

June 6<sup>th</sup>, 2020

To The UABSOM Medical Education Committee:

We are regretful and sickened as MEC Student Representatives, that it has required the actions of four murderers asphyxiating George Floyd to bring forth to the committee the following changes in the UAB School of Medicine curriculum. As we live in a government built and crafted by white supremacists, it is important to acknowledge the inherit racism and discrimination found in medical education across America. UAB is not immune to this plague. No number of apologies or consoling messages can fix or forgive the damage we have done, and thus, it is our duty and responsibility to find solutions. In consultation and from hearing the voices of our classmates of the Black community, we hereby propose this action plan and will do everything in our power to see it through:

**To Be Effective Immediately**

1. Invitation for more individuals of minority populations onto the Medical Education Committee, especially individuals from ODI.
2. More transparency between MEC outcomes and the students. In particular, outcomes pertaining to medical student experience in relation to racism, sexism, homophobia, etc.
3. A legitimate anonymous source for students to report problematic occurrences in the pre-clinical & clinical curriculum. ReportIt is NOT anonymous.
4. Inclusion of Cultural Humility Competency as a Graduation Requirement

**To Be Completed by the end of the 2020-21 Academic Year**

1. Prior to presentation of material to students, a designated individual or group of individuals needs to look through the material and identify areas where race is mentioned.
  - a. A discussion needs to be made on WHY race is there. We aren't asking to have the race information removed. We are asking for a discussion for the reason it's there.
    - i. First, is it necessary?
    - ii. Second, is it accurate?
    - iii. Third, is it fleshed out enough?
  - b. Preferably the individual performing this review would be someone not directly involved in the curriculum or outcomes of the course (an external source).
2. Social determinants and discussions of race need to be incorporated into our non-LC curriculum.
  - a. It sends a clearer message that health disparities are a part of clinical practice if it is incorporated into our scientific, clinical courses and not ONLY our learning community curriculum.
  - b. This incorporation needs to be tested.
3. Forums for discussion on race. We need routine forums of discussion to encourage intra-class discussion on topics of race and health disparities.
  - a. It is of particular importance that these forums of discussion are not done through LC or small group lines. They should be led by individuals who are well educated on the topic.
4. Windshield Survey
  - a. While there was good intent behind the project, there was no follow-up or discussion of this activity. It felt cold, demeaning, and superficial.

5. A discussion of UASOM honors (esp. AOA, GHHS) and evaluations needs to be had since recent literature has shown serious racial bias in these systems. Other schools have done so.
  - a. [https://www.researchgate.net/publication/314274506\\_Racial\\_Disparities\\_in\\_Medical\\_Student\\_Membership\\_in\\_the\\_Alpha\\_Omega\\_Alpha\\_Honor\\_Society](https://www.researchgate.net/publication/314274506_Racial_Disparities_in_Medical_Student_Membership_in_the_Alpha_Omega_Alpha_Honor_Society)
  - b. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0181659>

These initiatives are overdue and far from a cure, but we humbly believe they are a needed step in making progress towards a more fair and just medical education. We expect more plans in the future and use this opportunity to open the door for other students to voice their ideas for improving our curriculum. Let us call upon the oath we all take as physicians to remember our role in society, and the obligations we hold to our fellow human beings, to bring about the resolutions we suggest in the hopes that it will ensure the well-being for members of the Black community. UAB is a special place, and in a time where America needs rebirthing, we know UAB can be a leader in this movement.

Thank you and we look forward to working together in achieving our ultimate goals for medical education and student success.

Sincerely,

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