

# Integrating An Anti-Oppressive Lens into Diagnostic Reasoning Education

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Reinhold  
Möller Ermell





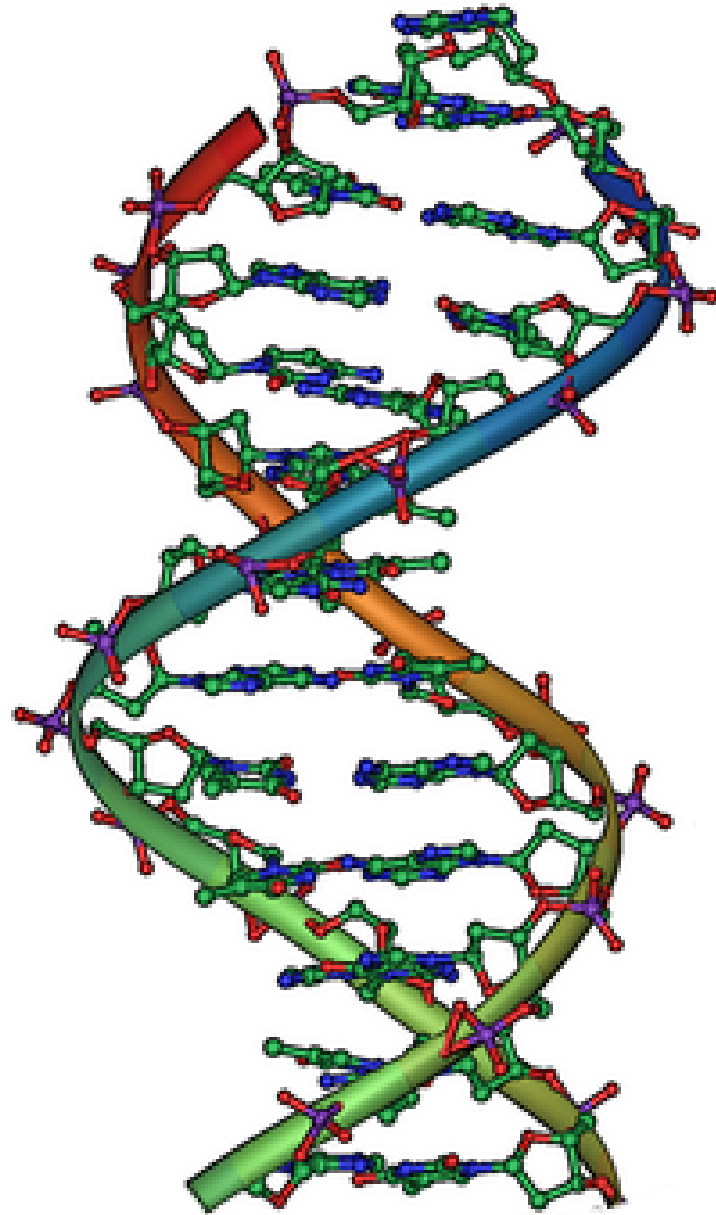
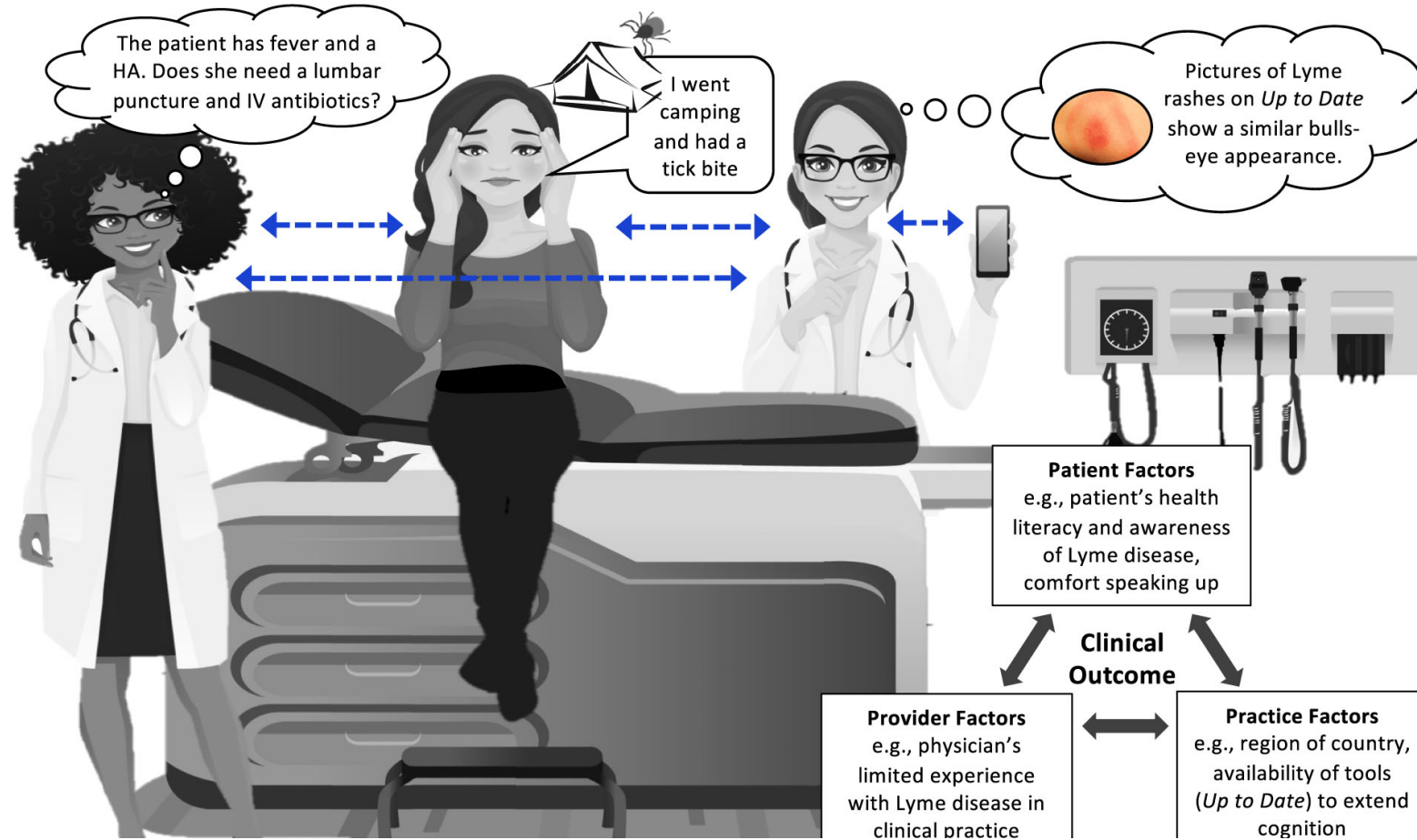


