AllyTalk: An Interactive Training to Increase Ability to Interrupt Microaggressions

Objectives: On completion of this session the participants should be able to

- 1. Utilize The 4D's framework for addressing microaggressions.
- 2. Express increased confidence and likelihood of interrupting microaggressions.
- 3. Practice using direct language to interrupt microaggressions.

Purpose: Microaggressions disproportionately add to pressures that students from groups underrepresented in medicine face and subsequently adversely affect performance, grades, and overall evaluations. When microaggressions are addressed, students feel less threatened and less isolated.1 Faculty often do not speak up due to discomfort in being unsure of words to use in directly addressing the situation, yet silence is seen as an endorsement of this behavior and ultimately sustains a culture of discrimination3,4. As medical educators, it is important to develop a personal skillset for addressing microaggressions to create a safe environment for all learners to succeed and to model upstander behaviors for the next generation of physicians. The purpose of this training ("AllyTalk") is to increase participants' preparedness and confidence in navigating microaggressions by providing concrete skills for interrupting microaggressions and practice being an upstander.

Methods: AllyTalk is an hourlong training session. The training was piloted at a large, academic medical center with two groups including palliative care providers (chosen for their advanced communication skills and expertise in navigating difficult conversations), school of medicine stakeholders, and diversity, equity, and inclusion (DEI) experts. Participants played a game using cards with examples of The 4 D's (Direct, Distract, Delegate, Debrief) framework for interrupting microaggressions with specific phrases to respond to examples of microaggressions. Participants then took part in rapid-fire roleplay scenarios with the opportunity to try different phrases and "pause" as needed to try new skills when they feel stuck.

Results: Thirty-one people participated in the initial pilot training; 83% female; 21% identified as Asian/Pacific Islander, Black/African American, or Hispanic/Latinx. Participants completed 3 surveys: pretraining, immediate post-training, and a 4-month follow-up regarding confidence and likelihood of interrupting microaggressions using a 4-point Likert scale. Participants reporting "somewhat" and "very" ratings of confidence and likelihood to intervene in microaggressions increased from 32% to 86% and 61% to 86% respectively. At 4-month follow-up, increases in confidence and likelihood to intervene were sustained (83% and 83%). Limitations include low response rate to 4-month follow-up survey (58%).

Conclusions: Without the proper communication training, upstander conversations tend to be avoided. A curriculum that focuses on developing communication skills to interrupt microaggressions is essential.3 AllyTalk is unique in providing concrete ways to speak up, utilizing rapid-fire roleplay focused on disrupting microaggressions in-the-moment in a one-hour training. The AllyTalk pilot shows that this method of interactive game play and roleplay practice increases confidence and likelihood of interrupting microaggressions. The next steps for this training will be disseminating it in different specialty departments across a large, academic medical center campus.

References: Bullock et al; Sue et al.; Acosta et al.; Puri et al.