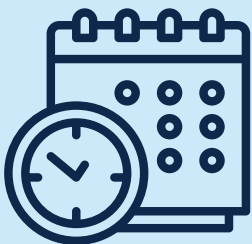


THE HIDDEN CURRICULUM: WHEN IT IS GOOD IT IS
VERY VERY GOOD AND WHEN IT IS BAD IT IS
HORRID. A LOOK AT THE HIDDEN CURRICULUM
BETWEEN DIFFERENT AREAS WITHIN MEDICINE.



Dr. Karen Schultz



Tuesday
February 7, 2023

Time
12:00pm EST
12:00pm PST

This webinar will be
delivered in English



Biography: I was born in the lower mainland of the West Coast, went to the East Coast to do a BSc at Dalhousie University and then partially retraced my steps to do medical school and Family Medicine residency training at Queen's University in Kingston Ontario. On returning to Queen's after a few years hiatus away to do locums and travel, I started work in the Department of Family Medicine as a family physician clinician-educator. This provided a wonderful supportive and fertile ground for building a love of medical education. Colleagues in the department and broader faculty have helped me build skills in medical education research and provided communities of support to do this work. I was the Family Medicine Program Director for 8 years (a fabulous job) and in the last year and a half have been the Associate Dean for PGME (another fabulous job!). One of my fundamental goals for both of these roles has been, and is to, help shape optimal learning environments for residents.

In 2018 a series of events at Queen's lead to the formation of a working group tasked with exploring the hidden curriculum (HC) within the Queen's School of Medicine at Queen's. I was fortunate to co-chair that group and work with a diverse and thoughtful set of people and now chair the subsequently formed Hidden Curriculum implementation working group. Addressing the negative HC is one path to optimizing that learning environment for our medical learners.

Overview: Medical culture anecdotes suggest that the hidden curriculum (HC) phenomenon may be more pervasive than has been empirically documented or understood. The HC includes intended and unintended implicit messages about values, norms, and attitudes that medical learners and faculty infer from their interaction with role models, as well as from group dynamics, processes, culture, policies, structures, and systems. The HC can either reinforce or undermine the formal values of medical education and clinical institutions.

The HC can be directed towards and impact people in multiple ways, including along gender, racial, socioeconomic, and sexual orientation lines to name a few. There is also a HC that plays out through an unspoken hierarchical structure existing between those in different areas of medicine. Most medical education institutions espouse values of diversity, equity and inclusivity as well as respect, collaboration and collegiality. Those institutions have two main mandates--to provide optimal learning environments for their trainees and open up a broad array of viable valuable career pathways and to provide excellent clinical care for the patients in their institutions. A negative HC undermines both those aims. We explored how the HC between different areas of medicine was experienced by our medical students, residents and faculty, including how the HC was expressed, the impacts it was having and ideas about causes and solutions. This presentation will focus on those findings as well as the ongoing work by our implementation committee to address the negative HC. Anecdotally, the HC plays out at many if not all medical institutions in Canada, and so the hope for this presentation is to open up a broader conversation about how to address this.

Objectives: Using the lens of the hidden curriculum as it pertains to interactions between those in different areas of medicine, this webinar will provide participants with the opportunity to:

1. Hear about one institution's work to understand the impact of the hidden curriculum at that institution and contemplate exploring this phenomenon in their own setting.
2. Consider causes of the hidden curriculum.
3. Consider strategies to address the hidden curriculum at a personal, institutional, and organizational level.