

The Ohio State University College of Medicine:

A destination for indoctrination
in health equity and anti-racism

Laura L. Morgan MSN, RN

July 2023



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Executive Summary

The Ohio State University College of Medicine has adopted the language and program of unhealthful ideas. These ideas, expressed in terms such as anti-racism and health equity, infuse the image the college projects to new recruits. They shape the college's approach to admitting new students and supporting enrolled ones. Enrolled students are strongly encouraged to view medicine through the lens of the diversity, equity and inclusion (DEI) agenda. When the college makes its strategic plans, it leans on health equity and social justice, with an eye toward creating not only health professionals, but agents of social change.

The college's use of health equity distorts the practice of medicine. Medical professionals have an ethical obligation to assess and treat patients according to their specific, personal needs. The concept of health equity, however, focuses attention on groups of people. It encourages medical professionals to treat patients as members of a group rather than individuals.

The college seeks to inculcate DEI values in students, starting from the admissions process. Recruiting materials tell would-be students about various university and college offices that promote social justice. They also advise students that the college will treat them differently based on their race or ethnicity, with certain programs and financial supports available only to members of favored groups. If numerical representation of "under-represented enrollment" groups is a sign of success, the

college succeeds. The share of such students exceeds the national average for similar institutions by 10%.

Students are naturally biased, the college asserts. Members of the admissions committee as well as faculty members are subjected to implicit bias training, using an assessment tool — the Implicit Association Test — that does not satisfy fundamental standards for scientific validity.

The OSU College of Medicine seeks to transform the healthcare industry to meet its vision of anti-racism and health equity. Its 2021 annual report calls for increasing the number of students from underrepresented groups and enlisting employees, including faculty members, in the DEI agenda.

Questionable and one-sided intellectual sources appear before students as college-endorsed resources. The college recommends a panoply of books, podcasts and other materials. One of the more prominent is The 1619 Project of the New York Times, which asserts that the United States was conceived in and gave birth to racism. Widely respected historians of various political persuasions have noted the error-filled nature of this project. Other sources include Robin DiAngelo (author of "White Fragility") and "How to be an Anti-Racist" (Ibram X. Kendi).

A “bold new curriculum” asserts that medical students are part of the problem of health inequities due to their unexamined beliefs.

First-year students are subjected to an exercise meant to counteract a “denial of racism within the profession of medicine.” Well-meaning medical students are told they may not recognize “their negatively biased attitudes, perspectives, and habits.”

The college of medicine favors some protected classes over all students when it administers preparatory programs. Some students can receive extra help from experienced mentors and even receive stipends — but only if they belong to certain racial or ethnic groups. The college offers four specific programs, including one for M.D./Ph.D. students, to students who can claim membership in certain groups.

The race-conscious approach to medical education extends beyond The Ohio State University College of Medicine to include its affiliated institution, The Ohio State Wexner Medical Center. The medical center calls for “integrating health equity, anti-racism efforts into health care education.” Its chief diversity officer says institutions need to “uproot beliefs and facilitate changing of attitudes.” In other words, clinical or research expertise is not sufficient. The Graduate Medical Education office invites students to take the “21-Day Anti-Racism Challenge,” suggesting they need a reeducation program to correct their faulty beliefs. Racism, the medical center says, “is often the underlying foundation that breeds inequity.”

It is possible to observe statistical differences across ethnic or racial groups in various health indicators. It is not clear, however, that a focus on those differences, which can lead to erroneous conclusions, is an effective way of responding to them.

The Ohio State University College of Medicine (OSUCOM) is ranked #28 on the *U.S. News and World Report (USNWR) 2023 Best Medical Schools* list for research institutions,¹ and the school has made substantial operational and scholastic investments in its efforts to be “leaders in transforming health.”² This commitment, however, is infused with an effort to promote dangerous and divisive ideologies based on diversity, equity, and inclusion (DEI) and anti-racism.

What is anti-racism?

Despite repeatedly endorsing anti-racism concepts^{3,4}, OSUCOM never defines the term “anti-racism.” This concept is an element of critical race theory, which declares that America is a systemically racist country that can be divided into two groups: Oppressors and oppressed. The white oppressors must be actively discriminated against by the minority oppressed so that social justice can be achieved.⁵ Anti-racism is in direct opposition to the American principles of equal protection under the law. Placing the doctrines of anti-

racism into medical education teaches them to place more importance on group identity politics instead of treating patients as individuals with unique needs.⁶

Ibram X. Kendi, author of *How to Be an Antiracist* and founder of the Boston University Center for Antiracist Research,⁷ defines it as such: “The only remedy to past discrimination is present discrimination. The only remedy to present discrimination is future discrimination.”⁸ One can infer that OSUCOM, which cites Kendi in prominent places on its website, seeks to promote new discrimination.

In medical education, advocating for anti-racism turns medical students into activists who place great weight on identity politics. The online resources and public-facing description of initiatives at OSUCOM and the OSU Wexner Medical Center push this narrative again and again, as described in this report. The emphasis on making patient care and professional relationship decisions based on skin color is

¹ U.S. News & World Report. *Find the Best Medical Schools*. <https://premium.usnews.com/best-graduate-schools/top-medical-schools/ohio-state-university-columbus-04089>, accessed June 12, 2023.

² The Ohio State University College of Medicine. *Leaders in transforming health*. <https://medicine.osu.edu/>, accessed June 12, 2023.

³ The Ohio State University College of Medicine. *University anti-racism/bias resources*. <https://medicine.osu.edu/student-resources/university-antiracism-bias-resources>, accessed June 12, 2023.

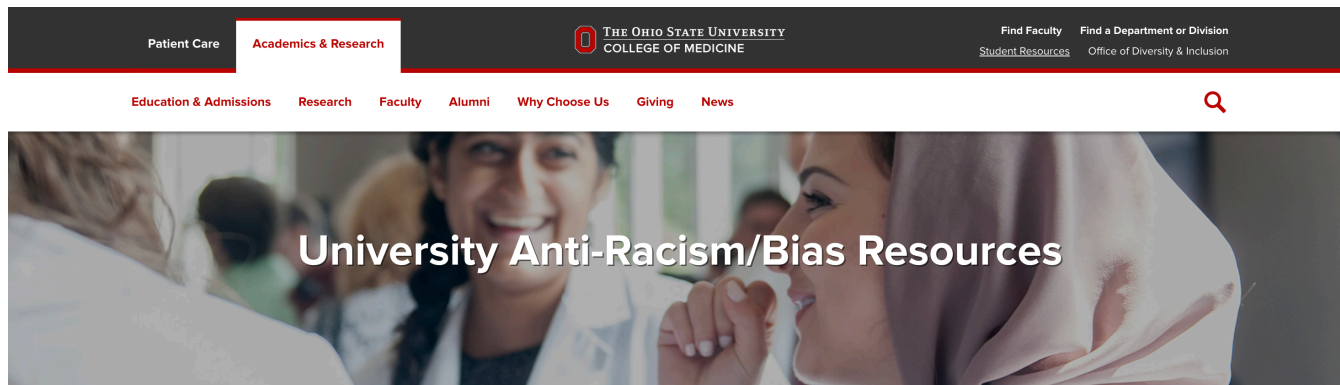
⁴ The Ohio State University Wexner Medical Center. *Anti-racism initiatives: Improving health equity through anti-racism efforts*. <https://wexnermedical.osu.edu/about-us/anti-racism-initiative>, accessed April 2, 2023.

