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Institute of Teaching and Learning

**DR CHRISTOPHER
SUTTON
LEARNING FOR
EVERY BODY:
INCLUSION AND
REPRESENTATION
IN HEALTHCARE
TEACHING
RESOURCES**

**ITL FELLOWSHIP 2022-24
PROJECT
REPORT**

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ITL Fellow 2022-24

DR CHRISTOPHER SUTTON



Chris (he/him) is a learning technologist for the Faculty of Biology, Medicine and Health and a Senior Fellow of Advance HE. He has a PhD in History and has published and taught extensively on imperialism, politics and culture, before joining the University of Manchester in 2021. As a researcher, teacher and now learning technologist, he strives to be an accomplice in challenging systems of inequity and discrimination, particularly in education.

Fellowship Student Partner Interns

SIDDHAANT CHOPRA
KARINA FU

LEARNING FOR EVERY BODY: INCLUSION AND REPRESENTATION IN HEALTHCARE TEACHING RESOURCES

Context of the Fellowship project

For much of healthcare education, the 'normal body' as presented in visual teaching resources is White, slim, young, non-disabled, cis-gender and male ([Daodu and Ruzycki, 2023](#)).

In addition to being ‘inadequate and unrealistic’ ([Parker, Larkin and Cockburn, 2017](#)), this ‘normal body’ is a factor in the disparities, biases and barriers faced by many equity-deserving groups regarding student attainment, career progression and patient outcomes (for example, see: [Woolf, 2020](#); [Hotine, 2021](#); [Marmot et al., 2020](#)). When more inclusive resources do exist, there are often challenges regarding authenticity, intersectionality, quality, accessibility, copyright and cost.

Objectives of the Fellowship project

The principal research question was: **What are good practices for the creation and use of more inclusive visual teaching resources?** The project’s objectives were:

- To pilot various processes for commissioning more inclusive illustrations.
- To identify good practices that prioritise social justice and equity throughout the processes.
- To disseminate the illustrations and good practices.

Activities

Stage 1: Research

The nature and consequences of underrepresentation are well-established in academic literature. Because this research is often siloed, focusing on one or two characteristics, it was important to understand not only the scale of the problem but also the similarities and differences faced by people with underrepresented (and intersectional) characteristics and identities. It was also important to find, learn from and amplify existing organisations, projects and individuals already working towards solutions, such as Mukwende, Tamony and Turner’s ‘[Mind the Gap](#)’ handbook on clinical signs in Black and Brown skin and Harvard Medical School’s 2020 project, ‘[Addressing Bias in Medical Education through Inclusive Anatomical Representation](#)’.

Stage 2: Plan

Thanks in part to the ability of the ITL team (especially **Holly Dewsnap**, my first-rate champion and handler) to make connections, I met with a myriad of fantastic people – stakeholders, critical friends and eventual collaborators at the University of Manchester and around the world – to listen, learn and overall hone the project. Ethics and the EDI Directorate's Equality Impact Assessment were incredibly helpful in ensuring my processes were investigated from many angles. **Siddhaant** (student partner intern) helped organise this process, while providing an invaluable student perspective.

Stage 3: Pilot

I recruited two medical illustrators:

- **Ni-ka Ford**, US board-certified medical illustrator and founder of [Enlight Visuals](#).
- **Lois Jane**, MBChB, artist [\[loisjaneart.com\]](#) and former anatomy demonstrator at the University of Manchester.

I also recruited two models:

- **Asiyah Patterson**, professional model, formally represented by the world inclusive [Zebedee Talent Agency](#).
- **Dawn Clark**, first-time model and board member of the US [National Association to Advance Fat Acceptance](#).

Together, we critically examined existing norms and created processes that were as fair, transparent and equitable as possible, from pay to licensing terms, before creating the [set of illustrations \[manchester.ac.uk\]](#).

Stage 4: Evaluate

Using a combination of surveys, interviews and focus groups, **Karina** (student partner intern) and I evaluated the project with participating models and artists as well as students and staff in healthcare-related programmes at the University of Manchester.

Stage 5: Publish. The final stage is ongoing

The project has been shared at several conferences, the highlight being our team presentation at the phenomenal 10th annual Weight Stigma Conference at the University of Essex. Publications on good practices are in process.

Challenges faced

We faced several standard challenges for such a project, namely budget and time. The relatively small budget, however, turned out to be advantageous. My original vision was to create a large library of resources, but cost-cutting eventually forced me to rethink my approach, shifting from the quantity of outputs to the quality of the process. This was an important breakthrough.

