



CAATE

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DEI in Action: A Learning Lab for the Application of Updated CAATE Standards in the Curriculum

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Disclosures

We have no relevant conflicts of interest or financial relationships to disclose

Learning Outcomes

At the conclusion of this learning lab, participants will be able to:

- Explain the benefits of incorporating DEI & SJ content throughout an athletic training curriculum*
- Analyze various methods of application for implementing DEI & SJ in athletic training curriculum*
- Apply specific DEI content to course curriculum in an athletic training program*

Diversity, Equity, Inclusion

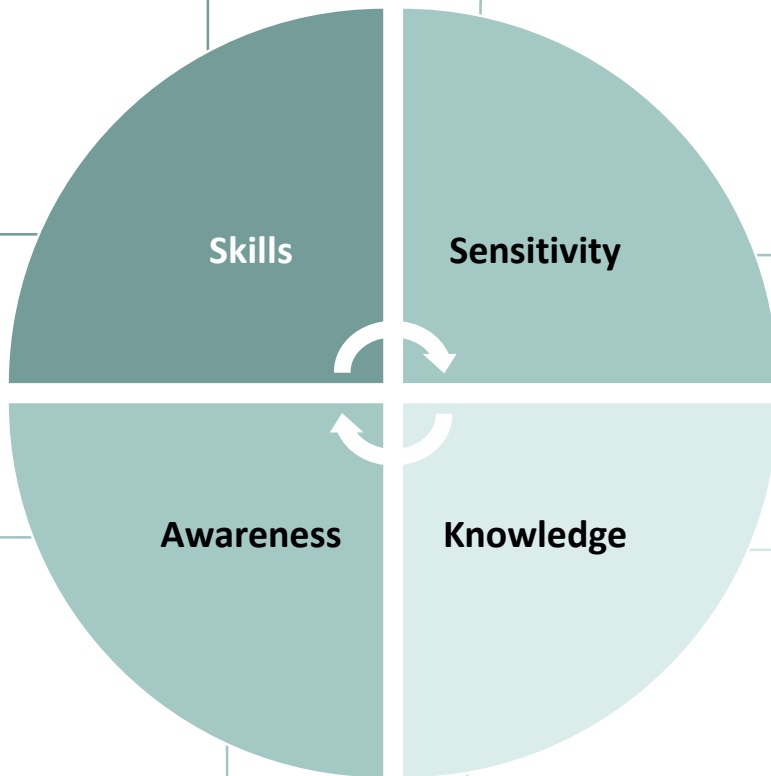
Diversity refers to the demographical composition of a group of people in any setting.

Equity refers to justice and fairness. Equitable practices are objective and should be free from bias.

Inclusion is the act of incorporating the intellect, creativity, experience & perspective of those within a diverse group to achieve their mission.

- Reflecting on
- DEI skills in
- praxis.

