



A DANGEROUS PRESCRIPTION AT UNC'S SCHOOL OF MEDICINE:

WOKE RADICALISM FOR EVERY DOCTOR AND PATIENT



Do No Harm

TAKEAWAYS:

#1: A growing trend among medical schools to indoctrinate new physicians in radical, politically motivated “anti-racist” and woke ideologies is present at the University of North Carolina’s School of Medicine (UNC SOM).

#2: Newly obtained documents reveal that, even during a public health emergency, UNC SOM devoted significant time and money to training new physicians in trendy political topics such as *anti-racism* and *microaggressions* at the expense of rigorous medical and scientific instruction.

#3: One of UNC SOM’s top new priorities is to “integrate social justice into the curriculum,” which guarantees that rigor, excellence, objectivity, and the pursuit of scientific knowledge will take a back seat to divisive political and social agendas and enforcement of their dogmas.

BACKGROUND: WELLNESS AND WOKENESS

For more than two millennia, physicians have held themselves to the Hippocratic Oath.¹ That oath, and its enduring command to “help the sick” and do no “wrong-doing and harm,” represent one of the most important ethical principles of Western civilization: All individuals, regardless of race, background, or circumstances, have equal worth and deserve a physician’s utmost care.

This pillar — which has guided our society’s approach to healthcare for centuries — is cracking. Medical schools now focus on both wellness and wokeness, even as the two contradict one another.

Medical school administrations across the country, encouraged by outside organizations such as White Coats for Black Lives, are embedding radical “anti-racist” training into medical education. This is happening without the kind of debate and discussion that

1. Hippocrates of Cos, “The Oath,” Loeb Classical Library, translated. 1923, https://www.loebclassics.com/view/hippocrates_cos-oath/1923/pb_LCL147.299.xml.

should accompany any significant change in an institution’s mission and policies, which is what the training represents.

A MOUNTAIN OF EVIDENCE IN CHAPEL HILL

UNC SOM openly advertises many of its efforts in diversity, equity, and inclusion (DEI).

For example, its official DEI statement says, “we strive to embrace diversity, equity and inclusive excellence through our actions, our policies and our culture.”² The DEI office has its own website, including a “DEI Path Forward” page which greets viewers with a Black Lives Matter logo and pictures of young people wearing UNC SOM apparel, presumably students. The people hold signs with political slogans such as “Racism [is] a major driver of health disparities; “Silence perpetuates violence;” and “Speaking up is not enough: Allyship requires action.”³

Yet the scale and scope of this effort has been hidden from public view until now.

The evidence is clear: Woke ideologies like anti-racism are now embedded pervasively into the curriculum and educational experience at UNC SOM. The embrace of these radical political ideologies at North Carolina’s flagship medical school and the aggressiveness with which the school imposes them on students raises serious concerns for patients in North Carolina. It also generates questions about the rights of UNC SOM medical students to pursue their education free from being compelled to participate in and express support for political causes.

Between March and June of 2021, UNC SOM hired an activist group called The Racial Equity Institute to provide eight anti-racism training sessions to hundreds of students.⁴ UNC SOM paid \$96,000 for the trainings.⁵

The Racial Equity Institute does not hide its goal: Transform companies and universities into “anti-racist organizations.”⁶ This means people and organizations like UNC SOM must

2. University of North Carolina School of Medicine, “Statement on Diversity, Equity, and Inclusion,” <https://www.med.unc.edu/diversity/statement/>, accessed September 1, 2022.

3. University of North Carolina School of Medicine Office of Diversity, Equity, and Inclusion, “The Path Forward,” <https://www.med.unc.edu/inclusion/path-forward/>, accessed September 1, 2022.

