

## Ensuring Equality and Diversity in Education... The Medical Perspective

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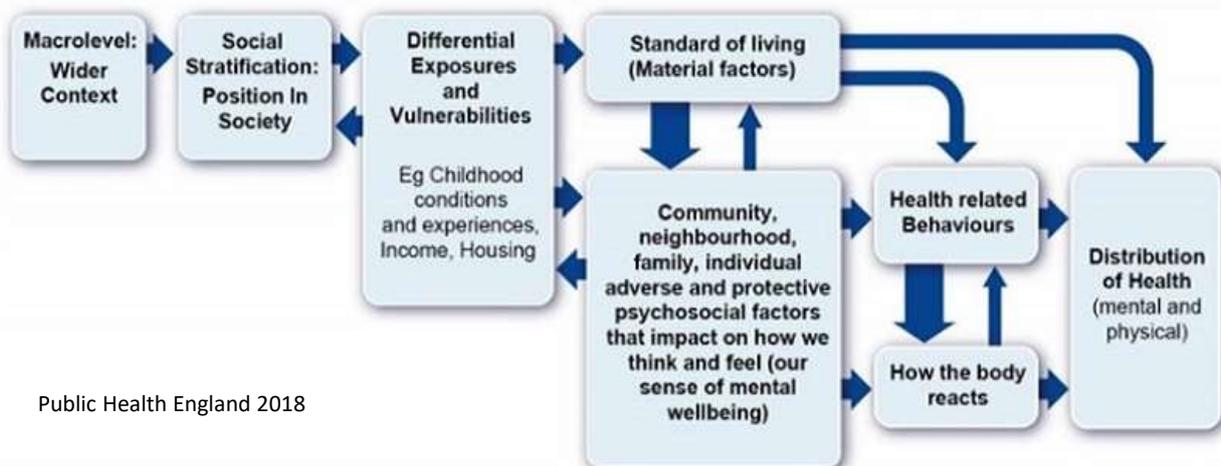
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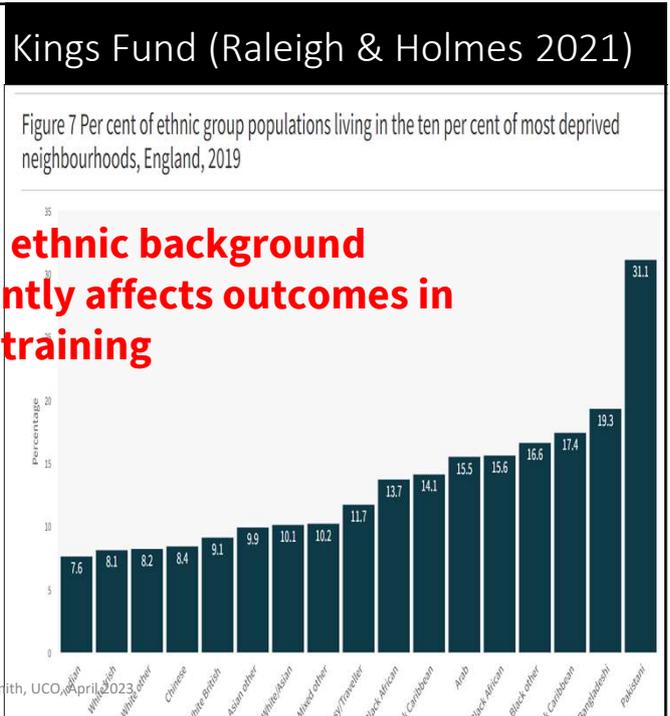
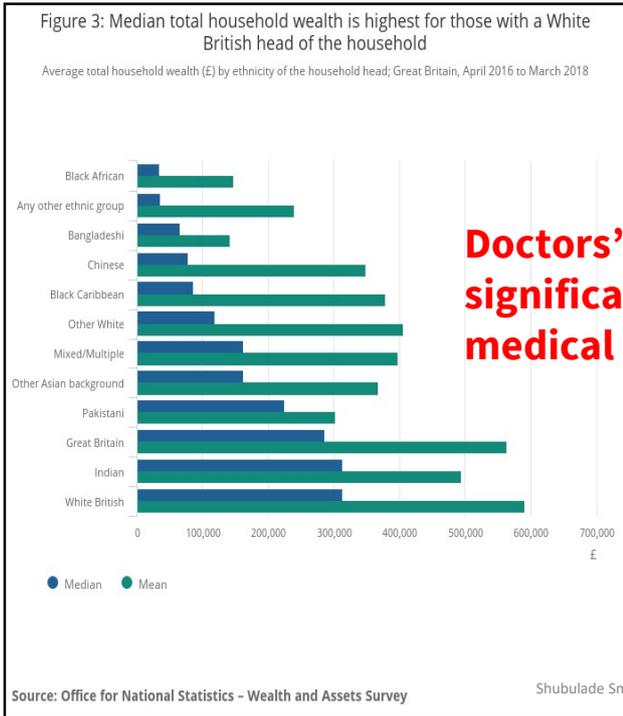
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## Inequality: Psychosocial pathways



