

CONTENTS

Welcome	3
Conference Programme	4
Keynote Speakers	5
Poster Presentations	7
Oral Presentations	11
Workshops	18
About Anatome	21

WELCOME

It is my pleasure to welcome you to our inaugural 'Day of Diversity' 2025 conference. This conference has been made possible due to funding received by the University of Nottingham's Cascade Fund and the School of Medicine Student Experience Fund. I wanted to make this event free in order to maxmise the accessibility of attendance to ensure everyone has the opportunity to celebrate the amazing work being done in the world of equality, diversity, and inclusion (EDI) in healthcare, anatomy and the wider educational space.

This conference is framed by the two years of work we have put into our initiative, Anatome Education, to bring you inclusive resources for the education for healthcare professionals. I can't wait to share our story and watch our efforts pay off.

In addition to this, I am thrilled to see our oral and poster presentations from staff and students alike exploring various aspects of collaborative, innovative and inclusive educational approaches. Students in particular are integral to generating change and I look forward to hearing the research they are going to share.

Whilst this conference is a celebration of all the amazing work taking place across institutions and specialties, it also highlights that we are not yet there when it comes to equitable healthcare provision. I hope this day empowers you to take the world by storm and make positive change.

A massive thank you to everyone who has made this day possible, from the Anatome staff and student team to our keynote speakers, presenters, and our delegates campaigning for a more equitable future.

Aisia Lea Founder of Anatome Education



PROGRAMME

Time	Session	Venue
08:45	Registration	Atrium
9:15	Opening address delivered by Dr Deborah Merrick, Head of Anatomy at the University of Nottingham	A03
9:30	Keynote Speaker: Dr Shehla Imtiaz-Umer	
10:15	Anatome Showcase delivered by Aisia Lea	
11:15	Break and refreshments	Atrium
11:30	Keynote Speaker: Dr Scott Abbott Paterson	A03
12:15	Lunch and poster presentations (see page 7)	Atrium
13:15	Oral Presentations (see page 11)	A03
14:30	Workshops in parallel (see page 18)	A03, C11, C12
15:15	Break and refreshments	Atrium
15:30	Anatome Q&A chaired by Siofra Hamill	A03
16:00	Prizegiving and Closing Address delivered by Professor Claire Stewart, Dean and Head of the School of Medicine at the University of Nottingham	
16:30	Drinks Reception	Atrium

KEYNOTE SPEAKERS

Dr Deborah Merrick

Dr Deborah Merrick is an Associate Professor of Anatomy and Head of Anatomy at the University Nottingham. She has an interest in inclusive educational approaches and a commitment to providing highquality and supportive care students, receiving the coveted Lord-Dearing Award multiple times. Deborah also works in the Anatome Team as staff sponsor and advisor.



Professor Claire Stewart

Professor Claire Stewart is the Dean and Head of the School of Medicine at the University of Nottingham and a Professor in Medical Education and Assessment. Claire is a Fellow of the Royal College of General Practitioners, a Senior Fellow of the Higher Education Academy, and a Fellow of the Academy of Medical Educators. As well as her role in Nottingham, Claire holds regional and national positions with the General Medical Council, Medical Schools Council and Health Education England.



KEYNOTE SPEAKERS



Dr Shehla Imtiaz-Umer

Dr Shehla Imtiaz-Umer is a GP Partner in Derby and the Equality, Diversity and Inclusion (EDI) Director for General Practice in Derbyshire. She recognised for her contributions in addressing workplace discrimination and its impact on colleagues and patients. She has worked to support the implementation of effective measures for reducing discrimination and has an interest in understanding workforce inequities are reflected in health inequalities.



Dr Scott Abbott Paterson

Dr Scott Abbott Paterson is currently an Associate Professor and School Education Director at the University of Bristol. Scott has specialist research and teaching interests in the anatomy of sex and gender, developing inclusive teaching practices, and the integration of innovative teaching methods. Scott is the co-founder of the Anatomy Collective for Equality and acting chair the Anatomical Society's committee.