Another challenge-turned-advantage was that I have zero medical, anatomical or artistic training. While perhaps raising a few eyebrows, this allowed me to approach processes without the constraints of 'the way things are normally done'. For example, I worked closely with the artists and models to create an Educational Use license that balanced the restrictions needed to protect their financial and reputational needs (which something like Creative Commons could not) with the user permissions required for the illustrations to be useful in teaching and learning (which traditional licenses generally curtailed).

Student Partnership

Siddhaant Chopra was the student partner for the first year of the project, which consisted of research and planning. Siddhaant was crucial in preparing the various processes and documents for Ethical approval and the Equality Impact Assessment.

He provided a much-needed undergraduate student's perspective and helped identify opportunities for improvement. Siddhaant also helped draft the recruitment and communications plan.

Karina Fu was the student partner for year two of the project. She reflected:

"I participated in the initial literature research phase. My responsibilities included researching, reviewing, and organising relevant literature into specific categories. One of my clinical assignments involved creating a literature review for my own research proposal, which provided me with a solid foundation. This prior experience allowed me to efficiently research, review, and categorise relevant literature for the project, ensuring a comprehensive and well-organised collection of information. My familiarity with the process helped me streamline the workflow and complete tasks in a timely manner.

I also played a significant role in preparing questionnaires. I enjoyed formatting the questionnaires to make them accessible and engaging, focusing on the user experience. Setting up the question logistics and workflow was particularly satisfying, as it involved problem-solving and ensuring the system operated smoothly. Troubleshooting and refining the process to eliminate any issues provided a sense of accomplishment and was an important contribution to the project's success. Learning from my staff partner's feedback, attention to detail and a focus on user experience helped me make the questionnaires accessible and effective.

Overall, despite the varied tasks, my approach is similar: I made sure to communicate clearly with both project leads what their expectations and goals were, to ensure I can accurately and effectively complete my tasks at hand, maximising work efficiency."

This project and I benefited greatly from their insights and efforts. Thank you.

Collaborative work

In addition to the core project team consisting of the extraordinary **Holly Dewsnap** and wider **ITL team**, very clever Student Partner Interns (**Siddhaant** and **Karina**), gifted artists (**Ni-ka** and **Lois**) and inspiring models (**Dawn** and **Asiyah**, including her former team at **Zebedee**), this project as well as my personal and professional development have benefitted from the experiences, expertise and support of so many people, whom I would like to acknowledge and thank.

Preparing my fellowship application, I sent unsolicited emails to several people, all of whom responded with enthusiasm and support. **Rebecca Farrington** provided detailed feedback on my application from an EDI perspective – and then continuously included me in all sorts of exciting EDI projects and teams. **Samantha Rogers** was generous with her time and insights. **Louise Smith** confirmed the project's potential value regarding clinical and examination skills – and has then provided constant enthusiasm. **Adam Danquah** opened a lot of doors and has supported the project as a critical friend.

The first person to engage with my proposal was, in fact, **Martha Katz**, the faculty lead for the Harvard Medical School project, 'Addressing Bias in Medical Education through Inclusive Anatomical Representation', who generously shared her team's experiences and encouraged me to pursue the project. Her advice on six visible characteristics and visual cues has remained central to this project.

By the time the fellowship was confirmed, I was overwhelmed by this generosity and figured that I had surely reached peak enthusiasm. And then I attended my kick-starter meeting with **Judy Williams**, **Emma Sanders** and **Holly Dewsnap**! From there, the network expanded considerably.

I subsequently benefited from the support of **Natalie Gardner** for further connections and sharing opportunities, **Jennie Blake** regarding the scholarship of teaching and learning, **Lucie Byrne-Davis** regarding primary research practices and **Rachel Cowen** for insights in researcher development and good practices for inclusivity.

Tahira Majothi and **Kathy Bradley** of the EDI Directorate asked great questions and helped make this project as inclusive and accessible as possible. In addition to expertise on the hidden curriculum, **Gabrielle Finn** pointed me towards the [Black in Anatomy](#) group, where I met **Ni-ka Ford**. I met **Lois Jane**, my other artist, through **Niggy Gouldsborough** who, along with **Bip Choudhury** and **Huda Al-Nhas**, have provided considerable anatomical expertise.

Finally, beyond the university, **Tigress Osborn**, Executive Director of the US [National Association to Advance Fat Acceptance](#), took a chance on this project. Tigress has been particularly generous with her time and support as well as connecting me with the incredible **Dawn Clark**.

To everyone above and the countless others I have had the privilege to meet because of this project, thank you.

Impact

At the time of writing this report, measuring impact has been limited as the project has only recently concluded. Small student focus groups and limited staff survey responses have noted the uniqueness in our approaches and outputs as well as the positive impact for those self-selecting participants to see themselves represented in visual resources.