4. Documents released by UNC SOM in response to a Freedom of Information Act request.

5. Ibid.

6. The Racial Equity Institute, “Our Approach,” et al, <https://racialequityinstitute.org/>, accessed August 15, 2022.

internalize the idea that modern racism is pervasive and enforced at structural levels.⁷ Some of the primary lessons The Racial Equity Institute teaches are that “racial inequity looks the same across systems” and that systems cause inequities “regardless of people’s culture or behavior.”⁸

The Racial Equity Institute does not simply consult with institutions to minimize discrimination and prevent litigation. It operates with the explicit political goal of delegitimizing organizations (and American society) as participants in a vast and oppressive racist enterprise that contributes to racial tensions today.

This mindset was on display, for example, in The Racial Equity Institute’s statement after the elementary school shooting in Uvalde, Texas. It asserted, among other things, that “the acts of this young murderer, like many others, were not the actions of a lone wolf but the result of a power arrangement, hundreds of years old that values wealth and individual freedom over the common good.”⁹

The School Speaks for Itself

The DEI annual report of the medical school’s Office of Diversity, Equity and Inclusion is worth a closer look, as is the school’s Statement on Diversity, Equity, and Inclusion (“DEI Statement”).

These documents leave no room for doubt about the school’s approach to the most politically charged and divisive racial ideologies: Embrace them all.

In its DEI Statement, UNC SOM asserts:

[W]e strive to embrace diversity, equity and inclusive excellence through our actions, our policies and our culture.

We believe that a culture of diversity, equity and inclusion leads to new ways of thinking, behaving and caring.

*Together, the UNC School of Medicine and the UNC Medical Center strive to recruit, retain, and develop a diverse group of individuals.*¹⁰

By itself, the DEI statement could be taken as an empty gesture; a rote tribute to the political mores of today’s educational establishment.

7. Ibid.

8. Ibid.

9. “REI Condemns Gun Violence, Especially the Slaying of Children and Educators,” The Racial Equity Institute, <https://racialequityinstitute.org/statements/>, June 1, 2022, accessed August 15, 2022.

10. Documents released by UNC SOM in response to a Freedom of Information Act request.

But UNC SOM's DEI Annual Report describes a task force designed to "integrate social justice into the curriculum." It announces requirements that each department develop an "Inclusive Excellence Plan," the creation of diversity councils and committees, and efforts to mandate diversity, equity, and inclusion in the school's appointments, promotions, and tenure process.¹¹

It also contains statements such as:

As spring turned to summer, the pandemic-induced stressors on Black and Brown communities were further exacerbated as unarmed Black civilians were murdered in several high-profile police shootings, pushing these communities to lead a global movement for social justice largely aligned with the Black Lives Matter movement.

Departments at UNC SOM take this effort seriously. For example, the Basic Science Departments, which include Biochemistry and Biophysics; Pharmacology; Nutrition; and Microbiology and Immunology; state that they are:

committed to making meaningful changes in [our] operations to reduce demographic imbalances in the faculty and to contribute to dismantling the pervasive systemic racism that plagues academic research.¹²

UNC SOM subscribes to overt racial preferences when considering candidates for hire. The school's Rising Star Program says its goal is to "increase diversity among faculty members in the basic sciences, with a focus on postdoctoral fellows from historically underrepresented groups."¹³

Divisive Curriculum

The school's health disparities curriculum includes sessions on ways to "identify the ways that race and ethnicity impact health, disease, and roles of physicians" and "the impact of implicit bias" (a discredited psychological theory which holds that white people are inherently and unconsciously racist). It also includes sessions with politically loaded descriptions, such as "the U.S. health insurance (non) system, the uninsured population in North Carolina and beyond, and the current debate over the Affordable Care Act and health reform."¹⁴

11. Ibid.

12. Ibid.

13. Ibid.

14. Ibid.

Challenges to Recognizing Microaggressions



- Not overt discrimination or macroaggressions because the people who commit microaggressions might not be aware of them
- Often overlooked or minimized, and the cumulative harm is dismissed (poor appreciation for physical, mental, and emotional impacts)
- The intent of the person committing the microaggression is not a factor...the result is an insult/slight that injures the recipient no matter the intent
 - Recall trainings on sexual harassment that all UNC employees have to complete
- Privilege and marginalization are situational

