

Religion, Spirituality, and the Hidden Curriculum: Medical Student and Faculty Reflections

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Introduction and Background

The hidden curriculum (HC) refers to the process of formation, largely based in apprenticeship, which instills behaviors, attitudes, and values among trainees in tension with the ideals of the medical profession¹. Religion and spirituality play an important role in physicians' medical practice, but little research has examined their influence within the socialization of medical trainees and the hidden curriculum.

Hypothesis/Purpose

To explore the role of religion/spirituality among trainees as they internalize professional expectations and are socialized by experiences embedded in the hidden curriculum.

Methods/Materials

- Semi-scripted, one-on-one interviews and focus groups (N=33 respondents) were conducted to assess Harvard Medical School student and faculty experiences of religion/spirituality and the professionalization process during medical training.

- Focus groups were used for all student interviews) and one-on-one interviews for faculty. Twenty-five students and eight faculty participated in the study.

- Utilizing grounded theory, theme extraction was performed with interdisciplinary input (medicine, sociology, and theology), yielding a high inter-rater reliability score (kappa = 0.75).

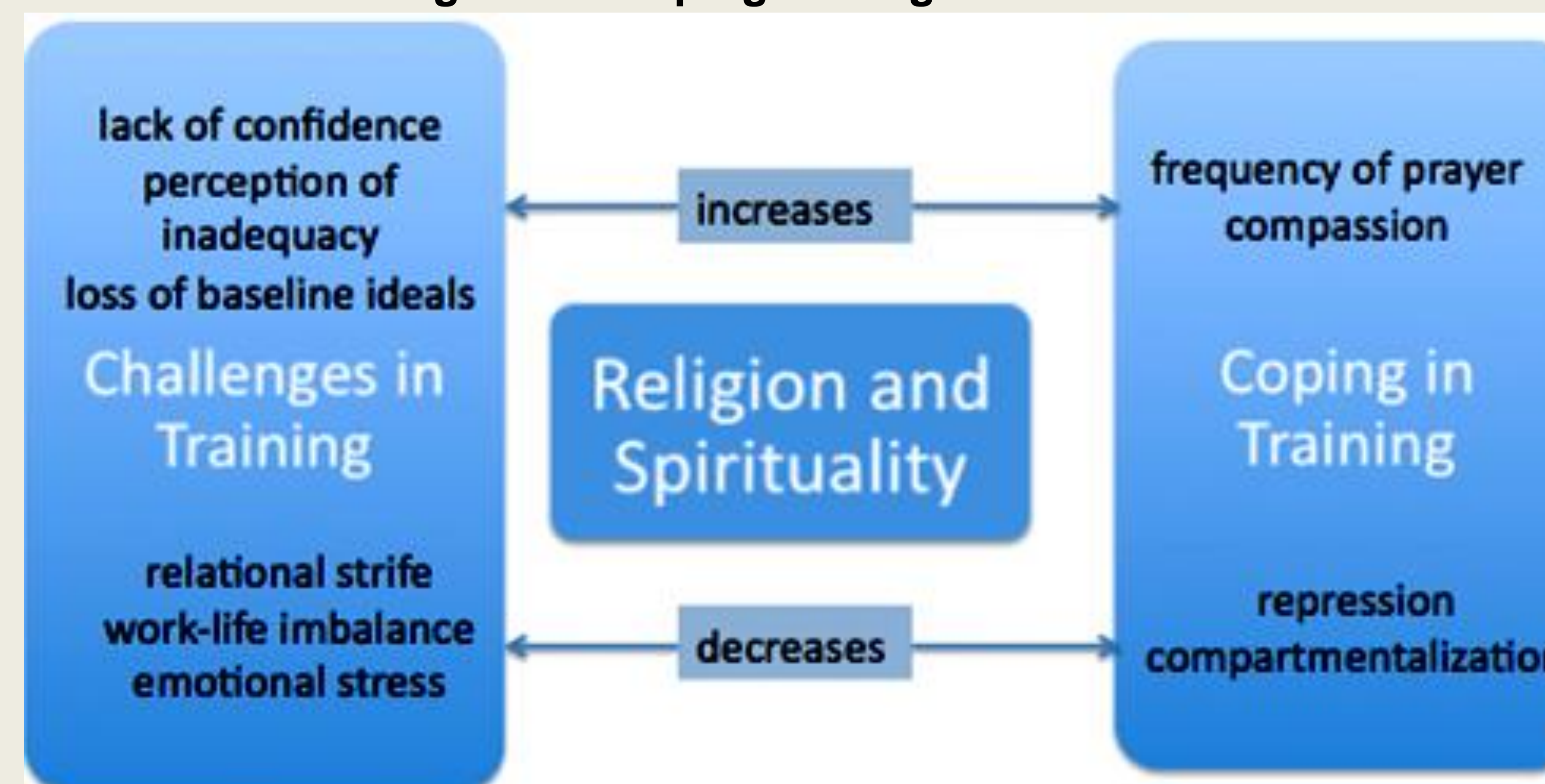
Table 1. Participant demographic information students (n=25) and faculty (n=8) ; total n=33.

	N	%
Total number of respondents	33	
Female	16	48.5
Male	14	42.4
To what extent do you consider yourself a religious person?	33	
Very Religious	7	21.2
Moderately Religious	6	18.2
Slightly Religious	12	36.3
Not religious at all	8	24.2
To what extent do you consider yourself a spiritual person?	33	
Very spiritual	8	24.2
Moderately Spiritual	14	42.4
Slightly Spiritual	6	13.6
Not spiritual at all	5	15.1

Table 2. Themes by Respondent Spiritual Characteristics

	Percentage of Respondents Endorsing Themes	
	Religious/Spiritual (n= 22)	Non-religious/spiritual (n=11)
1. Training Challenges		
Emotional stress	36	64
Loss of compassion	14	45
Work-life balance	18	54
Competing with other students	14	36
Failure to communicate with other team members	0	27
Stress due to process of knowledge acquisition	45	18
2. Coping in Training		
Repression	23	63
Compartmentalization	14	36
Prayer and faith for coping	68	20

Figure 1. Themes- Influence of Religion and Spirituality on Medical Trainee Challenges and Coping Strategies



Results

- Participants who identified as being religious/spiritual were less likely to endorse challenges of emotional stress, loss of compassion, relationship strife, difficulty in maintaining work-life balance.

- Participants who identified as being religious/spiritual were more likely to endorse increased self-doubt, and perceived medical knowledge inadequacy.

- Coping strategies of repression and compartmentalization were more likely to be endorsed by participants who did not endorse religion or spirituality.

Conclusions

- Religious/spiritual trainees may experience added struggle with personal identity and self-confidence.

- Religion and spirituality may be a protective factor against relational discord on teams, work-life imbalance, and emotional stress.

- Religion/spirituality may be an underappreciated source in the formation and sustaining of professionalism within medical education.

Literature Cited

1.Hojat M, Vergare MJ, Maxwell K, et al. The devil is in the third year: a longitudinal study of erosion of empathy in medical school. Academic medicine : journal of the Association of American Medical Colleges. 2009;84(9):1182-1191.

Acknowledgements

We would like to thank the Templeton Foundation and the University of Chicago Program in Religion and Medicine for their financial support.