

Health Professions  
Students' Management  
of Identity-Based Patient  
Bias in the Clinical  
Setting:

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An Interprofessional Training  
Initiative

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## Origins

- Students experiencing bias
- Students witnessing bias
- Faculty desire to support students
- Need to develop a program



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# Collaboration

School of Health Professions

Speech Language Pathology

Audiology

Athletic Training

Clinical Laboratory Sciences

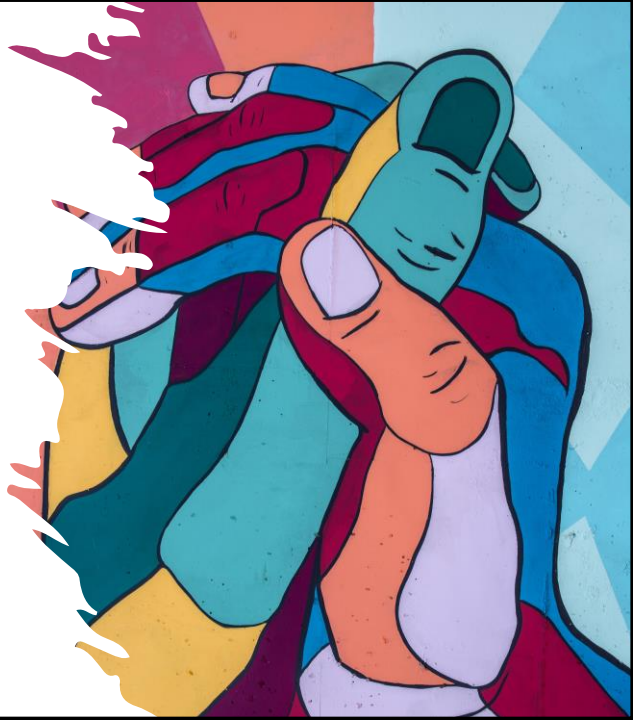
Physical Therapy

Dietetics and Nutrition

Health Information Management

School of Nursing

Traditional Baccalaureate Students



# Study Team

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## Identity Based Patient Bias (IBPB)

Discriminatory behaviors by patients are directed toward health professionals based on the provider's characteristics.

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## WHY Student/Patient Interactions

Training in management of physical violence is provided

Verbal mistreatment

- More common
- May cause psychological harm
- Uncertainty how to respond

Vulnerable students

- Power differential

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## Prevalence IBPB

- 59.4% trainees experienced at least one form of harassment or discrimination during training
- Verbal harassment most common
  - Patients/families (21.9%)
- 44.7% reported experiencing intimidation, harassment, and/or discrimination during residency
- Inappropriate verbal comments (94.3%):
  - Patients (35.2%)

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## Prevalence IBPB

- Medical students
- 60% experienced mistreatment
- 15% of sexual harassment incidents involved patients
- 11% of incidents related to ethnicity involved patients

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## Prevalence IBPB

- 1186 doctors, nurses, NPs, PAs...
- Has a patient ever made an offensive remark in your presence about your....

	Doctor	Nurse
Age	28%	24%
Gender	20%	18%
Ethnicity/National origin	22%	9%
Race	19%	15%
Weight	12%	23%
Religion	12%	7%
Accent	10%	4%
Medical education outside US	6%	1%
Sexual orientation	4%	4%

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## Impact

- Emotional impact
  - Strong 29%
  - Moderate 32%
  - Little/None 40%

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## Impact

- Residual effects of mistreatment by patients on trainees<sup>1</sup>
  - Greater safety precautions (46%)
  - Increased vigilance (20%)
  - Avoidance of certain patient types (10%)
  - No effects (41%)

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## ERASE Framework

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E - Expect that mistreatment will happen

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R - Recognize when mistreatment occurs

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A - Address the mistreatment in real time

