

Microaggressions in Healthcare: Patient Experiences

Christine McKay, LICSW
Katie Hara, LICSW LMHC
Madison Clinic Social Work Supervisors
Harborview Medical Center

Last Updated: 09/30/2020



Disclosures

No conflicts of interest to disclose.



Continuing the Discussion...

- Microaggression definition from Derald Wing Sue
 The everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership.
- Microaggressions can occur in a multitude of ways and directions in healthcare setting
- Can be based on: race, ethnicity, gender, income, immigration status, sexual orientation age, ability, language, behaviors, etc.



Goals of Presentation

- Improved understanding of the ways that microaggressions can present in healthcare settings
- Improved understanding of how microaggressions can potentially impact patient experience and engagement in care
- Responses to microaggressions; both when witnessed by others or committed by oneself
- Next Steps



Healthcare Microaggressions

- Recognize that there is implicit discrimination within the healthcare setting
- Treatment providers who are in positions of authority inadvertently marginalize members of minority groups through culturally insensitive interactions
- Healthcare microaggressions originate from the concept of aversive racism; i.e., those in the dominant culture (often in positions of power) deny their prejudices, based on their adherence to egalitarian ideals



Healthcare Microaggressions Continued

- Institutional betrayal systematic organizational practices that fail to respond to discrimination and microaggressions appropriately (e.g., lack of clear surveillance policies or accountability procedures, normalizing culturally insensitive interactions)
- Brief and subtle verbal and/or non-verbal denigrating messages directed towards ethnic and/or racial minorities that carry the weight of the offending party's implicit bias, often below their own conscious awareness

Daniel Cruz, Yubelky Rodriguez, Christina Mastropaolo

PLoS One. 2019; 14(2): e0211620. Published online 2019 Feb 5. doi: 10.1371/journal.pone.0211620

PMCID: PMC6363167



Examples of Microaggressions

- Assumption of immigration status and insurance eligibility based on name
- Statements around intelligence in spite of race
- Repeating racist societal assumptions about promiscuity and family make up
- Assumed lack of understanding with patients who speak language other than English



Healthcare Microaggressions: Impact

"It has been suggested that racial microaggressions are especially detrimental when enacted by health care providers and that the negative impact of racial microaggressions is especially salient in medical settings where physicians hold significant authority over the individuals they treat. Furthermore, patients tend to be in vulnerable states when seeking medical treatment. As a result, they may be especially susceptible to psychological distress in response to microaggressions, which likely compounds their medical problems. Unlike in counseling settings, patients will likely not have the opportunity to process these feelings with their physicians because of the limited time and the general training culture of medicine, which tends to emphasize standardized medical procedures and efficiencies."



Healthcare Microaggressions: How to Respond

- When witnessed microaggression committed by others:
 - In general, see something, say something
 - Follow up with colleague in moment or at later time
 - Situation dependent
 - Inform patient of avenues for follow up on encounter if they are interested and/or upset
- When informed that you committed microaggression:
 - This feedback is a gift. Thank patient for sharing their experience with you.
 - Avoid becoming defensive
 - Intent vs Impact



Next Steps

- Think about how you will react the next time you commit and/or see a microaggression in clinical setting.
- Be mindful of how you are describing your patients and their situations to other providers and in chart notes.
- Anti-racism education is essential and should be ongoing for anyone in helping profession, especially in fields with significant disparities.



Discussion Questions

1. In thinking about previous interactions you have been a part of or witnessed, can you think of instances that you might now categorize as microaggressions (even if you didn't categorize them that way in the past)?

2. Moving forward, how will you change your behavior and/or response in regards to microaggressions?



Anti-Racism Resources

University of Washington Race & Equity Initiative

https://www.washington.edu/raceequity/resources/anti-racism-resources/

UW Library Guides -

https://guides.lib.uw.edu/racial-justice



Sources

- Perceived microaggressions in health care: A measurement study. Daniel Cruz, Yubelky Rodriguez, Christina Mastropaolo. Published: February 5, 2019. https://doi.org/10.1371/journal.pone.0211620
- Racial Microaggressions in Everyday Life: Implications for Clinical Practice.
 Derald Wing Sue, Christina Capodilupo, Gina Torino, Jennifer Bucceri, Aisha M.
 B. Holder, Kevin Nadal and Marta Esquilin. Teachers College, Columbia
 University. https://www.cpedv.org/sites/main/files/file-attachments/how_to_be_an_effective_ally-lessons_learned_microaggressions.pdf
- Interrupting Microaggressions in Health Care Settings: A Guide for Teaching Medical Students. Rhonda Graves Acholonu, MD, Tiffany Cook, Robert Roswell, MD, Richard Greene, MD, MHPE. Published: July 31, 2020. https://www.mededportal.org/doi/full/10.15766/mep_2374-8265.10969
- Racial microaggressions against African American clients in cross-racial counseling relationships. Constantine M. J Couns Psychol. 2007;54: 1–16.



Acknowledgment

The Mountain West AIDS Education and Training (MWAETC) program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$2,911,844 with 0% financed with non-governmental sources.

The content in this presentation are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS, or the U.S. Government.