Image adapted  
from work of  
Michael Ströck

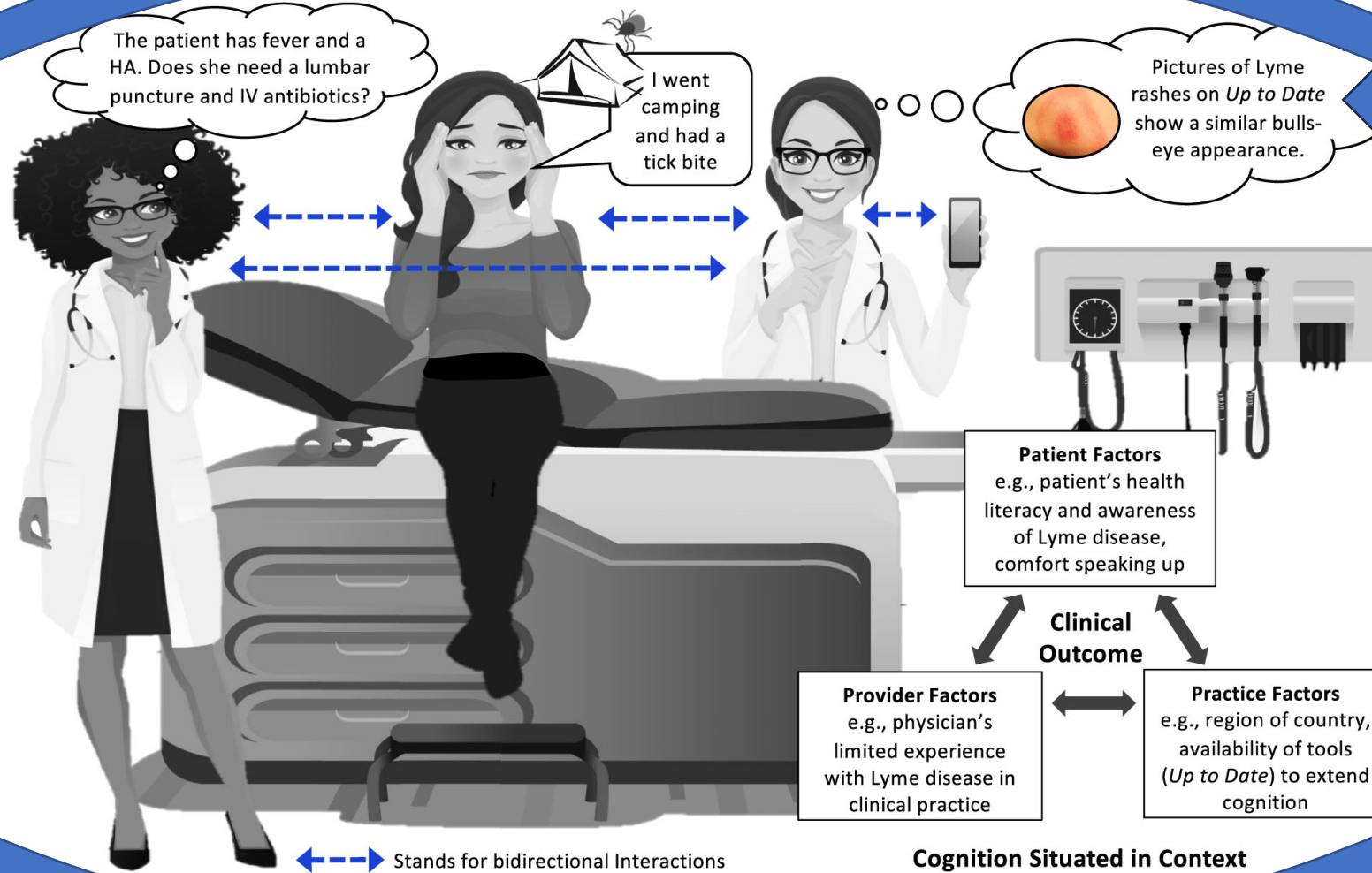


# Dominance of the Cognitive Frame









# Structural, Social, Cultural, Historical Context





# Developing Responsive Diagnostic Education for Equity

# Setting foundational understandings

- **Dx is Contextual**

- Identity, background, social/historical/cultural context relate to dx process
- Broaden reasoning frameworks taught to integrate equity lens

- **Dx Disparities Exist**

- Error impacts individuals & communities disproportionately

# Teaching Individual & Systems Level Strategies to Support Dx Equity

- **Knowledge:** Recognizing bias/inaccuracies/incompleteness in MK
  - Updating flawed 'illness scripts'

