SOCIAL ACCOUNTABILITY AND COMMUNITY ENGAGEMENT

Social Accountability Priority of the College of Medicine

Address the priority health concerns of the communities the college is mandated to serve, incorporating authentic community engagement and mutually beneficial partnerships. Focus on equity and community engagement by interweaving social accountability throughout the college's operations.

Social Accountability is an umbrella term that encompasses many topics/ barriers affecting health equity such as:

Health (in)equity / health (in)equality / health disparities

Vulnerable/oppressed/underserved/marginalized/ low-resource communities

Power & privilege/health justice, social justice

Bias, stereotypes & stigma

Discrimination & prejudice – racism, sexism, homophobia, misogyny, etc.

Global health/ Environmental health

Rural & remote health/ Inner city health

Accessibility of care

Mental health, addictions & suicide risk

Diversity / LGBTQ2 health

Poverty / SES gradient / economic inequity

Multiple ways of knowing/diverse knowledge systems

Indigenous health/wellness/healing, settler colonialism, decolonization, Indigenous rights

Immigrant & refugee health

Food security/ Safe & affordable housing

Community engagement, community-based participatory research

Race & ethnicity

Culturally safe & appropriate care, respect, humility, empathy

Health advocacy, ally(ship)

Trauma – historical, intergenerational, gender-based violence

Health promotion, disease prevention, population health

Social determinants of health (SDoH)



YEAR ONE	Social Accountability Content
MEDC 111: Success in Medical School	Identifying vulnerable individuals and populations; community advocacy; cultural competency/safety; LGBTQ2S; Indigenous health and healing; social accountability
MEDC 112: Medicine & Society I	Health equity/inequality social; social determinants of health; barriers in accessing care; policy interventions; community engagement; Indigenous health inequalities; cultural safety and cultural responsiveness; immigrant health; mental health and stigma, addictions; bias and stigma reduction; LGBTQ2S history and stigma; community-based learning experiences
MEDC 122: Medicine & Society	Indigenous health inequalities; social determinants of health; health inequalities and impact of poverty; immigrant health; global health; health care access and delivery disparities; community-based learning experiences;
MEDC 123: Clinical Skills II	Incorporating cultural safety into patient interviews; identifying vulnerable individuals and populations; identify opportunities for patient or community advocacy
MEDC 124: Clinical Integration II	Indigenous health; LGBTQ2S health
YEAR TWO	
MEDC 212: Medicine & Society	Early childhood development (as it relates to SDoH); community-based experience; environmental health and climate change; global health; cultural competency/safety; societal problems; gender and sexual orientation; social accountability; advocacy
MEDC 213: Clinical Skills III	Identify vulnerable individuals and populations; Demonstrating cultural safety skills; access to care and delivery disparities
MEDC 222: Medicine & Society IV	Global health; community experience in a community-based organization that focuses on SDoH; the roles physicians can play in working with community agencies and workplaces to enhance health and well-being; Indigenous health and healing; global health; immigrant health, health care access and delivery disparities; societal problems
MEDC 223: Clinical Skills IV	Gender identity and sexual orientation; culturally safe communication; low health literacy; communication through language barriers; reducing stigma in mental health
MEDC 226: Foundations in Clinical Medicine III	Intimate partner abuse; identifying vulnerable individuals and populations; societal problems, mental health
YEAR THREE	
MEDC 306: Sask Longitudinal Integrated Clerkship	Community project: identify any existing health disparities and social determinants of health that are present in the community; identifying potential community-based intervention to address existing health disparities/social determinants of health in the community.

MEDC 307: Core Clinical Rotations	Demonstrate culturally safe and respectful care including First Nations, Inuit, and Metis; social determinants of health; identify vulnerable individuals and populations; Indigenous health and healing; immigrant health; social accountability; mental health; health care access and delivery disparities; sexual orientation
MEDC 308: Selected Topics in	Care and advocacy of vulnerable individuals and populations; immigrant and refugee Health; Indigenous health
Medicine	
YEAR FOUR	
MEDC 409: Preparation for	Cultural Safety and Indigenous Wellness Course
Residency	

Making the Links: Certificate in Global Health (optional 1 st and 2 nd year extracurricular program)		
CHEP 403	Societal problems; decolonization; Indigenous and global health ethics; global health equity; social movements	
CHEP 402	Cultural health beliefs; Intersectionality of oppression; colonization and health affects; global health and health	
	equity; social determinants of health; determinants of Metis, First Nations, Inuit health;	
CHEP 411 & 415: summer	20-30 hour Practical application of health equity and advocacy in a marginalized/under-resourced community	
practicum		