Sleep Quality in Medical Students at the University of Nottingham: Examining the Influence of Work and Study Factors through an Online Survey

<u>Amber Edwards-Harvey</u>, Dr Katy Jones, Professor Martin Orrell University of Nottingham

Medical training is demanding. Good quality sleep maintains cognitive functioning, emotional stability, and promotes well-being. However, medical students experience poor quality sleep and sleep deprivation. This study aims to investigate how work and study-related factors impact sleep quality in medical students.

A cross-sectional quantitative online survey was conducted by medical students at the University of Nottingham from foundation year to year 5. Online and offline recruitment strategies were utilised to gather participants including posters, emails, and digital platforms. The survey included questions covering demographic information, course-specific questions and used the Pittsburgh Sleep Quality Index (PSQI) to gather information on students' sleep quality across the seven sleep components.

Out of 109 medical students, 75.2% (n=82) were classified poor quality sleepers with a mean global PSQI score of 7.7 (SD = 2.8). Significant contributors included subjective sleep quality, latency, disturbances, and daytime dysfunction (mean PSQI > 1). Work-related factors such as hours of paid work suggested students who work \le 5 hours have poorer sleep quality compared to \ge 6 hours per week. Clinical students had a higher mean global PSQI score (8.8 \pm 3.4) compared to pre-clinical (7.5 \pm 2.7).

Most medical students at the University of Nottingham perceived their sleep quality to be good despite being clinically classified as poor by the PSQI. Integrating sleep education into medical education and conducting more research on the impact of work/study-related factors on sleep quality is essential to ensure a healthier future healthcare force.

The Effect of a Peer-Led Interprofessional Masterclass Series on Health and Social Work Students

<u>Florence Onabanjo</u>, Suzy Plows University of Nottingham

Healthcare professionals experience elevated levels of burnout and occupational stress in comparison to professionals in other professions, arguably posing a threat to the healthcare sector. This suggests local and large-scale interventions to tackle the causes and effects of this (Nagle et al., 2024). The Centre for Interprofessional Education and Learning (CIEL) Student Committee based at the University of Nottingham developed a peer-led initiative to help students at the university prepare for the transition to healthcare and social work professionals. Undergraduate students on the committee created and delivered seven professional development masterclasses to support undergraduate and postgraduate healthcare and social work students, which provided peer-led support in transition to professional practice.

The career coaching series will run from February to June 2025. Topics explored include Emotional Intelligence, Confidence building, Navigating the healthcare field as an international student, Finding Purpose in the healthcare field, and Communication. Feedback from the attendees, which consisted of at least 100 healthcare students from different professions, including nursing, medicine, pharmacy, midwifery and public health at the University of Nottingham, provided quantitative and qualitative data on general assessment of the masterclasses. All attendees are invited to participate in a focus group to gather additional qualitative feedback.

Qualitative feedback was collected after workshops, assessing the impact the peer-led workshops have had on the subject areas explored. Overall, they produced a satisfaction rate of 89%, with 100% of attendees stating they have learned something new and will incorporate it into their professional life. Additional data collected from the focus groups will provide details on the extent of the benefit of the masterclasses and areas for further development. This will determine the development of the initiative so that it can progress beyond this academic year and ensure it is an effective and beneficial initiative.

The Experiences of Medical Students and Doctors with Autism: A Scoping Review

Rasha Ramsey Abduljabbar
University of Nottingham

Inclusion of medical students and doctors with autism has been compromised due to societal and institutional stigma, leading to many challenges. Additionally, the lack of consideration of the advantageous characteristics displayed by medical professionals with autism undermines their value to the profession. Although gradual, this issue has progressed with legislation like the Disability Discrimination Act 1995 and Equality Act 2010, as well as increased implementation of reasonable adjustments. This scoping review aims to: 1) Map out existing literature. 2) Summarise common themes. 3) Identify gaps and propose recommendations for support systems.

In November 2024, a comprehensive search was conducted using five databases and predefined inclusion criteria to identify all relevant articles. Two independent reviewers screened the publications. This Scoping review protocol combined multiple frameworks, including PRISMA-ScR, JBI, and Arksey & O'Malley. Further papers were extracted from grey literature.

