



What is the effect of microaggressions?

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Disclosure

Relevant Financial Relationships

None

Off-Label/Investigational Uses

None

Learning Objectives

- Review the data on the effects of microaggressions for individuals of underrepresented groups
- Discuss possible effects of microaggressions on women and minorities in medicine



"I'm going to say something that might be a little bit sexist or racist but you won't be quite sure if I meant it or not or if I'm a jerk or not or if you should be upset or not."

Someone just said something that might be a microaggression. What's going on in my head?

- *What did they mean?*
- *Should I ask them about it?*
- *Why would they say that?*
- *(not even listening to whatever they are saying now...)*
- *Now what do I say about it?*
- *Do I ask them later?*
- *What happens if I say something?*
- *What if I don't say anything?*
- *Why am I still thinking about this?*



“Intrusive Cognition”



What about when it happens here?

Dealing with prejudice

- People develop adaptive strategies for coping with prejudice, you're prepared for negative comments: Armor
- But what about if the prejudice is ambiguous?



“It’s just a microaggression...get over it.”

- Is the microaggression emblematic of some underlying bias or intent?
- Am I just too sensitive?
- Have I been “primed” to hear everything as a microaggression?
- “It used to be worse...”
- “Stop playing the victim!”



Stories from my residents...

- “Why don’t we wait for him?” – as female resident asks for equipment before the case (before attending arrives)
- “Maybe you should call the consultant” - when female resident gives an order for an antihypertensive
- “Oh, good, the boss is here” – when male resident comes into the OR while female co-resident is prepping
- “Are you going to work full-time after you graduate?” – asked of the female chief resident
- “I did a slash trach in the ER. I’m letting you know that someone will probably write me up for yelling.” –female resident

“Imposter Syndrome”: do microaggressions contribute?

- Feeling insecure, undeserving, or unaccomplished
 - *“I don’t belong here”*
- “How did you match into that program?”



”Stereotype Threat”: do microaggressions amplify?

- People feel at risk of confirming negative stereotypes about their own group and participate in self-defeating behaviors that ironically cause them to reinforce the stereotype
- ”Are you going to quit? The female resident last year quit...”
 - If I don’t do well, I’ll prove that women can’t do this
 - (If the women after me don’t do well, they’ll prove we can’t do this)



Effects of bias



- How do women respond to sexism?
 - Old-fashioned sexism (“Women aren’t as smart as men.”)
 - It’s obvious: Elicits hostility and engagement
 - Subtle and ambiguous “modern” sexism (“There’s no bias against women.” “Salary is just based on how hard you work.”)
 - Was it sexism? Elicits anxiety and inaction
- “...modern forms of prejudice may prove perilous: although they may undermine the self, they seem inoffensive and as a result remain unchallenged.”

Are people just too sensitive?

- Are people in ethnic minorities hypersensitive?
 - Both white and minority people had the same reactions to recalling a microaggression
 - How often have you experienced a microaggression?: minority people reported more experiences
 - *Let's decrease the number of negative experiences, not tell people to be less sensitive*



What's the evidence that microaggressions have any effect?

- How do you measure the effects of microaggressions on the receivers?



Racism: affects teamwork and cognition



- Pairs of black and white partners working on a problem :
 - Black person + ambiguously biased partner were **slower** to solve problem than black person + blatantly prejudiced white partner
 - Mixed messages and subtle racism affected problem solving more than overt racism -Dovidio 2001
- Students exposed to racist scenario, then took a cognition test
 - White students did worse on cognition test after seeing blatant racism
 - Black students did worse on test after ambiguous racism
 - Do black students have more “armor” against blatant racism? Did white students not see ambiguous racism, didn’t affect them as much?
 - Ambiguity is not benign. Subtle prejudice consumes mental resources, especially for those vulnerable to prejudice –Salvatore and Shelton 2007

Measuring stereotype threat: Racial bias and cognition

- Study using tests given to black and white students
 - Told it's a "Test of ability": black students did worse
 - "Test of problem solving": black and white equal
 - Test takers had to record race first: black students did worse



Stereotype threat: Gender bias and test performance

- Math test given to men and women with comment before test:
 - “Test shows gender differences” $W < M$
 - “Test shows no gender differences” $W = M$
 - No comment: $W < M$



JC Penney 2011



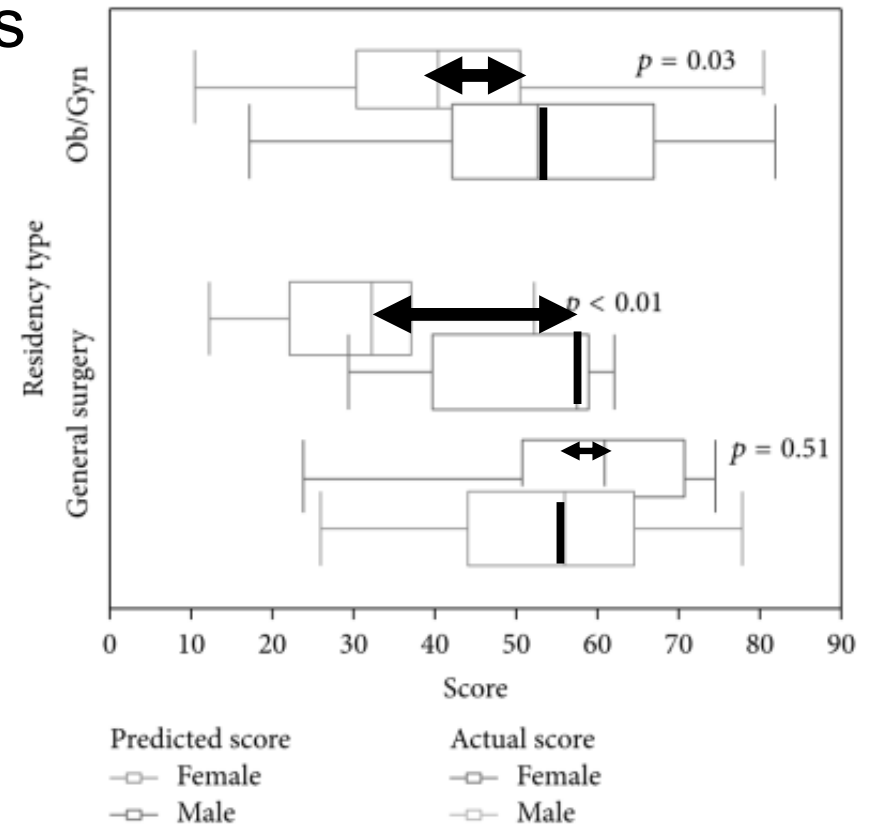
Teen Talk Barbie (1992)

