
This article outlines an observational study conducted to assess the impact of medical education on implicit racial bias. The authors highlight that while a considerable amount of research has demonstrated that implicit racial bias has a detrimental influence on clinical decision-making in regards to minoritized groups, there is little examination of the ways that medical school curricula has shaped racial biases. The study observed medical students and measured changes in response to the Black-White implicit bias test between their first and final year of medical school. The study variables included: 1) formal curriculum related to disparities in health care, cultural competency or minority health; 2) informal or hidden curriculum and 3) amount and “favorability” (i.e. positive or negative) interracial contact. The study demonstrated that medical student experiences in these domains were independently associated with change in student’s implicit racial biases, as measured by the Implicit Association Test (IAT). Implementation of formal curricula surrounding care for minority patients was associated with a decrease in racial bias. Negative role modeling from teaching faculty was associated with an increase in racial bias at the completion of medical school. This study emphasize the need for medical schools to focus not only on expanding and improving curriculum, but also to shift the general climate and culture in medical school and on the wards.