

Patient bias toward medical residents: How common is it?

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Nearly all medical residents experience or witness patient bias. The forms it takes and how frequently it is experienced vary by demographic factors, according to a recent study in *JAMA Network Open*.

The study surveyed 232 internal medicine residents from three institutions. Among the respondents, 45% of Black or Latinx residents experienced epithets or refusal of care, and most women (87%) experienced sexual harassment from patients. In spite of those daunting numbers, most residents (84%) did not report these episodes to their institutional leadership.

At the 2020 AMA November Special Meeting, the AMA House of Delegates updated ethical guidance for physicians dealing with disruptive or discriminatory behavior. Read more about what physicians should do when patients are prejudiced.

Frequency and types of bias

The survey asked resident respondents how frequently they had experienced a list of demeaning behaviors that included belittling or demeaning stereotypes, role questioning, explicit epithets or rejection of care, or sexual harassment.

Among survey respondents, 98% said they experienced or witnessed bias behavior by patients in the past year. At least one-third of respondents reported experiencing belittling comments (38%), inquiries into racial ethnic origins (33%), generalizations about social identity (30%) and credential or ability questioning (34%) at least once a month. Other bias behaviors were reported with less frequency.

“Epithets, refusal of care and requests to change physicians were less common yet were experienced at least one to three times per year by 40% of residents (91 of 230), 30% of residents (69 of 230), and 27% of residents (61 of 229), respectively,” the study’s authors wrote. “Sexual harassment was also common and experienced at least one time per year by 60% of participants (138 of 230).”

Experiences with bias were more common among residents who identified as women, Black or Latinx or Asian. Some key findings among those groups:

- Of women resident respondents, 96% reported encountering role-questioning behaviors at least once within the past year compared with 42% of male residents.
- All 70 residents identifying as Asian reported experiencing inquiries into ethnic origins, and 99% reported being confused with team members of the same race or ethnicity at least once within the past year.
- Experiences of refusal of care and requests to change physicians were more common among residents identifying as Black or Latinx, with 45% of those respondents experiencing the behavior in the past year, compared to 28% of white-identifying residents.

Learn where institutions draw the line when it comes to patient bias.

Addressing patient bias

Residents addressed biased behavior most commonly by venting with friends and colleagues—34% reported debriefing on the incidents with team members and 35% reported debriefing with friends and family. The more proactive measures of reporting the behavior (never used by 85% of respondents) or switching the patient to another team (never used by 78%) were infrequently pursued by residents.

An invited commentary on the study—authored by Rhonda G. Acholonu, MD, and Suzette O. Oyeku, MD, MPH—called on academic institutions to address microaggressions, bias, and sexual harassment that disproportionately affect women and URM health care professionals

“Leaders of academic medical centers must recognize the microaggressions and subtle indignities that affect their workforce’s daily lives, which are currently magnified by their personal lived experiences,” the authors wrote. “Further work is needed to better understand effective strategies that incorporate leadership accountability and the use of resources and data to meaningfully change the workplace environment.”

Get an inside look at Mayo Clinic's five-step process for handling biased patients.