Twelve papers met the inclusion criteria. Studies incorporated were qualitative, quantitative, mixed methods, letters and conceptual articles. Common themes reported included discrimination and stigma, challenges with mental health and communication, and the need for reasonable adjustments. The sample population consisted of medical students and doctors. Further experimental and outcomes-based research is needed.

Although current evidence provides a promising trajectory in support of medical professionals with autism, this can only be achieved with collaborative efforts, such as: the adaptations of institutions, a shift in traditional mindset, and specific evidence-based interventions. Further research includes analysing experiences across many specialities, assessing institutional support systems, and expanding the scope of the review.

The Experiences of Medical Students and Doctors with Autism: A Scoping Review

<u>Yalna Pouya</u>

University of Nottingham

Many individuals across the world face significant barriers in education, more specifically when aiming to pursue and succeed in higher/adult education, simply due to their diverse backgrounds and experiences. Understanding the specific factors and associated challenges faced by these students is essential to diversifying and altering the education system to include and support a range of students undertaking higher/adult education.

A literature review was conducted of relevant peer-reviewed papers. Analysis was done to identify the several factors affecting the students and the outcome of these on their education. Analysis was also done on the differing ways that the education system is set up to support these students. Using relevant papers, government documents and articles.

Findings show that students from diverse economic, social, ethnic, generational backgrounds are all directly impacted. The level and quality of studies as well as their confidence while learning is affected, well into their adult education. Widening participation and similar initiatives have been formulated to support these students and encourage them to succeed in higher education.

It is necessary that students are best supported throughout the entirety of their education and that the range of diverse experiences are acknowledged and used effectively to best support and accommodate these students to ensure academic success. It's equally necessary that these students are made aware of the different forms of support available to them. By addressing these issues higher education should see an increase student diversity and a far more equipped education system.

The Profound Impact of Peer Mentorship and Leadership on Students Mental Health

Allyson Omoniyi, University of York

Student mental health is a growing concern in higher education. Peer mentorship and strong social relationships are hypothesised to be protective factors against mental health challenges, fostering a sense of belonging and support. This study investigates the impact of peer mentorship and the quality of student relationships on mental health outcomes, including anxiety, depression, and perceived stress.

A cross-sectional survey design was employed, collecting data from undergraduate students. Participants completed validated questionnaires assessing their involvement in peer mentorship programs (as mentees or mentors), the quality of their social relationships (e.g., perceived social support, loneliness), and their mental health status (e.g., DASS-21, PSS). Statistical analyses, including correlation and regression analyses, were conducted to examine the relationships between these variables.

Preliminary findings indicate a significant positive correlation between participation in peer mentorship programs and perceived social support, while a negative correlation was observed between mentorship and perceived stress. Quantitative findings indicated a significant negative correlation between perceived social support and mental health distress, while social isolation and perceived stigma were positively correlated with anxiety, depression, and stress. Qualitative analysis revealed that strong friendships and supportive peer networks were perceived as protective factors, while social isolation and fear of judgment exacerbated mental health challenges. Students who participated in peer intervention programs reported increased awareness of mental health resources and improved coping mechanisms. Furthermore, students reporting higher quality relationships exhibited lower levels of anxiety and depression. Regression analyses revealed that perceived social support significantly predicted lower levels of anxiety and depression, even after controlling for demographic factors.

An Evaluation of Surface Anatomy Teaching in UK Medical Schools

<u>Eldora Sequeira</u>, Dr Skantha Kandiah, Professor Kathleen Kendall, Professor Sally Curtis University of Southampton

Surface anatomy is the study of visible and palpable external features of the body to orientate underlying structures. It allows spatial visualisation of internal anatomy and relates structure to function, linking theory with clinical practice. Therefore, it is highly relevant for medical trainees.

The evolution of the medical curriculum to a systems-based and now problem-based approach has led to the adaptation of (surface) anatomy to maintain medical competency with reduced teaching hours and resources. This has led to many innovative techniques of teaching surface anatomy. Several involve the utility of active participation and living models, making the learning of surface anatomy relatively vulnerable and sensitive by nature. Many studies report positive student feedback and knowledge retention using these techniques. However, there are some reports of discomfort and not enough investigation into accessibility and inclusivity considerations. The relevance and value of the topic warrants further exploration into widening access to its teaching. This can be accomplished by utilising more inclusive teaching methods promoting comfortable learning environments.