Panels and workshops put on for students at UNC SOM explore racial microaggressions, including “microassaults, microinsults, and microinvalidations.” During these workshops, participants are provided with a diversity, equity, and inclusion vocabulary worksheet, which encourages them to report “transgressors” against the orthodoxy.¹⁵

- *Racial Equity in Medicine* is held as part of first-year medical student orientation. The course begins with the statement, “UNC was built on and profited from the seizure of indigenous land,” followed by additional descriptions of “UNC’s historical relationship to racial inequity.” Students are placed in small groups to discuss questions related to racial equity in medical school and how they will contribute to combating racial inequality as a physician. This course was presented on July 29, 2021 by Nate Thomas (vice dean for Diversity, Equity, and Inclusion) and Stephanie Brown (director of strategic initiatives, Office of Diversity, Equity, and Inclusion).

Small Group Discussion Questions



1. Why is it important that we think about racial equality in medical school?
2. What are you most comfortable thinking about? What is more difficult?
3. How do these conversations change when they happen within groups and across groups?
4. What role will you be able to play as physician to combat racial inequality?

- *Understanding and Responding to Microaggressions*, presented by the UNC School of Medicine Office of Diversity, Equity, and Inclusion, instructs participants in the definition of microaggressions and macroaggressions. They are told that the intent of the person who commits a microaggression “is not a factor,” only the “privilege and marginalization” of the parties involved. Those who are guilty of committing a microaggression are told they must apologize in response.

¹⁵. Ibid.

- *Diversity, Equity, and Inclusion: Leadership and Organizational Change* defines equity as “making sure people have what they need to be successful,” while equality is “making sure that everyone has the same thing.” The “storm” of factors such as social injustice, activism, emotional trauma, protests, COVID, and “a damaged economy” contribute to the need to elevate DEI to “a strategic priority.” The strategies within the DEI Framework are built around “social justice principles.” This course was presented January 14, 2021 by Dr. Nathan Thomas, Vice Dean for DEI and Associate Professor, department of Psychiatry, UNC School of Medicine.
- *Infusing Diversity, Equity, and Inclusion into the Basic Sciences Microbiology and Immunology* describes obstacles “faced by underrepresented trainees in academia” and DEI initiatives taken to address UNC-specific issues related to these obstacles. The “BIPOC Equity Together” initiative aims to unify all research departments’ DEI efforts to “address racism” and “infuse social justice” into the basic sciences curriculum. This offering was presented on August 31, 2021 by Dr. Nathan Thomas, Vice Dean for DEI and Associate Professor, department of Psychiatry, UNC School of Medicine.

Elements that contribute to the Storm: Addressing the DEI Problem

- The history of marginalization and oppression in our society
- The psychology of racism, sexism, homophobia, and other forms of discrimination
- The unconscious and conscious aspects of bias, micro & macro aggressions that are verbal and non verbal, and what we learn or don't learn about each other that form our blind spots and impact how we make culturally relevant decisions



- *Identity, Intersectionality, and Implicit Bias* (offered in 2020) explains why DEI is critical to the STEM fields and to scientific research endeavors. Learners are instructed on “impostor syndrome, stereotype threat, implicit bias, and microaggressions.” Discussions include “What are your earliest memories about gender?” and “the matrix of oppression.”
- *Responding to Discrimination & Mistreatment in Clinical Education* discusses the impact of discrimination and bias on physicians, students, and patients, as well as how “microaggressions are like mosquito bites.” During the February 2, 2022 presentation by Kimberly Nichols, MD and associate dean of DEI Faculty Access and Success, participants were provided with scripting for how to respond appropriately in order to be good allies and how “targets” can respond to “transgressors.”