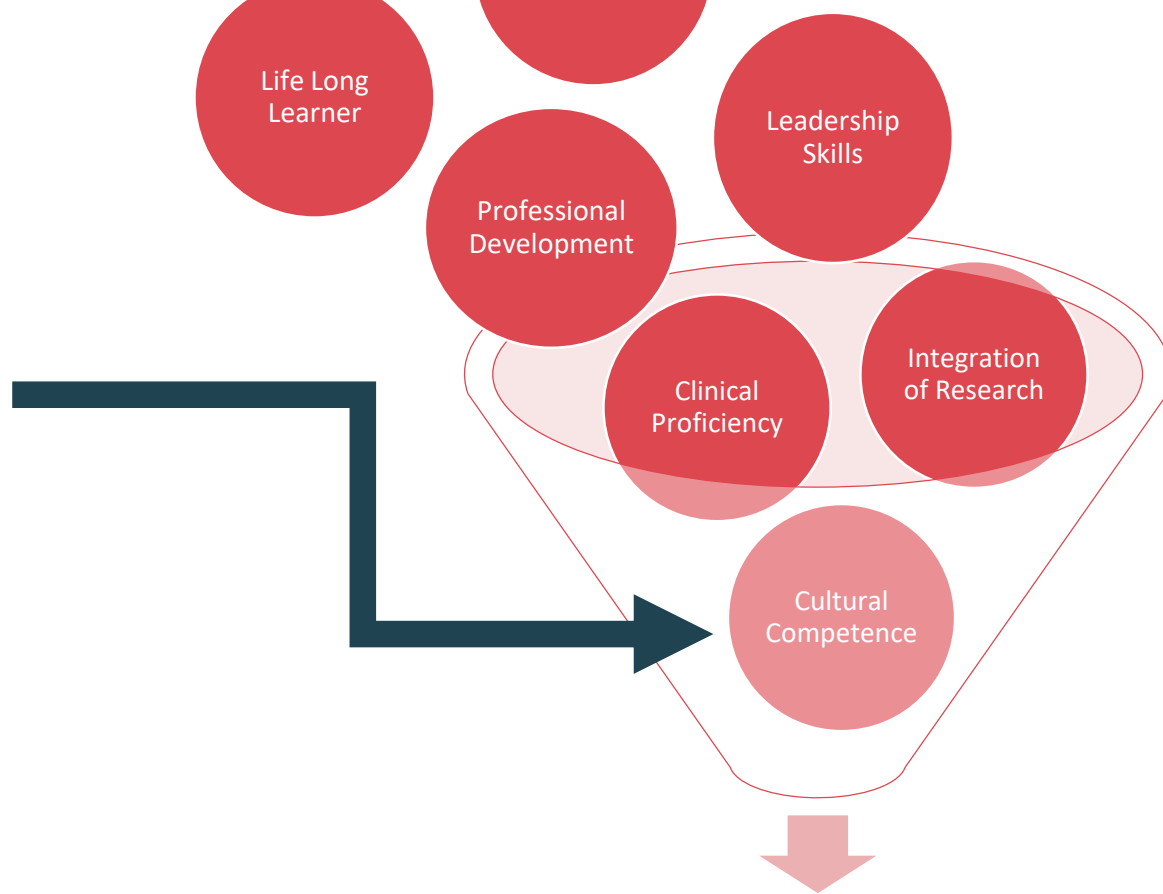
- Being conscious of the intricacies that come with DEI practices & skills.



- Having the
- capacity for nuance.

- Creating a knowledge base of DEI skills & practices.

Cultural Competence needs to be viewed as a key characteristic of Proficient ATs, because it facilitates Patient-Centered Care.



Proficient Athletic Trainer

Cultural Awareness

Student-Centered Learning

• Encourages students to feel a sense of belonging in their programs.

• It improves student outcomes!

The diagram features two overlapping circles on the left. The left circle is light teal and contains the text 'Cultural Awareness'. The right circle is dark teal and contains the text 'Student-Centered Learning'. A large, dark teal arrow originates from the right side of the 'Student-Centered Learning' circle, extends horizontally to the right, then turns 90 degrees downward, pointing towards a list of two bullet points.

Student-Centered Learning

- Encourages students to feel a sense of belonging in their programs.
- It improves student outcomes!

Key Words & Definitions in DEI Standards

Identities: *identities that include but are not limited to: race; ethnicity; religion; national origin; age; marital status; disabilities/ability; sexual orientation; sex; gender; gender identity and expression; socioeconomic status; religion/spirituality; political affiliation; literacy/health literacy.*

Social Justice: *Social justice in healthcare is recognizing that equitable healthcare, which encompasses access to and quality of care, is a fundamental right and that healthcare providers promote fair treatment so that disparities are eliminated.*

Key Words & Definitions in DEI Standards

Cultural Competency: *the ability of both providers and systems to provide care to patients with diverse values, beliefs and behaviors, including tailoring delivery to meet patients' social, cultural, and linguistic needs.*

Cultural Humility: *A lifelong process of self-reflection and self-critique by which an individual willingly interacts with diverse individuals and not only learns about the cultures of others, but also examines their own beliefs and cultural identities to create an environment of empowerment, respect, and optimal care for all. Cultural humility includes sensitivity to historical realities of marginalization, violence, and oppression against certain groups.*

Key Words & Definitions in DEI Standards

Social Determinants of Health: *The conditions in which people are born, grow, live, work, and age. These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels.*

Socioeconomic Status: *The social standing or class of an individual or group, frequently measured in terms of education, income, and occupation. Socioeconomic status has been linked to inequities in access to resources, and it affects psychological and physical health, education, and family well-being.*

DEI Standard #1

The program demonstrates systematic diversity, equity, inclusion and **social justice** efforts in its development, design and delivery.

