Transcript:

Welcome to our presentation on the work that UCL Medical School have been doing on tackling Misogyny and Gender Based Violence. My name is Rima Chakrabarti and I am currently the Chair of the Gender Equality Taskforce at UCL Medical School. Over the last year, I have been working closely with the Student EDI Committee, including members from the gender equality team- Beth Hayes, William Braithwaite, Moni Sandhu, Natalia Zernicka-Glover and Emer Daly developing various learning events and resources.

We started this work, as research has suggested that most people and in particular, women are affected by gender based violence (GBV) at university. In addition, most also choose not to report this due to the stigmatisation associated with this and the fear of reprisals.

However, we also recognise that as a medical school if our role is to prepare students for being the doctors of tomorrow, then not only do we have to discuss this key issues but also we also need to take it a step further and acknowledge our own behaviours and how they may perpetuate misogynistic cultures. This is important, as a recent survey by the British medical Association has suggested that sexism continues to propagate within the profession.

I will now be handing it over to my student co-presenters, who will provide a brief overview of how we have been using the latest technology to develop our discussion. This includes the Gender Equality Network, using infographics, social media promotions and finally our hybrid panel discussions.

In an era that is becoming increasingly digitised, we decided as an initiative that it would be important to establish an accessible, online, and free platform through which we could communicate our work to anyone following the EDI Gender Equality Network. To achieve this, we opted to create an interface-friendly website that would be linked to all UCL Medical Students through their central ‘Moodle’ online learning platform. This website was created with the intention to serve as a hub for all information relating to the EDI Gender Equality committee’s activity, as well as provide additional, important resources that contribute to the education on issues surrounding gender inequality within the spheres of medicine. As you can see here, the website features handy infographics that form a part of our web-based clinical handbook, shedding insight upon topical medical issues or conditions that may present differently according to your gender. In this case, this particular infographic provides information on neurodivergence and autism.

In tandem with this, the website also houses our lists of recommended reading, and similar or affiliated organisations. These were handpicked by members of the committee and relate directly to the featured infographics, or what is taught as a part of the UCL medical curriculum.

Very importantly, our website also details any future projects, or events we may be holding. Information on those that are run through the Gender Equality network is also featured, and we strive to include relevant contention points, related resources, and video recordings of our in-person discussion groups.

Finally, we have also included both a feedback form, and contact page, which can be used by any students or collaborators to provide input or suggestions on any of the work we have carried out, or on our website content or design. The website is easily located and accessible, and as more content is produced by the team, regularly updated to reflect our most recent work or findings.

Hello, my name is Natalia, and I am one of the Gender Equality Subgroup members of the EDI and their work this year. As Moni mentioned one of our main areas of focus this year has been on the creation of infographics as part of the clinical handbook on The Gender Equality Website. We believe the creation of these graphics to be a critical way to achieve the Network’s goal of *creating* *a community* to discuss issues pertaining to gender bias in healthcare. So far, we have provided infographics on topics such as diagnosing neurodivergence in females and most recently, the mesh controversy. We hope that by supplying these infographics and circulating them amongst students we will equip students to be able to challenge these issues and, also to be more mindful of their own behaviours and practices. Our overall aim is to strengthen future medical practice through highlighting the importance of diversity and flexibility in academic thought.

So here on this slide you can see examples of how we share these infographics on our social media. This example is from Instagram. We have found this to be a really helpful way to further circulate the information and to get students to find our website, and also gauge the levels of interaction and feedback on our graphics.

Hi I’m Beth, I am one of the co-chairs of the student EDI, and one of the co-leads of the Gender Equality subdivision, and today I’m going to talk briefly about how we have used social media to increase the name recognition of the EDI, to promote events we are running, and to raise awareness of projects we are working on. We’re primarily used Instagram for this, and on the screen, you can see two of our Instagram accounts. However, we’ve also relied on whatsapp group chats, the EDI’s own mailing list and pre-existing newsletters from the medical school.

On the screen you can see some images that were created for our Instagram account in order to promote various EDI events that ran this year. Two of these events were part of the Gender Equality network which we began in January of this year, and since then we’ve run four very successful events. Instagram was a really useful platform both for debuting this network, as well as promoting all our events, as it allowed us to rely on larger and more established societies and networks to share our work, and share our posts, in order to increase our audience. This year, the EDI has also worked with RUMS, the medical school’s student’s union, to create the ‘Discussion Group Series’. The aim of these events was to create a space within the medical school for students to share their thought on how different things were run, without committing to the responsibility of being on a committee. Our particular aim was to involve students who feel like they belong in much of the medical school’s society, particularly the party culture of the medical school, and therefore it was really important that we didn’t just rely on traditional word-of-mouth and WhatsApp group messages to promote these events, as we would have missed a really important part of our audience.

One of our goals for the year was to promote and educate about the ‘Raising Concerns Platform’ which exists to allow us to report any incidents or concerns to the medical school’s dedicated team. When we did some initial research for this project it became quickly clear that many people didn’t know that this team existed, and that there were a lot of misconceptions around how they work, so we thought it would be sensible to create a piece of information that would clearly outline how the process worked and who people would be reporting to. We thought Instagram would be a useful place to share this information as we thought it would be accessible, and hopefully not too daunting to anyone reading it. One of these posts involved our Instagram story, where we asked different people to submit any misconceptions, they had surrounding the platform. Based on these then we created a post where we answered these misconceptions and explained why they weren’t correct. We thought this was a really successful project and did a lot to counter some of the stigma surrounding the ‘Raising Concerns’ platform within the medical school.

Hi, my name is Emer and I am one of the members of the EDI gender equality subcommittee. At the beginning of the academic year, we set up the EDI gender equality network for UCL medical students. Using this platform, we held a number of panel discussions on topics that highlight the intersection between gender and medicine to explored both the gender discrimination that patients face when accessing healthcare as well as discrimination that students and doctors often face. Our aim was to create a safe space in which medical students can discuss shared experience and also educate ourselves on the experiences of others in the hope that we can apply this new found understanding to the way we learn and practise medicine.

We held themed talks that were available to watch on campus in person or live stream on zoom. We adopted a Q&A format where a student moderator directs questions to a panel of several specialist speakers, ensuring a range of backgrounds and insights.

After this initial panel discussion, we allow those watching at home and in person to submit questions anonymously through a google form as we wanted an interactive open discussion.

Talks included topics such as decolonising contraception, abortion access, discussing medicine, maternity and parenthood and improving healthcare for transgender and non-binary patients.

This year we also made a change to the UCL portfolio website that allows students to easily edit change their titles on UCL’s system to accurately reflect their gender and preferences without undergoing what was previously a more lengthy admin process. This included the addition of a non-binary title (Mx) and allowed students to change their title from Miss or Mrs to Ms so their marital status was not disclosed.

We appreciate that we are presenting the specific response of UCL have been leading on tackling Misogyny and GBV over the last year. However, these issues continue to be core societal issues and by showcasing our work as a ‘work in progress’, our objective is to highlight the need for this response to remain dynamic and to evolve and adapt to societal and cultural shifts. Therefore, exploring potential avenues are crucial with the key question being for all of us… How do we continue to engage students and staff on tackling Misogyny and Gender Based Violence at an institutional level?