

Health Equity Checklist

Health Equity is achieved when every person has the opportunity to attain their full health potential and no one is disadvantaged from achieving this potential because of social position or other socially and historically determined circumstances. Health inequities are differences in health that are avoidable, unfair, and unjust.

Instructions: Use the following checklist during your rotations and in your patient encounters to intentionally frame your care through a health equity lens.

Cultural Humility

- Use the [HUMBLE model](#) to cultivate your personal cultural humility
 - Humility
 - Understand
 - Motivate
 - Begin to incorporate knowledge into care
 - Life-long learning
 - Emphasize respect
- Pay attention to the words residents or attendings use that seek to flatten the physician-patient power imbalance. Reflect on and mirror this language in a future patient encounter
- Reflect on a patient encounter: How did you build trust with this patient who may have had a higher level of mistrust in the medical system due to systemic bias and discrimination?

Unconscious and Explicit Bias

- What unconscious or explicit biases might you hold about the patient?
- What assumptions have you made about the cultural identity or background of this patient and their family?
- How might your biases impact the diagnosis, treatment and care of this patient? Consider your verbal and nonverbal communication with patients: studies suggest differences in physicians' nonverbal communication with minoritized groups, e.g. time spent with patient, proximity, eye contact, posture, touching the patient, surprise when identity disclosed
- Consider your verbal communication about this patient (e.g. smoker, drug-seeker, drifter, non-compliant, frequent flier, etc.)
- Consider a "What if" scenario to check for bias, e.g., "What if this patient were a ___ (insert privileged demographic)? Would I make decisions, behave, or provide advice differently?"
- Review the bias mitigation strategies [sheet](#): select a strategy you haven't used in the past and challenge yourself to implement it in each rotation
 - Bias-busting buddy
 - Intergroup contact
 - Counter-stereotypic imaging

- Improved decision making
- Individuating
- Perspective-taking

Social Determinants of Health

- Have you assisted in the screening of patients' social determinants of health?
- How have social determinants of health impacted the patient's health outcomes (e.g. transportation issues, lack of family support, loss of income, access to healthy food, trauma, un/underinsured status, structural racism/sexism/ableism, etc.)?
- How will you incorporate knowledge about the patient's social determinants of health into the diagnosis and treatment plan? (Think of how a social determinant might be added to a "problem list" and/or assessment, with corresponding plan details)
- What referrals can you consider to address the patient's social determinants of health (support groups, transportation passes, legal aid, housing vouchers, nutrition assistance, social work, behavioral health, etc.)?
- Ask yourself: "How might structural racism be operating here?" "How might additional forms of oppression be operating here?"
- Are the patient's missed appointments or lack of follow-up tied with other SDOH?

Health and Healthcare Disparities

- Does your patient belong to a group (or groups) that experience health disparities? How did you determine this (Did you assume or did you ask?)?
- What health and healthcare disparities exist for your patient's group(s)?
- How are you advancing health equity and decreasing healthcare disparities for this patient to avoid unjust health outcomes?
- How will the health disparities knowledge inform your diagnosis, treatment, and care of the patient?
- What referrals or multidisciplinary approaches can you consider to address the patient's health inequities?
- Connect system-level change and policy to health disparity: identify how you might influence or create policy to improve social and economic conditions in our local or state government, especially for populations of color, Latinx, Native American, LGBTQ+, and others experiencing health inequities

Structural Competency

- How will you incorporate knowledge of social structures experienced by your patient into your diagnosis, treatment and care of your patient?
- What can you do to intervene at a structural level (individual, interpersonal, clinical/institutional, community, research, or policy) to improve outcomes for your patient and similarly situated patients?
- Identify one equity goal you have for the year; consider explicitly articulating your commitment to health equity when preparing for residency interviews

- ❑ Create a health equity (or social justice) flock. Find the people around you that you can join or enlist to advance health equity
- ❑ Find out what structural interventions have been developed at your rotation site. How does the intervention strategy benefit disparately impacted communities? Consider how you might revise or improve the strategy and discuss with a faculty member
- ❑ Step back: Operate in solidarity with groups who have been oppressed. Take their lead. Ask clinicians how they work with disadvantaged groups and learn what would be most helpful to these groups