*Programs advance diversity, equity, inclusion, and **social** justice through a variety of efforts*

These can include (but are not limited to) the following:

- *participating in institutional efforts to advance diversity, equity, inclusion and **social justice**;*
- *incorporating diversity, equity, inclusion and social justice across the program curriculum;*
- *recruiting and retaining diverse faculty, students, and preceptors;*
- *improving faculty and preceptors understanding and integration of diversity, equity, inclusion, and social justice;*
- *implementing policies that support a climate of equity and inclusion, free of harassment and discrimination;*
- *community engagements and/or scholarly endeavors (opportunities) that are reflective of diversity, equity, inclusion, and social justice; and*
- *gathering program data that informs the programs diversity, equity, inclusion, and social justice efforts. Sources may include, but are not limited to, demographic reports, retention reports, equity analysis, climate data, participation in DEI activities, competency development, program evaluations, and interviews/focus group data.*

How to Address This Standard

- Describe the current efforts (e.g. institutional, school, department, and program) in advancing diversity, equity, inclusion, and social justice within program development, design and delivery.
- Identify the sources of institutional and program data used to inform diversity, equity, inclusion and social justice efforts

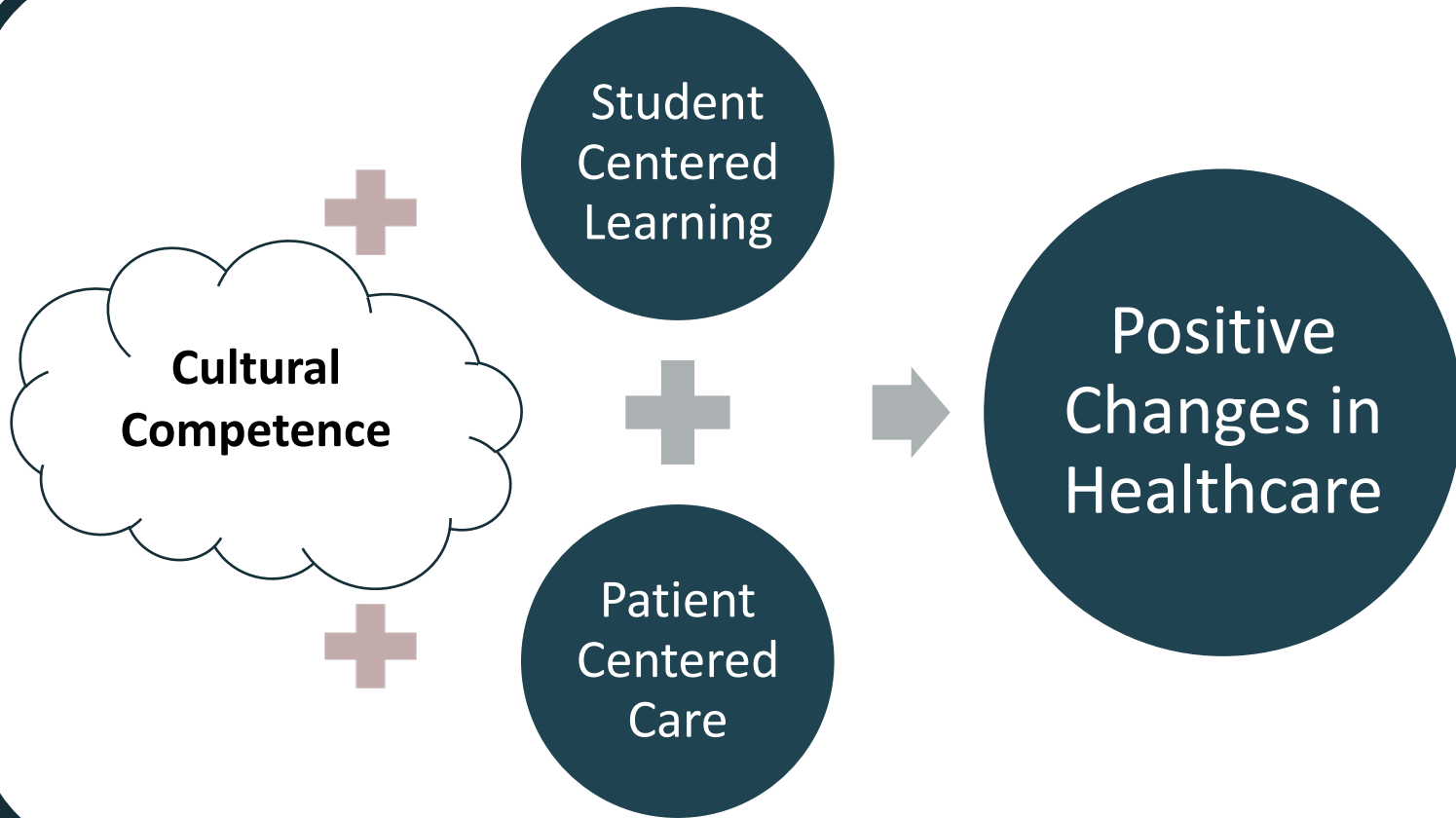
DEI Standard #2

Standard DEI 2: Practice **cultural competency**, foster **cultural humility**, and demonstrate respect in client/patient care. This includes (but is not limited to) the following:

- Using contemporary nomenclature of various **identities**.
- Analyzing the impact of group identification, including the intersectionality of multiple identities, on health disparities, patient care, and patient outcomes.
- Analyzing the impact of marginalization on health disparities, patient care, and patient outcomes.
- Developing strategies that minimize the impact of clinician-based bias, prejudice, and privilege on patient interactions.
- Devising patient-centered interventions to diverse populations that account for the healthcare delivery system

How to Address This Standard

- Identify the courses and/or clinical education experiences where students gain learning opportunities associated with this standard and describe how each learning experience ensures students are prepared to perform the skills associated with the standard.
- Describe how these learning experiences are assessed and provide example(s) of assessment tool(s) used.



DEI Implementation in Health Professions Education

What are other health professions doing?

