



# Canadian Foundation for Dietetic Research

# Anti-racism training using simulated actors in healthcare education: A scoping review



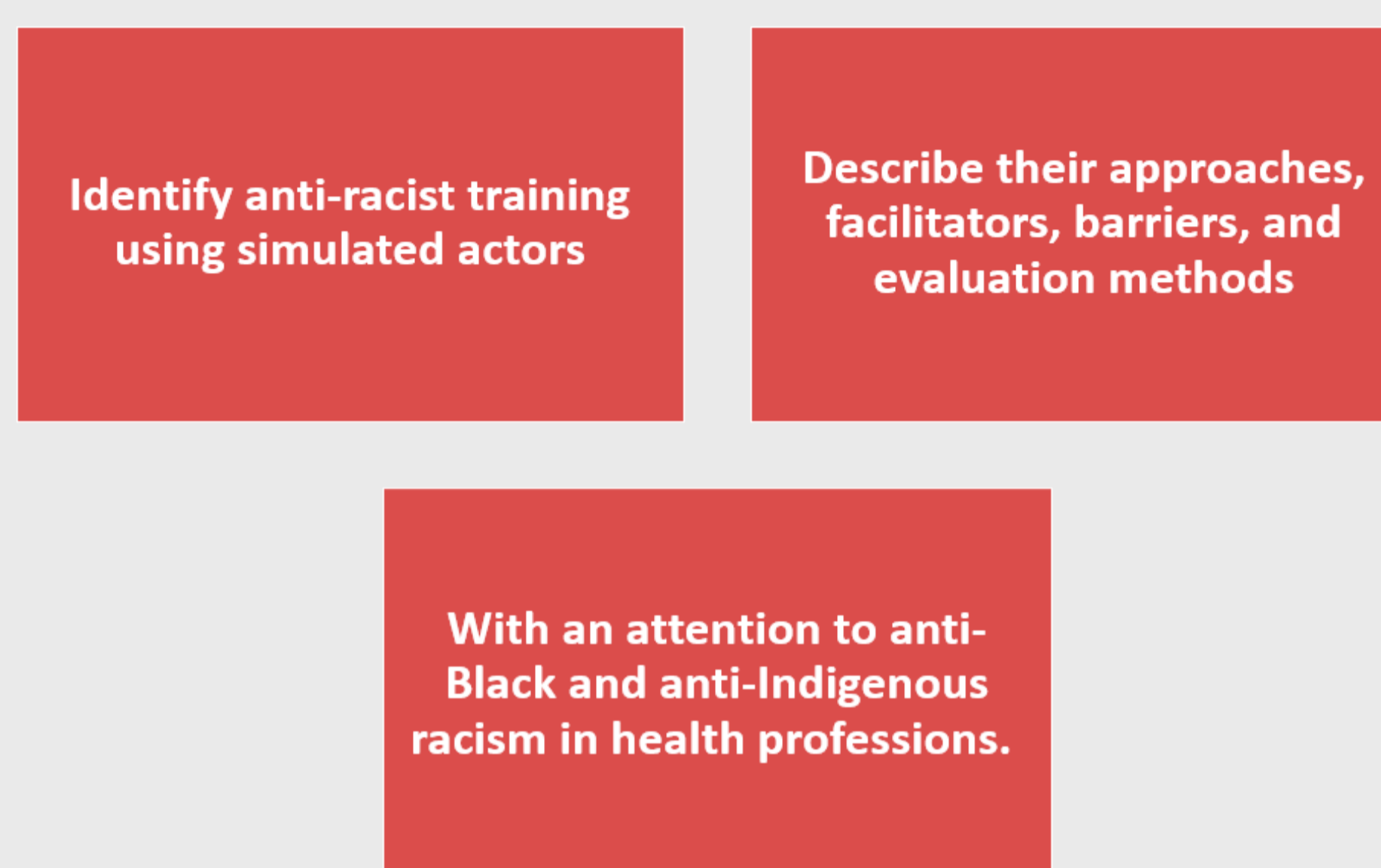
## INTRODUCTION

Racial health inequities produce significant disparities in diagnosis, treatment, and health outcomes, highlighting the need to develop **anti-racist competencies in health professions** (1). While health professions education increasingly recognizes this need, training often remains focused on **cultural awareness** rather than **addressing racism as a structural determinant of health** (2).

**Simulation-based education**, by immersing learners in **situated and relational encounters**, provides **experiential learning environments** where students can practice responding to racism in realistic clinical situations (3). Despite growing initiatives, the design, characteristics, and reported effects of simulation-based anti-racism training remain unclear.

