

Student Voices

“I remember a standardized patient called me sweetie, or honey, or something like that one time and it was in an endearing way, but I don't think he would've said that to a male medical student” –Student 1 (Female, White)

“I feel like we've done a lot of encounters that I may chalk up to sort of a stereotypical presentation. ... Here’s an older man with shortness of breath or chest pain. And I'm sure that I have fallen into the trap of just relying on pattern recognition and stereotyping those patients, even though I know they're just actors.” – Student 11 (Female, Multiracial)

“The work clinically I intend to do is going to be with certain populations... and I feel like the standardized patients don't really represent ... the diversity of patient panel that I'm trying to work with.” – Student 12 (Female, Latina)

“You have to dress a certain way for the encounters. If you're doing a graded encounter, you have to wear your white coat... But the idea of grading someone on their professionalism.. It’s hard because professionalism or the idea of it comes from a very white centered culture and there's more than one way to be professional... I want my patients to be comfortable, but not in a way that makes me feel like disingenuous to myself or to any part of my identity” - Student 4 (Female, Latina)

“This was a female SP and I did not ask whether she had been working, what her employment status was. And in the moment as I was going through my questions, I had just assumed that she wasn't working because of her age. And I remember at the end she mentioned that actually that was one of some feedback I remember to this day.” – Student 13 (Female, Black)

Acknowledgements: Kanbar Center for Simulation, UCSF Innovations in Education, UCSF Pediatric WIP

Student Perspectives on Bias in Standardized Patient Encounters

Angelina Fluet, BA, Carleigh Williams, BS, Susannah Cornes, MD, & Mindy Ju, MD, MAEd



Background

- Prior studies have shown that standardized patients’ (SP) evaluations of learners are affected by student identities^{1,2}
- SP actors agree that bias affects there work, and identify nuanced ways that bias exists in simulated encounters, as opposed to a real patient encounter³
- No such study has been conducted to obtain the student perspective on this topic

Methods

- We conducted a qualitative, interview-biased study with 15 third and fourth-year medical students
- The interview guide included questions regarding student bias, SP bias, systemic bias in simulation, & simulation as an anti-bias training tool
- Interviews were coded and analyzed using inductive thematic analysis

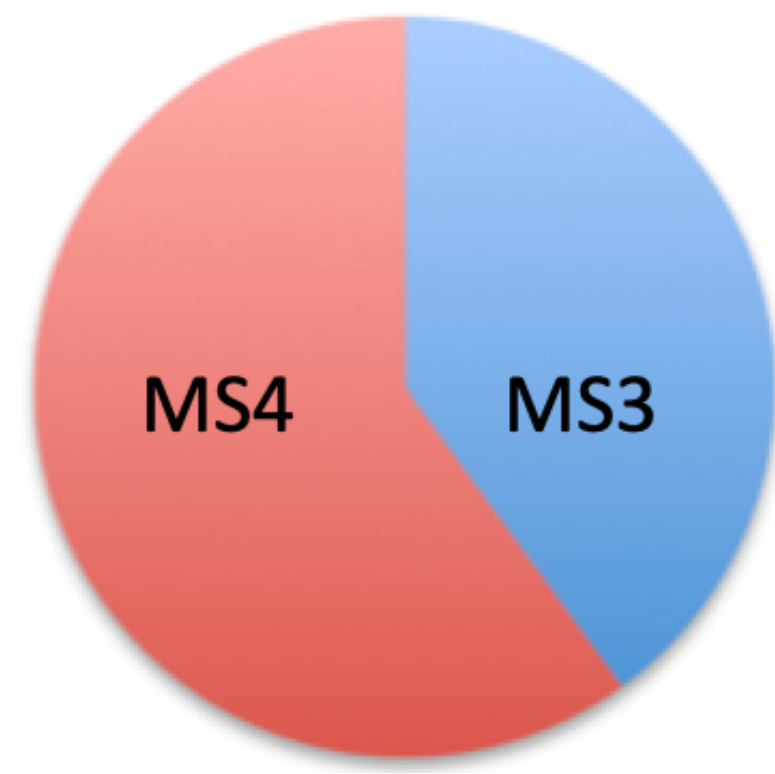
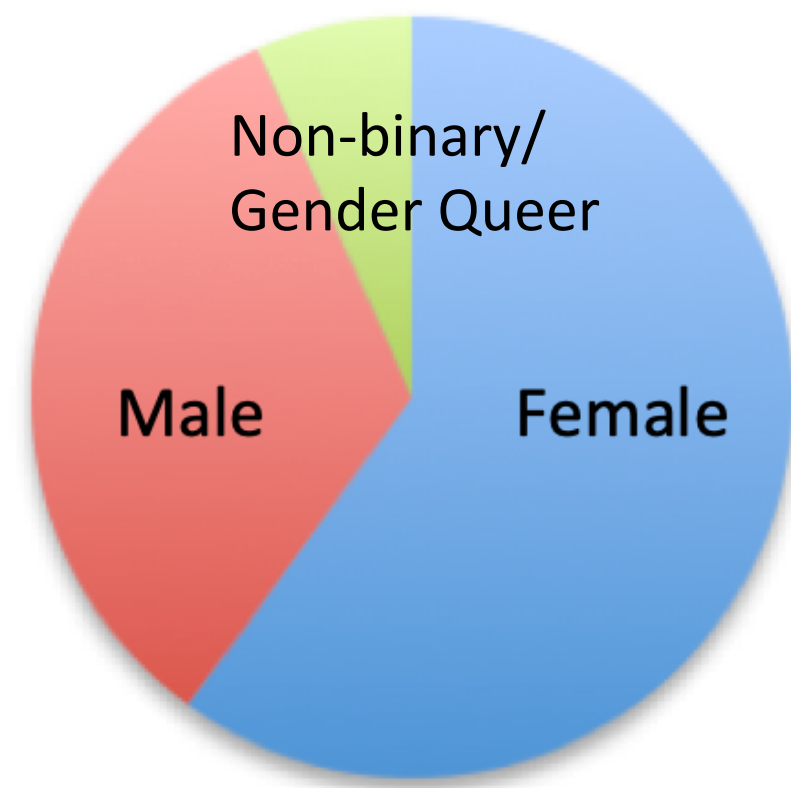