⁵ Rufo C. *Racism in the name of “antiracism,”* February 15, 2023. City Journal. <https://www.city-journal.org/article/racism-in-the-name-of-anti-racism>, accessed April 16, 2023.

⁶ Do No Harm. *FAQs: What is anti-racism?* <https://donoharmmedicine.org/faqs/>, accessed April 16, 2023.

⁷ BU Center for Antiracist Research. *Our team: Meet the teams behind our antiracist research, policy, narrative, and advocacy work*. <https://www.bu.edu/antiracism-center/the-center/teams/#director>. accessed June 12, 2023.

⁸ Caldwell C. Ibram X. Kendi, *prophet of anti-racism*. National Review, July 23, 2020. accessed June 12, 2023, <https://www.nationalreview.com/magazine/2020/08/10/ibram-x-kendi-prophet-of-anti-racism/>.



Home / Student Resources / University Anti-racism/Bias Resources

At The Ohio State University College of Medicine, we strive to be a national leader of inclusive excellence by delivering on diversity, equity, inclusion and belonging among all faculty, staff and learners. To that end, we are committed to ensure that our students experience learning environments and curricula that are antiracist and free of bias. We are committed to continuing to improve along this journey.

Figure 1. From OSUCOM student resources.

completely at odds with traditional healthcare values.⁹

OSUCOM has embedded health equity and social justice throughout its recruiting process, strategic planning, and medical training curriculum. It also is invested in developing what it calls “changemakers” who will increase the impact of the school’s health equity agenda, as it communicated in its 2021 annual report.¹⁰

“Health equity:” The prism for distorting medicine at the Ohio State University

⁹ Do No Harm. *Frequently asked questions: What is anti-racism?* <https://donoharmmedicine.org/faqs/>, accessed October 25, 2022.

¹⁰ The Ohio State University College of Medicine. *Transforming health: Annual report 2021*. November 1, 2021. <https://medicine.osu.edu/-/media/files/medicine/why-choose-us/annual-report/collegeofmedicineannualreport2021final222.pdf>, accessed October 25, 2022.



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Figure 2. OSUCOM Annual Report 2021, page 50.

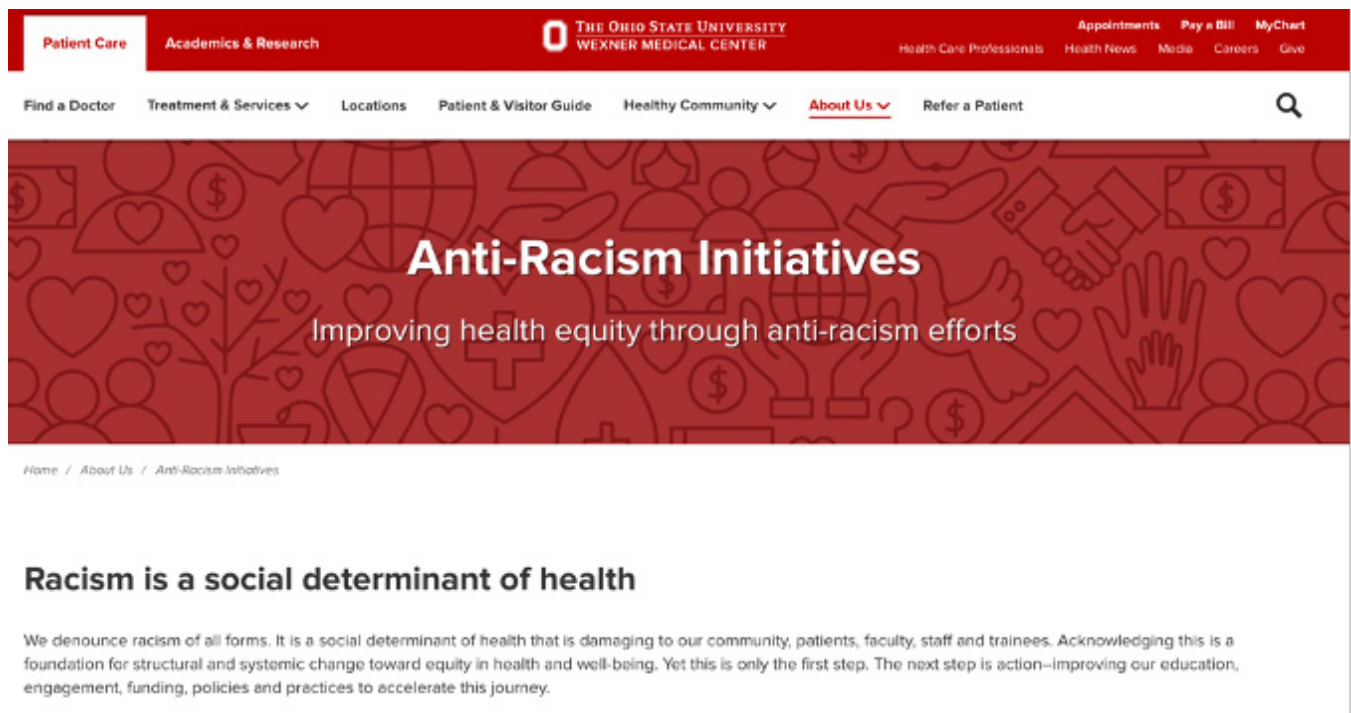


Figure 3. From the OSU Wexner Medical Center “About Us” page.

The term *health equity* sounds harmless, but it is actually an attack on core principles that medical practitioners have traditionally observed. Under health equity, medical personnel must evaluate everything through the lens of race or identity rather than using their assessment and analysis skills to promote each particular patient’s well-being. This emphasis is concerning because it replaces the clinically based focus on caring for patients with a race-based focus. The same emphasis appears in many other operational

policies and processes at the OSUCOM and its associated hospital, the Wexner Medical Center.

