# Qualitative Analysis of Tailored Program Training: Findings From an Anti Racist Demonstration Project

Hasina Chimeka-Tisdale[1]; Madeleine Will[1]; Chelsea Murillo-Parra[1]; Sita Ramaiya[1]; Maranda C. Ward, EdD, MPH[2]

1 - GW Milken Institute School of Public Health Students; 2- GW School of Medicine and Health Sciences Faculty

## Background + Significance

After the murder of George Floyd, institutions across the nation reckoned with their own legacies of racism and harm. In particular, an urban academic medical center stated its goal of becoming an antiracist medical enterprise. We relied on the **Antiracist Organizational Change Model (Ward et al., 2022)** as a framework for our project.

After collecting and coding climate survey data from two health science programs within this medical center we found that the two programs were operating on different baseline understandings of racism and the impact of slavery within medicine, therefore illuminating the need for tailored program training. We relied on the **Socio-ecological Model (McLeroy et al., 1988)** to guide our qualitative analysis of the findings. It is incumbent that institutions with anti racist aims fully engage all its members to reduce the "minority tax" that traditionally exists for people of color when leading such efforts.

## Methods

Key informant interviews (n=6) were conducted with those who completed the initial climate survey (n=63) to further assess their understanding of and attitudes towards antiracist efforts within medical education. Participants were asked to explain their perceptions of racism, thoughts about their current program's capacity for anti racism, and their previous personal and professional experiences with anti racism. We began analysis using open coding of the interviews and then narrowed our findings down to 13 different themes illustrating consistent ideas. After each interview was coded we then conducted a thematic analysis of the corresponding data.

## Antiracist Change Model

The **Antiracist Organizational Change Model (Ward et al., 2022)** is an organizational change model that presents three strategies that are useful in making progress towards racial equity within programs or institutions:
1. Dismantle whiteness by seeing whiteness and unlearning white supremacy;
2. Plan for collaborative change by engaging all constituents, relearning history, and transforming systems; and
3. Live out health profession social mission by acting on injustice and sustaining accountability.

## Results

Our analysis found that participants' responses align with the Social-Ecological Model of Health in describing the multifaceted factors that weigh in on the capacity to engage in antiracist efforts. We found 3 codes on the individual level, one being the identified ways in which participants have, without requirement, educated themselves on antiracist efforts. The interpersonal level produced 1 code illustrating how personal relationships have influenced participants' desires to engage in antiracist efforts. We identified 7 codes on the institutional level and further specified those to the program, department, and school level. Institutional level codes illustrate, in one example, perceived challenges to implementing antiracist changes within the department. Finally, 2 codes were categorized as community level with one example being instances in society that invigorated one's desire to become a part of antiracist efforts.
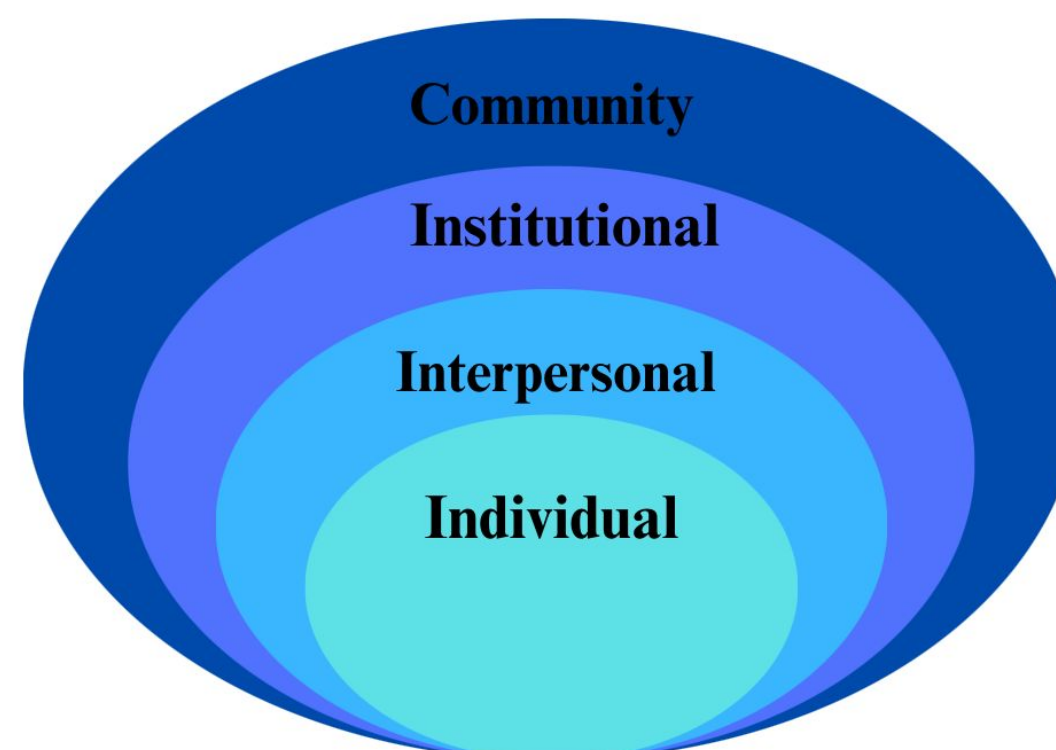


**Quotes:**

**Individual**
"I knew when I read Kendi's book, 'How To Be Antiracist', I've read all the other books, but it was that particular book that I had espoused antiracist ideals and beliefs in my own life"

**Interpersonal**
"I want to do that because I want, you know help, the people that I love, my friends and my colleagues and my family that I love about. I don't want them to have to keep carrying the burden on themselves."

**Institutional**
"I really do believe our faculty is very inclusive, but lacking time."

**Community**
"I was talking with my husband after the George Floyd murder…and I was really just blown away…and then, you know, I started really like digging in."

## Conclusion

Based on mapping the themes to the Social-Ecological Model of Health, we will offer recommendations to the department and individual programs on how to best tailor training that will align with participants' understanding, values, and capacity for change.

**Next Steps:**

Present quantitative and qualitative findings to each individual program at their monthly meetings.
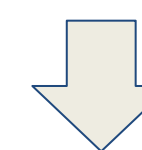
Create tailored training program students, faculty, and staff of each individual program based on our findings.
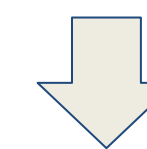
Implement change teams within each department to build a widespread antiracist culture. Change team members will meet 5 times a semester to discuss department policy, how it leads to racial inequities, and then intentionally correct it

## Acknowledgements

## References

1. Ward, M. C., Corr, P. G., Fernes, V. A., & Wang, T. (2022). How an anti-racist organizational change model can build capacity to support historically excluded students. Advances in Medical Education, Research, and Ethics, 389–414. https://doi.org/10.4018/978-1-6684-5969-0.ch019.
2. McLeroy KR., Steckler A, Bibeau, D (Eds.) The social ecology of health promotion interventions. Health Education Quarterly, 1988, 15(4):351-377.