The Climate: BBS BIPOC Equity Together (BBSP-BET)

- **Goal 1: Assess the equity gap within research departments and programs**
- **Goal 2: Build an inclusive community in BBSP**
 - Create a platform to unify all SOM research department DEI efforts.
 - Develop and implement programming to address racism within academia.
 - Promote the development of a culturally intelligent scientific community.
 - Provide Culturally Aware Mentoring allows faculty to identify and address the sources and impact of personal biases that may operate in their research spaces.
- **Goal 3: Recruit and retain BIPOC in academia**
 - Amplify BIPOC voices in STEM
 - Increase and retain diverse students, faculty and staff
 - Build solidarity with BIPOC students, faculty and staff

Matrix of Oppression				
Social Identity Categories	Privileged Social Groups	Border Social Groups	Targeted Social Groups	Ism
Race	White People	Biracial People (White/Latino, Black, Asian)	Asian, Black Latino, Native People	Racism
Sex	Bio Men	Transsexual, Intersex People	Bio Women	Sexism
Gender	Gender Conforming Bio Men & Women	Gender Ambiguous Bio Men & Women	Transgender, Genderqueer, Intersex People	Transgender Oppression
Sexual Orientation	Heterosexual People	Bisexual People	Lesbians, Gay Men	Heterosexism
Class	Rich, Upper Class People	Middle Class People	Working Class, Working People	Classism
Ability/Disability	Temporarily Able-Bodied People	People with Temporary Disabilities	People with Disabilities	Ableism
Religion	Protestants	Roman Catholic (historically)	Jews, Muslims, Hindus	Religious Oppression
Age	Adults	Young Adults	Elders, Young People	Ageism/Adultism

©Teaching for Diversity and Social Justice, Second Edition, routledge, 2007

- *Respecting All: Microaggression Awareness and Upstander Training* is offered by the UNC School of Medicine Office of Diversity, Equity, and Inclusion and provides further definition of microaggressions by distinguishing them as *microassaults*, *microinsults*, and *microinvalidations*.
- *Unconscious Bias Awareness* presents the “science of unconscious bias,” nine types of bias, and the “themes within our bias.” The discussion, facilitated by the UNC School of Medicine Office of Diversity, Equity, and Inclusion included examples of bias at UNC SOM.
- *Bias 101: A Primer on Implicit Bias* is yet another training session by the UNC School of Medicine Office of Inclusive Excellence to offer descriptions of implicit bias, the consequences of bias, and strategies for mitigation.
- *Racial Justice in the School of Medicine* uses the question “What is a stereotype associated with your racial group that is true of you?” as an icebreaker. *Allegories on Race and Racism: A Gardner’s Tale*, by Dr. Camara Jones, is used in this offering from the UNC School of Medicine Office of Diversity, Equity, and Inclusion. Among the statements included in “What We Know” is the claim that disparities related to health, education, and the justice system “are systemic and institutionalized.”

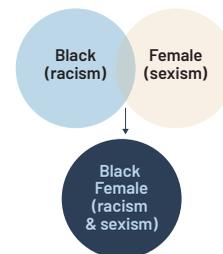
Our brains may be efficient, but not necessarily accurate!



Association – Learned that snakes are dangerous
 Limited Information – not a snake expert
 Implicit Bias – Against snakes
 Quick Reaction – to Get to safety

Some biases have a more harmful impact.

Race and Other Social Identities



Race compounds the oppression and marginalization faced by members of other social identities

- *Unconscious Bias Refresher* asks learners to choose the best fit for the next basic sciences cohort based on photos of potential students. The course closes with a quote that assures participants “it’s not inevitable that these biases have to control our behavior.”

Aside from passing references to socioeconomic status, UNC SOM does not refer to any diversity other than racial diversity in these documents. Diversity of thought, religion, age, experience, and geography are largely ignored.

Sex at UNC SOM

Which candidate would fit well as part of the next BBSP class?



1.



2.



3.



4.



Of course, woke identity politics and DEI go beyond race. Unsurprisingly, the broader agenda — including sex and gender identity issues — has permeated UNC SOM as well.

