

ACTION PAPER
FINAL

TITLE: Addressing Racial Discrimination Against Psychiatry Trainees & Practicing Psychiatrists

WHEREAS:

1. The APA has had a longstanding commitment to diversity as evidenced by 41 of the 175 existing position statements are regarding diversity and culture. Further supporting a diversified workforce is a natural next step in the APA with built in support from the existing Division of Education.
2. Incidents of physician mistreatment in the form of race-based discrimination perpetrated by patients and their families is shockingly commonplace. Resident physicians, in particular, may be at higher risk for discriminatory abuse from patients (1-5). This data is troubling and likely represents a pervasive experience and attitude towards incidents of discrimination by trainees. These studies highlight discrimination as a potential threat to personal and professional wellbeing during residency training as a result of the hostile learning environment (Appendix 1).
3. Race-based discrimination of physicians has been described in various forms such as: patient's requesting non-black physicians, microaggressions and overt racial slurs. Scholars have made efforts to stimulate dialogue around these issues (6-11). Paul-Emil et al. constructed an algorithm to help hospitals in navigating the legal complexity of racial discrimination by patients, specifically (12); however, there remains a dearth of literature in evaluation, adjudication, and responses to discriminatory behavior perpetrated by patients.
4. Patient and family discrimination related to racial/ethnic background poses a particular challenge for trainees and their colleagues. To date, no standardized process for recognition, reporting, review or response currently exists for incidents of race-based discrimination in hospital centers. Addressing such as complex issues begins with recognition of race-based discrimination situations which may not always share conscious agreement. Many situations are nuanced and subject to interpretation, while other situations are egregious and generally agreed upon as racist. A process of reporting and review should take place to support the residents and others who have been the target of the racism, affirm values of diversity and inclusion across clinical settings, and to inform a process for responding to these complex situations at the resident-supervisor, clinical and institutional level.
5. This discrimination has not been fully addressed by the APA in its efforts to support the stated mission, goals, ethical commentary, position statements on diversity, bias and discrimination, nor its strategic priorities (Appendix 2).
6. The APA does not currently offer explicit professional guidance to residents, fellows, medical and/or psychiatric educators, or practicing psychiatrists on how to address race-based discrimination from patients and families.

7. There is existing guidance and best practices on how to address mistreatment of trainees and practicing physicians in the literature and several avenues for disseminating this information to psychiatry trainees and those supervising their education (Appendix 3, 4).

BE IT RESOLVED:

That a web-based toolkit addressing racial discrimination against psychiatry trainees and practicing psychiatrists be developed and maintained by the Council on Medical Education and Lifelong Learning and the Council on Minority Mental Health and Health Disparities in coordination with the Division of Education to include proposed frameworks, resource documents and instructional video modules available to APA members and the public and also disseminate information to Directors of Residency Training programs and Chairs of Departments of Psychiatry.

That the video modules be crafted to meet criteria for CME eligibility.

That the video modules be included in the Supplemental Education and Training (SET) for Success coursework that benefits resident and fellow members.

That the developed web-based toolkit and its components be publicized through APA Communications and *Psychiatric News*.

That the instructional video modules be offered as a free Member Course of the Month.

That the APA explore funding sources for research, such as the APA Foundation, to support efforts to further characterize the prevalence, incidence and characterization of racial discrimination against psychiatry trainees & practicing psychiatrists.

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Author: \$2,607

APA: \$4,740

ESTIMATED SAVINGS: TBD

ESTIMATED REVENUE GENERATED: none

ENDORSED BY: Caucus of Black Psychiatrists, Assembly Committee on Access to Care, Caucus of Women Psychiatrists, Area 1 Council, Assembly Committee of Resident-Fellow Members (ACORF), Assembly Committee of Early Career Psychiatrists, Assembly Committee on Public & Community Psychiatry, Assembly Committee of Representatives of Minority/Underrepresented Groups, Washington Psychiatric Society

KEY WORDS: bias, discrimination, diversity, workforce

APA STRATEGIC PRIORITIES: Education, Diversity, Supporting Research

REVIEWED BY RELEVANT APA COMPONENT: Council on Medical Education and Lifelong Learning, Council on Minority Mental Health and Health Disparities

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Appendix 1. Attachment on Prevalence

A Stanford University study of graduate medical education trainees revealed that fifteen percent of residents personally experienced or witnessed mistreatment and more than half included discrimination by patients' families (2). Nearly half of the respondents did not know how to react to these instances, and one-quarter believed no action would be taken if they alerted hospital leadership.

A study of nearly 250 family medicine residents in Canada found that the most frequent type of discrimination while in training occurred in the form of verbal assaults with patients representing over one-third of the perpetrators and these verbal assaults included inappropriate comments perceived to be based on ethnicity (16.2%) and culture (9.5%). (3) Another study of pediatric residents similarly found race (42%) and ethnicity (38%) were included in the highest witnessed forms of targeted discrimination (4).

Finally, a study of nearly 2,000 medical residents revealed that one-quarter reported being the target of racial/ethnic discriminatory behaviors predominantly perpetrated by patients. The medical residents reporting discriminatory experiences included 13.6% of the white residents, 37.2% of the Hispanic residents, 62.9% of the Asians/Pacific Islanders, 68% of those from the Indian Subcontinent, 77.4% of the African Americans and 77.8% of those from the Middle East. In summary, all represented groups described at least one discriminatory experience based on

racial/ethnic identity.

Appendix 2. Attachment on Existing APA Commentary

The mission of the APA includes serving the professional needs of its membership while valuing lifelong professional learning and collegial support.

The goals of the APA include the improvement of psychiatric education and training. As outlined in Topic 3.3.3 in the APA Commentary of Ethics of Practice, responsibilities in teaching and in supervising psychiatrists-in-training include fostering a positive, respectful learning environment. The APA has expressed a commitment to the diversification of the psychiatric workforce (position statement 2017) which must be accompanied by specific support in addressing discrimination from members of the patient population it serves. Namely, the APA commitment supports a focus on addressing discrimination in the form of racial aggressions as its workforce continues to benefit from expanded numbers of racial/ethnic minorities.

The revised Position Statement on Bias Related Incidents (2015) states that the APA opposes bias-related incidents and recognizes that these incidents occur in our nation's communities, institutions, organizations and throughout all levels of society. This same position statement encourages APA members to take appropriate actions to prevent such incidents as well as actively respond when such bias-related incidents occur.

Appendix 3. Attachment on Existing Guidance

Christine March, Lorne W. Walker, Regina L. Toto, Sylvia Choi, Evelyn C. Reis, and Stephanie Dewar (2018) Experiential Communications Curriculum to Improve Resident Preparedness When Responding to Discriminatory Comments in the Workplace. *Journal of Graduate Medical Education*: June 2018, Vol. 10, No. 3, pp. 306-310.

Appendix 4. Attachment on Existing Guidance

Adapted from: Goodman, D. (2011). *Promoting Diversity and Social Justice: Educating People from Privileged Groups*. New York: Routledge. Excerpt available at www.dianegoodman.com