## OBJECTIVES

To conduct a scoping review to:



## METHOD

Following the JBI framework (4) and PRISM-ScR guidelines (5):

Databases used for data collection : **Embase, Medline, CINAHL, psychINFO**

Search strategy included core concepts: **racism, simulation, health students (no time restrictions)**

**Inclusion criteria:** undergraduate student in health sciences, anti-racism training, using simulation

Study **selection and data extraction in duplicate** (Covidence).

Diverse experiential team perspectives informed the interpretation of the results.

Full text review and **data extraction:** The Guidelines for Reporting Evidence-

based practice Educational interventions and Teaching (**GREET**) (6).



GREET	Why → Theory
Who → Learners & instructors	
What → Intervention content	
How → Delivery methods	
Where → Learning environment	
When → Schedule & duration	
Evaluation → Outcomes & Fidelity	

## RESULTS

Studies ( $n = 30$ ) were published between 2014 and 2024 and primarily conducted in the USA and Canada, with a few from Brazil and the UK.

Studies were mainly from the fields of **medicine and nursing**. **Nutrition/dietetics was absent** from all included studies. **Anti-Black racism** was the most frequently addressed. Few studies examined **anti-Indigenous** and/or **anti-Asian racism**.

**Simulation activities** commonly combined:

- Didactic preparation
- Role-play or simulated encounters
- Structured debriefing sessions

**Training Addressed**

- Implicit bias
- Microaggressions
- Racial health inequities
- Patient-provider interactions

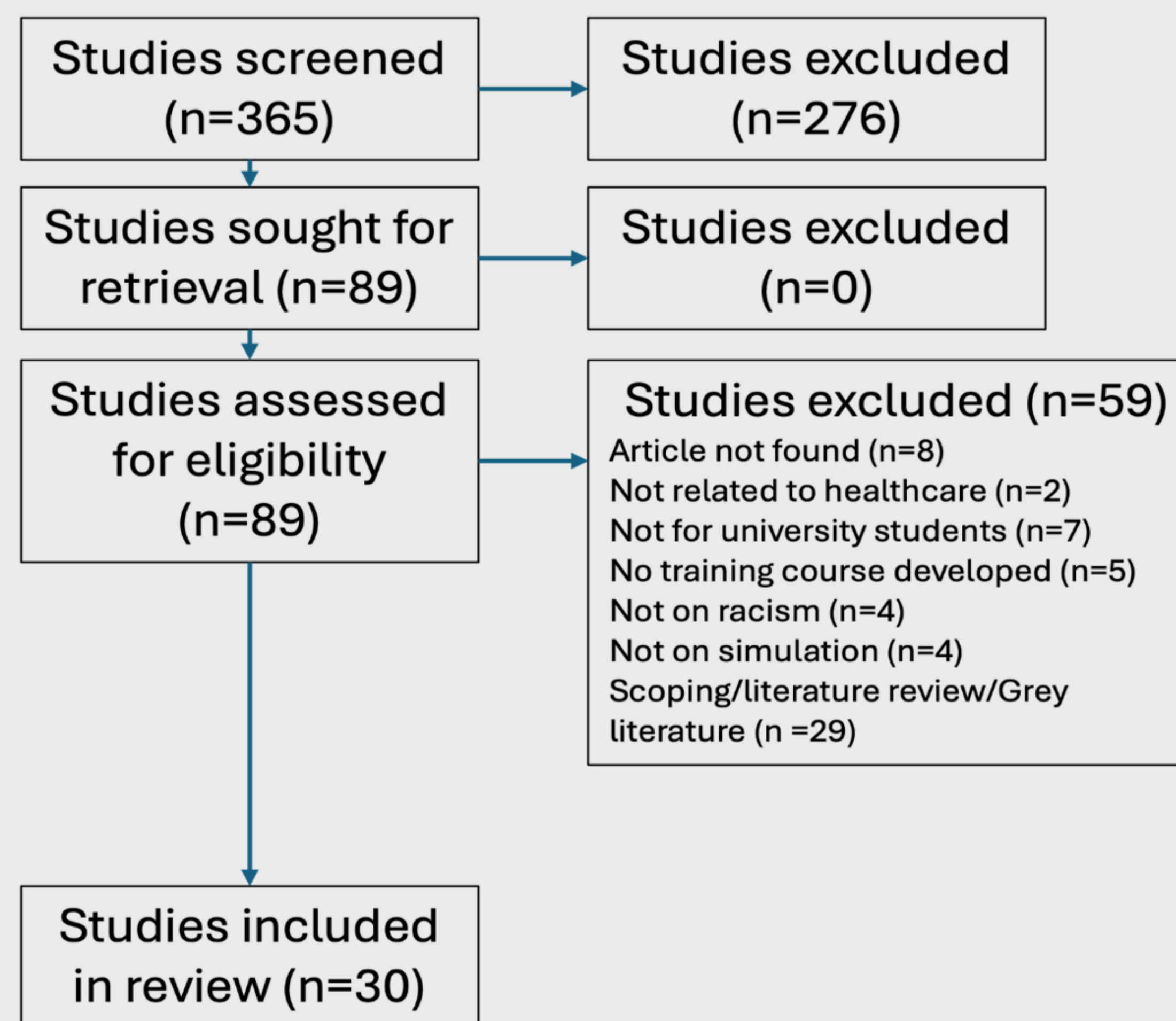
**Educational strategies** ranged from :