The University of Southampton has a relatively poor integration of surface anatomy in the anatomy curriculum, as informed by previous curricular reviews and confirmed by the head of anatomy. This study will investigate surface anatomy teaching methods used at medical schools across the UK. The overall practicality, engagement and measures surrounding accessibility and inclusivity will be investigated. The resulting data will be used to assess best practices of surface anatomy teaching.

The Need for Inclusivity Within The Early Years Teaching in Medical School: An Extended Literature Review

Mamajeremane Pauline Moloi
University of Nottingham

The General Medical Council expects doctors to be able to treat a diverse population, however, health disparities are evident across specialities and often it is patients from specific ethnic backgrounds that bear the brunt of it. This begs the question of whether medical curricula must address how students are taught to care for a diverse patient population.

This literature review aims to explore contributors to health disparities through the lens of medical history, and potential solutions. Race-based medicine, arguably a remnant of slave-era medicine, is scrutinised by many as being a significant cause of health disparities as it bases treatment options on a patient's race. Additionally, examples of infamous medical experiments endured by ethnic minorities, like the Tuskegee Syphilis study, highlight a potential correlation with medical mistrust amongst these communities today. These examples are woven into discussions surrounding ethical frameworks as a means to potentially incorporate them into existing curricula.

Recently, the death of Dr Susan Moore from COVID-19 exemplified implicit biases among healthcare professionals. These biases manifest as stereotypes and unequal treatment, contributing to health disparities. The COVID-19 pandemic also revealed deep-rooted mistrust of vaccines and added to the growing evidence of a lack of participation of ethnic minorities in clinical trials.

This paper proposes an integration of cultural safety training, acknowledgement of implicit biases, and a more representative and holistic approach to the curriculum. The issues of health disparities and mistrust are multilayered in origins and solutions, however, this paper aims to promote further discourse on this subject.

An Investigation into the Perceptions of Online, Face to Face and Blended Learning Amongst Pre-Clinical UK Medical Students on the Delivery of Anatomy Education

<u>Michael Odumala,</u> Dr Paul McKeegan University of Nottingham

Anatomy is known to be an important component of a medical student's occupation regardless of the student's future specialty. As a result of the COVID-19 pandemic educational institutions around the UK have adopted a blended mode of learning using both in-person and online methods of teaching. There is a scarcity of studies within the literature that have explored students' perspectives on anatomy teaching being delivered in person vs online.

47 Students in their pre-clinical years at HYMS completed questionnaires consisting of both quantitative and qualitative questions. Descriptive statistics was carried out on the quantitative data, whilst thematic analysis was carried out on the qualitative data. The quantitative data reported that students found in-person sessions: helped them learn and retain the relevant information; more engaging; prepared them better for examinations and prepared them more for clinical placement. The themes uncovered were (1) Extent of exam preparation (2) Interactive learning (3) Acquisition of knowledge (4) Attention span. These themes discovered that students mainly thought that in-person sessions helped students to stay more engaged and were more interactive than online sessions. However, students highlighted separate ways in which both in-person and online sessions were beneficial for exams, with in-person being better as it approximated a similar environment to the spotter exam, whilst the asynchronous benefits of online learning were useful for revision. Students were also greatly divided as to whether in-person or online sessions covered and helped them retain relevant information.

Students highlighted the effectiveness of the blended learning in anatomy stating benefits of both online and in-person modes of delivery. However, students also brought up valid critiques to both methods such as online anatomy sessions not being engaging and in-person sessions not being covered in enough detail.

"It doesn't sit quite right with me"- Student Reflections on the Lack of Diversity in the Healthcare Curriculum and its Impact on the Awarding Gap

<u>Melanie Narayanasamy</u>, Dianne Bowskill, Alison Mostyn University of Nottingham

University of Nottingham data shows that healthcare students from Black, Asian or Minority Ethnic (BAME) backgrounds have a reduced likelihood of achieving a good degree of a 2:1 or above. This awarding gap increases across years of university study. Suggested contributors include reduced confidence, relatedness, and sense of belonging within this student group. However, research into the awarding gap affecting BAME healthcare students is sparse. It is important, therefore, to examine factors impacting the academic performance of these students to identify effective strategies to reduce the awarding gap.

