

Unmasking Race-Based Medicine: Examining Its Impact and Elimination Efforts in Medical Education

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INTRODUCTION

Race, a sociopolitical construct based on the value assigned to physical attributes, was invented to create societal hierarchies that produce inequities. Individuals within the same racial group lack a common genetic heritage, refuting inherent genetic unity.

Using race as a biological marker in medical diagnosis can compromise accurate health assessment, perpetuating health disparities. Race has been integrated into medical practices and education, known as **race-based medicine (RBM)**. National healthcare organizations have called for measures to eliminate RBM through a "racism-conscious" lens¹⁻⁴.

In response to this call for change, the **End Raced Based-Medicine Task Force (ERBMTF)** has been established in WSUSOM. This study aims to provide preliminary insights and assess the knowledge, perception, and personal encounters of and with RBM within the WSUSOM community⁵.

METHODOLOGY

Three key inquiries guide the investigation:

- Understanding and beliefs regarding RBM
- Experiences of RBM encounters in practice and medical education
- Attitudes towards the elimination of RBM from curriculum^{1-4,6}.

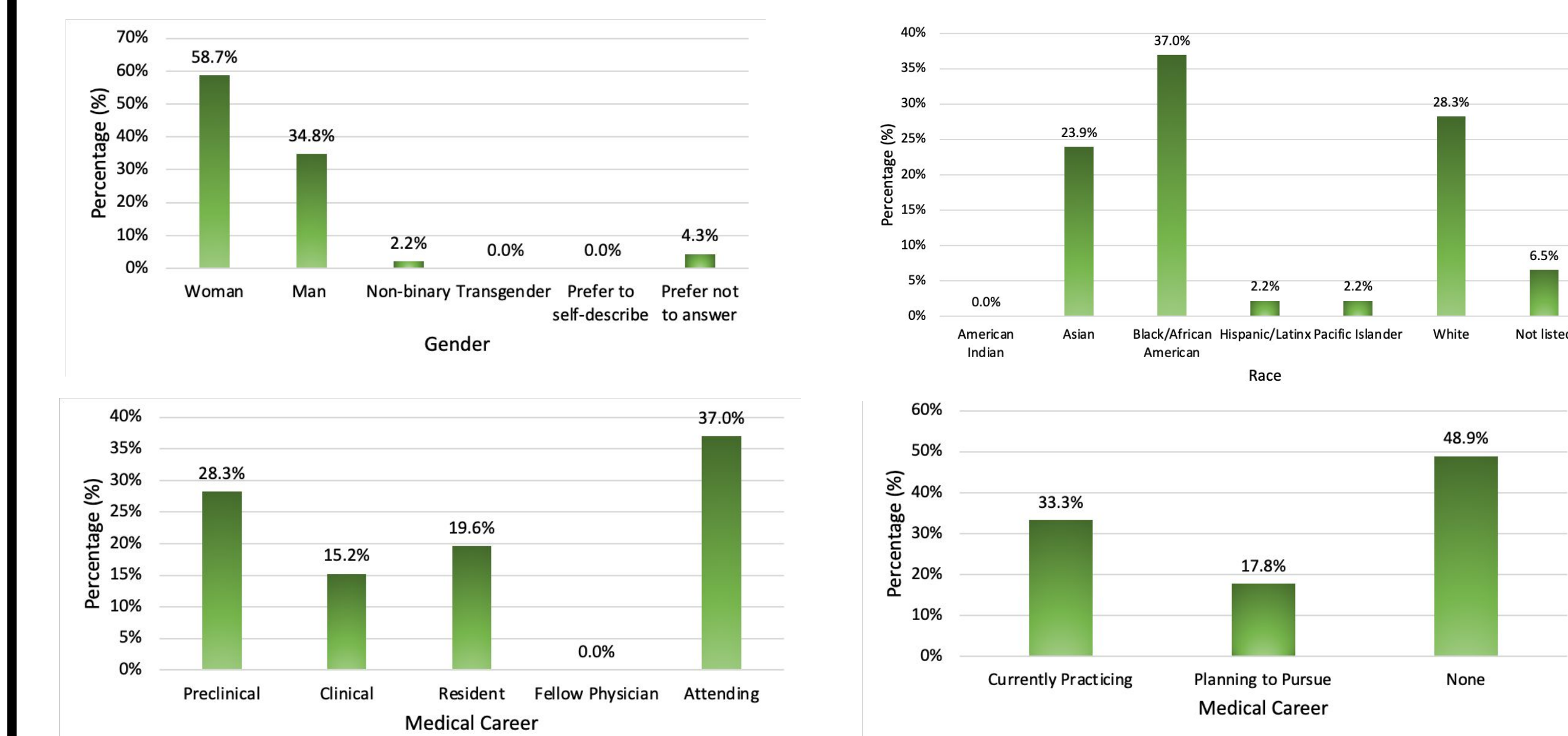
Study Design: A descriptive, cross-sectional pilot survey was designed to be distributed among medical students, residents, fellows, and attending physicians at WSUSOM⁶⁻⁷.

