
KEY POINTS

- Microaggressions are categorized into three groups: microassaults, microinsults, and microinvalidations.
- Microaggressions may play a role in increasing the morbidity and mortality observed among certain racial minority groups as well as in people of low socioeconomic status.
- Harmful effects of microaggressions on healthcare providers, such as low quality of life and job dissatisfaction, have been associated with suboptimal care practices, major medical and medication errors, and decreased patient satisfaction with medical care.
- The strategies for addressing microaggressions include engaging institutions further in equity, encouraging everyone to take action as an upstander, and creating institutional accountability.

[Professionalism: microaggression in the healthcare setting](#)

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Current Opinion in Anesthesiology34(2):131-136, April 2021.

doi: 10.1097/ACO.0000000000000966

Consequences of Microaggressions in Medicine

Example scenarios in medicine	Berk's law: consequences of microaggressions ¹⁰
Exclusion from a monthly meeting of colleagues with superior or department chair	Creating feelings of isolation, exclusion, loneliness, and tokenism
No administrative assistance while other colleagues have assistance	Lowering the individual's work productivity and problem-solving abilities
Repeatedly not having a resident or medical student assigned to you	Devaluing the individual's research, scholarship, and teaching contributions
Being asked to provide more letters of recommendation than other colleagues; assuming a female or URM physician is a nurse or maintenance worker	Undermining and questioning the individual's qualifications and credentials
Being labeled as disrespectful by staff or superiors for not using "ma'am" or "sir" when speaking to patients	Subjecting the individual to biased and unfair reviews for performance appraisal, tenure, merit pay, and awards
Being told that only 1 person can apply for a grant and that another faculty member has already been selected	Excluding the individual from grants, research projects, team teaching, mentoring, guest lectures, and professional conferences
Being singled out for comments or asked to lead by colleagues or superiors whenever issues concerning race or diversity arise; given excess responsibilities on department and university committees for diversity	Committing the individual to excess service on diversity, task force, department, and university committees as the face of diversity
Having a suggestion not recognized when presented at a meeting with colleagues but acknowledged when presented a few minutes later by male or non-URM colleague	Resulting in feelings of being ignored, overlooked, unappreciated, underrespected, undercompensated, overworked, misrepresented, and devalued
Faculty, residents, medical students, and physicians experience burnout, depression, and PTSD due to repeatedly experiencing and witnessing microaggressions in the academic setting and workplace	Producing physical and mental health problems, such as depression, frustration, anger, rage, low self-esteem, stress, PTSD, anxiety, substantial weight gain, high blood pressure, and cardiovascular disease
Staring or not turning around to speak when a woman or URM provider walks into the office; overhearing a receptionist say to a patient, "I want to warn you, she is Black"	Creating an unwelcome, hostile, and invalidating climate that is alienating, stressful, polarized, and risky

Abbreviations: URM, underrepresented minority; PTSD, posttraumatic stress disorder.

<https://cdn.mdedge.com/files/s3fs-public/CT107005235.PDF>

Feaster, B., McKinley-Grant, L., & McMichael, A. J. (2021). Microaggressions in medicine. *Cutis*, 107(5), 235-237.



<https://www.rpharms.com/recognition/inclusion-diversity/microaggressions>

CPR

The Racial Microaggressions Reparative Response Model

"I Committed a Racial Microaggression! Now What? Apply CPR!"

Racial Microaggression: Social exchanges in which someone intentionally or unintentionally communicates a negative, derogatory, often stereotypical cultural belief that belittles, dehumanizes, and alienates people of color.

C **P** **R**

Calm Yourself

- Take a **deep breath**. Collect your thoughts.
- Resist** defending yourself.
- Remember this feels scarier than it is.

Practice Humility

- Elevate the harm you caused over your own comfort.
- Take responsibility for your actions.
- Focus on the impact of your words or actions, not your intent.

Repair

- Center the relationship, **not your feelings or reputation**.
- Ask what you can do.
- Accept that repairing the relationship might **take time** - you are just starting the process now.

Responses that do more harm

- "You're just being sensitive."
- "I didn't mean it like that, so you shouldn't be offended."
- "I was just kidding, it's not a big deal!"

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