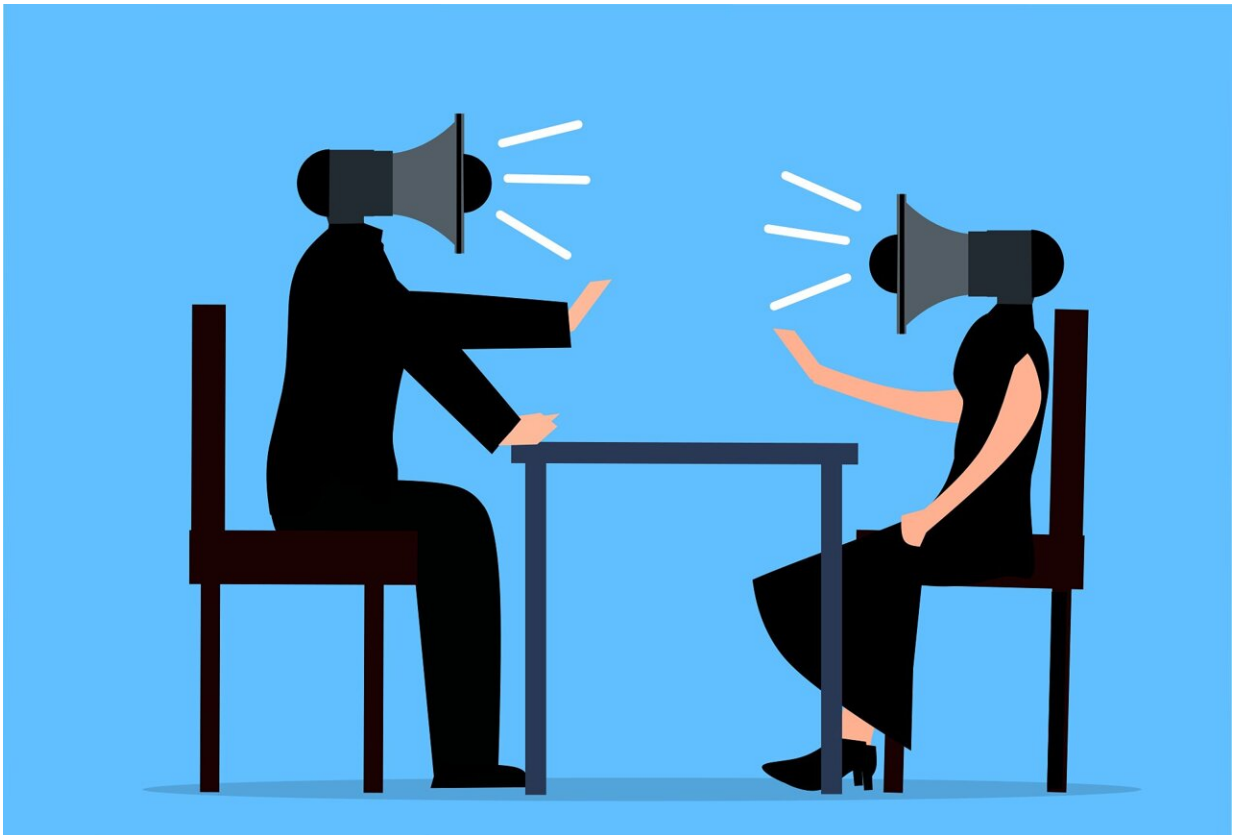


Study shows how rudeness leads to anchoring, including in medical diagnoses

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Have you ever been cut off in traffic by another driver, leaving you still seething miles later? Or been interrupted by a colleague in a meeting, and found yourself replaying the event in your head even after you've

left work for the day? Minor rude events like this happen frequently, and you may be surprised by the magnitude of the effects they have on our decision-making and functioning. In fact, recent research co-authored by management professor Trevor Foulk at the University of Maryland's Robert H. Smith School of Business suggests that in certain situations, incidental rudeness like this can be deadly.

In "Trapped by A First Hypothesis: How Rudeness Leads to Anchoring" forthcoming in the *Journal of Applied Psychology*, Foulk and co-authors Binyamin Cooper of Carnegie Mellon University, Christopher R. Giordano and Amir Erez of the University of Florida, Heather Reed of Envision Physician Services, and Kent B. Berg of Thomas Jefferson University Hospital looked at how experiencing [rudeness](#) amplifies the "anchoring bias." The anchoring bias is the tendency to get fixated on one piece of information when making a decision (even if that piece of information is irrelevant).

