

MEDICAL STUDENTS CONTINUE TO BE INVOLVED IN ETHICALLY AND LEGALLY CONCERNING INTIMATE PATIENT EXAMINATIONS

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NATIONAL and international studies demonstrate that medical students continue to be involved in legally and ethically concerning intimate examination practices despite concerns being raised about this for many decades, according to the authors of a Perspective published today by the *Medical Journal of Australia*.

Associate Professor Paul McGurgan from the University of Western Australia, and Dr Katrina Calvert, Director of Postgraduate Medical Education at the King Edward Memorial Hospital in Perth, wrote that there was "no legal mandate for written consent to be obtained for medical student involvement in intimate examinations or procedures".

"Although Australian law is clear on the importance of consent and the implications of this regarding assault, current Australian medical governance makes some assumptions about medical school policies for intimate examinations and allows discretion regarding the requirements for written consent," McGurgan and Calvert wrote.

Other countries have introduced specific ethical codes and guidance in recognition that medical students may be involved in unconsented intimate examinations.

"The United Kingdom and New Zealand have similar ethical codes to Australia," McGurgan and Calvert wrote.

"The UK also provides detailed guidance on good medical practice for students.NZ is the most prescriptive with specific information regarding medical student involvement in patient care documented in a national consensus statement and their Code of Rights."

The clinical environment the medical student works in was crucial to the nature of their involvement in intimate examinations, the authors wrote.

"An individual's likelihood of engaging in a behaviour is influenced by three factors: their attitudes towards the behaviour, their perceptions of the social norms, and their perceived ability to perform the behaviour," McGurgan and Calvert wrote.

"Although contemporary medical education and ethics actively promotes patient autonomy and informed consent, students can unfortunately find themselves working in what has been described as the 'weak ethical climate within the clinical workplace'.

"Most medical education and psychological research indicates that students are strongly influenced by the cultural norms of their workplace and their supervisory relationships.

"The most common problems with medical student involvement in intimate examinations and procedures are not aspects of rogue student behaviour, but continue to be students



struggling with the 'the incongruence of what is taught ... and the reality and expectations of clinical practice', with students narrating specific instances of being asked by their supervisors to conduct or remain present during intimate examinations without clear and/or adequately informed patient consent."

Although policies, processes and pedagogy are important, anyone supervising medical students in clinical settings should "critically examine their clinical workplace cultures and consider whether they adequately protect both patients and students".

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