

Addressing Racism in the Exam Room: A Family Physician Survey

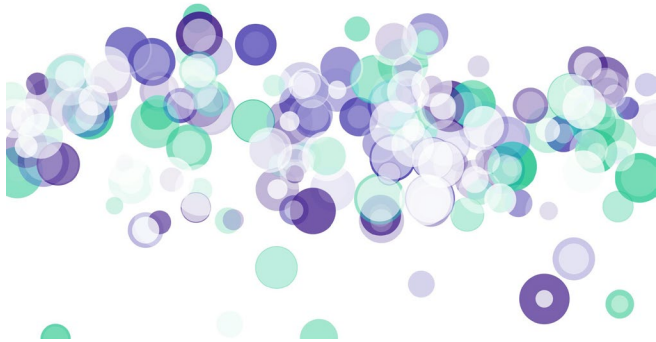
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Agenda/Outline



Background



Methods



Results



Discussion



Conclusion



Background

Racism is a public health crisis

Racism → health disparities

Clinicians understand and address racism and discrimination

Limited data about clinicians' knowledge and practices around discussing racism and discrimination with patients

Background, cont.

BENEFITS

Patients feeling understood, "seen" and validated

Clinicians gaining a better understanding of patients

Creation of trustworthiness

A role for clinicians as allies

CHALLENGES

Lack of time

Discomfort patients have discussing racism with clinicians

Clinicians discomfort with initiating the conversation,

Concern about vicarious perpetuation of trauma

Study Objectives

1

Assess the knowledge, skills, and practices of family physicians related to discussions of racism and discrimination with patients

2

Assess how comfortable family physicians are discussing racism and discrimination with patients

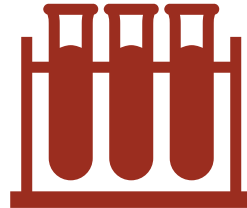
3

Identify facilitators and barriers family physicians experience in discussing racism and discrimination with patients

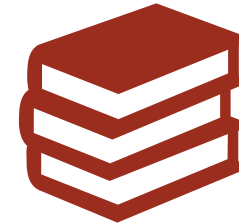
Methods - Data



Self-administered online survey



Pre-tested survey → Piloted



University of Minnesota Institutional Review Board determined that this study was exempt from review

Methods - Sample



Survey emailed to MAFP members in
newsletter



Raffle for one of ten \$100 gift cards

Funded by the MAFP grant

Methods – Measures

Participant
demographics

Training

Screening
practices

Barriers and
facilitators

Methods – Analytic Approach



Completed in R



Participant demographics and survey responses were summarized with count (%) and mean (standard deviation [SD]) for categorical and continuous variables, respectively



Associations between screening practices and physician characteristics, patient characteristics, and potential barriers and facilitators were evaluated with Fisher's exact tests

