

AWARDEE REPORT FORM

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UNIVERSITY	University of Liverpool
NAME OF AWARD	Barclay Smith Travel Fund
PURPOSE OF AWARD <i>conference/event attended/organised (full name) with city and dates.</i>	
Anatomical Society re-scheduled winter meeting Dates: 17 th -19 th April 2023 Location: University of Nottingham, Nottingham, UK	
REPORT: What were your anticipated benefits?	
My primary aim was to present intersex, transgender and non-binary bodies that are outside the “norms” usually depicted in anatomy textbooks and other teaching resources. I wanted to discuss possible misconceptions related to bodies and gender identity and ways to diversify anatomy curricula. “Queer body” invisibility impacts students and leads to discrimination in healthcare settings. The main anticipated benefit was that these bodies will start to be introduced to students naturally and not only to teach anatomy that is relevant to being intersex or to gender affirming surgeries. The ultimate aim of my work is to make anatomy education more inclusive and to destigmatise and de-pathologize LGBTQIA+ identities and healthy anatomical variation. I hoped to meet people that are working on projects that aim to increase Equality, Diversity, and Inclusivity in anatomy education and discuss possible collaborations. I also hoped to meet staff and students from different institutions that identify as LGBTQIA+ and get their feedback and thoughts on my poster.	
COMMENTS: Describe your experience at the conference / lab visit / course / seminar/ event.	
I'd signed up for a pre-conference workshop so spent the first morning felting to make a vertebra and met some lovely people. It was great fun! I have attended many conferences in the past but never focused on networking. The Anatomical Society meeting in Nottingham was the friendliest conference I have ever attended and that gave me the opportunity to interact with so many amazing people and discuss ideas that can lead to positive change. My poster attracted a lot of interest and I got very encouraging feedback. Medical students and anatomy educators came up to me to say how much they loved the work and how important they think it is. It was amazing to meet other inclusive educators that are going to use our illustrations in lectures and worksheets. Dr Jo Tomlinson tweeted my poster that got over 5,700 views! It was also great to meet Dr Siobhan Moyes who is leading fantastic research that aims to identify what inclusivity means to staff and students worldwide and to understand how we can increase visibility of underrepresented groups in anatomy curricula. I am originally from Greece, so I offered to translate Dr Siobhan's survey as I want to make it accessible to more students in my home country. I also learnt a lot about how to create a sense of belonging for students and how important it is to understand intersectionality and increase cultural competence as an anatomy educator.	

REPORT: In relation to skills, what were the most important things you gained? *(does not apply to equipment grant.* For public engagement/outreach awards what did your audience gain and how did you evaluate success?

It is the first time I presented work that has the potential to make a difference, and this made me feel proud of my poster. So, I made sure to talk to as many people as possible to increase its impact. I developed my skills in co-creating with people, putting my ideas and aims across clearly and passionately to people that can make those ideas come to life, give feedback in ways that motivate people and design posters that attract attention. The most important skill I used and developed was the skill of communicating in a friendly, positive, and enthusiastic way and also taking the time to find out about other peoples' work and make sure I let people know when I think they are creating really important and high-quality work. The skill I value the most and I didn't realise I had until the conference is the skill of making people feel welcomed. A student that travelled all the way from India to present his work thanked me for making him feel so comfortable. I also made sure to update my knowledge of inclusive vocabulary and terminology before creating the poster and I will use this when teaching anatomy.

REPORT: How do you think you will put this learning experience into practice in the future? For public engagement/outreach awards how with the materials/knowledge generated by this activity be used in the future?

I met wonderful people from many institutions that are taking fabulous initiatives with the aim to decolonise the curriculum and I would love to collaborate and be part of this. I am interested in getting involved with the Anatomical Society to improve Equality, Diversity and Inclusivity in anatomy education. I am also hoping to apply for a public engagement and outreach grant. I am hoping to use my ideas from the poster and expand on this work to make it publishable. I want to create a focus group to create relevant anatomy recourses and design research that aims to understand assumptions of heteronormativity and cis-normativity and identify what parts of curricula may be reinforcing these. I also want to explore the impact of "queer" invisibility in anatomy on students and staff. I would like to create a video that explains trans/non-binary anatomical and non-anatomical terminology and introduces sex and gender as a spectrum.

