



# Symposium on Educational Excellence 2025

## Teaching income inequality in UME: a scoping review

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### Keywords

Health Inequities; Curriculum; Education, Medical; income inequality; MD curricula; evidence of learning framework

### Abstract

**Background:** Oxfam International estimates that income inequality causes 21,000 deaths per day.<sup>1</sup> This would make inequality the second most common cause of death globally, behind only ischemic heart disease.<sup>2</sup> American medical trainees, meanwhile, have consistently been found to carry implicit bias towards low socio-economic status (SES) patients.<sup>3,4</sup>

Many Undergraduate Medical Education (UME) institutions have introduced inequality and its attendant mortality into their curricula, often in the context of overall health inequities. (Recent examples include new curriculum at Northwestern<sup>5</sup> and UCLA).<sup>6</sup> Whether in the context of Social Determinants of Health, paired with Anti-Racist education, or via service learning, schools have begun to educate medical students (disproportionately from wealthy backgrounds<sup>7</sup>) on the economic barriers many patients face.

This study will seek to illuminate the current landscape of UME education on income inequality.

**Research Question:** How do American medical schools teach about income inequality? What theoretical frameworks underlie this teaching? How effective have these curricula been?

**Methods:** this study is a scoping review, designed to elucidate which approaches are common within UME rather than judge their relative merits. Broad search terms will be employed to capture relevant literature regardless of immediate framing. The study will work with institutional librarians to search MedEd Portal, Google Scholar, ERIC, Dissertations and Theses, PubMed, and SCOPUS. The study will identify pedagogical methods, assessment models, and underlying theoretical frameworks, code them, and use qualitative software (Atlas.ti or similar) for analysis.

**Impact and Effectiveness:** the ideal impact of this study is that designers of medical school curricula will be more aware of different approaches to teaching poverty/ income inequality, aiding them in curricular development.

**Results:** pending. In-depth qualitative analysis will show which approaches and frameworks are common in UME, and how this landscape is evolving. Results will be interpreted through the lens of the Evidence of Learning & Impact Framework to understand how UME institutions are tracking the impact of their efforts. Output may include a PRISM diagram of the search process. This study will be complete in time for the Symposium on Educational Excellence.

**DEI:** this study will work towards ensuring future physicians understand the structural aspects of poverty and its direct consequences for patients.

**Limitations:** UME institutions are under no legal obligation to publish curricula. The study will therefore reflect published literature, not a comprehensive inventory of UME curricula.

**Significance and possible applications:** better understanding of the current landscape will allow for the subsequent development/ proposal of new modalities on income inequality/ poverty for the OHSU Undergraduate Medical Education Curriculum Committee to consider.

**Specific Learning Objectives:** through our efforts, we hope our audience becomes more aware of the urgency of teaching the health consequences of poverty/ income inequality in UME, gains a sense of what efforts exist presently, and considers what learning efforts they might pursue themselves or develop for students in their care.

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