LEARNERS:
Post-graduate year 2-5 residents (MD/DO) in Radiation Oncology when they rotate through the Loughlin Radiation Oncology Center at Grady, usually for up to 10 weeks.

GOAL:
To promote awareness of the racial biases, economic inequality, environmental injustice and social inequities that have divided the city of Atlanta through its history and continue to affect many of its residents to this day. To understand how inferior health outcomes are connected to these disparities. To realize that no plan for growth and development can be successful or sustainable unless it addresses the challenges inherent to its social dimension.

READING:
During their rotation, residents will be assigned required reading that will make them aware of the history of Grady and the history of Atlanta
- ‘The living monument’: the desegregation of Grady Memorial Hospital and the changing South. Lovasik BP, et al., The American Surgeon 86(3): 213-219, 2020

DIDACTIC:
There will be 2 didactic sessions
- 1st session: attending physician-led exploration of historic racial and social issues affecting Grady patients
2nd session: discussion of required reading, Q & A, resident reflections

FIELD TRIP:
Tentative at this time; possibilities include the National Center for Civil and Human Rights, APEX museum, The King Center, the Beltline. Permissions and logistics are being worked out.

ASSIGNMENT:
- Resident will prepare a 15 minute presentation about a patient they saw during their rotation (de-identified in compliance with HIPAA rules)
- Resident will follow a patient who may have had delayed access to care, suboptimal compliance with treatment recommendations, or an unfavorable outcome during/after treatment for cancer
- Focus will be on social and economic challenges faced by the patient that led to their particular situation
- An attempt will be made to tie the resident’s understanding of the history of Grady/Atlanta or other factors, to their patient’s current status
- The role of ancillary services available at Grady such as social work, nurse navigators, nutrition; specialty clinics and programs including smoking cessation, cancer support groups, will be evaluated. Were these helpful in mitigating some or all of the problems faced by the patient? Where were the remaining gaps?
- Resident will come up with a proposed solution to the particular problem identified in their case study. It can be anything from a small step in process improvement in the clinic work-flow, to a change in policy that would require legislation or global social reform. The idea is to stimulate thinking about the roots of health inequities and how they might be addressed to bring about social sustainability

ASSESSMENT:
There will be no formal assessment for this syllabus. Residents are encouraged to engage in this agenda willingly and with enthusiasm during their clinical rotation, which is otherwise focused on the usual material aspects of radiation oncology.