This report uses OSUCOM’s own words and actions to highlight practices the college uses to recruit and select medical students. It also describes the steps the college uses to transform students into future physicians who will advance the organization’s health equity and anti-racism goals.

Recruiting: How OSUCOM sells itself with the DEI narrative

When a prospective medical student considers OSUCOM, the school conveys its commitment to DEI in the mission statement: “Diversity is central to our academic medical center mission and serves as a driver of institutional excellence.”¹¹

OSUCOM says it has several programs “designed to level the playing field” across applicants, and it has specific training to address “the unconscious bias that impacts admission and training of students” from certain groups, based on race and gender.¹² OSUCOM sponsors its own *Office of Diversity & Inclusion* (ODI), and future medical students are informed about its vision for the transformation of healthcare through its various initiatives and educational offerings.¹³

OSUCOM distributes a diversity and inclusion brochure, which is a nine-page electronic document that provides comprehensive information regarding OSUCOM’s criteria for selecting future medical students, providing patient care services in underrepresented communities, and recognizing DEI-related student organizations, among other things.

The brochure quotes Demicha Rankin, MD, associate dean for admissions at OSUCOM, who informs prospective medical students that the school chooses its students on more than academic performance: Selections are also based “on a range of *personal attributes and experiences* that provide a holistic view of each applicant.”¹⁴



Figure 4. OSUCOM Office of Diversity & Inclusion mission and vision page.

The brochure goes on to list the special programs available to targeted students. One such program is the Medical Careers Pathway (MEDPATH) program. OSUCOM’s MEDPATH program limits its funding

¹¹ The Ohio State University College of Medicine. *Diversity mission and vision*. <https://medicine.osu.edu/diversity/mission>, accessed June 12, 2023.

¹² The Ohio State University College of Medicine. *Why choose the Ohio State College of Medicine?* <https://medicine.osu.edu/why-choose-us>, accessed June 12, 2023.

¹³ The Ohio State University College of Medicine. *Office of Diversity & Inclusion*. <https://medicine.osu.edu/diversity>, accessed June 12, 2023.

¹⁴ The Ohio State University College of Medicine. *The World is Changing. Medicine is Changing. We’re Leading the Way: Drivers of excellence and innovation – Diversity and Inclusion*. <https://medicine.osu.edu/-/media/files/medicine/diversity/diversityand-inclusion-brochure.pdf>, accessed June 12, 2023.



Ohio State is creating the future of medicine through . . .

A SUPPORTIVE LEARNING ENVIRONMENT

The college’s Office for Diversity and Inclusion (ODI) supports the needs and interests of students from groups who are traditionally underrepresented in medicine (URM) and traditionally underserved in the biomedical sciences. The goal of the ODI is to help qualified students from all backgrounds to realize their dreams of becoming physicians while making their medical school experiences personally and professionally rewarding.

ODI offers academic and career counseling, student advocacy and assistance with scholarships and grants for which students may be eligible. The office also supports educational experiences that promote personal growth and cultural sensitivity, such as assisting with travel expenses to professional conferences and matching students with mentors who are compatible with their individual professional goals and unique cultural backgrounds.

The office oversees the college’s pipeline programs to encourage greater diversity in medical school. One such program is the **Medical Careers Pathway (MEDPATH)** Post Baccalaureate Program, a one-year program aimed at increasing the number of underrepresented minorities and students from socioeconomically disadvantaged backgrounds who enter medical school. The **ASPIRE** Program aims to provide research experience for Ohio State undergraduate students from underrepresented and/or disadvantaged groups who aspire to become medical doctors, clinician scientists or basic science researchers by earning an MD, MD/PhD or PhD degree. In addition, the underrepresented in medicine **Visiting Student Program** for medical students provides a scholarship for underrepresented medical students to perform visiting rotations at the many facilities within, or partnering with, The Ohio State University Wexner Medical Center and Ohio State College of Medicine.

The college’s annual **MD Camp** program allows high school students and recent high school graduates to sample medical school life through a three-week summer camp program on Ohio State’s health sciences campus. MD Camp strives to inspire students to pursue a career in medicine by challenging them intellectually, facilitating their academic and social development and increasing their awareness of the special needs of underserved populations.

Figure 5. From the OSUCOM diversity and inclusion brochure.

to “underrepresented minorities and students from educationally and/or socioeconomically disadvantaged backgrounds who enter medical school.”¹⁵ This is at odds with the College of Medicine Anti-Discrimination Policy, which states:

The OSU College of Medicine (COM) does not discriminate against any individual applicant or student based on age, ethnicity, color, race, gender, gender identity or expression, genetic information, sex, sexual orientation, religion, national origin or ancestry, military or veteran status, marital or parental status, or any basis protected by federal law in the admissions, educational and other COM programs.¹⁶

Interviewing: How woke are you?

Once prospective students submit their primary applications for admission to the College of Medicine, OSU requires them to respond to university-specific secondary questions. To ensure the applicants’ attitudes about DEI will align with its own mission and values, OSUCOM asks:

The OSU COM Admissions vision statement states that the admissions committee will assemble a class that displays “diversity in background and thought.” Why is “diversity in background and thought” a desirable characteristic for a medical school’s student body?¹⁷

Applicants who seek out details about the vision statement will discover that OSUCOM’s “ultimate goal” is to eliminate disparities in the healthcare industry by adhering to DEI philosophies. “Attaining a critical mass of students underrepresented in medicine and biological sciences,” it says, “avoids the negative effects of isolation.”¹⁸

The USNWR rankings for 2023 include additional statistics on “under-represented minority enrollment” in each program. It is **23.1%**, as reported by the rankings. Underrepresented enrollment at OSUCOM is 110.6% of the share found at national private schools and state public schools. On a 0-10 scale, OSUCOM’s “diversity score” is **3.3** (obtained by comparing the diversity ranking indicators for race/ethnicity-based enrollment to the school that scored 10.0).¹⁹ This score places OSUCOM in a tie for #13 on the *Most Diverse Medical Schools* list, ranked in 2023.²⁰

¹⁵ The Ohio State University College of Medicine. MEDPATH program: Enriching the academic knowledge and skills of students underrepresented in medicine. <https://medicine.osu.edu/diversity/initiatives/medpath-program>, accessed June 12, 2023.

¹⁶ The Ohio State University College of Medicine. *College of Medicine anti-discrimination policy*. <https://medicine.osu.edu/diversity/anti-discrimination-policy>, accessed June 12, 2023.

