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Brigham Young University Student Perception of Medical Practitioners based on Gender

Ryan Jury, Alex Hamner, Ben De Jesus, Charity Kemp and Curtis Pearson

Introduction

Gender bias is a problem within the medical field, even to the extent of affecting patients care. At the U of U Medical School in 2001 BYU graduates were involved in gender bias. The female medical students complained of sexist remarks towards their role as a Doctor.

Studies have shown repeatedly that patients prefer a certain type of gender when choosing a physician (Adams 2003). Physician gender attributes also contribute to the type of care that patients perceive they will get (Marshall 2007). Also, the patients perceptions of the physician’s ability determine whether they follow the physicians counsel or not (Bonds 2004). Other research has shown that there is a general bias in the medical field based on the gender of a chosen physician. (Taylor 1994)

We hypothesize that BYU students have gender bias in the way they choose a physician and follow their counsel.

Methods

• We administered the survey through a web based survey software called Qualtrics.
• We used SONA to recruit 233 BYU student participants.
• We measured gender bias through questions regarding care, patient-physician interactions, satisfaction, use of basic health services, demographics, and health status.
• The Physician Gender was manipulated by showing pictures of different gendered doctors while test subjects read the same story. These questions were measure on a Lickert Scale.

Results

The purpose of our study was to find out if there was a gender bias among BYU students in choosing a doctor, listening to their instructions and overall satisfaction.

• The independent variable was the gender of the doctor.
• The dependent variables were responses to positive and negative questions on the survey.
• Negative questions were those that presented the doctor in a negative way.
• Positive questions were those that presented the doctor in a positive way.
• A univariate analysis of variance was used on SPSS 18.0 to analyze the obtained raw data.

Our hypothesis was that a gender bias towards doctors did exist among the population at BYU.

• There was not significance among the positive questions (p<.539) This means participants did not show significant signs of gender bias when answering the positive questions.
• Analysis of the negative questions found a significant trend at the .1 level (p<.057) This suggest there was a trend of gender bias when participants answered the negative questions.
• When covariates, surveyor bias and the gender of participant’s current physician, were analyzed we failed to reach significance at the .05 level (p<.091) This suggests there is a significant trend at the .1 level as well.
• The data seems to suggest that there could be a trend of gender bias towards physicians on the campus of BYU.
• The alternate hypothesis of no gender bias could still be the case. However, the trend of gender bias found on the negative questions seems to present opposing information.

Discussion

• Gender Bias at Brigham Young University (GBBYU), found a minimally significant trend in gender bias at BYU.
• Bias was found both in male and female participants.
• Participants showed preference towards doctors of their same gender.
• The results, although minimally significant, demonstrated that the male participants at BYU generally believe that male doctors can provide better treatment and believe that they are more skilled.
• The Female participants demonstrated a preference towards the female doctors; the female participants were much harsher in their judgments of the performance of the male doctors than they were of the female doctors.
• Gender Bias exists among both genders at BYU.
• The BYU professors have so far been unable to eliminate the gender bias as they believed they could.
• No CVR was administered to improve test questions.
• The survey had High face validity.
• Improve test questions.
• Are other colleges finding similar results?
• Increase validity and reliability of the measure.