

GENDER INTEGRATION IN THE MEDICAL CURRICULUM

CHECKLIST FOR TEACHERS

The health and gender Unit at Unisanté – mandated by the Faculty of biology and medicine at the University of Lausanne, Switzerland – developed this tool. The checklist is designed to help teachers integrate gender into their teaching and course materials. The Medicine and Gender Commission has validated the tool. The four dimensions addressed below provide a framework that can be used as a reference.

- Significant differences between men and women* in the subject taught are mentioned where they exist (epidemiology, pathophysiology, symptoms, management, prognosis, prevention).**

Pragmatically, it may be useful to ask the question: “In a given situation, would care be different if the patient were a woman or vice versa?”

Example: present the differences in symptoms of acute coronary disease in women and men, since they do exist.

GOAL: educate students about those differences to promote better and more equitable care.

- The clinical vignettes, examples and illustrations feature as many women as men, and are free of sexist connotations.**

Examples:

- avoid presenting clinical vignettes featuring only men in cardiovascular diseases or only women in depression;
- ban the use of images with a sexist connotation.

GOAL: limit the transmission of gender bias and move away from androcentrism (the idea that the male body is the standard body).

- Avoid gender stereotypes.**

Examples:

- avoid presenting women only through their family and social context, and men only through their professional context;
- evoke migraine also in the differential diagnosis of headaches in a clinical vignette presenting a man, to counter the stereotype migraine = “female” disease.

GOAL: limit the transmission of stereotypical representations, as they can lead to poor patient care.

- Use gender-inclusive language whenever possible.**

Example: “the surgeon talks to her or his patients”, instead of “the surgeon talks to his patient”;

GOAL: gender-inclusive language addresses both sexes without perpetuating gender stereotypes (e.g. all surgeons are men and all nurses are women). A leaflet published by the UNIL is available to guide you in its use, which proposes solutions to avoid clumsiness in the text ([In French](#)).

For English, please refer to another document: <https://www.un.org/en/gender-inclusive-anquage/quidelines.shtml>

* This document refers to the binary categories female/male. It's important to be aware of the diversity of sexual categories (intersex) and gender identity (non-binary, transgender). These issues should never be neglected in teaching, for the sake of inclusion and representativeness.

Some reminders

Gender mainstreaming in medical education aims to promote better care for men and women by ensuring equity of care. The aim is to reduce the transmission of two major gender biases that contribute to health inequalities:

- **Gender stereotypes:** treating men and women differently, without any clinical justification.
Example:
 - In the case of pain, prescribe lower doses of analgesics (or even anxiolytics) for women and morphine derivatives for men.
- **Gender blindness:** treating all individuals equally when it would be clinically justified to adapt care according to gender.
Example:
 - The under-diagnosis of depression in men is (partly) due to a lack of awareness of their specific symptoms.
 - A significant proportion of drugs are used regardless of gender, even though they have only been tested on male populations.

Keywords (Adapted from [Canadian Institutes of Health Research](#))

Sex refers to biological characteristics that mainly concern chromosomes, gene expression, hormone levels and function, and the anatomy of the reproductive system. Sex is usually categorized as female or male but there is variation in the biological attributes that comprise sex and how those attributes are expressed.

Gender refers to the socially constructed roles, behaviours, expressions and identities of women, men, and gender diverse people. It influences how people perceive themselves and each other, how they act and interact, and the distribution of power and resources in society. Gender is usually conceptualized as a binary (girl/woman and boy/man), yet there is considerable diversity in how individuals and groups understand, experience, and express it.

These two factors interact and exert a joint influence on health.

Further information

The health and gender Unit is available for any further information.
We can offer support for your teaching.

www.unil.ch/ecoledemedecine/Medecine&Genre

www.unisante.ch/fr/formation-recherche/recherche/groupes-recherche/medecine-genre

www.gems-platform.ch/fr

Contact: medgenre@unisante.ch

