



Surveying Race and Racism in Puerto Rican Medical Education



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Background & Objectives

Intrigued by the way racism is taught and conceptualized within medical education – often teaching to associate diseases with certain races and mentioning race/ethnicity in questions stems without any intentional educational objective – and how the sociocultural context of trainees in Puerto Rico (PR) differs, we were interested in exploring if their experiences reflect the continual bias and discrimination that permeate healthcare and medical education in the continental United States (US).

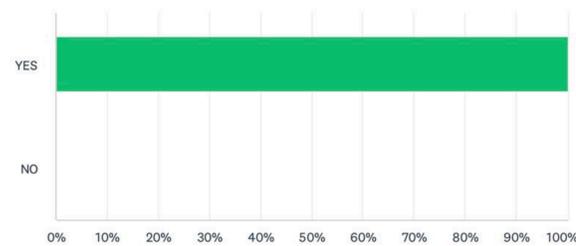
There is evidence of racial and ethnic discrimination in health care. Racial biases and prejudices are often subtle, unintentional and difficult to detect. Although intensive training in paradigms like cultural competency have been used over the past decade to reduce implicit racial and ethnic biases among clinicians, racial/ethnic health disparities still exist at high levels in the United States. While it is widely accepted in the social sciences that race is not a biological category, medical students and residents often learn to associate diseases with certain races. For example, physicians use racial categories as pathological markers (for example, Hispanic – asthma or diabetes) (Tsai et. al, 2016). Moreover, the United States Medical Licensing Examination (STEP 1) often mentions race/ethnicity in a question without any intentional educational objective (Ripp & Braun, 2017). All of this is compounded by genetic research which seemingly has found genetic variation and clustering specific to certain racial/ethnic groups (Jorde & Wooding, 2004). In this sense, the way race is taught and conceptualized within medical education not only affects the foundational training of clinicians across various educational levels, but it influences their identity and the manner in which they interact with colleagues.

While there is a difference between the way Puerto Ricans conceptualize their own racial identity, study after study has shown that blacks are a stigmatized minority in Puerto Rico, that they suffer from persistent prejudice and discrimination; that they tend to occupy the lower rungs of the class structure, and that they are subject to an ideology of progressive whitening (*blanqueamiento*) through intermarriage with lighter-skinned groups and a denial of their cultural heritage and physical characteristics (Seda Bonilla, 1973). While ample scholarship has documented racial discrimination in Puerto Rico against black persons in areas such as education, census, language and employment, among others, this project focuses on its particular intersection with medicine. No study has ascertained whether medical students, residents or physicians' belief racism exists in Puerto Rico's medical field. This study aims to elucidate whether Puerto Rican medical students perceive anti-black racism to exist; whether they have experienced it personally or observed racist behaviors and practices.

Methodology

The project design consist of a quantitative analysis via surveys. A consent form that described and highlighted the study's purpose, risks, benefits and confidentiality guidelines was developed and later integrated and presented in the first page of the survey. The step-by-step nationwide survey was sent across three of the medical schools in Puerto Rico, with a medical student population totaling a little more than 700 across all four years. Starting at our home institution, the Universidad Central del Caribe (≈300p), following with Escuela de Medicina San Juan Bautista (≈240p), and finally Ponce Health Sciences University (≈240p). Due to the nature of the COVID19 pandemic, all surveys were sent electronically and completed online via SurveyMonkey's service; quantitative analysis is provided by the company.

Q1 I agree to participate in this study:



Results

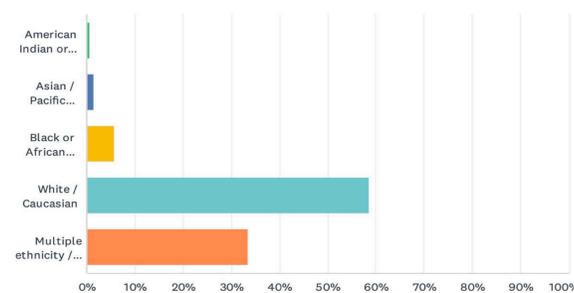
A total of 174 responses were documented from medical students of the four medical schools in Puerto Rico. Respondents were 58% female and 42% male. The age for most medical students ranged between 25–34 years, followed by 18–24 years. The majority of respondents were in their first year of medical school.

Regarding traditional racial categories, as those used in the United States' Census, 59% of participants selected "white". Aside from the traditional racial canons, we asked participants to describe their skin color in their own words. Out of 174 participants, 140 provided an answer. While "white" proved to be the predominant racial descriptor with 51% among respondents, participants also described themselves with "moreno/a", "mestizo/a", "mulato/a", "trigue-o/a", among others, proving that going beyond the *one size fits all* category yields a richer avenue of contextualized descriptors that lessen the conflictive process of racial self-identification in Puerto Rico (PR).

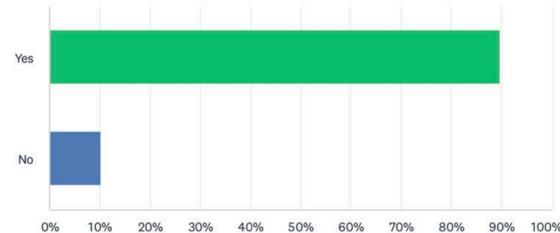
In terms of racial discrimination, 97% of respondents agreed that racism exists in PR, while 35% had experienced it. Interestingly, 90% agreed that racism exists in PR's healthcare but only 18% had experienced it; predominantly at their medical school, followed by clinical rotations.

Results

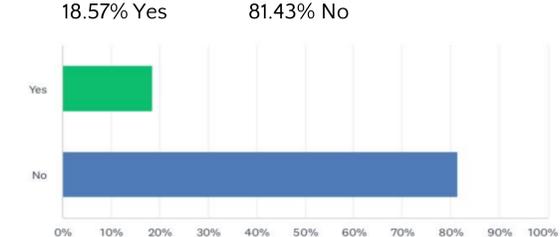
Q Which race best describes you?
0.71% American Indian or Alaskan Native
1.43% Asian / Pacific Islander
5.71% Black or African American
58.57% White / Caucasian
33.57% Multiple Ethnicity or Other



Q Does racism exist in Puerto Rican Healthcare?
89.86% Yes 10.14% No

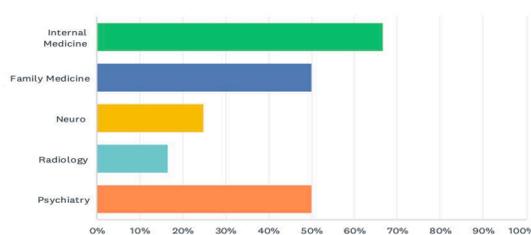


Q Have you experienced racism during your medical school journey?
18.57% Yes 81.43% No



Q In which clinical rotation did you experience racism?

66.67% Internal Medicine
50% Surgery
50% Psychiatry



Conclusion

This study provides an important starting point, being the first to explore the racial demographics of medical students and whether they believe racism to exist in PR's medical field, and whether they are aware of the prevalence of racism in Puerto Rican society.

In terms of impact, medical schools in PR, do not have a solid nor clear racism curriculum. We hope this project can lead to a seminar series or an elective class on in-depth racism. Beyond a scholarly impact, this could inspire new public health guidelines.



References

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