

Medical school mistreatment tied to race, gender, and sexual orientation

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Medical school students are being mistreated by fellow students, medical faculty, and supervising residents based on their race, gender, and sexual orientation, according to a new study led by Yale University researchers.

The study, which examined 27,504 student surveys representing all 140 accredited medical schools in the United States., found that women, under-represented minority (URM), Asian, multiracial, and lesbian, gay, or bisexual (LGB) students reported more frequent incidents of mistreatment and discrimination than their male, white, and heterosexual medical school counterparts.

The findings appear in the Feb. 24 online edition of *JAMA Internal Medicine*.

The Yale team analyzed data from an annual survey administered to graduating [medical students](#) by the Association of American Medical Colleges (AAMC). The study is one of the first of its kind to look at how mistreatment of medical students relates to demographic characteristics.

"There is a lot of data showing that although medical schools are slowly becoming more diverse, they are still not yet inclusive," said co-author and emergency medicine assistant professor Dowin Boatright, M.D.

The study is unique in that it involves a large nationally representative sample, includes a wide breadth of mistreatment types, and focuses on "the connection between membership in a marginalized group and the experience of mistreatment," the authors write.

The most common mistreatment reported was public humiliation, followed by denial of opportunities, offensive remarks or names, and lower grades or evaluations.

In the 2017 AAMC survey that provided the raw data for the new study, graduating students were asked questions about how often they were publicly humiliated or physically harmed during medical school; how often they had been denied opportunities based on their gender, race, or sexual identity; or been subject to offensive remarks.

Key findings included that 40.9% of female students, compared to 25.2% of male students, reported at least one episode of mistreatment. And 28.2% of female students reported gender-based discrimination, compared to 9.4% of male students.

Multiracial students reported higher rates of mistreatment compared to [white students](#), and underrepresented minority female students reported the highest levels of racial and ethnic discrimination (26.5%).

For non-URM male students, just 6.8% reported racial and ethnic discrimination.

Students identifying as lesbian, gay, or bisexual reported the highest rates of mistreatment, with 43.5% reporting at least one episode of mistreatment, compared to 23.6% for heterosexual students. Nearly 22% reported that they were subjected to offensive remarks or names related to their [sexual orientation](#), compared to 0.8% for heterosexual students.

"Women and people of color are under-represented in academic medicine, and they, along with LGB physicians, all face discrimination in the workplace," said lead author Katherine A. Hill, a second-year medical student at Yale School of Medicine. "When you are denied opportunities based on racism or sexism, these can accumulate over the years and hinder careers or cause burnout."

The researchers said the findings suggest that more must be done to move beyond simply diversifying [medical school](#) student bodies to ensure all students feel supported throughout their academic experience.

There are measures that can help to safeguard vulnerable students, Hill said, including implicit bias training for faculty; better protections for students to shield them from retaliation; and greater transparency about the policies that already exist to support students facing [mistreatment](#).

"There's not enough focus on these issues," she said. "Medical schools put almost all their attention on diversity of overall numbers; it's important to think about diversity in terms of the [student](#) experience."

More information: Anjali B. Thakkar et al. Addressing Mistreatment in Medical Education, *JAMA Internal Medicine* (2020). [DOI: 10.1001/jamainternmed.2020.0004](#)

Provided by Yale University

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