Development, Implementation, and Impact of a Health Justice Elective for Pediatric Residents

Purpose: Critical assessments of historical context and current policies and systems are essential to understanding causes of health disparities. Addressing disparities requires partnerships between community, government, healthcare providers, and health systems. Traditional health disparities curricula focus on variation in outcomes across groups without deep exploration of historical context or centering the lived experiences of individuals through community-based learning. The concept of Health Justice provides a novel framework for utilizing the expertise of community members to explore how intentionally redistributing economic, political, and cultural assets to historically oppressed groups can alleviate health disparities.

Objective: To collaborate with community members and organizations to implement and evaluate a Health Justice Elective for pediatric residents that equips trainees to address historic injustices and social conditions leading to health disparities

Design/Methods: Kern's Curricular framework and a Connectivist Learning Model were used to shape this curriculum. The Health Justice Elective was a 2-4 week resident-led elective. Learning goals included: 1) Define health justice, 2) List events that contribute to inequities, 3) Gain clinical experience working with diverse patients, 4) Build relationships with community members, and 5) Identify how providers and systems can contribute to health justice. The curriculum consisted of four core components: contextual development, community conversations, clinical experiences, and community-engagement experiences.

Context was established through resident-led exploration of the historical and current injustices contributing to health disparities among different communities. Over 25 clinical and community partners were involved in conversations, clinical experiences, and community experiences. Examples of community partners included: Harm Reduction Action Center Needle Exchange Program, Nurse Family Partnership, Project VOYCE (youth community advocates), TRUE Center for Gender Diversity, Refugee Health Clinic, and Urban Peak Center for Unhoused Youth. Achievement of learning goals was assessed through resident focus groups and surveys.

Results: 14 residents and over 25 community partners participated in the elective. Thematic analyses found that participants defined a justice-oriented physician as one who practices cultural humility, centers voices of the community, actively participates in community initiatives, and views health justice as essential to practicing medicine. Residents' responses emphasized the value of the course, specific lessons learned and anticipated practice changes inspired by the elective, and the benefits of developing a network of colleagues and community partners committed to health justice. Community members expressed appreciation for involvement in medical education, interest in future participation, and desire for continued partnership.

Conclusions: The Health Justice Elective provided trainees with an understanding of Health Justice as a framework for addressing health disparities. They gained knowledge of factors underlying health disparities, deepened connections with community members and peers, and gained experience working with diverse patients. Residents considered it highly valuable and community members appreciated the opportunity to share their knowledge.