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2



**Doctors' ethnic background significantly affects outcomes in medical training**

3



4

## Discrimination - ?a risk factor for mental disorder

### Individually mediated



=> Negative emotional response (sadness, anxiety, hurt, frustration, powerlessness, hopelessness, anger, shame) => ↑ nocturnal physiological response to stress) (Bell et al 2019, J Psychosom Res)

5

## Discrimination - ?a risk factor for mental disorder

### Institutional/ structural discrimination

Differential access to goods, services and opportunities by race/sex/gender/religion/disability etc

Manifests as “inherited disadvantage” and is “codified” into our customs, practice and laws

Often no active “perpetrator”

Inaction in the face of need

6

## How policies can bring about/cement in discrimination

- One baby policy in China -> 50 million “missing women” in mainland China
- White Australia policy 1901
- Segregation in Northern Ireland
- Romanian Orphanages – Decree 770
- Compulsory Sterilisation in Sweden – until 1975
- Apartheid in South Africa
- Caste system in India
- Ukraine - Refusal to allow non-white Foreign Nationals to leave

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7

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**Discrimination -  
?a risk factor for  
mental disorder**

**Internalised  
discrimination**



Doll Experiment, Kenneth and Mamie Clark, 1940s and 50s

Acceptance of the negative assumptions and stereotypes about abilities and intrinsic worth

Involves self-devaluation, e.g. stratification by colour (colourism)

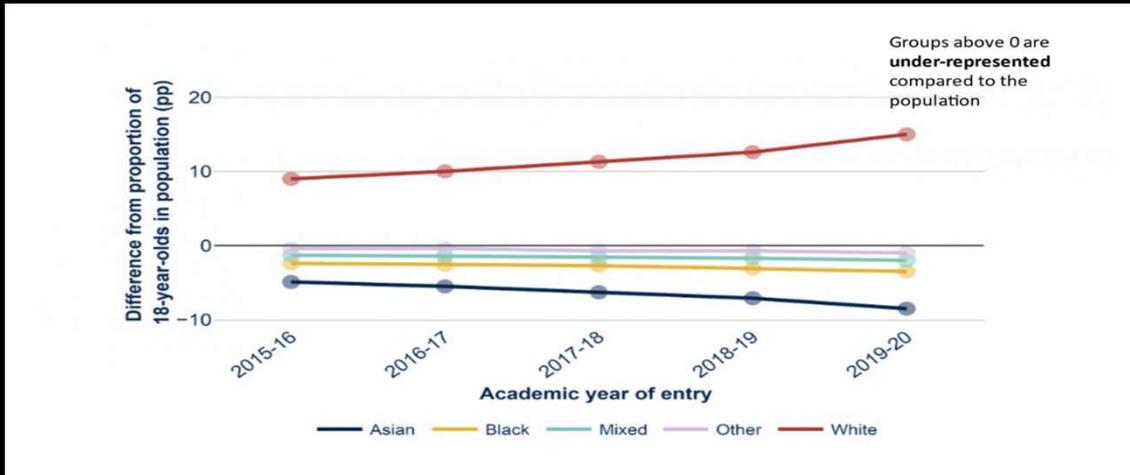
Involves resignation – e.g. dropping out of school; failing to vote; engaging in risky health behaviours



