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The gender biased hidden curriculum of clinical vignettes in undergraduate medical training

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O.O.12.6**Drug safety perception in China: the role of media exposure and past healthcare experience**

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Individuals' perception of medication safety affects their medication adherence, and through adherence their health. A person may reject a doctor's recommendation to take antibiotics if they believe antibiotics are not safe. Media and personal experiences shape individual judgments. Misleading online information may damage people's trust in drugs, see Covid-19 vaccine. The experience of adverse events can harm people's confidence in healthcare. Will unfavorable experience of healthcare in general affect drug perception? Will one effect moderate the other? We barely know that.

Data from HINTS-China 2017 contains 3090 adults. Drug safety perception was indicated by drug safety status quo (The current state of drug safety is good) and drug safety amelioration (Drug safety has gradually improved in recent years) with 5-category scales from strongly disagree to strongly agree. Media exposure was divided into traditional media (4 items) and the Internet (8 items, frequency measure, averaged); healthcare experience asks respondents satisfaction with received healthcare. We applied a multiple linear regression.

We found weight-loss pills, antibiotics and vaccines were perceived the most unsafe. Besides, traditional media exposure was positively associated with drug safety status quo ($\beta = .256^{**}$) and amelioration ($\beta = .136^{**}$). However, Internet exposure significantly damaged people's perception of drug safety status quo ($\beta = -.165^{**}$) and showed potential negative impact on drug safety amelioration ($\beta = -.073$). Satisfaction of healthcare services was also correlated with drug safety status quo ($\beta = .265^{**}$) and amelioration ($\beta = .189^{**}$) positively.

Our study draws attention to how Chinese people's medicine safety perceptions are shaped by media exposure and healthcare experience. Favorable healthcare experience contributes to better medicine perception. The contrary impacts between old and new media is consistent with previous studies. This indicates drug and vaccine communications should exploit traditional communication channel and address negative perceptions on online media to promote appropriate uptake.

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DOI: <https://doi.org/10.1016/j.pec.2022.10.181>**14:15 - 15:45****Orals: O.18 Research on communication training****O.18.1****The gender biased hidden curriculum of clinical vignettes in undergraduate medical training**

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Background: Clinical vignettes are a widespread tool in medical education and are known to participate in the hidden curriculum. Earlier studies showed that other elements of the hidden curriculum convey gender stereotypes. Our research aimed to identify to what extent the description of men and women in clinical vignettes in medical education contains gender biases or stereotypes.

Methods: We used mixed quantitative and qualitative Methods: to analyse all clinical vignettes found in the teaching and evaluation material of pre-graduate internal medicine, paediatrics and psychiatry at the Geneva Faculty. A quantitative analysis of socio-demographic and gender-related characteristics was performed, and chi-squared tests investigated the association between categorical variables. Qualitative content analysis followed with a code list elaborated by group consensus, based on a mixed inductive and deductive methods.

Findings: 2359 vignettes were identified, of which 955 met inclusion criteria (at least 2 patient's characteristics and no duplicates). Male patients were slightly more represented, while profession, relational status or children were mentioned slightly more often in female patients. Patients profession type showed a strongly gendered distribution, as did the family caregiver role. Qualitative results showed further evidence of stereotyped gender roles and gender expression. Distribution of healthcare professionals was also gendered with male physicians and female nurses and assistants being the norm.

Discussion: Our study reveals that the clinical vignettes used in education and evaluation materials in undergraduate medical education in Geneva convey a gender-biased hidden curriculum, which can negatively impact patient care and undermine equal opportunity measures for men and women. These results advocate for an active revision of the content and the form of clinical vignettes used in undergraduate medical teaching and evaluation using a gender lens. Based on rare gender neutral or gender transformative examples found in our study, we propose practical guidelines for writing non gender-biased clinical vignettes.

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