Data Protection/GDPR: I consent to the data included in this submission being collected, processed and stored by the Anatomical Society. **Answer YES or NO in the Box below**

Yes

Graphical Images: If you include graphical images you must obtain consent from people appearing in any photos and confirm that you have consent. A consent statement from you must accompany each report if relevant. A short narrative should accompany the image. **Answer N/A not applicable, YES or NO in the box below**

N/A

The accompanying image shows the poster that was presented at the conference. The poster includes original illustrations of transgender, non-binary and intersex bodies that can be downloaded by scanning the QR code. We hope that anatomy educators will add these to their curricula and create a sense of belonging for LGBTQIA+ students. Practical ways of how to become an inclusive educator and increase LGBTQIA+ visibility in anatomy curricula are also presented.

Copyright: If you submit images you must either own the copyright to the image or have gained the explicit permission of the copyright holder for the image to be submitted as part of the report for upload to the Society's website, Newsletter, social media and so forth. A copyright statement must accompany each report if relevant. **Answer N/A not applicable, YES or NO in the box below**

Yes

Figure 1 includes original illustrations created by the author Anargyros Levantis.

Figure 2 is an illustration created by Netter sourced from "Netter's Essential Biochemistry. Ronner, Peter, PhD. Published January 1, 2018. Pages 338-352. © 2018."

SIGNATURE

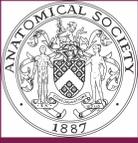
Leandros Rapteas

DATE

17/05/2023

If submitted electronically, a type-written name is acceptable in place of a hand-written signature

File: AS-Award-Report-Form-220922 – International Conference



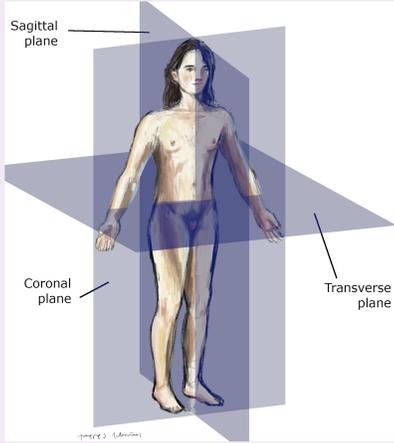
Where are the Queer Bodies? The importance of representation in anatomy education



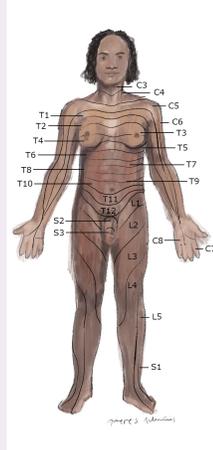
Anagyros Levantis¹, Munesh Khamuani², Leandros Raptreas³
¹National and Kapodistrian University of Athens, ²University of Sunderland, ³University of Liverpool

Get your queer body images for teaching!

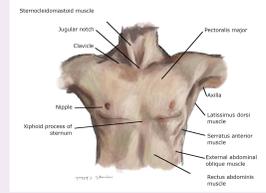
Figure 1: Examples of how we could include Queer Bodies in our teaching



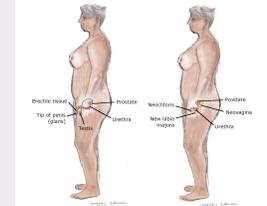
An intersex body could be used, instead of the binary female or male body, to introduce anatomical planes.



A transgender woman's body (without vaginoplasty in this example) could be used to introduce dermatomes.



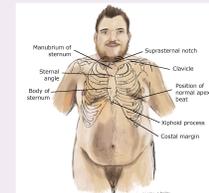
Surface anatomy on a transgender male or non-binary body.