Bias in medicine: How do microaggressions play a role?

- Subtle racism and sexism can affect team work, cognition, test taking.
- Can we say that microaggressions play a role in performance for medical professionals?
- Little evidence-based data on effects microaggression in medicine (yet)
- What data is available on gender differences in medicine?

Confidence: how did residents predict their scores?

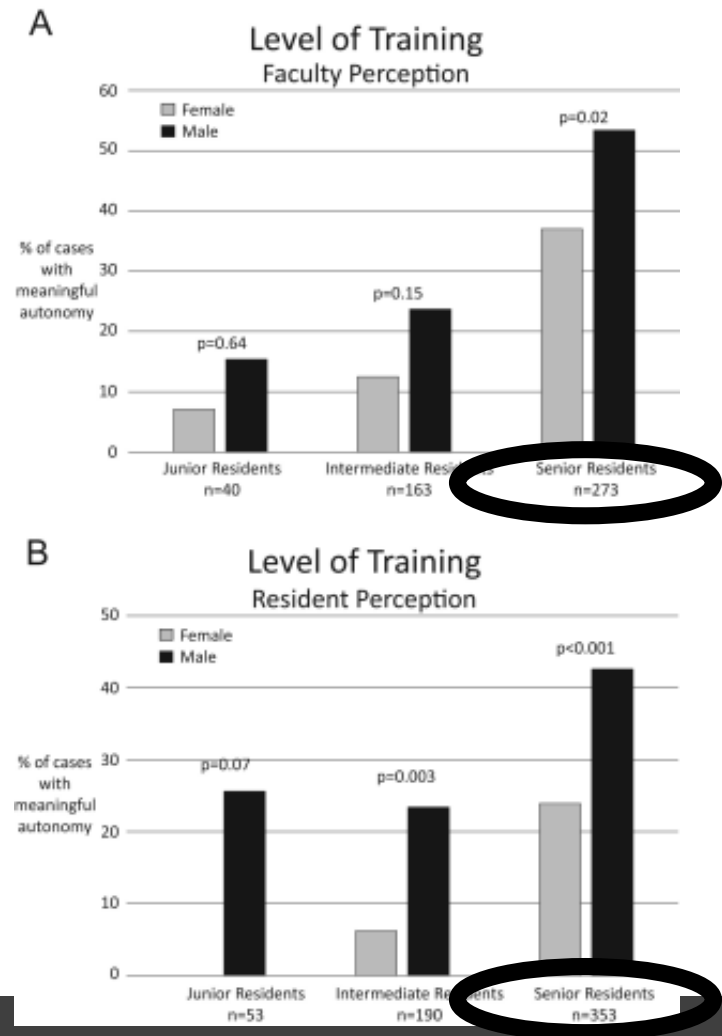
- Female gen surg and Ob/Gyn residents under-predicted their ability prior to test on laparoscopic simulator (gap)
- Men predicted (or over-predicted) their scores
- All three groups performed the same (objective score)
- Flyck, White et al. Ob Gyn International 2017



Why? Imposter syndrome?

Are there gender differences in training?

- Gender and resident autonomy in the operating room: thoracic surgery
 - Female residents given less autonomy than male residents
 - Female residents perceived less autonomy
 - Worse with higher level of residency
 - *Why?*
 - Meyerson et al. J Surg Educ 2017



Are there gender differences in training?

- Milestone evaluations in EM training by attendings
- Male residents reached milestones more quickly: gap equivalent of 3 months of training by end of residency
- Why?



Gender and emergency situations: running a code

- Survey of IM residents: “an ideal code leader was an authoritative presence; spoke with a deep, loud voice; used clear, direct communication; and appeared calm” (agentic)
 - Female residents: stress from violating gender normal
- EM residents:
 - “Directive style” of running a code was more uncomfortable for female residents
 - Both genders reported female residents had more difficulty with gaining trust and respect of nurses



Gaps in medicine: do microaggressions play a role?

- Medical school:
 - Tests, research opportunities
 - Evaluations, Letters of recommendation
- Residency
 - Autonomy
 - Evaluations (of residents and attendings)
- Career
 - Promotion, salary, leadership
 - Fewer referrals to female surgeons
- Does it affect teamwork and patient care?



The effect of microaggressions

- Difficult to measure in medicine
- “Modern” bias, prejudice more difficult to protect against
- Extrapolate from gender and racial bias literature
 - Stereotype threat can affect outcome of cognitive and performance testing
 - Role in Imposter syndrome?
- Consider the possible role of microaggressions in training and team dynamics in the OR