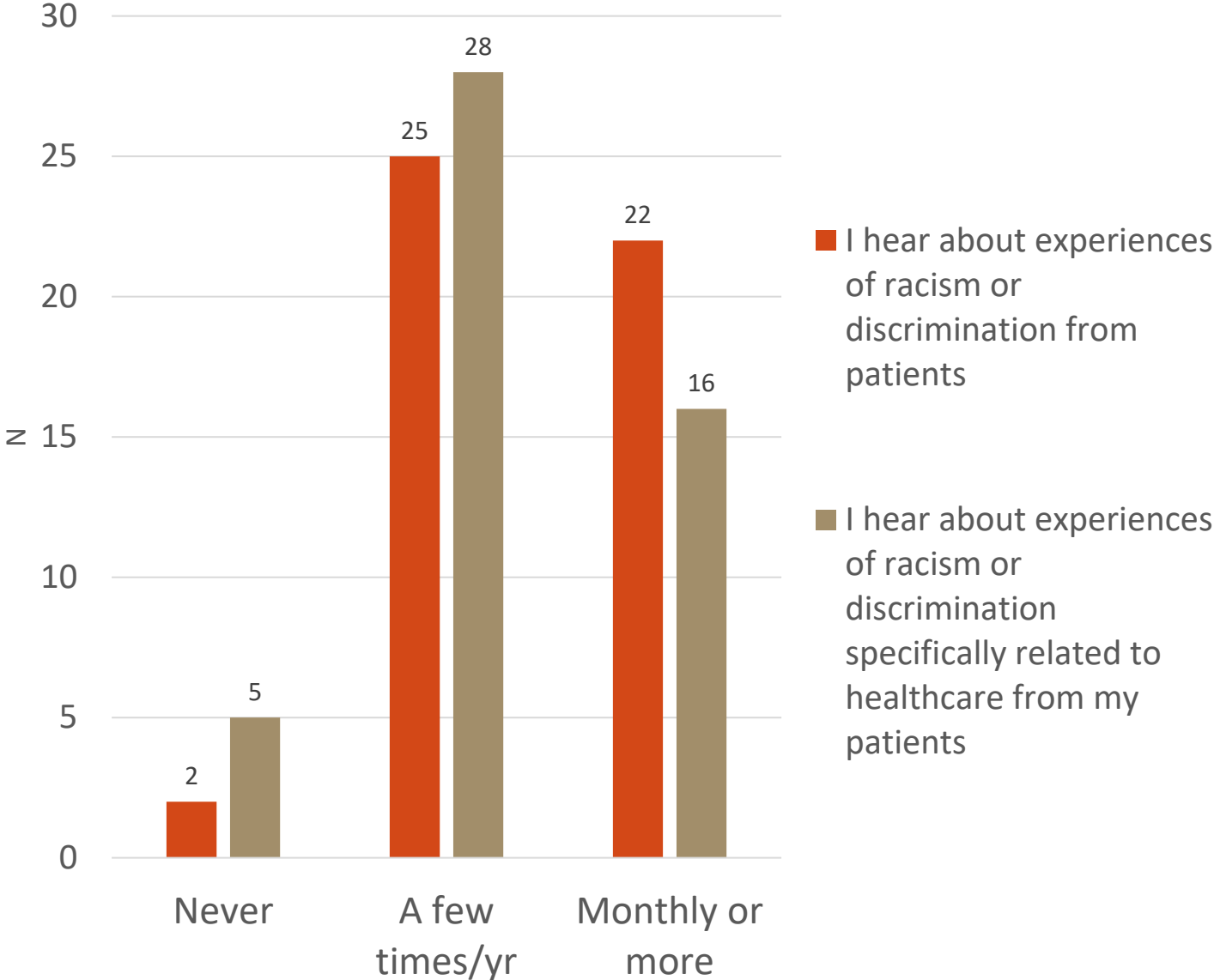


All p-values were two sided and evaluated at the 0.05 level for statistical significance