Blue eyes/Brown Eyes exercise, Jane Elliott

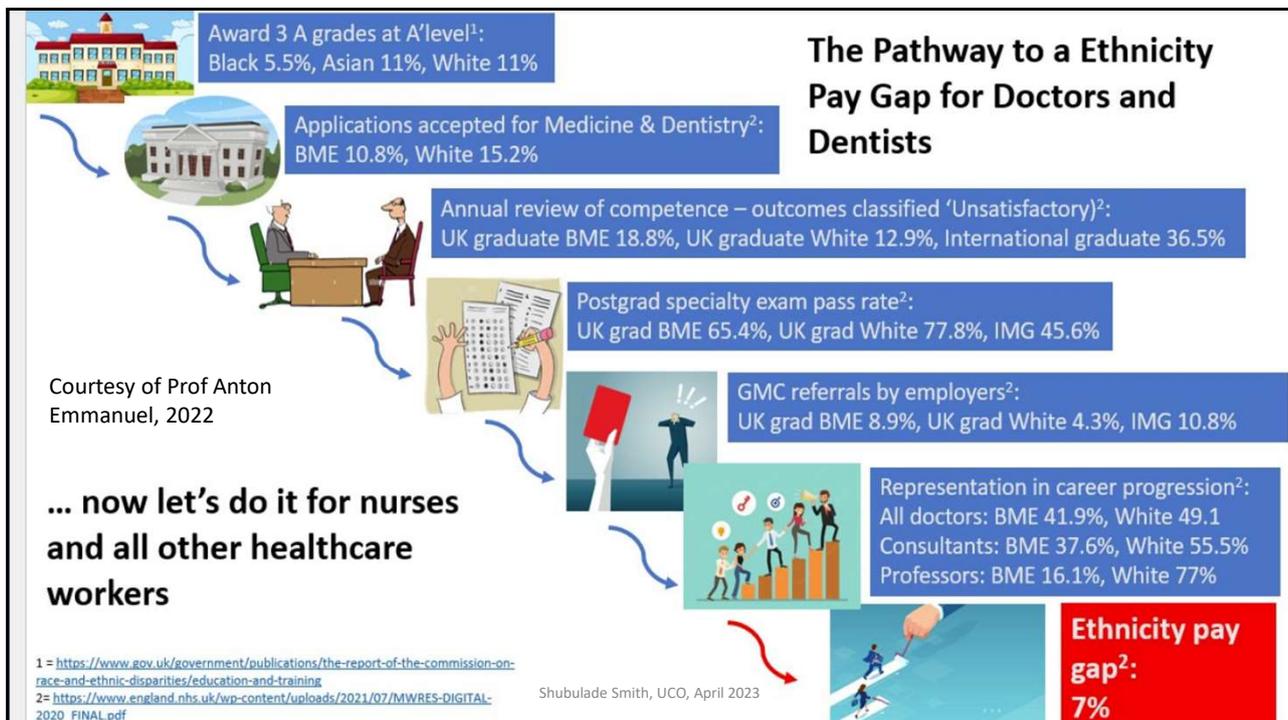
8

# Gaps in proportion of 18 yr olds entering higher education



OFS 2021, Access and participation data, available at <https://www.ofs.gov.uk/analysis/data-and-research/2021/07/16/2021-22-access-and-participation-data>, Shubulade Smith, UCO, April 2023. Statistically significant at the 95% level.

