Here Falls the Shadow:

The Gap Between What We Teach and What They See-Moving From the Darkness of the Hidden Curriculum Into the Light of Organizational Culture Change

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Objectives

• Define the **hidden curriculum** and contrast it with the **formal, informal, and null curriculum**

• Describe the **impact** of the hidden curriculum on students, residents, faculty, and patients

• Explain how understanding the conflicts created by the hidden curriculum can unmask **unprofessionalism as a systemic** vs individual problem

• Identify instances of the hidden curriculum by “**unlearning to un-see**”

• Discuss the **challenges** to achieving meaningful organizational culture change and **potential ways forward**
"Between the idea
And the reality
Between the motion
And the act
Falls the Shadow

- T.S. Eliot, The Hollow Men
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What is the hidden curriculum?
The hidden curriculum

“That which the school teaches us, without, in general, being aware that it is being taught” (Conyers, 1972)

Organizational culture “forms an ethos in which learning goes on, and it includes such things as the architecture of the building; the power differentials between the players; and the messages about who or what is cool or valued, including what gets included and left out of awards ceremonies, who gets to be chief resident and why, who gets paid the most, who really controls the dean’s budget versus who does the menial jobs, who and what types of behavior are tolerated…This space is neither formal nor idiosyncratic, but it does send messages to community members.” (Hafferty, FW, & O’Donnell, JF, 2015)
Types of curricula

**Formal**
- Explicit
- Intended
- Written

**Informal**
- Happenstance/on-the-fly
- Questions
- Hallway
- Role modeling

**Hidden**
- Implicit
- How things work around here
- Org culture
- Underlying group assumptions

**Null**
- What is left out
The hidden curriculum is:

- Always hidden
- Everywhere
- Complex
- Harder for insiders to see
- Not always bad
- Hard to change, but important to address
Pitfalls/ misuse of the term

**Scapegoat**
For any educational experience that doesn’t work out as planned

**Hidden Agenda**
Hidden curriculum does not involve guile or overtly malicious intent, although it is often interpreted that way

**Tool to Wield Power**
Using the concept of “addressing the hidden curriculum” to actually reinforce the hidden curriculum
■ Malpractice, number of patients
■ Disparaging remarks about health team members, other students or residents
■ Failing to take time for family or self
■ Ignoring patient concerns
■ Skipping mid-rotation evaluations
■ Over or under-glorifying the Shelf, USMLE and CREOG in-training exams
■ Being rude to patients or talking negatively about patients

Positive Influences or Messages
■ Expressing satisfaction with patient encounters
■ Professional and friendly interaction with staff, including clerical workers
■ Integration of your practice and home life,
“I trust absolutely no one in administration at my school…I still go to them for the stuff they want me to, but the real purpose of 90% of those meetings is just to establish a paper trail and play the role of ‘good student who goes about things properly’. I never disclose anything they could use against me. As they talk, I nod and smile and take a few notes that I'll ignore once I get legitimate info from a fellow student or redditor.”

“I'm Asian and have constantly been assumed to be quiet and reserved in classroom settings, even when I do contribute to discussions. At times, I feel that the only way to overcome is to over-participate to compensate for this bias from my facilitators/attendings.”

“A lot of [the hospital] is just a culture of abuse, and no tolerance for the weak. Its a profession where everybody wants to ego trip and not many people are laid back. Just doesn't fit me I think.”
“Constant stress lurking under the surfaces, nasty resident-nurse relationships, nastier resident-student relationships, overworked team, pervasive "stop thinking" culture, toxic environment. Can't speak for other institutions but mine was bad, man.”

“I find that people react much better to me when I do put more effort in, as long as I put the effort into natural-looking makeup. On rotations where I didn't wear any makeup, I noticed a real difference in the way preceptors would treat me vs my classmates. Nothing overt or mean or reportable, just little stuff. People are friendlier, you get better opportunities, more attention, less-critical feedback, etc.”

“Don't show weakness or you'll be eaten alive.”

“If someone with MD after their name in your clerkship asks, the only truly safe answer is, you don't know what you're going into as a specialty and are still deciding.”

“If your school has PBL, the only socially acceptable way to participate is to chill. No one is ever prepared for these sessions because everyone is behind, so if you're somehow up to date with the class material that day you will end up being a gunner you stick out like a sore thumb.
“Working over 80 hours is our fault. If your schedule violates ACGME standards, the resident is questioned.”

“Learning how to deal with oppression/discrimination is a skill and a demonstration of professionalism (and not a structural issue that leadership needs to address); work-life balance means wellness occurs exclusively outside of work (and if you don't have time outside of work, well, too bad!); residency is the time to learn your clinical skills, whereas addressing social determinants and dismantling power is something you can pursue post-residency; vulnerability is at odds with professionalism; my skills as a (male) provider is because I'm ‘smart’ whereas my female colleagues who I find to be even more brilliant are attributed to being ‘hard working’ (and not ‘smart’).”

“That OHSU is an evil corporation that wants to use residents until they are completely ruined in order to make money while putting on a show that they care about wellness. That hierarchy is more important than raising safety concerns. That pay for performance means thousands of clickey boxes.”
Suicide in healthcare
What is the impact of the hidden curriculum?
Students

- Cynicism, scorn, and hypocrisy
- Gamesmanship
- Success = navigating this gap
  - Harder for minorities
- Band together against what they see as the malevolent intentions of the faculty and the institution.

(Snyder, 1971)

Photo: David Werbrouck, Creative Commons
Residents

- Values learned from each other
- Interprofessional relationships
- Internal conflicts when forced to choose between 2 important values
- Burnout, cynicism


Photo: David Werbrouck, Creative Commons
How does the hidden curriculum affect faculty? Staff? Patients?
Consider:

- Architecture
- Organizational structure
- Administrative burden
- Representation
- Who gets what funding/resources
- Implicit messages to patients
- If you aren’t feeling uncomfortable/defensive, you aren’t looking hard enough
How can understanding the hidden curriculum unmask unprofessionalism as a systems problem?
What if we viewed professionalism issues as a systems problem, in the way we now view patient safety issues?
How can we unlearn to un-see?

Use it when you want to divide your presentation in different sections.
“Culture of No Culture”

“If the hidden curriculum is situated in the social world that we inhabit, right there and observable everywhere around us, then in what sense (and from whom) is it actually hidden? …How have people learned to unsee certain aspects of the social and cultural structures all around them?”

Hafferty and O'Donnell, 2015
What are the challenges and pathways to change?
Challenges:

- Most efforts are focused on the individual, which is the least effective method
- Culture change is hard on many levels
- Governance structure can hinder dedicated leaders

Pathways forward:

- Listen to newcomers/outsiders
- Acknowledge that the task is arduous but all efforts have the potential for meaningful change
- Rigorous refusal to accept “that’s the way it is” as a stopping point
- Comfort with discomfort and challenge
Between the conception
And the creation
Between the emotion
And the response
Falls the Shadow.

- T.S. Eliot
References


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