- Briefing/debriefing
- Simulated patients
- Roleplay
- Virtual simulation
- Didactic videogames

**Reported Outcomes**

- Increased empathy toward racialized patients
- Greater confidence addressing racism
- Improved communication skills

### PRISMA FLOWCHART



### FACILITATORS

- Creation of psychologically safe or "brave" spaces
- Preparation materials reducing fear of mistakes
- Training of simulated actors
- Collaboration with content experts

### BARRIERS

- Resource limitations
- Emotional discomfort among participants
- Fear of expressing racist remarks
- Challenges maintaining safe discussion environments

## CONCLUSION

Simulation-based anti-racism training is a **promising experiential approach** for developing anti-racist competencies in health professions education. By supporting **reflection, active allyship, and responses to bias**, simulation can **improve empathy, confidence addressing racism, and communication skills in clinical interactions**. While medicine and nursing are well represented in the literature, the **absence of dietetics** highlights a critical gap and an important opportunity for curriculum innovation.

### Implications & future directions

- 1 For dietetics, simulation-based anti-racism training may help:
  - strengthen culturally safe counselling
  - improve responses to bias in patient encounters
  - support equity-oriented professional practice
- 2 Future work should focus on developing theory-informed and contextually grounded training, including initiatives addressing anti-Black and anti-Indigenous racism, and evaluating their long-term impact on professional practice and learning environments.

## ACKNOWLEDGEMENTS

This project was supported by a **SSHRC exploration grant** from the Faculté de médecine, Université de Montréal, and by the **FRQ-SC Équipe Futur funding program**.

The authors thank the **Université de Montréal library services** for their support in developing the search strategy, as well as all **members of the research team** whose diverse experiential perspectives informed the interpretation of the findings.

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- 6 - Phillips A, Lewis L, McEvoy M, Galpeau J, Glasziou P, Moher D, et al. Development and validation of the guideline for reporting evidence-based practice educational interventions and teaching (GREET). *BMC Medical Education*. 2016; 16:237.