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S - Seek Support

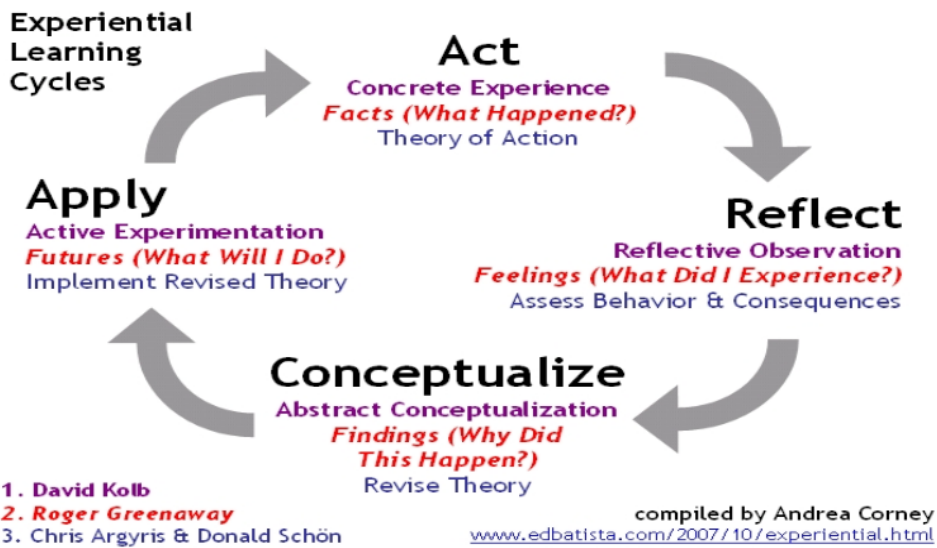
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E - Establish positive culture

Goldberg et al., (2019)

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# Kolb's Experiential Learning Cycle



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## Reflective Practice

- Reflection in action
  - Thinking while you are doing
- Reflection on action
  - Thinking about what you did

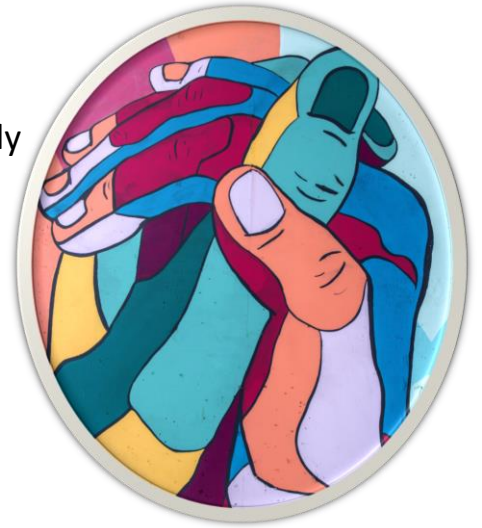


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# Program Overview

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- Module 1 – September-October
  - Video lesson students watch independently
  - General introduction
  - Vocabulary, definitions, and terminology
- Module 2 – November-December
  - Virtual group sessions



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## Sample

- Total students from School of Nursing and School of Health Professions going through the training
  - N=250
- Students participating in pre and post test survey and agreeing to have reflective journals analyzed
  - N=152



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# Data

## Survey

- Experience witnessing or direct recipient of IBPB
- Confidence in managing IBPB when witnessed or experienced
- Suggestions for institutional management of IBPB

## Reflective journals

- Completed anonymously

## Focus groups

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# Outcomes



Results

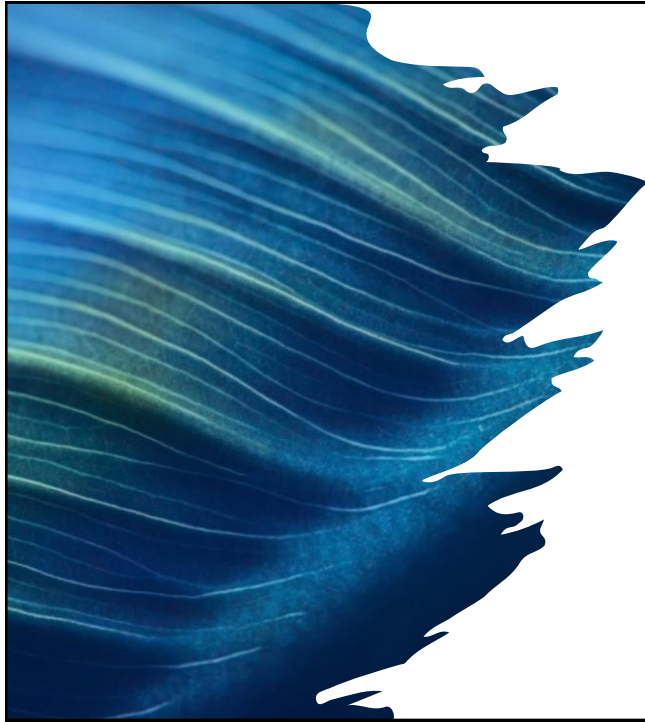


Discussion



Next Steps

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## Summary

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Mistreatment and harassment by patients is a common experience in clinical medicine, especially among women and ethnic minorities.

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Mistreatment and harassment can have a significant psychological impact.

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Trainees often report that faculty don't address these occurrences in real time...and sometimes not at all.

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## Questions



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