The school advertises its Department of Urology as “a regional leader in transgender care,” offering a “full range of urologic services including primary gender affirming surgery (including metoidioplasty, phalloplasty, and vaginoplasty), penile prosthesis, and orchiectomy.”¹⁶ With a goal of “improv[ing] access to UNC Healthcare for transgender patients in the region,” the Department of Urology began the UNC Transgender Health Program.¹⁷

This program will operate alongside the Gender Affirming Care Clinic, the Pediatric and Adolescent Clinic for Gender Wellness, and the UNC Psychiatry Gender Equity and Wellness Initiative.¹⁸⁻¹⁹⁻²⁰

As one would expect, the Pediatric and Adolescent Clinic for Gender Wellness focuses on providing “care to children and adolescents with gender dysphoria and other concerns

16. University of North Carolina School of Medicine Department of Urology, “Urology Services for Transgender and Gender Diverse Individuals,” <https://www.med.unc.edu/urology/transgender-health/>, accessed September 1, 2022.

17. Ibid.

18. University of North Carolina School of Medicine, “Gender Affirming Care,” <https://www.med.unc.edu/shac/programs/gender-affirming-care/>, accessed September 1, 2022.

19. UNC Health Children’s, “Pediatric and Adolescent Clinic for Gender Wellness,” <https://www.uncchildrens.org/uncmc/unc-childrens/care-treatment/endocrinology/clinical-programs/gender-clinic/>, accessed September 1, 2022.

20. University of North Carolina School of Medicine Department of Psychiatry, “UNC Psychiatry Gender Equity and Wellness Initiative,” <https://www.med.unc.edu/psych/patient-care/child-adolescent/outpatient/gender-equality-psychiatry-clinic/>, accessed September 1, 2022.

regarding gender identity.”²¹ For its part, the Gender Affirming Care Clinic describes “Our Mission” as offering “free gender affirming care on the 3rd Wednesday of every month. Our goal is to improve the health of the transgender community by providing free, culturally humble, gender-affirming care and creating opportunities for health professions students to learn about serving this community. Services include prescriptions for hormone therapy, general primary care, letters of support for surgery, and referrals to other resources and providers.”²²

Faculty and students at UNC SOM are expected to use inclusive language by “practic[ing] and us[ing] correct pronouns” and “tak[ing] correction with grace and humility.”²³ And, lest there be any confusion, everyone at UNC SOM is told to “not express, reinforce or police ‘the norm.’”²⁴

Personnel Policy

UNC SOM openly advertises its consideration of diversity in admissions and hiring.

In describing “Our Ideal Candidate,” UNC SOM lists diversity as a factor “considered in the admissions process” alongside more objective measures like a “rigorous and successful academic record,” “competitive MCAT scores,” and “life and work experiences.”²⁵ As UNC SOM says, “smart is easy.”²⁶

Significant funds are devoted to promoting these efforts throughout the educational experience. Students with “a passion for working with social justice and the arts” may apply for two fellowships that award \$2,500 simply “to work to ensure the curriculum and culture at UNC SOM is not only inclusive, but explicitly anti-racist.”²⁷ Winners of the fellowship are expected to host annual “Can we talk about race?” forums.²⁸

Several awards of \$1,500 to \$2,000, called DEI Mini Grants, are also awarded to students to “support DEI requests and projects.”²⁹ A number of programs and scholarships are

21. UNC Health Children’s, “Pediatric and Adolescent Clinic for Gender Wellness,” <https://www.uncchildrens.org/uncmc/unc-childrens/care-treatment/endocrinology/clinical-programs/gender-clinic/>, accessed September 1, 2022.

22. University of North Carolina School of Medicine, “Gender Affirming Care,” <https://www.med.unc.edu/shac/programs/gender-affirming-care/>, accessed September 1, 2022.

