Resources

GME Guidelines on Managing Patient Harassment
gme.medicine.uiowa.edu/diversity-related-initiatives-gme

Office of Sexual Misconduct Response
osmrc.uiowa.edu/report-problem-0

Office of Equal Opportunity and Diversity
diversity.uiowa.edu/office/equal-opportunity-and-diversity

I-RESPOND TOOLKIT
Addressing patient-initiated identity-based harassment
Establish a culture of openness and respect

Expect that harassment will happen and recognize it when it occurs. “I wish that inappropriate comments and harassment by patients and visitors did not occur. But it does. I want to hear when things like this happen. It’s important that everyone feel safe and supported here.”

Assess the situation

Does the person who was harassed appear uncomfortable or upset? Nonverbal cues should clue you in to whether the person desires help handling the situation.

Respond to the harassment in real time

“Mr. Z, we want to give you the best care and ask that you treat all of our team members with respect.” “We don’t tolerate that kind of language here, let’s keep it professional.” Provide the harassed with an opportunity to leave the room.

IF YOU ARE HARASSED AND DECIDE TO RESPOND...

IF YOU OBSERVE HARASSMENT OF A COLLEAGUE...

Use “I” Statements

“I feel uncomfortable when you comment on my [physical appearance/race/religion/age/etc.].”

Repeat and Clarify Statement

“Help me understand what you mean by that,” or “I heard you say ____. Will you clarify what you meant?”

Emphasize Shared Goals

“I want to give you the best care that I can, but comments like that distract from my ability to focus on your care. Let’s keep our conversation professional.”

Set Boundaries

“Our hospital policy does not allow for discrimination on the base of [race/religion/gender/sexual orientation]. If you continue, I will have to leave the room.”

Patient Actions Rather Than Person

“I felt disrespected when you said that,” is less likely to make a harasser respond defensively than, “You are disrespectful.”

Offer an Alternative

“I’d prefer if you call me ‘Doctor,’ rather than ‘baby’ or ‘honey’.”

Separate Intent from Impact

“I’m sure you didn’t mean to be hurtful when you said that, but it made me feel...”

Don’t Use Humor

Use humor with caution as exaggeration or sarcasm may be misconstrued as reinforcement of prejudice.

Putting it all together (example statement)

“I’m sure you didn’t mean to be hurtful, but I feel uncomfortable when you comment on my [appearance/identity/background]. I want to give you the best care that I can so let’s keep our conversation professional.”

Validate and offer support

“That was a difficult encounter. How are you doing?” “I want you to feel empowered to speak up in a situation like that. You have my support.”

Debrief with individual and team

“I would like to take some time to acknowledge and reflect on how that encounter felt for everyone.” “How do you think the encounter went? How can I/we address the situation differently next time to ensure a better outcome for everyone involved?”

Encourage reporting and documentation of patient harassment

Create a written record of the incident.