Background

- Social and health inequities have existed for centuries.
- 2020 brought these disparities to the forefront of national conversation.
- Physicians should be trained in health equity in order to provide the best care for all patients.

Purpose

- Create a core intern health equity rotation with longitudinal extension over 3-year family medicine residency program
- Incorporate resident-developed health policy elective
- Catalog existing health equity curriculum

Methods

- Completed needs assessment survey of resident attitudes towards health equity and advocacy curriculum in 2018
- Conducted individual and focus group discussions about curricular ideas in 2020
- Reviewed resources on STFM, MedEd portal, local programs, and recently created policy/advocacy elective

Results

- Most (90%) believe formalized training in health equity and advocacy is important in residency.
- Few (10%) found the existing curriculum adequate.
- Areas needing improvement: racism, advocacy skills, implicit bias & privilege, sexism, immigrant issues/religious discrimination, and community needs.

Curriculum Design and Evaluation

**CONTENT**

- Health policy & insurance
- Social determinants of health
- Trauma-informed care
- Poverty & resilience
- Immigration
- Housing
- COVID-19 disparities
- Advocacy
- Privilege
- Implicit bias
- Racism

**FORMAT**

INTERN ROTATION

- 2-week asynchronous rotation: readings, online modules, recorded lectures with reflection assignments
- 3 group workshops

LONGITUDINAL

- Behavioral health sessions
- FCM workshops
- Noon didactics

**NEXT STEPS**

- Implement intern rotation July 2021
- Develop longitudinal FCM workshops
- Establish community partnerships

**EVALUATION**

- Resident evaluations of sessions
- Referrals of patients to community partner resources

Discussion

- New Health Equity Curriculum: Intern rotation introducing key concepts, supplemented by longitudinal didactics and workshops.
- Future efforts: Collaborate with community-based organization partners