How Medical Educators Can Foster Equity and Inclusion in Their Teaching: A Faculty Development Workshop Series

Katherine L. Lupton, MD, and Patricia S. O'Sullivan, MS, EdD

Abstract

Problem
Diversity, equity, and inclusion are increasingly highlighted in medical education, but bias continues to disproportionately impact traditionally underrepresented in medicine. Many racial and ethnic groups traditionally underrepresented in medicine and faculty struggle to engage with learning concepts in their teaching and learn making mistakes, but few opportunities exist for faculty to develop their skills.

Approach

To address the need of faculty in incorporating equity and inclusion in their teaching, assessment, and curriculum development a needs assessment and followed Kern's 6-step process for curriculum development to build the workshop series.

Outcomes

Using local resources and expertise, the authors built a workshop series that culminated in a certificate in Teaching for Equity and Inclusion. The development process took 28 months.

the certificate. The workshops have been well received and are rated on par with or more highly than other faculty development offerings at the University of California, San Francisco.

Next Steps

Future directions include assessing the impact of the certificate on participants and workshop faculty, creating opportunities for workshop faculty to share best practices, and exploring alternative models for participation. The

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POSITION PAPER

Lesbian, Gay, Bisexual, and Transgender Inclusion in Physical Therapy: Advocating for Cultural Competency in Physical Therapist Education Across the United States

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ELSEVIER

By Faculty for Faculty
Using Simulation to Educate Rural NP students About Cultural Congruence
Carrie Nimmo, Lyn Behnke, Constance Creech, Kathryn Schellenberg, Carman Turkelson, Denise Cooper

ABSTRACT
Between 2000 and 2010, the Hispanic population grew by 44% in rural areas. This community faces barriers to health care. Future nurse practitioners must be educated to provide culturally competent care for patients and families in a primary care setting. A simulation-based learning experience was used to evaluate learning modules regarding oral health and Spanish language and culture. A 13 group, pretest-posttest, preexperience design using the Transcultural Self-Efficacy Tool (TSET) was used to obtain quantitative and qualitative data from nurse practitioner students participating in a simulation-based learning experience to

Keywords:
cultural competency education
inter-university collaboration
nurse practitioner education
simulation-based learning experience
TSET
simulation

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Deconstructing Ableism in Health Care Settings Through Case-Based Learning