Figure 1. Participant Demographics

Results

- Bias exists in 3 main directions (Fig 2):
 1. Student → SP
 2. SP → Student
 3. Contextual bias in simulation
- Contextual bias can manifest in 3 forms:
 - A. Representation
 - B. Case design
 - C. Checklists & rubrics
- Increased cognitive load during simulated encounters changes the way that students think about, experience, and perpetuate bias

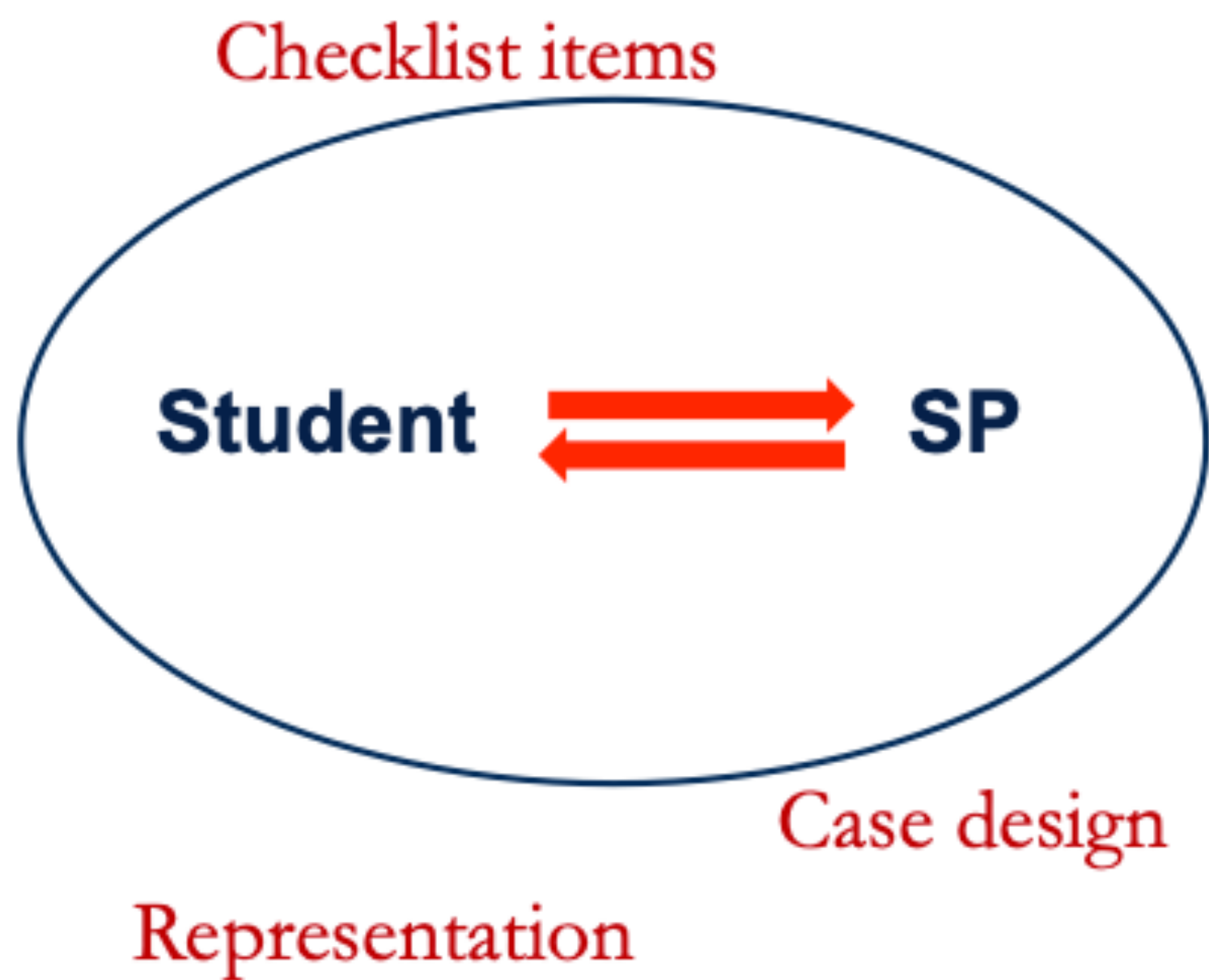


Figure 2. Directions of Bias in Simulated Encounters

Discussion

- Student perspectives are similar to those of SP actors interviewed in a prior study³
- In addition to interventions at the individual level, there are systems level changes that can be made to reduce bias in SP-student encounters

References: 1. Berg, K., Blatt, B., Lopreiato, J., Jung, J., Schaeffer, A., Heil, D., ... & Darby, E. (2015). Standardized patient assessment of medical student empathy: ethnicity and gender effects in a multi-institutional study. *Academic Medicine*, 90(1), 105-111; 2. Berg, K., Majdan, J. F., Berg, D., Veloski, J., & Hojat, M. (2011). A comparison of medical students’ self-reported empathy with simulated patients’ assessments of the students’ empathy. *Medical teacher*, 33(5), 388-391; 3. Fluet, A., Essakow, J., & Ju, M. (2022). Standardized patients’ perspectives on bias in student encounters. *Academic Medicine*, 97(11S), S29-S34.