CULTURALLY RESPONSIVE TEACHING: CASE REPORT FROM THE PHARMACY PRACTICE FACULTY DEVELOPMENT PROGRAM

Mark A. Strand, Brody Maack, Natasha Petry
NDSU Faculty Academic Conference
August 16, 2023
A Faculty Development Series Focused on DEI

Mark A. Strand, PhD, CPH
Reflection: Consider the courses you teach, and the impact of diversity, equity and inclusion (DEI) on those courses. What role do DEI content or methods have in your courses?

A. No role, as DEI content and teaching methods are not relevant to my courses
B. Some role, as DEI has some relationship to either the content or methods of my courses
C. A significant role, as DEI has a clear relationship to the content or methods of my courses
D. I am not sure

Scan the QR code or enter this link into your browser: PollEv.com/allywelsh292
Objectives

• Explain NDSU and professional associations calls for increased attention to DEI
• Describe how to design and deliver a faculty development series to address the use of race and ethnicity in pharmacy education
Definitions

• **Diversity, Equity, and Inclusion**
  – Diversity -- Differences in how people see, categorize, understand and go about improving the world.
  – Inclusion -- Creating an environment where any individual or group can be and feel welcomed, respected, supported, and valued to fully participate.
  – Equity -- Fair access, treatment, opportunity, and advancement for all people, including eliminating barriers disadvantaging certain groups.

• **Culturally responsive teaching** – using students’ cultural knowledge, prior experiences, frames of reference, and performance styles to add both relevance to topics and infuse culture into the classroom.
Diversity, Equity, and Inclusion at NDSU

• NDSU Strategic Plan 2021-2026 Goal #1 is to “create and maintain an open and collegial environment to promote inclusivity and diversity as a cornerstone of education, research, and outreach”
  – Subgoal #3 “Design and implement additional programming, curriculum, outreach opportunities, and policies that uphold inclusivity, diversity, respect and connection.”
• NDSU Pharmacy Practice Strategic Plan 2022-27 includes the same goal
National Pharmacy Organizations

• American Society of Health-System Pharmacists training course “Rethinking DEI Strategy Development in Pharmacy Education”

• American Pharmacists Association Task Force on Structural Racism in Pharmacy, 2020-23 Report

• American Association of Colleges of Pharmacy Diversity, Equity, Inclusion, and Anti-racism Committee Charter

• DEI in Pharmacy Practice encompasses: Race and ethnicity, Gender equity, LGBTQ+ equity, Sexual minority status, Ableness equity and others
NDSU Pharmacy Practice Instructor Count

Gender

Race/Ethnicity

https://app.powerbi.com/groups/07c6427f-1967-4cce-9ccc-a3dbbd978f54/reports/7575881a-d78e-4b40-a153-f0ab155af5cd/ReportSection?experience=power-bi
NDSU Pharmacy practice Student Count by Race/Ethnicity and Gender

Citizenship and Gender

Race/Ethnicity

https://app.powerbi.com/groups/07c6427f-1967-4cce-9ccc-a3dbbd978f54/reports/54951f9f-8f91-42ac-a393-e67e40033b4b/ReportSection58bc162041563753680c?experience=power-bi
Pharmacy Students
Students will learn to think and to practice what has been taught and modeled.

Pharmacy Faculty
Formed biases may impact one’s way of practice and teaching

Social Determinants of Health (SDOH)
Factors that impact one’s life

Implicit Biases
Biases are formed among people, including health care professionals

Health System
This will impact health equity and quality of care for patients

Pharmacy Faculty
Formed biases may impact one’s way of practice and teaching

NDSU NORTH DAKOTA STATE UNIVERSITY
Lessons Learned

Brody Maack, PharmD, BCAP, CTTS
<table>
<thead>
<tr>
<th>Date</th>
<th>Presenter</th>
<th>Topic</th>
<th>Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sep 9, 2022</td>
<td>Brody Maack</td>
<td>DEI Series Introduction</td>
<td>23</td>
</tr>
<tr>
<td>Sep 29, 2022</td>
<td>Olihe Okoro</td>
<td>Race without racism in pharmacy education – Approaches in case-based learning</td>
<td>26</td>
</tr>
<tr>
<td>Oct 17, 2022</td>
<td>Jeremy Holloway</td>
<td>Social Determinants of Health for Resiliency of Healthcare Communities</td>
<td>18</td>
</tr>
<tr>
<td>Jan 25, 2023</td>
<td>Justina Lipscomb</td>
<td>The Influence of Race on Pharmacotherapy Education</td>
<td>19</td>
</tr>
</tbody>
</table>
## Grand Rounds