# Acute Coronary Syndrome

WHO

WHAT

WHEN

WHY

Dx/Rx

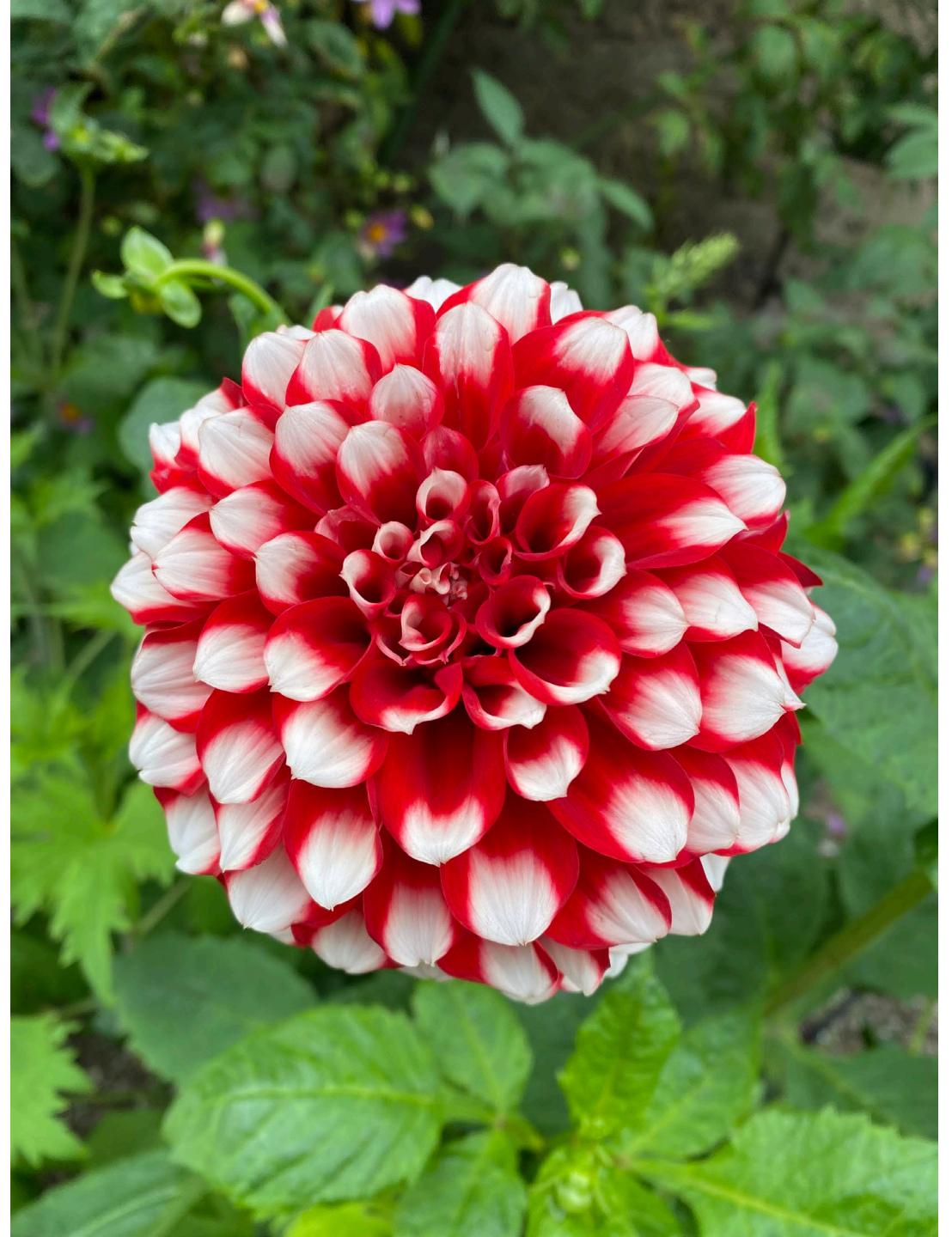


# Teaching Individual & Systems Level Strategies to Support Dx Equity

- **Skill building:** Communication across differences & team-based dx
  - Relationship-centered communication skills
  - Implicit bias recognition & management
  - Trauma informed/healing centered care
  - Collaboration with interpreters
- **Advocacy:** Clinicians' roles in systems change
  - Disaggregating data, identifying disparities
  - Adding complexity factors to visits
  - Utilizing patient navigators
  - Ensuring access to interpreter services

**Thank you to my  
many thought  
partners**

**Thank you for  
your work to  
advance **DEIA** and  
**Health Equity****



# Works Cited and Image Attributions

- Photo by Reinhold Möller Ermell, Feed silos in Hirschbrunn near Burgebrach
- DNA overview adaptation by Andrew Z. Colvin of original work by Michael Ströck
- Sherlock Holmes silhouette by Franck Camhi
- Figure from Daniel M, Durning SJ, Wilson E, Abdoler E, Torre D. Situated cognition: clinical reasoning and error are context dependent. *Diagnosis (Berl)*. 2020;7(3):341-342. doi:10.1515/dx-2020-0011

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