

Registrar's message—addressing personal biases, racism and discrimination in medical practice



Most people trust that physicians enter the medical profession because they want to help patients, that they will do their utmost to provide the best possible care to their patients, and will make them feel safe and respected no matter who they are or where they come from.

Yet, there is an important conversation occurring right now in health-care settings across the province that suggests many in our profession have internal biases against specific groups that they may not even be aware of. In fact, reports have shown how these internal biases have led to negative health outcomes and even tragedy.

- Report: [First Peoples Second Class Treatment](#)

This conversation about how biases can affect patient care was highlighted recently at the College's Education Day where First Nations Health Authority (FNHA) Chief Executive Officer, Mr. Joe Gallagher, and FNHA Chief Medical Officer, Dr. Evan Adams, called on the medical profession to examine their own actions and behaviours when treating Indigenous patients. Disturbing examples they provided of ineffective care towards Indigenous patients included: physicians spending less time listening to understand the patient's concerns, misdiagnosis, pejorative comments and assumptions, and even refusal to treat.

- Video: [Joe Gallagher – Education Day 2018 Plenary](#)

- Video: [Dr. Evan Adams – Education Day 2018 Plenary](#)

This type of discriminatory behaviour is not only unprofessional, it is prohibited under the BC Human Rights Code, which ensures protection for individuals who are actual or perceived members of certain protected groups. Such groups are classified by characteristics or protected grounds and include race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, and age.

In his presentation, Joe Gallagher stressed that in order to affect meaningful change in the relationship between physicians and Indigenous patients, physicians need to take the time to really understand their patient's history and culture. This includes understanding how Canada's oppressive colonial history and systemic racist policies—even in past decades—have had harmful effects on multiple generations. That intergenerational trauma is still a real and lived experience today. And, as we continue to see in modern society, racism is more than just a vestige of our past—it, too, is very much alive.

As an organization, the College, along with all of BC's health regulators, has pledged its commitment to making the health-care system more culturally safe and effective for Indigenous Peoples. At an individual level, BC physicians can start the process of understanding Indigenous patients and their own personal biases by taking the [San'yas Indigenous Cultural Safety Training](#).

San'yas is a valuable learning opportunity for anyone interested in examining the broader issues affecting Indigenous Peoples attempting to access health-care services in this province, reflecting on their own actions and behaviours, and identifying opportunities for positive change.

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