Trans woman pre- and post-vaginoplasty



Introducing a transgender man's body that has undergone chest masculinisation and phalloplasty.



Some transgender people have not had gender affirming surgery and this does not invalidate their gender in any way. It is important that these bodies are also represented.

1. The story of a teaching session

- Figure 2 was presented to 2nd year medical students on a slide titled "Androgen Insensitivity Syndrome, a 46, XY disorder of sex development".
- It was explained to students that the person genetically has one X and one Y chromosome and the body is resistant to androgens.
- Students proceeded to discuss the case using "he/him" pronouns when referring to the person. So they assumed the person's gender was male based only on the presence of the Y chromosome.



Figure 2: Netter's illustration of an intersex individual

2. Reflecting on the session

- Presenting a body of an intersex person unintentionally uncovered important misconceptions related to chromosomal sex and gender.
- The other important issue was the wording on the slide. The use of the words "Syndrome" and "Disorder" led to discussing this case through the lens of pathology instead of a "natural variation" lens.
- The description "Relatively normal female habitus" in Figure 2 is problematic as it implies that this person's body is not "normal" because it differs from the strict binary.

3. Importance of queer body representation in anatomy

- Stonewall has reported that people that identify as LGBTQIA+ face widespread discrimination in healthcare settings and as a consequence often avoid seeking medical care [1].
- Queer invisibility promotes a "hidden curriculum" that enhances biases in future healthcare professionals and affects LGBTQIA+ students that are not being adequately represented [2][3].
- Anatomy has the power to define what is normal and can help tackle bias [4].

4. What can anatomy educators do?

- Decolonise and diversify the curriculum by representing intersectionality and introducing sex and gender as a spectrum [5].
- Introduce trans/non-binary anatomical and non-anatomical terminology [6].
- Use the 5th edition of Gray's Anatomy for Students (published 24th March 2023) that introduces the spectrum of sex and gender along with the anatomy related to gender affirming surgeries [7]. Let your students know!
- Talk about anatomical structures without gendering them [6].
- When teaching pelvis and perineum focus on similarities between erectile tissues of the clitoris and penis and discuss erection of the clitoris not only the penis [8].
- When teaching avoid using phrases like "in the man" or "in the woman".
- Never assume gender and prefer the use of gender neutral terms and pronouns when gender is unknown.
- Students should be taught that we cannot assume anyone's gender based on genetics, hormonal levels, anatomical characteristics or phenotype [8]. The only way to know an individual's gender is if they disclose it to us.
- Also, we should never assume what anatomical structures are present based on a person's gender.
- 3D Anatomy Platforms should include trans and intersex models and radiological images to familiarise students with variations.
- There is a risk of reinforcing stereotypes when presenting bodies. It is important to note that transgender and intersex bodies exist in all shapes and forms and there is as much phenotypic variation as in cisgender bodies.
- Students should be exposed to a variety of queer bodies and relevant anatomy should be taught in terms of natural variation [7].
- Avoid stereotypical classifications.
- Increase queer body visibility and use a range of pronouns in workbooks, case studies, PowerPoint presentations.
- Create problem-based learning cases that include queer identities and relationships (e.g., lesbian, gay, bisexual, pansexual, non-binary, transgender, intersex, asexual etc).
- Do not use negative, pathologizing or stigmatizing terminology (e.g., use "Differences in Sex Development" instead of "Disorders of Sex Development").

The most reported barrier (89%) leading to underrepresentation of queer content in medical curricula is related to time constraints [9]. However, we suggest that queer bodies should be introduced naturally and used to teach anatomy that is irrelevant to genitalia or gender affirming procedures. For example using a queer body to teach dermatomes increases queer representation without taking up more time (Figure 1).

5. Conclusion

Where we see our own and other bodies makes a difference to how we perceive bodies! Including LGBTQIA+ identities in photographs, illustrations and case studies can help **depathologise diversity, decrease stigma and tackle bias related to homophobia and transphobia**. It can also **alleviate gender dysphoria** and make people feel **safer and more comfortable** when interacting with health professionals.