For example, if someone asks, "Do you think the Mississippi River is shorter or longer than 500 miles?," that suggestion of 500 miles can become an anchor that can influence how long you think the Mississippi River is. When it happens, it's difficult to stray very far from that initial suggestion, says Foulk.

The anchoring bias can happen in a lot of different situations, but it's very common in medical diagnoses and negotiations. "If you go into the doctor and say 'I think I'm having a heart attack,' that can become an anchor and the doctor may get fixated on that diagnosis, even if you're just having indigestion," Foulk explains. "If doctors don't move off anchors enough, they'll start treating the wrong thing."

Because anchoring can happen in many scenarios, Foulk and his co-authors wanted to study more about the phenomenon and what factors exacerbate or mitigate it. They have been studying rudeness in the

workplace for years and knew from previous studies that when people experience rudeness, it takes up a lot of their psychological resources and narrows their mindset. They suspected this might play a role in the anchoring effect.

To test their theory, the researchers ran a medical simulation with anesthesiology residents. The residents had to diagnose and treat the patient, and right before the simulation started, the participants were given an (incorrect) suggestion about the patient's condition. This suggestion served as the anchor, but then throughout the exercise, the simulator provided feedback that the ailment was not the suggested diagnosis, but instead something else.

In some iterations, before the simulation started, the researchers had one doctor enter the room and act rudely toward another doctor in front of the residents.

"What we find is that when they experienced rudeness prior to the simulation starting, they kept on treating the wrong thing, even in the presence of consistent information that it was actually something else," says Foulk. "They kept treating the anchor, even though they had plenty of reason to understand that the anchor diagnosis was not what the patient was suffering from."

This effect was replicated across a variety of other tasks, including negotiations as well as general knowledge tasks. Across the different studies, the results were consistent—experiencing rudeness makes it more likely that a person will get anchored to the first suggestion they hear.

"Across the four studies, we find that both witnessed and directly-experienced rudeness seemed to have a similar effect," says Foulk. "Basically, what we're observing is a narrowing effect. Rudeness narrows

your perspective, and that narrowed perspective makes anchoring more likely."

In general, the anchoring tendency is usually not a big deal, says Foulk. "But when you're in these important, critical decision-making domains—like medical diagnoses or big negotiations—interpersonal interactions really matter a lot. Minor things can stay on top of us in a way that we don't realize."

To provide additional insights into this phenomenon, the researchers also explored ways to counteract it. Rudeness makes you more likely to anchor because it narrows your perspective, so the researchers explored two tasks that have been shown to expand your perspective—perspective-taking and information elaboration.

Perspective-taking helps you expand your perspective by seeing the world from another person's point of view, and information elaboration helps you see the situation from a wider perspective by thinking about it more broadly. Across their studies, the researchers found that both behaviors could counteract the effect of rudeness on anchoring.

While these interventions can help make rudeness less likely to [anchor](#) people, Foulk says these should be a last resort. The best remedy for the rudeness problem?

"In important domains, where people are making critical decisions, we really need to rethink the way we treat people," he says. "We never really did allow aggressive behavior at work. But we're fine with rudeness, and now we're learning more and more that small insults are equally impactful on people's performance."

And it needs to stop, he says.

"We tend to underestimate the performance implications of interpersonal treatment. We hear 'If you can't stand the heat, get out of the kitchen.' It's almost like being able to tolerate people's treatment of you is like a badge of honor. But the reality is that this bad treatment is having really deleterious effects on performance in domains that we care about—like medicine. It matters."

This is the fourth paper in a string of Foulk's research showing that rudeness negatively impacts medical performance, where the impacts can be much bigger—and much more dire—than the insults, he says.

"In simulations, we're finding that mortality is increased by rudeness. People could be dying because somebody insulted the surgeon before they started operating."

More information: Binyamin Cooper et al, Trapped by a first hypothesis: How rudeness leads to anchoring., *Journal of Applied Psychology* (2021). [DOI: 10.1037/apl0000914](https://doi.org/10.1037/apl0000914)

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