¹⁷ ProspectiveDoctor.com. *Ohio State University College of Medicine secondary questions*. <https://www.prospectivedoctor.com/ohio-state-university-college-of-medicine-secondary/>, accessed June 12, 2023.

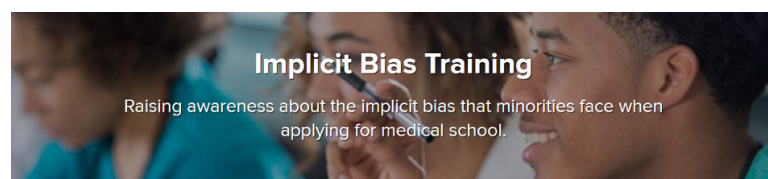
¹⁸ The Ohio State University College of Medicine. *Diversity mission and vision*. <https://medicine.osu.edu/diversity/mission>, accessed June 12, 2023.

¹⁹ U.S. News & World Report. *Find the Best Medical Schools*. <https://premium.usnews.com/best-graduate-schools/top-medical-schools/ohio-state-university-columbus-04089>, accessed June 12.

²⁰ U.S. News & World Report. *Most diverse medical schools*. <https://premium.usnews.com/best-graduate-schools/top-medical-schools/medical-school-diversity-rankings>, accessed June 12, 2023.

Declaring implicit bias in the admissions process, and how OSUCOM says it addresses it

Dr. Quinn Capers, former associate dean of admissions and vice dean of faculty affairs, has written about the implicit bias within medical school admissions committees.²¹



Home / Office of Diversity & Inclusion / Diversity at Ohio State / Implicit Bias Training

Are medical schools' admissions committees unconsciously biased against minorities?

Figure 6. OSUCOM Office of Diversity & Inclusion, *Implicit Bias Training*.

Dr. Capers and his colleague Dr. Daniel Clinchot, vice dean for education, and Dr. Leon McDougle, chief diversity officer,²² are on the record as saying, “Implicit white race preference has been associated with discrimination in the education, criminal justice, and health care systems and could impede the entry of African Americans into the medical profession, where they and other minorities remain underrepresented.” To address this alleged problem, the school

measures implicit bias during training sessions for the admissions committee and other OSUCOM faculty members. The measuring tool is the Implicit Association Test (IAT).²³

The IAT is an unreliable instrument, however. It does not meet the customary quality control standards the field of psychology normally expects. For example, the IAT’s *test-retest reliability* (the extent to which it produces similar results when taken more than once) is well below the normal academic standards for real-world applications. This metric is one that psychologists particularly look for when evaluating the reliability of a test that is taken in a single sitting.²⁴

OSUCOM leadership continues to rely on this information, despite the test’s critical flaw. A YouTube video from December 2020²⁵ features Dr. McDougle, Dr. Capers, Dr. J. Nwando Olayiwola (chair of the Department of Family and Community Medicine), and a fourth-year medical student (Corey Thompson) weighing in as well.

They discuss implicit bias and a related training workshop required of the “top 200 leaders” at

²¹ The Ohio State University College of Medicine. *Implicit Bias Training*. <https://medicine.osu.edu/diversity/initiatives/implicit-bias-training>, accessed June 12, 2023.

²² The Ohio State University Wexner Medical Center. *Ohio State finds unconscious racial bias in medical school admissions process*. <https://wexnermedical.osu.edu/mediaroom/pressreleaselisting/ohio-state-study-finds-unconscious-racial-bias-in-medical-school-admissions-process>, accessed June 12.

²³ Capers Q; Clinchot D; McDougle L; Greenwald A. *Implicit racial bias in medical school admissions*. *Academic Medicine*, March 2017: (92)3, 365-369. doi: 10.1097/ACM.0000000000001388.

²⁴ Singal J. *Psychology’s favorite tool for measuring racism isn’t up to the job* (January 2017). *New York magazine: The Cut*. <https://www.thecut.com/2017/01/psychologys-racism-measuring-tool-isnt-up-to-the-job.html>, accessed October 4, 2022.

²⁵ The Ohio State University College of Medicine Office of Diversity and Inclusion. *The Carmen Collection: Advancing health equity through diversity in medicine*. <https://youtu.be/rtI3Y2AEtTA>, accessed June 12, 2023.

the medical school. The training, delivered by Dr. Capers, has the aim of “raising awareness about the implicit bias that minorities face when applying for medical school.” Dr. Capers began this work in 2012, when he had all 140 members of the admissions committee take the IAT several times. The results reported “significant levels of implicit or unconscious preference for certain racial and gender groups.” He used this data to develop the implicit bias training course that has been in use since 2017.²⁶

Dr. Capers also explains how making diversity a top priority for the admissions committee resulted in applying more criteria when

reviewing medical school applications, interviewing applicants, and deciding whom to invite. He stated these are “things that were meant to make our program more excellent.” In a short timeframe, using these criteria with intentionality led to African Americans making up 25% of students in OSUCOM’s cardiology fellowship. Corey Thompson made similar comments about the increased number of African American faculty, students, and fellows over the past 50 years. Dr. McDougale wraps up the video by affirming, “We’re bringing in diversity to drive excellence and to help diminish and eliminate healthcare disparities to advance health equity.”²⁷

Perpetuating DEI and anti-racist rhetoric across the OSU College of Medicine

Medical students who are accepted to OSUCOM soon learn of the various DEI and anti-racism endeavors at the school and how their learning activities will be influenced by them. Carol R. Bradford, MD, MS, FACS, dean and vice president for health sciences, communicates the College of Medicine’s strategic plan in its 2021 annual report.²⁸ The report lists seven strategic

pillars that OSUCOM will use to transform the healthcare industry “through inclusive and innovative education.” These include the following goals:

²⁶ The Ohio State University College of Medicine. *Implicit Bias Training*. <https://medicine.osu.edu/diversity/initiatives/implicit-bias-training>, accessed June 12, 2023.

²⁷ The Ohio State University College of Medicine Office of Diversity and Inclusion. *The Carmen Collection: Advancing health equity through diversity in medicine*. <https://youtu.be/rtI3Y2AEtTA>, accessed June 12, 2023.

²⁸ The Ohio State University College of Medicine. *Transforming Health: Annual Report 2021*. <https://medicine.osu.edu/-/media/files/medicine/why-choose-us/annual-report/collegeofmedicineannualreport2021final222.pdf>, accessed June 12, 2023.

- Be a national leader of inclusive excellence by delivering on **diversity, equity, inclusion and belonging** among all faculty, staff and learners
- Advance **health equity** and address **social determinants of health**



Figure 7. OSUCOM 2021 Annual Report, pages 6-7.