A qualitative study was conducted inviting underrepresented students to share their perspectives regarding contributors to the awarding gap. Nineteen healthcare students took part in interviews, whilst twelve healthcare students participated in focus groups. Data were digitally recorded and transcribed verbatim, before undergoing thematic analysis.

Healthcare curriculums were perceived to poorly address diversity issues, with lacking skin diversity in images and resources, culturally insensitive language, and putting the onus on students to fill in knowledge gaps. The impacts were twofold: students felt that they were not being adequately prepared to deal with ethnically diverse patients in clinical practice; furthermore, BAME students felt further underrepresented with reduced sense of belonging.

Healthcare curriculums which fail to adequately address diversity issues leads to students feeling ill-equipped for clinical practice and hinders sense of belonging. This impacts their confidence, motivation, self-efficacy and attainment. Developing culturally sensitive curriculums which respect diversity could make an important contribution to reducing the awarding gap affecting BAME students.

Bridging the Gap: Skin For All and Its Impact on Addressing Racial Inequalities in Medical Education

Naabil Khan

University of Exeter

Healthcare disparities in dermatology and broader medical education often stem from insufficient representation of skin conditions on skin of colour, leading to misdiagnosis and delayed treatment. Medical textbooks reveal a significant gap, with only 18% of images representing non-White skin tones. This lack of diversity contributes to inequities in healthcare delivery. Skin For All aims to address this gap by providing a comprehensive online resource that promotes inclusive medical education and enhances patient awareness.

Launched in June 2023, Skin For All is an educational website that covers over 30 prevalent skin conditions using diverse imagery, accessible language, and segmented content designed for patients, clinicians, and medical students. Feedback was gathered through questionnaires from medical students, healthcare professionals, and the general public to assess the platform's impact. The website also includes resources addressing systemic health issues, such as gonorrhoea and liver cirrhosis, relevant to both developed and developing nations.

Since its launch, Skin For All has gained over 10,000 page visits and engaged over 4,000 unique users. Recognised by organisations such as the BBC, British Medical Association, and Exeter Medical School, the platform has demonstrated its potential in improving diagnostic accuracy. Preliminary data shows increased confidence and competence among users, particularly in recognising skin conditions across diverse populations.

Skin For All addresses critical healthcare disparities by providing accessible, inclusive resources that support diversity, equity, and inclusion in medical education. The initiative aligns with the NHS Long Term Plan for equitable healthcare and aims to reduce clinical inequalities. Future efforts will focus on expanding the website's reach, building partnerships, and evaluating long-term impacts on both medical education and patient outcomes.

From Privilege to Possibility: Tackling Inequality in UK Medical Education

Thooba Rayes, Virada Ravindran

University of Leicester

Access to UK medical education remains significantly unequal, disadvantaging students from lower socioeconomic backgrounds. We, at In2MedSchool, help students from disadvantaged backgrounds get into medical school and act as a grassroots initiative addressing this issue. Despite medicine's core values, the path to becoming a doctor disproportionately favours affluent families, with applicants from wealthier postcodes vastly outnumbering those from the poorest. Expensive preparatory resources create substantial financial barriers reinforcing medicine's perception as inaccessible. Addressing these inequalities is crucial for widening access, upholding the NHS principle of "everyone counts," and creating a representative medical workforce.

We presented a free, open-access webinar addressing a critical gap: preparation for ethics and NHS hot topic interview questions, often poorly covered by schools/colleges. 365 aspiring medical students participated.

Using pre- and post-webinar feedback (5-point Likert scale), we found substantial improvement in understanding (68.6% increase, 48% to 82%) and confidence (60.9% increase, 47% to 75%). Critically, participants rated the webinar's impact higher than school/college support (4.28/5), strongly agreeing (4.37/5) on the need for widening participation initiatives.

