

# DIVERSITY AND INCLUSION



## Microaggressions in Medicine

By Jen Nykiel

In "Microaggressions in Everyday Life," Dr. Derald Wing Sue defines microaggressions as "the constant and continuing reality of slights, insults, invalidations and indignities visited upon marginalized groups." Despite the fact that these casual and often unconscious statements are usually delivered by "well-intentioned, moral and decent" people, the statements themselves can do harm to our relationships with our colleagues, patients, and communities. They damage relations between members of dominant and minority culture.

I am currently a resident in one of the largest cities in the country, at an institution where people are far from unaware of issues related to race, gender, and other forms of identity. Even so, as I go about my day-to-day work, I hear comments that undermine the environment of inclusivity that medicine aims to create: a male attending telling a female resident to "put on your white coat so patients don't think you're a nurse," a male colleague constantly commenting on the appearance of female coworkers, a genderqueer lesbian applicant described as "too edgy."

It is a widely acknowledged fact that hospitals, medical schools, and residency programs are currently struggling with a lack of representation among minority groups, especially at higher levels of administration. When this is the case, it creates additional obstacles to building a more culturally competent workplace. Departmental leaders may not understand the significance of microaggressions, in what they perceive to be an absence of overt and outright discrimination, and out of the belief that theirs is an inclusive program.

Dismissing others' well-founded concerns as illegitimate discourages people from speaking up and silences the very voices we should be hearing more from in academic medicine. We are saying, "You are different and do not belong here." Over time, the experience of being discriminated against—whether implicitly or explicitly—has been shown to lead to increased stress, poor self-esteem and mental health issues. It

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has been argued that microaggressions are actually more damaging than overt prejudice, since they are frequently downplayed or completely ignored, isolating their victims even further.

This is not the type of environment we want to create for ourselves, our colleagues or our patients. If we want to live up to our commitment to fostering wellness in our hospitals and offices at every level, we should first be willing to listen to and learn from one another. A simple comment in support of a coworker, or a willingness to self-reflect when confronted, is the beginning of creating a healthier and more welcoming workplace for everyone. ▀

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