Data Collection: Survey disseminated through GroupMe groups used by WSUSOM community. Participants' responses to the questionnaire were collected anonymously using the Qualtrics.

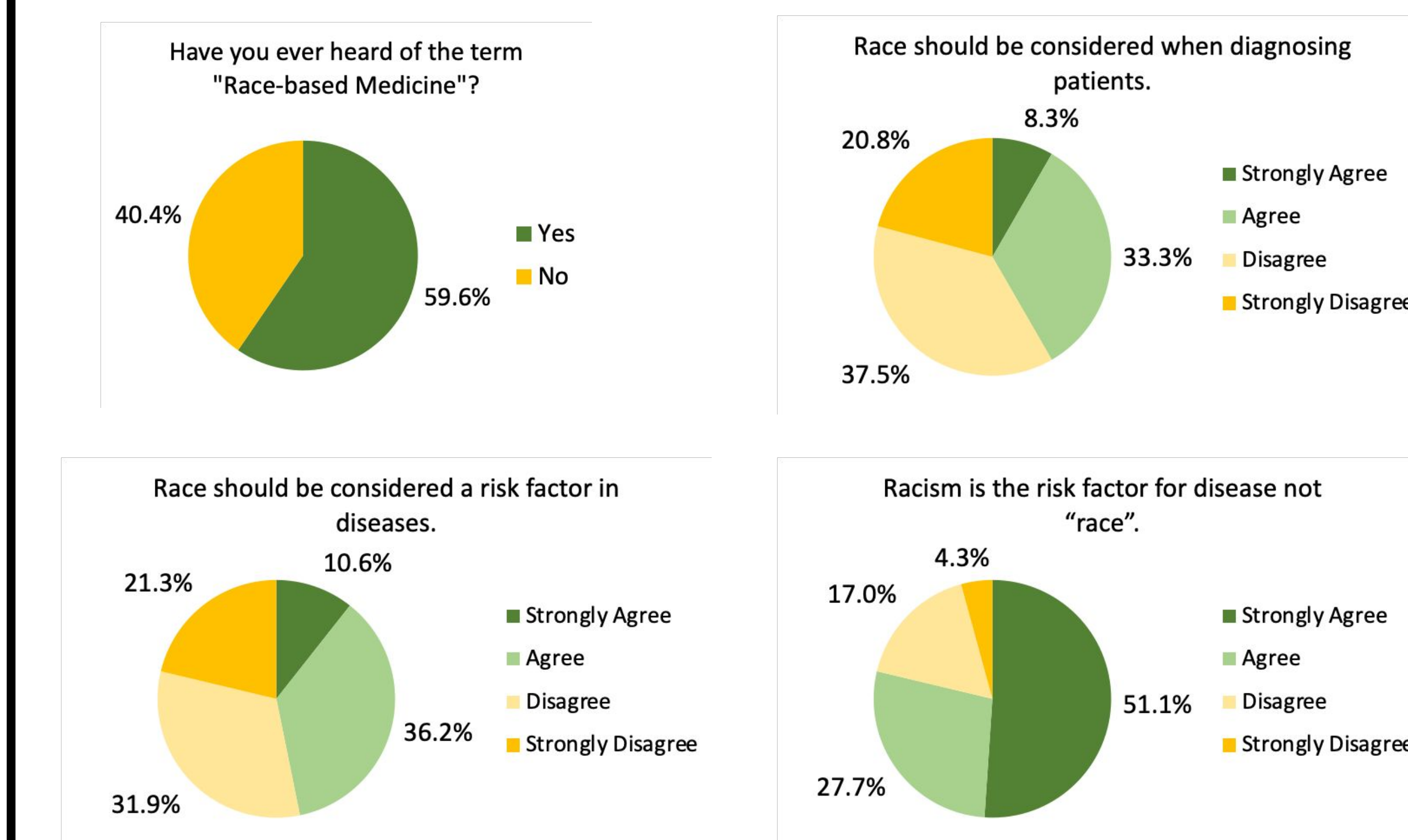
Data Analysis: Statistical analysis was conducted using Microsoft Excel, with statistical significance set at $p < 0.05$.

