Jeremiah Park

APEL Person

AP English Language

19 August 2022

In the article, “Don’t Impose DEI at Med Schools | Opinion”, John D. Sailer asserts that the implementation of “DEI is a poison” that is increasing in demand within the medical curriculum. Sailer believes it to be a matter of political relevance as an increase in the application of equity policies will create a medical field where activism is encouraged and the opposing opinion crushed. He says that “Other medical schools, meanwhile, rush to establish DEI requirements for evaluation, promotion, and tenure”, alluding to the idea of an internal medical core built on a focus of DEI rather than values of health. In proving this, the author gives examples of diversity groups attempting to apply DEI policies in medical facilities like the Vagelos College of Physicians and Surgeons or Dell Medical School. By applying a perceived large quantity of medical schools assuming these DEI policies, the author attempts to emphasize the extent of the spread of the perceived poison of DEI policies. This ironic poison is something Sailer says that the medical profession is taking in haste, and in doing so lacks foresight and morality.

In a similar fashion to Sailer, I find that the implementation of DEI policies would do more harm than good to the medical profession. This argument of DEI in medical education comes down to the question of whether the medical profession should focus on health or social politics. By endeavoring within the DEI sphere, the medical field can powerfully and quickly have a massive impact on the views of the world and the success of politics. Consider the life of one who opposes certain provisions of DEI established within medical schools. The possibility that these individuals would be denied access to healthcare would theoretically increase, imposing an odd event in which discrimination increases while it is meant to decrease. This effect would further extend to all fields, as all those wanting an ‘equal’ opportunity at healthcare would have to have the same political values as taught in medical schools or risk decreased quality or increased cost for their healthcare. Consider as well the modern event of the abolition of abortion via the overturning of *Roe v. Wade*. Looking purely from a medical point of view, the abolition of abortion harms the medical field. Not only does it take away a form of healthcare from women, but it also encourages medical practioners to refrain from practicing and learning how to properly perform abortions. We effectively close off an avenue of research and health developments by banning abortion. Further, Sailer references the White Coats 4 Black Lives medical student chapter organization that has called for DEI plans in medical schools. One of the largest concerns with extending organization influence on medical schools is the beliefs of those organizations, and the possibility of those beliefs being associated with DEI. Sailer says that the White Coats 4 Black Lives “calls for prison abolition, defunding the police, and “queer and trans liberation”. These are all quite controversial matters in which agreement from the medical field would heavily influence the modern perception of them. For some this may be perceived as a good thing, however the matters of human morality should not be decided by one group or field. In effect, I believe that, no matter the scenario, the job of the medical system is to sustain and extend human life, not establish what is right and wrong or what people should believe in. Patients are patients, no matter their race, ethnicity, or background. The doctors themselves are individuals; they have the right to believe and support what they want to. However, the medical field is an international matter that must remain above social political matters to maintain a pure pursuit of the peak of health.