A systematic review and meta-analysis on teaching by humiliation (TBH) in medical training: Prevalence and impact on the mental health of medical trainees Luisa Wigg¹, A/Prof Wendy Li¹, Dr Timothy Leow

Background

Previous literature suggests that the culture of medicine can be negative, with certain junior doctors experiencing mistreatment from their clinical supervisors. Teaching by humiliation (TBH) represents one form of harassment, defined as any educational activity intered of the humiliation activity intered of the humiliation. activity intended to humiliate a trainee. TBH results in the victim experiencing humiliation, a deep and dysphoric emotion associated with negative personal evaluation and self-criticism. In turn, TBH may have serious mental health consequences for students. Exploration of this issue is needed to identify areas for improvement in medical education and prevent a possible cycle of abuse.

Research questions (RQ) Methods

7 data bases were searched with MeSH terms and keywords

23 articles included

Meta-analysis performed for RQ1 using 18 studies

> Narrative synthesis performed for RQ2 and 3 using 23 studies

> > prevalence = 55.0% (95%CI

[0.396, 0.695])

Range = 8.0% to 90.8%

 $I^2 = 99.6, p < .001$ Factors contributing to heterogeneity

could not be

meta-regression

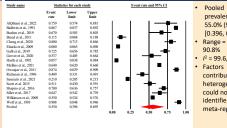
Results: Impact of TBH on trainee mental health

- reduced self-confidence (n=7). Other negative impacts included isolation (n=4), depression (n=3), anxiety (n=3), stress (n=3), burnout (n=3), substance abuse (n=2), suicidal ideation (n=1), distress (n=1), and depersonalisation (n=1).
- 2. Several positive impacts were also identified such as increased motivation to learn (n=2), enhanced resilience (n=1), and improved supervisor relationships (n=1).

Results: Sources and Settings

Sources	Settings
Nurses (n=8) Peers (n=7) Residents (n=7) Consultants (n=5) Surgeons (n=4)	Operating theatres (n=6) Grand rounds (n=4) Clinics (n=2) Patient visits (n=1)

Results: Prevalence of TBH



Conclusion

The results suggest that TBH is a systemic issue in medical education, given its high prevalence and potential for negative consequences, TBH is likely tor negative consequences. IBH is likely allowed to persist in medicine due to well-ingrained structural factors, including a social hierarchy that may protect senior medical staff from complaints of harassment. Fundamental changes to the culture are required to minimise its incidence, thus improving the wellbleine of liminor doctors. the wellbeing of junior doctors. Subsequently, increased efficiency and reduced diagnostic errors can be expected, resulting in better patient care. Fortunately, we are already starting to see improvements in this identified through area, due to increasing awareness.