PRELIMINARY RESULTS

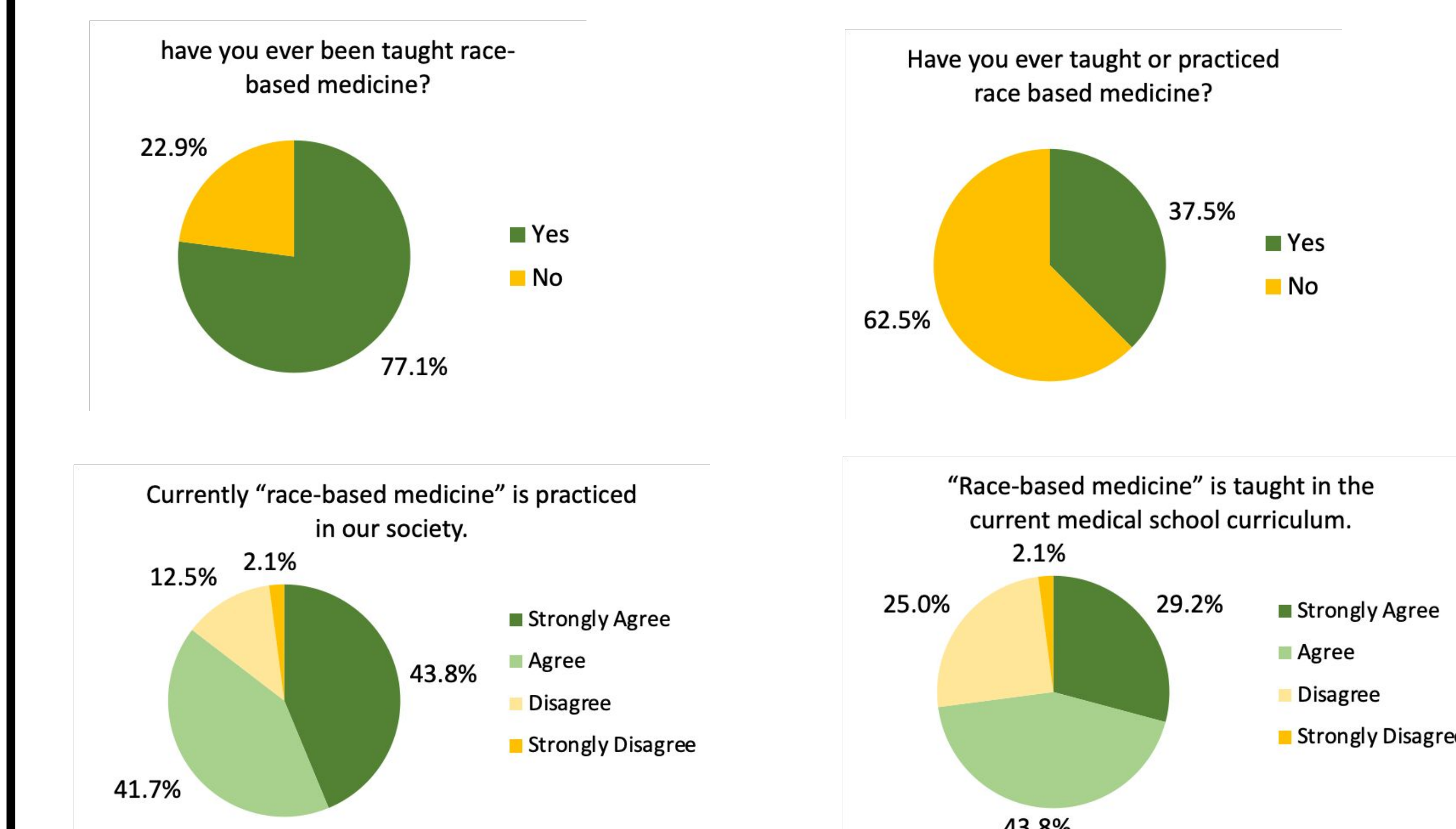
- Demographic information and medical career:



