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## References

- 1 Tsai J, Ucik L, Baldwin N, Hasslinger C, George P. Race matters? Examining and rethinking race portrayal in preclinical medical education. *Acad Med.* 2016;91:916–920.
- 2 Theme Issue on Women in Academic Medicine Careers. *Acad Med.* 2016;91:1033–1183.

**In Reply to Gowda et al:** We are grateful that our work at Brown has inspired action and change at other institutions. We see inter-school solidarity and faculty-student collaboration as foundational to systemic and sustainable change. We also believe that the work of decolonizing our institutions, curricula, and minds is the responsibility of each and every individual – not just those who are specifically designated in offices of diversity, inclusion, or justice. This shared obligation cannot be taken lightly.

Our original article was heavily informed by Critical Race Theory (CRT), defined as a framework that “analyzes race and racism as fundamental social structures within science, medicine, and society...and produces analyses that mobilize and support antiracist praxis.”<sup>1</sup> One of the central tenets of CRT relies on the principle of self-accountability. In order to address and dismantle the root causes of systemic racism, medical education must reflect deeply on its own participation in constructing and propagating inequity. Identifying and assessing these flaws is not enough; we must also commit to correcting them.

Many medical educators and clinicians may hesitate to address these topics, which may be labeled polarizing or polemic. While it is certainly easier to participate in “apolitical” biomedical training, it is important to remember that silence is never neutral. The act of doing nothing—of remaining unchanged at a time and within a practice that has contributed to the suffering of so many of

our patients—is in itself a decisive action charged with political implications.

The recent threats towards equity are not new. They are perhaps emboldened, more threatening, newly exposed, and afforded greater visibility, but they have existed for centuries. With this recognition, we must continue to peel back that which hides and perpetuates the sources of inequity. We must challenge ourselves to listen, serve more generously, and confront ourselves with the obligation to address injustice with renewed urgency.

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## Reference

- 1 Hatch A. Metabolic Syndrome and the Dangers of Colorblind Scientific Racism. Presentation at Brown University, Providence, RI, October 18, 2016.

## Focusing on Formative Assessments: A Step in the Right Direction

**To the Editor:** The article by Konopasek and colleagues<sup>1</sup> reaffirms my belief that focusing on formative assessments in undergraduate medical education is the right approach.

I am enlightened by the authors' choice of theoretical framework underpinning formative assessments—Vygotsky's theory of the zone of proximal development (ZPD). Vygotsky's theory applies to the current situation in our institution, which is undergoing a curriculum transformation whereby formative assessments are given much emphasis. One type of formative assessment being emphasized is the structured clinical exercise (CEEx), which is designed to provide a framework for constructive feedback and to be a good preparation for the OSCE (summative

assessment), as most OSCE stations map to a CEEx. According to Vygotsky,<sup>2</sup> a “more knowledgeable other” is needed to coach learners in their ZPD when a complex task is broken into smaller, more manageable tasks with opportunities for intermittent feedback. For CEEx, the “more knowledgeable other” is a clinical tutor who will assess the student and give immediate feedback. While history taking is assessed in both CEExes and OSCEs, the task is made simpler in the former. For example, for a CEEx on drug and alcohol history, a student is guided step-by-step to take (1) a family history, (2) a medical history, and (3) a social history of the patient, whereas for a similar OSCE station, a student is expected to take a well-structured history of the patient without further prompts.

With CEExes in each block of study, formative assessments are seen as a continuous process which, while preparing students for summative assessments, also help to monitor their progress and are truly assessments for learning.

The challenges to building a formatively focused assessment system, which are highlighted by the authors, are very real indeed. Yes, medical students may see little value in formative assessment if it does not contribute to the grade. Medical teachers may not see themselves as assessors of learning. Finally, the absence of a robust feedback culture in medical school is another impediment to formative assessments.

Curriculum transformation involves a paradigm shift. Over time and with constant feedback for improvement, a change in mind-set and institutional culture is slowly but surely taking place.

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## References

- 1 Konopasek L, Norcini J, Krupat E. Focusing on the formative: Building an assessment system aimed at student growth and development. *Acad Med.* 2016;91:1492–1497.
- 2 Vygotsky LS. *Mind in Society: The Development of Higher Psychological Processes.* Cambridge, MA: Harvard University Press; 1978.