9



10

## What does this look like in practice...?

### Dr Manjula Arora - suspended



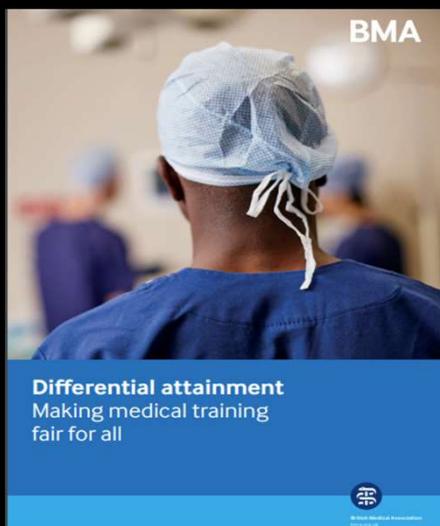
### Dr Luke Morgan-Rowe - suspended



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11

## Don't worry, there's guidance...



GMC to refer to '**systematic differences in outcomes when grouping cohorts by protected characteristics and socio-economic background**'.

- In practice, the biggest gaps in attainment during medical training are linked to race...
- 2017 GMC data shows that the pass rate in postgraduate exams amongst
  - white students - 75%
  - UK BAME students - 63%
  - IMGs - 46% for white students and 42% for BAME students

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12

## Fair training pathways: understanding differential attainment in medicine (Woolf 2017)

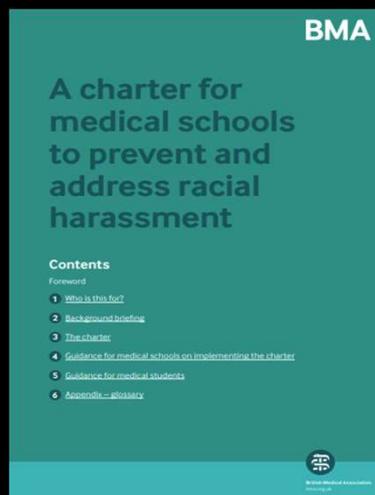
- Academic ability of the students themselves...
  - Poor exam technique...
  - Being a bit “dull”...
  - Learning environment – learning is a social activity...
  - “Fitting in” – affects relationships with seniors and peers
  - Unease in giving feedback to students from different backgrounds
  - ?bias in workplace-based assessments and recruitment
  - Low expectations – stereotypical assumptions
  - Lack of autonomy about geographical location, poor work-life balance –
- “I felt I had to work twice as hard to prove as was just as good”*

<https://gmcuk.wordpress.com/2016/07/21/fair-training-pathways-understanding-differential-attainment-in-medicine/>

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13

## Don't worry – there's guidance...



### ISSUES....

- widening participation programmes were ‘how the poor Black kids get into medicine’;
- Separating Black students from other students
- Repeatedly failing to pronounce names properly
- Making racist remarks to students

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14

## BMA Charter

1. Supporting individuals to speak out
  2. Ensuring robust processes for reporting and handling complaints
  3. Mainstreaming equality, diversity and inclusion (EDI) across the learning environment
  4. Addressing racial harassment on work placements
- Code of conduct; access to guidance and trained supporters, active bystanding, monitoring
  - Review existing reporting procedures; ensure students know how to complain and are supported to do so (incl. anonymously)
  - EDI embedded throughout the curriculum; education and training and interaction and engagement with students and staff
  - Clear expectations to placement providers – to tackle harassment; micro-aggressions and discriminatory behaviour + guidance for medical students if patients or staff make racist remarks

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15

## Thank you!

ANY QUESTIONS!!  
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“While it is better to be loved than hated, it is also far better to be hated than ignored.”

Viet Thanh Nguyen, The Sympathiser

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16