Supplemental digital content for Todić J, Cook SC, Spitzer-Shohat S, et al. Critical theory, culture change, and achieving health equity in health care settings. Acad Med.

Supplemental Digital Appendix 1

Phases and Examples of Training Based on the Intergroup Dialogue Methodology to **Increase Critical Consciousness and Support Collective Action**

Phase ^a	Content
Confirmation	The first phase established the climate through sharing objectives, facilitating introductions, setting expectations, establishing group norms, acknowledging feelings, and using low-risk self-disclosure such as the Gallery Walk exercise. The exercise begins by having each participant draw the multiple aspects of their identity on a flipchart to answer the question, "Who am I?" The participants then display the flipcharts on the walls and walk around the room to view them in silence. The facilitated follow-up discussion "breaks the ice," helping participants notice commonalities and differences they observed. The participants also share vulnerabilities associated with drawing, displaying their work, and worrying that others might misunderstand the representation. Facilitators draw connection between the participants' experience and the experiences of patients and families in the healthcare setting.
Contradiction	The second phase used simulation exercises to explore different experiences within the group related to social power, validate personal risk-taking, and reveal contradictions between internalized normative narratives (e.g., "in the US everyone has an equal opportunity to succeed if they work hard") and often-invisible realities. For example, the "Common Ground" activity asked participants to stand in a circle and "claim common ground" by stepping into the circle if statement applied to them. Statements included experiences such as "have ever been afraid to walk alone at night," "your caregivers owned your home when you were growing up," or "have ever been stopped by the police for reasons that were unclear to you." During the activity, participants observed emerging patterns based on various social group identities, noticed how they felt in response, and engaged in a facilitated discussion.
Continuity	The third phase focused on summarizing insights, assessing individual and group spheres of influence, planning action to foster the culture of equity, and developing ongoing support. Participants met in small groups and discussed specific action they would take upon returning to their organization.

^aThis approach to sequencing training activities is based on the intergroup dialogue model, which is a facilitated conversation between individuals with diverse social group identities aimed at deepening their understanding of intersecting systems of oppression, strengthening their relationships, and increasing their commitment to collective action to transform the oppressive systems.³⁷