

Start

Briefly review the materials that you will be presenting to students.

This flowchart is designed to help guide the development of curricular materials aimed at better preparing Geisel students to provide effective care to the ever-diversifying patient population they will encounter in the future. It is not designed to be all-encompassing, but rather to empower instructors to successfully incorporate critically important social discussions into the existing pre-clinical curriculum.

Helpful examples include:

Do your materials contain social identifiers, such as race, ethnicity, gender, sexual orientation, religion, etc.?

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Would the inclusion of social identifiers enhance your materials? If so, consider adding them.

Asthma can be taught alongside with factors such as poverty (poor housing conditions) or environment (air quality).

Have the associated terms that you are using been clearly defined in the curriculum?

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Seek current references regarding the identifiers being used. Resources are available (here).

When using guidelines that use "race" as a proxy for genetic variation, clearly explain the limitations of this approach.

Is your reference to these social identifiers significantly enhancing the efficacy of your materials?

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If not, is there a way to make the use of these identifiers more relevant? If still not, consider removing them.

When using a clinical vignette about a male patient with HIV, is explicitly stating his sexual identity reinforcing stereotypes or contributing clinically relevant information i.e. sexual behavior vs. sexual identity?

Is your reference to these social identifiers supported in well-validated, peer-reviewed literature?

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If there are no reputable sources supporting a claim made in the material, it should be removed.

When discussing "race" and sickle cell anemia, describe the stronger correlation associated with geography (*P. falciparum* malaria-endemic areas) as opposed to genetic ancestry and provide the citations.

Have you provided citations and materials for students who are interested in learning more?

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If not, consider adding these to your materials.

When considering the role of sex hormones on various outcomes on cardiovascular risk (e.g., trans-individuals vs. cis-individuals). Have you sought out current sources in this area of investigation, for example the Fenway Institute?

Do your materials acknowledge any intersectionality with the social determinants of health?

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If not, update accordingly. This is an important aspect of the curriculum that should be incorporated when possible.

When discussing "patient adherence," include the complexities of the patient's life (e.g., barriers to care, medical mistrust, or cultural influences).

Try to anticipate areas of controversy. For example, are there negative historical connotations surrounding any topics covered (e.g., the Tuskegee syphilis study, HeLa cells, or "race correction factors")?

Finally, if you are presenting a lecture, be sure to allot a few minutes to address questions that may arise regarding these topics.



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