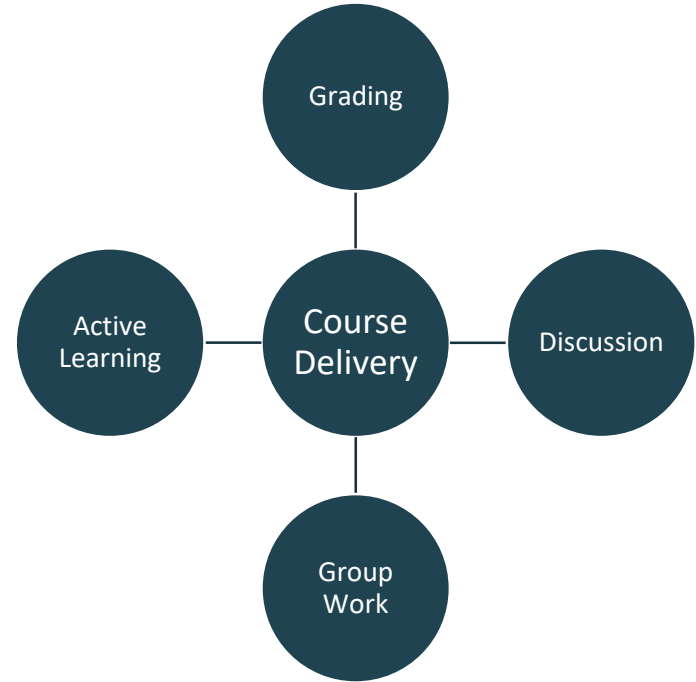
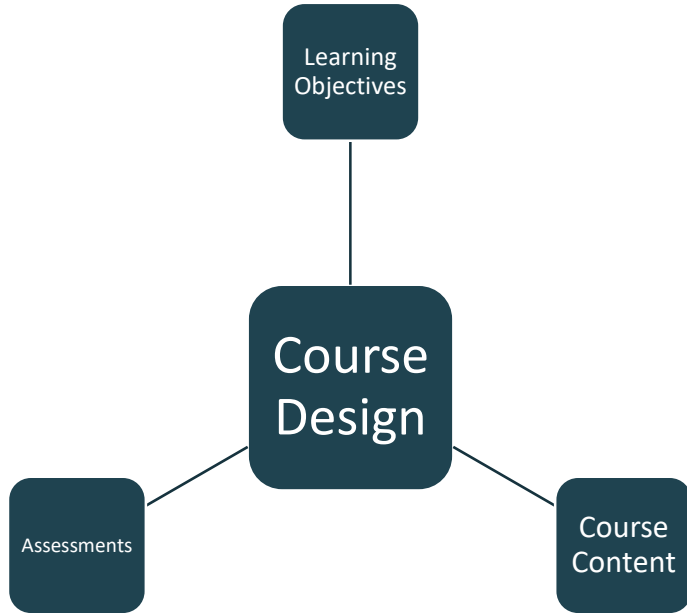
Zalmb Dhanani¹, Nina Huynh, Louis Tan, Harika Kottakota, Rosa Lee, MD, Peter Poulos, MD

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Abstract

Introduction: Patients with disabilities face health disparities, and providers with disabilities confront professional roadblocks and institutional bias. Yet their experiences are often excluded from medical education, and few case studies address culturally humble care for those with disabilities. **Methods:** We created two 1-hour case-based modules on disability and ableism from patient and provider perspectives. Modules were piloted in April 2021 and presented at two conferences in April 2021. Modules included a prereading, introductory disability presentation, and facilitated case discussions. Sessions were evaluated with pre- and/or postsession surveys. Modules were rated on 5-point Likert scales for educational value, professional growth contribution, and interactive/engaging design. **Results:** Participants rated the patient and provider modules 4.5, 4.4, and 4.4 and 4.5, 4.4, and 4.5 for the three categories, respectively. Participants noted that the sessions were insightful and validating and improved their understanding of ableism and the importance of disability curricula. There were significant improvements in participants' perceptions of ability to discuss ableism's impacts, recognize

Strategies to Integrate DEI & SJ in AT Curriculum



Examining AT Content for DEI Integration

Learning Objective - standard

- *Discuss specific steps in the proper evaluation and assessment of an orthopedic injury to the lower extremity*

