The poor, in fact, are less likely to sue their doctor
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Contrary to the common perception among physicians that poor people sue doctors more frequently, Ramon L. Jimenez from the Monterey Orthopaedic and Sports Medicine Institute and his team demonstrate that socioeconomically disadvantaged patients, in fact, tend to sue physicians less often. Their work suggests that this myth may exist because of subconscious prejudices or stereotypes that affect thinking and decision making without doctors being aware of it - a phenomenon known as unconscious bias. Dr. Jimenez and his colleagues' work is published online in Springer's journal, *Clinical Orthopaedics and Related Research*.

Some physicians believe that, as a group, low-income patients tend to sue their doctors more often than other patients. This mindset has potential negative effects on the doctor-patient relationship, including some physicians' reluctance to treat poor patients, or treat such patients differently from other patient groups in medical care terms.

Jimenez and team reviewed medical and social studies looking at the differences in litigation rates, and related medical malpractice claims, among socioeconomically disadvantaged patients compared with other groups of patients. Their analyses show that, in reality, low-income patients actually sue their doctors less often than other patient groups, in part because of a more limited access to legal resources and a payment system in medical malpractice claims which requires an advance on funds to litigate the case.

The authors also highlight how physicians may have an unconscious desire to avoid treating poor patients out of concerns about financial reimbursement. Such physicians might consciously or unconsciously presume poor patients are more likely to sue, as an excuse or way of avoiding the presumed difficulty associated with collecting payment from such patients. In this situation, the doctor's unconscious mind can trick him or her into behaving in an undesirable way - a process known as unconscious bias.

The researchers also argue that culturally competent care, promoted by the American Association of Orthopaedic Surgeons Diversity Advisory Board, is an effective means to overcome unconscious bias. For example, many patients perceive that they are not treated appropriately, or with respect, because of inadvertent mistakes made by providers who are not familiar with their culture. They can, as a result, turn away from the healthcare system, resulting in disparities in care.

Jimenez concludes: "Helping doctors to become more culturally competent i.e. able to treat or relate better to a patient from a different race, ethnicity, sex, socio-economic status or sexual orientation, may help overcome these misperceptions. In addition, improving education and training for the delivery of culturally competent care, and empowering patients to play more meaningful roles in their healthcare decisions are proven strategies that can positively impact health disparities, the quality of medical care, physician satisfaction, and the incidence of medical malpractice litigation."


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