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Negotiation of Sociopolitical Issues Within Medical Education when Planning Programs to Address Racial and Ethnic Disparities in Health Care

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Abstract: *The purpose of this qualitative study was to understand the issues influencing program planning designed to address racial and ethnic disparities in health care within the context of medical education. Participants will discuss the role of adult educators in facilitating responsible program planning within the venue of medical education.*

Introduction

A biased health care system exists in the United States in which some racially and ethnically marginalized patients receive a lower quality of care than their White counterparts (Smedley, Stith, & Nelson, 2003). Although accreditation bodies within medicine and health called for programming to eliminate this health care disparity, efforts have fallen short. Conceptual and empirical research recommend two primary avenues of programming to address health disparities: 1) increasing workforce diversity and 2) implementation of cultural competency programs within medical education (Council on Graduate Medical Education, 1998). Medical education responded as evidenced by a plethora of literature on conceptual models and descriptions of specific cultural competency programs. However, the paucity of literature on the program planning process for such programs leaves a considerable gap in the literature. Adult education has a strong scholarly presence in evaluating and promoting program planning in various settings (Burns & Cervero, 2004; Hendricks, 2001; Maclean, 1996; Mills, Cervero, Langone, & Wilson, 1995; Yang & Cervero, 2001) including research in continuing medical education. However, in adult education and medical education there is a dearth of research on the process of planning programs that address racial and ethnic disparities at the undergraduate and graduate levels.

The purpose of this qualitative study was to understand the issues program planners faced when implementing and sustaining programs within medical education that addressed racial and ethnic disparities in health care and the influence of the sociopolitical environment on the planning process. For the purposes of this paper, the research question was: What is the scope of sociopolitical influences that program planners encounter when engaged in planning cultural competency programs within medical education? Participants were recruited from one of four purposefully selected medical schools including two predominantly black institutions (PBI) and two predominantly white institutions (PWI). Using a collective case study format this empirical research included a total of thirteen participants considered to be internal program planners because of their position within their respective institution. Primary data sources were information rich interviews and written documents supplemented by field notes and observations. Through inductive analysis patterns and themes emerged reflecting the scope of sociopolitical issues faced by participants when program planning within medical education.

Findings indicated a complex process of planning programs to address the sensitive and controversial issues associated with programming related to addressing racial and ethnic disparities in health care within medical education. The primary scope of programs included

recruitment and retention of faculty and students of color, faculty development and training on teaching from a culturally competent perspective, pipeline and academic enhancement programs, and curriculum revisions that promoted cultural competency. Although characterized differently, the type of programs implemented by participants were congruent with the dimensions of multicultural education (Banks, 1993) and with the genres of multicultural education research (Bennett, 2001). Sociopolitical issues varied based on the institutional context as well as the program planner's positionality. Findings consistent with related research included negotiation of power relationships and the need for garnering support (Maclean, 1996). Practitioners who participate in program planning must understand the context in which they operate (Cervero & Wilson, 1998). Results of this study inform practitioners of sociopolitical issues to anticipate and negotiate in order to responsibly engage in program planning within medical education. Further dialogue will help to frame the role that adult educators may have within medical education in facilitating program planning for racial and ethnic disparities in health care within the context

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