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Title

How Physicians of Different Races and Ethnicities Experience Racism in US Healthcare

Priority 1 (Research Category)

Qualitative research

Presenters

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Abstract

Background: Qualitative analysis of racism in medicine tends to focus on either a broad sampling of physicians or a narrow sampling of minority-status physicians. There is limited data on direct qualitative comparison of race perceptions between physicians of different races and ethnicities. Objective: Direct qualitative comparison of race perceptions between physicians of different races and ethnicity. Setting & Participants: A convenience sample of U.S. physicians built by referrals from the research teams' professional networks. Methods: Participants completed semi-structured, virtual interviews. Conventional content analysis was used to analyze transcripts using Dedoose software. Two analysts made a preliminary codebook identifying categories and codes that emerged and refined it through iterative discussion. All transcripts were coded using the refined codebook, with coding differences adjudicated by a third analyst. Results: Fourteen physicians from 4 states and 9 institutions completed interviews. Most were between 30-45 years old (N=7) and had an MD degree (N=12). Physicians self-identified as Latino (N=6), White (N=5), Black (N=3). The mean interview length (minutes) was longest for Latino (39 +/- 13) vs Black (24 +/- 5) and White physicians (20 +/- 6). Five major themes emerged: 1) appreciation of culture, 2) personal tax, and experiences with 3) the health system, 4) learners, and 5) patients. Most Black and Latino physicians had their professional credibility questioned by colleagues and/or leadership (67% and 83%, respectively), while no White physicians did. Black (100%) and Latino (83%) physicians reported microaggressions from patients. Black and Latino physicians reported a sense of invalidation from their experiences with learners as well as isolation, exhaustion, stress, minority tax, othering, and a need to rely only on themselves. While Black and Latino physicians recognized the value of their representation in their roles as clinicians, educators, and leaders, 50% of Latino physicians felt a need to assimilate with the majority group to succeed at their current job and 50% were considering leaving their current jobs. Conclusions: Our results demonstrate the depth and breadth of discrimination

experienced by non-White physicians. In our study, minoritized physicians saw value in their representation yet the personal tax endured in their current environment was not protective against a sense of wanting to leave their current roles.

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