To the Editor,

We thank the authors for completing the work entitled, “Addressing Disparities in Medicine Through Medical Curriculum Change: A Student Perspective,” which published in the July 2022 issue of *Journal of Osteopathic Medicine* [1]. Addressing cultural awareness and health equity in curriculum is long overdue, and we were excited by the authors’ process of developing a more inclusive curriculum.

We were pleased to see that the authors of this commentary developed a tool that can be easily executed by other programs. Not only does this tool make introducing diversity and health equity into curriculum more feasible, but also it ensures a more uniform approach to teaching cultural awareness across various schools.

The authors mentioned, however, that a limitation of their study was that in their curricular changes, they lacked focus on racial minorities and the overlap between their identities called intersectionality. Intersections of race/ethnicity with biological sex, gender, or LGBTQ+ status can significantly impact one’s health due to the stressors associated with each additional intersection. It is impossible to address the issues affecting these groups without teaching about those who are experiencing them. The tools developed in this commentary can be expanded to include intersec-tional topics, e.g., health inequities in the Hispanic Transgender community. This is in harmony with the osteopathic principle that the person is a unit of mind, body and spirit, and therefore a necessity in osteopathic education at the national level.

Teaching intersectionality, however, must be integrated in a board-centric way, because medical students often struggle to balance the workload in medical school, and the pressure to do well on the boards [2]. This leaves less time for topics that are not board-relevant, such as intersectionality in medicine. Competency 1.3 of both Comprehensive Osteopathic Medical Licensing Examination (COMLEX) exams [3] requires osteopathic physicians to respect various minority groups. Examination questions should specifically address intersectionality and its effect on health without focus on additional competencies. National organizations can review admission and licensing exams (Medical College Admission Test [MCAT], United States Medical Licensing Examination [USMLE], COMLEX, etc.) to ensure that questions on intersectionality are included. If deficiencies are identified, then examinations can be updated to include more questions focused on intersectionality. Although not all aspects of the study tool are applicable at the national level, the authors provide a foundation on which an approach can be developed. By increasing the number of questions specifically focused on intersectionality on the board examinations, programs across the nation will be highly motivated to include intersectionality in their curriculum so that their students are adequately prepared to perform well on them.

**Research funding:** None reported.

**Author contributions:** All authors provided substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; all authors drafted the article or revised it critically for important intellectual content; all authors gave final approval of the version of the article to be published; and all authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

**Competing interests:** None reported.

**References**

