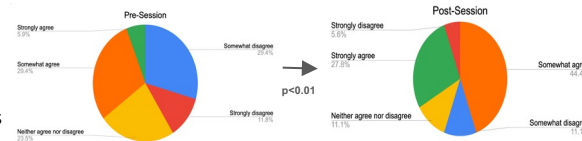


Figure 2: Student responses before (left) and after (right) the session revealed that more students felt they had effective strategies to handle subtle bias when encountering it with someone above their organizational hierarchy ($p < 0.01$).

"I feel I have effective strategies to address subtle bias when I encounter it with people who I perceive as completely outside my organizational hierarchy."

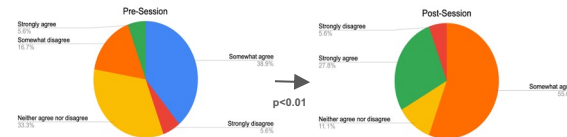


Figure 3: Student responses before (left) and after (right) the session revealed that more students felt they had effective strategies to handle subtle bias when encountering it with someone outside their organizational hierarchy ($p < 0.01$).

Post-Survey: Assessment of Curriculum Design

- 80%** of students, residents, and attendings reported gaining strategies to address issues of discrimination and/or harassment.
- Students, residents, and attendings reported that the case scenarios presented were similar to:
 - Their own (**66.7%**) and their colleagues (**70%**) experiences of bias/discrimination

DISCUSSION

- Data underscores the need for DEI training in medical education.
- Most participants reported frequent exposure to bias and discrimination and recognized the importance of DEI training for quality patient care.
- Data demonstrate that the curriculum improved participants' confidence in recognizing, understanding, and addressing challenging situations involving bias.
- Participants found the case scenarios to be realistic and reflective of their own or their peers' experiences.
- Limitations include:**
 - Female (71.1%) and heterosexual (92.2%) individuals were overrepresented compared to other gender and sexual identities.
 - Paired pre- and post-survey evaluation limited to medical students; future research should include disseminating pre-survey to faculty and residents.
 - Surveys represent a snapshot in time, meaning, change in attitudes may not translate to practice.

CONCLUSION

Providing OB/GYN faculty, residents, and medical students with real-life examples of healthcare disparities impacting access and quality within Obstetrics and Gynecology enhances education and generates culturally competent and sensitive physicians.