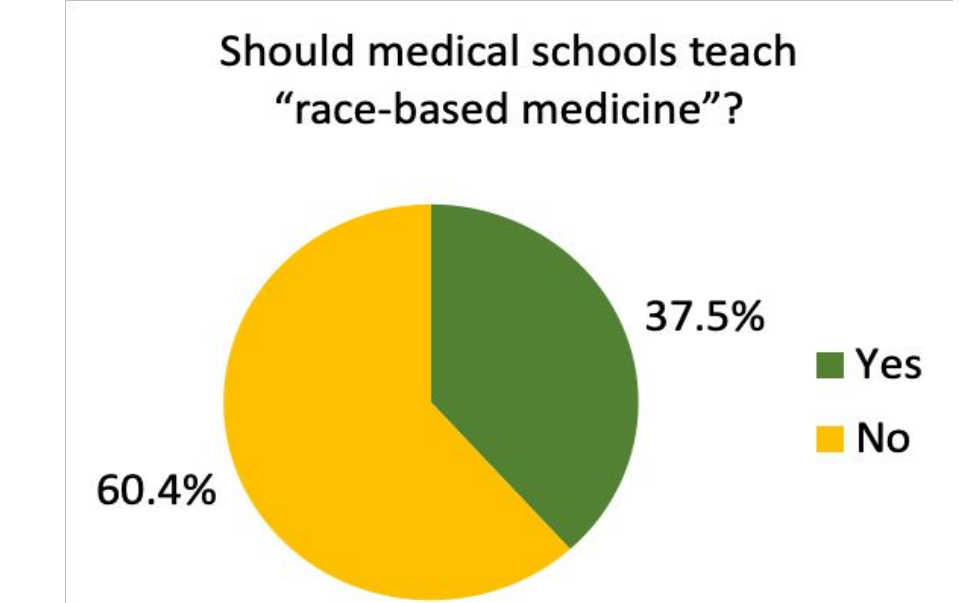
- Understanding and beliefs regarding RBM:



- Experiences of RBM encounters in practice and medical education:



- Attitudes towards the elimination of RBM from curriculum:



DISCUSSION & CONCLUSION

Understanding & Beliefs:

- 58.3% of the participants believed that race should not factor into medical diagnosis or as a risk factor (53.2%). However, a significant number (78.8%) acknowledged racism as a relevant risk factor (p -value=0.027), reflecting complex attitudes towards the role of race in medicine.

Experiences & Encounters:

- A significant number were taught RBM (p -value=0.001) and encountered it (p -value<0.001), emphasizing the influence of education & societal exposure.

Attitudes towards the elimination:

- While 60% of participants supported ending RBM teaching, opinions were divided, underlining the need for comprehensive discussions and interventions.

Conclusion:

- Participants recognize the racism as a health risk factor & have encountered RBM in healthcare, despite differing views on the role of race in diagnosis and ending RBM from medical education.
- Conducting longitudinal research across multiple time points & utilizing diverse dissemination platforms is essential to enhance our understanding of these dynamics & reduce recall bias. These insights will inform ongoing efforts to address RBM, aiming for a more equitable healthcare system.

REFERENCES

Scan the QR code or type in the link below for a list of our references.

<https://rb.gy/axwvj>



ACKNOWLEDGEMENTS

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