

POSTER #17

Investigating Mistreatment of Canadian Undergraduate MD Students with Spiritual & Religious Affiliations

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INTRODUCTION. Medical student mistreatment represents an international issue in medical education and training, impacting c.60% of graduating Canadian undergraduate medical students across 2016-19 (AFMC Graduation Questionnaire, 2016-19). While mistreatment definitions vary by institution, the Association of American Medical Colleges defines mistreatment as “intentional/unintentional behavior disrespect[ing] the dignity of others and unreasonably interfer[ing] with learning process[es].” Learning disruptions vary from students regretting entering medicine, program withdrawal, social disengagement, performance decline, burnout, depression, and anxiety. Religiosity and spirituality, two social factors underpinning medical student mistreatment, are often underreported in academic literature in contrast to race, sexuality, and gender identity.

AIM. This project will thus define social structures/programs implemented by the six Ontario medical schools (OMS) to address or prevent religious and spiritual mistreatment of undergraduate medical trainees.

METHODS. An environmental scan extracted student-facing resources, policies, and protocols featured on OMS' websites. The six OMS included in the environmental scan are:

- University of Toronto Faculty of Medicine
- University of Ottawa Faculty of Medicine
- The Michael G. DeGroot School of Medicine (McMaster University)
- Northern Ontario School of Medicine
- Queens University
- Schulich School of Medicine & Dentistry (Western University)

RESULTS. OMS varied in definitions of and interventional/educational resources, policies, and protocols to address spiritual and religious mistreatment. Gap analysis identified limited infrastructure specifically managing spiritual and religious mistreatment.

IMPACT. Data will characterize the landscape and student accessibility of OMS' online spiritual and religious mistreatment resources, policies, and protocols for medical leadership to advance cultural competency within the MD Program learning and teaching environments.