

Assessment of Palliative Care Climate Before and After Antiracism Education

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KEY POINT

☑ Education on diversity, equity, inclusion, and anti-racism is important for palliative care teams

BACKGROUND

- The United States is experiencing a season of civil unrest that can transform into a movement that will reshape our societal institutions.
- Cultural sensitivity training and implicit bias training should be augmented by learning that provides a deeper understanding of how people are impacted by race.
- Providers must be educated on race and racism, to deconstruct health care inequities for patients, and to help educate trainees on race and racism as a way to impart change.
- This education must be "intentional" and "go beyond...online modules."1

AIMS

- Assess baseline attitudes and climate regarding diversity, health equity, inclusion (DEI), and antiracism on an interdisciplinary team.
- Evaluate the impact of anti-racism multimodal education efforts.

METHODS

- Interdisciplinary palliative care team members at a large academic institution were surveyed.
- All team members were sent an anonymous survey link via RedCap and given two weeks to complete the survey.
- Following survey completion, team members
 had clinical time blocked and were invited to
 participate in an interactive, 2-hour virtual
 training on health equity presented by the Center
 for Health Progress.

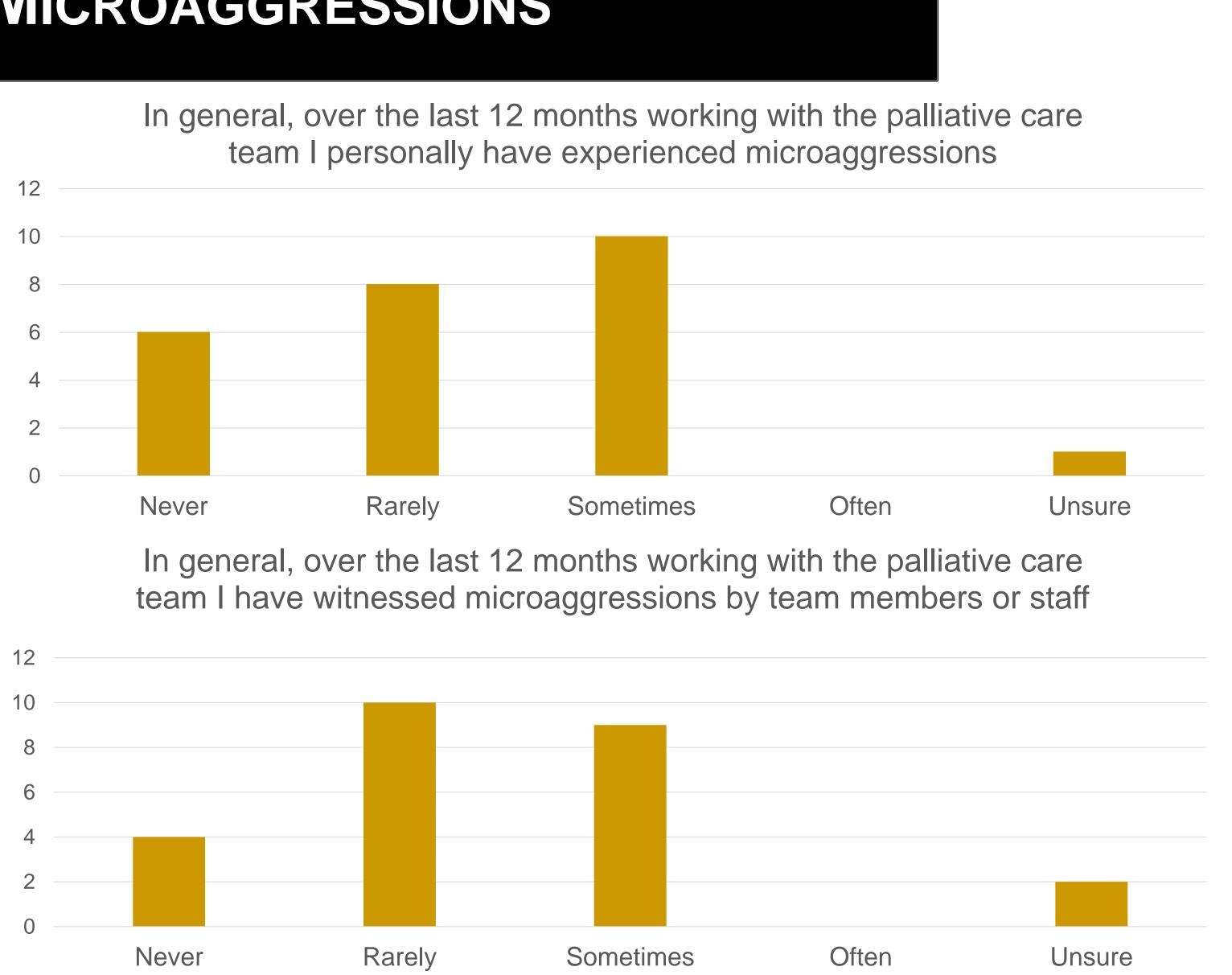
RESULTS

- Survey response rate was 74% (28/38).
- 80% (20/25) of respondents agreed or strongly agreed that the team has a strong commitment to DEI.
- No respondents felt that there was too much emphasis on DEI.
- 72% (18/25) of respondents reported personally experiencing microaggressions.
- 76% (19/25) respondents reported witnessing microaggressions by team members or staff.

RESPONDENTS

Role	Physician, NP, or PA = 20 (80%)	Other = $5 (20\%)$
Time in Role	Fewer than 10 Years = 4	10+ Years = 13
Gender	Female = 20 (80%)	Male = 5 (20%)

MICROAGGRESSIONS



CONCLUSIONS

- The palliative care team climate is accepting of efforts to promote DEI and anti-racism.
- Despite strong commitment to these issues, most team members have witnessed or experienced microaggressions, suggesting a need for continuing education.
- Education on topics of DEI and antiracism are important in palliative care to improve the care for a diverse population living with serious illness.

NEXT STEPS

- The palliative care team will be surveyed at various points over the next year to assess the impact of initial and ongoing trainings.
- Education on topics of DEI and antiracism including microaggressions and up-stander training will be integrated into faculty development.
- DEI and antiracism should also be a focus of palliative medicine fellowship training for the upcoming generation of specialists.

REFERENCES

1. Acosta, David MD; Ackerman-Barger, Kupiri PhD, RN. "Breaking the Silence: Time to Talk About Race and Racism." Academic Medicine: March 2017-Volume 92-Issue 2-p285-288.