



Department of

**Family Medicine &  
Community Health**

# **Exploring Emergency Department Racism**

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## **Mixed Methods Research Lab**

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UNIVERSITY of PENNSYLVANIA

**Protocol Title:** A Patient-Centered Approach to Identify and Explore Experiences of Racism in the Emergency Department OR Equity in the ED

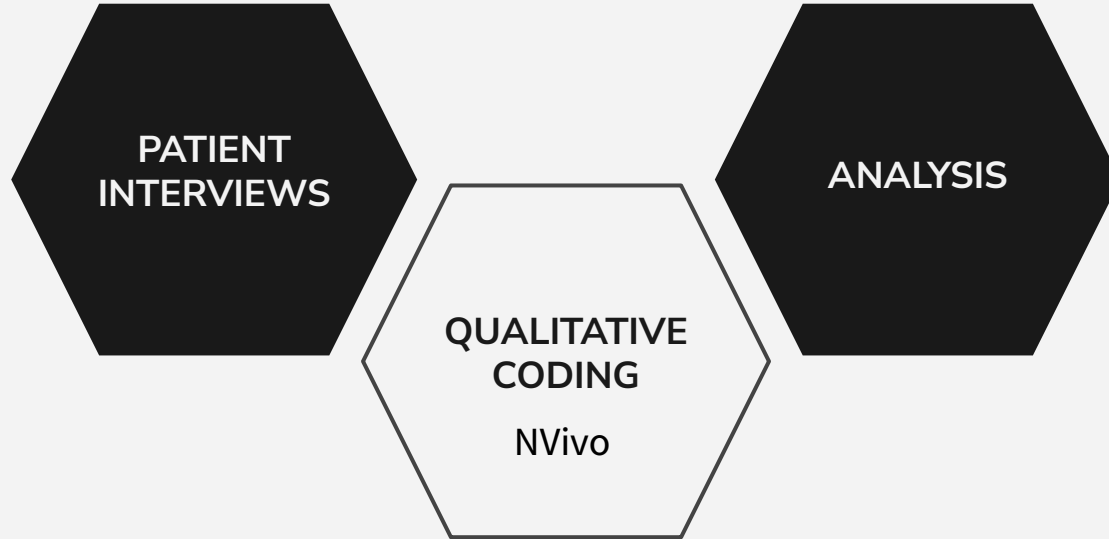
**PI:** Anish Agarwal

**Significance:** To address racism in healthcare, it is important to first understand the experience of POC patients within the healthcare system

# STUDY AIM

The objective of this study is to investigate Black patient perception of racism that occur in the ED to instruct institutional change

# METHODS



# CODING SPECIFICS



# CODEBOOK



## DISMISSIVENESS

Any mention of perceived dismissiveness by providers in the Emergency Department



## SEEKING VALIDATION & OBJECTIVITY

Any mention of wanting outside validation of experience with racism in Emergency Department. Along with any supporting info (ex. Having a doctor in the family)



## PAIN & PAIN MANAGEMENT

Any mention of pain from patients, pain medication, and how/if Emergency Department HCPs responded

*“seeking health care for a Black person is a roll of a dice all the time...Is it bad enough that they'll treat my condition serious, or should I wait until it's bad enough that they have to. That's a terrible way to live and that's how we live. We show up in the ER, because everything else gets dismissed. And so it gets bad enough that it's no other choice until we have to get treated and it's terrible.”*

*“I feel he was just passing me off. I don't know if it's he was just passing off what I said, because he didn't think that my pain was serious. And I don't know why he thought my pain wasn't serious. And they say that most times black women aren't taken seriously. So I don't know if that has anything to do with it, but it is just like they say that most times we aren't to be believed with our pain.”*

# PRELIMINARY ANALYSIS



**Future**

FOR THE PROJECT



# LESSONS LEARNED

- Qualitative research can take a lot of time
- Different qualitative skills
  - Cleaned transcripts
  - Sat in on interviews
  - Helped develop other codebooks
- Future perspective

# SPECIAL THANKS!

Dr. Peter Cronholm

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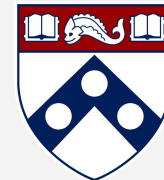
The SUMR Program

Dr. Matthew  
Kearney



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