Equal opportunities are important to us!

Fact Sheet: Diversity in Teaching

MEDIZINISCHE UNIVERSITÄT INNSBRUCK

1. Introduction

At the MUI, we are committed to equality, equal rights and equal opportunities for all our employees, students and patients. Equality work encompasses not only individuals and their careers but also organisational structures, teaching, and research. Gender and diversity-specific competence in teaching refers, on the one hand, to the integration of gender and diversity-related content into courses and internships, and, on the other, to the methodological and didactic design of teaching itself.

2. Medical education and equal opportunities

Methodological and didactic design includes communication with students, the selection of teaching and learning formats, the use of diversity-sensitive language, the design of presentations and visual materials, and the structuring of curricular frameworks. It also involves reflection on, and open discussion of, fundamental values and attitudes. Teachers have a considerable influence on students' learning and academic success, and serve as important role models.

3. Complexity and critical reflection: suggestions for practice

Gender and diversity-sensitive medicine as teaching content:

- In which areas of the course might gender or other diversity-related differences arise that could influence the prevention, diagnosis, treatment, or rehabilitation of diseases? (Biological, sociocultural, communication with patients, socioeconomic, aftercare, etc.)

Gender and diversity-sensitive methodology and didactics

- Are women, men, non-binary people, older and younger individuals, people of different skin colours, etc., represented in case studies, written materials, tables and statistics?
- What messages do the visual materials convey? (Stay alert to stereotypes and clichés)
- Are social and cultural differences among patients acknowledged?
- Do the chosen teaching methods engage female, male and non-binary students equally? To what extent do they address different starting points and prior experiences among students?
- What support measures and self-competence-enhancing tools are integrated into teaching?
- What role expectations do you hold as a teacher, and which system of values shapes your perspective? (Reflection on your personal frame of reference)

4. Further information

Americano, A., Bhugra, D. (2010): Dealing with diversity. In T. Swanwick (Ed.), *Understanding Medical Education. Evidence, Theory and Practice* (pp. 392-402). Oxford: Wiley-Blackwell.

Harden, R.M. & Laidlaw, J.M. ([2]2017). *Essential Skills for a Medical Teacher. An Introduction to Teaching and Learning in Medicine*. Elsevier, Edinburgh, London.

Ludwig, S., Dettmer, S., Wurl, W., Seeland, U., Maaz, A., Peters, H. (2020). Evaluation of curricular relevance and actual integration of sex/gender and cultural competencies by final year medical students: effects of student diversity subgroups and curriculum. *GMS J Med Educ.* 37 (2): Doc 19. DOI: 10.3205/zma001312

Ludwig, S., Jenner, S., Berger, R., Tappert, S., Kurmeyer, C., Oertelt-Prigione, S., & Petzold, M. (2024). Perceptions of lecturers and students regarding discriminatory experiences and sexual harassment in academic medicine – results from a faculty-wide quantitative study. *BMC Med Educ* 24, 447. https://doi.org/10.1186/s12909-024-05094-x

Muntinga, M.E., Krajenbrink, V.Q.E., Peerdeman, S.M., Croiset, G., Verdonk, P. (2016). Toward diversity-responsive medical education: taking an intersectionality-based approach to a curriculum evaluation. *Adv in Health Sci Educ* 21:541-559, DOI 10.1007/s10459-015-9650-9

Napier, D., Ancarno, C., Butler, B., Calabrese, J., Chater, A., Chatterjee, H., Guesnet F., … Woolf, K. (2014). Culture and health. *The Lancet* 384(9954), 1607-1639. https://doi.org/10.1016/S0140-6736(14)61603-2.

More on the topic:

Guidelines for Diversity in Medical Education: https://www.i-med.ac.at/koostelle/gendermainstreaming/leitfaeden-fuer-forschung-und-lehre.html.en

"Because wellbeing is increasingly recognized as both biological and social, health-care providers can only improve outcomes if they accept the need to understand the sociocultural conditions that enable people to be healthy and make themselves healthier"

Napier A.D. et al, 2014

Information and advice:
Coordination Centre for Gender Equality, Affirmative Action for Women, Diversity
Gender Mainstreaming and Diversity Department
Email: diversitaet-gleichstellung@i-med.ac.at