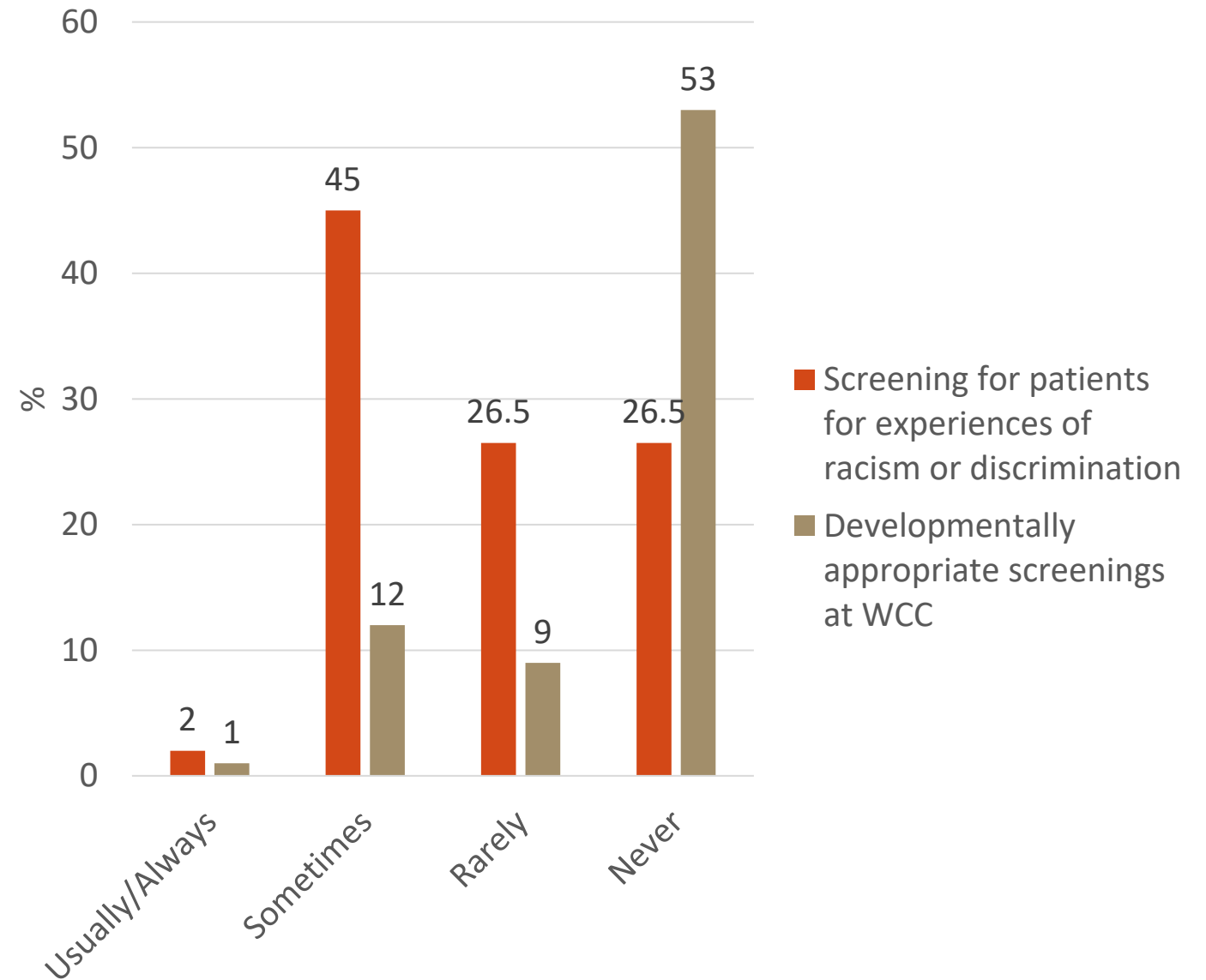
Results – Participant Demographics

	N (%)
	Mean (SD), [range]
Gender	
Man	19 (38.8)
Woman	29 (59.2)
Prefer not to say	1 (2.0)
Race	
African American	1 (2.1)
Asian	1 (2.1)
Hispanic/Latine	2 (4.2)
White	44 (91.7)
Age	20.0 (11.31), [31,77]
Years in Practice	51.3 (11.33), [1,48]
% of time providing clinical care	
< 50%	10 (20.4)
50-80	10 (20.4)
> 80%	27 (55.1)
Location	
Rural	13 (27.7)
Suburban	5 (10.6)
Urban	29 (61.7)
Teaching	
No	16 (33.3)
Yes	32 (66.7)

Results - Experiences



Results - Screening



Results – Barriers

Not reimbursed (94%)

Do not know what guidelines to follow (86%)

Not enough (92%)

Not enough training (71%)

Results – Facilitators

Family physicians should address racism and discrimination with patients (82%)

Discussion – Key Findings



Experiences



Screening



Agreement that this is part of FM



Lack of time

Discussion – Limitation

Voluntary,
convenience
sample

Low response

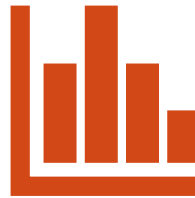
Single state

Unclear if
representative of
MAFP membership

Lessons Learned



Survey development



Survey management



Data analysis

Next steps



Qualitative
Material From
Survey



Qualitative
Work With
Clinicians,
Patients



More Focused
Survey(s)

Acknowledgements

National Cancer Institute of the National Institutes of Health under Award Number T32CA163184 (PI: Allen, Stepanov) and administered by the University of Minnesota Medical School Program in Health Disparities Research and the University of School of Public Health. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under National Research Service Award in Primary Medical Care grant number T32HP22239 (PI: Borowsky), Bureau of Health Workforce. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

Eliminating Health Disparities Initiatives (EHDI) Grant from the Minnesota Department of Health Center for Health Equity

Minnesota Academy of Family Physician Foundation Resident Research grant

National Institutes of Health's National Center for Advancing Translational Sciences, grant UL1TR002494. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health's National Center for Advancing Translational Sciences.

Thank you!

Q&A

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