The preferred method for OSUCOM to obtain its DEI goal is to “Increase recruitment of individuals who identify with underrepresented communities at all levels of the organization.” The DEI pillar also mandates training according to the “Anti-Racism Action Plan”;

annual review incentives for faculty and staff who drive DEI; and increased scholarship funding and opportunities for students from “underrepresented communities.”²⁹

²⁹ The Ohio State University College of Medicine. *Strategic Plan: Diversity Equity and Inclusion. Diversity, Equity and Inclusion Strategic Pillar | Ohio State College of Medicine (osu.edu)*, accessed June 12, 2023.

Anti-racism resources provided to OSUCOM students

To reinforce this commitment, the Office of Diversity & Inclusion provides *Resources for Taking Action Against Racism*:³⁰

Resources for Taking Action against Racism

Wexner Medical Center and Health Science Colleges Action Plan
Anti-Racism Resources
Land Acknowledgment
Resolution Declaring Racism a Public Health Crisis in Columbus
5 Do's and Don't's for White Leaders and Colleagues Discussing Racism at Work
6 Questions to Stop Asking Your Black Friends and Colleagues Right Now
How To Confront Your Implicit Bias
Racism in Medicine: Shifting the Power
White Privilege in Health Care: Following Recognition With Action
There is Still Bias in Patient Satisfaction Data

Figure 8. From the OSUCOM Diversity and Inclusion webpage.

- **Anti-racism resources:** This is a four-page document with multiple external links to books, articles, podcasts, videos, and organizations “to serve as a resource to white people and parents to deepen our anti-racism work.” The document mentions authors who promote critical race theory, the idea of “white privilege,” and *The 1619 Project of The New York Times*; *How to Be an Anti-Racist* (Ibram X. Kendi); and *White Fragility* (Robin DiAngelo). In fact, the first section is dedicated to “resources for white parents to raise anti-racist children.”³¹
- **5 Do’s and Don’ts for White Leaders and Colleagues Discussing Racism at Work:** This article asserts, “It is important that you ask Black people (not White people) if they would like further discussion space.” The medical center adds that this document should be “required reading for all workplace ‘allies.’”³²

³⁰ The Ohio State University College of Medicine. *Diversity and Inclusion: Resources for taking action against racism*. <https://medicine.osu.edu/diversity>, accessed June 12, 2023.

³¹ The Ohio State University College of Medicine Office of Diversity & Inclusion. *Anti-racism resources*. https://docs.google.com/document/d/1BRIF2_zhNe86SGgHa6-VIB0-QgirlTwCTugSfKie5Fs/preview?pru=AAABcua7TKI*MPW42S8Ae2gUyaTTgaMylA, accessed June 12, 2023.

³² Harris D. *Some do's and don'ts for white people who want to discuss racism at work*. Published June 1, 2020 in ZORA. <https://zora.medium.com/5-dos-and-dont-s-for-white-leaders-and-colleagues-who-want-to-discuss-racism-at-work-ff8f83799665>, accessed April 2, 2023.

- **6 Questions to Stop Asking Your Black Friends and Colleagues Right Now:** This opinion piece, from the same author of *5 Do's and Don'ts*, informs the reader of “things to be mindful of with not only Black friends but also Black Colleagues in the workplace.” One recommendation is to stop asking, “How are you doing?” Its reason is that the situation “for Black People (and all People of Color)” is to “experience racism every day.”³³

DO: Ask Black colleagues if they would like to make space to discuss first before making space.

In organization-wide meetings, team meetings, and even individual conversations, once you've acknowledged what's happening, don't just leap into a discussion. It is important that you ask Black people (not White people) if they would like further discussion space, as not everyone is comfortable, ready, or simply willing to discuss at work. Plus, think of it this way: If you are a Black person who has eight meetings in a day and every meeting automatically opens with discussion, think about how exhausting and burdensome that can be.

Figure 9. From “Some Do's and Don'ts for White People Who Want to Discuss Racism at Work,” on the OSUCOM ODI list of anti-racism resources.

- **How to Confront Your Implicit Bias:** This article is a transcript of a short interview Katie Couric conducted of Stanford psychologist Jennifer Eberhardt, Ph.D., author of *Biased: Uncovering the Hidden Prejudice That Shapes What We See, Think, and Do*.

This book describes how “racial bias affects every level of society.”³⁴

- **White Privilege in Health Care: Following Recognition with Action:** This article appeared in the *Annals of Family Medicine* in May 2018 with the opening line, “White privilege is a long-standing debated concept defining a set of privileges available to white people because of their race and unavailable

to others.” It continues by saying this concept is related to “realized or unrealized personal or institutional racism.” The author, who is a faculty member at the Augusta University Medical College of Georgia, concludes by stating, “To experience implicit or unconscious bias in the professional and personal settings of health care and fail to address it is

a missed opportunity to facilitate change.”³⁵ This aligns with OSUCOM's position.

³³ Harris D. *6 questions to stop asking your black friends right now*. Published May 31, 2020 in Medium. <https://dynastih.medium.com/6-questions-to-stop-asking-your-black-friends-and-colleagues-right-now-ebfb4d205d3d>, accessed October 25, 2022.

³⁴ Kouric C. *How to confront your implicit bias: Katie Couric speaks with Stanford psychologist Dr. Jennifer L. Eberhart about hidden prejudices*. June 1, 2020 in Wake-Up Call. <https://medium.com/wake-up-call/how-to-confront-your-implicit-bias-74a28584b512>, accessed October 25, 2022.

³⁵ Hobbs J. *White privilege in health care: Following recognition with action*. The Annals of Family Medicine 16(3), 197-198, May/June 2018. DOI: <https://doi.org/10.1370/afm.2243>

Learning: The OSUCOM medical training curriculum

OSUCOM's commitment to anti-racism and equity continues into its classrooms. In its 2021 annual report, OSUCOM says it is reinventing medical education. Dean Bradford writes that the "bold new curriculum" is leading to novel innovations in patient care and conveys the college's conviction that diversity and health equity leads to improved patient outcomes. "The lack of awareness and denial of racism within the profession of medicine," the report states, "relate in part to physicians not recognizing their negatively biased attitudes, perspectives and habits."

As a result, a student-developed learning module for first-year medical students at OSUCOM causes them to examine "the historical basis for some of the racist practices in medicine." Participants in this mandatory exercise take a pre-lecture survey to evaluate their "knowledge and attitudes about racism and racist beliefs," and then attend a lecture on the sources of "medical myths about African Americans that have been passed on as medical truths." The

Welcome from the Dean



There is tremendous growth and innovation at The Ohio State University College of Medicine, and we are on a trajectory few other institutions can match. We are launching a bold new curriculum for interprofessional education, making ground-breaking novel discoveries, engaging in patient care that advances the practice of medicine and delivering on our belief that a diverse team of faculty, staff and learners leads to better outcomes. Ohio State is the place to be.

