

## **Diversity representation in written exam questions: An audit from three countries**

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### **Abstract**

**Background:** The importance of teaching diversity in medical curricula has been well-established (1). However, the role of assessment for teaching and learning about diversity is still very much under-researched. Assessment questions may form part of the hidden curriculum (2) which either strengthens or undermines diversity teaching.

**Summary:** We audited pre-clinical and clinical multiple choice and short answer examination questions from the same year (2018) at three medical school at three western countries. The audit focused on patient portrayals in the examination question stems. We used an expansion of Critical Race Theory (3) in identifying a wide range of diversity characteristics: age, ethnicity, gender, sexual identity, marital status, residency status, geographic residence, socio-economic status, religion/spirituality, and ability. Both explicit and implicit diversity characteristics were included in the audit.

**Results:** We audited 1,537 patient portrayals from 3,566 examination questions. Apart from age (89.4%) and binary genders (93.9%), other diversity characteristics were rarely portrayed (ethnicity 7.2%, relationship status 1.9%, sexual identity 1.1%, socio-economic status 0.5%, geographic residence 0.1%, disability 0.1%), or not at all (non-binary genders; residency status; religion/spirituality).

**Discussion:** The three schools are embedded in highly diverse communities and teach about patients' diversity, yet the vast majority of patients presented in written examination question stems were non-descript beyond their age and binary genders. While presenting excessive and unnecessary patient characteristics in examination questions should be avoided, the absence of many diversity aspects may reduce examination authenticity and undermine the teaching of diversity in the curriculum.

**Conclusion:** There is room for improvement in diversity presentation in written examinations at the three audited schools.

**Implications:** Medical schools should consider a routine audit and potential broadening of the diversity features of patients in examination questions to support teaching about diversity.

### **References (maximum three)**

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