23. University of North Carolina School of Medicine Health Sciences, “Education,” <https://www.med.unc.edu/healthsciences/about-us/diversity/jeditoolkit/education/>, accessed September 1, 2022.

24. Ibid.

25. University of North Carolina School of Medicine, “Our Ideal Candidate,” <https://www.med.unc.edu/shac/programs/gender-affirming-care/>, accessed September 1, 2022.

26. Ibid.

27. University of North Carolina School of Medicine Office of Diversity, Equity, and Inclusion, “Paul A. Godley Art of Medicine fellowship,” <https://www.med.unc.edu/inclusion/programs-initiatives/paul-a-godley-art-of-medicine-fellowship/>, accessed September 1, 2022.

28. Ibid.

29. University of North Carolina School of Medicine, “SOM DEI Mini Grant Awardees Announced,” <https://news.unchealthcare.org/2022/08/som-dei-mini-grant-awardees-announced/>, accessed September 1, 2022.

reserved for individuals who are “underrepresented in medicine and/or have made a commitment to serve,” and are willing to work in an “underserved community.”³⁰⁻³¹

Regarding hiring, the school states that it “strive[s] to recruit, retain, and develop a diverse group of individuals.”³² Documents obtained under FOIA law show that woke identity politics impacts how UNC SOM handles personnel on a granular level. For example, a hiring worksheet shared at a DEI leadership retreat tells the school’s employees that it “should be clear that your department values DEI” and is a “champion of DEI.”³³ The document also references “DEI funding for faculty hires and retention.”³⁴

This combination of policies, programs, personnel, and grantmaking has spawned a plethora of affinity groups and organizations likely to reinforce and demand more of those policies, programs, and personnel which created them. These groups include:

- Allies for Minorities and Women in Science and Engineering
- Carolina Black Caucus
- First Nations Graduate Circle
- Latino Medical Student Association
- Medical Student Pride Alliance
- Queer Straight Alliance
- Society for the Advancement of Chicanos/Hispanics and Native Americans in Science
- Society for Black Biomedical Scientists
- Women in Science
- Women of Worth Initiative³⁵

30. University of North Carolina School of Medicine Department of Emergency Medicine, “The University of North Carolina Department of Emergency Medicine Scholarship for Under-Represented Minority Providers in Emergency Medicine,” https://www.med.unc.edu/ome/studentaffairs/wp-content/uploads/sites/903/2019/05/UNC-EM-URM-Scholarship.flyer_.pdf, accessed September 1, 2022.

31. University of North Carolina School of Medicine Office of Diversity, Equity, and Inclusion, “Larry D. Keith Scholarship for Visiting Student Electives,” <https://www.med.unc.edu/inclusion/programs-initiatives/visiting-student-elective/>, accessed 10/14/2022.

32. University of North Carolina School of Medicine, “Statement on Diversity, Equity, and Inclusion,” <https://www.med.unc.edu/diversity/statement/>, accessed September 1, 2022.

33. Ibid.

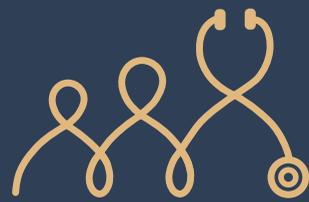
34. Ibid.

35. University of North Carolina School of Medicine Office of Diversity, Equity, and Inclusion, “Resources,” <https://www.med.unc.edu/inclusion/resources/>, accessed September 1, 2022.

CONCLUSION

It is likely that this review only describes some of the ways that the woke agenda is at work at UNC SOM. For example, the school withheld a number of items, including recordings of panels, handouts, or resource documents of the numerous anti-racist and woke trainings it has sponsored.

Nevertheless, it is clear that UNC SOM has made significant progress toward its goal of pervasively “integrat[ing] social justice into the curriculum.” It is equally clear that expressing support for and compliance with divisive ideology is now a significant factor, if not a requirement, for admission into the medical school and success as a medical student at UNC.



Do No Harm

DONOHARMMEDICINE.ORG