EDUCATION

This year we launched our first interprofessional education cohort that connects students from our seven health science colleges and prepares them to face challenges as a collaborative health care team. I am also proud to share that *U.S. News & World Report* ranked us as the seventh Most Diverse Medical School in the country, which is the highest rank achieved by top research schools. Ohio State ranked 33rd for Best Medical School – Research and 28th for Best Medical School – Primary Care.

Figure 10. From the OSUCOM 2021 annual report, page 3.

team that developed this offering says it looks forward to future courses to draw attention to "the underlying societal drivers that cause medical disparities."³⁶ OSUCOM claims that this lecture is necessary because a "lack of awareness and denial of racism within the profession of medicine" is responsible for physicians "not recognizing their negatively biased attitudes, perspectives and habits." The school must, it says, use implicit bias training to accomplish the "rectifying of these knowledge gaps" in its medical students.³⁷

³⁶ The Ohio State University College of Medicine. *Anti-racism curriculum and assault victim curriculum*. <https://medicine.osu.edu/why-choose-us/annual-report/antiracism-curriculum-and-assault-victim-curriculum>, accessed June 12, 2023.

³⁷ The Ohio State University College of Medicine. *Students develop teaching module addressing historical and ongoing racist practices in medicine*. <https://medicine.osu.edu/news/teaching-module-addressing-practices>, accessed October 25, 2022.

Anti-racism curriculum and assault victim curriculum

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Student-developed teaching module addresses historical and ongoing racist practices in medicine

The lack of awareness and denial of racism within the profession of medicine relate in part to physicians not recognizing their negatively biased attitudes, perspectives and habits. Second-year medical students Hafza Inshaar, Abbie Zewdu and Deborah Fadoju stepped up to create an educational program for first-year medical students that explores the historical basis for some of the racist practices in medicine. With assistance from [Phylicia Duncan, MD](#) (external link), assistant professor of Internal Medicine, and [Valencia Walker, MD, MPH](#) (external link), associate professor of Pediatrics, in The Ohio State University College of Medicine, they have uncovered a connection to current racial disparities observed in health outcomes.

The teaching module includes a pre-lecture survey to evaluate medical students' knowledge and attitudes about racism and racist beliefs within the medical community. This is followed by a recorded lecture that discusses the origins of various medical myths about African Americans that have been passed on as medical truths, and their implications on equitable health care delivery.

Participating students are then asked to engage in thought exercises that utilize patient scenarios to illuminate the real-world, present-day consequences of racist teachings. These activities aim to identify the relationship between teachings and current practices, promote self-reflection to identify subconscious bias and stimulate group discussions on how health care workers can modify their viewpoints and forge change in the way that patients are currently treated. The goal is to ensure patients receive equitable and quality care regardless of racial/ethnic background. A post-lecture survey is used to gauge the impact of this lesson.

Knowledge of these racist and prejudiced medical myths can prompt students to recognize the ongoing harm they pose to the health of patients, and may encourage students to catalyze their awareness into action.

"This single lecture can't solve the overarching issue of racism in medicine, and certainly won't correct all of the gaps in the current U.S. medical education system, but it is a start," the team said in a statement. "We hope that future coursework highlights the underlying societal drivers that cause medical disparities."



Figure 11. OSUCOM "Why Choose Us" - Anti-racism curriculum and assault victim curriculum page.

Discriminatory and divisive post-baccalaureate opportunities

OSUCOM's dedication to promoting discriminatory practices in its curriculum is seen in several post-baccalaureate programs:

- **Discovery Postbaccalaureate Research Education Program (PREP):** PREP is a 12-month experience that provides medical students opportunities to strengthen their skills so they can excel in graduate school and in research. Participants are assigned to an experienced mentor and are provided

Who is eligible to apply to Discovery PREP?

Individuals who are eligible to apply are:

- Recent baccalaureate graduates with a degree in a biomedically related science no more than 36 months prior to their selection for participation in the program.
- U.S. citizens or permanent residents.
- You are from one of the following racial or ethnic groups: Black or African American, Hispanic or Latino, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander
- Or you have a disability that substantially limits one or more major life activities
- Or you are from a disadvantaged background, defined as those who meet two or more of the following criteria:
 - Were or currently are homeless,
 - Were or currently are in the foster care system,
 - Were eligible for the Federal Free and Reduced Lunch Program for two or more years,
 - Have/had no parents or legal guardians who completed a bachelor's degree,
 - Were or currently are eligible for Federal Pell grants,
 - Received support from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) as a parent or child, and/or
 - Grew up in one of the following areas: (a) a U.S. rural area, as designated by the [Health Resources and Services Administration \(HSRA\) Rural Health Grants Eligibility Analyzer](#), or (b) a [Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas](#) (qualifying zip codes are included in the file). Only one of the two possibilities in #7 can be used as a criterion for the disadvantaged background definition.

Figure 12. Eligibility criteria for the Discovery PREP program offered at OSUCOM as the webpage appeared on January 30, 2023 ([archived page](#)).

with a salary and benefits while gaining what the program's official description calls "an intensive research experience." PREP is supported by the NIH's National Institute of General Medical Sciences division of Training, Workforce Development, and Diversity.³⁸ OSUCOM advises, however, that only certain students are eligible. They must be "from one of the following racial or ethnic groups: Black

or African American, Hispanic or Latino, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander,"³⁹ despite the obvious violation of Title VI of the Civil Rights Act.⁴⁰ Do No Harm has filed a federal civil rights complaint⁴¹ against OSUCOM with the U.S. Department of Education's Office for Civil Rights regarding this discriminatory program.

OSUCOM has changed the appearance of the webpage for this program, but it still lists specific race/ethnicity criteria to be eligible.

- **Underrepresented in Medicine Visiting Student Program:** This ODI-sponsored program provides scholarship opportunities "for medical students from historically

³⁸ The Ohio State University College of Medicine. *Discovery Postbaccalaureate Research Education Program*. <https://medicine.osu.edu/education/discovery-prep>, accessed June 12, 2023.

³⁹ The Ohio State University College of Medicine. *What is DISCOVERY PREP?* <https://medicine.osu.edu/education/discovery-prep/admissions>, accessed June 12, 2023.