These results underscore the effectiveness of targeted interventions. The significant improvements highlight the potential of free resources to empower disadvantaged students. Expanding access to such resources, through collaboration between medical schools, policymakers, and outreach organisations, is essential for a truly equitable pathway into medicine. Learning together is paramount for clinical excellence and an inclusive healthcare system.

WORKSHOPS

From Privilege to Possibility: Tackling Inequality in UK Medical Education

Dr Amina Hussain and Dr Omobude Eliojie

Location: A03

International doctors bring invaluable expertise and diversity to the UK healthcare system. However, they often face unique challenges, including navigating cultural differences, language barriers, and complex professional expectations. These challenges can stem from interactions with patients and colleagues, as well as from the structures governing training and healthcare delivery.

In this interactive workshop, we aim to empower medical educators with practical insights and strategies to better support international doctors. Drawing from our experiences and findings from the Inaugral International Graduates Welcome Day hosted by the Sherwood Forest GP Training Scheme, we will explore:

- Challenges faced by international doctors in communication, explored through an interactive language game with the audience as an icebreaker.
- Sharing relevance backed by literature, challenges and success from our case study of Sherwood Forest's IMG welcome day (a trainee/TPD collaboration)
- Audience Q&A

Facilitated by Dr Amina Hussain, Training Programme Director, and Dr Omobude Eliojie, GP registrar, this workshop will combine experiential learning with literature-informed, actionable recommendations for fostering an inclusive and supportive environment for international doctors.

By the end of this workshop, participants will be able to:

- Identify common challenges faced by international doctors within the NHS.
- Recognise the impact of good mentorship and leadership on personal and professional development of international doctors
- Apply practical strategies to create supportive and inclusive learning environments.

WORKSHOPS

Building Trust with Patients Despite a Linguistic Barrier

Oneeba Bhatti

<u>Location:</u> C11

Effective communication is essential in patient-centred care, yet linguistic barriers often lead to misdiagnosis, medical errors, and reduced trust. Healthcare professionals must adopt strategies to overcome these challenges. Solutions include text-based translations, professional interpreters and friends/family, each with advantages and limitations. The General Medical Council (GMC) recommends trained interpreters, clear documentation, and translated materials to improve communication quality.

Participants will develop practical skills to navigate linguistic barriers, enhance patient trust, and ensure accurate diagnosis and treatment. They will learn best practices for using interpreters, non-verbal communication techniques, and strategies for simplifying medical language.

This session features the "Lost in Translation" Challenge, an interactive exercise where participants experience language barriers firsthand. In pairs, one plays a doctor, the other a patient limited to foreign-language phrases or gestures. Doctors must rely on non-verbal cues, visual aids, and simplified language. A debrief evaluates challenges, effective strategies, and the importance of professional interpreters.

This workshop is designed for healthcare professionals, medical students, and educators seeking to improve communication with linguistically diverse patients.

Aligning with the theme of inclusive and patient-centred care, this session highlights the impact of linguistic barriers on healthcare outcomes. By integrating translation best practices, cultural awareness, and communication strategies, participants will be equipped to provide safer, more compassionate care in diverse medical settings.

WORKSHOPS

Title TBC

Olusola Olafuyi

Location: C12

This workshop will be exploring inclusivity in pharmacology.

ABOUT ANATOME

Anatome is an initiative that aims to improve the outcomes of patients from marginalised groups through better representation in anatomical and medical imagery.

Research shows that a lack of adequate representation in teaching resources can lead to the formation of implicit biases amongst healthcare professionals. Implicit biases are subconscious and innate reactions that everybody has based on their lived experience and the information they engage with. Every time we look at someone, we make an initial assessment about them, which is usually negative, due to our personal, unique, implicit biases.

Here at Anatome Education, we cannot erase implicit biases, but we can make the pool of teaching resources that healthcare professionals more diverse, which can help to limit negative stereotypes and provide further education around the history of healthcare disparities.

We value transparency at Anatome, and that's why we are sharing with you our story from the start until now, including our pitfalls and successes. Better healthcare resource provision should be unambiguous and clear. For that reason, we are also honest about the amount of funding we receive and from where.

We are dedicated to improving the face of medical education regarding inclusivity.

Stay up to date with Anatome's work and learn how to get involved!

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