DEI Integration:

- *Explain how issues related to diversity are relevant to the evaluation and assessment of an orthopedic injury occurring to the lower extremity*

Sample AT Content –Orthopedic Assessment

Assignment: Culturally Based Physical Assessment Document

Purpose: The purpose of this activity is to allow students the opportunity to reflect on the components of a culturally based physical assessment as they conduct a clinical examination. Students will create a supplementary assessment tool to accompany their clinical examination medical documentation procedures. This assessment tool will be comprised of appropriate questions to gather cultural information that is relevant to the patient. The goal of the activity is for students to gain a deeper understanding of potential cultural beliefs, values, or preferences of the patient that may impact the health outcomes of the patient.

Assignment Description:

After reviewing the audio lecture and assigned readings for Module #2, and participating in the interactive lecture, students will create a culturally relevant assessment tool to use during clinical examinations of patients. Students are allowed to research potential assessment tools from alternate health professions as a reference/resource, but the created assessment tool must be applicable to athletic training clinical practice. We will review each other's tools to discuss similarities and differences at a later date in the semester. Please contact me with any questions, you may have about the assignment.

Sample Resources:

- To get you started, here are two resources with sample cultural assessment questions that can be adapted for athletic training clinical practice.
- http://www.jamardaresources.com/cersample/assessment_questions.htm
- <https://www.myamericannurse.com/making-community-health-care-culturally-correct/>

Practical Application

Utilizing current course materials participants will revise course content to produce one deliverable that integrates DEI&SJ content

- 40 minutes
 - Sample course materials
 - Course syllabi
 - Learning objectives
 - Activities
 - Assignment descriptions
 - Program policies & procedures
 - Programmatic outcomes
 - Etc.....

References

1. Betancourt JR, Green AR, Carrillo JE. Cultural Competence in Health Care: Emerging Frameworks and Practical Approaches [Field report], New York, Commonwealth Fund, 2002.
2. Greene-Moton E, Minkler M. Cultural Competence or Cultural Humility? Moving Beyond the Debate. *Health Promotion Practice*. 2020;21(1):142-145.
3. Tervalon M, Murray-Garcia J. Cultural humility versus cultural competence: a critical distinction in defining physician training outcomes in multicultural education. *J Health Care Poor Underserved*. 1998;9(2):117-125.
4. Foronda C, Baptiste DL, Reinholdt MM, Ousman K. Cultural Humility: A Concept Analysis. *J Transcult Nurs*. 2016;27(3):210-217.
5. Social determinants of health. World Health Organization website. www.who.int/social_determinants/en.
6. Fact sheet on ethnic and racial minorities and socioeconomic status. American Psychological Association website.

References

7. Lupton KL, O'Sullivan PS. How medical educators can foster equity and inclusion in their teaching: A faculty development workshop series. *Acad Med*. 2020;95(12):S71-76.
8. Nimmo C, Behnke L, Creech C, Schellenberg K, Turkelson C, Cooper D. Using simulation to educate rural NP students about cultural congruence. *J Nurse Pract*. 2021;17(4):476-480. doi:10.1016/j.nurpra.2020.11.019
9. Copti N, Shahriari R, Wanek L, Fitzsimmons A. Lesbian, gay, bisexual, and transgender inclusion in physical therapy: Advocating for cultural competency in physical therapist education across the United States. *J Phys Ther Educ*. 2016;30(4):11-16.
10. Dhanani Z, Huynh N, Tran L, Kottakota H, Lee R, Poulos P. Deconstructing ableism in health care settings through case-based learning. *MedEdPORTAL*. 2022;18:11253. https://doi.org/10.15766/mep_2374-8265.11253
11. Elliot TC. How do we move the needle? Building a framework for diversity, equity, and inclusion within graduate medical education. *Fam Med*. 2022. <https://journals.stfm.org/familymedicine/2021/july-august/elliott-2021-0224/> Accessed September 15, 2022.
12. Carnegie Mellon University. How to Center DEI in Teaching. Carnegie Mellon University Eberly Center Teaching Excellence and Educational Innovation. <https://www.cmu.edu/teaching/design/teach/diversityequityinclusion/index.html> Accessed July 15, 2022.



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