⁴⁰ United States Code (2008 edition). Title 42, Chapter 21, Subchapter v: Federally assisted programs. U.S. Government Publishing Office. <https://www.govinfo.gov/content/pkg/USCODE-2008-title42/html/USCODE-2008-title42-chap21-subchapV.htm>, accessed October 25, 2022.

⁴¹ Perry M. Federal civil rights complaint vs. Ohio State University to U.S. Department of Education, Office for Civil Rights, Cleveland office. <https://donoharmmedicine.org/wp-content/uploads/2023/04/Ohio-State-University-Discovery-PREP-10.25.2022.pdf>.

excluded and underrepresented groups.” To receive one of these \$2,000 scholarships,⁴² the candidate must complete the Visiting Student Learning Opportunities (VSL0) application from the Association of American Medical Colleges (AAMC) for its Underrepresented in Medicine (URiM) opportunities.⁴³

Who is eligible for NIH support?

Application requirements for Discovery PREP are:

- Applicants must be a recent baccalaureate graduate (within the last three years, 36 months) and have majored in a subject related to biomedical science (i.e. biology, biochemistry, neuroscience, microbiology, molecular biology).
- Applicants must also be a U.S citizen or permanent resident.
- You are certain that you would like to pursue a biomedical sciences PhD in the future after completion of the program.
- You are from one of the following racial or ethnic groups: Black or African American, Hispanic or Latino, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander
- Or you have a disability that substantially limits one or more major life activities
- Or you are from a disadvantaged background, defined as those who meet two or more of the following criteria:
 - Were or currently are homeless,
 - Were or currently are in the foster care system,
 - Were eligible for the Federal Free and Reduced Lunch Program for two or more years,
 - Have/had no parents or legal guardians who completed a bachelor's degree,
 - Were or currently are eligible for Federal Pell grants,
 - Received support from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) as a parent or child, and/or
 - Grew up in one of the following areas: (a) a U.S. rural area, as designated by the [Health Resources and Services Administration \(HSRA\) Rural Health Grants Eligibility Analyzer](#), or (b) a [Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas](#) (qualifying zip codes are included in the file). Only one of the two possibilities in #7 can be used as a criterion for the disadvantaged background definition.

• **Internship Opportunities:**

OSUCOM offers several summer internships in research and medicine, many of which include stipends, “for underrepresented students.”⁴⁴

Figure 13. Discovery PREP program webpage as it appeared on June 12, 2023.

Infusing DEI into all aspects of medical education at OSUCOM

- **ASPIRE Medical Research Program:** As a component of OSUCOM’s MD/Ph.D. dual degree plan, this program provides research experiences and mentoring for undergraduate students in communities “impacted by disparities” that are “related to social determinants, implicit bias and inadequate access.”⁴⁵

In June 2022, OSUCOM celebrated the school’s “intentional efforts to ensure diversity and equity are a driver of institutional excellence and an integral part of learning and practice.” Dean Carol Bradford called for a recommitment “to confronting racial and health equity and health disparities,” and Dr. Demicha Rankin explained how patients are more satisfied with their care

⁴² The Ohio State University College of Medicine. *Underrepresented in Medicine Visiting Student Program*. <https://medicine.osu.edu/diversity/initiatives/underrepresented-minority>, accessed June 12, 2023.

⁴³ Association of American Medical Colleges. *Explore URiM opportunities for visiting students*. <https://students-residents.aamc.org/students/explore-urim-opportunities-visiting-students>, accessed June 12, 2023.

⁴⁴ The Ohio State University College of Medicine. *Internship opportunities*. <https://medicine.osu.edu/diversity/initiatives/summer-internships>, accessed June 12, 2023.

⁴⁵ The Ohio State University College of Medicine. *ASPIRE Medical Research Program*. <https://medicine.osu.edu/diversity/initiatives/aspire>, accessed June 12, 2023.

What is the ASPIRE Medical Research Program?

Communities across the nation continue to be impacted by disparities in health care access and health outcomes related to social determinants, implicit bias and inadequate access to translational research and culturally competent healthcare. Research experience and training for students from communities affected by health and healthcare disparities are critical to improving workforce diversity and unlocking collaborative solutions to these complex problems.

As an initiative of the [Medical Science Training Program](#), the ASPIRE Medical Research Program's mission is to support undergraduate students who have been historically underrepresented and historically excluded from the health sciences with mentorship, research experience in world-class laboratories, and personal and academic support to prepare them for advanced education and careers as health care providers. Ultimately, we envision that our scholars will be considered undeniably competitive during the post-undergraduate portion of their training career.

Figure 14. ASPIRE Medical Research Program at OSUCOM.

when the physician is from a similar ethnic background. "When I walk in and an African American patient sees me – someone who looks like them – they feel like they can relate to me, that we have a connection."

Along with Jennifer McCallister, MD, associate dean for medical education, Dr. Rankin leads the Equity and Anti-Racism Task Force and conducts systematic reviews of the curriculum to detect cases of potential implicit bias. These reassessments also produce curriculum initiatives such as *Anti-Racism in Action*, which helps medical students cultivate "a deeper understanding of racism and the complex structures within our health care system and society."⁴⁶

Wokeness at The Ohio State University Wexner Medical Center

The Ohio State Wexner Medical Center (OSUWMC), an OSU-affiliated institution where students from the College of Medicine receive many of their clinical experiences, declares, "Racism is a social determinant

of health" in its *Anti-Racism Initiatives*. Its strategies for "improving health equity" include "integrating health equity, anti-racism efforts into health care education and medical practice" and "prioritizing community engagement to advance health equity."⁴⁷

The Office of Graduate Medical Education (GME) supervises the residency and fellowship programs at OSUWMC. Like other entities within OSUCOM, the GME office has its own DEI initiatives. Dr. Leon McDougale, in his role as chief diversity officer at OSUWMC and associate dean for diversity and inclusion,⁴⁸ states there is a need to "uproot beliefs and facilitate changing of attitudes," which, he says, manifest themselves as "institutionalized, personally mediated or internalized forms of racism." This view is reflected in the Diversity Training Options listed on the GME website,⁴⁹ which includes the following topics:

⁴⁶ Trinoskey K. *Mission critical: Centering diversity and equity in every facet of medical education and practice*. June 17, 2022, College of Medicine News. <https://medicine.osu.edu/news/centering-diversity-and-equity>, accessed June 12, 2023.

⁴⁷ The Ohio State University Wexner Medical Center. *Anti-Racism Initiatives*. <https://wexnermedical.osu.edu/About-Us/Anti-Racism-Initiative>, accessed June 12, 2023.

⁴⁸ The Ohio State University College of Medicine. *Diversity Mission and Vision*. <https://medicine.osu.edu/diversity/mission>, accessed June 12, 2023.

