Uncomposed, edited manuscript published online ahead of print.

This published ahead-of-print manuscript is not the final version of this article, but it may be cited and shared publicly.

**Author:** Onuoha Chioma; Fields Naomi F.; Khazanchi Rohan MPH

**Title:** Democratizing the Praxis of Antiracism: The Clinical Problem Solvers Podcast Antiracism in Medicine Series

**DOI:** 10.1097/ACM.00000000000004422
Democratizing the Praxis of Antiracism: The Clinical Problem Solvers Podcast Antiracism in Medicine Series

Chioma Onuoha
Research assistant, Johns Hopkins Center for Health Equity, Baltimore, Maryland, and medical student, School of Medicine, University of California, San Francisco, San Francisco, California; ORCID: https://orcid.org/0000-0002-9939-4796.

Naomi F. Fields
Medical student, Perelman School of Medicine at the University of Pennsylvania, Philadelphia, Pennsylvania; ORCID: https://orcid.org/0000-0002-1339-4008.

Rohan Khazanchi, MPH
MD/MPH student, College of Medicine, University of Nebraska Medical Center, Omaha, Nebraska, and School of Public Health, University of Minnesota, Minneapolis, Minnesota; email: r.khazanchi@unmc.edu; Twitter: @rohankhaz; ORCID: https://orcid.org/0000-0003-2230-0517.

First published online

Acknowledgements: The authors acknowledge the other members of the Clinical Problem Solvers Podcast Antiracism in Medicine (ARM) series team: Dr. Utibe Essien, Dr. Dereck Paul, Dr. S. Michelle Ogunwole, LaShyra Nolen, Jazzmin Williams, and Dr. Jennifer Tsai. The authors also thank the ARM series guests: Dr. Rachel Hardeman, Dr. Rhea Boyd, Professor Edwin Lindo, Ed Yong, Dr. Nwamaka Eneanya, Dr. Aletha Maybank, Dr. Camara Jones, Dr. Giselle Corbie-Smith, Dr. Kimberly Manning, Dr. Michelle Morse, Dr. Paul Farmer, Professor
Dorothy Roberts, Dr. Oni Blackstock, Dr. Uché Blackstock, and the guests of upcoming episodes. Lastly, the authors offer their heartfelt gratitude to the supporters of the ARM series.

*Funding/Support:* None reported.

*Other disclosures:* Rohan Khazanchi is a member of the American Medical Association (AMA) Council on Medical Education. The views presented herein are the authors’ and not necessarily those of the AMA or the Council on Medical Education.

*Ethical approval:* Reported as not applicable.
To the editor: The health inequities amplified by COVID-19 and the brutal murders of George Floyd and countless other unarmed Black people have elevated consciousness amongst health care professionals around the intimate connection between racism and health. As physicians-in-training who consider the mission of redressing inequity inextricable from our professional identities, we recognized a widespread need for the dissemination of expert education on antiracism in medicine. Spurred by this call to action, the Clinical Problem Solvers Podcast Antiracism in Medicine (ARM) series (https://clinicalproblemsolving.com/antiracism-in-medicine/) was born in June 2020.

The ARM series aims to equip listeners, at all training levels, with the consciousness and tools to practice antiracism in their clinical careers. We envisioned the series as a vehicle for the advancement of antiracist praxis (i.e., theory-driven action) across the medical community. We accomplish this goal by exploring issues at the intersections of race, racism, and health, ranging from police brutality to race-based medicine to equitable vaccine distribution and beyond.

The team behind the creation, research, production, and dissemination of the ARM series is almost entirely composed of trainees. We select topics and plan conversations by balancing rigorous evaluation of the scientific literature with intentional reflexivity to discuss points of tension. Then, in each episode, we engage experts in nuanced dialogue about historical and current events, inequitable clinical practices, and opportunities for improvement within medical practice and research.

Even as a nascent resource, our series has been used in undergraduate humanities courses, integrated into medical school and residency curricula, and cited in leading medical journals.1,2 Our guests have taught us to redress oppressive systems by creating sanctuary for patients1; to replace imprecise race-as-biology paradigms with unequivocal understanding that race is a social
construct and racism is the primary driver of health inequities\(^3\); and to recognize that, as Dr. Camara Jones says, “racism saps the strength of the whole society.”\(^4\) And, most meaningfully for us, building the ARM series has illuminated our shared capacity to catalyze positive change by cultivating spaces for community with colleagues across the country.

With optimism for a brighter future, our ARM series will continue to democratize antiracist praxis for all health care professionals and reimagine more just systems of care.

**References**