<table>
<thead>
<tr>
<th>Date</th>
<th>Presenter</th>
<th>Topic</th>
<th>Attendance</th>
</tr>
</thead>
</table>
| Feb 7, 2023     | Grand Rounds 1 | ● How is race currently included (or excluded) in your course?  
● What have you learned from the previous DEI presentations that you will consider when working to enhance your course delivery with regard to race?  
● What specific changes will you make to the item you brought to the Grand Rounds to foster more appropriate inclusion of race? | 8          |
| March 9, 2023   | Grand Rounds 2 | ● Same as Grand Rounds 1                                                                                                                                                                             | 11         |
| March 23, 2023  | Grand Rounds 3 | ● What have you learned?  
● What has changed in your understanding, or in your approach to teaching?  
● What should we do next?                                                                                                                                 | 9          |
| April 2023      | Grand Rounds 4 | ● Where do we go from here?                                                                                                                                                                          | 7          |
Ground Rules

• Rules established *ahead of* the intro meeting:
  – This is a *learning environment* and safe space, so should be embraced as such!
  – Approach the learning process *open minded* and understanding.
Ground Rules

• Rules established *collectively* during the intro meeting:
  – Seek to learn from students
  – Challenge ideas, not people
  – Be accountable to ourselves, and supportive of one another
Observations

• Pharmacy is an objective and evidence-based discipline, so most pharmacy content was felt not to be influenced by race and ethnicity.

  – However, most faculty members acknowledged there being disparities in health outcomes based on race and ethnicity.
Observations (cont’d)

• Pharmacy is an objective and evidence-based discipline, so most pharmacy content was felt not to be influenced by race and ethnicity.

  – Clinical guidelines exist that specifically address race, and these guidelines should be continuously challenged.

  • *So, how do we teach that??*
• Example:
  – **Guideline**: “Two specific types of blood pressure medicine are recommended for black individuals”

  – **Reality**: Using ONLY those two specific types of blood pressure medicines in black individuals leads to under-treated hypertension in the black population!
Observations (cont’d)

• Pharmacy content and medication guidelines are absolute, so the desire is for a clear recommendation regarding the handling of race in pharmacy education.

  – Whether to include race depends on:
    • What is the **purpose** of including the patient’s race?
    • Will it **impact how** the patient is cared for?
    • Does it include any **assumptions** about patients of that race?
Observations (cont’d)

• Faculty were initially reserved on speaking about DEI at beginning of Grand Rounds sessions.
  – But…after the sessions, anonymous survey showed:

- Faulty willing to learn about DEI
- Faculty seek activities, solutions, best practices
- Faculty consider racial and ethnic context

= Improved teaching quality
Faculty Survey Feedback

- “Social determinants of health are a better indicator in many situations.”
- “Guidelines are always in process and shouldn’t be viewed as permanent and fixed.”
- “I’d like to see more on solutions/best practices to move forward.”
- “How can we help students to determine the bias that they may hold so they can be aware of it? How do we have others accept it?”
- “I would like to know some resources to be able to review and share for skin tones and patient assessments.”
Lessons Learned

- Further research should identify the barriers faculty have on speaking on race and assess how applying patient cases with the involvement of social determinants of health can create a positive shift in students' learning and future practice.
- Healthcare students should be given the tools on how to treat patients as a whole, not just by one's race.
- Creating a defined group of participants, and a safe space, with guidelines, was important.
- Starting with intra-department development was effective.
Lessons Learned (cont’d)

• Not having an absolutist or judgmental approach has been important.
• The ambiguity is uncomfortable for our faculty, but it seems they are accepting there is no one easy answer.
• Upon hearing what faculty are doing, our students want to participate in this conversation.
Where do we go from here?

Natasha Petry, PharmD, MPH, BCACP
Where do we go from here?

• We keep going! (but what next?!)  
• At a minimum, one faculty development session per semester devoted to DEI  
  – In-person and zoom  
    • Accommodates faculty offsite and increases attendance  
• Ask for volunteers (faculty) to become involved with and/or present/facilitate DEI sessions
Where do we go from here?

• Expand beyond race
• Event idea: Journal Club
• Course reviews: recommended charge for assessment committee to consider appropriateness of DEI in course review process
• Open to other ideas
• Key: keep momentum going!
Where do we go from here?

• Include students?
  – Consider inviting students to reach out to us and join these discussions/events
  – Consider doing a student baseline survey
Small group discussion

• How have DEI content or methods been or not been incorporated into your teaching?
  – How has it gone?
• What will you do differently as a result of today’s presentation?”
Q & A
Thank you!

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