⁴⁹ The Ohio State University Wexner Medical Center. *Diversity, Equity and Inclusion*. <https://wexnermedical.osu.edu/about-us/diversity>, accessed June 12, 2023.

1. 21-Day Anti-Racism Challenge⁵⁰ - includes:

- White Fragility in Students
- The 1619 Project
- Racism in Medicine: Shifting the Power
- Anti-racist Reading List (by Ibram X. Kendi)
- Teaching While White
- What Kind of Asian Are You?
- Interview with the founders of Black Lives Matter

2. How Racism Makes Us Sick

3. Credentials Don't Shield Health Care Providers from Bias

4. Understanding and Interrupting Implicit Bias

5. Conversations That Matter: Race, Racism, Antiracism

6. The Difference Between Being "Not Racist" and Anti-Racist

21-Day Anti-Racism Challenge⁵⁰

Read

How White People Got Made, by Quinn Norton, explores where the term "white people" comes from and which ethnic groups have and have not been able to become "white" throughout U.S. history.

Explaining White Privilege to a Broke White Person, by Gina Crosley-Corcoran, who was raised "the kind of poor that people don't want to believe still exists in this country," explores where race and class do and don't intersect and how she has come to understand her own white privilege.

The Injustice of This Moment Is Not an Aberration, by Michelle Alexander, contextualizes the United States' 2020 state of racism/white supremacy as an inevitable outcome of a collective narrative steeped in denial.

White Fragility, by Robin DiAngelo, a groundbreaking 2011 article that led to the 2018 book of the same title, explores why it can be so hard for white people to talk about race, and how the resulting silence and defensiveness function to hold racial dynamics and racial oppression in place.

Understanding the Racial Wealth Gap, by Amy Traub, Laura Sullivan, Tatjana Meschede and Tom Shapiro, a 2017 study that analyzed the racial wealth gap that exists between white, Black and Latino households.

White Mom to Racists: 'Don't use my child to further your hate-filled ignorance.' by the Rev. Edith Love, models allyship in an article written in response to online racial abuse arising from her white teen son's recent attack by a group of young teens who were Black.

White Fragility in Students, by Teaching While White founders Jenna Chandler-Ward and Elizabeth Denevi, is a call to action in which the authors share their experiences in school and after school where white students and adults lack the knowledge or skill to navigate racism and conversations about it, and how that white deficit impacts students of color.

21 Racial Microaggressions You Hear on a Daily Basis, by photographer Kiyun Kim, uses a series of photographs to elaborate on the term "microaggression." Note that Ibram X. Kendi, in his recent book *How to Be an Anti-Racist*, calls us to consider using the term "racist abuse" as a more descriptive alternative.

Equip
with tools and
resources

Figure 15. Sample readings from the 21-day anti-racism challenge at OSU Wexner Medical Center.

⁵⁰ The Ohio State University Wexner Medical Center. 21-day anti-racism challenge©. <https://wexnermedical.osu.edu/-/media/files/wexnermedical/about-us/diversity/finalantiracism21daychallenge.pdf?la=en&hash=ADB642013B535550793BB6BC1B69379DB5781C4B>, accessed April 2, 2023.

Partnering for justice in health and health care

2022 Health Equity and Anti-Racism report



Reducing disparities for Black men and women

Driven to change trends in Black men experiencing

disproportionately high rates of heart disease, a team of researchers from across The Ohio State University partnered with the African American Male Wellness Agency and other organizations to carry out "Black Impact 100." Bolstered by this program's success, similar efforts are expanding to Black women, who similarly see higher rates of chronic disease than their white counterparts.



Read the full story by scanning this QR code or visiting go.osu.edu/2022health-outcomes



Fully integrating equity, anti-racism efforts into education and practice

With new advanced competency courses,

curriculum revisions and expanded interactions with diverse patient populations, The Ohio State University College of Medicine students in our MD program are learning to better understand patients' needs.

Ohio State is giving students the support and resources they need to be successful and innovative as they provide unbiased, high-quality health care.



Read the full story by scanning this QR code or visiting go.osu.edu/2022education



Building an increasingly anti-racist health care system

In summer 2020, the Ohio State Wexner Medical Center developed its Anti-Racism Action Plan (ARAP), designed to build a foundation for systemic change and carry out advancements in equity through dedicated action plan workgroups. In its second year, progress includes:

- An Anti-Racism Community Advisory Board of central Ohioans from myriad racial, ethnic, socioeconomic and geographic backgrounds, tasked with providing feedback for equity and anti-racism initiatives.
- A Buckeye Diversity Summer Internship giving five diverse, undergraduate students the opportunity to participate in high-level hospital operations projects.

Figure 16. From the 2022 Health Equity and Anti-Racism Report (The Ohio State University Wexner Medical Center and Health Science Colleges).

The 2022 Health Equity and Anti-Racism Report from the Wexner Medical Center highlights a claim that racism "is often the underlying foundation that breeds inequity" within the social determinants of health. Because of this, OSUWMC says it will carry out its "ambitious goals for anti-racism" as a means of overcoming "health inequities and structural forms of racism" in all areas of education and practice. The report highlights the institution's nine "Anti-Racism Action Groups" and the *Anti-Racism Action Plan* for "improving health equity through anti-racism" at Wexner Medical Center.⁵¹

⁵¹ The Ohio State University Wexner Medical Center. *Health equity and anti-racism report (HEAR) 2022*. <https://wexnermedical.osu.edu/-/media/files/wexnermedical/about-us/anti-racism/hear-report-2022.pdf?la=en&hash=0EFB3B9A9F3BFCAED7B32A8D50ACCE004903E3D3&hash=0EFB3B9A9F3BFCAED7B32A8D50ACCE004903E3D3>, accessed June 12, 2023.

Conclusion

The indoctrination of medical students into the DEI, health equity, anti-racism, and social justice principles at OSUCOM begins well before they encounter their first patients. Prospective applicants are informed of multiple initiatives and opportunities available to them, but only if they meet specific racial and ethnic criteria. They are advised of their implicit biases during the recruitment process and will be reminded of them throughout their medical education. Once medical students begin their training, they are bombarded with anti-racism resources that instruct them in radical ideologies, and they are required to participate in activities and practices that promote the vision of health equity and systemically altering the medical education infrastructure. The executive leadership and deans of the College of Medicine ensure that these initiatives continue.

OSUCOM has invested countless resources over several years in its campaign to develop health equity “changemakers.” Patients will need to decide if they want social justice changemakers or if they’d prefer doctors trained in medical sciences who can heal the sick or injured.



Do No Harm