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# OBJECTIVES

**To conduct a scoping review to:**

**Identify anti-racist training  
using simulated actors**

**Describe their approaches,  
facilitators, barriers, and  
evaluation methods**

**With an attention to anti-  
Black and anti-Indigenous  
racism in health professions.**

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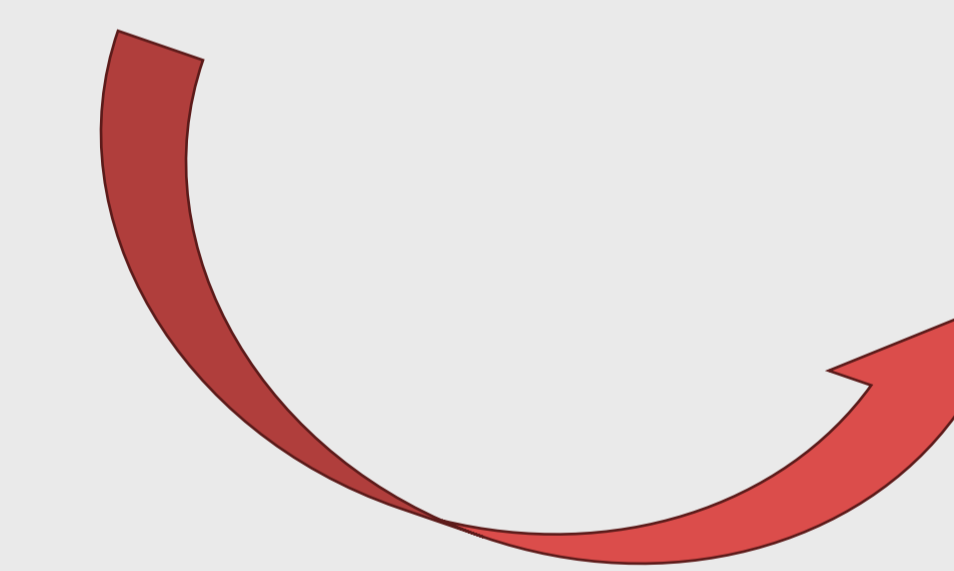
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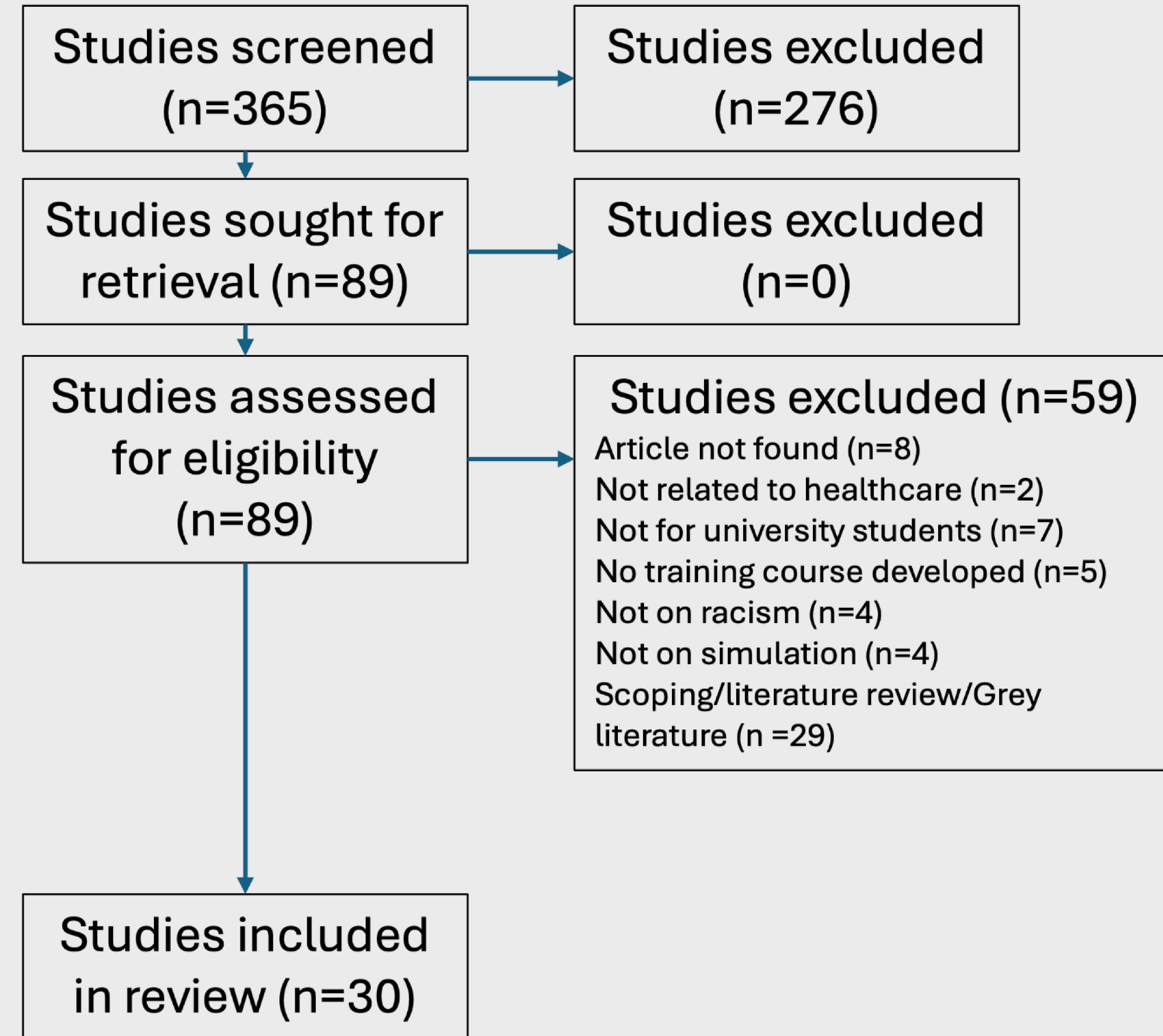
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