More than a third of UK medical students do not receive sexual misconduct training

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SH training schedule for UK medical universities (n=19). Credit: https://www.rsm.ac.uk/media/5478621/shr1198732.pdf

More than a third of newly qualified doctors are leaving U.K. medical
schools without any education on sexual misconduct specifically relating to the medical profession according to new research led by researchers at the University of Cambridge.

The study, published in *JRSM Open* and based on responses by the U.K.'s 34 medical schools to Freedom of Information requests, shows there is no standardization of training on sexual misconduct across medical universities.

Almost half of medical schools offered no training, or only generalized harassment training that was not specific to sexual misconduct or that was wholly outside the context of being a doctor.

The researchers point to research findings earlier this year that showed training for NHS staff on sexual harassment intervention is lacking, while other reports highlighted 20,000 incidents of sexual misconduct in the NHS, leading to health care workers leaving their professions. In August 2023, the General Medical Council issued new professional standards for doctors which, for the first time, included explicit rules on sexual misconduct.

Medical students, as future clinicians, have a crucial and strategic need for education that allows them to perform a critical role in exhibiting good behavior, and intervening, identifying, assessing and reporting sexual misconduct when they see it happening at work or in wider society, say the researchers.

Lead researcher Dr. Sarah Steele of the University of Cambridge and Jesus College, Cambridge, commented, "Our study shows it cannot be assumed that graduates who are working as junior doctors have received training on sexual misconduct before starting their roles. Considering the magnitude of this issue, universities and professional bodies should urgently address this problem."
The researchers point to serious shortcomings within the health sector in preventing and addressing sexual misconduct, with costs in damages to address sexual misconduct in the NHS exceeding £4 million in the last five years.

In the medical schools where compulsory sexual misconduct training was provided, a wide range of delivery methods were adopted, with workshops and lectures being the main delivery approach.

Dr. Steele said, "With such significant variations in the context and format of teaching, it is important to research which methods and content are most effective in improving these future clinicians' responses to this form of abuse and discrimination.

"The latest GMC professional standards make it imperative medical schools offer this training. Tomorrow's doctors need to be trained properly if we are to put in place the zero-tolerance approach."

According to the study, the curriculum analysis within the study was significantly hampered by several medical schools refusing to provide information on the basis of it being proprietary knowledge. "The idea that public universities offering medical education in accordance with the General Medical Council requirements are in competition, such that they do not share curricular and do not engage in knowledge exchange, is concerning to say the least," added Dr. Steele.
